

Surviving Starvation in Soviet Ukraine: Children and Soviet Healthcare in the Early 1930s

An anonymous pediatrician and Soviet postwar refugee, interviewed in the United States by Harvard scholars in 1951, recalled her experience during the famine of 1932–1933 in Ukraine: “Most of the mothers told us, ‘Why do you give us injections [vaccinations]? All that we need is bread.’ They really and truly needed bread first of all, and the rest could come later. Also, if we did prescribe food, they would say, ‘What food can we get?’”¹ The artificial, state-induced famine in Soviet Ukraine, known as the Holodomor, was the consequence of mass food requisitions and the “war on peasants.” The forced mass starvation became the instrument of collectivization. The Holodomor was part of a Soviet Union-wide famine; other areas affected by the mass starvation included, for example, Kazakhstan, the Lower Volga Region, and the Northern Caucasus. Kazakhstan experienced the highest number of victims in proportion to its population (approximately a quarter of the Kazakh people perished in 1930–1933). The catastrophic famine also heavily hit the Kuban region (a part of the Russian Socialist Federative Soviet Republic), populated by ethnic Ukrainians and Volga German communities.² At the same time,

- 1 Harvard Project on the Soviet Social System. Schedule B, Vol. 2, Case 1700. Widener Library, Harvard University, 9. The identity of the pediatrician is unknown because, due to security reasons, all participants of the Harvard Project on the Soviet Social System testified anonymously and their real names were not recorded on any documentation related to the project.
- 2 Robert Conquest, *The Harvest of Sorrow: Soviet Collectivization and the Terror-Famine* (New York: Oxford University Press, 1986), 274–82; Brian J. Boeck, “Complicating the National Interpretation of the Famine: Reexamining the Case of Kuban,” *Harvard Ukrainian Studies* 30, no. 1–4 (2008): 31–48; Sarah Cameron, *The Hungry Steppe: Famine, Violence, and the Making of Soviet Kazakhstan* (Ithaca: Cornell University Press), 2018.

the famine in Ukraine had distinct features. Besides the famine, the Soviet government conducted repressive policies against the Ukrainian intelligentsia and the republic was one of the territories affected the most.³

Famines are associated with public health crises, and they put a substantial strain on healthcare systems. One of the features of catastrophic famines is the collapse of public healthcare systems due to the spread of communicable diseases caused by malnutrition and migration.⁴ As a result, diseases could often be one of the main causes of excess mortality. As the Soviet government attempted to cover up the famine, it is impossible to establish the primary cause of death of Holodomor victims. However, following the common pattern, the intensification of the famine caused the spread of infectious diseases, especially epidemic typhus.⁵ Traditionally, children are the most vulnerable population group during famines. According to demographic research, children below the age of fourteen constituted approximately 43.5 percent (1.7 million) of the Holodomor victims.⁶ My study examines the medical relief campaigns that aimed to provide medical assistance to children during the state-induced famine between 1932 and 1933 in Ukraine and analyzes how total state violence shaped the nature of these relief campaigns. My main focus will be on exploring the experience of young patients by studying survivors' testimonies.

In the early 1920s, the Soviet leadership planned to implement their vision of public healthcare and provide free medical services to the Soviet working class. Despite a gradual improvement, the lack of trained medical personnel and funds hindered the development of the Soviet healthcare

3 Norman M. Naimark, "How Holodomor Can Be Integrated into Our Understanding of Genocide," in *Contextualizing the Holodomor: The Impact of Thirty Years of Ukrainian Famine Studies*, ed. Andrij Makuch and Frank S. Sysyn (Edmonton and Toronto: Canadian Institute of Ukrainian Studies, 2015), 112–24.

4 Alex de Waal, *Mass Starvation: The History and Future of Famine* (Malden, MA: Polity, 2018) 6, 9, 48–9, 92–3.

5 The military authorities stated there were more than 135,000 cases of epidemic typhus in Ukraine during nine months of 1933 compared to less than 18,000 in 1932, 11,600 in 1931, and 5,400 in 1930. See: Tsentral'nyi derzhavnyi arkhiv hromads'kykh ob'ednan' Ukrainy (TsDAHO), f.1, op. 20, spr. 6232, 72–76 zv. The spread of malaria was, among others, a consequence of mass starvation, and the party leadership informed Moscow that in September 1933 alone there were roughly 200,000 cases of malaria in Ukraine. According to the official statistics, there were about 60,000 cases of malaria in May, 65,613 in June, 70,500 in July, and 150,000 in August. See: TsDAHO, f.1, op. 20, spr. 6232, 69.

6 Natalia Kuzova, "Childhood during the Holodomor 1932–1933 in Ukraine (in the South of Ukraine)," *Journal of Family History* 47, no. 1 (2022): 59.

system.⁷ Simultaneously, Soviet officials proclaimed that children were the healthcare system's main priority, and the government established a network of children's hospitals and clinics, including the Research Institute of Protection of Motherhood and Childhood in Kyiv in 1928.⁸ Although official statistics showed an increasing number of specialized institutions, the Soviet government failed to fulfill the plan. Additionally, the existing hospitals and clinics often did not provide adequate services because of staff and financial shortages. Even official Soviet sources emphasized the lack of modern medical services was especially visible in the countryside. According to statistics, in 1929, one doctor provided care for approximately 5,560 rural patients, and only 22.1 percent of rural women had access to medical assistance during childbirth.⁹ The shortage of trained personnel posed the most serious problem for the public health authorities. Although the government encouraged medical personnel to work in the countryside and provided some additional benefits, the majority of doctors tried to find employment in the cities. To solve the issue, some public health officials suggested mandatory service in rural areas for all medical graduates.¹⁰

Soviet medical experts embraced social hygiene as the main approach to public healthcare in the 1920s. Nutrition became one of the main areas of research, and the authorities founded the State Nutrition Institute in Kharkiv, Kyiv, and Odesa in 1930.¹¹ Experts declared that the main task of

7 For a short overview of approaches to Public Healthcare in the Soviet Union, see: Tricia Starks, "Propagandizing the Healthy, Bolshevik Life in the Early USSR," *American Journal of Public Health* 107, no. 11 (2017): 1718–24.

8 L. Babiuk, "Medytsyna u povsiakdennomu zhytti zhynotstva riadians'koi Ukrainy v roky NEPu (1921-1927)," *Naukovi zapysky istorichnoho fakul'tetu Zaporiz'koho natsional'noho universytetu* 49 (2017): 66–70; Olha Artiushenko, "Okhorona dytynstva i materynstva v USRR u 1928-1933," *Problemy istorii Ukrainy: fakty, sudzhenia, poshuky* 19, no. 2 (2010): 142–68.

9 Khorosh I. D., *Rozvytok okhorony zdorov'ia na seli v Ukrain'skii RSR* (Kyiv: Zdoriv'ia, 1968), 168–69.

10 Artiushenko, "Okhorona dytynstva," 152–65; P. Pozumentirov, "Neskol'ko polozheh nii ob organizatsii zdavookhraneniia na sele," *Vrachebnoe delo*, no. 14–15 (1930): 1038–47; Khorosh, *Rozvytok okhorony zdorov'ia*, 157–58.

11 Hordina B. L., "Problema pitanniia v rekonstruktivnoi period i zadachi zdavi ochraneniia," *Vrachebnoe delo*, 12-13 (1930), 947–54; O. F. Slin'ko, "Nauka na fronti borot'by za rekonstruktsiu hromads'koho kharchuvannia," *Problemy kharchuvannia*, 6 (1932), 3. Medical officials promoted communal feeding as both a healthy alternative that increased productivity and a means of emancipation for Soviet women. For instance, some experts argued that individually feeding children not only took up the women's time but also could lead to overfeeding and serious mental trauma. See: A. Kisel', "Konsul'tativnaia praktika," *Vrachebnoe delo*, no. 18 (1930): 1340.

public healthcare was not to cure but prevent disease, and improvement in nutrition was one of the key factors of this approach. In 1932, Iakiv Lifshits, an ideologist of the Soviet medical system and a future director of the Ukrainian Institute of Experimental Medicine, wrote that special attention had to be paid to child mortality as medical professionals would be able to achieve significant improvement due to the development of healthcare.¹² However, the realities of the state-induced famine sharply contradicted official proclamations, and the Soviet state was responsible for millions of deaths from hunger and famine-related diseases.

Historiography and Primary Sources

Most scholars focus on the top-down examination of the Soviet leadership's role in the mechanism of the Holodomor.¹³ At the same time, recent scholarship indicated the turn to social history that resulted in the attention to the experience of ordinary survivors and perpetrators.¹⁴ As official Soviet documents were unsuitable for studying the personal experience of Holodomor victims, researchers started to incorporate previously neglected testimonies. Among other topics, scholars have explored children's experiences during the famine, but usually children are depicted as passive victims without a sense of agency. The main focus of the research was on demographic losses, institutions, and the experience of children through studying the experience of their parents and adult

12 Ia. Lifshits, "Pro druhu p'iatylytku medychnoi nauky v USRR," *Zhurnal medychnoho tsyklu* 2, no. 3 (1932): 547.

13 See for example: works of Robert Conquest, *The Harvest of Sorrow: Soviet Collectivization and the Terror-Famine* (New York: Oxford University Press, 1986); R. W. Davies and Stephen Wheatcroft, *The Years of Hunger: Soviet Agriculture, 1931–1933* (New York: Palgrave Macmillan, 2004); Andrea Graziosi, *Stalinism, Collectivization and the Great Famine* (Cambridge, MA: Ukrainian Studies Fund, 2009); Stanislav Kulchytsky, *The Famine of 1932–1933 in Ukraine: An Anatomy of the Holodomor* (Edmonton and Toronto: CIUS Press, 2018).

14 Oksana Kis, "Women's Experience of the Holodomor: Challenges and Ambiguities of Motherhood," *Journal of Genocide Research* 23, no. 4 (2021): 527–46; Daria Mattingly, "Idle, Drunk, and Good for Nothing: Cultural Memory of the Rank-and-File Perpetrators of the 1932–33 Famine in Ukraine," in *The Burden of the Past: History, Memory, and Identity in Contemporary Ukraine*, ed. by Anna Wylegala and Malgorzata Glowacka-Grajper (Bloomington: Indiana University Press, 2020), 19–49; Victoria Khiterer, "The Holodomor and Jews in Kyiv and Ukraine: An Introduction and Observations on a Neglected Topic," *Nationalities Papers* 48, no. 3 (2020): 460–75.

relatives.¹⁵ Iryna Skubii's short article about children's material world and its relation to their survival strategies is the only work that regards children not as objects but as subjects and thus recognizes their agency.¹⁶

My research is situated in the broader fields of medical history and famine studies. Despite the repeated attempts to re-center medical history from the perspective of medical professionals to the perspective of patients (those who were suffering or ill), the main focus remains on professional medical discourse.¹⁷ This study aims to bridge these two approaches and examine the medical relief campaign conducted by Soviet authorities and the personal experiences of medical treatment of young famine victims. In the context of famine studies, it contributes to the examination of victims' agency during catastrophic famines. To analyze the Soviet public health policy during the Holodomor, I use sources produced by Soviet institutions deposited at the regional and central archives in Ukraine (among them the files of the People's Commissariat for Public Health in Ukraine, the regional branches of the Public Health Departments and reports of the Joint State Political Directorate [ODPU]). Additionally, the survivors' stories are vital for the project as they allow me to explore the agency of children and my work will heavily rely on testimony collections.

The first systematic projects to collect testimonies of Holodomor eye-witnesses started in the late 1980s, and most witnesses were child survivors. As the Soviet government denied that the famine of 1932–1933

- 15 Although Conquest's monograph, the first book-length study of the famine, included a chapter about children, scholars focused on the in-depth examination of children's experiences two decades later. For example, I. Shul'hanova and R. Moldavs'kyi, "Dytiacha smertnist' v syrotyntsiakh Ukrainy v roky Holodomoru," *Ukrains'kyi selianyn* 26 (2021): 44–7; Artem Kharchenko, "'Potribni bil'sh kvalifikovani robitnyky': kolektyvnyi portret personal syrotyntsi naperedodni Holodomoru 1932–1933," *Ukraina Moderna*, <https://uamoderna.com/md/kharchenko-orphans>, accessed September 15, 2023; Oksana Kis, "Women's Experience of the Holodomor: Challenges and Ambiguities of Motherhood," *Journal of Genocide Research* 23, no. 4 (2021): 527–46; Kuzova, "Childhood during the Holodomor," 59–77.
- 16 Iryna Skubii, "Material'nyi svit ditei v roky Holodomoru ta shcho vriatuvalo ikhni zhyttia," *Studii Holodomoru* (2020), https://www.researchgate.net/publication/344394882_Materialnij_svit_ditej_v_roki_Golodomoru_ta_so_vratuvalo_ikhni_zitta_Material_World_of_Children_in_the_Holodomor_and_What_Saved_Their_Lives, accessed September 15, 2023.
- 17 Roy Porter, "The Patient's View: Doing Medical History from Below," *Theory and Society* 14, no. 2 (1985): 175–98; Flurin Condrau, "The Patient's View Meets the Clinical Gaze," *Social History of Medicine* 20, no. 3 (2007): 525–40; Anne Hanley and Jessica Meyer, eds., *Patient Voices in Britain, 1840–1948* (Manchester: Manchester University Press, 2021).

had occurred, the victims were silenced and only decades later, child survivors could speak out about their experience during the Holodomor. The U.S. Commission on the Ukraine Famine was founded in 1984 and was tasked with investigating the famine in Soviet Ukraine. As a result of its work, the Commission published three volumes of eyewitness testimonies in 1990. The interviews described the personal experience of hundreds of Holodomor survivors who had emigrated to North America after the Second World War. Despite residing outside the Soviet Union, many witnesses were afraid that Soviet government repercussions could affect their relatives in Ukraine and preferred to testify anonymously.¹⁸

The first attempt to collect eyewitness accounts in Soviet Ukraine took place in 1989 after the previously forbidden topics emerged in the public discourse during the new era of openness. *Silski visti*, the Ukrainian newspaper with the highest circulation, issued an appeal to Holodomor survivors to send their memoirs. Survivors (some of whom were barely literate) wrote thousands of letters in which, for the first time, victims shared their experience of surviving the mass starvation.¹⁹ Among other important sources are approximately one hundred video testimonies collected for the eightieth anniversary of the Holodomor.²⁰ Materials related to the Holodomor are also preserved in Holocaust collections such as the Visual History Archive at the USC Shoah Foundation.²¹

Survivors' personal accounts allow me to uncover the voices of children and their experience of medical treatment. They show that children could actively seek medical assistance and they understood that it was vital for their survival. For instance, an anonymous witness, who was fourteen years old during the Holodomor, recalled being sick after eating some food substitute: "My younger brother forced me to go three kilometres to the clinic near the market and post office. He found a woman in the white coat there and begged her to save me."²² Despite the

18 John Vsetecka, "Toward a Social History of the Holodomor and its Aftermath: Famine Survivor Testimonies in the Archive of the US Commission on the Ukraine Famine," *Ukraina Moderna* 30 (2021): 59–79.

19 Olga Klymenko, "History as a Narrative of the People: The Maniak Collection as a Source for the Social and Cultural History of the Holodomor," *Ukraina Moderna* 30 (2021): 80–119.

20 The short extracts of the interviews can be viewed at <http://sharethestory.ca/>, accessed March 15, 2023. The full-length video testimonies are deposited at the Ukrainian Canadian Research & Documentation Centre in Toronto.

21 Inna Gogina, "Representations of the 1932–33 Ukrainian Famine in the USC Shoah Foundation's Visual History Archive," *Ukraina Moderna* 30 (2021): 37–58.

22 The victim lived in Kaharlyk (a town in the Kyiv region), with presumably better access to medical facilities than most peasants. "Case History SW1 and SW2," in

children's pleas, the woman, who spoke Russian, refused them medical treatment, and she expelled them from the clinic: "But my brother didn't give up. He screamed. More people in white coats ran to us, and finally, some old Ukrainian woman saved me."²³ Although witnesses mentioned a lack of or inadequacy of assistance, many were saved by hospital personnel. At the same time, the treatment could leave visible scars on their bodies that reminded them about the famine and disease:

I contracted malaria, and I was taken to the hospital where I got some food. I was happy to be in the hospital because they fed me. [...]. My hand swelled [due to injections]. It didn't hurt, but there was a large swelling. After I had left the hospital, I visited the doctor, and he cut my hand. I have the scar here. [...]. I have a reminder on my own body.²⁴

All collections of testimonies were created in different political climates, but as scholars and activists recorded testimonies many decades after the famine, the collections share similar shortcomings. Because of the distance between the events and their recollections, witnesses could forget details, and subsequent life experiences could influence their testimonies. However, based on a systematic examination of the Starachowice labor camp survivors' testimonies, Christopher Browning argues that the "core memory" was mostly stable despite the time and geographic distance from the events.²⁵ Following Browning's terminology, Joanna Michlic notes that essential episodes of Holocaust child survivors' "wartime autobiographies remain almost intact."²⁶ Frequently traumatic but also positive experiences (the latter often related to some trivial everyday pleasures) were among those that constituted core memory.²⁷ Similarly, in the

Investigation of the Ukrainian Famine, 1932–1933: Oral History Project of the Commission on the Ukraine Famine, vol. 2, eds. James E. Mace and Leonid Heretz (Washington, DC: United States Government Printing Office, 1990), 722.

23 "Case History SW1 and SW2," 722.

24 At the time of the famine, Oleksiy Ohienko was seven years old. Ohienko, Oleksiy. Interview by Ariadna Okhrymovych. Vita, 01 Aug. 2008, Ukrainian Canadian Research and Documentation Center, <https://vitacollections.ca/HREC-holodomordigitalcollections/3796531/data?g=d&n=3>, accessed September 15, 2023.

25 Christopher Browning, *Remembering Survival: Inside a Nazi Slave-Labor Camp* (New York: W.W. Norton & Co., 2010), 9–10.

26 Joanna Beata Michlic, "The Aftermath and After: Memories of Child Survivors of the Holocaust," in *Lessons and Legacies X: Back to the Sources: Reexamining Perpetrators, Victims, and Bystanders*, ed. S. Horowitz (Evanston, IL: Northwestern University Press, 2012), 178.

27 Michlic, "The Aftermath and After," 142.

context of the Holodomor, the death of parents and relatives, abandonment, acute starvation but also simple acts of kindness are reoccurring memories in the young victims' testimonies.²⁸ Although scholars should be aware of limitations and of the context in which testimonies were collected, there are few early memoirs of Holodomor survivors. These late collections are thus valuable sources for studying the personal experience of the famine.

Soviet Healthcare and the Famine in Ukraine: Research Questions

Healthcare professionals informed authorities about mass starvation long before the famine entered its deadliest phase, which started in the spring of 1933. Due to their work, doctors were well aware of the mass starvation and increasing spread of famine-related medical conditions in the countryside and urban areas. Medical information and statistics circulated among party regional and republican leadership.²⁹ In the spring of 1933, medical professionals lost control over the spread of epidemic diseases, which became a serious threat to the urban population, and this period marked the start of an organized medical relief campaign. During the

28 For instance, some children remembered the kindness of physicians during the famine. Oleksandra Ovdiuk from the Kyiv region wrote: "I will always remember with gratefulness the doctor Eva Borysivna Hin. The Red Cross sent her from Kyiv to support starving children. In the spring of 1933, she came with a supply of fish oil, and she gave children a tablespoon of fish oil every day for a whole month. When she ran out of fish oil and left the village in tears, we lost even this support." Oleksandra Ovdiuk and Alisa Maslo, "Svidchennia," in *33-i: Holod narodna knyha memorial*, ed. Lidiia Kovalenko, and Volodymyr Maniak (Kyiv: Radians'kyi pys'mennyk, 1991), 243. An anonymous witness testified for the U.S. Commission on the Ukraine Famine about his experience as a teenage boy in one of the Kharkiv hospitals: "I recovered in three days or week, but the doctor kept me at the hospital the whole month, so I could gain some weight." Case History LH56," in *Investigation of the Ukrainian Famine, 1932-1933: Oral History Project of the Commission on the Ukraine Famine*, vol. 2, eds. James E. Mace and Leonid Heretz (Washington, DC: United States Government Printing Office, 1990), 608.

29 "Dopovidna zapyska holovnoho likaria do holovy sektiisii ohorony zdorovia," in *Natsionalna knyha pamiati zherstv Holodomoru 1932-1933 rokiv v Ukraini. Misto Kyiv*, ed. V.I. Marochko (Kyiv: Feniks, 2008), 117; "Zvedennia komisii z predstavni ykiv medychnykh ustanov," in *Natsionalna knyha pamiati zherstv Holodomoru 1932-1933 rokiv v Ukraini. Kirovohradska oblast*, ed. O. O. Babenko et al. (Kirovohrad: "Imeks-LTD", 2008), 847-49; "Dopovidna zapyska Narkomatu okhorony zdore ov'ia" in *Natsionalna knyha pamiati zherstv Holodomoru 1932-1933 rokiv v Ukraini. Kyivska oblast*, ed. V.I. Ul'iznchenko (Kyiv: Feniks, 2008), 1296.

campaign, children were a prioritized group, but officials tried to conceal mass starvation and did not mention it directly in the documents. Instead, the only indication of the famine was orders to medical workers and the Red Cross to prevent homelessness by “mobilizing” food resources for additional daycares and playgrounds and providing some food for schoolchildren.³⁰ Simultaneously, the authorities introduced disciplinary measures to stop the spread of epidemics.³¹ This study explores how the atmosphere of secrecy shaped the medical relief campaign that aimed to provide medical assistance to children and examines the relationship between total state violence and public healthcare during the Holodomor. Did doctors withhold medical treatment from any group of young patients? How did children perceive public health orders and medical treatment? Did young patients consider Soviet medical workers to be rescuers or perpetrators? The study of the relationship between medical professionals (state employees in positions of power) and young patients further allows us to uncover mechanisms of the Holodomor.

30 “Z postanovy prezydii kharkivskoho oblyvykonkomu,” in *Holodomor 1932-1933 rokiv u m. Kharkovi stolytsi USRR*, ed. V.V. Kalinichenko et al. (Kharkov: Oryhinal, 2009), 117–18.

31 “Z protokolu zasidannia uriadovoi komisii,” in *Holodomor 1932-1933 rokiv u m. Kharkovi stolytsi USRR*, ed. V.V. Kalinichenko et al. (Kharkov: Oryhinal, 2009), 131–33; “Epidemiolohichne zvedennia zakhvoriuvan’,” in *Holodomor 1932-1933 rokiv u m. Kharkovi stolytsi USRR*, ed. V.V. Kalinichenko et al. (Kharkov: Oryhinal, 2009), 149; “Z protokolu zasidannia epidemichnoi komisii,” in *Holodomor 1932-1933 rokiv u m. Kharkovi stolytsi USRR*, ed. V.V. Kalinichenko et al. (Kharkov: Oryhinal, 2009), 186–89; “Mandat, vydanyi nadzvychainoiu sanitarnoiu komisieiu,” in *Holodomor 1932-1933 rokiv u m. Kharkovi stolytsi USRR*, ed. V.V. Kalinichenko et al. (Kharkov: Oryhinal, 2009), 197.