



HISTORY OF THE HEALTH CARE SYSTEM IN UZBEKISTAN IN THE PERIOD OF INDEPENDENCE (IN THE CASE OF NAVOI REGION)

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Abstract: in this article, the deterioration of the social condition of the population in Uzbekistan in the last quarter of the 20th century before independence, especially the increase of various diseases in the public health due to ecological imbalances, the increase of problems in the health sector, the occurrence of deaths among women and children due to various unpleasantness in the remote areas of the navoi region studied in the research issues of arrival are analyzed.

Key word: health care, crisis, social, economic, ecology, population, doctor, nurse, crisis, hospital, polyclinic.

One of the reasons for the deepening of the social serious problem in Uzbekistan in the late 1980s and early 1990s was the problems in the health care system. "Though the network of health care facilities was greatly expanded during the Soviet government in power, but due to (related to surrounding conditions or the health of the Earth) (too much of one thing and not enough of another), an increase in different internal sicknesses among the population was watched/ followed as a result of the destruction of the external (surrounding conditions), especially, as a result of putting different strong chemicals on the ground, the complete control of cotton and other social unpleasantness"¹. In particular, the demographic situation in the Republic has become complicated. Statistical data show that in 1970-1990, the rate of population growth in Uzbekistan gradually decreased. If in 1950-1970 the population of the Republic increased by an average of 3.5% annually, in 1980-1990, this figure was 2.7%, in 1991-2000 it was 1.9%. The main reason for this is the decrease in the birth of children in Uzbek families in recent years. According to statistical data, "in the period of the population census, that is, during the years 1979-1989, the total population of the republic increased from 15379.4 thousand people to 19810.0 thousand people or 28.8%." During this period, the average once-a-year growth rate of people were 2.8 percent² According to the information of the State Statistics Committee, in the Republic of Uzbekistan "in 1991, the permanent population increased from 20.6 million people to 386,000 people compared to 1990"³ This shows that the rate of population growth in Uzbekistan was more than three times higher than the rate of the Union. However, for many years, such population growth was not strengthened by increasing the number of jobs in industry and other parts/areas of the (process of people making, selling, and buying things) and creating the necessary conditions for the population's job. This led to worsening of people's living conditions, increase in the

¹ Health care. Medical Encyclopedia. <https://MedLife.Uz>

² Social changes in Uzbekistan. Presentation PowerPoint (tiame.uz) <https://staff.tiame.uz/>

³ Statistical Agency under the President of the Republic of Uzbekistan. "How much has the permanent population grown in the Republic of Uzbekistan in 30 years?" 17.08. 2023. <https://stat.uz>

number of unemployed, reduction of social labor productivity and income of the population, and ultimately, a decrease in people's well-being⁴

In the last years of the Soviet power, the medical field, which was considered the main link of the social sphere in Uzbekistan, did not have the opportunity to adequately respond to the demands of the rapidly growing population of the republic. The reason is that in the 1980s, the field of medicine was largely neglected. In particular, this aspect is due to the absolutely bad conditions for receiving and treating patients in existing hospitals and polyclinics, the outdated and unusable medical devices and equipment, the dilapidated and damaged state of many hospital and polyclinic buildings, the failure of personnel policy to meet the requirements, environmental problems, infectious and can be explained by the increase in serious diseases. As a result, "in the middle of 1980, an acute epidemiological situation arose in the villages of the republic, the number of patients with viral hepatitis increased, and the number of patients with other dangerous diseases, including malignant tumors, increased for every ten thousand people in 1980-1985."⁵ In the same period, personnel policy was not up to the demand. "By 1985, about 2,700 outpatient clinics, more than 6,200 paramedic-midwifery centers and 1,850 pharmacies served the population in the republic. There were 32 doctors and about 90 secondary medical workers for every 10,000 people⁶. Especially due to the lack of attention to children's medicine, the sharp increase in various infectious diseases among children in the republic's villages caused negative consequences and deaths. "At the end of the 80s of the 20th century, due to the acute environmental situation in the region, the spread of acute infectious diseases increased in the country. In this period, the spread of infectious diseases increased."⁷ According to T. U. Aripova's scientific research, "more than 80 percent of children in Khorezm, Bukhara and the USSR suffered from one or more diseases. During this period, diseases such as diarrhea and tuberculosis began to spread widely in the villages. Studies have shown that the impact of the seasons on the death of children is also great, especially atmospheric pollution, sudden changes in temperature, lack of organization in the provision of medical care, and the lack of opportunities for children to be treated in bed were the main reasons⁸

About 90 percent of the buildings of medical institutions did not meet the requirements of treatment standards at all. The supply of places in republican hospitals was also extremely low. Especially in rural areas, such situations were very sad. In particular, if we look at the example of Navoi region, "At the end of the 80s, attention to the health of the population was at a very low level in the remote areas of the region, especially in the villages of districts such as Tomdi, Uchkuduq, and Konimekh. It was not even 50 percent below the norm⁹" As stated in the report of deputy U. Asatov at the 8th session of the executive council of the Navoi region held on December 27, 1983, "Cultural services to the population within the framework of social protection are at a very low level, neglect of them, rude treatment of veterans of the Great Patriotic War and labor by medical staff is noticeable. Construction and

⁴ Social changes in Uzbekistan. Presentation PowerPoint (tiame.uz) <https://staff.tiame.uz/>

⁵ Uzbekistan during the Soviet colonial period. 2 - book. New history of Uzbekistan. - Tashkent: "Sharq", 2000. B. 55

⁶ Khudoyberganov A., //People's health is the wealth of the country// Soviet Uzbekistan, June 16, 1985.

⁷ Djumanov S. History of the health care system of independent Uzbekistan. Monograph. - Samaqand. 2021. B.9

⁸ Aripova T.U. Zdravoochranenie i zdorove naseleniya Samarkand region. Abstract diss. sugar Med. science - Tashkent, 1975. - P.33

⁹ Current archive of the administration of Navoi region. 1990 year. 4 - vol. 42 – sheet.

commissioning of new buildings of medical institutions in the field of health care is being carried out in a very narrow way. In 1983, 50 percent of the annual plan was fulfilled"¹⁰ As mentioned above, most of the treatment facilities were housed in non-adapted buildings. As a result, infectious diseases, maternal and child mortality rose to a high level in those years.

Based on the materials stored in the state archive of Navoi region, it should be noted that in the pre-independence period, that is, in the late 80s and early 90s of the 20th century, special attention was paid to the implementation of annual plans and decisions. Efforts have been made to create ample conditions for the production of cotton, grain, agricultural and livestock products and to perform the tasks of transfer to the state, but the sad part is that it is difficult to positively evaluate the attention to the health of the population. "At the end of 1983, the medical institutions in the region did not accept the adequate instruction on preventive examination of the population. Unpleasant cases of infectious skin diseases have been reported. It is necessary to improve the quality of medical examination of the population. Despite efforts, child mortality remains high. It seems that it is necessary to find a solution to all these shortcomings. We want to clearly include in our work plans for 1984 the issues that are urgent, necessary and important to be solved"¹¹. As can be seen from the sad thoughts above, the main attention of the state and government was not on human health, longevity, health of women and girls, healthy growth of babies, infants and young children, but on strengthening production using population power. In 1989, there were many cases of chronic diseases among adults and children in Navoi region. According to archival materials, 3,557 adults and children were registered in the dispensary due to chronic diseases in Navbahor district alone, and they received outpatient and inpatient treatment for a year"¹² The archival materials confirm that medical workers in the district, with the efforts of local Councils, regularly work on the promotion of medical knowledge and the elimination of harmful customs and traditions among the population"¹³. "In 1989, 1,200 lectures were given by district doctors, and more than 800,000 interviews were conducted by secondary medical personnel, but despite the progress made, there are still many shortcomings in the field of health care in this region. Although all conditions are created, the level and quality of medical examination of the population is low. The security of secondary medical, junior service personnel cannot meet modern requirements. The material and technical base of the health sector in the district is not sufficient and it has a negative effect on the population growth"¹⁴. This was especially noticeable in 1980, when the Navbahor district was separated from the Navoi district. Instead of 125 standard beds per 10,000 inhabitants, the district had 80 beds. Due to the lack of buildings in the district, the department of infectious diseases of the hospital is not established, and the therapeutic department is located 8 km from the Central District Hospital. Most medical facilities are located in adapted rooms, some of them are located in dilapidated and old buildings"¹⁵

Archival materials confirm that in the 1980s and early 1990s, the situation in Khatirchi district was also very sad. Khatirchi district had the highest child mortality rate in the region. Turning to the numbers, "this indicator was 65.9 in 1981 and 66.4 in 1982. In 1989, there

¹⁰ State archive of Navoi region. 1 – Foundation. 1 – List. 187 – collective volume. P.37.

¹¹ State archive of Navoi region. 1 – Foundation. 1 – List. 187 – collective volume. P.39.

¹² State archive of Navoi region. 1 – Foundation. 1 – List. 187 – collective volume. P.20.

¹³ State archive of Navoi region. 1 – Foundation. 1 – List. 187 – collective volume. P-20

¹⁴ State archive of Navoi region. 1 – Foundation. 1 – List. 187 – collective volume. P-20

¹⁵ State archive of Navoi region. 1 – Foundation. 1 – List. 187 – collective volume. P-21

were 71.2. It was very sad."¹⁶ In our opinion, the reason for such a situation in Khatirchi district at that time was the lack of doctors and pediatricians. Because, if we pay attention to the archival materials, "only 3 of the existing 7 village medical clinics are provided with a pediatrician. The supply of medical institutions with pediatricians in the district was only 70 percent."¹⁷ In addition, at that time, the low level of medical culture among the population, the lack of health promotion among parents, and the fact that parents tried to treat young children on their own without turning to medical institutions until they were in serious condition caused disappointments.

The figures and processes mentioned above show that the work carried out in providing medical assistance to the population was not at the level of the demand of that time. In particular, women and children's preventive examination and dispensation were slow. As a result, in 1983, the death rate of children under the age of 1 was higher than that of the region and the Republic. These negative aspects can be clearly seen in the case of Tomdi district.

- The construction of a 60-bed hospital in the center of the district has not been completed since 1981¹⁸;

- Food funds given to the district hospital, especially 14930 liters of milk, 3546 kg of yellow oil, 39 tons of fruit, 8869 kg of potatoes and other products have not been given since 1982. This had a negative impact on the health of children under one year old and mothers;

- Taking into account the fact that the district is located farthest from the center of the region and lack of medical personnel, provision of 10 doctors and 25 medical personnel with secondary education from graduates of institutes and technical schools in 1983 was discussed at the meeting of the regional administration¹⁹

According to this information, it is clear that in the period before health, it helps to implement continuous and effective work in order to improve the health of districts and remote villages of Navoi region. The lack of public health in the field of health care has not been resolved for a long time, and the situation in this regard has continued to be difficult. "Historical changes in Uzbekistan in 1991-2021" by A.M. Aminova. (In the case of the Lower Zarafshan regions)" scientific research focuses on the history of the medical system of Navoi and Bukhara regions, and it is noted that "as a result of the lack of funds, equipment and specialists in the health care system in the studied regions, cardiovascular, stomach, intestinal, goiter diseases high development" was analyzed²⁰

So, the numbers and processes mentioned above show that the work carried out in the provision of medical care to the population was not at the level of the demand of that time. In particular, women and children's preventive examination and dispensation were slow. As a result, in 1983, the death rate of children under the age of 1 was higher than that of the region and the Republic.

¹⁶ State archive of Navoi region. 1 – Foundation. 1 – List. 187 – collective volume. P-23

¹⁷ State archive of Navoi region. 1 – Foundation. 1 – List. 187 – collective volume. P-24

¹⁸ State archive of Navoi region. 1 – Foundation. 1 – List. 187 – collective volume. P-15

¹⁹ State archive of Navoi region. 1 – Foundation. 1 – List. 187 – collective volume. P-16

²⁰ Aminova A.M. "The history of economic changes in Uzbekistan in 1991-2021 (in the example of the Lower Zarafshan regions). Doctor of Science (DSc) dissertation after abstract. - Tashkent. 2023. 24 p.

References:

1. Health care. Medical Encyclopedia. <https://MedLife.Uz>
2. Social changes in Uzbekistan. Presentation PowerPoint (tiame.uz) <https://staff.tiame.uz/>
3. Statistics Agency under the President of the Republic of Uzbekistan. "How much has the permanent population grown in the Republic of Uzbekistan in 30 years?" 17.08. 2023. <https://stat.uz>
4. Social changes in Uzbekistan. Presentation PowerPoint (tiame.uz) <https://staff.tiame.uz/>
5. Uzbekistan during the Soviet colonial period. 2 - book. New history of Uzbekistan. - Tashkent: "Sharq", 2000. B. 55.
6. Khudoybergenov A., //El health is the wealth of the country// Soviet Uzbekistan, June 16, 1985.
7. Djumanov S. History of the health care system of independent Uzbekistan. Monograph. - Samaqand. 2021. B.9.
8. Aripova T.U. Zdravoochranenie i zdorove naseleniya Samarkand region. Abstract diss. sugar Med. science - Tashkent, 1975. - P.33.
9. Current archive of the administration of Navoi region. 1990 year. 4 - vol. 42 - sheet.
10. State archive of Navoi region. 1 - Foundation. 1 - List. 187 - collective volume. 20, 37, 39 - sheet.
11. State archive of Navoi region. 1 - Foundation. 1 - List. 153 - Collected Vol. 15, 16, 21, 23, 24 - sheet.
12. Mukhitdinova, O., Alyavi, B. A., Ubaydullaeva, Z. Z., Uzokov, J. K., Mukhamedova, M. G., Rakhimova, D. A., ... & Orziev, D. Z. (2022). Changes of blood D-dimer level after COVID-19 in patients with coronary heart disease. European Heart Journal: Acute Cardiovascular Care, 11(Supplement_1), zuac041-136.
13. Aminova A.M. "The history of economic changes in Uzbekistan in 1991-2021 (in the example of the Lower Zarafshan regions). Doctor of Science (DSc) dissertation after abstract. - Tashkent. 2023. 24 p.
14. Mamatkadirovna A. K. et al. Translation as a Special Type of Language and Intercultural Communication //Journal NX. -C. 176-180
15. Mamatkadirovna K. N. Pedagogical Conditions for the Development of Intercultural Communication Among Students //Czech Journal of Multidisciplinary Innovations. - 2022. - T. 12. - C. 88-93.