THE EAST IN THE WEST: STILL EXISTING VICTORIAN TURKISH BATHS IN THE BRITISH ISLES (1) Burkay PASİN*

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1. This paper is based on the author's fivemonth research between 15 August 2017 and 15 January 2018, supervised by Dr. Gül Kaçmaz Erk at Queen's University and supported by Izmir University of Economics as part of the Overseas Experience Program. The initial findings of the research were presented on 10.07.2019 at the International Conference on (Neo)Victorian Studies: Frames of Mind, organised by London Centre for Interdisciplinary Research.

2. According to Shifrin's detailed directory in http://www.victorianturkishbath.org, there were fifty-three baths in Ireland, sixty-three baths in Scotland (three of which are still open), seventeen baths in Wales, 500 baths in England (six of which are still open).

3. In the dictionary definition, the term 'Saracenic' means "a member of a nomadic people of the deserts between Syria and Arabia" (Merriam Webster Online Dictionary) According to Shifrin, Saracenic is "a catch-all description of Islamic architecture from different periods and different places"

(2015, xvi). In order to clarify the term, he further mentions the Orientalist belief that "there is only a single eastern architectural ctule which is experie and less normal than

style which is exotic and less normal than theirs" (2015, 15).

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INTRODUCTION

Influenced by Orientalist discourses, many Eastern building types underwent myriad transformations as they were incorporated into modernising European society. One such type is the Turkish bath (hammam), which was not only utilized as an "ideological tool of manipulation within the contexts of Orientalism and Auto-ethnography" (Pasin, 2016, 134), but also materialized in decontextualized building replicas. An example of this is the bath pavilion designed by Léon Parvillée for the 1867 Universal Exposition in Paris, considered by Zeynep Çelik "a stereotype of Islamic Architecture as a merely sensuous play of decorative devices" (Çelik, 1992, 96).

The Victorian Turkish Bath, which emerged in the mid-19th century as part of the Turkish Bath Movement in the British Isles, stands out as an exception. Unlike movement that merely aimed to translate the hammam, this initiative sought its meaningful adaptation into the British culture. In the second half of the 19th century, driven by the pioneering efforts of Scottish diplomat David Urguhart, over 600 public bath complexes were built across various regions of the British Isles (2). Urquhart's initial approach to the hammam differed from the Orientalist and reductionist discourses prevalent among 19th-century travellers, many of whom reduced the architectural productions of the Orient into a singular Islamic exotic style known as 'Saracenic' (3). Based on his direct experiences of hammams in Morocco, Spain, and İstanbul, Urguhart (1850) asserted that these buildings, capable of accommodating large groups in a hot bathing space, offer a more hygienic and economical alternative to individual bathing tubs. Additionally, he believed that the social environment could help to reduce the class barriers in the British society.

Urquhart's personal attempts, coupled with a series of publications and lectures extolling the benefits of the Victorian Turkish bath, proved significantly effective in rapidly disseminating this institution across the 4. In a letter, a doctor from London indicates his worries about the Turkish Baths in Alfred Place owned by two physician brothers, Charles and Edward Pollard, questioning the legitimacy of their treatment (The Lancet, 1862). Another letter by William Haigh, owner of Chapel Street Baths in Southport, responds to complaints regarding his newspaper advertisement for hiring a doctor in his baths (Medical Times & Gazette, 1861). British Isles. Following his lecture dated 28 February 1862, delivered to the members of the Council of the Society of Arts, he received appreciation for highlighting the potential benefits of the baths for British society, such as improvements in health, cleanliness, and economy (Urquhart, 1862, 235). Several other factors also contributed to this widespread adoption. The regulations set by local authorities in England, Ireland, and Scotland enabled the provision of affording bathing facilities, complete with hot water for all. Various articles in printed media advising the regular use of Turkish Baths supported the movement. For instance, a newspaper article titled 'Introduction of Turkish bath into Ireland', published on 21st June, 1856, in the *Sheffield Free Press* (1856,1), hailed the Turkish Bath Movement as a "social revolution".

In their early years, Victorian Turkish baths sparked debate among doctors, hydrotherapists, architects, and political authorities, with as many objecting to its spread in the British Isles as those who supported it. One major point of contention was about the ideal temperature and humidity inside the baths. During his lecture at the Mechanics Institute in Bradford in 1858, Dr Richard Barter expounded on the health benefits of hot dry air at various temperature levels for the human body. Similarly, Dr J L W Thudichum, in a lecture to the Royal Medical Society in 1861, favourably compared hot dry air to vapoury air (The Turkish Bath, 1861). While Dr Barter and Dr Thudichum advocated for the use of dry hot air compared to the original hammam or Russian steam bath, some doctors argued that "a reasonable amount of humidity was not only desirable but absolutely essential" (Shifrin, 2015, 92). Regarding interior temperature, Robert Owen Allsop, an English engineer specialized in Turkish baths, recommended a range from 120 to 250°F in 1890 (78-79), which was later adjusted to 220°F by professional organizations (Shifrin, 2015, 93).

Initially, objections to the baths focused on the practices of physicians who managed the baths and provided medical advice to their patients, along with the consultancy of doctors in these establishments (4). Attitudes and prejudices regarding public cleanliness and class differences also played a role. In the mid-19th century, the majority of the population in the British Isles was unaccustomed to regular bathing, leading them to visit the baths more for pleasure than for cleanliness. Moreover, some authorities considered the baths as sites of indolence and expensive luxury, deeming their introduction to the 'lower' classes infeasible (Shifrin, 2015, 98). This perspective inevitably reflected a high eclecticism, luxury, and extravagance evident in the architectural style and interior decorations of the baths.

In the existing literature, there is a scarcity of architectural studies on Victorian Turkish Baths. Two 19th century books have served as the early references for researchers and followers of the Turkish Bath Movement, although they are somewhat misleading. *The Eastern, Or Turkish Bath* (1865) by English surgeon and dermatologist Erasmus Wilson delved into the spatial layout, bathing processes, and suitable temperatures of a typical Turkish bath. It provides advisory information on the appropriate frequency and duration of bath visits, describing the Turkish Bath as "a large building, with a domed roof, a square massive body, from which minarets shoot up, and against which wings abut containing side apartments" (Wilson, 1865, 14). However, it is known that minarets are not featured in the original hammam, and chimneys were used in Victorian Turkish baths as the vertical building elements. In *The Turkish* *Bath: Its Design and Construction* (1890), Robert Owen Allsop outlines the general requirements of a public bath, its disposition plan, and a detailed consideration of features peculiar to it. Yet, his list of required chambers not only includes Sudorific Chambers of various degrees, but also a Shampooing Room, Douche Room, and the Plunge Bath (Allsop, 1890, 39-52), none of which existed in the original Turkish bath layout. Moreover, his emphasis on the need for artificial light contrasts with the naturally illuminated ambience of a hammam (Allsop, 1890, 102).

Nebahat Avcioğlu's scholarly contribution extends beyond the conventional Orientalist conceptions of Turkish baths, and examines their adaptation into British culture with a critical and contextual approach. In the book chapter entitled 'David Urquhart and the Role of Travel Literature in the Introduction of Turkish Baths to Victorian England' within *Interpreting the Orient, Travellers in Egypt and the Near East* (2001), Avcioğlu explores how Urquhart's first-hand experiences of the Turkish baths and bathing habits, detailed in his travel accounts, enabled a cross-cultural negotiation in promoting the Turkish bath as a healthy and useful model for the British society. In two additional book chapters published in 2011, 'The hammam' in *Turquerie and the Politics of Representation* and 'The Turkish Bath in the West' in *Bathing Culture of Anatolian Civilizations: Architecture, History and Imagination*, she traces the evolution of this negotiation into the Turkish Bath Movement, specifically manifested in the design process of the Jermyn Street Hammam in London.

The definitive study on *Victorian Turkish Baths* is Malcolm Shifrin's Victorian Turkish Baths (2015), a culmination of 25years meticulous research. Complemented by the author's website, 'The Victorian Turkish Bath: its origin, development, & gradual decline,' –where readers can find further information and share their knowledge–, this comprehensive study delves into the architecture, technology, and sociology of these baths, exploring diverse aspects such as business, health, class, and gender within 19th-century Victorian society. The book provides a detailed classification of recorded baths, including stand-alone baths, municipal baths, and those in members-only clubs, hospitals, hotels, and asylums. Shifrin's research shows that the Victorian Turkish bath typology did not merely offer a stereotypical reduction of the hammam, but a variety in function, style, user profile, and spatial layout.

Based on findings from a field study centred on five Victorian Turkish baths, this research aims to extend the literary domain shaped by previous research. The analysis focuses on still-operational Victorian Turkish Baths from 19th century, including the Arlington Baths Club in Glasgow designed by John Burnett in 1871, the Western Baths Club in Glasgow designed by William Clark and George Bell in 1876, Portobello Swim Center in Edinburgh designed by Robert Morham in 1901, Royal Baths at Harrogate designed by Baggalley and Bristowe in 1897, and Health Hydro at Swindon designed by John James Smith in 1891 (Figure 1). In terms of architectural style, spatial arrangement, and interior design, these bath complexes reflect the general characteristics of Victorian Architecture. Following a case study approach consisting of an extensive archival survey, on-site inspections (5), interviews (6), and a questionnaire survey (7) conducted at the selected public bath complexes, the study explores how these bath complexes, representative of Victorian Architecture, influence present-day user preferences and usage patterns. Additionally, through comparative analyses and critical examination of Orientalist discourses, the research

5. On-site inspections consisted of photographing the buildings from the exterior and the interior and drawing sketches and diagrams to understand the spatial arrangement of the bath complexes.

6. Interviews were made with the managerial staff of the bath complexes, each taking approximately thirty minutes. The questions aimed at understanding the near history of the baths, technical and functional challenges, and use patterns and procedures.

7. The questionnaire survey consisted of thirteen multiple-choice questions regarding the demographic information about the participant such as age, gender, marital status, visiting purpose and frequency, as well as their spatial preferences during the visits.



Figure 1. Map showing the Victorian Turkish Baths studied within the scope of the research (prepared by the author).

aims to understand the distinctions between these western adaptations and the traditional hammam prototype in Eastern geographies.

In the first section delves into the historical context surrounding the emergence of the Turkish Bath Movement, shedding light on the reasons, attitudes, and conflicts shaping the spread of the Victorian Turkish Baths in the British Isles. It offers insight into the refurbishments and reconstructions undertaken at selected bath complexes. The second section uses functional schemes and partial section drawings to explain how the spatial arrangement of the selected cases differs from that of the hammam prototype, exploring their impact on functionality based on user' design preferences. The final section, supported by front elevation drawings and interior photographs, highlights the characteristic features of Victorian Architecture evident in the facades and interiors of the five baths. Accordingly, this examination encompasses the visual ambiance created by Victorian eclecticism and its effects on user behaviour and preference.

HISTORICAL CONTEXT

The Turkish Bath Movement emerged across various regions of the British Isles in the late 1840s, spearheaded by the Scottish diplomat David Urquhart. During his tenure at the British Consulate in Istanbul (1830-1837), Urquhart visited Turkish baths, experiencing their traditional bathing rituals. Upon his return to Britain, he delivered series of public lectures on the medical, mental, and social benefits of these baths. In his work *The Pillars of Hercules* (1850), chronicling travels to Spain and Morocco, Urquhart critically appraises Western travellers' Orientalist accounts, comparing the Turkish baths of İstanbul with the Moorish baths and asserting their functional similarity but architectural superiority of the former. Notably, he further asserts that there is a constant interaction between different social classes in the Turkish baths (1850, 33-89), a factor contributing to his adoption of this model for the movement beyond its medical benefits.

Under the influence of Urquhart's account of hot air baths in *The Pillars of Hercules* and with his direct support, Dr Richard Barter established Ireland's first Turkish bath in 1857 as part of his Hydropathic Establishment at St. Ann's Hill in Cork. This beehive-shaped hot air bath with minimum steam, also known as a Roman-Irish Bath, served as a model for subsequent Turkish baths (Breathnach, 2004, 160). Comprising three rooms of increasing heat, it featured the following: *"frigidarium* (cooling room), with large windows of stained glass and an arched ceiling supported by pillars; *tepidarium* (warm room), with a semi-circular roof, and; *sudatorium* (hot room)" (Shifrin, 2015, 24-25). The heating flues were placed under the floor to create vapour, but this was not sufficient to heat the air for therapeutic purposes (Shifrin, 2015, 23). In addition to the Turkish bath, "there were a number of plunge baths to cool the body" as "part of a medicalized process of perspiration and detoxification" (Neswald quoted in Foley, 2010, 12). Despite early technical and architectural limitations, Barter expanded and improved upon this model, opening additional public baths across Ireland, including Cork, Killarney, Bray, Limerick, and Dublin in the ensuing years (Shifrin, 2015, 39-49).

In the 1850s, the Turkish Bath Movement spread from Ireland across the industrial north of England into central areas of Scotland and England, gaining rapid popularity amongst diverse sections of the British population. Shifrin attributed this rapid spread to three main economic factors: (1) affordability (2) profitability, and (3) lack of competing facilities (2015, 318). Additionally, English general practitioner Peter Kandela underscores the rapid spread as a response to "the poor state of health hospitals and hygiene among the urban masses" in the mid-19th century (2000, 72). Official support for the Turkish Bath Movement was provided through regulations from local authorities. The first Baths and Washhouses Act of 1846 in England, and the Towns Improvement Clauses Acts of 1847 and 1854 in Ireland, empowered boroughs or parishes to provide public baths and wash-houses. These regulations permitted borrowing for public washing, bathing, and laundry facilities, allowing authorities to make by-laws and specify charges for facility use. The act mandated provisions such as clean water and a towel for adult bathers, with specified maximum charges, rate aid charge for a warm bath of the lowest class, and each woman was to be provided with a tub and a boiler in the wash-house (Campbell, 1918, 3-4). Similarly, the Public Health Acts of Scotland in 1867 and 1897 included similar regulations for water provision, but with slightly higher bath charges than in England (Campbell, 1918, 4-5).

One significant catalyst for the Turkish Bath Movement was the establishment of Foreign Affairs Committees (FACs), consisting of middle-class entrepreneurs aligned with Urquhart to propel the rapidly progressing movement. The committee members were convinced by Urquhart with "the idea of running Turkish Baths as a means of financial support," enabling them to "concentrate more on their political activities" (Shifrin, 2015, 36). These members of FACs, under Urquhart's influence, were instrumental in opening more than thirty of the early Victorian Turkish baths in England (Shifrin, 2015, 7), including William Potter's inaugural Turkish bath in Manchester and others by Richard Shannon in Stephenson Street and Sunderland, as well as Charles Bartholomew's in Bristol. Noteworthy successes included Urquhart's founding of the London & Provincial Turkish Bath Company in 1860, and the inauguration of the Jermyn Street Hammam in London in 1862.

Designed by George Somers Clarke under Urquhart's supervision, the Jermyn Street Hammam comprised two sections: (1) a *frigidarium* with a cold plunge pool and a central fountain, surrounded by elevated private alcoves, and (2) a domed *caldarium* with a central belly stone (*göbektaşı*)



Figure 2. Cross-section and floor plan for the Hammam, the Eastern Bath, designed for the 'London and Provincial Turkish Bath Company' (Urquhart, 1862, 223).

surrounded by private washing cubicles (**Figure 2**). Avcroğlu argues that the design was actually a reproduction of another public bath by Italian-Swiss architect Gaspare Fossati, who drew inspiration from the spatial layout of Ağa Hammam in Istanbul (Avcroğlu, 2011, 279-281). Considering Fossati's modifications on this model that the *ılıklık* is eliminated and the *soğukluk* made longer, together with a proposal to timber for construction (Avcroğlu, 2011, 279-281), the Jermyn Street Hammam could be considered as an adaptive interpretation, rather than a direct translation of the hammam prototype. It deviates from Urquhart's initial goal of breaking class division, as entrance charges were unaffordable for working class (Lloyd, 2004, 13). Additionally, Urquhart mandated customers to wash before entering (Shifrin, 2015, 39-69), contradictory to his initial idea of breaking down the rigid class division in the baths. The baths closed in 1940 and were destroyed during the Second World War London Blitz in 1941.

In the 20th century, the Turkish baths experienced a gradual decline initially attributed to economic factors such as rising fuel costs and wages. Shifrin highlights three additional reasons for this decline: "(1) The rise of the number of homes with hot and cold running water, (2) The advancements in the effectiveness of drugs as painkillers, together with a growth in medical knowledge, (3) The introduction of saunas in London and Manchester at the end of 1959, and their speedy adoption elsewhere" (2015, 319-320). According to Shifrin's records, at least thirty-four baths built on the Victorian model were still operational in the British Isles in 1990, with none remaining in Ireland where the Turkish Bath Movement started (2015, 7). However, the decline continued in the early 21st century, with records from 2015 indicating only twelve Victorian-style Turkish baths remaining open in the British Isles, five of which date back to the Victorian era (2015, 7). These five remaining baths form the scope of this research.

While primarily maintaining their original state, the five baths analysed in this study have undergone various refurbishments and reconstructions. At the Arlington Baths Club, major refurbishments include the addition of reading and billiard rooms in 1893, the extension towards the street in 8. This information is based on Shifrin's accounts (2015: 229-231) and an interview with Andrew Mc Gill, the manager of Arlington Baths Club, on 18 September 2017.

9. This information is based on Shifrin's accounts (2015, 231-234) and an interview with Fraser Makeham, the manager of Western Baths Club, on 20 September 2017.

10. This information is based on an interview with Joanne Kesterton, the manager of Portobello Swim Center, on 25 September 2017.

11. This information is based on an interview with Christopher Mason, the manager of Harrogate Royal Baths, on 28 October 2017.



STREET

Figure 3. Scheme showing the tripartite spatial arrangement of the original hammam (prepared by the author).

1902, installation of coke-burning stoves in 1930 and modern steam heating in 1950, and partial refurbishment in 2000 (8). The Western Baths Club experienced fire damage to the Turkish baths in 1905, installed the first filtration system in 1933, permitted mixed bathing in 1965, and reinstalled the *frigidarium* dome and cast-iron dale over the swimming pool in the late 20th century, with a gym added in the early 21st century (9). Refurbishments in the late 2010s touched the three hot rooms and the steam room of the Portobello Swim Center. The treatment center in Royal Baths at Harrogate was closed in 1969, transformed into a casino in the 1990s, and underwent refurbishment as baths between 2002 and 2004 (11). At the Swindon Health Hydro, a new heating device was installed for the Turkish baths in 1888; the original women's Turkish Baths closed in the mid-1950s, and shampooing service ceased in the 1990s (Shifrin, 2015, 177-179). These records underscore the baths' adaptability, resisting structural decay and responding to changing social conditions from the mid-20th century onward to remain viable.

SPATIAL ARRANGEMENT AND FUNCTIONAL ASPECTS

A typical hammam is mainly composed of three chambers arranged in accordance with a temperature gradation, based on the original layout of the ancient Roman *thermae*: cold room (*soğukluk/frigidarium*), warm room (*llklık/tepidarium*), and hot room (*sıcaklık/caldarium*), as shown in **Figure 3** (Wilson, 1865). Some hammams include a fourth chamber, called *soyunmalık/apodyterium*, designated for changing clothes before and after the bath (Glück, 1921). In a traditional bathing ritual, users follow a sequence, entering the *frigidarium* to undress, progressing through the *tepidarium* to acclimatize to higher temperatures, and finally bathing in the *caldarium*, optionally including scrubbing and massage if desired. The exit follows the exact reverse sequence.

The architectural historian Fikret Yegül (1992, 351-352) asserts that the hammam prototype is a continuation of the Roman bath; however, notable differences include the absence of *palaestrae* (exercise yard) and communal pools. The eclectic typology of the Victorian Turkish bath, blending the prototypes of hammam and Roman bath, is illustrated in Figure 4, depicting spatial layouts of the selected baths based on on-site observations and original drawings. Accordingly, while the Victorian Turkish bath more or less conforms to the tripartite spatial arrangement of the hammam, it may incorporate a fourth chamber called a *laconicum*, a chamber hotter than the *caldarium*, a cold plunge pool located between chambers, and a large swimming pool. Moreover, the circulation may differ from that of the hammam, with possible interconnections among the three chambers (**Figure 4**).

In all the bath complexes analysed in this research, the Turkish baths are situated as a separate suite in one corner or at the centre of the building, accessible through changing rooms, slipper rooms, or inner corridors (**Figure 4**). This placement is mainly a result of the comprehensive spatial program of these complexes, which includes facilities like swimming pool, gym, billiard room, plunge baths, steam room, and sauna. Through either indirect or direct connections, the Victorian Turkish bath suite also functions as a supplementary facility to these spaces. The Victorian Turkish baths examined in the research present this complex spatial arrangement at best. In the Arlington and Western Baths Club, the Turkish bath suite connects to the swimming pool via showers and a steam room, while at



the Swindon Health Hydro, it is linked to the gym through showers and a shampooing room. Similarly, the swimming pool in Portobello Swim Center is connected to the Turkish bath suite through a corridor, leading users to the Jacuzzi, steam room, and sauna. Although areas other than the Turkish bath suite maintain an average room temperature, these internal connections result in gradual temperature differences facilitated by air circulation.

Additionally, the chambers in a Victorian Turkish bath may be arranged around a plunge pool, serving as an integral part of the bathing or relaxation facility. This feature distinguishes the Victorian Turkish bath from a typical hammam, where the traditional Islamic bathing ritual involves washing with running water rather than still water. In Western Baths Club, Swindon Health Hydro, Portobello Swim Center, and

Figure 4. Functional Schemes of the ground floors of the selected bath complexes (prepared by the author).

Harrogate Royal Baths, the cold plunge pool also functions as a transitional element between chambers of varying temperatures. Hence, although designed for cooling the body with cold water, its transitional setting may result in a temperature akin to either the *frigidarium* or *tepidarium*, depending on its proximity to these two rooms (**Figure 4**).

On-site observations reveal that the dressing facilities in all five bath complexes are generally located in a separate space directly connected to the entrance hall of the building. So, as users enter from the street, they do not immediately find themselves in the *frigidarium* or *apodyterium*, as is the case of a hammam. Instead, they first traverse series of changing cubicles, slipper rooms, and circulation halls (Figure 4). This arrangement inevitably makes the Victorian Turkish bath suite a more private environment compared to an original hammam, where privacy gradually increases from the street to the inner chambers. However, this absolute privacy is paradoxically disrupted in relation to the spatial division and furnishing of the Victorian Turkish baths. While original hammams also have private cubicles in the apodyterium and the caldarium, the chambers of Victorian Turkish baths are entirely shared spaces, offering no opportunity for a user to bathe or relax alone. The deckchairs for relaxation are placed alongside the chambers so that users can see each other even while lying down (Figure 5). Hence, it could be argued that the Victorian Turkish baths are relatively private based on controlled access but functionally semi-private (or semi-public) depending on individual preferences.

Victorian Turkish baths differ from the hammam in terms of gender-based use. In their early years, Victorian Turkish baths were known to provide separate facilities for men and women within the same building, featuring separate entrances (Shifrin, 2015, 278), similar to the traditional double hammam (12). Additionally, they provided separate sessions for women on specific days or times (Shifrin, 2015, 278), similar to the traditional single hammam (13). While very few exclusively catered to women, in the 19th century, fewer women than men frequented Victorian Turkish baths, probably due to pricing (Shifrin, 2015, 278-279). Since the early 20th century, these dynamics has changed considerably, with private sessions available for both men and women, including nudist communities. However, as seen in the plan layouts of the bathing complexes in Figure 4, nearly all the common spaces are mixed-use, except for changing cubicles, toilets, and showers. Questionnaire results show a greater preference among women for visiting these baths today, with an average of 62% female participants across all bath complexes, while the male average is 38%. These women visit the bath complexes at least once a week, both on weekdays and at weekends, mainly alone.

The Victorian Turkish baths can also be considered as an enlarged version of a typical sauna, where the body is exposed to hot air without humidity or steam. On-site observations and questionnaire results indicate that users primarily visit the Victorian Turkish baths for health and relaxation, often passively sitting or lying down to allow perspiration. The direct interaction of the body with water and steam exists in other spaces, such as steam rooms, swimming pools, plunge pools, and plunge baths. As a result, the time spent in Victorian Bath suites rarely exceeds two hours, in contrast to the traditional Turkish baths in Eastern geographies where users may linger for longer durations, even a whole day for a special occasion, engaging not only in bathing but also in recreation and socialising.

^{12.} A double Turkish bath *cifte hamam* consists of two adjacent and generally symmetrical sections for men and women allowing simultaneous use.

^{13.} A single Turkish bath *tek hamam* offers alternate bathing times for men and women in the same space.



Figure 5. Interior view showing the seats in the *frigidarium* of Royal Baths at Harrogate (photo by the author).

ARCHITECTURAL STYLE AND INTERIOR DESIGN

Victorian Architecture comprises a series of architectural revivalist styles that emerged during the long reign of Queen Victoria from 1837 to 1901. This era can be divided into three periods: (1) Early Victorian spanning 1837-1855, (2) High Victorian Gothic or High Victorian Eclecticism spanning 1855-1875, and (3) Late Victorian from 1875 to the early 20th century (Dixon and Muthesius, 1978, 18). To address the challenge of finding "the most suitable style" for a particular building type, architects embraced "complete stylistic freedom and variety", a concept known as Eclecticism (Dixon and Muthesius, 1978, 24). Especially in the second period, architects enjoyed unrestricted freedom to combine various styles, resulting in diverse forms of plan layout and façade designs for the same building type, and even within the same building (Dixon and Muthesius, 1978, 19). During the late 1860s, many architects shifted away from strict Gothic forms towards styles such as Old English, Vernacular, and Queen

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Figure 6. Plan and exterior view of Kılıç Ali Pasha Hammam in Istanbul (drawing by Ali Saim Ülgen, photo by the author).

Anne (Dixon and Muthesius, 1978, 23). The most prominent features of the Queen Anne Revival include red brick walls, creating a contrast with the other parts of the façade, along with wooden window frames and a wooden cornice painted in white (Dixon and Muthesius, 1978, 26).

In contrast to the compact, simplified, and modest architecture of hammams (Figure 6), Victorian Turkish baths reflect the multiplicity and richness of High Victorian Eclecticism, both externally and internally. According to Shifrin's records, about 75% of the public baths opened during Queen Victoria's reign, with almost 50% emerging during the second period of High Victorian Eclecticism, nearly 40% in the third period of Late Victorian, and the remaining 10% in the 20th century, after the Victorian age. None were built in the Early Victorian period (14). Prominent exterior features of the baths include symmetrical entrances, chimneys, arched openings, pointed arches, horse-shoe arches, keystones on openings, triangular pediments, Corinthian columns, domed roofs, fretwork, and decorative minarets, along with brickwork and woodwork, specifically in Queen Anne style buildings. Within this rich repertoire of architectural elements, the use of decorative minarets and domes gives the baths an Oriental appearance. The interiors further support this aesthetic with stained glass, arched doorways, tracery, onion domes, patterned tiling, coloured plastering, and half-moon apertures. Irish design historian Teresa Breathnach asserts that these "bizarre" interiors, characterized by "eclectic mixtures of oriental decoration and ancient Roman historical tripartite spatial arrangement," were designed to express "middle-class identity" (2004, 165-166).

The front elevations of the researched public baths all exhibit a symmetrical composition, creating a monumental effect on the exterior (**Figure 7**). Notably, the asymmetrical spatial arrangement of these baths, as discussed in the previous section is entirely absent on the exterior. The symmetry axis mostly indicates the entrances to the buildings. At Arlington and Western Baths Clubs, the entrances are marked by three arches supported by Corinthian columns. The arches on the façade of the Western Baths Clubs

14. See the list of Turkish baths built during the Victorian period at http://www.victorianturkishbath.org



Figure 7. Front elevation drawings of the baths and point details (prepared by the author).

display various designs, ranging from horse-shoe to Gothic trefoil types, arranged symmetrically. Triangular pediments, used as surface reliefs, are evident on the façades of the Harrogate Royal Baths, the Swindon Health Hydro, and the Arlington Baths Club. The Harrogate Royal Baths also feature arched pediments located on extending blocks on both sides of the building. Only the Arlington Baths Club and Portobello Swim Center have chimneys visible from a distance. The main characteristics of the Queen Anne Style are evident in Swindon Health Hydro and Portobello Swim Center with their red brick walls contrasting against white wooden framing (**Figure 8**).

The roof structure of each bath shows internal variation, which inevitably affects the lighting quality of interiors (**Figure 9**). The *tepidarium* at

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Figure 8. Exterior views showing the traces of Queen Anne style (Left: Portobello Swim Center, Right: Swindon Health Hydro) (photos by the author).



Figure 9. Partial section drawings of the baths showing roof structures (prepared by the author).

Arlington Baths Club is covered with an onion dome with small openings reminiscent of the elephant-eye (*filgözü*) holes found in hammams. Wooden carving surrounds the walls of this space at eye level, and the floors are adorned with coloured decorative tiling (**Figure 10**). In contrast, the *tepidarium* at the Portobello Swim Center has a smaller dome with similar openings, while its *frigidarium* has a fully exposed dome-shaped skylight. These two spaces are divided by an arched opening and connected below by a plunge pool, providing users with two different modes of daylight while using the pool. The *tepidarium*'s walls are encircled by multi-coloured stripes (**Figure 11**). The *tepidarium* of the Western Baths Club has a double-layered roof and a stained-glass dome placed on a hexagonal opening within a suspended ceiling underneath a pitched roof, allowing indirect daylight into the space. The side walls of this area are covered with a



Figure 10. Interior view of the *tepidarium* in Arlington Baths Club (photo by the author).

Figure 11. Interior view showing plunge pool connecting *frigidarium* and *tepidarium* in Portobello Swim Center (photo by the author).

second layer of zig-zag-shaped partitions, and the floors are adorned with terrazzo (**Figure 12**). The plunge pool of the Harrogate Royal Baths is covered with a ribbed vault, while its *tepidarium*, *caldarium*, and *laconicum* are covered with a continuous barrel vault with large circular skylights. These spaces are separated by horse-shoe arches, flanked on both sides by a Moorish-style pillar. Walls and vaulted ceilings are painted and/or tiled with colourful decorative patterns, and the floors contribute to the eclectic ambiance with Italian mosaic tiling (**Figure 13**). The *plunge pool, tepidarium*, *caldarium*, and *laconicum* of the Swindon Health Hydro are covered with a flat roof, vaulted underneath and devoid of openings. The walls and floors are adorned with coloured stripes of tiling (**Figure 14**). These eclectic and complex interior decorations manipulate users' concentration towards the visual qualities of the space, creating a picturesque ambiance that emphasizes visual over tactile, olfactory, and auditory qualities.

In terms of furnishing, traces of original hammams can be observed in various elements throughout the interior spaces. For example, in the *tepidarium* of Arlington Baths Club, a decorative fountain in the centre resembles the fountain in the *frigidarium* of hammams, where users typically sit, relax and enjoy beverages before leaving. Similarly, the marble sinks placed in the *tepidarium* of Western Baths Club and *caldarium* of the Harrogate Royal Baths serve merely as decorative elements, not for washing purposes. Another example includes the marble counters on both sides of the *caldarium* and *tepidarium* in Harrogate Royal Baths. Onsite observations showed that users prefer the wooden deckchairs in the *frigidarium* of the Turkish Bath suite over these counters, which remain as decorative elements.

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Figure 12. Interior view showing *tepidarium* of Western Baths Club (Western Baths Club Catalogue).

Figure 13. Interior view showing the plunge pool of Harrogate Royal Baths (photo by the author).

Figure 14. Interior view showing one of the hot rooms in Swindon Health Hydro (Shifrin, 2015, 179).

Questionnaire results indicate that users in the Turkish bath suites of all the complexes are mostly drawn to interior architecture and decoration rather than the quality of light, material, and sound. In contrast to the hottest domed chamber of the hammams, where natural light passing through small circular skylights creates a uniform effect throughout the day, the eclectic complexity of the interiors, dark paintings on the walls and ceilings, and the use of artificial light in Victorian Turkish baths create a glare effect inside. A similar limitation exists for sound quality. Whether due to the use of non-reflective surface materials or the inappropriate forms of roof for uniform sound reflection, noise is generated by users' movements and sounds. In essence, the eclectic interior design of Victorian Turkish baths creates an artificial ambiance, mainly representing the visual qualities of the original Turkish bath rather than its non-visual qualities that stimulate all the senses.

CONCLUSION

Based on the findings of a case study research on selected Victorian Turkish bath complexes, it is evident that in terms of architectural style, these buildings reflect eclectic and Saracenic characteristics of Victorian architecture by incorporating various neoclassical and Islamic elements both externally and internally within the same architectural composition. Despite undergoing various refurbishments and reconstructions, they largely maintain their original state as part of the Victorian historic heritage. The complexity of spatial arrangement further enhances their eclectic architecture, providing a myriad of hot or warm spaces, including a plunge pool, sauna, steam room, swimming pool, gym, billiard room, and plunge bath, in addition to the hot dry Turkish bath suite. Hence, users may bathe, exercise, recreate, and relax during a single visit to these complexes, contrasting with the hammam, which follows a formal bathing ritual conforming to its unidirectional tripartite spatial layout. In the hammam, recreational activity, regardless of its form, is limited to the largest hot section (*caldarium* or *sicaklik*). The placement of the Turkish bath suite among other spaces in these complexes, providing interconnections, also resemble contemporary health and spa centres where traditional bathing spaces from various cultures, such as the Finnish Sauna, Roman Pool, Russian Steam Room, and a hammam, are arranged side-by-side along a corridor and accessed through a single door.

The questionnaire results show that users typically visit the Victorian Turkish bath alone and spend less than two hours. Despite the increased spatial opportunities for socialising compared to the hammam, users mostly use these potentially public spaces for private activities such as swimming, exercising, cleansing, lying down, and relaxing. However, in the *stcakltk* chamber of the traditional hammam, groups of families and friends may spend the entire day engaging in traditional rituals such as the bride's bath, soldier's bath, and 40th-day bath for a baby; a practice still observed in certain neighbourhoods in Turkiye. In this context, it is noteworthy to observe how a single public chamber in the hammam transforms into a shared social space, while a group of spaces open to public use in the Victorian Turkish bath may remain private or semi-private. This shows how daily spatial practices inevitably reflect cultural differences and user preferences.

Due to various Victorian prejudices regarding public health and cleanliness, the Turkish bath, as an Eastern traditional feature, might not have been readily embraced within the Western context. However, it is noteworthy that the first spaces built in Victorian Turkish Bath complexes were generally Turkish bath suites, around which all the other spaces were organized. Interviews with managerial staff have revealed that, even though Turkish bath suites are not used as frequently as other spaces, maintaining a specific temperature and ensuring cleanliness and air quality throughout the day are essential. This practice helps preserve the luxurious and exclusive quality of these establishments. As shown in spatial arrangement and interior design analyses, Victorian Turkish baths exhibits fewer sensual qualities but more functional opportunities compared to the original hammam. As long as a selective user profile, emphasising visual and functional qualities of space in line with Victorian eclecticism, is maintained, the preservation of these complexes as part of British culture can be guaranteed. The study has shown the significance of interior design, spatial complexity, and use patterns in the survival of a historic building complex within a different cultural context. This study may serve as a basis for further exploration into the adoption of an Eastern cultural feature into the Western cultural context.

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Anahtar Sözcükler: Viktoryan tarzı Türk banyosu, Viktoryan tarzı Mimari, hamam, seçmecilik, Oryantalizm

BATIDAKİ DOĞU: BRİTANYA ADALARI'NDAKİ VİKTORYAN TARZI TÜRK HAMAMLARI

Oryantalist söylemlerin etkisi altında, İngiliz kültürü Türk Hamamı gibi doğuya ait birçok yapı tipini bünyesine almıştır. 19. yüzyılın ortalarında ortaya çıkan Türk Hamamı Hareketi boyunca, Britanya Adaları'nın farklı bölgelerinde 600'den fazla kamusal banyo inşa edilmiştir. Ortaya çıkardığı teknik, işlevsel ve sosyo-kültürel zorluklar dolayısıyla Türk hamamı ritüelinin 19. yüzyıl ortası Viktoryan kültürüne adaptasyonu kusursuz bir süreç olmamıştır. Öncelikle, kullanıcıların uzun sureler boyunca yıkanıp temizlendiği orijinal Türk hamamının sıcak ve nemli ortamına kıvasla Viktoryan tarzı Türk hamamlarında kuru sıcak hava kullanılmış ve toplu yıkanma, eğlenme ve sosyalleşmeden çok kişiye özel rahatlama işlevi gözetilmiştir. İkinci olarak, Türk hamamının hem dış hem de içteki basit ve kompakt mimari biçimlenmesiyle karşılaştırıldığında, Viktoryan tarzı Türk hamamları mimari üslup, iç mekân tasarımı ve mekânsal düzenlemede bir karmaşıklık ve seçmecilik göstermektedirler. Bu çalışma Viktoryan Mimarisinin özelliklerini yansıtan ve halen büyük kamusal yıkanma komplekslerinin parçası olarak hizmet veren beş Viktoryan tarzı Türk hamamı üzerine odaklanmaktadır. Vaka çalışması metodolojisini kullanan bu araştırma, seçilmiş hamam komplekslerinde yürütülen kapsamlı bir arşiv araştırması, yerinde incelemeler, röportajlar ve anket araştırmalarını bir araya getirmektedir. Makale, farklı verilerin karşılaştırmalı analizi yoluyla mekânsal düzenlemeler ve kullanım kalıpları arasındaki ilişkileri araştırmayı ve Doğu coğrafyalarındaki hamam prototipinden farklılıkları vurgulamayı amaçlamaktadır.

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Influenced by Orientalist discourses, the British culture incorporated numerous Eastern building types, including the Turkish bath (hammam). In the mid-19th century, the Turkish Bath Movement witnessed the construction of more than 600 public bath complexes across various regions of the British Isles. The adaptation of the Turkish bath ritual into 19th century Victorian culture and architecture was not a seamless process; it brought out a range of technical, functional, and socio-cultural challenges. Firstly, in contrast to the original Turkish bath's hot and humid interior,

where users bathe and cleanse together for long periods, Victorian Turkish baths use dry hot air, and function primarily for private relaxation rather than communal bathing, recreation, and socialising. Secondly, unlike the Turkish bath's compact architectural formation, both externally and internally, Victorian Turkish baths reflect complexity and eclecticism in architectural style, interior design, and spatial arrangement. This study focuses on five Victorian Turkish baths that embody the characteristics of Victorian Architecture, and still function as part of the larger public bath complexes: Arlington Baths Club and Western Baths Club in Glasgow, Portobello Swim Center in Edinburgh, Royal Baths at Harrogate, and Health Hydro at Swindon. Employing a case study methodology, this research integrates an extensive archival survey, on-site inspections, interviews and questionnaire surveys conducted at selected public bath complexes. Through comparative analyses of the diverse data, the article aims to investigate the relationships between spatial arrangements and patterns of use, highlighting differences from the hammam prototype in Eastern geographies.

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