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HISTORICAL SCIENCES

CHILDCARE IN THE SYSTEM OF LOCAL MEDICINE IN KATERYNOSLAV PROVINCE IN THE EARLY 20TH CENTURY

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ABSTRACT

The article is concerned with childcare activities carried out in the early 20th century by district councils of Katerynoslav Province in such fields as establishment of nursery asylums for rural children and orphanages for abandoned children and preventative nursing care of rural children's health. The authors consider the methods of solving these problems, the success and the challenges involved as well as their positive impact on the lives of children living in the region and the contribution paid by local medical practitioners to the endeavor of helping children.

Keywords: Katerynoslav Province, childcare, local sanitation, nursery asylums, local schools.

Relevance of the research. Now that Ukraine is being faced by Russian military aggression, the problem of social care of the population is becoming extremely vital. The problem is especially important to children who need permanent care and creation of conditions for their development.

The important element of this problem is care of children's health. It makes sense to go back to historical experience of the society in this field when the system of social care of the population's health was created on the territory of Ukraine right from scratch simultaneously with emergence of district councils. District councils were given new authority though they had to solve most of the problems on their own.

There was no specialized organization concerned with care of children's health but this did not mean that no preventative measures were taken at all. This way or the other, local doctors were taking measures in various fields, such as care of rural children, care of abandoned orphans and care of schoolchildren's health. Research of the success and the failures involved will help better understand the problems in creation and development of the childcare system as well as understand its significance for the society.

Methodology of the research. In the article suggested, childcare activities carried out by district councils of Katerynoslav Province in the early 20th century are viewed in the context of regional studies on the basis of the socio-cultural approach.

The scientific novelty of the research lies in the fact that the aforementioned title has not been highlighted in historical literature before and is considered with the help of materials of Katerynoslav Province council. The materials involved present factual information about childcare in the early 20th century. Most of the resources concerned with the title are reporting of the province's district councils where doctors report

of the problems arising under childcare and of possible solution methods thereof. Those problems were also under consideration at district councils' meetings. They were under consideration at medical conferences and were highlighted by the province's press.

Analysis of the latest research and publications.

In the theses and articles concerned with history of activities carried out by district councils of Katerynoslav Province, the aforementioned title has not been specially highlighted. Quite a few aspects of the title have been highlighted in a number of studies. The dissertation by Z.H. Huzhva in local sanitation considers history of inspection of schools carried out by district councils. The thesis by O.V. Saraieva concerned with activities carried out by district councils of Katerynoslav Province in the field of social care partly highlights the process of establishing local nursery asylums. S.S. Arabadzhy analyzes particular aspects of children's everyday life in local schools located in Greek villages of Mariupol Vicinity. Insufficient highlight of the problem of history of district councils' supervision of childcare has determined the necessity of its highlight in the article suggested.

The goal of the research: analysis of sanitary and disease prevention activities carried out by district councils in the field of childcare, highlight of the historical aspects of public management of Katerynoslav Province and acquisition of useful historical experience of providing aid for the population.

Presentation of the main material. Among the activities carried out by local medical care divisions of Katerynoslav Province's district councils in the field of health care of local children in the early 20th century was establishment of the so called "nursery asylums" for rural children. Those were institutions set up at the time of season-related farm works aimed at care of chil-

dren whose parents worked on the farms. In local doctors' view, establishment of those nursery asylums would help combat the increasing the child mortality rate, identify the causes thereof as well as research the conditions of child death and prevent possible accidents that may arise when children are left without care [1, p.1129-1130].

The first nursery schools in Katerynoslav Province appeared in 1899 but there were quite a few of them (only 2). In the following years, the number of nursery schools was increasing and in 1900 – 1903, 81 season-based nursery asylums were established. There was also an increase in the number of children held therein (in 1900 the nursery schools boarded 505 children, in 1901 – 1987, in 1902 – 3782, in 1903 – 2617) [1, p.1130; 2].

The local authorities were trying to create the most favorable conditions for children's health in the nursery schools. The headmasters were taking measures for children to get washed several times during the day, for little children to be washed every day and for senior children to be washed twice a week, thus inhibiting useful hygienic habits. Children had four meals a day. Special meals were arranged for nurslings who were given boiled milk and semolina porridge. Nursery schools offered active games in the open air, books were read and fairy-tales were told [3, p. 7-8]. Nursery schools were not afraid to admit children suffering non-infectious diseases. Thus, in 1905 the nursery schools located in the village of Chernukhin of Slovianoserbsk Vicinity admitted children suffering with rickets, bronchitis, gastric enteritis and other non-infectious diseases. During the treatment courses, some of them were even cured [3].

The reports also have it that a wide range of activities carried out by nursery schools that were not institutions aimed at nursling childcare only. In 1913 in Verkhniiodniprovsk Vicinity, among 867 children boarded by nursery schools, 405 children were as little as 5 years old and older, which emphasized their function as institutions aimed at care of rural children as a whole. Sometimes those institutions boarded even teenage children (10-year old ones and older), though they were relatively small in number (2 % of all the children living in the province in the period of 1900 – 1903).

In spite of the population's positive response and almost the zero mortality rate among children in many institutions, many of those institutions failed to be reestablished and their number was decreasing. Local doctors identified a number of factors that influenced the process. Firstly, villagers did not trust the institutions because they were free of charge (not knowing that they were in fact funded at the cost of taxes) and were afraid to take advantage of their services because they thought they would have to pay for them in future. Secondly, establishment of new institutions often depended on the local initiative demonstrated largely by local intelligentsia (teachers, doctors and priests) who were the minority [3, p. 42-43].

If there were no initiators, there was no one to attend to organizational activities. Thirdly, very often there were not enough premises for boarding children and when there were some premises, it was impossible

to make a deal with the proprietor. Especially acute was the problem of schools' grounds having enough accommodation for children but owned by another agency whose representatives feared lest the building get damaged by children (there is an example of the village of Mezhyrichchia where the school's trustee closed the building on the lock on key without warning). Fourthly, there was a problem of inconvenience for villagers caused by disconformity between the nursery schools' opening hours and the time of field works and remoteness of their location from the territories where most of population lived [1, p. 1132-1133].

The financial support of the nursery schools was adjusted at the province's level through allotment of funds from capital meant for insurance. Nursery schools received financial aid neither from the district's government nor from the population itself (there were quite a few cases of charity from the population). Even long after nursery schools became well-known to the population, they were funded at the cost of district councils, which aroused their managements' dissatisfaction. When in 1910 the district council allotted 500 rubles for establishment of nursery asylums in Katerynoslav District, it was emphasized that those funds were to be allocated only for populated areas whose residents specially asked to establish those institutions [4, p. 72-74].

In the last years of district councils' existence, some districts of the province managed to involve in establishment of nursery schools newly established sanitary care divisions composed of representatives of local populations. Those sanitary care divisions received financial support largely from district councils or from the Province's authorities. In 1915, they set up 6 nursery schools of the sort in Katerynoslav District [5, p. 194-195]. Their activities were even more successful in Verkhniiodniprovsk District, where out of 30 nursery schools established that year and attended by 1860 children, 14 were established by sanitary care divisions and 9 were established by local general practitioners. Active establishment of those institutions in some regions was caused by lack of a significant number of male population mobilized for the war, due to which women had to do more fieldwork. Activities carried out by nurseries established by sanitary care divisions were inspected by sanitary doctors who provided counseling in adherence to conditions conducive to children's health [5, p.145-146].

In considering the activities carried out by local medical care and sanitation divisions in the field of childcare, one must tackle the problem of the district councils' care of abandoned infants. Care of orphans as well as other activities concerned with health care were entrusted to district councils, the system being inherited from social care orders after the reform of district councils in 1864. At the beginning, like in the pre-reform period, aid for abandoned children was linked to their admission to an asylum owned by a province-operated hospital. Then, orphans were already given away to rural women so that they take care of them. In the late 1880s, the situation began changing: in 1888, asylum-kept children began being examined by a doctor who

took care of children given away to a village. The district councils' expenditures for maintenance of asylums were increased (597 rubles in early 1880 and 3.000 rubles in 1889).

In 1904, the asylum was transferred to Katerynoslav childcare community dealing with foundlings and orphans. However, this sort of childcare brought about truly catastrophic consequences. None of the asylum's workers was trained to take care of nurslings; none of them could state correct diagnoses when children fell ill. Shortly after admission, children were given away to rural families on patronage with no sufficient medical care. In 1912 by the decision of the district council's assembly, the asylum was again transferred to the district council's control (the maintenance expenditure already equaled 17.000 rubles) [6, p.173-175].

In order to take care of the children in the asylum, the district council invited a doctor, medical nurses having education in midwifery and surgeon's assistants for medical procedures. The asylum changed its old, dark and damp building for a new, spacious and light one at the premises of the local hospital. It was also equipped with a room for sterilization of milk and a warm bathroom. The secret of babies was replaced by open admission where; whenever it became possible and if necessary, mothers could lactate their children (over the first year 126 children were in the district council's control out of 975 who were admitted together with their mothers). Children admitted to the asylum were medically examined (in particular, children were diagnosed for syphilis that managed to be prevented with some children) and were lactated during 2 – 2,5 months). When children became stronger after that period, they were given away to desirous rural families if children were not ill with anything [7, p. 13-14].

The Province's district council also tried to expand the number of villages receiving children by means of familiarizing them with the rules of patronage and adjusting surgeon's assistance outlets for children and mothers. For the two years of district councils' control of the childcare system, 9 villages were added where surgeon's assistants took care of children. The district council also tried to boost financial incentives for villagers receiving children by establishing in 1913 a bonus in the amount of 10 rubles for female villagers who received children younger than 4 months old and were raising them during a year and by raising the monthly childcare bonus since 1914. The district council sent 9-year old children raised by villagers to a one-class primary school for the training period of 4 years. Then children who excelled in learning were given an opportunity to learn at a two-class ministerial college. Besides, those 14-year old children obtained passports of Katerynoslav philistines [6, p. 191-192].

According to statistics, return of the district councils' control had a positive effect on the condition of the asylum and reduced the truly catastrophic child mortality rate (over the last year of maintaining the asylum by the society of good will, the mortality rate equaled 76,6%, in the year of the asylums' transfer to the district council it equaled 38,5%). Due to the activities carried out by local doctors who were maintaining the asylum, the mortality rate kept dropping until 1914 (27,4% in

1913, 22,9% in 1914). At the time of war, the mortality rate was rising again (41,3% in 1915, 61,4 % in 1916) due to the impact of World War I that firstly, reduced the number of available local doctors mobilized by the army and secondly, overloaded local medical care with a great number of refugees [8, p. 9-10].

At the time of war, the mortality rate was also rising due to overall density of children in the asylum (over 1915, the asylum accommodating 50 children, their number every twenty-four hours could equal 160), which, in its turn, made it impossible for many of the children to receive care and normal milk feeding from specialized feeders. This density was caused by shortages of the budget allocated for expansion of the asylum and by overall poverty of the population when mothers often gave their children away because they could not feed them. Since there was only one institution of the sort in the whole region, many children (up to 30 %) were brought from other districts [8, p.13-14].

Sanitary doctors admitted the problem of the great number of abandoned children and in 1916 they put forward a number of proposals on improvement of that situation. In particular, they proposed providing monetary insurance for women in need who have an opportunity to take care of children; doctors also proposed expanding Katerynoslav asylum by means of purchasing new premises and establishing another big asylum in the village of Yasynuvata in Bakhmut District (due to its location in the center of the region), asking for 50305 rubles from the state. Unfortunately, those measures failed to be taken due to the revolution and to abolition of the district councils' system the following year [8, p.16].

One should also outline preventative and sanitary activities carried out by doctors in the institutions of the region. Care of the educational institutions operated by the district council was supposed to be taken by local doctors long after the Province's sanitary organization in 1901. Since 1894 Serhii Gamper, a doctor of Mariupol District Hospital, was carrying out regular examinations of students of Oleksandrivsk Lyceum; the doctor was examining their health and learning conditions. In his reports he outlined negative impact of children's poor accommodation on their health, identifying such problems of the lyceum's building as density (only two rooms exceeded the minimal air volume standard per student), poor lightening, poor furnace heating and lack of ventilation inside the class as well as use of water from a contaminated local source [9, p. 85]. It is unknown to what extent this was influenced by his reports but when the educational institution was relocated to a new building in 1899, most of those problems were solved. Lightening was improved, the educational space was expanded, central heating, ventilation devices and a new toilet were installed. S. Gamper outlined all those positive changes in the next report [10, p.69].

When the Province established a professional sanitary organization, this organization was supposed to attend to the schools. The 7th congress of the Province's doctors in 1897 put forward a proposal to give sanitary doctors the authority of expert evaluation of construction plans of schools and asylums. At the 9th congress

of the Province's doctors in 1903, there was a report titled "Addressing the sanitary condition of public schools and measures aimed at elimination of sanitary drawbacks". According to the records of Katerynoslav City Council of 1906, introduction of school hygiene was being hampered for a long time because sanitary doctors received access to inspection of schools only after long-lasting discussions and even then they received access only to the city-operated ones [11].

The 9th congress of the Province's doctors also adopted a program of school inspections under which sanitary doctors and local general practitioners were working together, which envisaged regular annual inspections of educational institutions with questionnaire surveys of the students and the administration. They managed to carry out analysis of sanitary conditions of many schools and to draw attention to conditions unfavorable for children. The survey of Oleksandrivsk District outlined lack of adequate sewage disposal in the schools and overall dampness in most of the buildings. In most of the 32 schools furnace heating did not work smoothly due to inappropriate location of classes. Therefore, according to the teachers, even ink froze in winter. Due to lack of adequate ventilation, students often became dizzy in most of the schools of Mariupol District [12, p.188-191].

Though doctors and local administration often argued about improvement of the situation in schools, their reports based on factual material sometimes influenced district administrations and departments, which led to positive changes. B. Hurevych, Sanitary Doctor of Mariupol District Council, managed to persuade the district council to allot one thousand rubles for hot nutrition in schools. Due to the efforts exerted by the sanitary doctor of Oleksandrivsk District Council, new designs for school buildings were approved. Sanitary analysis of 28 old school buildings in Katerynoslav District Council and 18 school buildings in Novomoskovsk District Council resulted in a decision to demolish them and replace by new ones [12, p. 192-193]. New designs of school buildings were developed in districts, which solved some of the aforementioned problems (however, according to some doctors, they the buildings not yet comply with all the standards of cleanliness, lightening and heating). Under new architectural plans for 1914, the Province built 200 schools and considered building 820 more. However, sanitary doctors were still outlining a number of problems in researching the schools. Firstly, regular inspections thereof in the district was added to the doctor's other huge amount of duties; the doctor was supposed to inspect the territory entrusted to him. Secondly, doctors had rather a limited influence on the district councils; they were not involved in agencies attending to allotting funds and designing new school buildings, being just consultants [12, p. 204-206].

Due to the emphases laid by sanitary doctors and to local sanitary measures, the district council kept helping schoolchildren. Often with the assistance provided by the district councils in the form of financial aid, many districts adjusted hot nutrition for children (thus, in 1913 Verkhniodniprovsk District managed to adjust breakfasts in 10 educational institutions; it is

noteworthy that the district did not really care about this problem). Some schools also adjusted night accommodation for students from rural families whose homes were located far away from the educational institution (in order to adjust it, Verkhniodniprovsk District allotted 1200 rubles) [13, p. 166-167]. The district councils also attended to even bigger problems whose importance was outlined by doctors, for example purchases of desks fit enough for students to sit on them (for example, in 1913 the district replaced classroom furniture simultaneously in 30 schools of Mariupol District [13, p. 254].

Conclusions. Analysis of the title under research makes it possible to make a conclusion that the local doctors' activities were important in solving the aforementioned problems. The authors have shown the achievements and the problems found in this field. Medical practitioners of Katerynoslav Province managed to carry out miscellaneous preventative activities concerned with childcare in various fields. Many settlements took care of children whose working parents could not take care of them. This care gave children an opportunity of healthy growth. The local authorities managed to save many lives of abandoned children, to identify problems schoolchildren were faced by and to promote improvement of learning conditions. Their efforts were especially valuable because most of the children who needed care came from poor families, whereas neither their relatives nor the state had an opportunity to take appropriate care of them.

Though due to active work done by local doctors and to the district councils' support in this field, it became possible to achieve improvements, though doctors admitted that little was done. Negative impact came from shortages in the budget also needed in other fields of the local economy. Negative impact also came the population's overall unawareness of the activities carried out by the district councils; the population often did not always understand children's needs for healthy growth. Negative impact also came from local agencies that did not fully involve people competent in sanitary activities. Besides, there was overall indifference to poor people's lives, which was typical of the entire Russian empire. However, even limited success illustrates that the problem of creating conditions for children's healthy life and development must never be left without attention.

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