ABSTRACT

The relevance of this problem is put into need of deeper and comprehensive study of the early Soviet social policy and practice of creating structure of the society capable to realize social claims of the young Soviet state. A specific place among them was held by creating system of the public health care sent to the period of a boundary of the 1910th, most difficult for the Soviet country, - the 1920th years not so much on improvement of quality of life of the Soviet citizens how many on preservation of this life, per se. Among the main groups of the actors who were responsible for realization of this important task there were not only organizers of new Soviet medicine, but also community of the Soviet doctors, very non-uniform from the point of view of the socio-political characteristics. Considering the high need for health workers in the conditions of civil war and sharp falling of the standard of living of the population, the Soviet power was terribly interested in creating necessary mechanisms of accounting of this social group on the basis of a number of criteria, including criterion "kin" – "stranger". One of possible ways of such account and identification of identity were registration cards of doctors. In article the analysis more than two hundred such cards collected by Public health department of the Kazan provincial executive committee of Council of working, country and Red Army deputies at the end of September, 1918 right after liberation of Kazan from Komuchevevts and White Czechs is given. The carried-out analysis allowed creating a certain collective portrait of medical community of Kazan on the basis of application of a method of a prosopography as creating the collective biography of the studied social group. Results of a research consist in the characteristic of such group of people, poorly studied from the sociopolitical and sociocultural point of view, as representatives of medical community of the first years of the Soviet power perceived, on the one hand, as an important labor and professional resource, and, with another as possible object of "re-education" of "bourgeois experts" on the new, Soviet beginnings. The work technique with such low-studied source as registration cards of doctors is offered. Materials of article can be used for teaching socio-political history of Russia, history of health care and medicine, history of the intellectuals, a source study of office work documentation and also daily occurrence history.

Keywords: History, Source study, Office work documentation, Power, Health care, Community of doctors, Kazan, Soviet Russia, 1918.
INTRODUCTION

In the first years of the Soviet power it was faced by a number of unresolved questions and problems: question of the power, of the world, of the earth, of self-determination of the nations and others. However, their relevance grew dim before the most terrible threat of the first post-October years - threat of hunger, mass epidemics and death of the population. Questions of rescue of life and health of the person came to the forefront and gained the major political character.

By 1917 in Russia there was quite extensive network of public medicine and rendering medical and sanitary services including both territorial, and urban and factory medicine. In the first year of the Soviet power it still continued to function and therefore the new power started cardinal reorganization of health care not at once. It concerned also the questions connected with change of situation and role of the doctor and all medical community in new Soviet political space. However, among the priorities set by the first supreme Soviet public authority in health sector – the National commission created by the decree of SNK RSFSR of July 11, 1918 problems of filling, expansions of a field of activity of doctors, providing for them normal working conditions and life appeared medical shots. The studying of the real situation which developed in health care, carried out including by registration and accounting of medical personnel became one of the first steps to the solution of these tasks.

Despite quite extensive literature devoted to formation of the Soviet health care system most often institutional approach and, as a result - prevalence of legislative and administrative and administrative sources is the cornerstone of it. Meanwhile, the office work documents of registration character which are poorly introduced for scientific use allow to look at the specified problem on the other hand, to reveal in it such aspects which were not reflected in documents of other versions and types. Registration cards of medical personnel - some kind of questionnaires initiated and collected by public health departments of gubispolkom of Councils of working, country and Red Army deputies in the first years of the Soviet power can be an example of such source. 201 such questionnaires were postponed in the fund of Public health department of the Kazan gubispolkom which is stored in the National Archive of the Republic of Tatarstan (NART). They were also object of studying in this article.

Carrying out questioning had several tasks. First, the authorities interested the real situation in health care which developed by September, 1918 in Kazan. The city was in epicenter of military operations. On August 6, 1918 Kazan was taken by parts of National army Komucha - Committee of members of the All-Russian Constituent assembly, the first anti-Bolshevist Government of the Russian Federation. However, on September 10 komucheve left the city, and it was taken by the Red Army. Together with komucheve the city was left by different calculations from 15 to 57% of inhabitants (Malysheva & Salnikova, 2018, pp.101−102). Therefore very important was to find out how many doctors remained in Kazan and how many left what medical resources they had. At that time in the city were one military and two evacuation hospitals and also the wide network of hospitals - by our calculations, in total on 1639 beds was developed (SLEDGE, R-891 fund, the inventory 1, the case 13, sheet 113). On the other hand, the problem of identification of “alien” elements and recognition of health workers by the principle – “stranger” taking into account their belonging to social elite of a pre-revolutionary era was not less important.

METHODOLOGICAL FRAMEWORK

Questionnaires belong to mass sources which are the most expedient for processing, using quantitative and mathematical methods. Originally authors carried out continuous, without selection, viewing of questionnaires. Then for information processing the database of doctors in the form of the table in the EXCEL program was created that allowed to make statistical calculations, to carry out information search
and to install filters for selection of the data which are subject to processing. To each point of the questionnaire there corresponded certain point of the table. Besides, on the basis of answers of respondents additional points were created: whether the health worker receives a salary (yes/no) whether he has dependents (aged parents, siblings, children, etc.), whether he was involved in World War I (yes/no / yes, the doctor). Thus the questionnaire of the doctors, various on contents, living in Kazan by the end of September, 1918 was processed 201 identical in a form.

The applied methods of a prosopography and microhistory allowed designing the collective biography of the Kazan doctors of the first decades of the 20th century, to show a potential and real role of the Kazan medical community in fight for life and human health in one of the most difficult periods of the Russian history.

RESULTS

Registration Cards of Medical Staff as Historical Source: Form

Questionnaires contained the following items: a surname, a name, a middle name interviewed, its age, educational institution from which it graduated, year of the end of study, the short office biography, medical specialty, the place of work, occupation as private practice, marital status, a salary, the residential address. On the basis of the filled registration cards the Public health department of the Kazan executive committee made the summary table including less than a half of points of the questionnaire: a full name, specialty, a position, a mark about service, number of the questionnaire. As this information was of special interest for the power, it is possible to draw a conclusion that at that time poll set first of all the utilitarian purposes - namely, to reveal security of medical institutions of Kazan with medical staff taking into account medical specialties for assistance to patients and wounded. And here questions of educational institution and the former duty station were peculiar social filters. And, if the question of the place of study could be formalized, then the short working career could not be presented in figures. In fund of the Kazan provincial public health department we did not manage to find the evidence of use of this information. It is quite possible that these data were already at that time reported to the imperious and retaliatory authorities: it is well known what repressive actions against "dissident" and the "counterrevolutionary" intellectuals were undertaken after restoration in Kazan of the Soviet power in the fall of 1918 (Litvin, 1991, pp.73−74). And later, in 1920−1930s when people began to create "multiple" autobiographies to avoid recognition of as "class alien elements", these questionnaires could be used as incontestable certificates of the "counterrevolutionary past" confirmed with participants of events.

Why in the questionnaire the question of private medical practice was raised? The speech did not go to this period about its ban which is carried out by the circular Narkomzdrav much later yet - only in 1921. Most likely, such way there took place verification of professionalism of the doctor. Besides, if the doctor accepted patients at home, he could have own medical tools and the equipment which the Bolshevist power did not have or which were in deficiency. They could be confiscated for needs of public medical institutions and especially hospitals.

The question of a salary of doctors could interest the authorities taking into account possible standardization of compensation, and it is possible - need of some material support of this so demanded in the conditions of civil war and the heaviest economic crisis of category of employees. Same concerned also a question of marital status as family doctors received some additional financial support (SLEDGE, R-891 fund, the inventory 1, the case 4, sheet 15).
The complete set of medical shots in Kazan was carried out generally from graduates of the Kazan University. Of 201 interviewed people 21,4% - women and 78,6% – men (43 and 158 respectively). 66% (134 doctors) graduated from the Kazan University. Among them there were only 8 women who, however, graduated not from medical faculty of the Kazan university, and only biennial women's obstetric institute at department of obstetrics training midwives: as is well-known, up to 1918 women directly at the university were not allowed to training. 22 doctors (10,9%) - 8 women and 14 men - studied or trained abroad (18%), mainly in Germany and Switzerland, it is less – in France. Upon return they took state exams in Moscow or in Kazan.

The professional experience of doctors varied of 2 years (taking into account a side job in school hours) up to 69 years old. Practically all of them were representatives of the "old" intellectuals as even recent graduates of 1918 were enlisted for study in the Imperial Kazan University. 34% of doctors started the career in the XIX century. Regardless of age, all of them during the studied period experienced enormous strain. There were not enough doctors in Kazan then simply. The chief physician of the first Soviet hospital of Kazan repeatedly appealed to higher instances to forbid or limit combining jobs of doctors as those, according to him, did not cope fully with the duties in one workplace (SLEDGE, R-891 fund, the inventory 1, the case 41, sheet 15).

The lack of working hands was connected with the increased work volume. In 1918 load of hospitals, infirmaries and other medical institutions of Kazan increased several times that was connected with epidemic of typhus and civil war: 24% of doctors worked in evacuation (the 91st and the 93rd) military hospitals. At the same time 20,8% of respondents at all were not in the service (owing to age or other reasons which are not explained by a source) (SLEDGE, R-891 fund, the inventory 1, the case 13, sheet 91).

The analysis of questionnaires from the point of view of gender characteristics showed what from 158 male doctors, 25 had an academic degree. Any of female doctors had no that. At the same time specialization of doctors was not tied to sexual character: practically all specialties were presented by doctors of both sexes. The greatest number of female doctors specialized in the field of obstetrics (7) and venereology (10). And here only one woman called the surgeon herself. Gender discrimination in general here certainly was present, but here at distribution on service of big gender differences was not observed: in a percentage ratio the number of men and women on senior positions was identical.

Questionnaires showed that it was difficult for women to combine successful professional career with family life. Regarding male doctors, 130 (82,2%) of them had family, – 20 single, and – one divorced, – seven did not specify the marital status. Then from 43 women is married were only 21 (48,8%), unmarried – 14, and eight wished not to report about the marital status.

75% of doctors had family into which structure, besides wives and husbands, children entered (them 49,7% of doctors had), minor brothers and sisters, aged parents. Considering that, as a rule, wives of doctors could not work, they, together with minor and aged family members, got to category of dependents. Pointed 120 respondents (59,7%) to presence of dependents. It is natural that the number of excess "mouths" sharply reduced welfare of family of the doctor, especially during the considered period of economic deprivations and restrictions.

DISCUSSIONS

History of the Kazan medical community of the first years of the Soviet power was not before a subject of an independent research. However, being on crossing of several research directions, it was anyway lit with each of them. So, problems of training of doctors and the organization of medical care directly in the
Kazan province on the eve of and right after the revolution of 1917 found the reflection as in the works written by experts in the field of medicine (Zyyatdinov & Pavlukhin, 2005), and historians (Stepanova, 2000, etc.).

Much bigger success was achieved by the Russian historians in respect of studying of the Soviet imperious policy for the intellectuals in the explored region, including policy repressive (Litvin, 1991) and also in the field of the Soviet social history and history of the Soviet daily occurrence (Malysheva & Salnikova, 2018). These stories used special attention and from foreign researchers and found reflection in their works devoted to problems of formation of new social structure and new daily occurrence of the Soviet society of education of the "new" Soviet person during the early Soviet period (Ferré, 2011; Kiaer & Naiman 2006; Marot, 2012). Also the works of foreign researchers devoted to history of formation and development of the Soviet medicine (Bernstein, Burton, & Healey 2010 are of unconditional interest; Grant, 2017).

SUMMARY

Thus, the analysis of registration cards of the Kazan doctors showed that in fact they represented materials of biographical inspection, accurately and the medical community of Kazan which is definitely characterizing a state right after restoration of the Soviet power here in September, 1918.

The specifics of biographical inspections consisted that they were at the same time both a source of personal origin as were filled with own hand interviewed, and a source of official office work character as were initiated by the power. Such dual character of a source certainly affected in its structure and contents. The studied questionnaires allow to build, on the one hand, a certain "average" image of the provincial practicing doctor of the period of civil war and to assume what efforts of the Soviet power on elimination or "re-education" of socially alien health workers, gradual replacement with their socially close persons were directed to and - is wider - on change of social structure of society.

For the Soviet power the similar way of collection of information was very informative: questionnaires were mass and, at first sight, depoliticized. They offered such questions, answers to which as it seemed, did not demand default or distortion of information and therefore they allowed to reflect the existing realities and – indirectly – degree of loyalty of the practicing doctors in relation to the power. It was the effective way to carry out feedback and to act as the regulator of social behavior.

On the other hand, the attracted questionnaires were very informative in respect of entering of specifications and additions into biographies of outstanding physicians, for example, of the Russian and Soviet surgeon A.V. Viishnevsky.

CONCLUSION

This research for the first time introduces for scientific use the new, earlier not used resources which shed light on private life of the doctor of the period of wars and revolutions of a boundary of the 1910th - the 1920th years in Russia. It showed solvency and prospects of attraction of such kind of sources as materials of biographical inspections when studying questions of formation of social policy of the Soviet state, history of the Soviet daily occurrence and private life of the medical intellectuals. Application of cross-disciplinary research methods promoted identification in these sources of the obvious and latent, hidden information expanding ideas of instruments of transformation of social structure of the Soviet society and mechanisms of establishment of control over it.
RECOMMENDATIONS

Materials of article can be used for teaching socio-political history of Russia, history of health care and medicine, history of the intellectuals, a source study of office work documentation and also daily occurrence history.

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REFERENCES


 National Archive of the Republic of Tatarstan (NART). R-891 fund (Kazan provincial public health department), inventory 1, case 4, 13, 41.
