



# Traditional health care system of Central Asia: an appraisal

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## Abstract

Undeniably, a comprehensive health sector in Central Asia was developed by soviet regime, since Communists perceived healthy generation a backbone for attainment of economic growth and sustainable development of socialist society. However, introduction of biomedicine in the regions is attributed to the czarist regime who after conquest introduced public health system, though on a very small scale and primarily for use of military and administrative personnel. Prior to Russians, the region had its traditional health care system which of course was primitive but many western scholars have acknowledged the skills of traditional healers for treating many diseases successfully. The paper intends to provide a viewed picture of traditional health caring practices of the region which has been over shadowed or undermined by most of the modern scholars partly due to the overall intellectual stagnation of the region during early 19<sup>th</sup> century and partly due to introduction of advanced public health care system of Soviets known as Semashko model during late 19<sup>th</sup> century. Paper reveals that natives had enough confidence on traditional health care and they preferred their traditional system in comparison to Russian health care, yet the influx of Russian immigrants followed by pandemic, plague and epidemic rendered traditional health care system obsolete. Moreover, the restrictions imposed by Soviet regime on traditional practitioners further limited the scope of traditional health care system.

**Keywords:** traditional health care, biomedicine, Central Asia, stagnation

## Traditional health care practices

Prior to the advent of Russians, Central Asians had rich cultural legacy of folk medicine like Ayurveda, Unani, and Sidha, besides some superstitious curing methods <sup>[1]</sup>. This traditional health care system was mainly the domain of folk doctors, Shamans <sup>[2]</sup>, mullahs, witches and wizard <sup>[3-5]</sup>. Paula Michaels however, remarks that these categories were generally ambiguous as the methods of these healers overlapped with each other. According to him, “while spiritual methods were closely associated with shamans and mullahs, folk doctors also used these approaches and the folk doctor’s herbal and other preparations in turn were practised by spiritual healers”<sup>[6]</sup>. Schuyler maintained that the folk doctors usually used plant-based ingredients which consisted of roots, herbs, stems, branches, leaves, flowers, seeds and dried fruits of plants. Little quantity of animal products and minerals which included yeast, nitrate, ammonia, cinnabar, arsenic etc. were also used for medication. These were usually consumed as powder or decoction, and patient as such was given the opportunity to mix medicine himself which according to Schuyler’ saved not only doctors time, but in a way satisfied the patient’s scepticism, that the doctor had not poisoned him <sup>[7]</sup>.

Apparently, large numbers of these medicinal plants were either grown wild or cultivated locally in Tashkent, Samarkand, Khokand, and Bukhara. But many plants were also brought from china, India, Afghanistan, Persia, Arabia, Turkey, Egypt and Europe <sup>[8]</sup>. Moreover, a school of medicine also existed in Bokhara <sup>[9]</sup> besides, specialty stores or pharmacies existing in larger cities. Nevertheless, in the absence of

biomedicine, most remedies were ostensibly simple and were available for sale in stores of regular shopkeeper <sup>[10]</sup>. Apart from herbal treatment and rational approaches, based on understanding of the therapeutic properties of plants, minerals, and other natural elements, Central Asians shamans followed a wide range of spiritual techniques for healing and divination <sup>[11]</sup>. The most common procedure of spiritual healers or Mullahs, to cure sick person and to charm away his sickness comprised of reading passages from the holy Quran <sup>[12]</sup>. The verses of Quran were also written on pieces of paper, which were strung together and placed over the area affected with disease <sup>[13]</sup>. Moreover to satiate the superstitious belief of people, spiritual healers used the blue lapis lazuli, found in Bukharans Mountains, as an amulet <sup>[14]</sup> to prevent people from evil spirits. The pieces of dried Bear and horns of snakes were also recommended by spiritual healers, for the protection from all evils <sup>[15]</sup>. A common superstition practice among *Sart* population was that they used to throw a garment of a patient on the road side in a hope that someone might pick it up and would take away the ailment of a person. Another superstitious practice followed by the residents of Bukhara to cure the patients suffering from blindness was that the patient was advised to swallow the eyes of a hawk so that its keenness of vision might be transmitted to the victim to some extent <sup>[16]</sup>.

Despite these superstitious practices, many European scholars, who traveled to Turkistan and Bukhara has praised folk doctors for treating many diseases successfully. They have referred not only to the presence of different kinds of diseases like Rishta <sup>[17]</sup>, Cholera <sup>[18]</sup>, Afghani sore <sup>[19]</sup>, Leprosy <sup>[20]</sup>, and many others

diseases<sup>[21]</sup> among its population but has provided a detailed description of curing methods of native doctors. While acknowledging their skill, Schyler remarks, “native doctors were highly adept in treating the ulcer, known as ‘Afghan sore,’ something that Russian doctors had been able to do later<sup>[22]</sup>. Similarly, syphilis, a contagious sexual disease though not frequent in Bokhara was also treated successfully by local healers with mercury just like in Europe<sup>[23][24]</sup>. Further, it appeared that the folk doctors were also effective in treating the damaged or broken bones. For instances, Meaken furnishes a detailed description of a Sart women whose leg was broken, and procedure of a Sart doctor who put wooden splints round, bound it up tight and wrapped it in sand, mixed with yolk of egg and oil, including some black pills, for oral use<sup>[25]</sup>. Similarly, many travellers have also described the procedure of barber for conducting the operation of people affected by guinea worm, know to native as *rishta*. Apparently, a barber used to make an incision to grab a hold of the worm before winding it off slowly on a stick. It really required extra ordinary skill to pull out the worm which otherwise would result in many ulcers<sup>[26][27]</sup>. Moreover, Olufsen, mentions presence of Dentists or Tooth-drawers in Bukhara who used to draw tooth in absence of any dental clinic only with a primitive forceps and in the whole process he was helped by an assistant. However, he further remarks, it appeared that there weren't many tooth-drawers as the tooth-drawing was done only as a last resort<sup>[28]</sup>. Nevertheless the influx of Russian immigrants during the late nineteenth century, in the wake of Czarist conquest was followed by the wide spread of contagious diseases like measles, chicken pox, and mumps which significantly impacted the mortality rates of the region<sup>[29]</sup>. Although Central Asian people attribute illness to demonic entities and the evil eye<sup>[30][31]</sup>, the western scholars holds the view that the unhygienic practices followed by the Central Asian people eventually led the widespread of diseases. Ella R. Christie, for example believed that, the tanks, which usually supplied water to Bukhara contained stagnant water with permanent green scum on its surface. So, the endless use of this water, for drinking and washing of all kinds of vegetable, mineral and animal, ultimately put the health of the population at risks<sup>[32]</sup>. Olufsen also indicated that the unhygienic practices of Bukharans people were supposedly responsible for the spread of diseases<sup>[33]</sup>. Moreover, Eugene Schuyler blamed Islamic practises for the spread of disease among the people. He pointed out that, “The constant ablution performed by the Mussulmen in the water of the canals and ponds no doubt contributes greatly to spread diseases of various kinds, especially those of the skin<sup>[34]</sup>.”

Although western descriptions are over exaggerated as they simply alleged common populous without taking into cognizance the administrative laxities of Native Khans to maintain water reservoirs and canals<sup>[35]</sup> yet it can't be denied that the traditional healthcare system was incompatible to deliver under such circumstances. So the Czarist administrations established a modern public health system, albeit on a very small scale though initially for use of military and administrative personnel<sup>[36]</sup>. These Russian (military)

hospitals were established at various places like Samarkand, Katte-Kurgan, Penjakend, Khokand) Tashkent, etc. The military hospital at Tashkent was staffed with a head doctor, and 6 clinical assistant. According to Henry Lansdell, apparently it was a second class military hospital where patient's daily expenses, including food, medicine, lighting, heating, and building maintenance, etc., run roughly a shilling per day<sup>[37]</sup>.

The below given table reflects the number of patients visited to Tashkent hospital from 1879-1882.

**Table 1**

S. No	Year	Number of patients	Deaths	% of deaths
1	1879	2,292	114	5
2	1880	2,452	188	7
3	1881	2,988	232	7.7
4	1882 to 12 September	1,988	85	4.3

**Source:** Lansdell Henry, Russian Central Asian including Kuldja, Bokhara, Khiva and Merv, vol. I, Sampson Low, Marston, Searle, and Rivington, London, 1885, 450.

Moreover, the patients requiring specialised care, like malaria, were transferred to hospital cum sanatorium of Chimgam, located 60 kilometres away from Tashkent<sup>[38]</sup>. Besides these military hospitals, Russians established number of hospitals and dispensaries exclusively for native population, though few in number. For instance, Landsell refers to the presence of two Russian hospitals at Samarkand for native population<sup>[39]</sup>. Similarly, Meakin while referring to leper hospital at Tashkent under Russian management, reports that “in every native town, of any size, Bokhara included<sup>[40]</sup>, there is now a Russian apothecary, a doctor, and a lady doctor, with hospitals for native men and women respectively<sup>[41]</sup>. Besides, hospitals, a number of dispensaries staffed with the male and female doctors and nurses including dispensary's equipment and pharmaceutical items for native population were established<sup>[42]</sup>.”

With regard to Bukhara, a vassal state of Russia, Olufsen claimed that he found two European dispensaries, one at New Bokhara and other in old Bukhara, built by Mr Reinhardt whom all travellers respect for his friendliness and willing<sup>[43]</sup>. Similarly, Ella R. Christie, also endorse that this hospital, which later took the form of a women's hospital, was constructed in 1910 by Czar Alexander. She further pointed out that, though this hospital lacked regulations of modern hospital, yet hospital and its dispensary provided an immeasurable blessing to the Ladies of Bukhara in the form of kindness, sanitary care, and medical expertise<sup>[44]</sup>.

## Conclusion

Therefore, study of historical facts reveal that although public health services in the Central region were introduced by Czarist regime but on the eve of ‘revolution’, the situation was still far from satisfaction. The shortage of Russian doctors in the region is for instances confirmed by Meakin, who remarked, that the town of Bokhara with about fifty thousand inhabitants had only

one Russian doctor to look after them<sup>[45]</sup>. The contention of Soviet sources also reveal disappointing doctor patient ratio, one doctor for about 20,000 people in whole of the Central Asia on the eve of the collapse of Czarist Empire<sup>[46]</sup>.

So, at the time of Bolshevik 'revolution', we can assume that, it was still the traditional health care system that dominated the whole of the Central Asia. The assertion is substantiated by the fact that even in the presence of Russian doctors; the people of Central Asia preferred their own health care. For instance, Olufsen admitted that the most educated men from Bokhara who had travelled with him for months or years and whom he had frequently cured of fever and typhus had consulted a mullah after experiencing repeated bouts of illness<sup>[47]</sup>. Similarly, Lansdell also admitted that, the military hospital of Tashkent was primarily occupied by the Russian<sup>[48]</sup> and believed that natives trusted on the efficiency of their native healers. It was only during Soviet rule that a comprehensive healthcare system known as Semashko model was introduced which revolutionized the health sector of USSR including central Asian Republics. The improved and accessible health care system was considered by Moscow a hallmark of modernization and a parameter for cultural advancement of Socialists' society<sup>[49]</sup>. Consequently a war against the practitioners of traditional medicine was launched and they were debarred from practice until they completed the formal course of biomedicine<sup>[50]</sup>. It is believed that Soviet Union was the first Nation in the world to provide free though not necessarily equal medical care to its citizens<sup>[51]</sup>. Zealous efforts were made for prevention, early detection and a vigorous follow up of certain diseases erupted in the wake of Bolshevik revolution followed by civil war<sup>[52]</sup>.

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