



CONDITIONS AND PROBLEMS ORGANIZATION OF ECONOMIC ACTIVITY IN SANATORIUMS AND RESORTS OF UZBEKISTAN IN THE YEARS (1921-1952)

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ABSTRACT

This article describes the conditions in the sanatoriums and resorts of Uzbekistan, as well as the organization of economic activities and the existing problems in this process. In particular, the conditions of a number of sanatoriums and resorts "Shakhimardan", "Pedov", "Chimyan", Hazel("Orekhovaya Roshcha"), "Yalangach", "Vodil" and others in 1921-1952 were analyzed.

KEYWORDS: *Sanatorium-resort, Shakhimardan, Pedov, Chimyan, Hazel (Orekhovaya Roshcha), Yalangach, Vodil, Aktash, Balandchaqir, Khoja Silk.*

DISCUSSION

On December 15, 1921 the Council of People's Commissars of the RSFSR and the Central Executive Committee of the People's Commissariat of Health of the RSFSR gave the right to do[1]. The resolution also provides for the allocation of a reserve land fund when allocating land for resorts.

It is expedient to periodically analyze the sanitary situation in the resort "Shakhimardon". In the first years of its existence, Shakhimardon, the first resort in Uzbekistan, did not have a district to protect it. The water supply of the resort is provided by springs. These springs were located outside the resort area. Therefore, no one was responsible for protecting these springs from pollution. The need for sanitary protection of the resort "Shakhimardon" was also due to the fact that it is located between two villages - Shakhimardon and Jordan. In particular, the village of Shakhimardon is a large village, where many people, including patients, come from Fergana in the summer. The distance between the village of Shakhimardon and the resort was 1.5 km. In addition, there was a breeding ground for mosquitoes along the White River, which flows through the resort area, which increased the risk of developing malaria. Therefore, there was a need to take measures to improve the sanitary condition of the resort area and surrounding areas. These areas are protected by the

county without the consent of the Ministry of Health, including deforestation and orchards, digging ditches, pits and wells, as well as mining natural resources, blocking water sources, establishing waters and lakes, planting rice, establishing factories and plants, It is forbidden to carry out various constructions[2].

Shohimardon resort was built in the early 1930s, where fruit trees were cut down and there were no shady places due to the lack of trees in the area. Since 1934, trees have been planted and a flower garden has been established in front of the main building of the sanatorium [3].

In 1935, as a result of water supply and bacteriological study of the Shohimardon resort, the water flowing from the Dugoba River at the head of the canal, behind the village of Yordan (140 farms, a village of 625 people), was clean and polluted before it reached the resort. This pollution was caused by the dumping of waste in densely populated villages [4].

That is why low quality water flowed to the resort. These data indicate that the supply of drinking water to the resort is unsatisfactory. On top of that, if we also take into account the bathing of the healers and vacationers in this water, we can see that it is in a much worse sanitary condition.

The accommodation of the resort consists of 8 houses, in the main building there are places for 180 people, in the 1st building there are 250 places, in the



2nd building there are 20 places for patients with open tuberculosis. Along with the laboratory and pharmacy, an administrative building, apartments for staff, 2 buildings for utility services in the kitchen were built. On the ground floor of the main building there is an X-ray machine, an X-ray laboratory and a physiotherapy room. The wards were designed for 2-6 people and each had 8 square meters of space. They needed enough light and fresh air. The living room, kitchen, hallways, decorated with flowers were clean, beautiful and comfortable. There was a flower garden in front of the main building and a fountain was installed in the middle of it. The resort is also supplied with electricity, ie connected to a hydroelectric power station. Only patients with pulmonary tuberculosis were treated at the resort[5].

The resort also had cultural facilities, including a sound cinema. In addition, artists, musicians, singers from Fergana and Tashkent were invited, performances were staged, various evenings were organized and lectures were given. Sports games are also organized. In addition, the resort had a library with about 1,000 books in Russian and Uzbek. The library subscribes to magazines published in Moscow and Tashkent. The resort was open from May 1 to November 1. On the other hand, its climatic conditions allowed it to work all year round, but the lack of a stone road from Fergana prevented it from working all year round[6].

In 1928, some buildings of the Chimgan sanatorium in the Tashkent region fell into disrepair. The wall of the building was made of raw brick, which was cracked and in danger of collapsing. The commission that inspected this sanatorium proposed closing it in 1928 and relocating its patients to another building[7].

In Pedov, none of the buildings built by Bunin in 1936 have survived, and only a few of the 12,000 trees he planted have survived, and the rest have been used for firewood. The results of metrological observations made by experts of that period show that the hottest month here was July, when the average temperature was 27 degrees. Also, in January, which was considered the coldest month, it was 3 degrees. In addition, there was no strong wind like in other places in the Fergana Valley. There was dry air in Pedov, especially during the summer, and the annual rainfall was 200 mm. These cases indicate that there is a need for trees in the sanatorium. Malaria is common along the Sokh River. In this area, bull disease was prevalent among the population. The proximity of Rishtan to Pedov helped the resort to provide dairy, meat, vegetables, fruits and the necessary manpower [8].

The building of the sanatorium "Orekhovaya Roshcha" was built to the required level and equipped with the necessary equipment. The sanatorium had an X-ray room, a clinical laboratory and a surgery room. One of the disadvantages of this

sanatorium was its proximity to the road and pollution from passing vehicles. Therefore, in the mid-1930s, the issue of closing this road was raised [9].

Children's TB Sanatorium No. 1, located at 16 Krupskaya Street, Andijan, was established in 1934. The sanatorium is located on the outskirts of the city and has a land area of 1.5 hectares. Its territory was well landscaped, with many flowers, playgrounds and sheds for recreation. The sanatorium building has 580 square meters, of which 173 square meters are divided into wards and the wards are exposed to sunlight. There were a total of 6 wards, one of which was reserved for patients with meningitis. There was also a spinal function operating room. There was also a separate kitchen, room for play and a 4-bed isolator, but no quarantine department [10].

In 1935, a water supply system was laid from Surkhandarya to Hava Mountain. There was a laboratory, a shop, barracks for workers, and repair shops. In 1936, fresh water had to be brought 18 kilometers from the Kogitang River to provide drinking water to patients at the Khoja Ipak resort. Water for household needs is supplied from local water sources. In order to get to this water source from Dehkanabad, it was necessary to widen, clear, level and build a bridge with a distance of 51 km. The food supply of the resort was provided by the villages of Kogitang and Dehkanabad, as well as by the resort's own farm. From an epidemiological point of view, the proximity of water sources is recognized as good. However, the lack of fresh water led to the conclusion that the area could not be used for the construction of a balneological resort [11].

Among the sanatoriums close to the city is the Naked Tuberculosis Sanatorium. It is located 6 km north of Tashkent and had a very large orchard. The sanatorium consists of a two-storey terraced building, which allows patients to spend their time in the fresh air during the day during the summer. Next to the corpses where the patients lived, there were carpentry, metalwork, cover, and basket-making workshops. These workshops gave patients the opportunity to change their profession as needed. According to experts of that time, this labor process gave effective results in the treatment process. This sanatorium served patients all year round and had 50 beds[12].

The Aktash resort has treated 200 people in one course. Patients were housed in three two-story wooden buildings and seven two-bedroom cottages. Each building had 34 rooms for 2-4 people. It is also connected to the mains to provide electricity. At the spa, water, air and sun served as healing factors. The health center had an air hospital, an electric and light hospital, a hydrotherapy room and a swimming pool. For hydrotherapy, the water is heated using a solar device. There was also a clinical laboratory at the Aktash resort. In Aktobe, the treatment season lasted



from May 15 to September 15 -5 months, and the course of treatment was one month [13].

In the 1950s, the Vodil sanatorium had four dormitories for 260 people. There is also a winter building built in the local type, where the staff lived. As there was no winter building in the sanatorium, the children were placed in the building where these employees live. This did not meet the sanitary requirements at all, and the regional sanitary station was against placing children in this building. All the buildings in the sanatorium were in need of capital and current repairs. Beds are placed in the gardens during the summer. The sanatorium was forced to rent out private apartments due to lack of accommodation for medical staff. So the sanatorium staff wrote a letter to the Ministry of Health in 1952 asking for a house. But their requests are denied. The kitchen in the sanatorium consisted of four rooms, which also needed major repairs. The sanatorium had a confectionery shop where bakery products were made. Because the sanatorium did not have a place to eat in the winter and summer, the children were forced to eat under the vines in the summer and in the beds in the winter. The land area of this sanatorium is 3.45 hectares and is located 0.5-1 and a half km from the district center and the collective farm. The air here was fresh mountain air and the sanatorium area was far from transit roads. It was extremely difficult to get here in the spring and winter months. The sanatorium used running water as drinking water, had no sewer pipes, and was electrically lit. The sanatorium's 35-acre subsidiary farm allowed it to provide enough fruit. There was also a livestock farm on this subsidiary farm, but the children were not adequately provided with milk due to the lack of dairy cows. This sanatorium is supplied with food by the city food trade. The children in the sanatorium lacked outerwear and underwear, shoes, and bedding. There was also a lack of chairs, beds, wardrobes, bedside tables, kitchen furniture and dishes. Despite repeated appeals to the Procurement Department of the Ministry of Health and the regional health department, these items were not provided. There have been interruptions in the supply of medicines, especially penicillin, fish oil, and alcohol[21].

By the 1950s, the need for spa treatment had increased significantly due to the development of industry and agriculture in the world and the relatively high standard of living of the population. In addition, the accommodation in the resorts, their equipment, sanitation, roads, vehicles required radical improvement[22].

In the 1950s, the provision of children's sanatoriums with equipment, especially bedding and bedding, increased. However, all sanatoriums lacked warm clothes and shoes, kitchen utensils and furniture during this period. The sanatoriums did not have equipment such as carpets, curtains, mirrors. Most importantly, most of these sanatoriums do not

have X-ray machines and physiotherapy rooms, such as Balandchakir sanatorium in Tashkent region, children's sanatorium No. 1 in Andijan, Gova sanatorium in Namangan, sanatoriums in Khorezm and the USSR[23].

In 1953, in the children's tuberculosis sanatorium "Orekhovaya Roshcha" was allocated 8 rubles 24 kopecks per child per day, the daily food norm was set as follows: 75 g of cereals, 400 g of potatoes, 350 g of vegetables, 60 g of sugar, 180 g of meat and fish, 500 g milk, 20 g butter, 40 g melted butter[24]. The food in this sanatorium is of high quality and delicious. There are no cases of food poisoning in this sanatorium. The dietitian and nurse were responsible for arranging the meals. In addition to the common table, separate tables have been set up for children with kidney disease and gastrointestinal disease, as well as for children who need a strong diet. In 1954, in general, the sanatorium was satisfactorily supplied with food. However, 17,470 kg of potatoes and 78,558 eggs were harvested less than needed. During the winter, patients were provided with fish oil, juice and vitamins 2 times a day[25].

Food supply of sanatoriums in Uzbekistan was entrusted to the regional Food Trade. This work was not carried out by a private commercial establishment, which had a negative impact on food supply. In particular, there were interruptions in the supply of meat, butter and fish. Condensed milk, salmon and poultry were not brought in at all. In 1952, no sanatorium received a single kilogram of potatoes from the state supply. Despite repeated appeals to the Ministry of Trade of the Uzbek SSR about the poor state of food supply to sanatoriums, they were unsuccessful. 16 rubles 78 coins allocated for the treatment of patients with tuberculosis was not enough[26].

The children's sanatorium in Andijan, which specializes in the treatment of tuberculosis, was designed to accommodate children between the ages of 3 and 16. In 1953, children were treated at this sanatorium using movement, water therapy and aerotherapy. The sanatorium had a physiotherapy room and a pneumothorax room. However, due to the lack of an X-ray machine, the regional TB dispensary apparatus was used. It was located next to the dispensary. Although the food supply was satisfactory, the type of food was the same. In 1953, potatoes were not delivered to the sanatorium at all, and 10 and a half thousand eggs and 1,400 kg of meat were received less than the specified amount. Butter is sometimes replaced with melted butter or lard. Sour cream and cottage cheese are rarely obtained. Several appeals were made to the provincial executive committee and the party committee regarding the inadequacy of food supplies, but this appeal went unanswered. The sanatorium was not adequately equipped with beds and bedside tables, as



well as tables, chairs, and bookshelves. The children also lacked outerwear and shirts. The medical base provided the sanatorium with satin underwear, but knitted underwear was not brought in at all outerwear, not given at all, from shoes are sometimes given rubber slippers for teenagers[27].

Children's bone tuberculosis sanatorium of Namangan region is located in Uychi village of Uychi region, 18 km from Namangan city. Although this sanatorium is a children's sanatorium, in fact, 52% of the patients were under 18 years of age, while 48% of the patients were between 18 and 45 years of age, i.e., adults. The sanatorium was designed for 50 beds, and in May-October 1953 the sanatorium treated 74 patients. The sanatorium was located in the Uychi district hospital and had 10 wards. It had no plumbing, sewer, and electric lighting systems. Built in 1936, the sanatorium used 12 furnaces to heat the building. This sanatorium also did not have an X-ray room, so the Namangan Tuberculosis Dispensary and the Namangan Regional Hospital used X-ray rooms. During the summer, the sanatorium also had a dental office [28].

In the city of Andijan, the land of the 3rd children's sanatorium was 0.5 hectares, which had an orchard and a sports field. The main building consisted of 5 rooms, 2 kitchens, an insulator and a chief doctor's office. In 1957, a 60-square-meter hall, a 12-square-meter laboratory and an 8-square-meter toilet were built. There was also an 80-seat shed for relaxing in the fresh air, a summer kitchen and tables for playing board games. The sanatorium was electrically lit and heated by a coal stove, which had no running water or sewage. In addition, the sanatorium is not adequately equipped. Due to the lack of an X-ray machine, it used the apparatus of the regional primary dispensary, which is located three kilometers away. Here, too, the children were fed 5 times. Products are often brought in fresh condition and in sufficient quantities. The sanatorium organizes physical education, drama, choir, chess, billiards, volleyball sports and handicraft clubs. Films were also shown at the expense of parents. The sanatorium also had a library. The sanatorium was hampered by the lack of an X-ray machine, insufficient usable space, and the lack of plumbing and gas. In addition, a car was needed to transport food and transport patients [32].

The sanatorium in Namangan, Namangan region, consisted of seven rooms. On average, one child had 1.5 square meters of space. The sanatorium is heated using Dutch stoves and lit by kerosene lamps. In the summer, insufficient ventilation was used as well as drinking water. The sanatorium also did not have a laboratory, X-ray, dental treatment, physiotherapy rooms, a room for carrying out bonding work, a porch and a disinfection chamber. The kitchen of the sanatorium consists of one room and is adequately equipped [33].

In 1950-1952, the Namangan Regional Tuberculosis Dispensary was repaired and the Children's Tuberculosis Sanatorium was relocated there. Prior to that, it was located in the same building as the kindergarten. In the 1950s, a sanatorium for adults with tuberculosis was not established in the Namangan region[34].

In the early 1950s, there were 4 children's tuberculosis sanatoriums in Fergana region, and the TB sanatorium in Fergana had a well-planted area, many fruit and ornamental trees, and flower gardens. This sanatorium was fully equipped with the necessary equipment. The children's food supply was satisfactory, they weighed an average of 1.3 kilograms. In 1952, a bathhouse, shower and laundry room were built in the sanatorium funds allocated. In the summer, children are outdoors with a day off, with playgrounds, kitchens and even sleeping areas set up for them. However, this sanatorium was not well equipped and they were in a state of disrepair. Also, the children in the sanatorium were not well provided with outerwear and underwear, hats, and shoes. Sanatorium No. 2 in Kokand also lacked outerwear and footwear for children[35].

In short, the development of the activities of sanatoriums and resorts depended on the organization of economic activities in health facilities and the issue of personnel.

Sources indicate that the conditions in the sanatoriums and resorts established in the early years of the Soviet era were insufficient. In particular, one of the biggest problems was the issue of providing sanatoriums and resorts with clean drinking water. In the 1920s and 1950s, most sanatoriums used mainly spring and canal water as drinking water. These water sources were used not only by these institutions, but also by the population of the region. In some cases, this has led to pollution of springs and streams. Although attempts were made to bring tap water to sanatoriums and resorts during the study period, most of them failed. According to experts of the time, the main reason for this was the fact that sanatoriums and resorts were located far from mountainous and tap settlements. After the 1950s, positive progress began to be made on this issue[36].

Sanatorium and resort buildings were in poor condition in the early years of the Soviet era. Because these buildings were first the dormitories of the employees of some organization and later used them as a sanatorium building. In addition, most of the buildings were built of straw and raw bricks, and the construction quality was not good. However, due to the small size and number of buildings of this type, the number of visitors during the winter has decreased. During the summer, special beds are arranged in the courtyards of health resorts.

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