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**THE PROTECTION OF MOTHERHOOD AND CHILDHOOD IN
THE UKRAINIAN GUBERNIAS OF THE RUSSIAN EMPIRE IN THE
FIRST HALF OF THE XIXth CENTURIES: NEW APPROACHES
AND ALTERNATIVE SOLUTIONS**

Abstract: The materials of documents stored in the Kyiv archives (Kiev, Ukraine) investigate the problems of the birth of motherhood and childhood protection in the Ukrainian lands that have been part of the Russian Empire in the first half of the nineteenth century. We have analysed the historical, social, legal admeasurements that have influenced the establishment of the Institute of Motherhood and Childhood and highlighted the group of socially important and for our time questions, such as the functioning of medical districts, the financing of medical institutions, the organization of doctors' and paramedics' labour, the administration relationship with doctors etc.

Keywords: motherhood and childhood protection; medical aid; regulatory support; Russian Empire

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One of the strategically important and priority tasks of European states in the field of health protection is the provision of life and health of mothers and children. The basis of this direction is the birth rate, the health of new-born babies, the safety of childbirth, the prevention of maternal and infant mortality. Among the many factors that influence the health of the mother and the child, the special role belongs to the social one, therefore the state of the mother and the child is an indicator of social welfare of the population and maturity of the state.

The formation and development of the health protection system of the mother and the child runs to more than one century. In the first half of the nineteenth century, legislation gets the development, a network of medical institutions is formed, knowledge is generated and distributed in society. The field of doctors' professional communications has expanded. The leading form of international cooperation has been scientific missions, during which domestic scientists have not

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only studied foreign experience in educational and research activities, but also popularized their own achievements and discoveries, the principles of European culture.

In the first half of the nineteenth century there has been very little literature on obstetrics and gynaecology. Except for several publications in Russian language by M. Ambodyka-Maksymovycha, V. Rikhtera and A. Hrubera, a foreign literature has been used. Several clinical reports have also appeared in anatomical works¹. Specialized disciplines have begun to develop in the second half of the nineteenth century, in particular obstetrics and gynaecology, and childhood illnesses.

The condition of maternal and child health in the period studied by us has attracted the attention of Ukrainian and foreign scientists such as O. Boryak², K. Chenkova³, A. Tretyak⁴, A. Avdeyev⁵. The authors investigate the training program of medical personnel, analyse the demographic situation, the causes of infant mortality. The doctoral thesis by O. Boryak is sufficiently informative, which deals with the formation of the Institute of Obstetrics in Ukrainian society, the role of midwives in the birth of children, which, according to the author, have been primary carriers of obstetric and gynaecological knowledge⁶. K. Chenkova explores the problems of the birth of motherhood and childhood protection in the context of the analysis of civil (marriage and family) legislation that has been in force in the Ukrainian gubernias of the Russian Empire (nineteenth century - 1917)⁷.

The regulatory legal acts analysed by us give grounds to prove that by the middle of the nineteenth century the issue of motherhood and childhood protection has been outlined within the legal framework, although those legal acts have been

¹ Budko A. A., *The History of Medicine in St. Petersburg of the XIX century and the beginning of the XX century* (Спб.: Нестор-История, 2010), 400 с.

² Boryak O. O., "Institute of Obstetrics and the Faculty of Midwives in the Traditional Culture of Ukrainians: History, Rituals, Mythology" (Дис. докт. іст. наук, Інститут мистецтвознавства, фольклористики та етнології ім. М. Рильського НАК України, 2010).

³ Chenkova K.P., "Legal protection of motherhood and childhood under civil (civil-family) legislation in the Ukrainian gubernias of the Russian Empire (nineteenth century - 1917)", *Науковий вісник міжнародного гуманітарного університету. Серія: Юриспруденція*, 12 (2014): 41-45.

⁴ Tretyak Anna S., "History of Maternity and Infancy in Zemsky Period (Based on the Central Chernozem (Black Earth Region) Files)", *Вулье Годы* 35 (2015): 94-99, <http://oaji.net/articles/2015/7-1426264116.pdf>.

⁵ Avdeyev A., "Infant mortality and history of maternity and childhood protection in Russia and the USSR", *Историческая демография* 1(2010):13-72.

⁶ Boryak, "Institute of Obstetrics and the Faculty of Midwives in the Traditional Culture of Ukrainians: History, Rituals, Mythology", 1-379.

⁷ Chenkova, *Legal protection of motherhood*, 43-44.

poorly systematized and have only partially provided the survival and development of the child.

In 1797, in the Ukrainian gubernias, including Kiev, medical councils have been organized, which essentially have supervised the system of civil and military medicine. Prior to this period, the public administration has been addressed the health issues. The medical council has included: the variola committee; quarantinable facilities and pharmacy management, various medical institutions and mineral waters. District and local doctors, medical students, midwives and everyone engaged in free medical practice have followed the medical council⁸. They have been examining pharmacists, midwives and students at religious schools, sent to the Medical-Surgical Academy; supervising the sale of pharmacy materials; medical institutions; the treatment and maintenance of patients in hospitals; they also carried out a topographical description of the gubernia together with their district doctors⁹.

The health care to maternity patients in the districts and cities has been provided by an obstetric officer and a midwife. One of the main tasks of a city obstetric officer has been to deliver the maternity patient and while operative measures. Obstetricians have supposed to supervise the work of midwives, especially those who have been unfair to their duties. Despite the financial situation of the maternity patient, the obstetrician has been obliged to do everything in his power for the successful delivery¹⁰. He has been forbidden to demand gifts and money from the poor. For such actions the obstetrician could revoke his status. In accordance with the law for assistance in delivery, the obstetrician could receive a reward of 1 rub. 50 kop. silver¹¹.

Special attention deserves the condition of an obstetric matter in the gubernias' districts. In January 30, 1797 No. 77773 the bill "On the decision of midwives not only in the gubernia's cities, but also in district's, with the fixed emolument" has been passed. The bill has noted that in gubernias and districts there have been not a necessary number of skilled midwives, which often has led to the death of maternity patients and their babies. The Medical College has noted that midwives have been supposed to be not only in the gubernia, but also in the district cities: in each gubernia - the eldest and younger midwives, who have attended

⁸ Set of laws of the Russian Empire (Hereinafter SZRI) vol. XIII, Stat. 23, (1857) 15 vols. (СПб.: Тип. Второго Отделения Собственной Е.И.В. Канцелярии, 1857-68) /Свод законов Российской Империи издание: 1857 г. [в 15 т.]

⁹ Marcus L.M., *A Short Guide to Doctors to Knowing Russian Laws, Institutions and Public Service* (СПб.: Э. Праца, 1843), 89-90.

¹⁰ SZRI, Stat. 149-53, (1857), 28.

¹¹ Marcus, *A Short Guide to Doctors*, 76.

assistance not only to the population of the city, but also to the district¹². However, there have been cases where the assistance of a district doctor has been needed, especially in pathological illnesses and other complicated cases. The midwives have been required to compile reports every month and send them to the medical council about the number of delivered babies.

According to art. 479 of the medical statute the rank of midwife could get a woman, not younger than 20 years, and not older than 45 years old¹³. While induction the midwife has had to listen to a full course on the delivery in the medical institutions. She has been obliged to give a certificate of delivering at least three times in the doctor's presence and explain how successful these deliveries have been. Afterwards, she must show her skills during the delivery at the obstetric clinic¹⁴. The Kyiv Medical Council in 1830 has taken subscriptions from the midwives of the Kyiv gubernia forbidding them to attend obstetric practice if they haven't passed the relevant examinations and haven't received the right for it¹⁵.

The requirements and virtues that should have been in duet by midwives, in particular the ability to read and write on one of the languages used in Europe; be humane, kind, gentle, sober; have skills and abilities in obstetric care. She has had no right: to treat other illnesses, except for women and children, and then only in those cases when there has been no doctor; to operate, except for cord cutting. In particularly difficult deliveries, a midwife should have called the obstetrician from the nearest medical council or district doctor and explained to them the entire course of childbirth. After it, she has been visiting her maternity patient for 10 days and has had the right to receive 1 ruble 50 kop. silver for this work. For low-income groups of population she has attended assistance free of charge¹⁶.

When a child with disability has been born, the midwife has been obliged to save his life, but such cases should immediately and in detail be reported to the city obstetrician or to the medical council. In difficult delivery or even death of the maternity patient, she has also reported to the obstetrician or doctor and, with him, has been able to carry out a surgical operation to save the baby's life¹⁷. In the

¹² The Full Collection of Laws of the Russian Empire (hereinafter PSZRI).vol. 24, No. 17773. – p. 312. (1797) (СПб.: Тип. II Отд-ния. Собствен. Канцелярии Его Имп. Величества) / Полное собрание законов Российской Империи.

¹³ SZRI, Stat. 479, (1857), 90.

¹⁴ SZRI, Stat. 480-81, (1857), 90.

¹⁵ Central State Historical Archives of Ukraine (hereinafter referred to as CSHA of Ukraine f. 533. op. 1. spr. 639. ark.3.) / Центральний державний історичний архів України в м. Києві (ЦДІА України).

¹⁶ Marcus L.M., *A Short Guide to Doctors*, 63-4.

¹⁷ SZRI, Stat. 179-80, (1857), 32.

Medical Statute of 1857 in Art. 184 it has been noted that a midwife has had no right to terminate a pregnancy at the women's request. In addition, she has been supposed to report to the authorities about such cases. A midwife has had to impart her knowledge to the maternity patient and in cases of new borns' negligent care (in particular, parents' drunkenness etc.) - to report this to the authorities¹⁸.

During the period under study, a tendency towards the legal regulation of child protection has been observed, which would ensure the child's productive life. At the legislative level, the preservation of the children's life with disabilities has been fixed; doctor's assistance during the childbirth while difficult delivery or in case of mother's death; responding and taking certain measures in case of improper performance of parental duties and, most importantly, the prohibition of abortion (abortion at the woman's request).

The state has also taken care of the treatment and nutrition of infant persons. At the Kyrylivs'ka hospital in 1855, a children's department has been opened, where the food has been provided by the state. Medical board on nutrition has divided children's age into 2 periods: 1) from 2 to 10 years, 2) from 10 to 16 years old, and as to used hospital clothes, into three: 1) from 2 to 5 years, 2) from 5 to 10 years, 3) from 10 to 16 years old. Adult nutrition has been divided into four special portions: ordinary, medium, weak and numerical¹⁹, and child nutrition - into six special portions: ordinary, medium, weak, dairy, numerical, emergency. For breakfast, children have been given oatmeal and butter. At lunch: an ordinary portion has consisted of rye bread, pearl, oatmeal or buckwheat cereals, beef in soup and in grits, salt; to the medium portion - rye bread, veal, salt; to a weak portion - wheat bread, oatmeal or prunes with apples, oat veal soup, salt. The daily portion has included bread of wheat or rye, milk. To the numerical portion - wheat bread, oatmeal flour, honey. To the emergency portion - wheat bread, chicken meat, cream of wheat, salt. The portion size has depended on the age of sick children. This diet has been constantly changing. For example, the public person of the Medical Board has concluded that peas soup should have been excluded from the diet, since peas has contained chalky hard-to-digest elements and had a poor effect on the digestive organs, which could have even caused the development of scrofula. Peas have been excluded even from the diet table in the medical institutions of the civilian communities. The butter has also been excluded from the regular portion, as officials have believed that the first grade beef used in soup has been sufficiently saturated and the butter hasn't improved the broth from good veal. The dairy portion could

¹⁸ SZRI, Stat. 184-88, (1857), 33.

¹⁹ PSZRI. vol. 30, No. 23967, 1257. (1809).

have been prescribed instead of the numerical, depending on the patient's preferences²⁰.

In the circular note of June 20, 1855, No. 149, rules for the purchase of clothing and hospital items for infant patients have been developed. The shelf life of these things has been determined by the statute of the medical institutions. The statute has noted that beds and linen should have been purchased according to the child's age. Mattresses and pillows have been stuffed with straw or hair²¹.

The archive documents specify the name and number of things required for one child in accordance with the age group. For example, in children's department of the Kyrylivs'ka hospital for children from 2 to 5 years old, cotton pants with embroidery have purchased 18 pieces; from 5 to 10 years - 105, their use period has been 2 years. For the age group from 10 to 16 years, they have bought 45 skirts of flannel, stein kirks from white book binding, dressing-gowns made of flannel, winter woollen socks, summer cotton, leather shoes, and boots. Bed linen has been made off lam linen sheets, blankets made of different fabric cloths, bedding sheets, flat sheets made of flannel cloth, pillowcases, towels²².

Young students also have had health problems. The patient's life has depended on the doctor's professionalism. Excessive alcohol and tobacco consumption has been a significant health risk. Among the students' diseases there have been infectious and venereal diseases, typhus, stomach diseases, colds, eye diseases, etc. There have been no medicines from many diseases, so high mortality among students has been present. To save students' health, commercial institutions have organized preventive examinations twice a week, have purchased medical instruments and medications. Ill students could get help at the departments of university clinics, and seriously ill have been sent to city clinics, where they have been kept at the universities' expense. Medical examinations have been carried out before entering the educational institutions²³.

The youth has been treated at the hospital at St. Volodymyr's University. The student hospital has been located on the premises of the university, designed for 15 beds. The university scholars and students have been treated there at their own expense.

In the doctor's report at St. Volodymyr's University from January 1, 1849, to January 1, 1864, it has been said that the total number of patients has been 2213

²⁰ CSHA. f. 442, f. 650. ark.1-3.

²¹ CSHA. f. 442, f. 650. ark. 5.

²² CSHA. f. 442, f. 650. ark.7.

²³ Kaz'myrchuk M.H., *Socio-economic development of the Kiev gubernia (1861-1917)* (K.:Joroc, 2011), 259-60.

people, and the total number of university students in this period has been 11633 people. According to our calculations, 1/5 part of the students have been treated at the hospital (except for those who have been treated outside the institution). From those 2213 people who have been treated at the hospital for 15 years, 2180 patients have recovered, and 33 patients have died. From the "buharchataya phthisis of lungs" 20 people have died, from typhus - 6 people, from cholera, "brethren" disease, matter disease of chest, apoplexy of lungs, heart disease, inflammation of alveus, inflammation of endocardium- one person has died from each illness²⁴.

Most students have admitted to hospital with a catarrhal fever, which in the doctor Scherbina's opinion has not been complicated in treatment and has not been accompanied by dangerous complications. This disease has been treated with gargling. Complications from the disease could appear, to a greater extent, during the epidemic of influenza. The number of patients in the hospital has increased in the period of cholera epidemics, namely in 1853, 1855. The smallest number of patients has been in 1859. For the treatment of patients with cholera in the university's premises, a special cholera department of the hospital has been opened, which has been provided with everything necessary. Two assistants from the number of students of the medical faculty, who have completed the course, have been appointed to help the doctor, and who have been constantly in turn in the very department. The greatest number of typhoid patients has been in 1853, and the least in 1852. Most cases of typhoid fever have been before cholera epidemics, and, to a greater extent, students of the medical faculty who have been attending a military hospital have gone till²⁵. During 15 years there has been only one case of surgical intervention. The patient has suffered from Lythiasis (bladder stones). The treatment with mineral water has been ineffective, and then Professor V. Karavaev successfully has carried out the operation, removing the stone, about the size of the hazelnut²⁶.

For compiling the medical statistics, there has been a special record of all sick students. In accordance with the decree of the Medical Department of the Ministry of Internal Affairs in January 25, 1843, the Kiev Medical Council has been obliged to send 10 printed forms of information that have been formed by the Medical Rada, and which has contained information on the number of patients in the empire, the number of patients at St. Volodymyr's University, Kyiv gymnasia, noble district academies. Such information, according to the set form in the Kiev gubernia,

²⁴ Shcherbina I., *Materials for medical statistics in Kiev. Summary record on the hospital of the students in St. Vladimir's University from 1849 to 1864, of doctor at the University of I. Shcherbina* (К.: Университетская типография, 1865), 2.

²⁵ Shcherbina, *Materials for medical statistics*, 5-6.

²⁶ Shcherbina, *Materials for medical statistics*, 11.

has had to be sent to the governor every month. In addition, apart, the information has been noted about patients treated in hospitals and patients treated by private doctors. The doctors at educational institutions should also have indicated in register the additional information, namely: special types of diseases (introduced of a doctor's free choice in capital letters), patients who have used the advice of several doctors, patients who have stopped being treated until fully recovered, infectious fever illnesses (about each special case. It is desirable that this information has been accompanied by data on the epidemic constitution, on the epidemic conditions for the appearance of some diseases that depend on the climate, location, lifestyle of the patient, about the successes or disadvantages of disease control in order to use these materials further in medical statistics²⁷.

Such forms have cost 3 kop. silver for a copy. The archival data indicate that the doctor of the second Kyiv gymnasium Bahezhs'kyy has paid 6 kopecks silver for two forms. Other doctors have not sent such funds to the medical council. Therefore, the council has requested the guardian of the Kyiv educational district to send 24 kop. silver for 8 forms to send them to the medical department²⁸.

In 1850, for the sake of simplifying the annual reporting and giving on-time information, the form has been changed. The reporting period has been established from the first of December to the first of December each year. The medical council has obliged to make such documents to the professors of the medical faculty at St. Volodymyr's University and the student hospital, doctors at the Institute for noble young ladies, the first and the second gymnasia²⁹. The same forms of information have also been used in the following years, as evidenced in the archival affair of 1858, which refers to placing of duties on medical staff of educational institutions every year to send a report to the Kyiv Medical Council about the presence of patients in them³⁰.

Thus, archival sources and normative acts analysed give grounds to prove that in the first half of the nineteenth century in the Ukrainian gubernias that have been a part of the Russian Empire, mechanisms of protecting motherhood and childhood have begun to compile. The significant inhibitory factors have been the incompleteness of the medical legislation's systematization, the lack of effective functioning of medical institutions, the imperfection of medical and social measures that would enable conditions for the birth of a healthy child, prevention and treatment of women's and children's diseases.

²⁷ CSHA. f. 707, f. 29. ark.10-11.

²⁸ CSHA f. 707, f. 29. ark. 19.

²⁹ CSHA. f. 707, f. 548. ark. 1-3.

³⁰ CSHA. f. 707, f. 405. ark. 2-3.

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