

# The Concept of Healing in Iran

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**Abstract |** The healing landscape is one of the main subjects of landscape architecture. Studies in the West show the specific approaches of the Western theorists regarding the hospital landscape, healing perspectives and new attitudes about the use of nature and its elements in creation of hospital and therapeutic landscape. But a look at today's therapeutic spaces in Iran suggests a fundamental difference in people's attitudes and public culture towards the hospital space; This cultural and attitude difference Expresses a different landscape from western hospitals, so that, the re-examined concepts in the hospital area of this study indicates the existence of new concepts which are not seen in Western hospitals at all; For example concepts such as the issues related to the patient companions and visitors in hospitals, which are in accordance with Iranian culture; or concepts such as habitation and wisdom that arise from the Iranian's particular view of the concept of the treatment. This study was carried out through a desk study on the history of hospitals and medicine in Iran and the West, with local impressions and interviews in the form of a questionnaire in the Imam Khomeini Hospital of Tehran. In this study, the importance and direct relation of healing scenes in hospitals with cultural and native characteristics of each regime and re-reading the differences of the basic concept of healing in Iran and the West has been briefly outlined.

**Keywords |** Healing gardens, Hospital Landscape, Hospital Courtyard, Therapeutic Landscape, Healing Concept.

**Introduction** | Human has always benefited from natural places for healing. These places in the form of healing rivers, brushwoods, holy fountains, rocks with a special mansion or a sacred tree, seemed healing to the people. Over time, the idea of healing and healing gardens was introduced. These gardens help to the spiritual problems of human, by reconciling the human-nature relationship. (Adibi & Akbarzadeh, 2014:127).

According to Wilson 1984, organisms, including plants and animals, are naturally attractive to the human. He calls this phenomenon "Biophilia" (Mashhadi Bavili, 2012:11). Besides, thinkers such as Howard Frumkin 2000 and Ulrich 1992, in their studies have confirmed Wilson's findings and have referred to his Biophilia theory, and knew it as one of the greatest theories supporting human psychological health.

Dr. Roger Ulrich, in his researches, found how a natural landscape from the window of the hospital, or even a painting of it, would have positive effects on patients. In Ulrich's most famous study, he observed the effect of watching a natural landscape from a window in improvement of patients undergoing a surgery. He found out that the recovery period for patients who open their room windows to a natural and frosted view, is much shorter than that of patients who have to watch a room with brick walls. Besides, their need to painkillers is less. The main difference between healing and treatment is that treatment is prescribing a drug, but healing is a multidimensional process that considers various factors including physical and psychological factors. Psychological factors are related to the mental, spiritual, emotional and social needs (Molazem Hosseini, 2006:85). These concepts state that a rethinking of the concepts of nature and its application in the treatment fields and hospitals has been formed.

Recently, a huge wave of translations and content productions in healing garden field has been created, in Iran. This enormous wave is following the modeling of healing landscape concepts in the west. Therefore, this study tries to have a review on western world concepts about healing environments and to compare it with these concepts in Iranian past and present culture. The main question is what are healing environments? When we say that the nature is healing, what kind of nature we mean? Is a nature basically just natural element or a particular aspect of nature? How this aspect of nature causes the design of healing gardens in hospitals? The above questions are some motivations to know the healing principles and concepts before design. These concepts require the knowledge of history and formation of cultural and native foundations of each region. So, we have tried to find new results by comparing the historical records of Iran and the west.

## Hypothesis

Healing and treatment concepts in Iran are different from them in the West and produce a different hospital setting, based on two axes of the hospital as a habitat, and wisdom in the garden.

## History of the West in the Healing View

In the Greek and Roman civilizations, the same temple was the place of examination and treatment of patients. Although in these temples, medicine did not exist in today's form and the patient was treated with a handful of superstition and Sufi and magic acts, though, these temples opened the way for modern hospitals, since they were the best shelter for patients (Najmabadi, 1962: 7) There, they took care of the patients physically and spiritually, the medications used in the famous temples of Greece included salt, honey and holly springs. There was a vast array of thousands of people available for them, as well as diverse entertainments and theater halls. Sunshine, sea air, and sights and beautiful scenery were among the factors involved in the treatment. They would have provided a number of libraries and rooms for nurses, doctors, priests, and those who came to visit (ibid: 9). For the first time, In Epidaurus, there are columns in which the patient's name and history of the disease and its treatment description are recorded (Ibid: 12).

Although the fact that Christianity is the main factor for the existence of hospitals is not correct, it is certain that concepts such as affection, compassion and benignity that were inspired by Christ are among the motivations that helped to establish a hospital. With the advance of Christianity, hospitals became as an integral section of the church and therefore were replaced by Greek and Roman temples (ibid: 12). Following this, in the Medieval, monasteries, have gained prominent and fertile gardens for themselves. At the same time, the world paradigson (Garden) gardens and also enclosed gardens would be accepted by nobles and poets (Zuylen, 1994:26).

The enclosed garden, also known as a cloister garden, symbolized the Garden of Eden and the hope for a better life. The garden was subdivided into four squares by four paths, which crossed at the center. These four paths represented the four rivers that flowed from the Garden of Eden. In Europe, enclosed, human-scale therapeutic gardens first appeared in monasteries and hospitals that cared for the sick and insane. (LaFargue, 2004: 6).

In the late Medieval, mysticism and the inclination toward monasticism faded, as did the institution of the enclosed meditative space. The care of the sick fell upon church and government and the focus of the garden shifted away. Courtyards and open spaces in hospitals were no longer important. Gardens ensued only for the wealthy or as chance architectural flukes. In Catholic hospitals, churchlike designs were created with long wards (Basilica Formation)

so every patient could see the priest saying Mass. These designs prevailed for a long time. The windows were so high up on the wall that neither patients nor nurses could see the formal grounds outside (Ibid: 6).

The monks have kept the knowledge of values and therapeutic properties of the plant species alive in Occident, throughout these years. In some cases, due to the healing quality, these gardens were used as places where patients could dwell (Molazem Hosseini, 2006: 99).

During the fourteenth and fifteenth centuries, with the onset of plague, the plundering and plowing of agricultural products and large migrations to the developing cities, Monasteries were occupied, and the monks were forced to reduce medication and therapeutic resources significantly that once they were able to provide them. Therefore, with the decline in monasticism, the level of indices of gardens was also diminished, and open spaces related to hospitals, if at all, were usually formed randomly and based on the usual principles of local architecture.

This lassitude remained for many years until 17th and 18th centuries that the development and prediction of external environments in the therapeutic settings became important once again. When the two aspects of scientific medicine and romantic art schools were accidentally and randomly combined, the emergence of exterior areas that were used in hospitals was strengthened (Molazem Hosseini, 2006: 100). In the twentieth century, the world of therapeutic care was transformed. The structure of the hospitals changed, and cheap outpatient hospitals were replaced with complex multi-storey complex. The loss of garden spaces, along with the pressure from insurance companies to minimize the structural and infrastructure of hospitals, destroyed a wide range of gardens with real uses, and new collections were created as today's therapeutic centers. Until recently, the idea of the healing garden was re-examined in research, external environment and outside buildings were returned to therapeutic assemblies, and Marcos and Barnes described and expanded this idea, which is still ongoing (Ibid).

### Method for Defining a Healing Landscape in Iran Review of the Hospital History of Iran

With regard to what has passed, it seems that most Western historians have introduced the church as the source of healing gardens in today's healing environments in the West (although the author knows the Greeks as the pioneer of such occurrence). It is important to note that a healing place in the West has been formed in the spiritual context of the church and near to a garden with its own characteristics, but Iran's background is completely in contradiction to this issue. Looking at the Iranian history of medicine, special hospitals and university centers are usually established at locations with appropriate weather, easy access, and regarding to scientific and educational concepts, namely Gondis-

hapur (At the same time as Sassanid Anushirvan, 531-579 AD) and Rab'-e Rashidi which indeed were medical and academic complexes. The basic difference between the historical foundation of the West and the historical past of Iran is that, these places have primarily based on treatment and designed as a center of improvement, not as a place appendix to the church or temple.

According to "Rab'-e Rashidi's recreation based on Historical texts" book, "One of the important points of plan, is Positioning the town in the middle of perimeter gardens, which have been shown as inseparable parts of the Rab'-e Rashidi." Also "We put all of them (Physicians) into all kinds of care and attention, and told them to commute to our healing house every day. . .ophthalmologists, surgeons and bonesetters attend our dar-ul-shafa (a place for curing patients) which is near Rashid Abad garden known as Patients' Treatment center "(Keynejad & Balali Oskui, 2011: 138) The above expressions also provide extraordinary descriptions of the order, beauty and evolution of the collection, which expresses the specialty of such a building and the proximity of gardens with Rab'-e Rashidi.

The second example in Iran is Jondishapur, which is located near Ahwaz \_ Shah Abad village\_ has an ancient history. According to most scholars at that time, its name was Genta shapirta that means the "beautiful garden". The current Jondishapur was built shortly after Shapur defeated the Roman emperor and captured Antioch, at the end of the third century, for this reason, it was called Endo Shapur, which means better than Shapur Antioch. Arabs learned how to build hospitals from Iranians (Jalilian, 2012: 56).

### The Concept of a Healing Landscape in The West

Today's studies show that healing is not a one-dimensional subject, but a comprehensive process considering different aspects of humans such as his body, mind, and spirit. The main difference between healing (complementary medicine<sup>3</sup> and comprehensive medicine) and treatment (modern medicine) is that, in treatment, the medications are suggested for diseases, whereas in healing, a multidimensional process, different elements such as physical and psychological factors are included . Psychological factors are related to mental, emotional, and social needs (Malazem Hosseini, 2006: 95). The inconspicuous affinity between human and the nature in the present century shows that health and calmness of today's human have been severely undermined, and his separation from nature is one of its important factors. This human needs healing through returning to the nature. Finding the concept of healing in the West can be analyzed in its theoretical and practical forms. The theoretical aspect is about the attitudes to the nature and is cited in the form of theories. The practical aspect can be found in feedback and creating spaces based on those theories and what actually emerged.

## The Theoretical Aspect

Since the advent of Biophilia's theory, and in the subsequent of the experiments of Cooper, Marcos and Francis\_ who realized that people go toward nature to "help themselves" when they are under pressure or depression\_ new approaches to the nature were re-formed. As a result, various schools with various scientific foundations emerged, and a relation between landscape and health was created to understand the mechanisms of nature.

In Table 1, based on western studies on different fields of hu-

man sciences including: medical geography, environmental psychological, ecological approach, and horticultural therapy (Jiang, 2014: 142).

There are two basic and fundamental points in modern approaches in Western theories. First, most of these theories have been proven in terms of psychology and by limited experiments in their time and place, and secondly, these approaches have introduced nature as modernized symbols such as a landscape, tree, or artifact, and all of these theories emphasizing returning to nature to reduce the stress and

Table 1: Theories and schools of thought for healing gardens. Source: Jiang, 2014: 142.

School	Terminology	Theories	Representatives
Medical Geograph	Therapeutic-landscape	Sense of place; four dimensions of therapeutic landscapes: natural environment, built environment, symbolic environment and social environment	Gesler , 2003
Environmental psychology	Restorative environment  Therapeutic landscapes and healing garden	Attention-Restoration Theory (ART); four features as restorative environment: being away, extent, fascination, and action and compatibility  Esthetic-Affective Theory (AAT); psychoevolution theories; three features of healing gardens: relief from physical symptoms, illness or trauma; stress reduction for individuals dealing with emotionally and/or physically stressful experiences; and an improvement in the overall sense of well-being	Kaplan & Kaplan, 1989; Kaplan, 1992 Kaplan and Berman, 2010  Cooper-Marcus and Barnes, 1999 CooperMarcus and Sachs, 2013 Ulrich,1984 -1999 Ulrich et al, 1991 Ulrich and Parsons,1992
Ecological psychology	-Salutogenic environment and therapeutic landscape-	Theories of environmental affordances ecological psychology	Heft,1999, 2010; Grahn et al, 2010 Grahn and Stigsdotter, 2003
Horticultural Therapy	Healing garden and therapeutic garden	Theory of "flow experience"; sensory stimulation theories	Söderback et al, 2004 Detweiler, et al 2012,

mental symptoms of their patients. This matter is important because the modern concepts of the healing landscape have derived from the Middle Ages which Someday introduced nature as Satan and the house of Satan.

### The Practical Aspect

By analysing what was constructed as the healing garden in practice, hidden concepts can be gained in theories. Accordingly, 5 case examples are presented in Table 2.

An overview of Table 2 illustrates that the natural elements are tools of landscape production, which, as it happens in the hospital environment, is considered a healing landscape. The main question is whether the presence of natural elements is a therapist? And, as in the environmental psychology experiments conducted by Ulrich, Marcos, Barnes and others, does using the natural elements solve the problem? However, the advantage of this approach is a comprehensive view of the problem. In fact, it does not see human just as a body, the basic issue is that this division subdivides the healing issues into sub-collections in academic fields, which transform nature into separate and controlled components. For example, sun therapy, water therapy, aromatherapy, color therapy, music therapy, and so on. This leads to the risk of turning nature into its distinctive and inseparable features, and poses a threat to the whole nature (Table 2).

### The Concept of Healing in Iran

According to the excerpts from the history of Rab'-e Rashidi and Gondishapur, it was revealed that the idea of science-centrality and the adjacency of the hospital with a city

full of gardens, is the main difference between treatment in Christianity and the Middle Ages with the history of Iran. The main and basic element of the emergence of both hospitals, educational and academic complexes is science-centrality that is in contrast to the common treatment in the church which is based on superstition and magic. Consider these contents: "In the Middle Ages, hospitals were under the full influence of religion and were mostly recognized as religious institutions than medicine institutions. Surgery and opening the patient's abdomen were an insult to religious sanctities. People believed that the human's body has created in the image of the God and the Spirit should be cured, not the body. Religion was the most important factor on the establishment of hospitals in that period (Najmabadi, 1962: 18).

On the other hand, the garden landscape and the choice of location for the hospital or, in fact, the university town is an idea which has been integrated with the intellectual and cultural beliefs and foundations. Jondishapur was built when the gardening culture in Iran was at the top of glory at the Sassani Anoushirvan era. So, the hospital is not a subset of a place like church in the western history, but is a chosen place and a complementary scientific work in these cities. Although finding the healing concept with these two examples in Iranian history is not easy, ideologies can be found that can be promising. There are a few documents about the type of place managing in Gondishapur, but according to the Rab'-e Rashidi's devotion document, the following concepts in constructing and managing the Rashidi Hospital can be considered:

Table 2: Case Study reading. Source: Authors.

Case Study	Purpose	Theory Criterion	Features Of The Space
Gardens at Lucas Gardens school new south wales Australlia	A garden for cancer patients	Presence in nature	Water play music therapy Public space
Saint Pierre Institute Palavas Les Flots	Creating a human space for patients	presence a relaxed in natural landscape	natural light Create a wooden path Use warm colors on the facing
Jupiter Medical Center	The process of treatment in sensory and psychological context	recovery and restore confidence	Create a social space Walking and sports Variety of green space sunbathing Create chatroom
Fiona Stanley Hospital: A Landscape for Healing	Landscape for health using nature	Garden therapeutic	Exercise Pay attention to the prospect natural light Conservation of native wildlife
Healing garden at Mount Zion Clinical Cancer Center, San Francisco, CA	The idea of Cooper Marcus	Healing Gareden	Getting natural light Variety of colorful plants sound of water Patient participation with tile design Intimate atmosphere

- An integrated organization with a medicine man or a proficient doctor management.
- Choosing a good weather environment
- Emphasis on a garden-like basis
- Establishing a systematic urban and a residential system
- Cooking the food according to the patients temperament
- Appropriate orientation in terms of lighting
- Using natural elements such as water and plants
- Beautiful paintings
- Creating a beautiful and magnificent area considering the acceptance of many travelers
- The existence of a monastery or a religious place

To documenting some of the above, we will discuss about the context of the Rab'-e Rashidi Recreation, based on the historical texts by Mohammad Ali Keynejad. "... Hundreds of slaves in Rashid Abad, Njamiabad, Donyaabad, Ferdos and Khanqah gardens, which were connected together and were known as Rashid Abad gardens, and another 50 people in Fatah Abad garden were engaged in developing gardens and agriculturing, and were dealing with devotion affairs" (Keynejad & Balali Oskui, 2011:45).

Consider the concept of residence (Habitation): "It is worth noting that travelers could only stay in Rashidi quarter only for three days .... and the proficient doctor's dwelling known as Daras 'Dar al-tabib' was alongside 'Dar al-Shafa' and on its right side: "...if they had a family, they would have built houses in Salehieh neighborhood for them..." (Ibid: 51). "...at the first glance, we fell in love with the beauty of this spaceits chambers were painted with beautiful designs, it seemed that every section was a piece of paradise..." (Ibid: 253) Although historical data or perceptions and rewritings may have some weaknesses, there is a significant difference in the concept of healing and treatment and the hospital location in the history of Iran and the West.

After conducting an extensive study about the research setting, we selected Imam Khomeini Hospital as the case study. The main door of the hospital has located on Dr. Gharib and includes three independent hospitals with the area of 25,000 square meters. The idea of building this hospital was suggested in 1928 and was officially inaugurated in 1947. The building has its own history. The Second World War, the occupation of the Allies, the events of the revolution, the landing of helicopters carrying Imam Khomeini, and incidents during the imposed war, has happened in this period. The main view of the current Imam building (former Pahlavi) was in the form of a Greek doric and registered in the Cultural Heritage Organization<sup>1</sup>.

## Methodology

Data were gathered through .....from With different understanding from the hospital's premises, interviewing the participants in the area and the patients in the area, distributing the questionnaire and interviewing the staff and doc-

tors was done to the pathology of the site and categorizing injuries and relationships in the hospital.

Based on the results of the questionnaire in Table 3, 81% of the interviewees were in the county and 35% had one to two week stay in the hospital (Table 3).

After the results of the questionnaire, in addition to the pathology of the area, another questionnaire was taken from the patients in the hospital. The results showed:

1- According to the chart, the largest permanent resident in the hospital is a male patient's companion, who sometimes resides in the area for months (Pic. 1).

2- Imam Khomeini Hospital is often referred to by financially poor people .  
different cut-off

3- Historically, the structure and location of the hospital has significant strengths. Because the hospital is general, it has the proper equipment and facilities in the important sectors. In addition, most of the people believed in the ability and skill of doctors.

4- Because the medical system in Iran is not suitable for hoteling, the staff of the hospital is not able to respond adequately to the volume of inbound and sick patients. Traditionally, the system of treatment has accepted the patient's companion as a non-academic staff. By the way we can consider the hospital as a collaborative hospital.

5- Policies to deal with patient and attendant fellows are not intended to reduce stress and therapeutic trends, although it is emphasized in global experiences. The hospital's policy on ... ..has not been followed

6- According to interviews with expert physicians, treatment costs in Imam Khomeini Hospital are higher than private hospitals; as a result, private hospital management system does not seem to encounter problems and issues related to visiting patients and patients' companions. Accordingly, Imam Khomeini Hospital is an open-ended hospital.

7- Because of the high entry and exit of people to the hospital environment, in terms of visiting culture, it is not comparable to foreign samples, which places the hospital environment at risk for various types of contamination, especially in isolated parts.

8- A large part of the main enclosure and main paths of the hospital area are used as permanent or temporary resting places (Pic 2).

9- Due to the lack of public parking and, of course, with appropriate capacity, the streets around the hospital have been turned into campus, tenting, eating companions and families of patients, in other words, the presence and expanding of a hospital area into the street (street shelter) has also infiltrated. The damages and their origin are summarized in Table 4.

Based on the above information, new concepts such as the area as a place of residence, the place of meeting, the

waiting area, and the resting area of the staff were seen. These concepts, which are the result of looking at the daily life of the hospital and its routineness<sup>2</sup>, on the other hand, many of these concepts are related to Iranian culture and are in the context of social environmental problems. Considering the issue of Iranian culture in the hospital, it has caused environmental and social damage that itself is detrimental to the treatment process and healing process.

Considering the importance of these concepts, many of which are evident in the hospital's perspective, we are trying to focus on the concepts that cause these problems and to understand the more correct concept of treatment and therapy in the hospital.

### Hospital as a Habitat

Achieving the above results disclose the concept of habitat in Imam Khomeini Hospital; This theme includes patients who have been hospitalized for up to a few months, accompany patients and even doctors who may live in the hospital for up to three days (Table 5). Humans spend much of their life in spatial places; homes, workplaces, places of worship, and such places are habitats, that is, they must protect human from everything that threaten the their health and lives. Habitation requires making, in addition to its apparent meaning, which is the building, also includes the meaning of education, custody, protection, agriculture, and care (Proti, 1995: 312). The German philosopher, Heidegger, believes that a human who is living in a place will protect the earth and build it up. Accordingly, the location of the hospital is kind of a living palce (Mostafavi, 2015). With this view, the following definition can be given to the hospital: Hospital is a place in which death and birth, happiness and moan, beginning and ending, pain and treatment all come together. When entering such a place, the patient is looking for glow of hope and clarity. Looking for a place in which human is in liveliness not in recession of the pain and silence of death. Here is the place to return to the life again. The concepts in the case study indicate that there is a companion along with about 80% of patients, although this has derived from the Iranian culture, it has the concept of settling in the corners of the area and even around the streets. In other words, habitation of human, means whatever that human and his soul is associated and get relaxed with it (Taheri, 2014:25).

### Finding the Existing Proportions in the Hospital Location

Dealing with a phenomenon like a building or a hospital, not as an abandoned object, but as a phenomenon in the world, can lead us to new ideas. The relation of any phenomenon with the surrounding world, and its internal and external relation with itself and the earth, is the central approach to

new phenomena. Hospital is a phenomenon in town and is a spatial place that its routines readout helps to discover the relation between structures and their components. With these relations, one can talk to his audiences and open up the face of the phenomenon for his audiences. And as a result, the human will be relaxed in such a place. This keeps the phenomenon dynamic and creative and keeps it alive.

In making relation between the hospital and those who are located in it, the patient companion and visitors are following the patient in the hospital, and the nurses and Administrative part are following the doctor. Shape. 1 shows the relation between the present people in the hospital that is frequent in all working days. It is noteworthy that these relations are not separable. One is the other's reason.

The complete healing process includes the spiritual, mental, emotional, social, and ultimately physical aspects of the the healing (Molazem Hosseini, 2006: 95).

The main part of the above process is the culture and ethnicity that recovers its real meaning. It should be considered that today's culture is not from a nation or country, but it has shaped in the context of time and history. From Stewart's point of view, human is a cultural entity and his nature forms in the context of culture; therefore, in order to approach human nature, one must study culture and ethnicity. How can we create emotional, spiritual and social healing, while we have never known culture?

So achieving the healing process is formed when we can find the position of each component of this whole, including the physician and his associates, the patient and his associates, and place them in a circular process rather than a linear relation.

### The Relation of the Doctor to the Hospital, a Whole to Part View

With a meticulous look at the history of the hospital in Iran, two impressive examples, such as Rab'-e Rashidi and Gondishapur which both were built, managed and prospered and protected by a medicine man (doctor or healer), were selected. This is quite distinct from a hospital headed by Christianity with superstition and religious axis. Although the important point of the church-hospital is its formation in the context of Christian culture.

In this study, both the concepts of habitat and medicine man (doctor or healer) are clearly seen as the central point of the place in the history of the Iranian hospital, and the important issue is that this view is a whole to part attitude. Pay attention to the following words from the history of medicine: "The therapist of the spirit and body is required to accomplish the necessary exams with a complete skill. As in Achaemenid (the first Persian empire) medicine in Vendidad, if a physician treats three followers of devil and they died, he should not treat anyone until the end of his life" (Najmabadi, 1962: 424).

Table 3: Results of the first questionnaire. Source: Authors.

Question	Results
Living Place	Tehran 12%
	county 81%
interviewee	Companion patient 65%
	Patient Visitor 23%
	Patient 12%
Age of interviewee	Child (1 to 15 years old) 5%
	Young (15 to 25 years old) 18%
	Middle aged (25 to 50 years old) 65%
	Old (50 up ) 12%
Satisfaction	Satisfaction with the expertise of doctors 63%
	Service discontent 88%
Duration of stay in the hospital	Between 3 days and a week 12.5%
	Between a week and two weeks, 35%
	Between a week and a month 22%
	A month and more 8%
Cause of referral to the hospital	Inappropriate financial situation 82%
	Skills and expertise of doctors 62%



Pic 1: Hospital as a habitation. Photo: Maryam Zahedi, 2016.



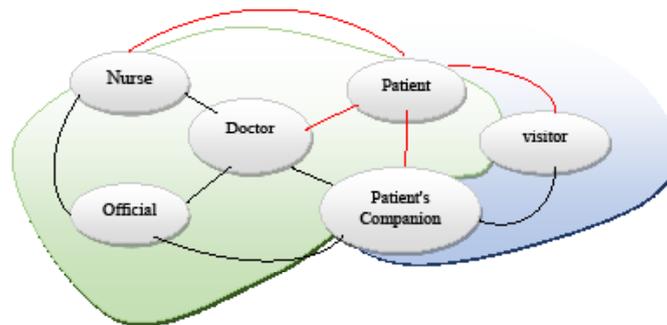
Pic 2: Hospital, Place of Visit. Photo: Maryam Zahedi, 2016.

Here, the concept of healing is healer-centered; this is new and also old, because with this attitude to the medical history of Iran, this concept is seen again. This is such a deep-seated historical and cultural context that makes many people continue to develop complementary medicine (Shape. 2). Here, instead of asking patient what they need to get improved (i.e. searching for part to whole relationships), ask the physician what they need for treatment (whole to part view). The relation between the doctor and the patient is a mutual relation at the place. But the important matter is its strength and direction in the doctor's side. The patient comes with his companions, gets hospitalized, is treated and leaves, while the doctor is still present at the place. This is the doctor that healing is in his hands; He is a permanent habitat of the hospital and lives in it.

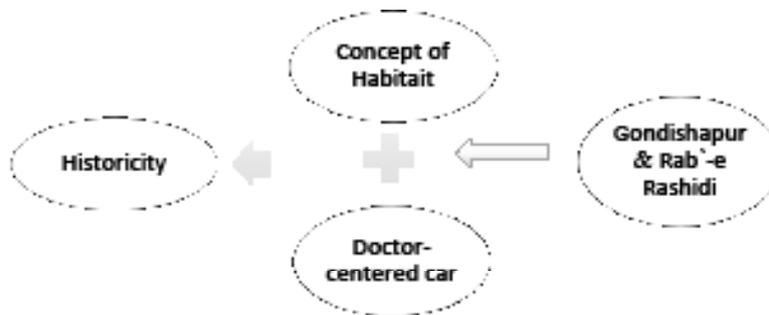
**Conclusion** | Recent theories about healing environments or healing gardens show that most of these theories by measuring and performing various experiments in environment psychology try to show that human and his living environment is measurable. These experiments introduce the healing problem by measuring human reactions to nature. This makes the human to be considered as separate parts that have different needs to apparent aspects of nature. Therefore, in this attitude human is not seen as a multi-dimensional creature.

According to the research results, if the concept of housing (a hospital as a place for patients' living) is included in the treatment process, it should be a presentation of daily life in the hospital. Also, unlike the western theories which emphasize

patient care, Iranian medical history believes in patient care. This concept is quite visible from the relations governing in Iranian modern hospitals. Moreover, the physician centrality doesn't mean focusing just on physicians, but it means the focus is on treatment that should be seen from the physician view. It means, instead of asking the patient what they need to get improved, ask the doctor what they needs to get healed. Accordingly, healing or the concept of healing is not planting particular trees or plants or nature elements in hospital, but healing is a cultural-historical approach that shapes the relations in the hospital. Many of these relations are derived from the native culture of each place, so hospital must be a garden for patients' living, not a hospital in a garden.



Shape. 1: Communication between hospital users. Source: Authors.



Shape. 2: Concept of habitat in the history of the Iranian hospital. Source: Authors.

Table 4: Classification of Damage Available at Imam Khomeini Hospital. Source:Authors.

Damages	Causes
Functional damage	the lack of unit management and a comprehensive look at the complex of the hospital
Environmental damage	Due to the lack of clear rules in the field of hospital environment and the single reference and the lack of advanced equipment
Physical injuries	Due to the lack of a comprehensive look at the collection, the lack of native architecture of modern hospitals
Social and environmental damage	Due to the lack of recognition of the concept of hospital and healing in building hospitals with Iranian identity and culture and hospital perspective

Table 5: Classification of Damage Available at Imam Khomeini Hospital. Source: Authors.

Grouping	Species Of Attendance	Habitation Concept	Presence In The Courtyard	Explanation
physicians	Night / day shift	hav	little	The doctors have a place to stay as a hotel - They use the campus for rest and appointment sometimes - Priority for them is the equipment in the hospital
nurses	Night / day shift	not have	very little	- They do not have enough time - Do not get intimate with patients
patients	Bedridden/non-bedridden	have/not have	little	- They do not have enough time - Do not get in touch with patients
Patient companions	Permanent/im Permanent	have/not have	very much	- About 81% of townspeople - Men most in the yard - High dissatisfaction with facilities and hospitals
visitors	imPermanent	not have	much	- Dissatisfaction with the environment

## Endnotes

1. Some of the statistics and information used in the dissertation text are taken from a book titled The Report of the Organization of Imam Khomeini Hospital, which is presented in three volumes in October 2013 by Fourth Architecture Group.
2. Routineness refers to the relationships existing in the place and what is

happening everyday in a space without have any prejudice or ideal thinking

3. The complementary medical term includes any shape of medicine that out of process the mainstream of western medicine, which most doctors run it today.

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