SIDNEY BLOCK
PETER REDDAW

SOLIET PSYCHIATRIC ABUSE

The Shadow over World Psychiatry

by the authors of RUSSIA'S POLITICAL HOSPITALS

SOVIET PSYCHIATRIC ABUSE:

The Shadow over World Psychiatry

by

SIDNEY BLOCH and PETER REDDAWAY



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For Felicity and Kathy

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BY THE SAME AUTHORS:

RUSSIA'S POLITICAL HOSPITALS

The Abuse of Psychiatry in the Soviet Union

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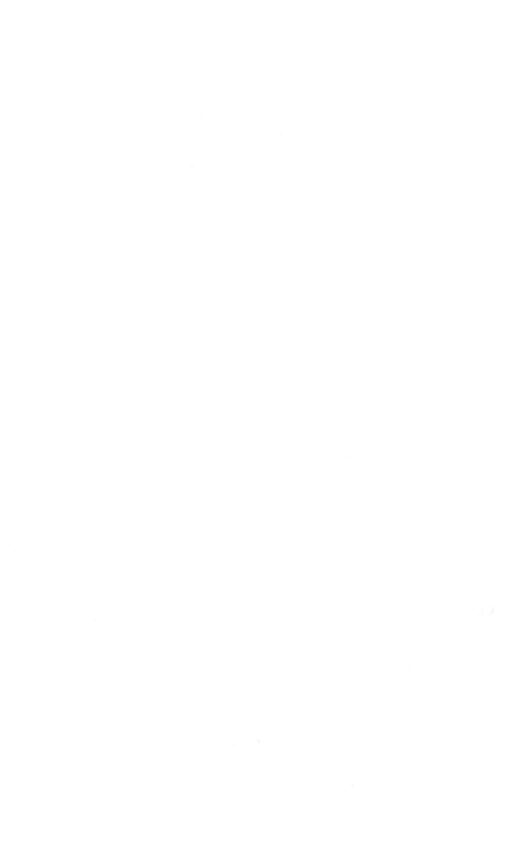
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PREFACE

WHEN IN 1977 we completed Russia's Political Hospitals (Psychiatric Terror in the American edition), our first book on the subject of the political abuse of psychiatry in the USSR, the issue was coming to a head in international psychiatric circles. It seemed then that concerted action by the profession might well pave the way for the abolition of political psychiatry. Alas, this was not to be—the Soviet practices continued more or less unabated, and have done so until the present. During this period of six years, psychiatry throughout the world has undergone a traumatic experience, as the campaign to try to combat psychiatric abuse, and official Soviet opposition to that campaign, have both intensified. The battle finally culminated in the resignation of the Soviet Psychiatric Society from the World Psychiatric Association in January 1983, and in momentous repercussions at the Association's World Congress six months later. The outcome was a profession subject to division and schism. It is with these dramatic developments that the present volume is chiefly concerned.

In the first chapter, we briefly recapitulate the contents of Russia's Political Hospitals by covering the main aspects of the misuse of psychiatry to suppress dissent. In doing so, we have brought the original account up to date. The body of the book, which follows, consists of a detailed description and evaluation of international developments in this field from the time of the Sixth Congress of the World Psychiatric Association, held in 1977 in Honolulu, up to and including the Seventh Congress in 1983 in Vienna. We start in chapter two with an account of the Honolulu congress, at which the Russians' unethical conduct was formally condemned and a Review Committee was created to investigate the abuse of psychiatry

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wherever it might occur. In chapter three we turn to the opposition movement that evolved in the Soviet Union around the time of Honolulu and gave an extra impetus to the international campaign against psychiatric abuse. We focus particularly on a remarkable human rights group, the Working Commission to Investigate the Use of Psychiatry for Political Purposes, charting its growth, mode of operation and effectiveness, and its final destruction by the KGB.

In chapter four we examine the Review Committee of the World Psychiatric Association—the hurdles confronted by the Association in setting it up, its modus operandi, and its ultimate impotence in the face of Soviet psychiatry's failure to co-operate with its investigations. Chapter five deals with the efforts of various psychiatric and other bodies to bring political psychiatry to an end, including the clinical examination of ex-dissenter-patients, the support given to victims and their families, the application of pressure on the Soviet psychiatric leadership, and attempts to establish contact with ordinary Soviet psychiatrists.

Whether to pursue dialogue or confrontation with the Soviet Union is the theme of chapter six, which traces the evolution of a movement to expel the Soviet Psychiatric Society from the World Psychiatric Association, and the official reaction of the Society to this radical intent. The dénouement of this contest is covered in the next chapter, which provides our account of the dramatic resignation of the Soviet Union from the world body—the reasons for the decision, the reactions of other member societies, and the broader repercussions for world psychiatry. In chapter eight we focus on the Vienna congress, examining the decisions taken there in the light of the withdrawal of the Soviet Society and some of its allies. We consider the immediate effects of these resignations on the organization, and speculate briefly about the likely implications for the psychiatric profession both within the Soviet Union and throughout the world.

A short appendix follows containing some key documents which illuminate various facets of the subject. All translations are by us.

We would like to record our sincere thanks to many people who helped us, directly or indirectly, in the preparation of this book. First and foremost, we thank the members of the Moscow-based commission on psychiatric abuse, many ex-dissenter-patients, émigré Soviet psychiatrists, and human rights dissenters both in and outside the USSR, all of whom have been indispensable in our research. The contributions of our colleagues in the Special Committee on Political Abuse of the Royal College of Psychiatrists, the London Working Group on the Internment of Dissenters in Mental Hospitals (of which we are members), and the International Association on the Political Use of Psychiatry have been exceedingly helpful and are much appreciated. Jane Manley of the Royal College of Psychiatrists and Ellen Mercer of the American Psychiatric Association were always willing to help with our enquiries. Our special thanks go to Robert van Voren for his constant encouragement.

Pauline Madden did a superb typing job, and Marie Vickers was helpful in all sorts of ways. We are grateful to Kathy Reddaway for her compilation of the Index. One of the authors (SB) would like to express his gratitude to his mother, Rachel Bloch, to Frieda and Mark Verstandig, and to Gery Low-Beer for making life considerably easier during his period of study-leave. Finally, we thank our wives, Felicity and Kathy, for their endurance and constant support.

S. B. and P. R. July 1983



CHAPTER ONE

POLITICAL ABUSE: WHAT IS IT?

The Vulnerability of Psychiatry

BECAUSE OF ITS particular nature, the profession psychiatry has to wrestle constantly with a wide range of ethical questions. Although many of these are shared with medicine in general, the practice of psychiatry involves some exceptional quandaries. Consider, for example, the question of compulsory hospitalization. The psychiatrist, uniquely, has the awesome authority, invested in him by society, to place a person in a psychiatric hospital without his consent. Although granted legal sanctions to fulfil this role, the relevant statutes are frequently ambiguous and ill-defined. Even when the law is more explicit, its translation into practical guidelines is exceedingly complex. A person posing a danger to himself or to others is the usual reason for commitment—on the face of it, reasonable enough—but the psychiatrist's predicament lies in the lack of objective criteria to predict dangerous behaviour. His best efforts to arrive at a clinically-scientific judgement are inevitably influenced by pressures from several sources including his own tendency to play safe in the face of doubt.

The slender scientific basis for a judgement about dangerousness also applies elsewhere in psychiatry. In contrast to other spheres of medical work, objective criteria to establish whether a psychiatric condition is present or not are unavailable in many cases. Even more problematic is the whole question of what is mental illness. An influential body of opinion—Thomas Szasz² is its most vocal representative holds that psychiatry does not deal with ill people at all but rather with their problems in living. Thus, to label a young married mother's unhappiness as "morbid depression" constitutes a camouflage of the real issue: namely, that she feels