

Semyon Gluzman and the Unraveling of Soviet Psychiatry

Richard J. Bonnie

J Am Acad Psychiatry Law 29:327-9, 2001

In 1971, Dr. Semyon Gluzman, a young Ukrainian psychiatrist freshly out of medical training, wrote a report on the case of the dissident General Pytor Grigorenko, who had been prosecuted and found mentally nonresponsible in 1964, concluding that General Grigorenko had been hospitalized for political reasons and without any medical justification. In response to this direct challenge to the Soviet regime, Dr. Gluzman was arrested and charged with "anti-Soviet agitation and propaganda" and was sentenced in October 1972 to seven years in a labor camp and three years of internal exile. While imprisoned, Dr. Gluzman persisted in calling attention to human rights violations in Soviet prisons and coauthored *A Manual on Psychiatry for Dissidents* (with Vladimir Bukovsky, 1974) as well as *The Fear of Freedom* (1978). Although reports had been circulating in the West for several years about the incarceration of political and religious dissenters in maximum-security psychiatric hospitals, Dr. Gluzman's imprisonment galvanized Western psychiatric associations into action, leading to condemnation of Soviet psychiatry by the World Psychiatric Association (WPA) in 1977 and to an active campaign for the release of Dr. Gluzman and other dissenting psychiatrists.

Soviet psychiatric repression, representing a simultaneous violation of human rights and a breach of medical ethics, became a subject of intense concern in international human rights circles and in the world medical community. Through-

out this period, however, Soviet psychiatric officials denied the charges and refused to permit international bodies to see the patients and hospitals in question. International criticism intensified. In 1983, the Soviet psychiatric association resigned from the WPA in the face of almost certain expulsion.

Soviet Psychiatry was a "shadow over world psychiatry" for more than 20 years.¹ Moreover, the continuing drama of psychiatric repression in the Soviet Union became a prominent feature of the intensifying debate in the United States about the proper justifications for coerced psychiatric treatment and the ethical hazards of psychiatric diagnosis. Inevitably, Soviet psychiatric abuses aroused the interest of leading figures in the developing subspecialty of law and psychiatry in this country. Dr. Alan Stone of the Harvard Law School evaluated Dr. Grigorenko in 1978 while he was in the West for medical treatment and found no evidence of mental illness.² A decade later, as winds of change began to sweep across the Soviet Union, Dr. Loren Roth of the University of Pittsburgh Medical School undertook the complex task of negotiating with Soviet officials to set the terms of an investigatory mission by a U.S. State Department delegation instructed to "assess recent changes in Soviet psychiatry." Under the terms of this agreement, the delegation interviewed suspected victims of psychiatric imprisonment and conducted unrestricted site visits to hospitals selected by the delegation. This extraordinary visit was arranged by the Soviet Foreign Ministry and the U.S. State Department over the objection of the Soviet psychiatric leadership.

Mr. Bonnie is John S. Battle Professor of Law and Director of the Institute of Law, Psychiatry and Public Policy at the University of Virginia, Charlottesville. Address correspondence to Richard J. Bonnie, University of Virginia School of Law, 580 Massie Road, Charlottesville, VA 22903. E-mail: rbonnie@virginia.edu

The following year (1989), the delegation made its visit to the Soviet Union. It will come as no surprise that the investigation provided unequivocal proof that the tools of coercive psychiatry had been used, even in the late 1980s, to hospitalize persons who were not mentally ill and whose only transgression had been the expression of political or religious dissent.³ Most of those persons interviewed by the delegation had been charged with political crimes, such as anti-Soviet agitation and propaganda or defaming the Soviet state—the same charges lodged against Dr. Gluzman for his youthful defense of General Grigorenko.

There were signs of change, however. One was new legislation that for the first time purported to regulate psychiatric coercion in noncriminal cases. The practice of “civil commitment” was not regulated by law at all before this decree was issued. This law was a small step forward, but the delegation was skeptical about its real significance and was concerned that it had been enacted in the face of Western pressure. Knowing that two legal scholars from the Institute of State and Law had criticized the new law for not having gone far enough to define and protect patients’ rights, the delegation consciously sought to strengthen the hand of these reform-minded lawyers by calling attention to the shortcomings of the 1988 law and the need for additional legislation.⁴

The year 1989 was a watershed year in the collapse of Soviet communism. Events moved rapidly after the U.S. delegation’s visit in March. The Soviet empire suddenly disintegrated as, one by one, the Eastern block countries discarded their communist regimes. The Baltic states declared independence, the Berlin Wall was dismantled, and the process of democratization continued in Russia and other Soviet republics. This was a hopeful time, and it was in this context that the Soviet psychiatric association sought readmission to the WPA.

At its meeting in Athens in October 1989, the WPA conditionally readmitted the All-Union Society of Psychiatrists and Narcologists to membership, subject to a site visit by a WPA review committee. In June 1991, when the WPA team arrived in Moscow, the optimistic spirit of 1989 had evaporated. The future had become uncertain, and there was a pronounced sense of impending doom. A conservative coup was widely predicted. The WPA team was disappointed to find that the old guard was still unrepentant and firmly in control of official psychiatry.

However, the positive effects of democratization could be found in the legislative chambers of the Union and of the Russian Federation. Svetlana Polubinskaya, one of the legal reformers whose efforts were strongly supported by the U.S. delegation, was then in the process of drafting a new federal mental health law, and she opened the doors to the corridors of reform for the WPA team. Members of the WPA team testified in the Supreme Soviet in support of her most recent draft and had an opportunity to review and comment on proposals to rehabilitate and compensate victims of Soviet repression. Of particular interest to the WPA delegation was whether these bills included psychiatric prisoners and included mechanisms for “removing” their diagnoses.⁵

In one of the most extraordinary events of the WPA delegation’s visit, several team members convened to discuss the Russian Federation’s proposed rehabilitation bill one evening in the office of the Chairman of the Human Rights Committee of the Supreme Soviet of the Russian Federation. Aside from the WPA delegation members and Dr. Polubinskaya, all of the other participants at this meeting had themselves been political prisoners. One was Dr. Gluzman. Another was the chairman of the Human Rights Committee Sergei Kovaliov, who had spent 10 years in a labor camp, 2 of them with Dr. Gluzman.

Later that day, the WPA team held discussions on a second bill intended to rehabilitate victims of political repression—this time, a federal bill being considered in the Supreme Soviet of the Russian Federation. One of the leading proponents of the federal bill was Andrei Sebentsov, who was also the chief sponsor of the new mental health law being drafted by Ms. Polubinskaya. In what appeared to be a humorous exchange, Deputy Sebentsov, Dr. Gluzman, and Dr. Polubinskaya agreed that the mental health reform bill should progress quickly to protect them—the reformers—from punitive hospitalization in the increasingly likely event of a coup d’etat. As history shows, the coup was in fact attempted unsuccessfully six weeks later, and the Soviet Union soon collapsed.

Over the past decade, Dr. Gluzman has continued to be at the center of the struggle for democratization in Ukraine and has been an inspiration to reformers in other formerly totalitarian countries and to their friends in the West. He founded the Ukrainian Psychiatric Association (UPA) in 1991 as an indepen-

dent voice and established a commission to review complaints about civil rights violations by mental health authorities. This work provides a model for other countries in the region. Its success is evident in the increase in complaints from a few dozen per year in 1991 to more than 700 per year in 1999.

Dr. Gluzman has also single-mindedly sought to vindicate and rehabilitate the victims of repression. The UPA carried out a study on the 127 Ukrainian dissidents who were confined in psychiatric hospitals after being charged with political crimes, vindicating most of them. Dr. Gluzman has also established a Rehabilitation Center for the Victims of War and Torture in Kiev. In the article that follows, Dr. Gluzman explores the causes and consequences of totali-

tarian psychiatry. Surely, few people are as well situated to do so.

References

1. Bloch S, Reddaway P: *Soviet Psychiatric Abuse: Shadow Over World Psychiatry*. Boulder, CO: Westview Press, 1985
2. Stone A: *Law, Psychiatry and Morality: Essays and Analysis*. Washington, DC: American Psychiatric Press, 1984
3. Bonnie RJ: Soviet psychiatry and human rights: reflections on the report of the U.S. delegation. *Law Med Health Care* 18:123-31, 1990. (Professor Bonnie was a member of the U.S. delegation.)
4. Polubinskaya SV: Law and psychiatry in Russia: looking backward and forward, in *The Evolution of Mental Health Law*. Edited by Frost L, Bonnie R. Washington, DC: American Psychological Association Press, 2001
5. Bonnie RJ, Polubinskaya SV: Unraveling Soviet psychiatry. *J Contemp Legal Issues* 10:279-98, 1999. (Professor Bonnie was also a member of the WPA delegation.)