

SANATORIUM

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The earliest sanatoriums in Europe date back to ancient times, with notable examples such as Bath in England or Vichy in France. Bath, established by the Romans in the 1st century AD, utilized natural hot springs for therapeutic purposes. Vichy, also known since Roman times, became famous for its mineral-rich waters. In Poland, treatment visits to spa towns have been known since the 13th century, when the first thermal springs were discovered in Cieplice.

Sanatoriums started to gain particular popularity in Europe in the early 19th century. With the advancement of medicine, the invention of X-rays, and modernist changes in architectural approaches, interest in sanatoriums grew among both architects and, consequently, patients. As Colomina (2019, p.16) summarized:

As medical representations changed, so did architectural representations. In the twentieth century, the widespread use of X-rays made a new way of thinking about architecture possible. Modern buildings even started to look like medical images, with transparent glass walls revealing the inner secrets of the structures.

The causes of poor health began to be sought in architecture, leading many architects to become interested in the healing possibilities of architecture. „Take Le Corbusier, the opening pages of *Vers une architecture* give his "diagnosis" of the state of architecture, condemning the traditional house for producing the debilitating effect of tuberculosis ("consumption").”(Colomina, 2019, p.19)

During the interwar period, architectural thinking underwent significant changes alongside the reconfiguration of societal systems. This close relationship between architecture, urban planning, and various societal factors like disease and war is evident in the works of Le Corbusier and his contemporaries from that time. Modern architecture, developing in the spirit of minimalism and the rejection of ornamentation, also aimed to serve as a therapeutic mechanism. Holistic approaches to architecture primarily manifested in specially designated sanatorium buildings, „modern architecture a model for health, a mechanism for reconstructing the human”. (Colomina, 2019, p.49)

In Western Europe, sanatoria were described as a "cross between a modern hotel and a modern therapeutic centre," (Colomina, 2019, p.80), catering primarily to the wealthiest individuals seeking remedies for various ailments, mainly nervous disorders. In Eastern Europe, after the end of World War II, sanatoriums primarily served as locations for the rehabilitation of workers' health. At that time

in Eastern Europe, sanatoriums became public property, and the health care system underwent collectivization, which opened the possibility of public access to spa treatment.

Since then, sanatoriums have become highly popular; everyone could go there as these centres were state-run. Throughout the entire communist period from 1944 to 1989, and until the healthcare system reform in 1998, they were fully paid for by the government. This accessibility meant that trips to sanatoriums became ingrained in Polish culture and continued to function many years after the fall of communism. „The word 'sanatorium' comes from late Latin 'sānātōrius,' meaning healing, to cure, restore to health” (Merriam-Webster, n.d.). However, during the communist era, sanatoriums were not only for physical health, but also as a way to relax, change the scenery or make new social contacts.

Just as in the West, in the East, sanatorium buildings were also constructed to meet engineering and architectural requirements. However, under communism, the architectural function was not individualistic; it served a rule-based missionary role – as an agent of the state, a hand of the state, working for the greater good. In the East, although the official function was healing both the body and the mind, reasons for visits differed from those in the West and were closely related to politics and reactions to the system in which we lived. The popularity of stays in sanatoriums extended beyond the working class to include their children, enabling adults to send their kids across the country for weeks. Such a change provided a welcome escape from the mundane routine, offering a refreshing alternative for both adults and children. Nonetheless, from the children's perspective, this often led to feelings of separation, powerlessness, and the challenge of adapting to the unfamiliar sanatorium environment.

Living in Poland during the communism era was marked by a sense of stagnation and limited freedom. Traveling abroad was restricted; individuals were only able to travel within their own country or, at best, to another communist country. Conformity was encouraged, and individuality was often suppressed. Change was stifled, with little room for dissent or innovation. Despite this, communities often found solace in shared experiences and solidarity, creating a sense of resilience amidst the constraints of the regime. The social function fulfilled by sanatoriums was a crucial aspect. Their existence stemmed from the absence of communal spaces in dysfunctional cities, lack of funds among people, and the need for entertainment or escape. They served as a means to treat the consequences of a system in which individuals were simultaneously paid by the state. Shared rooms, regular dances, and group walks provided unique opportunities for shared experiences and forming lasting relationships, which were often hard to come by in daily life. This willingness to change and the opportunity to

utilize health reasons as a catalyst led to a trend of health tourism that continued long after the fall of communism in 1989.

Treatment was linked not only to the sanatorium offerings but to the entire surrounding infrastructure. Ciechocinek, Rabka Zdrój, Krynica Zdrój, Busko Zdrój and many other spa towns were at the same time, entertainment centres, full of restaurants with exotic food, pump rooms and parks, as well as important social centres in the country. „One characteristic of sanatorium treatment is that therapeutic procedures take place not only within one building but across the entire spa area, including sanatoriums, mineral water drinking halls, natural healing facilities, and spa parks.” (Madeyski, 1979, p.16). Many new sanatoriums have been built and those existing before the communist era have been transformed. Accessible to all, not only the elderly, but also to whole families and children. Sanatoriums for children were seen at the time as something akin to summer camps. Small patients could stay for a short term 3 weeks or long one 7 weeks.

In the 90s in Poland, sanatoriums remained highly popular. I stayed in a sanatorium six times between 1992 and 2001. My first stay was when I was 4 years old, accompanied by my mother, grandmother, and sister to Rabka Zdrój. I hardly remember anything except for eating warm ice cream and contracting dysentery disease. When I was 6, I stayed in Szczawnica Zdrój with my mother for the second time. In December 1995, she sent me alone for the first time. I was 7 years old. I did not want to go; however, I had no choice. I had to spend 7 weeks in the Krystyna Sanatorium in Rymanow Zdrój.

From the perspective of a little girl deprived of the opportunity to make decisions, the perception of the interior of the building and the functioning of the sanatorium system probably deviates somewhat from medical expectations and the European architectural model described by Alvar Aalto. According to Smith, J. (2010, p.102):

The sanatorium model was characterized by an innovative approach to designing healthcare spaces. Aalto emphasized natural light and harmony with the surrounding environment, aiming to facilitate the process of recovery in his sanatorium designs. The interiors were spacious, with careful attention to ergonomic furniture layout, utilization of natural materials such as wood, and the functionality of the space.

Krystyna was not originally designed as a sanatorium but was an adapted villa intended to meet the functional requirements of a health resort. However, it operated during the heyday of sanatoriums in Poland and serves as an example of the transformation from a historic villa to a health resort meeting the requirements of the communist party, and finally to the image of decline of both the mentioned regime and the entire building, which today remains in ruins.

I remember this small village surrounded by forest and mountains. Today, I can say that I associate the location of the building with Kubrick's movie, 'The Shining' - a building cut off from the world with an uncanny atmosphere. On the one hand, in 1995, Rymanów Zdrój, due to the very poor state of the roads and the lack of highways in Poland, was indeed cut off from the rest of the country, and it took nearly five hours to drive 200 km. This distance was even greater in the children's perceptions, and staying in such a place was indeed like an endless story full of repeated forms of treatment marked by slowly flowing days, particularly long-lasting during the winter period.

There is no way to find photos from that period from inside Krystyna; however, the building itself can be seen on almost all the postcards from Rymanów Zdrój. Krystyna was the first brick building in the area, built between 1890 and 1910. The building was constructed by the Potocki family, who were also the owners of Rymanów. „In 1876, the Potocki's son Jozef discovered a spring of healing waters, which initiated the creation of spas in the area.” (Rymanów Zdrój, n.d.). From 1960, the building functioned as a kindergarten. In 1966, it was converted into a children's sanatorium. As Medeyski (1979, p.302) writes:

The individual wards should be designed to allow for complete separation and to be self-sufficient to some extent, i.e. to have separate sanitary facilities, rooms for the medical staff, common rooms and separate dining rooms for the children, isolation rooms, etc. The bedrooms will accommodate between 4-6-12 children because of the easier possibility of supervision by the staff. In principle, children will not be allowed to stay in them apart from sleeping, which implies the need for a sufficient number of day rooms. A normal school is organised in the sanatorium for children of school age.

How the building looked from the inside and rooms such as the nurses' station, dining room,

common room, bedrooms, or treatment rooms only remain for me to describe from memory, spanning over 20 years. The only photos I have been able to find are from websites describing explorations of abandoned facilities and show the ruins of what remains of the places I spent weeks in – ruins similar to what remains in my memories.

I still remember the strange atmosphere of spirituality and unfamiliarity in these places, with barred windows and an owl passing the time sitting on a branch. The peculiar smell – outside and inside the buildings. The smell of mountain air with a high content of iodine and essential oils from nearby forests. Inside, this smell mixed with the smell of the old building, chemicals used for cleaning, and medical substances.

Spacious, long corridors with rooms on two sides and light streaming in from those with open doors. Corridors led to unknown rooms where I did not know what lay inside. Though most looked identical from the outside, I only recognized my own. As far as I remember, we were not explicitly told we could not visit other kids, but I do not recall venturing into any room other than mine. They all seemed the same yet strangely foreign, 'not mine'. Instead of visiting each other in the rooms, we had common areas called Świetlica.

The Świetlica had around 30m², but as I was small at the time, it is hard for me to gauge its size accurately. I found some photos on abandoned buildings websites, and I am convinced that the space in the chosen photo was the common room. I could even mark where the toy shelves were and where the sitter's desk was located. Since it was winter, the door to the garden was always closed. The common room could accommodate around 20 children, serving as a space for spending time together, but I often found myself playing alone in a corner. While I do not recall the specific toys they had, I do remember spending most of my time by myself. From my perspective, the common room did not serve any special social function. I also do not recall any organized games or programs aimed at integrating the children with each other; we were just there, left to our own devices.

Similar to other children's bedrooms, I felt a sense of 'not mine' towards the other beds in the room and the secret bedside cabinets each of us had. The bedside cabinet was private, so we put everything precious we had inside. I placed my virtual pet, Tamagotchi, a particularly popular toy in the 90s', there. However, the belongings in the bedside cabinet were not the only things we had. We also had marked clothing and towels; mine were marked by my grandmother, written in marker on the sewn-in

tag, which always scratched at my neck - 'Iza Gruszcz,' allowing me to identify my things in the laundry. The laundry had to be in the basement because I remember it was very dark there, and even the marked clothing was not easy to find.

Everyone was expected to have their own shampoo and toothbrush. We were called to brush our teeth twice a day. I remember a long bathroom with a lengthy sink on both sides, presumably for all of us or at least for part of the building. I do not recall showers or bathtubs, nor do I remember if I washed my long hair by myself. But I remember the design of my shampoo packaging. What I also recall from every sanatorium is hand-washing my own underwear. I do not know if the nurses instructed us to do so or if it was an order from my mum, but scrubbing was very tiring for my hands.

Another space I vividly remember was the nursing room. It served an additional function as it housed a telephone and served as a pick-up point for parcels from parents. We were not allowed to make calls ourselves; instead, we were informed to pick up the phone through a megaphone, whose sound echoed calmly throughout the building. Rarely was anyone there except for the nurses. My mum also did not call me often, probably because each time I spoke to her, I was crying and begging her to take me home. I also attempted to plead through letters; I wrote many letters to her with only one recurring sentence: 'chcę wrócić do domu,' which means 'I want to go home.' I do not remember if I received a response, but the answer was likely purely rhetorical. To this day, my mother repeats that I blackmailed her with these letters.

As for meals, due to the lack of money and thus the impossibility of buying myself anything to eat during walks, I had no choice but to eat something. I particularly remember one dinner where we had Krupnik, a soup with barley groats and overcooked vegetables. Until now, I hate this kind of food. I had never eaten those things at home, but in places like the sanatorium, the food tasted exactly the same as in Polish hospitals – worse than tasteless. Anyway, I remember this day vividly because my mum came to visit me. She visited me only once during that time, and it happened to be that day. I don't recall exactly what we did, but I remember we went for a walk and drank spring water.

She went back home and I lost the opportunity to escape so I cried again, sat down to stay for the next few weeks. Stays in sanatoriums were funded by the government, but a condition for their full payment by the state was maintaining the full duration of the stay. Since I did not understand how the system worked, her visit was my hope to leave the place.

I assume the Rymanów area has picturesque views, so it should be a pleasure to stay there. For me it was a forced trip, a compulsion whose cause I could not understand, but I believe my health was not the cause of the trips. It was simply the rigour of 6am wake-up calls preceded by a series of daily chores and meticulous routines, school activities and walks to breathe the mountain air in an unfamiliar space that I did not understand.

Village Rymanów Zdrój is located by Beskid Niski mountains. Like many other spa town Rymanów has addition of 'Zdrój', meaning 'Spring Spa' in Polish, which is related to the character of the place, and in particular the spring which has its outlet in the vicinity of the resorts. Rymanow also had its springs. „Mineral water springs can be found in almost the entire area of Rymanów Zdrój, these are mainly low and high-mineralised waters.” (Rymanowzdroj.net,2024). There were many fountains in the town from which you could pour yourself a bottle of water. One of these was Titus.

Today, spring water can be ordered from a mail order shop, but that time drinking spring water was the most important kind of treatment in sanatoriums. „The waters are particularly useful in scrofulous, rheumatic, female and many other sufferings. There is no child who would not need the baths of Ciechocinek.” (Pagaczewski, 1972)

Ciechocinek still is highly functional and one of the most famous spa towns in Poland, boasting Europe's largest brine graduation tower with a wooden structure for evaporating water from brine. Equally famous is Poland's largest mineral water pump room in Krynica-Zdrój with an area of 4,520 m². They made their own drinking cap called Pijałka with unique shape from which tourist could drink water and treat it also as a kind of souvenir. Almost every Zdrój city had his own Pijałka. However drinking water was not the only therapeutic activity. In fact every Zdrój city had its own properties, treated different diseases and differed in the type of treatment. Each provides patients with a series of scheduled recovery treatments. Inhalations, massages, steam saunas, and hundreds of other various treatments connected to their specialities such as hydrotherapy, electrotherapy, kinesiotherapy, and various types of massage and exercise.

Rymanów-zdrój is specialising with treatment of various diseases connected with upper and lower respiratory tract, rheumatological diseases, cardiovascular diseases and hypertension, kidney and urinary tract diseases. I was sent there because it was said that I often catch a cold, but I believe my mother saw it as the epitome of summer camp imagery.

I remember the daily inhalations, my favourite and only fond memory. We sat in a row with other children with a strange apparatus attached to our faces. Mist was everywhere, because if you did not connect the inhaler properly, the vapour would come out of the tube to the outside. We went to treatments in groups; when one group had a treatment, the other sat in the common room, but sometimes you could sneak into the bedroom to read books or play. I spent time playing with my virtual pet until he disappeared. Someone stole it, funny how many times you can look for something in the same drawer, even if you know the thing is missing. I could not get over it. I decided to find it. Instead of finding my toy, I discovered lots of sweets in other children's drawers. They had also received parcels from their parents, so it was a great opportunity to eat something other than an unsavory lunch. I learned something new. I personally interpreted the ideologies of socialism; bedside tables were no longer private. Instead, some sanatoriums have started to become private.

After the second war, sanatoriums located in the Eastern Bloc countries became a solution of a rest and care center for the inhabitants. They became state-run facilities where anyone who registered and waited their turn could be a patient, an integral part of the lives of the residents of communist countries, a place for the recuperation of the worker's health. With the fall of communism in 1989, Poland changed its economy to one based on the market and this shift impacted the funding of sanatoriums, many sanatoriums went through a process of restructuring and privatisation.

Contemporary reality has brought significant changes to the functioning of sanatoriums. Initially established to treat workers and benefit from climate changes, sanatoriums have ceased to be sufficient to maintain their status at the same level as in the 20th century. The changing economy of the country, the development of tourism, the possibility of traveling abroad, and shifts in society's approach to medicine and child-rearing have rendered the old system inefficient.

Despite these difficulties, many sanatoriums for adults kept going and some of them function until today primarily serve rehabilitative purposes but those for children are swept away one by one. „From 2010 to 2022, the number of children's sanatoriums in Poland decreased from 25 to 17.” (Prawo.pl, 2022) On today's date in Poland, there are 11 health resorts for children.

Due to changing sociopolitical realities and societal expectations, many former sanatoriums have stood empty in equally defunct towns, with non-operational and deteriorating architectural relics from years

ago. Since 2005, Krystyna has been out of operation, and the building has stood empty for years, along with several neighboring resorts that share a similar fate, echoing with the memories of its former vitality.

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