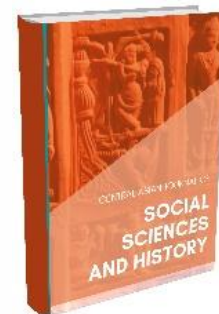




CENTRAL ASIAN JOURNAL OF SOCIAL SCIENCES AND HISTORY

Journal homepage: <https://cajssh.centralasianstudies.org>



Demographic Situation in Cities and Villages of Ferghana Valley: Changes in Diseases and Child Mortality

Madaminov Ulug'bek Makhamadjon o'g'li

Trainee-teacher of Namangan State University

Abstract:

In this article, demographic changes of the population of Fergana Valley are studied through quantitative comparisons. It is explained in detail how diseases among the population affected the demographic situation. Detailed information is given about the factors and reasons that affect the mortality rate of newborns and young children.

ARTICLE INFO

Article history:

Received 12-Sep-22

Received in revised form 13-Oct-22

Accepted 14-Nov-22

Available online 15-Dec-2022

Key word: demography, demographic change, population, diseases, maternal and child health, child mortality.

Health is not only the absence of disease and other physical defects in a person, but also a complete physical, mental, and socially satisfactory state. Here, a healthy lifestyle is the maximum manifestation of medical activity for the health of the society and the individual. Strengthening family health is a matter of a healthy lifestyle, reproductive health, protection of mother and child health, safe motherhood, building a healthy family, and improving the health of children and adolescents. Protection of motherhood and childhood in its place - measures taken by the society and the state aimed at the active participation of women in the production and life of the society while fulfilling the duties of motherhood, engaged in raising children, and strengthening the health of women and children. In the cities and villages of Andijan, Namangan and Fergana regions, the number of people registered with diseases of the blood and hematopoiesis, respiratory organs, digestive organs, endocrine and genitourinary system is relatively high. indicators are displayed. Strengthening general measures to prevent these diseases is one of the important issues.

The incidence rate of the population in Uzbekistan has been stable for the past few years. However, cardiovascular diseases play a major role in morbidity and mortality. Among those who died due to

disease, the share of those who died due to cardiovascular diseases is more than 54.5 percent. The main causes of death are ischemic heart diseases, in particular, myocardial infarction and damage to cerebral blood vessels. Myocardial infarction is more common in men[1].

Diseases of the circulatory system are one of the factors leading to death and disability among the elderly population in the Fergana Valley. This disease is more common in densely populated cities and districts with industrial enterprises. For example, in 2005, the number of deaths from this disease in Namangan region was 287.1 per hundred thousand people, and 309.5 in Fergana region. The number of people who died from respiratory diseases was the second highest in the valley. Gastrointestinal diseases are more common in rural areas, and this is related to the quality of drinking water. Infectious and parasitic diseases arose as a result of the complexity of the ecological situation in the region. It is advisable to deal more seriously with ecological problems and the problem of drinking water.

HIV (AIDS) is the most dangerous of the diseases that lead to human death. This disease was registered in the republic for the first time in 1987. In 2002, 981 patients with this disease were identified, 9 of them were foreign citizens. Most of the patients lived in Tashkent city (57.8%) and Tashkent region (22.9%). This disease also exists in the regions of Ferghana Valley [2]. HIV/AIDS remains one of the most painful points of Fergana region. The incidence of HIV infection in the region is very high. For example, we can see that the total number of HIV infections increased by 3 times in 2007 and almost 5 times in 2008 compared to 2006. The number of sexually transmitted infections is increasing due to the lack of antiretroviral drugs, the high cost of treatment, insufficient awareness of HIV/AIDS and its consequences, and in some cases the irresponsibility of medical personnel [3].

It is possible to overcome the disease by eliminating any obstacles to the fight against HIV/AIDS in the valley, by strengthening the promotion work among the population, and by increasing the responsibility of medical workers. Infant mortality in Andijan region was 12.1 per thousand, and according to the results of 2006, it was in the eleventh place in the republic. The dense population in this region, in the valley as a whole, has led to the worsening of the ecological situation and the rapid spread of diseases. Respiratory diseases (66.8%) and perinatal (0-6 days) diseases (44.5%) caused infant deaths in Andijan region. The First President of the Republic of Uzbekistan I. Karimov was in Namangan region and described the problems in the healthcare system as follows: "Due to the shortcomings in providing medical services to the population, some types of diseases are increasing in the region. In particular, the incidence of viral hepatitis in 2003 was 35.0% higher than the average rate in the republic, and above all, it should be of concern to regional leaders and officials in this field. The work carried out to improve the provision of medical services to the population living in rural conditions cannot be considered satisfactory. For example, 32 out of 209 rural medical centers planned for 1996-2003 have not been put into operation. Only 3 of the planned 20 rural medical centers have been completed so far. Protecting the health of women and improving a healthy lifestyle is one of the most important and urgent tasks facing our society. This is a reason to say that the work of improving the health of our sisters and women in particular does not meet the demand, and the number of cases of various diseases among women of childbearing age is increasing" [4] .

In 2006, infant mortality in Namangan region was 13.9 per thousand. The average level between 1991 and 2006 was 22.9 per thousand. In this region, the rural way of life, the closeness of the distance between births, economic and social relations, environmental problems caused the relatively high rate of infant mortality in the republic. In this region, respiratory diseases (68.1%) and diseases occurring

in perinatal (0-6 days) period (42.4%) also led to an increase in infant mortality. . So, one of the diseases that cause the death of infants in the valley is respiratory tract diseases (67.5%), and the second one is perinatal diseases (51.6%).

The 2006 summary of infant mortality in the Fergana region shows the next level after Tashkent and Lower Amudarya regions. Among the regions of the region, Fergana region had a slightly higher rate in this regard (19.4%) and this situation was preserved even during the years of independence. The reason for this is the decrease in the level of survival among babies as a result of the environmental situation and economic and social relations, and the occurrence of various diseases. Infant mortality due to respiratory diseases in Fergana region was 67.6 per thousand, while it was 67.8 per thousand due to diseases in the perinatal period. It reached 37.6 per thousand in terms of congenital heart disease, and 15.0 per thousand in terms of infectious diseases. It is desirable to take measures to achieve more effective results against these diseases in the regional health care system. Due to the fact that the death of babies is primarily caused by conditions during pregnancy and problems in the mother's health, it is an urgent task to take a wider control of the implementation of state programs on mother and child health in the valley regions.

In the Fergana region, as well as in the regions of the republic, as a result of the positive work carried out in the field of children's health, infant mortality has decreased compared to the first years of independence. For example, in 1991, infant mortality was 34.6 per thousand, and by 2006, it was reduced to 15.1 per thousand, the average level was 22.1 per thousand [5]. Especially, from the level in the first eight years of independence, the level in the following years of independence decreased by 10.7 per thousand. This level decreased to 9.7 per thousand in Andijan region, 12.6 per thousand in Namangan region and 9.8 per thousand in Fergana region.

In the cities of the Ferghana Valley, infant mortality was one and a half to two times higher than in the villages. In the valley itself, in 2005, the infant mortality rate among urban residents was 20.9 per thousand babies, while it was 13.3 per thousand in rural areas. This situation was also repeated in Andijan region. In regional cities, 18.5 per thousand babies died, while in rural areas, this level was equal to 10.1 per thousand. According to the data of 2005, in the cities of Namangan region, infant mortality was 22.8 per thousand, in villages it was 11.3 per thousand (the difference between them is 11.5%). In the years of independence, infant mortality in cities has always been higher than in villages. In Haqqulabad, infant mortality was 60.0 per thousand in 1991, 48.0 per thousand in 1997, and 43.6 per thousand in 1998, which is the highest level in the valley. Igan, and in the city of Chust in 1991 it was 42.4 per thousand. In 1994, infant mortality rate was 43.5 per thousand in Uygursoy town of Pop district, and 59.9 per thousand in 2000 among residents of Pop city. In the city of Kurgantepa, Andijan region, infant mortality was relatively high (49% in 1994, 44.4% in 1998).

When the rate of infant mortality among the population of Fergana region is observed, a relatively high level was recorded in Kuva district in 1991 (59.4%), in Hamza city of Altiriq district it was 42.6 per thousand in 1994, in Rishton city in 1997 it was 36, 8 per thousand was equal to 64.6 per thousand in Yozyovon town. In 1997 and 1998, infant mortality was 40.6 per thousand and 39.4 per thousand in rural areas of Fergana city administration [6]. Therefore, in the previous eight years of independence, the mortality of children under one year old was relatively high in the valley regions, especially among the urban population. In 2006, the analysis of mortality among infants under one year of age in the valley is shown in the following:

- regions with relatively high infant mortality (18.0%-30.4%): Fergana, Namangan, Margilan, Kokan, Kuvasoi cities, Furqat, Sokh, O'zbekistan, Rishton, Fergana, Okhunboboev, Altariq districts;
- regions with an average level of infant mortality (10.0%-17.9%): Andijan, Khanabad cities, Uchkoprik, Bagdad, Kuva, Dangara, Beshariq, Buvida, Andijan, Yozhiovon . , Pakhtaabad districts;
- regions with relatively low infant mortality (8.0%-9.9%): Asaka city, Korgontepa, Izboskan, Yangigorgan, Boz, Chust districts[7].

It can be concluded that the population of Ferghana Valley is growing due to natural reproduction, like the territories of the republic. In 2006, the population increased by 1803.0 thousand people compared to 1991. In terms of the level of urbanization, the valley is recognized at the next level after Tashkent and the Lower Amudarya region. In the studied years, the population has increased, but the rate of growth has decreased compared to the previous year. For example, between 1991 and 1998, the urban population of the valley grew by an average of 31,100 people per year, and in 1998-2006, this level was an average of 27,700 people. In the demographic development of the region, the continuous increase of the rural population caused its weight in the population to increase. As a result, two out of three people living in the valley were rural residents, and by 2006, they covered 68.9 percent. In the first eight years of independence, the average growth rate of the rural population (108,700) decreased by 34,500 people to the average growth rate (74,200) in the next eight years.

In the studied period, the birth rate in the valley regions decreased by 15.4 per thousand. The number of births in cities decreased by 17,300, and in rural areas by 37,400. For this reason, while the population increased more slowly in cities than in villages, its decrease from year to year was also lower than in cities. In the Ferghana Valley, as in the republic, the death rate has decreased compared to previous years. In terms of death rate, it is considered an average region in the republic. The death rate in the valley was 6.8 per thousand in 1991 and 5.1 per thousand in 2006. In the Fergana Valley, among the elderly population, circulatory system, respiratory organs, digestive organs, infectious and parasitic diseases are more common. The presence of HIV/AIDS is also one of the most painful points. According to the summary of 2006, the Fergana Valley was second only to the Tashkent and Lower Amudarya regions in terms of infant mortality. Infants died due to respiratory diseases and perinatal (0.6 days) diseases. Infant mortality in cities is one and a half to two times higher than in rural areas. Fergana, Namangan, Margilan, Kokan, Kuvasoi, Furqat, Sokh, Uzbekistan, Rishton, Fergana, Okhunboboev, Altariq are among the regions with relatively high infant mortality in the valley. districts can be included [8].

Infant mortality was relatively high in cities and villages of Fergana region. The demographic situation in the valley is clearly reflected in the death of the population. It was determined that the high population potential and density in this area will lead to the aggravation of the demographic situation here. Infant mortality is explained by the level of socio-economic development of the regions, the relative decline of everyday living conditions, and the presence of weak points in the healthcare system. In areas with relatively high infant mortality, namely Fergana city administration, Namangan, Margilon, Ko'kan, Kuvasoi cities, Furqat, Soh, Uzbekistan, Rishton, Fergana , Ohunboboev, Altariq districts to review the activities of health system links, to increase the medical knowledge of the population, to improve household services, to create a personal and general hygiene environment, to

take measures to prevent diseases is the most important issue of the day.

In the valley, it is necessary to take general measures to prevent diseases of the cardiovascular, blood and blood-forming organs, digestive organs, endocrine, urogenital system in adults. It is necessary to seriously deal with ecological problems and the problem of drinking water. It is desirable to have a wider control over the implementation of state programs on maternal and child health in the valley. It is necessary to strictly control the incidence of HIV/AIDS in the region, to eliminate any obstacles to treatment, to strengthen promotion work, and to increase the responsibility of medical workers.

Used literature

1. Ўзбекистонда гендер тенглиги. Фактлар ва рақамлар. – Тошкент, 2005. – Б.34.
2. Здоровье населения и здравоохранение в Республики Узбекистан. Республиканский комитет по статистике. Статистический сборник. – Ташкент, 2004. – С.31; Республика саломатлик институти Наманган вилояти филиали. – Наманган, 1991-2006. – Б. 29-41.
3. Бердиев Г. Аҳоли саломатлигининг иқтисодий-демографик масалалари //Жамият ва бошқарув. – Тошкент, 2009. 2-сон. – Б.125.
4. Каримов И. Қонун ва адолат устиворлиги эркин ва фаровон ҳаёт кафолатидир //Ўзбек халқи ҳеч қачон ҳеч кимга қарам бўлмайди. – Тошкент: Ўзбекистон, 2005. 13-жилд. – Б.25-26.
5. Демографический ежегодник Узбекистана. – Ташкент, 2006. – С.122; Естественное движение населения Республики Узбекистан. Стат. сборник. – Ташкент, 2006. – С. 95.
6. Численность населения Узбекистана. Стат. сборник. – Тошкент, 2007. – С.95; Республика саломатлик институти Фарғона вилояти филиали маълумотлари. – Фарғона, 1991-2006. – Б. 34-42.
7. Естественное движение населения Республики Узбекистан. – Ташкент, 2001. – С.97.
8. Естественное движение населения Республики Узбекистан. – Ташкент, 2001. – С.97.