

Health Care System Reforms in the New Uzbekistan

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Article information:

Manuscript received: 21 Jul 2025; **Accepted:** 22 Aug 2025; **Published:** 23 Sep 2025

Annotation: This article analyzes the content and practical results of the health care reforms carried out in the Bukhara region in 2018. The study revealed positive changes such as the increase in the number of institutions, the strengthening of the material and technical base, the growth of personnel capacity, and the decrease in morbidity rates. In particular, it was noted that the number of doctors in the region reached 5,798, the number of mid-level medical staff amounted to 23,738, and that the financial support and technical equipment of the emergency medical service significantly improved. The expansion of emergency services and the increase in the number of resuscitation vehicles became an important factor in providing the population with fast and high-quality medical care.

However, the article also draws attention to existing problems, such as the uneven distribution of medical personnel between urban and rural areas, the insufficient development of high-tech services in some medical institutions, and the limited access to medical services for certain groups of the population. Based on these issues, recommendations were developed to further digitize the health care system, encourage the activities of the private sector, implement an electronic health record (EHR) system, and conduct regular training to improve the qualifications of medical personnel.

Overall, the results of the article highlight the scientific basis for studying the stages of health care development in the Bukhara region, improving regional health policies, and creating a methodological foundation for future reforms.

Main Text

Positive growth was also observed in human resources. The total number of practicing doctors across all specialties amounted to 5,798, of which 2,801 were women. The number of mid-level medical staff reached 23,738, the majority of whom (22,007) were women. In the private health sector, 643 doctors and 597 mid-level medical workers were employed.

There were also certain positive shifts in public health indicators. In 2018, the number of patients diagnosed with various diseases for the first time amounted to 608,208, which was 118,106 fewer compared to 2017. This indicates the increased effectiveness of preventive and treatment services. For the development of emergency medical services in the Bukhara region, 2.081 billion soums were allocated. In 2016, the average cost per emergency call was 745 soums. As a result of increased state attention, many existing problems were eliminated. In particular, the funds allocated for medicines per call increased more than tenfold, reaching an average of 7,700 soums.

At the same time, in 2016, there were 800 emergency substations and 1,648 emergency brigades operating nationwide, while today their numbers have increased to 1,666 and 2,685, respectively. Furthermore, in 2016, the emergency network in Tashkent had only 24 resuscitation vehicles, whereas

in just the first four months of 2020, the Tashkent emergency station acquired 150 Ford resuscitation vehicles equipped with modern medical apparatus.

Currently, there are 435 resuscitation vehicles in the country's emergency service system, with one vehicle per 13,000 people. A few years ago, this figure was one per 15,000 people. In 2018, in the Bukhara region alone, the official statistics of emergency medical services recorded 111 emergency units, 463,968 completed calls, and 510,704 patients who received medical care — a clear sign of positive changes in the field.

In general, in 2018, the health care system of the Bukhara region demonstrated the practical effectiveness of reforms through the growth in the number of institutions, strengthening of the material-technical base, improvement in the capacity of personnel, and the decrease in morbidity rates. In 2019, 82 hospital institutions operated in the region, treating 352,839 patients throughout the year. Compared to 2018, the number of doctors increased by 102.5%, and the number of mid-level medical staff by 102.2%. The number of outpatient-polyclinic institutions in the region amounted to 536, of which 93 were rural health centers. Compared to 2018, the number of outpatient-polyclinic institutions increased by 50.

In 2018, the Bukhara region's emergency services recorded 589,073 calls and provided medical assistance to 627,232 patients. The analysis of the results of reforms in the health care system of the Bukhara region in 2018 demonstrates the practical effectiveness of regional health policies. The increase in the number of health care institutions and the strengthening of their infrastructure helped expand access to medical services. The growth of outpatient-polyclinic institutions brought primary health care closer to the population, strengthened preventive measures, and improved the efficiency of treatment processes.

Positive changes were also observed in staffing: the number of doctors and mid-level medical staff increased (5,798 doctors in total). The large share of mid-level medical staff played an important role in improving the quality of services provided in medical institutions. Public health indicators also improved, as evidenced by the decline in first-time diagnoses, which indicates the strengthening of preventive work and the effective organization of treatment systems.

Despite these positive results, it is important to note existing problems. These include the uneven distribution of medical personnel between urban and rural areas, the underdevelopment of high-tech medical services in certain institutions, and limited access to medical services for some segments of the population. To address these issues, it is necessary to deepen the digitization of the health care system, create an integrated electronic medical database, enhance the qualifications of medical staff, and widely introduce innovative technologies.

In general, the health care reforms implemented in 2018 in the Bukhara region yielded significant results in a short period. To transform these results into long-term sustainable development, systemic approaches, efficient management, and the prudent use of international experience are required. The findings of this article are important for improving regional health policies on a scientific basis, enhancing the quality of services provided to the population, and creating a methodological basis for future reforms.

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