

PSYCHIATRY AS A TOOL OF COERCION IN POST-SOVIET COUNTRIES

2012-2017

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1. EXECUTIVE SUMMARY

Since the disintegration of the Soviet Union there have been repeated reports of a renewed use of psychiatry for political purposes. In particular over the past few years the number of cases has increased rapidly, fostering fears that we might be looking at a resumption of political abuse of psychiatry as a systematic means of repression. Most of the more recent cases concern the Russian Federation, in particular in occupied Crimea where psychiatry is used as a means of repression against Crimean Tatar activists. Also cases are reported from Kazakhstan and Uzbekistan.

In order to understand the current situation in mental health care in the former USSR, one has to understand the context within which the political abuse of psychiatry developed during the Soviet period. The system of political abuse was carefully designed by the KGB in order to rid the country from undesired elements. Psychiatry was also conducive tool of repression because it had been totally separated from world psychiatry and was monopolized by one school of thought based in Moscow. Hence, through a system of totalitarian control, Soviet psychiatrists could be easily (and often unknowingly) turned into cogs in this repressive machinery.

After the fall of Soviet power, attempts were made to open Soviet psychiatry to the world. However, in some of the former Soviet republics the old nomenklatura maintained its powerbase, effectively keeping post-Soviet psychiatry under their control and free from Western influence. In particular, since Vladimir Putin assumed power in Russia and the political climate in the Russian Federation started to change, local officials have more and more often reverted to old mechanisms of subduing bothersome citizens by scaring them off with the psychiatric threat.

When looking at the evidence included in this report, we fear we are at a crossroads. Unless sufficient pressure is exerted on national authorities in the countries concerned, we can expect that in some of the former Soviet republics we will slide back towards a governmental policy of using psychiatry for non-medical purposes. This is very much facilitated by the fact that the professional psychiatric field has not yet been able to recover fully from Soviet rule, lags far behind in the understanding of, and adhering to international human rights standards and professional ethics, is rampant with corruption (e.g. by selling false diagnoses) and is strongly influenced by the pharmaceutical industry that is in fact only interested in commercial gain.

In order to change the situation and to develop a bulwark against misuse of the psychiatric profession in the future, it is pivotal that serious efforts are made in the provision of modern mental health literature in local languages, in education, and in the monitoring of human rights in closed institutions. It is time that national and international psychiatric bodies resume their interest in these cases, exert pressure on the authorities in the countries concerned and support victims of political abuse of psychiatry in every possible way, e.g. by facilitating independent psychiatric evaluations of the persons concerned.

INTRODUCTION

Since the beginning of this century, the number of claims and reports that psychiatry is again abused for political reasons in former Soviet republics, has increased considerably. Most of the claims concern persons belonging to the opposition to the current governments, or people who have been active in disclosing cases of corruption that often involved government officials. The issue is of particular concern because since the early 1970s, when political abuse of psychiatry became an important issue on the agenda of the world psychiatric community, most of the attention was focused on the USSR. Current allegations indicate that the climate in at least some of the former Soviet republics has not changed enough to form a bulwark against the return of such practices.

Undoubtedly, the Soviet Union is not the only country where political abuse of psychiatry has taken place. Over the past decades extensive documentation has been published on similar abuses in other countries as well. One of the countries where political abuse of psychiatry also took place systematically was Communist Romania.¹ There have also been reports on cases in Czechoslovakia, Hungary and Bulgaria, but all these cases were individual and there was no evidence that any systematic abuse took place.² Later, information appeared on the political abuse of psychiatry in Cuba, which was however short-lived and never developed into a full-scale means of repression.³ Since the beginning of this century, the issue of the political abuse of psychiatry in People's Republic of China has been high on the agenda and caused repeated debated within the international psychiatric community.⁴

Virtually all cases of political abuse of psychiatry took place in collectivist (socialist or communist) regimes. An explanation could be that ideologies that envision a utopian society, where all are equal and happy, conclude that those who oppose this must be of an unsound mind. As Soviet leader Nikita Khrushchev stated in 1959: "A crime is a deviation from the generally recognized standards of behavior frequently caused by mental disorder. Can there be diseases, nervous disorders among certain people in Communist society? Evidently yes. If that is so, then there will also be offences that are characteristic for people with abnormal minds [...]. To those who might start calling for opposition to Communism on this basis, we can say that [...] clearly the mental state of such people is not normal."⁵

However, cases were also reported from democratic countries. In The Netherlands the case of Fred Spijkers attracted a lot of attention at the end of the twentieth century, and was resolved only after more than a decade, and although the victim was compensated and even knighted by the Dutch Queen, it is still not fully closed, and Fred Spijkers is still trying to have his false psychiatric diagnosis revoked.⁶

¹ Psychiatry under Tyranny, An Assessment of the Political Abuse of Romanian Psychiatry During the Ceaucescu Years, Amsterdam, IAPUP, 1989.

² S. Süss, *Politisch Missbraucht? Psychiatrie und Staatssicherheit in der DDR Berlin*, Ch. Links Verlag, 1998.

³ Brown Ch, Lago A. *The Politics of Psychiatry in Revolutionary Cuba*. New York, NY: Transaction Publishers; 1991.

⁴ Munro, R., *Judicial Psychiatry in China and its Political Abuses*, GIP, Amsterdam, 2001, and Munro, R., *China's Psychiatric Inquisition*, Wildy, Simmonds & Hill, London., 2006.

⁵ Speech published by Pravda on May 24, 1959.

⁶ Nijeboer, A., *Een man tegen de Staat*, Papieren Tijger, Breda, 2006

During the past decades, human rights organizations were regularly approached with requests to deal with abusive situations in psychiatry in countries such as South Africa, Chile and Argentina. In the case of South Africa severe abuses were the result of the racially discriminatory policy of *Apartheid*, which resulted in very different conditions in mental health services for the white ruling class and the black majority. Claims that psychiatry was abused as a means of political or religious repression were never confirmed. In Argentina and Chile the abuse concerned individual psychiatrists, who were recruited to determine which forms of torture were the most effective, not the psychiatric profession as a whole or official bodies.

2. WHAT IS THE POLITICAL ABUSE OF PSYCHIATRY?

Political abuse of psychiatry refers to the misuse of psychiatric diagnosis, treatment and detention for the purposes of obstructing the fundamental human rights of certain individuals and groups in a given society. As indicated, the practice is common to but not exclusive to countries governed by totalitarian regimes. Under these regimes abuses of the human rights of those politically opposed to the state are often hidden under the guise of psychiatric treatment. The political abuse of psychiatry is considered one of the worst violations of medical ethics and the professional responsibilities of physicians, and is often compared with the Euthanasia Program of Nazi-Germany, in the framework of which 90,000 persons with mental disorder or disability were killed.⁷ More recently, a 2014 United States Senate Select Committee on Intelligence (SSCI) released an extensive report on the use of psychiatrists and psychologists to develop enhanced interrogation techniques in the U.S. government's program of systematic torture of detainees, by the Central Intelligence Agency (CIA).⁸

Admittedly, those involved in the struggle against the political abuse of psychiatry never reached full consensus on what the exact boundaries were between political abuse of psychiatry and more general misuse of psychiatric practice. Over the years, many individual cases were discussed extensively, determining whether it should be considered as one of political abuse of psychiatry or not. The issue continues to be discussed, in particular because recent cases are often more complex and involve less overt government involvement.

It is imperative to distinguish between political abuse of psychiatry and general abuse or abusive practices in psychiatry. The latter includes general human rights violations in mental institutions (e.g. adverse living conditions, abuse by staff, unlawful incarceration, inhumane treatment), as well as “economic abuse” of psychiatry, such as the sale of diagnoses to criminals to avoid long terms of incarceration. In this report we focus solely on the abuse of psychiatry for political purposes, knowing full well that human rights abuses in psychiatric institutions in many of the former Soviet republics are frequent and sometimes systematic.⁹

Finally, it is important to note that in the case of Soviet psychiatric abuse, as well as in cases like the systematic abuse of psychiatry in the People's Republic of China, there is a vast “grey area” involving people who are hospitalized for other reasons; they might be considered bothersome to the authorities because of their constant complaints, or they may indeed have mental health problems but who should not have been subject to compulsory treatment or hospitalization. Many victims of psychiatric abuse in China are so-called “petitioners”, who travel to Beijing from the provinces to issue complaints against local officials. Rather than being heard, they are hospitalized and threatened with psychiatric “treatment”. We have reason to fear that also in Russian mental institutions larger groups of “petitioners” might have been hospitalized.

⁷ Schneider, F. and Lutz, P.: *Erfasst, verfolgt, vernichtet: Kranke und behinderte Menschen im Nationalsozialismus*. Springer, Berlin, 2014

⁸ “Committee Study of the Central Intelligence Agency's Detention and Interrogation Program”, *Senate Select Committee on Intelligence*, December 2013 <https://www.nytimes.com/interactive/2014/12/09/world/cia-torture-report-document.html> [Accessed 14.03.17]

⁹ See for instance the report “Review of forensic psychiatric and prison mental health services in Ukraine, published by FGIP and the Office of the Ombudsman for Human Rights of the Verkhovna Rada in Ukraine in 2016.

3. BRIEF HISTORICAL SUMMARY

The available evidence shows that, in the course of the 1960s psychiatry became one of the main methods of repression in the Soviet Union, and by the end of the decade many well-known dissidents were diagnosed as being mentally ill. There is now sufficient evidence to suggest that Yuri Andropov KGB Chairman, along with a selected group of colleagues, developed the use of psychiatry for systemic political repression". Psychiatry became a centerpiece of their struggle "against ideological diversion, functioning as either as a "preventive measure" or to remove a "hostile element" from society.¹⁰

Psychiatry was a more effective method of persecution than imprisonment for numerous reasons; a psychiatric diagnosis substantially simplified legal proceedings, while enabling authorities to uphold a semblance of legality. With a diagnosis there was no need for the KGB to "cook up" more than a minimum of evidence of any political crime and the brief court hearing was mainly concerned with the psychiatric report.¹¹ The 'mentally ill' dissident also lost any chance of defending himself and the trial was effectively reduced to a 'mere formality'.¹² Psychiatry was especially convenient because unlike a prison sentence, the term of hospitalization was indefinite. People could be locked away forever, or at least until the person continued to have "wrong ideas" and remained a problem to the existing power structure.¹³

A diagnosis of 'sluggish schizophrenia', developed by the Moscow School of Psychiatry in the course of the 1960s, became handy framework to explain deviant behavior. The condition is characterized by its slow progressive force. Symptoms include 'anti-Soviet thoughts', 'delusions of reformism' and 'infantilism'.¹⁴ As a result, practically all behavior that did not coincide with socially approved patterns could be attributed a psychopathological meaning. A favorite saying of psychiatrist Georgi Morozov (1957-1990), notorious for his involvement in the political abuse of Soviet psychiatry, was 'it is no secret to anyone that you can have schizophrenia without schizophrenia'.¹⁵ By this absurd logic, a person officially diagnosed with schizophrenia without displaying any of the clinical symptoms. The number of people who were placed in psychiatric hospitals for their political views is estimated to be 10,000. Some prisoners were given unnecessary electroconvulsive therapy without anesthetics, large doses of antipsychotic medications and insulin comas.¹⁶ In 1989, 'sluggish schizophrenia' largely disappeared in the Soviet Union and in 1994 it was excluded from

¹⁰ Information received in January 2013, source anonymous yet known to the authors.

¹¹ Sidney Bloch and Peter Reddaway. *Russia's Political Hospitals*. London: Gollancz, 1977. p.275.

¹² Ibid., p.275.

¹³ Robert van Voren, 'Fifty years of political abuse of psychiatry – no end in sight', *Ethics, Medicine and Public Health*, 1, 2015 (pp. 44-51), p.46.

¹⁴ See Bloch, S., Soviet Psychiatry and Snezhnevskyism, in Van Voren, R. (ed.), *Soviet Psychiatric Abuse in the Gorbachev Era*, 1989, pp. 55-61.

¹⁵ Andre Koppers, *A biographical dictionary on the political abuse of psychiatry in the USSR*, Amsterdam: International Association on the political use of psychiatry, 1990, p.36-7.

¹⁶ Adonis, Sfera, 'Can Psychiatry Be Misused Again?', *Front Psychiatry*, 2013, <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3766833/> [Accessed 20 July 2016]

the 10th Version of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).¹⁷

There is ample evidence that the core group of psychiatrists that developed and implemented a system of psychiatric abuse on the orders of the Party and the KGB knew exactly what they were doing.¹⁸ However, many psychiatrists were probably unaware that they engaged in unethical behavior and were part of a governmental repressive machinery, and may not have seen considered diagnosing a dissident with a mental illness as an ‘abuse’ of their profession.¹⁹ The political abuse of psychiatry originated from the concept that persons who opposed the Soviet regime were mentally ill because there was no other logical explanation why a person would oppose the best socio-political system in the world.

Moreover, the consequences of publicly opposing the regime were so severe, often leading to the loss of one’s career, family, and happiness that psychiatrists could not explain to themselves why someone would be willing to protest for an idea or conviction that was so different from what most people believed, or at least pretended to believe. Regardless of whether psychiatrists truly advocated the regime, they were more inclined to view the opponents as mentally ill, rather than just remarkably brazen.

¹⁷ Yuri Savenko, ‘Navstrechu MKB 10’, *Nezavisimyi Psikhiatricheskii Zhurnal*, 2008 http://www.npar.ru/journal/2008/3/02_mkb.htm [Accessed 3 July 2016]

¹⁸ For instance, in 2001 Dr. Yakov Landau of the Serbski Institute said on Polish television that “the organs [KGB] burdened us with very responsible work (...) They expected us to do what they asked us to do, and we knew what they expected.” There are many of such indications that leading psychiatrists knew full well what they were involved in.

¹⁹ Voren, Robert van. ‘Political Abuse of psychiatry- A historical overview’, *Schizophrenia Bulletin*, 36, January 2010, 1 (pp. 33-35) p.34.

4. POLITICAL ABUSE OF PSYCHIATRY IN POST-SOVIET TIMES

With the fall of communism in Eastern Europe in the late 1980s the practice of using psychiatry to control political opponents virtually ceased to exist, bar a number of cases Central Asia in the late 1990s.²⁰ However, since the turn of the millennium, cases of the political abuse of psychiatry have emerged in various post-Soviet republics, leading many to believe that this practice has returned. The number of reported cases of has disturbingly surged since the illegal annexation of the Crimean Peninsula by Russian authorities in March 2014.

Psychiatry is being used in fraudulent criminal trials against political opponents and human rights activists, in which there is a lack of evidence to imprison the accused. According to Yuri Savenko, psychiatrist and head of the Independent Psychiatric Association in Russia (IPA), “psychiatry is now part of a frequent procedure in criminal trials where there is no concrete evidence. [Rather than gather evidence] it is more economical in terms of effort and time to acquire a psychiatric evaluation.”²¹

The political abuse of psychiatry has taken on new forms in the post-Soviet period. It consists of the following processes:

- a fabricated or exaggerated psychiatric diagnosis, used to limit the rights of persons who expresses oppositional or unorthodox, particularly, anticlerical views;
- unnecessary compulsory treatment and imprisonment of a person in a psychiatric hospital;
- unjustified imprisonment in a psychiatric hospital under the pretext of a forensic psychiatric examination;
- refusing necessary psychiatric care to person who is in conflict with the authorities, for a variety of reasons (e.g. political activism).

Unlike in Soviet times, the post-Soviet use of psychiatry against political opponents is neither systematic nor is it used for the indefinite incarceration of a person. It appears to occur on a selective basis and the term of hospitalization is, in most cases, for a shorter and definitive period of time. Its function is not only punitive but fundamentally preventative. Psychiatry is used to not only punish opponents, but also to prevent the spread of political opposition in society by discrediting a certain set of ideas and behavior.

What has also emerged is a collection of other forms of abuses, ranging from “economic abuse” (e.g. having relatives declared mentally ill or suffering from dementia in order to take control of their possessions such as real estate) to criminals buying their freedom by bribing psychiatrists to deliver false diagnoses.

²⁰ The cases of political abuse of psychiatry in Turkmenistan came to light in August 1996 during the World Congress of the

World Psychiatric Association in Madrid, where most of the new psychiatric associations in the former USSR were

represented. A collective letter of protest, signed by all of the associations present (including the Russian Psychiatric Society) was sent to the Turkmen authorities, after which the abuse immediately came to an end.

²¹ Savenko, Yuri, ‘Politicheskoe delo antipoltichnoi organizatsii i psikhiiatriia nestandartnoe reshenie tsentra im serbsokogo, *Hezavisimyi Psikhiatricheskii Zhurnal*, 2010<<http://npar.ru/politicheskoe-delo-apolitichnoj-organizacii-i-psixiatriya-nestandartnoe-reshenie-centra-im-serbskogo/>> [Accessed 13 July 2016]

The political abuse of psychiatry in the post-Soviet states continues to occur because the conditions that facilitated this practice in Soviet times have not been fully reformed. The most significant condition is the ‘unresolved problem of the dependence/independence of the Russian judiciary as a whole.’²² Another major factor is the level of independence in forensic psychiatry. In the case of Russia, for example, there is allegedly no opportunity for independent psychiatrists to challenge the evaluations made by state appointed psychiatrists in court. The Institute of Modern Russia, writes that ‘[as] the country returned to authoritarian methods of governing [...] adversarial forensic expertise was abolished from court proceedings and judicial supervision over urgent hospitalization was reduced to a mere formality.’²³

There are many complex factors that cause other human rights violations in the post-Soviet the mental health system, which this report will only touch upon. The Soviet Union’s isolation from the rest of the world means there is now limited access to a diverse range of educational resources, causing methods of treatment to be outdated. The communist ideology’s strong prioritization on the collective has left behind a residual culture of paternalism in psychiatry and a consequent lack of concern for the rights of the individual patient.

²² Gushanskii, Emannuil. ‘Psikhiatr kak sudebnyi ekspert mezhdu molotom i nakoval’nei’, *Polit*, 19 November 2009 <http://polit.ru/article/2009/11/19/psy/> [Accessed 19.03.17]

²³ Podrabinek, Aleksander. ‘Echoes of the Past: Punitive Psychiatry’, *Institute of Modern Russia*, 21 October 2013 <http://imrussia.org/en/society/581-echoes-of-the-past-punitive-psychiatry> [Accessed 22 July 2016]

5. CASES OF ALLEGED POLITICAL ABUSE (JUNE 2012- APRIL 2017)

5.1. CRIMEA (UNDER RUSSIAN OCCUPATION)

Since the Russian occupation of Crimea began in February 2014, Russian authorities have reportedly detained or forced into exile all those who oppose the annexation, including key leaders and activists from the Tatar community in Crimea. The Tatars, a minority Muslim community that makes up about 15 percent of Crimea's population, are said to be the most vocally opposed group to Russian rule in the region and, as a result, have become a special target of the Russian authorities. According to Crimea SOS, a Ukrainian charity, a total of 43 Tatar activists have been abducted since the start of the Russian occupation, reportedly by the Russian authorities and their accomplices. Eighteen of those abducted are still missing and six have been found dead.²⁴ The United Nations has submitted a draft resolution urging Russia to end immediately all abuses against Crimean residents, including "arbitrary detentions, torture and other cruel, inhumane or degrading treatment, and to revoke all discriminatory legislation".²⁵ Correspondingly, there has been a disturbingly sharp increase in the number of cases involving the unlawful psychiatric confinement of members of the Tatar community.

1. ILMI UMEROV

On 12 May 2016, The Federal Security Service of Russia (FSB) opened a criminal investigation against Ilmi Umerov, ethnic Crimean Tatar activist, under Article 280.1(2) of the Criminal Code ("calls for the violation of the Russian Federation's territorial integrity using mass media and the internet"). Umerov is also representative deputy of the Mejlis, a body elected by Crimean Tatars, which was suspended by Moscow after the annexation of Crimea. He has consistently publicly opposed the Russian occupation of Crimea in 2014.

Umerov was initially placed under travel restrictions as a criminal suspect, but in August 2016 the Kyivskyi District Court in Simferopol forcibly placed him in a psychiatric hospital for 28 days. Police took Umerov from a hospital where he was undergoing treatment for his heart condition and forcibly transferred him to the mental institution. At that moment, his health condition was very bad, and took him almost two weeks to get better. His lawyers appealed the decision but received no response. The decision sparked international protests and Amnesty International declared it was "nothing more than a repression of his political activities".²⁶

Russian authorities have reportedly added Umerov to the list of people they consider "Terrorists and Extremists".

2. HIZB UT-TAHRIR CASES

²⁴ Grytsenko, Oksana, "Activists report 43 abductions in Crimea since Russian Annexation (infographic)", *Kyiv Post*, 24.03.17 <<https://www.kyivpost.com/ukraine-politics/activists-report-43-abductions-crimea-since-russian-annexation-infographic.html>> [Accessed 26.03.17]

²⁵ Osborne, Samuel: "UN accuse Russia of multiple human rights abuses in Crimea", *The Independent*, November 16, 2016, <<http://www.independent.co.uk/news/world/europe/russia-ukraine-crimea-putin-human-rights-abuses-un-accusations-claims-a7421406.html>> [Accessed 31.03.17]

²⁶ "Amnesty International demanded release of Umerov", lb.ua, September 7, 2016. https://en.lb.ua/news/2016/09/07/1764_amnesty_international_demanded.html [accessed 28.03.17]

The period from October 2016 to the present day (April 1st 2017) saw the forcible hospitalization of 12 Crimean Tatar activists after an involuntary forensic psychiatric examination; Aider Saledinov (12.10.16)²⁷, Muslem Aliyev (15.11.16)²⁸, Refat Alimov (22.11.16)²⁹ Arsen Dzhepparov (22.11.16)³⁰, Vadim Siruk (1.12.16)³¹, Emir Kuku (8.12.16)³² Inver Mamutov (29.12.16), Inver Bekirov (29.12.16), Remzi Memetov (29.12.16)³³ Rustem Albitarov (18.01.16)³⁴ Zevri Abseitov (29.12.16),³⁵ Aider Saledinov (22.02.17)³⁶ and Rustem Ismailov (22.02.17)³⁷ spent an average of 21 days in a psychiatric clinic.³⁸

In all cases the accused were sent to be hospitalized by the decision of the court, without undergoing a psychiatric examination first. This practice is rampant in Russia and results from the lack of a clear and precise description for the procedure of ordering of inpatient psychiatric examination, in in the Code of Criminal Procedures.

However, this practice violates usual procedure, which includes (Step One) an in-patient evaluation by psychiatrists, and only on the basis of this evaluation can the accused sent into a mental institution for further evaluation (Step Two)³⁹.

In the case of the Hizb- ut- Tahrir activists, an outpatient psychiatric examination would have been the most suitable and sufficient option to determine the psychological states of the accused, given that not a single one of them had any history of mental illness.

²⁷ "Hizb ut-Tahrir": More defendants undergo psychiatric examination" 23 February 2017 <http://qha.com.ua/en/politics/quot-hizb-uttahrir-quot-more-defendants-undergo-psychiatric-examination/140147/> [Accessed 28.03.17]

²⁸ "Another Crimean Muslim is punished by psychiatry" January 1, 2017 https://humanrights.org.ua/en/material/shhe_odnogo_krimskogo_musulmanina_karajut_psihatrijeju [Accessed 25.03.17]

²⁹ "10-year sentence for being a Crimean Tatar and Muslim?", *Kharkiv Human Rights Protection Group*, October 28, 2016 <http://khpg.org/en/index.php?id=1477397739> [Accessed 25.03.17]

³⁰ See footnote 23.

³¹ See footnote 24.

³² See footnote 23.

³³ "Punitive psychiatry reached "Bakhchsarai four", *QHA:Crimean News Agency*, December 29, 2016 <http://qha.com.ua/en/society/punitive-psychiatry-reached-quot-bakhchsarai-four-quot/139823/> [Accessed 25.03.17]

³⁴ Ibid.

³⁵ Ibid.

³⁶ "Hizb ut-Tahrir": More defendants undergo psychiatric examination" 23 February 2017 <http://qha.com.ua/en/politics/quot-hizb-uttahrir-quot-more-defendants-undergo-psychiatric-examination/140147/> [Accessed 28.03.17]

³⁷ Ibid.

³⁸ Ibid.

³⁹ Согласно ч. 1 ст. 28 Закона РФ "О психиатрической помощи и гарантиях прав граждан при ее оказании" основанием для госпитализации в психиатрический стационар являются не только постановление судьи, но и наличие у лица психического расстройства и решение врача-психиатра о проведении обследования или лечения в стационарных условиях.

All of the activists were detained on suspicion of terrorism Article 205.5 ('the organization of activities in terrorist organization and participation in the activities of such an organization') and their involvement in the Hizb ut-Tahrir organization, which has been deemed a terrorist organization, despite the fact that there is no evidence for this.⁴⁰

Reportedly, however, there was neither evidence to support the charges laid against them, a result, the activists are widely considered prisoners of conscience and on 16 March 2017 the European Parliament issued a joint motion for their release.⁴¹

Crimean human rights lawyer Emil Kurbedinov, who has been closely involved in the cases helping in their defense, stated that the activists are treated in a degrading and humiliating way during their time in psychiatric hospitals. Some are placed in isolation and are denied their basic needs, such as access to a toilet. Others are housed with multiple people suffering from severe mental health conditions. The activists are interrogated about their alleged involvement in 'extremism' and their views of the government. They are also deprived of the right to speak with their family or meet their lawyer on a one-to-one basis without a guard being present. All this violates international law.⁴² On 26 January 2017 Kurbedinov, was himself detained in Crimea on suspicion of "circulating extremist material" and sentenced to 10 days of administrative detention.⁴³ Amnesty International, among other human rights organizations, asserts that Kurbedinov was targeted because of his human rights work and called for his immediate release.⁴⁴

1. KAZAKHSTAN

1.1. NATALIA ULASIK

On 11 October, 2016 a kindergarten teacher, Natalia Ulasik, was detained in Jezkazgan, a town in Central Kazakhstan on the alleged charge of 'slandering' her husband.⁴⁵ The judge ordered Ulasik to be sent for a psychiatric examination that resulted in her being declared mentally ill, and a danger to herself and others. She was consequently sent to a National Psychiatric Hospital- a clinic where the criminally insane are held - in the village of Aktas, Almaty Region in the country's south. According to reports, the judge failed to provide a copy of the psychiatric report to her lawyer or family and the hearing conducted without a defense being present. Yevgeniy Jovtis, a prominent human

⁴⁰ It is enough for a person just to disseminate or possess file Hizb ut-Tahrir's the literature to justify their prosecution

⁴¹ Joint Motion for Release, March 15, 2017 [<http://www.europarl.europa.eu/sides/getDoc.do?type=MOTION&reference=P8-RC-2017-0190&language=EN>] [Accessed 25.03.17]

⁴² Roache, Madeline. "Russian authorities 'imprisoning Crimean Tatars in psychiatric hospitals'", *The Guardian*, March 28 2017 <https://www.theguardian.com/world/2017/mar/28/russian-authorities-imprisoning-crimean-tatars-in-psychiatric-hospitals> [Accessed 28.03.17]

⁴³ "Lawyer Emil Kurbedinov detained in occupied Crimea", *Institute of Mass Information*, January 26 2017 <http://imi.org.ua/en/news/56197-lawyer-emil-kurbedinov-detained-in-occupied-crimea.html> [28.03.17]

⁴⁴ "Ukraine: Human rights lawyer incarcerated in Crimea: Emil Kurbedinov", *Amnesty International*, 30 January, 2017 <https://www.amnesty.org/en/documents/eur50/5595/2017/en/> [Accessed 25.03.17]

⁴⁵ "Punitive psychiatry gaining momentum in Kazakhstan", *Ferghananews*, 18 October, 2016 <http://enews.ferghananews.com/articles/2971> [Accessed 3.04.17]

rights advocate in Kazakhstan publicly declared the case an example of punitive psychiatry. Ulasik's hospitalization is thought to be connected to her articles that she posted on social media, which are highly critical of local government.

1.2. ZINAIDA MUKHORTOVA

The same hospital that Ulasik is currently being detained in, is where lawyer Zinaida Mukhortova, from the town of Balkhash in Karaganda Region was forcibly hospitalized from August 9, 2013 to December 2014. Mukhortova was repeatedly unlawfully placed in psychiatric hospitals, despite the fact that in the opinion of independent experts, she does not have any psychological disorders. In hospital she reportedly was forced to take antipsychotic drugs and was subjected to violence.⁴⁶ The Open Dialog Foundation, Human Rights Watch and other international organizations claimed that Mukhortova was being persecuted for her legal work, which entailed exposing local governmental corruption and promoting human rights.⁴⁷

1.3. ALEXANDER BONDARENKO

In December 2016, 64-year-old Alexander Bondarenko was detained by police and sent to a psychiatric clinic in the city of Karaganda in central Kazakhstan. Bondarenko, a committed communist, was arrested while protesting against the dismantling of a statue of Vladimir Lenin in Karaganda's central square. He was then forcibly held for three days at the regional psychiatric clinic, where staff told him police had filed a statement that he was a danger to the public and must undergo a compulsory assessment of his mental state.⁴⁸ Kairat Abdrakhmanov, the head doctor at the clinic in Karaganda, confirmed that there were cases where police unnecessarily brought individuals in for compulsory treatment.

1.4. LYUDMILA KHROMINA

This issue of psychiatric abuse in Kazakhstan was discussed in the media in 2011, when Lyudmila Khromina, a psychology graduate in Akimat, exposed how staff in the psychiatric hospital were producing fictitious medical certificates. Shortly after this, hospital staff repeatedly tried to dismiss Khromina from her post for reasons such as "non-performance of functional duties". However, she succeeded in keeping her job. In 2014, after participating in an ecological protest against illegal logging, Khromina was sent for a psychiatric examination and given a diagnosis of "insanity" and epilepsy. Human rights activists called for an independent commission to examine her psychological state, which found her to be mentally sound. Moreover, an MRI scan that Khromina had previ-

⁴⁶ Kasymbekovar, Zhanar, "Zinaida Mukhortova released from mental hospital", *Open Dialogue*, 15 December, 2015 <http://en.odfoundation.eu/a/5625,zinaida-mukhortova-released-from-mental-hospital> [Accessed 3.04.16]

⁴⁷ Kazakhstan: Lawyer in Forced Psychiatric Detention, *Human Rights Watch*, August 15, 2013 <https://www.hrw.org/news/2013/08/15/kazakhstan-lawyer-forced-psychiatric-detention> [Accessed 3.04.16]

⁴⁸ Andrei Grishin, "Kazak police threaten dissidents with psychiatric confinement", Institute for War and Peace Reporting, <https://iwpr.net/global-voices/kazak-police-threaten-dissidents-psychiatric-confinement> [Accessed 4.04.17]

ously undertaken proved that she did not suffer from epilepsy. Aliya Abdinova, a lawyer of the public foundation "Korgau HR" who defended Khromina, expressed the difficulty in removing a diagnosis once it is given to a person. In her opinion, the government must introduce more legislation to hold psychiatrists accountable for the diagnosis they deliver to people.⁴⁹

3. RUSSIA

3.1. RUSLAN MAKAROV

In September 2012, Siberian journalist Ruslan Makarov was sent for psychiatric evaluation after his personal psychiatrist purportedly told investigators that he had threatened to kill Altai Republic Governor Aleksandr Berdnikov. In his case, the psychiatrist who was his personal doctor initiated the case in the first instance because she reported something that he told her in a private session, which was a breach of medical confidentiality. Although Makarov still faces charges, a court ruled after the fact that his forced psychiatric evaluation was illegal because prosecutors had dispensed with the required court hearing.⁵⁰

3.2. MAXIM YEFIMOV

In April 2012, Maksim Yefimov human rights activist and chairman of the Karelian regional branch of the inter-regional youth social charity organization "Youth Human Rights Group (YHRG)" was accused of insulting the religious group "Orthodox Christians" after publishing an article on the website of YHRG entitled 'Karelia is tired of priests.'⁵¹ Efimov has criticized the priests of the Orthodox Church for cooperating with the Federal Security Service (FSS) as well as those priests who deprive the citizens of their property. On 12 May, the Petrozavodsk City Court sent Efimov to a psychiatric hospital by force, after the Federal Security Service and the Investigative Committee forced him to take a psychiatric examination. After he was released in August 2012, he fled to Estonia where he seeks political asylum.

3.3. MIKHAIL KOSENKO

On 8 June 2012, Muscovite Mikhail Kosenko was arrested after his participation in an anti-Putin protest on Bolotnaya Square on 6 May 2012, the eve of Putin's third inauguration. Kosenko was accused of participating in 'mass riots' and 'threatening the life or health of a representative of au-

⁴⁹ "Vrashebnoe Pomeshatel'stvo", 26 December, 2015, *Redakciya sajta Bureau.kz*

https://bureau.kz/novosti/sobstvennaya_informaciya/vrachebnoe_pomeshatelstvo/ [Accessed 4.04.17]

⁵⁰ Coalson Robert, "Whistle-Blower's Case Revives Concerns Of Punitive Psychiatry In Russia", Radio Svoboda, April 18, 2013 [Accessed 20. 07.16]

<http://www.rferl.org/a/russia-whistle-blower-psychiatric/24961309.html>

⁵¹ "Stop the persecution of Efimov", UCSJ June 10, 2013. <http://www.ucsj.org/2013/06/10/stop-the-persecution-of-maxim-efimov/> [Accessed 29.07.16]

thority'.⁵² On 24 July 2012, Kosenko was sent for an involuntary psychiatric examination at the Serbsky Centre due to history of mental illness. He had previously been prescribed anti-depressants after receiving a concussion and suffering from hazing whilst serving in the army.⁵³ Psychiatrists from the Serbsky Centre diagnosed Kosenko with paranoid schizophrenia, declaring that he 'presents a danger to himself and others and must be sent to a psychiatric hospital for involuntary treatment', and on 8 October 2012, Kosenko was sentenced to indefinite compulsory psychiatric treatment.⁵⁴ The decision was widely considered to be politically motivated and sparked international outrage from human rights organizations such as Amnesty international, which asserted Kosenko's innocence. The judge allegedly ignored video evidence and police testimony that 'overwhelmingly exculpated him of the charges he faced', as well as his doctor's opinion that hospitalization was completely unnecessary.⁵⁵ After multiple appeals and international pressure, on 11 June 2013, a court in Chekhov, Moscow region ordered his release from hospital on the condition that he would undergo outpatient compulsory care.⁵⁶ Kosenko is still under compulsory care, though it is almost five years since the Bolotnaya incident. It is important to note that Kosenko could be sent back into the psychiatric hospital at any moment.

3.4. ALEXEI MOROSHKIN

Alexei Moroshkin was initially arrested in September 2015 for his posts on social media after he created a webpage for a group calling for the establishment of 'the Democratic Republic of the Urals' on the social network site, VKontakte. Moroshkin was charged with 'public actions aimed at violating Russia's territorial integrity' (Article 280.1 of Criminal Code).

In October that same year, the court sent Moroshkin for an involuntary psychiatric examination that resulted in a diagnosis of 'paranoid schizophrenia' ('delusions of reformism of a religious nature'). Even before the court decision, he was transferred from pre-trial detention in Regional Clinical Mental Hospital No. 1 in Chelyabinsk. Memorial, along with other human right organizations, considered the decision be groundless and declared Moroshkin a political prisoner.⁵⁷ At the same time, he was charged with painting the Lenin bust in town with the Ukrainian colors (Article 214 'Vandalism'). Chelyabinsk human rights activists claim the case is still unresolved and has yet to go to court. In hospital, Moroshkin reportedly receives high doses of neuroleptics and suffers from depression.

⁵² Human Rights Watch, 'Russia: Withdraw Charges Against Protester' March 26 2014 <https://www.hrw.org/news/2014/03/26/russia-withdraw-charges-against-protester> > [Accessed 15 July 2016]

⁵³ United Nations High Commission for Refugees, 'Russian Federation: Political Use of Mental Health Institutions', March 2015 <<http://www.refworld.org/pdfid/55c896da4.pdf>> [Accessed 29 July 2016] (pp.1-30).p.16.

⁵⁴ See footnote 1.

⁵⁵ 'Russia: detention of protester Mikhail Kosenko in psychiatric institution is 'Soviet-era tactic'', *Amnesty international*, 25 March, 2014, < <https://www.amnesty.org.uk/press-releases/russia-todays-detention-protester-psychiatric-institution-Soviet-era-tactic> > [Accessed 20. 07.16]

⁵⁶ Ibid.

⁵⁷ «Memorial» priznal «ural'skogo seprista» Aleksya Moroshkina politzalyuchennym», *Memorial*, July 11, 2017 <<http://memohrc.org/news/memorial-priznal-uralskogo-separatista-alekseya-moroshkina-politzaklyuchennym>> [Accessed 23.03.17]

3.5. MAKSIM PANFILOV

On 7 April 2016 Maksim Panfilov was detained in Moscow on charges of participation in riots and use of violence against a representative of authorities following his participation in the ‘Bolotnaya’ Protests in 2012. Panfilov’s first trial began in December 2016 and lasted until late January 2017, and resulted in the ordering of a compulsory psychiatric examination.

On the 29 March 2017, Panfilov was sentenced to indefinite psychiatric confinement, after being diagnosed as ‘insane’ and thus considered ‘a danger to himself and others’ by psychiatrists at the Serbsky Centre, a psychiatric facility notorious for its involvement in the systematic repression of dissidents in soviet times. Panfilov suffers from Tourette’s syndrome, a neuropsychiatric disorder and is currently being denied the necessary medication. As a result, he is unable to sleep and his health is rapidly deteriorating. Yuri Savenko, the head of the Independent Psychiatric Association has agreed that Panfilov is mentally unsound, but rejects the conclusion that he must be hospitalized. Panfilov continues to assert his innocence and due to the absence of evidence to support the alleged offences, human rights activists consider him to be a political prisoner.⁵⁸

3.6. EVGENI BERKOVICH

On 29 March 2017, police sent lawyer Evgeni Berkovich for a compulsory psychiatric examination following his participation in an anti-corruption rally in Rostov-on-Don on 26 March.⁵⁹ The examination came a day after police requested Berkovich to submit a report explaining his reasons for attending the rally. The doctors found there were no grounds to question his psychological condition and sent Berkovich home that same day. Since his release, Berkovich has submitted an appeal to the Minister of Health of the Rostov region, Tatyana Bykovskaya, demanding an official investigation into his referral to a psychiatric hospital.

3.7. STANISLAV KLYKH

On 26 May 2016 Stanislav Klykh was sentenced to 20 years of imprisonment by the Supreme Court of Chechnya, accused of having participated in the band of fighters in Chechnya in 1994 – 96. Amnesty international declared deemed it a “grossly unfair trial” as the the verdict was allegedly based on Klykh’s confession extracted under torture and the evidence supporting Klykh’s alibi that they could not have been in Chechnya during this conflict was not admitted by the court.

In this few months after his arrest Klykh had been deprived of food and water for several days and forced to kneel on gravel in the yard. He was made to drink vodka until he lost consciousness, and given psychotropic drugs. He was hung from bars in his cell and given electric shocks. Klykh was also kept in solitary confinement and not allowed any visitors from August 2014 and September 2015.

⁵⁸ “Political prisoner Maksim Panfilov refuses to plead guilty”, Human Rights in Russia, <http://www.rightsinrussia.info/hro-org-in-english/assembly-1> [Accessed 23.03.17]

⁵⁹ “Karatel’naya psihiatria vozvrashaetsya v rossiyu uzhe po brezhnevski, a imen’em miti-prem’era”, *Forum-msk*, March 30, 2017 <http://forum-msk.org/material/news/13012034.html> [Accessed 23.03.17]

When in October 2015, Stanislav Klykh's mental health began to noticeably deteriorate as he exhibited disturbed behaviour during his trial, defense lawyer Marina Dubrovina requested a psychiatric examination to ensure he was fit to stand in court. According to Dubrovina, Klykh's psychological deterioration was certainly the consequence of the use of torture and pressure applied toward him during the preliminary investigation, particularly as Klykh had no history of mental illness. The judge eventually ordered Klykh to undergo a psychiatric examination, which established that he was, in fact, sane and as a result rendered him criminally culpable. If the psychiatric examination concluded that Klykh was insane, then his case would be divided into separate proceedings and he would have been sent for compulsory treatment.

During subsequent court hearings, Klykh continued to be emotionally unstable, shouting out accusations about judges and public prosecutors. At the hearing in February, 2016, in connection with Klykh's disorderly behaviour, the judge ordered criminal proceedings to be initiated against Klykh for insulting the public prosecutor (Art. 319 of the CC of the RF).

On May 26, 2016 Klykh was sentenced to 20 years imprisonment, the first first 3 years of which he must spend in prison (and not in the colony). He is in prison in Verkhneisetsk, Chelyabinsk region. His case is an example of a person may be deprived of psychiatric treatment for punitive purposes.⁶⁰

3.8. ANTON PODCHASOV

Anton Podchasov, a member of a district elections commission in Barnaul, has been sent for psychiatric evaluation at the request of prosecutor Svetlana Doronina under a court order April 30 after he re-posted a blog entry titled "Russophobias Post" which in turn was written by a Barnaul opposition member, Andrei Teslenko, an RPR Parnas candidate in elections to the Altai Republic legislature, charged with "extremism".⁶¹

The prosecutor's doubts about Podchasov's sanity were allegedly based on Podchasov's view about the country's history and election legislation. However, the examination found the activist sane, although this did not help him avoid the conviction of the court.⁶²

3.9. A. V. TSVETKOV

In April 2017, A. V. Tsvetkov was arrested on suspicion of 'disseminating materials that incite hatred' (Article 282) after he posted on his Vkontakte page an image depicting President Vladimir Putin and Prime Minister Dmitry Medvedev in Nazi uniforms alongside Patriarch Kirill, in addition to an image of Putin with heavy makeup, which says 'Stop homophobia!'. The images were formally added to the Ministry of Justice's continually expanding index of banned 'extremist' materials,

⁶⁰ Osavolyik, Andriy, The cases of Stanislav Klykh, Gennadiy Afanasyev and Sergey Litvinov (update), *Opendialog* <http://en.odfoundation.eu/a/7310,the-cases-of-stanislav-klykh-gennadiy-afanasyev-and-sergey-litvinov-update> [Accessed 13.04.17]

⁶¹ <http://www.interpretermag.com/russia-update-may-6-2015/>

⁶² Kirrilova, Ksenia: "Karatel'naya Psihiatriya: kak v Rossii borut'sya s inakomysliem", *Radio Svoboda*, 12 September 2016, <http://ru.krymr.com/a/27981326.html>

which carries a sentence of 2 to 5 years' imprisonment if violated. The Central Regional Court of Tver removed criminal liability from A. V. Tsvetkov and instead ordered him to receive compulsory psychiatric care.⁶³

3.10. KONSTANTIN ZADOYA

Konstantin Zadoya, 20 years-old, was forcibly taken to a psychiatric hospital on 7 July, 2015 and detained there for four days without a court order, in violation of Russian legislation which stipulates that nobody can be detained for more than 48 hours without a judge's decision. On 11 July, four days after his detention, the Dzerzhinsky District Court in Novosibirsk ruled that Zadoya should be detained in the Novosibirsk State Psychiatric Hospital no. 3, based on a medical opinion dated 7 July which claimed that he suffers from a "serious polymorphous psychotic disorder without symptoms of schizophrenia". The basis for this conclusion was the fact that during a heated argument with his father, Konstantin Zadoya kicked and broke a glass door in his father's apartment. This behavior, according to psychiatrists, manifested Zadoya's "delirious ideas about his father, and a very negative attitude towards him".⁶⁴ The dispute stemmed from the fact that Konstantin's father is very influential religious fundamentalist and nationalist in the city, whereas Konstantin is an atheist and an opposition activist.

After an Urgent Action was issued on 19 July, the hospital started receiving letters from activists from around the world and the Chief Doctor contacted Konstantin Zadoya's mother and accused her of trying to create a "political scandal". Zadoya was released from the hospital on 3 August after he signed a statement saying that he had voluntarily agreed to be hospitalized and that he would withdraw his appeal to the court decision. During an interview after his release, Zadoya disclosed that there are many other people who are wrongfully detained in Novosibirsk State Psychiatric, for reasons such as 'complaining about a neighbor'.⁶⁵

3.11. NIKOLAI PODGORNYY

In May 2015, 16-year old Nikolai Podgornyy was placed in a psychiatric clinic by his parents after he began to publicly voice his oppositional political views: he was against the annexation of Crimea and Russian aggression in Ukraine.⁶⁶

⁶³ "Russian court bans image suggesting Putin is Gay", 5 April 2017, *The Moscow Times* <https://themoscowtimes.com/news/russian-court-bans-image-suggesting-putin-is-gay-57632> [Accessed 5.04.17]

⁶⁴ "Russian Federation: Review detention in psychiatric institution: Konstantin Zadoya", 17 July 2015, *Amnesty International* <https://www.amnesty.org/en/documents/eur46/4478/2016/en/> [Accessed 6.04.17]

⁶⁵ "Eto ne bol'nitsya, eto koloniya", *Novaya Hronnika Tekushaya Sobytiyi*, 6 August 2016, <http://www.ixtc.org/2016/08/eto-ne-bolnitsa/> [Accessed 6.04.17]

⁶⁶ See footnote 56.

3.12. GLEB ASTAFYEV

In May 2015, 16-year- old Gleb Astafyev from Kurgansk was sent for an involuntary psychiatric examination following his solitary picket in support of Pyotr Pavlensky, the performance artist best known for nailing his scrotum to Red Square – and who himself got sent to a psychiatric hospital earlier that year.⁶⁷ In total, Astafyev spent 15 days in hospital, and the first five of this he was placed in a ward of special supervision where severely mentally ill people stay. Astafyev said it was impossible to leave the ward and that he just lay in bed in a room all day long in a room with eight other men.

4. UZBEKISTAN

4.1. JAMSHID KARIMOV

From January 2012 to March 2017 Jamshid Karimov, independent journalist and nephew of the late President of Uzbekistan, Islam Karimov, was detained in Samarkand psychiatric hospital, Uzbekistan. Karimov contributed to the opposition-leaning news website ferghana.ru and the London-based Institute for War and Peace Reporting (IWPR). His articles were highly critical of his uncle. His detainment came just two months after his release from Samarkand hospital in November 2011, where he had been placed under compulsory treatment since September 2006. According to his daughter, Karimov was kept in a room with barred windows, there was no trial at all and officers were stationed in his room whenever she visited him.⁶⁸ His release in 2011 is thought to have been prompted by US Secretary of State Hilary Clinton during her visit to Uzbekistan that month.

4.2. ELENA URLAEVA

In May 2016 authorities detained Elena Urlaeva, a well-known human rights activist and the elected leader of the Human Rights Alliance of Uzbekistan (PAU) in a psychiatric facility in Tashkent, Uzbekistan. Urlaeva sought psychiatric help in March following multiple traumatic events, including instances of harassment by officials such as a full body-cavity search under sedation. Urlaeva has previously been diagnosed with schizophrenia, but with medication and with the right lifestyle conditions, she is able to manage the condition and effectively work in a demanding profession. In late April, Urlaeva's doctor informed her she was in good health and would be released on 2 May. However, the hospital refused to release her, failing to provide a medical basis for her detainment. Urlaeva remained in psychiatric detention until 2 June 2016 where she was reportedly subjected to degrading and aggressive treatment.⁶⁹

⁶⁷ "Zatoptannyi Bezumnym Stodom", *Radio Svoboda*, 11 June 2016 <http://www.svoboda.org/a/27791182.html> [Accessed 6.04.17]

⁶⁸ "Details surrounding the case of Jamshid Karimov," *Uzbek-German Forum*, November 22, 2016 <http://uzbekgermanforum.org/details-surrounding-the-case-of-jamshid-karimov-have-been-made-available-by-a-friend-and-his-daughter/> [Accessed 22.03.17].

⁶⁹ *Human Rights Watch*: "Uzbekistan, Events of 2016" <https://www.hrw.org/world-report/2017/country-chapters/uzbekistan> [Accessed 22.03.17].

More recently, from 1 to 24 March 2017 Urlaeva was detained by police, who forcibly sent her back to the psychiatric hospital, without informing her family.⁷⁰ Doctors have yet to give a reason for her hospitalization and a medical commission did not examine Urlaeva to certify the need for her compulsory treatment, contrary to Uzbekistan's Law on Psychiatric Treatment which mandates should take place within 48 hours.⁷¹ During her time in hospital, Urlaeva was forced to take sedative drugs.⁷²

Human rights activists, including Umida Niyazova, head of the Uzbek-German Forum claims that authorities specifically detained her in order to prevent her planned meeting the following day with representatives from the World Bank and the International Labor Organization (ILO) from taking place. During the meeting, Urlaeva was going to present evidence of the government's systematic use of forced labor in the cotton sector, a subject which she has spent the past 16-years researching.⁷³

Urlayeva has recently been seeking psychiatric help as her symptoms have worsened due to increased levels of stress. However, she has been repeatedly denied this by psychiatrists, who fail to provide any reasons for refusing her help.

Urlaeva's case reveals a major dimension of the political use of psychiatry: the fact that an activist has a mental health disorder (or a history of it) can be abused by authorities in that, when a person seeks treatment they are denied it, however when they are not in need of treatment it is unnecessarily administered to them for punitive or obstructive purposes. It is imperative to keep in mind that the denial of treatment is as much an abuse of the psychiatric profession, as is unnecessarily subjecting a person to treatment.

⁷⁰ "Uzbekistan: Rights advocate Urlayeva secretly placed in psychiatric institution", *Ferghana Information Agency*, <http://enews.ferghananews.com/news.php?id=3268&mode=snews> [Accessed 22.03.17].

⁷¹ Law of the Republic of Uzbekistan "On Protection of Mental Health in the Population of Uzbekistan", *Cornwell DigitalCommons@ILR*, Cornell University, January 2006, p.14.

⁷² Information received on 24 March, 2017 by an anonymous source known to the author.

⁷³ "Uzbekistan Government Detains Human Rights Defender Elena Urlaeva in a Psychiatric Hospital", *Cotton Campaign*, November 22, 2016. <http://www.cottoncampaign.org/who-we-are.html> [Accessed 22.03.17]

2. CONCLUSIONS AND RECOMMENDATIONS

2.1. CONCLUSIONS

Regrettably, the political climate in some of the former Soviet republics is again such that local officials feel they have the liberty to revert to using psychiatry as a tool of frightening their opponents. In most cases, political opponents are not yet subjected to long-term hospitalizations and compulsory treatment with massive dosages of neuroleptics, such as in the Soviet period, yet the trend is clearly in the direction of more extensive use of psychiatry as a means of repression. Unless steps are taken both by professional bodies inside the countries and by the world psychiatric community, we might soon be back to a more systematic and extensive abuse. In researching and monitoring of psychiatric abuse we are solely dependent on news outlets reporting on this phenomenon, however the amount of cases is likely to be considerably higher. But without the means and resources to autonomously research this phenomenon, our ability to compile accurate information will continue to be constrained. For example, in February 2016, it was reported that a court in Republic of Chuvashia sent a woman, whose name was not disclosed, to a psychiatric hospital for compulsory treatment, because of her posts on social networks. Unfortunately, we know nothing more about the case.

It is noteworthy that in some cases, e.g. the case against the members of the band Pussy Riot, suspects were psychiatrically examined and even diagnosed to be suffering from e.g. a “personality disorder”. However, the authorities decided not to take the “psychiatric route”, probably because the case was too well known and would have caused too many international protests. The same happened in the case of Russian artist Pyotr Pavlensky, who was examined by the Serbsky Institute in Moscow after burning down the front doors of the FSB headquarters on Lyubyanka Square in Moscow, however he was found to be mentally healthy and accountable. Some experts consider this diagnosis to be the result of international scrutiny and pressure over Pavlensky’s treatment.⁷⁴

Unfortunately, twenty-five years after the end of the USSR, Soviet views and perspectives still persist in psychiatry, and in many parts of the former USSR very little has changed in terms of therapeutic approaches, respect for human rights and medical ethics. In most countries, the social care homes continue to function as before, and hundreds of thousands of persons are locked away in large and inhumane institutions for the rest of their lives.⁷⁵ Directing cases of psychiatric abuse to the Court of Human Rights in Strasbourg undoubtedly helps to solve individual cases and set some jurisprudence, but it will in no way alter the general situation on the ground. Especially since the Russian government decided that international legislation by no means supersedes Russian legislation, there is little hope for any structural change. Only attitudinal change can bring about real and structural change, and in order to achieve that the monopoly on information, perceptions and views needs to be change will need to come from within, but can be triggered from outside.

⁷⁴ This view was expressed to the author in April 2016 by a Russian lawyer, who wishes to remain anonymous.

⁷⁵ See the report *Review of social care homes in Ukraine and the development of a Plan of Action*, published by Human Rights in Mental Health-FGIP together with the Office of the Ombudsman for Human Rights of the Verkhovna Rada, Kyiv, February 2017.

2.2. RECOMMENDATIONS

The real challenge all countries face on a daily basis is the re-training of mental health professionals in skills of contemporary mental health service delivery (e.g. multidisciplinary teamwork, case management, psychosocial rehabilitation). In that respect the following issues can be considered as key elements:

2.2.1. EDUCATION

In some of the former Soviet republics, in particular in Russia and Central Asia, the change in leadership has been limited and superficial, and remnants of the old nomenklatura, combined with younger professionals who were considered trustworthy and not focused on bringing about any leadership change, continued to dominate the field and did their best to maintain a monopoly on information and international contacts. The fact that knowledge of foreign languages in these countries continues to be more an exception than the rule very much helps them in this respect.

At this moment, much of the literature published in Russian in the mental health field is either focused on rather obscure forms of “psychotherapy”, or published by the pharmacological industry, or written by old-style Soviet psychiatric leaders, who were heavily involved in Soviet psychiatric abuse. A psychiatrist or mental health professional who does not know a Western language and has no access to printed translated psychiatric literature in Russian, has no chance of being informed of modern approaches in mental health care, and has no knowledge about current views on patient rights, human rights in mental health and, for instance, the UN Conventions on the Rights of Persons with Disabilities (CRPD). And this is a situation that the old psychiatric leadership would like to see continued as long as possible.

2.2.2. MONITORING

Human rights abuses in mental health institutions in Eastern Europe and the former USSR are a daily occurrence. This counts for regular psychiatric hospitals, but no less for the so-called social care homes in the region that house hundreds of thousands of persons with mental illness and mental disability or persons who are just outcasts in society. Much emphasis should be put on monitoring the human rights conditions there, and pressing authorities to develop alternative systems of care by which people are returned to the community and taken care of either within their own communities or by specialized services. A key issue in this debate is the issue of guardianship, a system that is widely practiced throughout the region and as a result of which people see their rights taken away. In many cases the director of a social care home is guardian of all his patients, which gives him immense power over both their personal lives and their finances. This system is absolutely contrary to the Convention of the Rights of Persons with Disabilities (CRPD) and should be abandoned. However, this only makes sense if at the same time major investments are made in developing alternative mechanisms that are in line with international human rights standards.

2.2.3. PROTESTS

In the 1970s and 1980s, the main drive of the opposition to Soviet psychiatric abuse was focused on expulsion of the Soviet society from the world psychiatric community, notably the WPA. In that case it worked, as loss of face played an important role in terminating the abuse and rank and file psychiatrists did not suffer, as they had no access to the world psychiatric community anyway. In the 21st century society such total isolation is impossible, whatever measures authorities in countries like China and Russia take to curb freedom of information, access to the Internet and the use of social media. Mental health professionals are now at least in theory able to have access and participate in the world mental health community, and thus the opposite might work: stimulate communication and access, provide training in issues of medical ethics and human rights, translate key documents and manuals to the local language and make it thereby impossible for both authorities and authoritarian psychiatric leaders to keep their constituency uninformed. National and international psychiatric associations such as the World Psychiatric Association should become actively involved in this work, facilitating the development of on-line courses or smartphone applications that help mental health professionals understand their professional duties and the rights of their patients. Also, the development of consumer organizations and other non-governmental organizations that focus on mental health should be stimulated.

With regard to the individual cases of political abuse of psychiatry, a key method of defense is publicity, and pressing authorities to accept a secondary independent psychiatric evaluation. In Soviet times several Western and Soviet psychiatrists (re-) diagnosed victims of political abuse of psychiatry, or persons who had reason to believe they could become victim of such abuse, and these independent diagnoses were very effective means to prevent incarceration. In recent years FGIP has been involved in a number of cases where such secondary examinations were offered, and practice showed that authorities instantly became weary to continue to use the “psychiatric route” in repressing the person concerned.

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FGIP in brief

Human Rights in Mental Health – FGIP is an international federation of not-for-profit organizations that promote humane, ethical and effective mental health care throughout the world. The organization aims to empower people and help build improved and sustainable services that are not dependent on continued external support. The defense of human rights in mental health care delivery is the cornerstone of our work. We consider it our prime obligation to speak out whenever and wherever human rights abuses in mental health practice occur, and work with local partners to amend the situation and make sure the human rights violations in question are discontinued. The basis in all our activities is partnership.

Mission and Vision of Human Rights in Mental Health - FGIP

Every person in the world should have the opportunity to realize his or her full potential as a human being, notwithstanding personal vulnerabilities or life circumstances. Every society, accordingly, has a special obligation to establish a comprehensive, integrated system for providing ethical, humane and individualized treatment, care, and rehabilitation, and to counteract stigmatization of, and discrimination against, people with mental disorders or histories of mental health treatment. An enlightened services system promotes mutually respectful partnerships between persons who receive services and those who deliver them, protects the human rights of users and the ethical autonomy of service providers, and facilitates the engagement of users, families, and all other stakeholders in advocating for and achieving improvements in the quality of care.

Recognizing that these aspirations remain everywhere unfulfilled, and that the rights and needs of persons with mental disorders are particularly vulnerable to infringement and neglect, the mission of Human Rights in Mental Health-FGIP is to promote humane, ethical, and effective mental health care throughout the world and to support a global network of individuals and organizations to develop, advocate for, and carry out the necessary reforms.

