



## **MEDICAL INFRASTRUCTURE IN VILLAGES OF SURKHONDARYA REGION**

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<b>Article history:</b>	<b>Abstract:</b>
<b>Received:</b> 26 <sup>th</sup> May 2025 <b>Accepted:</b> 24 <sup>h</sup> June 2025	<i>During the years of independence, strong medical protection of the population became the main, priority direction of state policy. The only goal pursued by all the reforms implemented in the Republic of Uzbekistan over the past years was to create a normal medical culture for citizens, to provide continuous economic support to the underprivileged and needy part of the population.</i>

**Keywords:** *medicine, Surkhondarya region, rural medical center, personnel issue, village.*

### **INTRODUCTION.**

During the years of independence, strong medical protection of the population became the main, priority direction of state policy. The sole goal of all the reforms implemented in the Republic of Uzbekistan over the past years was to create a normal medical culture for citizens and provide continuous economic support to the underprivileged and needy part of the population.

### **RESULTS AND DISCUSSION**

In Uzbekistan, in 1991, the rural population accounted for 59.5 percent of the total population (20.6 million people), while in 2002 this figure was 62.9 percent, and in 2005 it was 63.7 percent[1]. In 1992–1996, partial attention was paid to further improving the provision of medical services to the population in rural areas, improving the functioning of first aid stations, and feldsher-obstetric stations. At that time, there were 450 rural district hospitals, 6,500 feldsher-obstetric stations, and 1,400 rural outpatient clinics[2]. In 1994, 451 district and rural district hospitals operated in the republic. 58–59 percent of hospitalized patients were treated mainly in rural district hospitals. Also, about 70 percent of those treated were hospitalized in central district, village and district hospitals. In 1993, the number of visits to rural outpatient clinics reached 20.6 million people[3]. In 1998, 1,122 rural outpatient clinics operated in Uzbekistan[4], but by 1999 their number had decreased to 1,015, and the number of FAPs had decreased from 4,495 to 2,098 during these years. On the contrary, during this period, the number of rural medical stations increased from 982 to 1,262. During this period, 444 hospitals operated in villages. The majority of hospitals were located in Kashkadarya region (46), Surkhondarya region (59), while there were fewer in Khorezm region (15), and Bukhara region (12)[5]. In order to improve the provision of affordable and high-quality medicines to the rural population, in

August 2011, social pharmacies were established under 291 rural health centers, bringing their total number to 771[6]. The number of visits to rural health centers by the population has also increased. For example, this indicator increased from 64,715.4 to 82,106.1 during 2008–2012[7]. With the start of modern health facilities in villages, it has become possible to diagnose diseases early. Another aspect is that people who previously went from villages to hospitals in the city center to find out the cause of their illness and get treatment now first turn to doctors in their villages. In Uzbekistan, in 2017–2018, inefficient rural medical points at the primary health care level in villages were reduced, and 793 rural family polyclinics were established instead.

In accordance with the Decree of the Cabinet of Ministers of the Republic of Uzbekistan "On the State Program for the Development of Rural Social Infrastructure in the Republic in 1999-2000" adopted on May 21, 1996 and the Decree of the President of the Republic of Uzbekistan "On the State Program for the Reform of the Healthcare System in the Republic" dated November 10, 1998, in accordance with the resolutions of the regional khokim No. 156 dated June 13, 1996 and No. 304 dated November 30, 1998, programs were developed to reform the healthcare system in parallel with the development of rural social infrastructure in 1996-2000 and 2001-2005.

Based on the above programs, 149 rural medical stations and 1 city hospital were established in the region during 1996-2005[8]. Of these, 97 were built as new facilities and 53 were renovated as existing treatment and prevention facilities[9]. According to the plan of this state program, in 2005, the state allocated 278 million soums for the construction of 11 rural medical stations in the region, and 296 million 500 thousand soums were spent on their construction. Of this, 7 million 500 thousand soums were spent on the



purchase of equipment, hard and soft equipment, in addition, 18 million 100 thousand soums of repair work was carried out by the International Organization "Aktet". For example, the "Mustaqillik" rural medical center in Angor district was renovated for 6 million 200 thousand soums, and the Pashkhort rural medical district hospital in Sherabad district was renovated for 4 million 700 thousand soums. During this period, 85 hospitals served the population of the region, with a total of 8,625 beds in these hospitals[10]. Along with the reform of the healthcare system, certain achievements were also made in protecting the health of the population and extending life expectancy.

In Surkhandarya region, the focus on medical specialists has increased somewhat since independence. Their experience has been generalized, and connections with the republic's scientific and methodological centers have been strengthened. In 1990, 3,399 doctors with higher education worked in the regional health system, while by 1991 this figure had reached 3,549. In particular, in the Altynsay district, while in 1990 there were 157 doctors with higher education, their number had reached 170 by 1995[11]. The increase in the number of medical workers, along with improving the service provided to the population, also created the opportunity to establish new treatment departments and improve the quality of medical services.

In 1990, there were 123 doctors with higher education in Angor district, 131 in Boysun, 131 in Muzrabot, 357 in Denov, 230 in Zharkurgan, 208 in Kumkurgan, 104 in Kyzyrik, 331 in Sariosiyo, 146 in Sherabad, 248 in Shorchi, 885 in Termez city, and 179 in Denov city. By 1991, there were 128 in Angor, 144 in Boysun, 110 in Muzrabot, 365 in Denov, 221 in Zharkurgan, 313 in Kumkurgan, 105 in Kyzyrik, 271 in Sariosiyo, 152 in Termez, 165 in Uzun, and 179 in Sherabad. 171. In 1991, the number of hospitals was 107, with 16,185 beds[12].

At the end of 1991, there were ninety medical workers per ten thousand inhabitants in the region, or only 29.5 percent of the norm. The situation was deplorable in the districts of Boysun, Muzrabot, Kyzyriq, and Altynsay, where there was a shortage of specialists serving the population, and there were few experienced specialists. In 1992-1993, much work was done to increase the population's population and improve the health of the population. Favorable conditions for patients were created, and in 1992 there were 81.5 beds per ten thousand people of the region's population, and by 1993 it was 79.3 percent. If we look at these indicators in the example of the regions of the

region, in 1992 it was 56.6 percent in the Altynsay district, 61.3 percent in the Angor district, and in 1993 it was 65.5 percent in the Altynsay district, 58.6 percent in the Angor district. It is clear from this that as a result of the growth of the population in the region, the number of beds per capita was low in percentage terms[13].

That is why, from the first years of independence, the government of Uzbekistan tried, firstly, to change the attitude of citizens to these issues, and secondly, to create a decent lifestyle for them in the difficult conditions of the transition period. First of all, it was necessary to prevent the mass impoverishment of citizens. And for this, it was necessary to solve the existing medical problems, the problems of social protection of the low-income and vulnerable part of the population.

At the same time, these problems had to be solved in harmony with the transition to market relations. A state is considered humane only if it can protect its population. The state must provide timely assistance to people, especially those in need, socially disadvantaged groups, orphans, children, students, pensioners and the disabled, single mothers, large and low-income families"[14].

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On the initiative of the Ministry of Health of the Republic of Uzbekistan, a conference of medical workers was held in Andijan region on May 30-31, 1994, at which one of the most urgent problems of the transition to market relations was discussed: "The quality and culture, level, and efficiency of medical care" was considered and discussed. Representatives of doctors from Surkhandarya region also participated in this conference and exchanged views with doctors from other regions of the republic. Measures were developed to eliminate existing shortcomings and problems in consultation. In 1994, 163 hospitals were operating in the republic, and 15 central hospitals and 451 district and rural district medical stations were operating in Surkhandarya region. Rural residents accounted for 58-59 percent of patients treated in hospitals each year. About 70 percent of patients received treatment in central district, rural and district hospitals. In 1995,



visits to rural outpatient clinics reached 20.6 million people[15].

On the basis of the Resolution of the Cabinet of Ministers of the Republic of Uzbekistan No. 182 "On the establishment of rural medical centers in Uzbekistan", adopted on July 24, 1996, important work was also carried out in the regional health system. During these years, a number of works were carried out by the regional khokimiyat health department and responsible institutions to provide the population with high-quality and demanded medical care. By implementing the government resolution in the field of developing the rural health system, certain results were achieved. In 1996, 16 new-type rural medical centers were built in the region instead of 13 rural medical centers. In addition to those specified in the program, 2 rural medical centers were put into operation in Angor district[16].

In 1997, there were 109 hospitals in the regional health system, the number of treatment places in which reached 8,784. As a result, the region had an average of 59.6 hospital beds per 10,000 inhabitants. In 1997, 6 rural medical clinics and 16 rural medical stations were built and put into operation in the region. Also in the same year, outpatient and polyclinic centers were established in the region, serving 10,000 inhabitants. These centers were designed for 88.4 beds[17]. In 1997, a 120-bed outpatient clinic and a new 33-bed medical facility were built and put into operation in Boysun district, a 160-bed outpatient clinic in Jarqurgan district, a 130-bed outpatient clinic in Kumqurgan district, a 60-bed outpatient clinic and a 120-bed hospital in Sherabad district, and an 80-bed outpatient clinic in Shorchi district[18].

As a result of the work carried out, the system of medical protection of the population in Surkhandarya region improved, and people's living conditions improved. In order to improve medical services, certain successes were achieved in solving the problems of clean drinking water for the population. For example, in 2006, 3.9 billion soums were allocated from the republican and local budgets to provide the population with clean drinking water in Surkhandarya region. These funds were used to dig new water wells, put out of service water wells, reconstruct drinking water networks, and put new ones into operation.

As a result, 113 rural medical stations in the region were repaired and put into operation at the expense of 504.2 million soums allocated by sponsors. In 2007, 23 new water wells were built in 75 rural medical stations at the expense of 450 million soums allocated for these purposes, 26 water wells were

repaired, and 121 kilometers of water networks were built. Thanks to such measures, the need for clean drinking water for 115 thousand residents was met[19].

During the period under study, the medical care provided to the rural population was still not of high quality and at a high level. Maternal and child mortality is also high, and the number of infectious and tuberculosis diseases and the number of disabled people has increased. We can see an increase in tuberculosis among the population of the region, as well as an increase in the number of gastrointestinal, anemia, nervous, musculoskeletal, skin and other diseases. For example, during this period, anemia was detected in 90-95 percent of the rural population of the Republic, vitamin deficiency in 45-50 percent of children, and developmental delay in 15 percent of children[20]. During this period, outpatient and clinical care for the rural population was at a low level, and out of more than 160 million appeals to medical institutions, 53.4 million were appeals to feldsher-obstetric points[21].

On the initiative of the Ministry of Health of the Republic of Uzbekistan, a conference of medical workers was held in Andijan region on May 30-31, 1994, at which one of the most urgent problems of the transition to market relations was considered and discussed: "The issue of further improving the quality and culture, level, and efficiency of medical services for the rural population." Representatives of doctors from Surkhandarya region also participated in this conference and exchanged views with doctors from other regions of the republic. Measures were developed to eliminate existing shortcomings and problems in consultation. In 1994, 163 hospitals operated in the republic, 15 central hospitals in Surkhandarya region, and 451 district and rural district medical stations. Rural residents accounted for 58-59 percent of patients treated in hospitals each year. About 70 percent of patients received treatment in central district, rural and district hospitals. In 1995, visits to rural outpatient clinics reached 20.6 million people[22]. A number of important measures have been developed to reform the existing infrastructure in the region, provide medical services to the population, organize a new service of medical personnel with modern knowledge, build hospitals to meet modern requirements, and provide them with sufficient medicines and medical equipment. In particular, in 1995, the provision of medical services to the population in the region significantly improved. The number of treatment facilities has increased somewhat, as can be seen from the following examples: for example, the number of hospital beds in 19 hospitals in the region



amounted to 2,100, 350 in 4 hospitals in Denov district, 400 in 2 hospitals in Shorchii district, 480 in 2 hospitals in Sherabad district, 490 in 3 hospitals in Kumkurgan district, 520 in 3 hospitals in Zharkurgan district, and 280 in 2 hospitals in Boysun district[23]. During each visit of the President of the Republic of Uzbekistan Sh.M. Mirziyoyev to the Surkhandarya region, special attention is paid to the issues of protecting the health of the population of the region and strengthening the material and technical base of treatment and prevention institutions. During the four visits carried out during 2017-2020, a total of 41 tasks were given in the field of healthcare. In particular, in order to further develop the specialized services provided to the population, during a visit to Surkhandarya region on February 10-11, 2017, an assignment was given to establish the Termez branch of the Republican Specialized Eye Microsurgery Scientific and Practical Medical Center on the basis of the regional perinatal center, and within the framework of the investment program, 7.5 billion soums were allocated for its complete reconstruction, and in accordance with the order of the Ministry of Health No. 630 and the resolution Q-57 of the Termez city governor, a 70-bed Republican Specialized Eye Microsurgery Scientific and Practical Medical Center was established in January 2019.

#### **CONCLUSION.**

The effectiveness of the reforms implemented in each area is closely related, first of all, to its material and technical base. The economic difficulties of the first years of independence somewhat delayed the renewal of the material and technical base of medical institutions. One of the main problems in optimizing the work of rural medical stations was the lack of treatment beds. Later, in Uzbekistan, certain measures were taken to allocate funds for the healthcare sector, provide medical facilities with buildings and modern medical equipment. As a result, the quality of medical services provided to the rural population improved. Measures to radically improve the activities of rural medical stations and strengthen their material and technical base were taken to a new level.

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