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Rethinking Psychiatric Terror against Nationalists in Ukraine: Spatial Dimensions of Post-Stalinist State Violence¹

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Abstract

This study focuses on psychiatric terror in the Soviet Union in the 1960s–1980s applied to nationalists who constituted approximately one-tenth of those who fell victim to political psychiatry. More specifically, through the spatial examination of two Ukrainian psychiatric clinics' practices and the individual history of the Ukrainian dissident Victor Borovsky, this study analyses the effectiveness of silence that surrounded the cases of “psychiatric patients” in the context of increasing discontent in the republic and the national liberation movement. The medicalization of social control, psychiatric abuses, state violence and brutality exacerbated non-violent popular resistance in Ukraine, which culminated in political activism of Ukrainian patriots in the late 1980s, contributing greatly to the collapse of the Soviet Union and the emergence of independent Ukraine. Despite these ultimate outcomes, forced silence through psychiatric terror was an effective tool in the Soviet arsenal of suppression.

Key Words:

state violence, psychiatric terror, silence, nationalists, Kharkiv, Ukraine.

Silence may be thought of as a desirable state for peaceful existence, a momentary respite from the doldrums of daily living, a prerequisite condition where intellectual contemplation might occur. For Boris Pasternak, silence was a space of comfort, and “the best thing that he had ever heard.”² However, for those who forcibly interned mentally healthy people in psychiatric clinics for seditious thinking, silence was a method

1 I wish to thank Robert van Voren for his valuable suggestions, and Maria Zulim and Semen Gluzman for clarifying biographical details about Victor Borovsky.

2 From Pasternak's poem “Zvezdy letom” [“The Stars in Summer”] (1917). In Russian: “Tishina, ty – luchshee iz vsego, chto slyshal.” See Boris Pasternak, *Izbrannoe v dvukh*

of control, and for their victims – oblivion and void, and eventual death. From the mid-fifties to the late eighties, Soviet psychiatry was used as a political means to control and intimidate dissent, and its abuse was pandemic in all former Soviet republics without exception. Instead of imprisonment which could resonate internationally and “entail serious political costs,”³ Moscow silenced the opposition through involuntary mental hospitalization, “the fig-leaf of medical expertise,”⁴ that has been characterized by many doctors and scholars as a crime against humanity. Internally, the state’s task was to compromise the ideas and demands of oppositionists, and to instigate fear among their adherents.⁵

According to the KGB data which was strictly secret, half of Soviet dissidents were interned in psychiatric clinics which required the development of a specific construction industry – building more psychiatric hospitals.⁶ The 1971–1975 Five Year Plan included the construction of 114 psychiatric clinics where 43,800 patients could be hospitalized simultaneously.⁷ According to the statistics of the Soviet Ministry of Health, by 1971, the number of those who were on the psychiatric register grew from 2.1 million (1966) to 3.7 million, and 290,000 individuals were treated in psychiatric clinics.⁸ Hundreds, if not thousands, of these people were isolated for their political views. In 1989, the journal *Ogoniok*, that became

tomakh: Stikhotvoreniia i poemy [Selected Poetry in Two Volumes: Verses and Poems] (Moscow: Khudozhestvennaia literatura, 1985), 86.

- 3 For a discussion about Soviet policies toward dissidents during the post-Stalin era, see Peter Reddaway, “Soviet Policies Toward Dissent, 1953–1986,” *Journal of Interdisciplinary Studies* 24.1–2 (2012): 67; see also Thomas S. Szasz, *Ideology and Insanity: Essays on the Psychiatric Dehumanization of Man* (New York: Anchor Books, 1970), 113.
- 4 Dan Healey, “Russian and Soviet Forensic Psychiatry: Troubled and Troubling,” *International Journal of Law and Psychiatry* 37.1 (2014): 77.
- 5 Reddaway, “Soviet Policies,” 68.
- 6 Robert van Voren’s statement (information is based on the KGB archival documents found at the Stasi archives) from: Semen Gluzman’s and Robert van Voren’s micro-lectures for Volyn Media, accessed January 30, 2014, <http://www.youtube.com/watch?v=zjt8jQ-qies>.
- 7 Robert van Voren, *Cold War in Psychiatry: Human Factors, Secret Actors* (Amsterdam and New York: Rodopi, 2010), 119.
- 8 The Vladimir Bukovsky Archive, Document 0202 (CT31/19) “About Psychiatric Care in the USSR” (18 February 1972), 164. See also van Voren, *Cold War*, 120.

famous for its liberal views during perestroika under the editorship of Vitaly Korotych, published the number of Soviet citizens who were on the psychiatric register – 10.2 million.⁹ The vagueness and subjectivity of psychiatric diagnoses and the imperfection of psychiatric classification conveniently contributed to the industry of fear that held the Union together. Psychiatric clinics (*psikhushki*) became a secret tool of social and political control, and they were feared even more than prison or exile.

This study focuses on psychiatric terror in the 1960s–1980s applied to nationalists who constituted approximately one-tenth of those who fell victim to political psychiatry. Some were not willing to speak Russian, preferring instead their native languages, which provoked a hostile reaction from the authorities. Others advocated national sovereignty and even political autonomy, a right that was guaranteed to the Soviet republics by the Constitution. Many wanted the revision of national cultural and educational policies.¹⁰ More specifically, through the spatial examination of two psychiatric clinics' practices and the individual history of the Ukrainian dissident Victor Borovsky,¹¹ this study analyses the effectiveness of silence that surrounded the cases of “psychiatric patients” in the context of increasing discontent in the republic and the national liberation movement. The medicalization of social control, psychiatric abuses, state violence and brutality exacerbated non-violent popular resistance in Ukraine, which culminated in political activism of Ukrainian patriots in the late 1980s, contributing greatly to the collapse of the Soviet Union and the emergence of independent Ukraine. Despite these ultimate outcomes, forced silence through psychiatric terror was an effective tool in the Soviet arsenal of suppression.

9 See *Ogoniok* 16 (April 15–22, 1989): 24. This information was provided by the state statistics committee. For details, see also van Voren, *Cold War*, 322.

10 Sidney Bloch and Peter Reddaway, *Soviet Psychiatric Abuse: The Shadow over World Psychiatry* (Boulder, Colorado: Westview Press, 1985), 31.

11 Throughout the text, the first and the last names of Victor Borovsky are spelled as Borovsky himself spelled them after he resided in the United States. A similar approach has been used in Vladimir Bukovsky's case.

Recognizing Medical Power

Michel Foucault responded to a crisis of progress in the 20th century, a century of violence, by writing a history of the birth of psychiatric clinics and modern prisons. He traced the methodological transformations in medicine through time, and illuminated the paths that led to a scientifically structured discourse about an individual. But besides the temporal factors, Foucault also discussed the important role of spatial factors and places such as hospitals that played a crucial role in understanding a patient. The clinic prescribed a “group gaze” at a patient. In Foucault’s view, medical perception should be freed from hospital experience: “hospital practice ... kills the capacity for observation and stifles the talents of the observer by sheer number of things to observe.”¹² Moreover, according to Foucault, the spatialization of medical practices conditions their abuses, which are institutionalized by a group that tries to protect itself in its drive for power and recognition. This group shapes a social space, in which laws stipulate human behaviour not only in “gated” places, such as hospitals and asylums, but also in society as a whole.

The emergence of civilization and complex social forms inevitably resulted in the creation of hospitals, and medicine gained a political status: individual medical care was replaced by collective care which was marked by a new set of rules and dimensions. Such a medicine required the state’s assistance which of course entailed a considerable control and supervision of doctors to prevent abuses of their privileged position: “medicine bec[ame] a task for the nation,” as Foucault aptly noted.¹³ Authoritarian regimes and their leaders, being themselves in a privileged position, immediately took advantage of their role as chief managers and financiers of state clinics: they exploited and perverted the original idea of the clinic to separate sick people from the rest of the society, and utilized it as a justification for the physical isolation of the regime’s critics. The healthy

12 Michel Foucault, *The Birth of the Clinic: An Archaeology of Medical Perception* (New York: Vintage Books, 1994), 15.

13 Foucault, *The Birth of the Clinic*, 19.

were proclaimed mentally ill and oppositional thinking was portrayed as a psychiatric pathology. Interestingly, the medical problem of contagion and transmission of a disease from one individual to another, a reason for isolating sick people in hospitals to prevent an epidemic, became the model for the state's ideological applications. The state's early intervention in "the treatment" of "sick people" was crucial, and the transmission of "societally harmful" ideas was prevented through the clinic and diagnoses prescribed by the state. In a police state, such as the Soviet Union, control of information, supervision and constraint transcended the field of medicine and governed the thinking of not only psychiatrists, the state's employees, but of all Soviet citizens, even those who were close to the inner circle of party bosses in Moscow.

The ambiguity of knowledge that informed psychiatry became a very convenient basis for the Soviet authorities to achieve conceptual transformation of psychiatric science into an ideological weapon against dissent. The accumulation of empirical data based on multiplicities and similarities of individual cases was pushed into the background. Instead, individual exceptionality was emphasized and was made the vehicle of establishing new psychiatric topologies. In other words, a certain qualitative density of symptoms across many individual cases became a secondary consideration for deciding on individual diagnoses. Doctors were advised to pay scrupulous attention to "unique" cases and non-typical social behaviour which became a confirmation of a psychiatric pathology. Although in the past the extraordinary cases were equally outside and inside the boundaries of pathology, now they were claimed to be a guarantee of mental malfunction. The uncertainty and the arbitrariness intrinsic to psychiatry solidified the basis for diagnostic practices which employed a new theoretical premise supported by the authorities. Largely, these practices were prescribed by the state, and doctors' efforts in observing and describing patients' symptoms became rather modest. The language of patients' files (*istoriia khvoroby*) became formal and opaque, and doctors' everyday observations were often reduced to a couple of sentences. This helped to institutionalize a new tradition of the Soviet clinic – deficient

medical practice, abbreviated to a diagnosis which in many cases was fabricated. Importantly, no one could challenge this practice but the party and the Soviet secret police (the KGB), and the information about it, as well as about “patients,” was strictly secret.

The diagnosis of mental sickness became an effective tool of camouflage which bolstered the legal means of fighting against the opposition: conveniently for the state, critically thinking individuals were forcibly hospitalized for indefinite terms. Instead of popularizing medical knowledge and awareness of mentally sick people in society, the state limited the space of popular medical consciousness to conceal its deceit. By the late 1950s, psychiatry became a branch of Soviet medicine fully controlled and heavily subsidized by the state, a field of political application and manipulation. The state not only authorized the “correct” psychiatric diagnoses but also dictated the course of treatment and hospitalization. In Ukraine in the late 1950s and the early 1960s, when the dissident movement gained momentum during the Khrushchev Thaw, the spatial restructuring of psychiatry as a medical practice and as a theoretical discipline became especially important for the state. Very quickly, sadistic practices of political psychiatry were fully established, and they went beyond Foucault’s notion about state control through spatial isolation and abuses.

The elimination of political opposition through coercion and violence undermined the professional integrity of psychiatrists, constrained the scientific progress of psychiatry as a medical discipline and perpetuated crimes against humanity. Multiple accounts of the “mentally ill” have been written about psychiatric misdiagnoses, such as sluggish schizophrenia, that helped lock political activists in special and ordinary psychiatric hospitals (SPH or OPH).¹⁴ In his book *Punitive Medicine*, Alexander Podrabinek noted that a psychiatric diagnosis for a dissenter was predetermined after the KGB chose the psychiatric scenario for his or her punishment:

14 For more details about the procedural routine of placing a patient in these institutions, see Bloch and Reddaway, *Soviet Psychiatric Abuse*, 22–23.

For an experienced Soviet psychiatrist, it does not matter *how* the prisoner behaves; the charming advantage of Soviet psychiatry consists precisely in the fact that any form of behavior can be interpreted as “clearly abnormal.” ... The officials experienced in these procedures do not chase after symptoms but instead cleverly twist the interpretation of any gesture in the direction needed ... “The Serbsky guys” will certainly know how to process them [prisoners] correctly.¹⁵

The documents of the Central Committee copied by the Soviet dissident and human rights activist Vladimir Bukovsky in the early 1990s reveal that one of the central objectives of the regime during late socialism was the isolation of the dissidents in psychiatric clinics, the production of psychotropic drugs to immobilize and to silence them, and the reliable guarding system in clinics that would prevent the leak of information about their forcible treatment.¹⁶ Importantly, SPH were under the jurisdiction of the Ministry of Internal Affairs (MVD), while OPH were subordinated to the Ministry of Health. The surveillance and a strict prison regime were enforced in both types of psychiatric hospitals that made it extremely difficult for the victims of political psychiatry to resist or escape.

The accounts of victims of political psychiatry (Vladimir Bukovsky, Valery Tarsis, Petro Grigorenko, Leonid Pliushch, Victor Borovsky and many others), as well as the testimonies of Soviet psychiatrists (Anatoly Koriagin, Semen Gluzman, Aleksandr Voloshanovich) helped several scholars in the West recognize medical power in the Soviet Union.¹⁷ Sidney Bloch,

15 Alexander Podrabinek, *Punitive Medicine*, trans. Alexander Lehrman (Ann Arbor: Karoma Publishers, Inc., 1980), 9, 12.

16 For details about the creation of the Vladimir Bukovsky Archive, see Bukovsky’s December 20, 2004 interview “Ia vooruzhilsia kopiiami,” [“I Armed Myself with Spears,”] *Novaia Gazeta*, accessed February 12, 2014, <http://2004.novayagazeta.ru/nomer/2004/93n/193n-s43.shtml>. On the goals of the Central Committee, see the Vladimir Bukovsky Archive, Document 0202 (CT31/19) “About Psychiatric Care in the USSR” (February 18, 1972), 166.

17 Vladimir Bukovsky, *To Build a Castle – My Life as a Dissenter*, trans. Michael Scammell (New York: The Viking Press, 1979); Valeriy Tarsis, *Ward 7: An Autobiographical Novel*, trans. Katya Brown (New York: E.P. Dutton & Co., Inc., 1966); Petro G. Grigorenko, *Memoirs*, trans. Thomas P. Whitney (New York & London: W.W. Norton and Company, 1982); Leonid Pliushch, *U karnavali istorii: Svidchennia [History’s Carnival: Testimonies]* (Kyiv: Fakt, 2002); Victor Borovsky, *Potslunok satany: Spohady [Satan’s Kiss: Memoirs]* (New York: Meta Publishing Company, 1981); Anatoly Koryagin, “Autobiographical Notes,” in

Peter Reddaway, Robert van Voren, Harvey Fireside, Teresa Smith, Thomas Oleszczuk and Dan Healey have thoroughly examined the punitive aspect of Soviet psychiatry, and the state's cover-up tactics to hide the truth.¹⁸

Bloch's and Reddaway's extensive research on Soviet political psychiatry provided a better understanding of mechanisms of psychiatric terror in the Soviet Union, and the efforts of international organizations to intervene on behalf of dissenters, "prisoners of conscience." They explained the foundations for psychiatric ethics and stressed that psychiatrists were uniquely empowered by society to hospitalize patients in a psychiatric institution without their consent.¹⁹ The KGB incited Soviet psychiatrists to manipulate diagnoses for political purposes because there were no objective criteria that would with certainty prove a person's psychiatric "abnormality." Bloch and Reddaway discussed Professor Andrei Snezhnevsky's all-inclusive theories that extended the boundaries of mental illness, extending in turn the application of political psychiatry.²⁰ The diagnosis of "sluggish schizophrenia" was conveniently applied to dissenters and to those who

Koryagin: A Man Struggling for Human Dignity, ed. Robert van Voren (Amsterdam: Second World Press, Vladimir Bukovsky Foundation, 1987); S.F. Gluzman, *Risunki po pamiaty ili vospominaniia otsidenta* [*Drawings from Memory or Memoirs of a "Sitter"*] (Kyiv: Izdatelskii dom Dmitriia Burago, 2012); The Royal College of Psychiatrists, "Dr Alexander Voloshanovich: A Critic of the Political Misuse of Psychiatry in the USSR," *The Psychiatric Bulletin* 4 (1980): 70–71, accessed March 27, 2014, <http://pb.rcpsych.org/content/4/5/70.full.pdf>.

18 Bloch and Reddaway, *Soviet Psychiatric Abuse*; van Voren, *Cold War*; Harvey Fireside, *Soviet Psychoprisoners* (New York: W.W. Norton & Co., 1979); T.C. Smith and T.A. Oleszczuk, *No asylum: State Psychiatric Repression in the Former USSR* (New York: New York University Press, 1996); Thomas A. Oleszczuk, *Political Justice in the USSR: Dissent and Repression in Lithuania, 1969–1987* (New York: Columbia University Press, 1988); Dan Healey, "Russian and Soviet Forensic Psychiatry."

19 Bloch and Reddaway, *Soviet Psychiatric Abuse*, 13.

20 For details about Snezhnevsky's Moscow School, see Bloch and Reddaway, *Soviet Psychiatric Abuse*, 40–41; van Voren, *Cold War*, 96–104. See also A. Korotenko and N. Alikina, *Sovetskaia psikhiiatriia: Zabluzhdeniia i umysel* [*Soviet Psychiatry: Misconceptions and Intent*] (Kyiv: Sfera, 2002), 50. Andrei Snezhnevsky was a Soviet psychiatrist, professor, academic of the Soviet Academy of Science, and the founder of one of the psychiatric schools in the Soviet Union. He was the key person responsible for the use of psychiatry for political purposes and was personally involved in cases of dissidents, such as Petro Grigorenko, Vladimir Bukovsky, Zhores Medvedev and Leonid Plushch.

the regime felt were socially maladjusted and suspicious. They explained that, of course, the interconnectedness between people's mental health and their social adjustment existed. However, compulsory hospitalization was not to be used as a measure of punishment for social maladjustment but rather should be considered as a therapeutic measure to alleviate human suffering. In case of the Soviet Union, deviant political behaviour was "treated" by social isolation, and mental, physical and drug abuse became the methods that corrupted the entire psychiatric system, engaging psychiatrists, nurses and orderlies in non-medical schemes designed by the state.²¹

One of the most active scholars in this area, Robert van Voren, continues to investigate the legacies of Soviet punitive psychiatry in Ukraine, Russia and other former Soviet republics. In this context, statements by Julie V. Brown seem at least surprising. She has suggested that discussions about the extent of psychiatric malpractice in repressing dissidents were largely of a speculative nature, a trend also evident in the post-Soviet period.²² She has also argued that the implications and legacies of Soviet political psychiatry and its influences on post-Soviet psychiatry have been neglected by scholars, and posited that some "are quick to conclude" that history repeats itself when observing cases of political psychiatry in contemporary Russia.²³ In defence of competent and thorough scholars, such as van Voren, it should be mentioned here that Brown did not distinguish between the Russian Association of Independent Psychiatrists and the Russian Association of Psychiatrists, nor did she recognize the difference in what they stand for. Moreover, she has identified the Serbsky Institute as "*allegedly* [italics mine] one of the major centres of 'punitive psychiatry,'" and has spoken highly of Tatiana Dmitrieva, the apologist of Soviet punitive psychiatry, and characterized her as a person who "has been on the front lines in this internal professional struggle."²⁴ To interrogate Brown's

21 Bloch and Reddaway, *Soviet Psychiatric Abuse*, 14–15.

22 See Julie V. Brown's "Afterword" in *Madness and the Mad in Russian Culture*, ed. Angela Brintlinger and Ilya Vinitsky (Toronto: University of Toronto Press, 2007), 292.

23 Brown, afterword, 292, 294.

24 Brown, afterword, 294–95.

position that appears to be highly debatable, a discussion about Soviet psychiatric practices, key agencies and individuals who participated in them seems appropriate.

Soviet Psychiatric Practices

During the 1950s–1980s, the Serbsky Central Scientific Research Institute of Forensic Psychiatry in Moscow²⁵ became the chief psychiatric institution which decided the fates of Soviet dissidents and human rights activists. The Institute became a psychiatric subsidiary of the KGB. The director of the Serbsky Institute was Georgy Morozov (1957–1990), who, as van Voren noted, was “one of the main architects of Soviet systemic political abuse of psychiatry.”²⁶ The special fourth department of the Serbsky Institute that was fully subordinated to the KGB became a place of captivity for many dissidents, and those psychiatrists who worked there never shared the details of their work with their colleagues.²⁷ However, those who were sent to the Serbsky Institute constituted only a small portion of those who were forcibly interned in regional psychiatric facilities in the Soviet republics.²⁸ The advantage to the state of this particular approach to silencing dissenters was transparent: they were quietly removed from the public eye for indefinite terms, and often for life.²⁹ The legal means of

25 This transliteration of the Serbsky Institute has been broadly used in secondary sources.

26 Van Voren, *Cold War*, 257. Morozov was personally involved in the cases of Vladimir Bukovsky, Viktor Fainberg, Natalia Gorbanevskaia, Petro Grigorenko, Leonid Pliushch and many others.

27 Korotenko and Alikina, *Sovetskaia psikhiatriia*, 42; Viktor Rafalsky, “Reportazh niotkuda,” [“A Report from Nowhere,”] in Korotenko and Alikina, 222, 233–34. For many years, Daniil Lunts, the KGB colonel and psychiatrist, was the head of the fourth department, who implemented the orders of the KGB and instructed his subordinates about the prescribed fates of political prisoners, patients of the Serbsky Institute.

28 Van Voren, *Cold War*, 115.

29 Bloch and Reddaway, *Soviet Psychiatric Abuse*, 20, 29. This concept was not new. Mirabeau, the eighteenth century French economist, characterized the category of people who had to be interned in houses of confinement as “prisoners of State whose crimes must not be revealed.” Secrecy helped the state save face and conceal the deception. See Michel Foucault, *Madness and Civilization: A History of Insanity in the Age of Reason* (New York: Vintage Books, 1988), 226.

defense were unavailable to those who were “diagnosed” with schizophrenia, and trials were held in the absence of the “patients.”

Political psychiatry as a method for dealing with dissent gained popularity under the patronage of the KGB Chairman Iury Andropov. He became a key figure who accelerated psychiatric terror against Soviet dissidents.³⁰ The avalanche of KGB resolutions facilitated the *chekizatsiia* of psychiatry.³¹ The accretion of the state, secret organs and the core psychiatrists who occupied leading positions occurred rather quickly: doctors were deprived of any opportunity to act independently; chekists were thoroughly educated in issues related to psychiatric pathologies. For instance, students of the Counterintelligence Department no. 2 of the Highest School of the KGB (*Vysshiaia shkola KGB*) were regularly taken to the Serbsky Institute to attend “practical sessions” where they observed psychiatric patients.³² The cooperation between the punitive organs and psychiatrists were rather productive. According to the 1976 statistical data of the Moscow Helsinki Group, the Moscow militia sent on average 12 people per day to mental institutions. Among them were those who visited the Supreme Soviet of the USSR to deliver their grievances, individuals who attempted to penetrate foreign embassies to ask for political asylum, and those who were arrested in the streets for various violations.³³

30 Van Voren, *Cold War*, 115. See the Vladimir Bukovsky Archive, Document 0200 (P151), the January 22, 1970 Decree of the Politburo TsK KPSS about identifying and isolating mentally ill individuals with terrorist and politically harmful inclinations. According to the December 15, 1969 report by the KGB head of the Krasnodar region S. Smorodinsky, from 1967 to 1969 180 “mentally ill” individuals were identified who made anti-Soviet statements, wrote letters of complaint to authorities, and made attempts to escape from the Soviet Union. Smorodinsky lamented that psychiatric hospitals were designed to accommodate only 3785 patients, while approximately 11–12,000 needed psychiatric treatment. See the Vladimir Bukovsky Archive, Document 0200 (P151), 11–13.

31 The term *chekizatsiia* is related to *chekist*, an agent of the Soviet secret police (the KGB).

32 Van Voren, *Cold War*, 247, 256; Leonid Mlechin, “Pochti ezhednevno...” [“Almost Daily...”] *Novaia gazeta*, October 18, 2013, 17. I am grateful to Robert van Voren for providing me with Mlechin’s article.

33 *Moskovskaia Helsinskaia Gruppy* [Moscow Helsinki Group], Document 8, “O zloupotrebleniakh psikhiiatriei,” [“About Psychiatric Abuses,”] accessed January 24, 2014,

In the 1960s–1980s, national grievances were registered mostly in Ukraine and the Baltic Soviet republics, where the share of “mentally ill” people who advocated national and cultural autonomy was rather large.³⁴ Psychiatric terror was broadly employed as an intimidation tactic during the waves of mass arrests of Ukrainians (in 1965–1966, 1969–1972 and the early 1980s) for their membership in the dissident movement. The separatist tendencies among Ukrainian dissidents were more perceptible in Western Ukraine, while people from Eastern Ukraine gravitated more toward cultural and intellectual opposition to the Soviet regime.³⁵ Either view was perceived by the Soviet authorities as anti-Soviet, which had to be addressed.

As Kenneth C. Farmer noted, it would be impossible to establish a distinction between human rights activists and “nationalist dissenters” during these decades in Ukraine.³⁶ The KGB ignored the distinction and referred to all political activists in the republic as “Ukrainian nationalists,” a term that had a pejorative connotation. Leonid Pliushch, a Ukrainian human rights activist, preferred to be identified as a “patriot” to avoid accusations of national exceptionalism and condescending attitudes toward other nationalities. He argued that an identification of Ukrainian dissenters as nationalists would be inaccurate, and would simply reduce them to the all-embracing Soviet police definition.³⁷

Employing Pliushch’s definition, the majority of Ukrainian patriots were young people between 20 and 29 years old who were born before or during World War II, and whose memories of Stalin’s terror and the man-made famine of 1932–1933 in Ukraine were fresh and reinforced by their parents and grandparents. Most were university graduates who

<http://www.mhg.ru/history/145B1EA> . The Moscow Helsinki Group is a Russian organization that defends human rights. It was founded in 1989.

34 Van Voren, *Cold War*, 147.

35 For more details about the demographic breakdown of dissidence in Soviet Ukraine in the 1960s–1970s, see Kenneth C. Farmer, *Ukrainian Nationalism in the Post-Stalin Era: Myth, Symbols and Ideology in Soviet Nationalities Policy* (The Hague, Boston, London: Martinus Nijhoff Publishers, 1980), 176–84.

36 Farmer, *Ukrainian Nationalism*, 161.

37 Farmer, *Ukrainian Nationalism*, 168.

held advanced degrees in arts and humanities, and those who were professional writers, artists, historians, philologists and scientists.³⁸ Later they were grouped under the collective term of *shistdesiatnyky* whose romantic nationalist orientation manifested itself in their art and social activities in the 1960s. Farmer characterized them as “the first kernel of a deliberate, committed, and self-identified nucleus of opposition among the mobilized and Soviet-educated generation.”³⁹ A considerable portion of them were interned in mental institutions; some experienced both the camps and psychiatric clinics.

The most recalcitrant individuals were incarcerated in SPH. The widespread diagnoses for the dissidents were “sluggish schizophrenia,” “reformist delusions,” “reformatory paranoia,” “nervous exhaustion caused by justice-seeking,” and the like.⁴⁰ In Ukraine, the Dnipropetrovsk special psychiatric hospital gained fame as the cruelest mental institution in the territory of the USSR. Bloch and Reddaway characterized the conditions in SPH as a “highly disturbed environment,” saturated with the insanity of severely ill patients, and the cruelty of the staff, the orderlies who usually were criminals-trustees.⁴¹

Scholars identified several methods of non-therapeutic “treatment” which were punitive in essence: beatings, sexual abuse, the “wet pack,” electroconvulsive therapy (ECT) or electric shock therapy (EST), and drug misuse (Sulphazin, *skipidar* [turpentine oil], various neuroleptics/ anti-psychotics (haloperidol), sedatives and tranquilizers, and insulin shock “treatment”).⁴² The drugs served as a chemical straitjacket that helped control people’s behavior and mind and, including other methods, such

38 Farmer, *Ukrainian Nationalism*, 181–83.

39 Farmer, *Ukrainian Nationalism*, 100.

40 Van Voren, *Cold War*, 142, 213; Podrabinek, *Punitive Medicine*, 78.

41 Bloch and Reddaway, *Soviet Psychiatric Abuse*, 26.

42 Bloch and Reddaway, *Soviet Psychiatric Abuse*, 27; Petro Grigorenko, “Zvychayna psykholikarnia,” [“The Ordinary Psychiatric Clinic,”] in Borovsky, 5. The “wet pack” means wet canvas or linen that was tightly bound around the “patient’s” body. While drying, the canvas prevented the person from breathing freely, causing hypoxia and unimaginable suffering.

a “therapy” was also a form of intimidation and encouragement to recant. Recanting was a sign of “recovery” and a condition for release.

Neuroleptics quickly demoralized people: they became deranged and indifferent to their surroundings, refraining from any activities and generally losing their grip on reality. Viktor Rafalsky wrote:

When I got to prison which was often enough, this was a resort for me, believe it or not ... There are things that are difficult to imagine. This is merely unimaginable, when a person is kept under the influence of neuroleptics for years. Only uncertainty is ahead of you. This incapacitates and kills you. Weak people fail to tolerate it and hang themselves. Neuroleptics break your spirit, and people lose their human dignity and integrity. They kneel before their executioners and beg for mercy, as it happened to the journalist Lavrov.⁴³

Significantly, the KGB supervised the use of drug torture for recalcitrant individuals, prescribing the injection of neuroleptics and other drugs, and even the dosage. The KGB told Leonid Pliushch’s wife that if she behaved herself and stopped complaining about the violation of human rights in the Soviet Union, the dosage of neuroleptics prescribed to her husband would be decreased.⁴⁴ A number of secret laboratories worked at creating new drugs, and the interned dissidents served as guinea pigs, involuntarily participating in drug experiments. Slavoj Žižek made it clear that at the notorious Serbsky Institute, a drug was invented to torture dissidents. The drug provoked bradycardia when injected into the prisoner’s heart zone, which caused a feeling of horror and terrifying anxiety. “Viewed from the outside, the prisoner seemed just to be dozing, while in fact he was living a nightmare,” Žižek noted.⁴⁵

Physical and mental torture was accompanied with everyday inconveniences, such as showers that were allowed once a week, collective trips

43 Rafalsky, “Reportazh niotkuda,” 228. Viktor Rafalsky is a human rights activist and a victim of political psychiatry. He spent 23 years in various psychiatric clinics. For more details about Rafalsky, see Osyp Zinkevych, ed., *Rukh oporu v Ukraini 1960–1990: Entsyklopedychnyi dovidnyk [The Resistance Movement in Ukraine, 1960s–1990s: Encyclopedia]* (Kyiv: Smoloskyp, 2010), 531.

44 Pliushch, *U karnavali istorii*, 550.

45 Slavoj Žižek, *Violence* (New York: Picador, 2008), 44.

to the toilet allowed every four hours, and so on. Moreover, the infrastructure of most psychiatric clinics literally fell apart (many had not seen reconstruction since prerevolutionary times), and doctors were engaged in solving plumbing, catering and other economic problems.⁴⁶ “Open door policies” were proclaimed by luminaries of Soviet psychiatry as a progressive approach to treating psychiatric patients. However, bars on the windows, locked doors, cages and everyday prison-like practices were a norm in psychiatric wards.⁴⁷ In the atmosphere of total disregard for human dignity and deteriorating material conditions of the clinics, the majority of psychiatrists were concerned about their personal well-being, privileges, salaries and promotion.⁴⁸

People’s physical isolation in psychiatric wards from their relatives and from the rest of society ensured absolute secrecy and prevented leaks of information. Typically, neither the “patients” nor their relatives requested help. Those who challenged the regime were isolated in a psychiatric clinic “by force or by deception,”⁴⁹ and the Soviet authorities did their best to hide them from foreigners and especially from foreign journalists to keep the numbers of those who were dissatisfied with the regime secret from the outside world. For instance, many people were interned in psychiatric clinics before and during Richard Nixon’s 1972 visit to Moscow and the 1980 Olympic Games in the USSR. They were diagnosed as psychopaths (70%) or schizophrenics (30%) who allegedly suffered from various paranoid symptoms. Often the interned did not receive any treatment, and the “wall therapy” was the only method applied to them. Paradoxically, despite the all-pervasive mode of secrecy, the KGB’s interventions became so normal and obvious that neither psychiatrists nor their “patients” concealed the fact of the secret police’s active

46 Koryagin, “Autobiographical Notes,” 19; I.K. Sosin, “Dva goda iz dvukh stoletii...” [“Two Years out of Two Centuries...”] *Novosti Ukrainiskoi psikiatrii*, 2003, accessed January 24, 2014, <http://www.psychiatry.ua/books/saburka/papero34.htm>.

47 Koryagin, “Autobiographical Notes,” 19.

48 Koryagin, “Autobiographical Notes,” 24.

49 Anatolii Koryagin, “Unwilling Patients,” *The Lancet*, April 11, 1981, 822.

participation in medical procedures.⁵⁰ But this information circulated inside the walls of psychiatric clinics and did not very often travel outside. Podrabinek has argued that the corruption and venality of the core group of psychiatrists at the Serbsky Institute who worked together with the secret police (some of them were secret police) was so obvious that they even “stopped pretending that they [were] interested in finding the truth. The conscience of an SPH physician has been replaced with the cynicism of a Chekist.”⁵¹ Many psychiatrists of the Kharkiv Psychiatric Hospital (Saburova Dacha) exhibited similar behaviour.

Psychiatrists and Saburova Dacha

The Soviet socialist system of medicine and its total control by the party shaped psychiatry, its ethical principles and the mode of functioning, employing the principles of “naked coercion” and violence.⁵² The career of rank-and-file psychiatrists and their professional behavior were under complete control of chief psychiatrists and heads of psychiatric clinics who were a part of the party *nomenklatura*. The working schedule of psychiatrists, especially in the peripheries, was rather hectic. Normally, they had to see approximately 25–30 patients per day, which, as the former Soviet psychiatrist and dissident Anatoly Koriagin argued, “precluded a deep, thoughtful approach to the patients, and medical skill was reduced to routine form-filling and stamping.”⁵³

Micro supervision by head doctors, the deplorable material conditions of psychiatric clinics, and more serious problems, such as professional forgery and deception demanded by the party and the KGB,

50 Koryagin, “Unwilling Patients,” 822–23.

51 Podrabinek, *Punitive Medicine*, 13, 123–24.

52 Koryagin, “Autobiographical Notes,” 25.

53 Koryagin, “Autobiographical Notes,” 18. In 1979, Koriagin joined the Working Commission that investigated the abuse of psychiatry. On May 13, 1981, he was accused of anti-Soviet agitation and propaganda according to Article 62 (1) of the Ukrainian Criminal Code and of illegal possession of firearms according to Article 218 (1) of the RSFSR Criminal Code, and sentenced to seven years in prison and five years of exile. For details about Koriagin's trial, see van Voren, *Koryagin*, 57.

became obstacles to personal moral adjustments for some psychiatrists. Their testimonies revealed the mechanisms of cleansing dissent through the use of political psychiatry. Sadly, the majority of doctors were aware of psychiatric abuse; moreover, they were actively engaged, perpetuating the system.⁵⁴

Ordinary Soviet psychiatrists faced a dilemma: by the order of the KGB they had to abuse the esthetic norms of psychiatry and medicine, or, if they disobeyed, be themselves interned into psychiatric clinics and treated as schizophrenics. Views about Soviet psychiatrists' professionalism differ. Van Voren believes that the majority of psychiatrists had no idea what they were doing, and psychiatric diagnoses for dissent seemed plausible to them.⁵⁵ The Ukrainian psychiatrist and human rights activist Gluzman argues that ordinary psychiatrists "saw it all, understood it all, but were afraid to protest."⁵⁶ The Ukrainian psychiatrists Ada Korotenko and Nataliia Alikina posit that Soviet psychiatrists' conformism and cowardice perpetuated psychiatric abuse.⁵⁷ Podrabinek emphasized that psychiatric care, as medicine in general, was built vertically, and "psychiatrists always act[ed] on orders from above."⁵⁸ Yet corruption blossomed, and many psychiatrists were not squeamish about taking bribes from "patients" who wanted them to reduce the dose of drugs or to relax the hospital regimen.⁵⁹ What was worse is that the power and the influence of the core psychiatrists at the Serbsky Institute, such as Morozov, Snezhnevsky, Lunts and others, on their colleagues in regional mental institutions were tremendous. In a sense, for them power became a more substantial asset than money, a pledge for personal enrichment and professional self-aggrandizement. Yet the *saburianyn* and neurologist

54 Robert van Voren, ed., *Koryagin: A Man Struggling for Human Dignity* (Amsterdam: Second World Press, Vladimir Bukovsky Foundation, 1987), 36.

55 Van Voren, *Cold War*, 106. See also his micro-lecture for Volyn Media, accessed January 30, 2014, <http://www.youtube.com/watch?v=zjt8jQ-qies>.

56 Van Voren, *Cold War*, 414.

57 Korotenko and Alikina, *Sovetskaia psikhiatriia*, 77.

58 Podrabinek, *Punitive Medicine*, 38, 51.

59 Podrabinek, *Punitive Medicine*, 15.

V.I. Taitslin insists that deep professionalism, decency, liberalism and faithfulness to science and patients were intrinsic features of the Kharkiv school of psychiatry and Saburova Dacha.⁶⁰ However, accounts by Saburova Dacha's patients and psychiatrists who worked in Kharkiv during the Soviet era do not support this claim. The solid reputation of the Kharkiv school of psychiatry was tainted when the evidence of psychiatric abuse and even sadism exercised by the staff of Saburova Dacha in the 1960s–1980s emerged.

In his book *Madness and Civilization*, Michel Foucault has demonstrated that confinement in psychiatric hospitals had been historically a method of exclusion. He has traced this phenomenon to the late Middle Ages but certainly people's fear of the mad and their attempts to control or to isolate them goes back to pre-Biblical times. "Confinement did seek to suppress madness, to eliminate from the social order a figure which did not find its place within it," he wrote.⁶¹ Moreover, he argued that sadism, not accidentally, "was born of confinement and, within confinement."⁶² In this context, the Soviet regime was neither innovative, nor pioneering. However, at the end of the eighteenth century European psychiatric practices began to change. Doctors became salient figures in the asylums, and because of their concerns for humanity and knowledge, these places were transformed into a "medical space."⁶³ Juridical places of confinement where abuses were institutionalized and considered normal were converted into places of medical realms where observation became a step toward understanding mental illness, and medical knowledge, not emotions, guided human activities.

60 V.I. Taitslin, "O Saburovoi Dache," ["About Saburova Dacha,"] *Novosti Ukrainskoi psikhatrii*, 2003, accessed January 24, 2014, <http://www.psychiatry.ua/books/saburka/papero38.htm>. Those doctors and staff who work at Saburova Dacha call themselves *saburiany* (pl.) or *saburianyn* (sin.).

61 Foucault, *Madness and Civilization*, 115.

62 Foucault, *Madness and Civilization*, 210.

63 Foucault, *Madness and Civilization*, 270. See also Angela Brintlinger, "Russian Attitudes toward Psyche and Psychiatry, 1887–1907," in *Madness and the Mad in Russian Culture*, ed. Angela Brintlinger and Ilya Vinitsky (Toronto: University of Toronto Press, 2007), 175.

But the Soviet situation seems to be reversed: being a part of the international space of humane and progressive forms of new social and medical arrangements for quite some time,⁶⁴ the state experienced a tremendous regress of humanity, and returned to the norms of the Middle Ages. Careful investigations conducted by Western scholars demonstrated the depth of the immoral abyss into which Soviet psychiatry had fallen. These regressive trends and individual animalistic sadism, which were miraculously “transmitted intact” through space and time⁶⁵ and which reigned at the top of the Soviet power structure and in psychiatric clinics, were exacerbated by the triumph of Soviet Communist ideology, utopia and illusions, which elevated violence to the rank of normal state practices and traditions. Soviet psychiatric hospitals became not only institutions of correction and punishment for nonconformity and non-complicity but also theatres of sadism and brutality where they were practiced, perfected and enjoyed by those in power.⁶⁶

However, not all Soviet psychiatrists participated in psychiatric abuse. The first attempt to resist psychiatric terror was undertaken in 1977, when a group of human rights activists formed the Working Commission to Investigate the Use of Psychiatry for Political Purposes. Voloshanovich became its main consulting psychiatrist, and helped the Commission collect and evaluate cases of psychiatric abuse. Importantly, the Working Commission contributed to our understanding of the “nature and extent of the interlocking psychiatric, legal and police systems, as applied to victims of ‘punitive medicine.’”⁶⁷ Moreover, their conclusions help identify the motivations for why the state resorted to political psychiatry. Despite the fact that a number of punitive options were available, including imprisonment and exile, political psychiatry became the simplest way for

64 Brintlinger, “Russian Attitudes,” 177.

65 Foucault, *Madness and Civilization*, 209.

66 The Soviet state’s attempts at concealing sadistic practices are being reinforced today in contemporary Russia, which advances the traditions of political psychiatry and its practices.

67 Bloch and Reddaway, *Soviet Psychiatric Abuse*, 81.

the state to handle Soviet dissidents. Psychiatric “treatment” of oppositionists “took less effort and was less time-consuming and more economical for the authorities.”⁶⁸ Conveniently, the KGB transferred a great share of responsibility to the shoulders of psychiatrists who not only guarded the oppositionists, physically locking them in psychiatric wards, but also controlled them mentally through drug abuse and violence. After the collapse of the Soviet Union, the Soviet psychiatrist Iakov Landau who worked in the Serbsky Institute publicized his point of view about abuses of psychiatry: “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.”⁶⁹ Understandably, being aware of the control mechanisms that could be easily redirected and aimed at them, the majority of Soviet psychiatrists failed to resist manipulation by the authorities. Those who were members of the Moscow Working Commission functioned for four years but were crushed by the KGB. By 1981, all six members were imprisoned but Voloshanovich.⁷⁰

Koriagin, who worked in Kharkiv, continued Voloshanovich’s work and became one of the most vocal advocates of Soviet psychiatry’s purification. Until his arrest, he gathered information for the Working Commission about psychiatric abuse and those political activists who were identified as schizophrenics.⁷¹ Not surprisingly, Koriagin was aware of psychiatric abuses at Saburova Dacha where a great number of dissidents were interned in the 1950s–1980s.

By the mid-seventies, Saburova Dacha, a territorial behemoth that occupied 30 hectares, had 30 various departments and could accommodate 3,000 patients. However, all departments were incredibly overcrowded.

68 Van Voren, *Koryagin*, 26.

69 Quoted in van Voren, *Cold War*, 99.

70 Anatoliy Koryagin, “Compulsion in Psychiatry: Blessing or Curse?” *Psychiatric Bulletin* 14 (1990): 396; see also van Voren, *Cold War*, 170. The authorities let Voloshanovich emigrate because he drew too much attention to political psychiatry in the West. One member, Irina Kaplun, died in a car accident under mysterious circumstances days before she was to immigrate to Israel.

71 Van Voren, *Koryagin*, 35.

Each patient had approximately 1.8–2.0 square meters instead of 7.0 square meters per person, identified by the authorities as a sanitary norm. It was common for two people with a psychiatrically chronic pathology to share a bed; many slept on the floor. Epidemic infections erupted systematically, and the lethality among the patients was tremendous. The kitchen facilities that provided food for the hospitalized worked intermittently because the sanitary inspection constantly sealed it for violations of sanitary norms. The infrastructure of all buildings was incredibly poor and chronic crises, such as leaking pipes and sewage system failure, disrupted the normal functioning of the clinic.⁷²

According to Ivan Sosin, who was the Deputy Chief and manager of the clinic from 1976 to 1978, at that time psychiatry was one of the most prestigious clinical disciplines, and to be hired for a position at Saburova Dacha was deemed extremely difficult. Vacancies were a rare opportunity. Saburova Dacha's personnel, including psychiatrists, numbered 2,500 people divided into clans. The Soviet system of privileges and the supervision of the *obkom*, *gorkom* and the KGB contributed to inner clashes.⁷³

Orders from the KGB reached the clinic directly, or through the chief oblast psychiatrist who usually made a phone call and clarified the details of the operation. "Patients" dangerous to the regime were supposed to be kept in the clinic for an indeterminate duration; psychiatrists who disobeyed the authorities were supposed to be condemned at a party meeting as anti-Soviet propagandists. For instance, before Koriagin's arrest, on February 5, 1981 the chief doctor at the Kharkiv Psycho-Neurological Clinic (a part of Saburova Dacha) was ordered by the Kharkiv Regional Procuracy to analyse Koriagin's activities as a member of the

72 Sosin, "Dva goda." A similar situation existed in many other Soviet psychiatric clinics. See van Voren, *Cold War*, 120.

73 Sosin, "Dva goda." In 1973, Sosin defended his master's degree (*kandidat nauk*) on schizophrenia. Interestingly, in 2007 at the International Congress on Schizophrenia Research (ICOSR) (March 28 – April 1), the majority of psychiatrists voted to ban this pseudo-diagnosis from the American psychiatric topology. In 1988, Sosin defended his doctoral thesis in narcology. In the Soviet era, he received numerous rewards, medals and honours from the government.

Working Commission at a collective meeting. The Procuracy provided a working definition that would determine his activities as “anti-Soviet” and “criminal.” Koriagin’s fate was sealed: the collective proceeded according to the prescribed scenario, and the verdict of the meeting mirrored the authorities’ injunctions.⁷⁴

The majority of psychiatrists of Saburova Dacha were actively involved in various illegal activities. They simultaneously murdered and saved people, although not for altruistic or humanitarian reasons. As we have seen, the protracted murder of the minds of mentally healthy and vigorous dissidents by drugs prescribed by psychiatrists is notorious and well-documented. Yet there was another wide-spread practice among psychiatrists which still survives, as Peter Pomerantsev suggested. Many young men did not and still do not mind spending a month in a psychiatric clinic to receive a medical certificate that would help them avoid military service. “The mad are not trusted with guns,” and the youth preferred and prefer to be “mad” rather than dead. Historically, political psychiatry and long periods of deception by both psychiatrists and their patients made them a part of the system, *sistema*, in which illegal (political) arrangements and agreements between the parties transformed both into semi-legal individuals and transgressors. To be saved or to be wealthy, one should cheat *sistema* which immediately co-opts or entraps the cheater, firmly and permanently.⁷⁵ The mechanism of such entrapment will be analysed further through the individual history of the Ukrainian dissident Victor Borovsky.

Ukrainian Nationalists as Mentally Ill

Scholarly literature and archival data that have been analysed over the last decade suggest that political psychiatry and other sorts of repression targeted very specific groups of dissenters. Nationalists occupied a special place among those who ran a high risk of finding themselves in psychiatric wards. Thomas A. Oleszczuk aptly noted that this tendency

74 Van Voren, *Koryagin*, 42.

75 Petet Pomerantsev, “Diary,” *London Review of Books*, December 5, 2013, 42. See also van Voren, *Cold War*, 319.

was “rooted in the implicit challenge of nationalism to the integrity of the USSR” and nationalists’ social and political behaviour that was perceived as threatening to the state.⁷⁶

In the atmosphere of totalizing russification in Ukraine, those who spoke Ukrainian were an immediate target for the authorities. Many were accused of anti-Soviet propaganda and sent to camps. The indictment was usually based on Paragraph 62, point 1 of the Ukrainian SSR Criminal Code, the charge of antagonism to Soviet authorities, aimed at destabilizing the Soviet regime and “fomenting nationalistic sentiments.”⁷⁷ Gluzman noted that in the early seventies when he served his prison sentence in the camps, the majority of prisoners were Ukrainians.⁷⁸ He “ha[d] not met a single Belorussian, Uzbek, Tadzhik, or Kirgiz, despite the fact that the KGB existed in all Soviet republics. Here in Ukraine there is a ferment of resistance,” he posited.⁷⁹ The most recalcitrant were sent to psychiatric clinics. As a psychiatrist and as a person who closely communicated with dissidents who went through psychiatric clinics, Gluzman is also convinced that political psychiatry was more terrifying than prison.⁸⁰

Ukrainian patriots who were “diagnosed” as mentally ill constituted a majority among those who were interned in various psychiatric clinics

76 Oleszczuk, *Political Justice in the USSR*, 95, 102. Some scholars argued that Lithuanian and Ukrainian nationalists were usually sentenced to the longest terms possible under the Criminal Code. See Ludmilla Thorne, “Three Years of Repression in the Soviet Union: A Statistical Study,” *Freedom Appeals* 9 (March–April 1981): 30.

77 See a discussion about routine charges against the Ukrainians in the memoirs of the psychiatric “patient” of many years Josyp Terelya (with Michael H. Brown), *Witness to Apparitions and Persecution in the USSR: An Autobiography* (Milford, Ohio: Faith Publishing Company, 1991), 193–94.

78 In 1972, Gluzman was sentenced to seven years in camps and three years in exile for anti-Soviet agitation and propaganda.

79 See the interview with Semen Gluzman “Semen Gluzman: Mne stydno, chto ia grazhdanin Ukrainy,” [“I Am Ashamed of Being a Ukrainian Citizen,”] accessed April 23, 2014, <http://glavred.info/archive/2012/04/11/084510-1.html>.

80 See the interview with Gluzman and van Voren by Oleksii Bukhalo (RTB), accessed January 30, 2014, <http://www.youtube.com/watch?v=izo4k1hWNgI>; see also Semen Gluzman’s “Posobie po psikhiiatrii dlia inakomysliashchikh,” [“Manual of Psychiatry for Dissidents,”] written together with Vladimir Bukovsky, in Korotenko and Alikina, *Sovetskaia psikhiiatriia*, 197–218.

all over Ukraine. They were inspired by people, such as the Ukrainian poets Ivan Sokulsky and Mykola Kulchynsky, who were concerned not with the fact that “not everyone spoke Ukrainian” but rather that “no one spoke Ukrainian” in their home city of Dnipropetrovsk because of totalizing russification.⁸¹ They dreamed of a free Ukraine, and supported the Ukrainian students Lidiia Piven (Huk), Viliamin Mykhalchuk and Iaroslav Hevrych who became known for defending the right of Ukrainians to use their native language.⁸² Yet some did not clearly understand what kind of Ukraine they were fighting for. Similar to the Ukrainian writer Mykola Khvylovy, they felt they had to get “away from Moscow,” which was abusive toward their language and culture.⁸³ Having found themselves in an abusive environment where they were not only proclaimed to be psychiatrically ill but where they were routinely tortured physically and mentally, they were confused and began to doubt their identity. The orderlies influenced by Soviet propaganda were especially cruel to “nationalists.” They took a special pleasure in humiliating and beating them until they were unconscious. Doctors knew about this but turned a blind eye toward this situation. In his memoirs, Vladimir Bukovsky stated that he knew a few instances when orderlies in hospitals chose political prisoners who were Ukrainians as their victims: they beat them severely, and, as a result, several people died from complications.⁸⁴

The Scottish psychiatrist Ronald David Laing discussed in detail the vulnerability of psychiatric patients whose insecurity was constantly challenged by any new relationships, even harmless and pleasant ones, which often triggered psychoses in them. Their identity was jeopardized and often distorted.⁸⁵ One can imagine what mentally healthy people

81 Mykola Plakhotniuk, *Kolovorot: Statti, spohady, dokumenty* [Whirlpool: Articles, Memoirs, Documents] (Kyiv: Smoloskyp, 2012), 145.

82 Plakhotniuk, *Kolovorot*, 228–29.

83 Korotenko and Alikina, *Sovetskaia psikhiatriia*, 31, 111.

84 Bukovsky has been quoted in Podrabinek, *Punitive Medicine*, 31.

85 R.D. Laing, *The Divided Self: An Existential Study of Sanity and Madness* (New York: Penguin Books, 1990), 43–45. Laing suggested analysing people’s psychological equilibrium, and social and personal circumstances, in which they developed psychoses. Laing

experienced, being routinely tortured in psychiatric wards by abusive orderlies, psychiatrists and aggressive mental patients. Their identity was threatened to the point of inner mental crisis and even insanity.

The pretext for internment in each individual case differed. For instance, an unidentified person from Ivano-Frankivsk (a patient of Saburova Dacha) was trying to change the title of the Kharkiv metro station from “Soviet Ukraine” to “Free Ukraine;”⁸⁶ some individuals were interned in various psychiatric clinics because they were protesting against Soviet cultural policies in Ukraine near Taras Shevchenko’s monument in Kyiv;⁸⁷ others were members of civil organizations fighting against Ukraine’s russification.⁸⁸

The most persuasive evidence of punitive medicine in the cases of “Ukrainian nationalists” was the fact that they began to receive “treatment” for mental illness before the conclusion of the forensic examination commission, as happened in Victor Borovsky’s case.⁸⁹ Borovsky who was born in the small Ukrainian town Lozova near Kharkiv was detained for the first time in a psychiatric clinic in 1975. Growing up in a Ukrainian-speaking town, he could not speak Russian in college. He used Ukrainian, and everyone teased him about it, Borovsky recalled.⁹⁰ He mentioned Aleksandr Solzhenitsyn’s name during a Party History seminar which cost him his freedom. He was expelled from the Sloviansk Pedagogical Institute, arrested and spent five months in psychiatric clinics, first being confined in the Sloviansk psychiatric hospital (Donetsk oblast), and later in Saburova Dacha (Kharkiv). Like other “patients,” Borovsky had no idea

represented the anti-psychiatry movement, although he never subscribed to the term or its premise.

86 Borovsky, *Potsilunok satany*, 152.

87 For details about the fate of Anatoly Lupynis who spent 12 years in camps and five years in psychiatric clinics, see Rafalsky, 234–35, and Zinkevych, 387–88.

88 Oles Shevchenko, ed., *Ukrainska Helsinska Spilka u spohadakh i dokumentakh [The Ukrainian Helsinki Union in Memoirs and Documents]* (Kyiv: Iaroslaviv Val, 2012).

89 See also a discussion about this particular practice in Podrabinek, *Punitive Medicine*, 126. For Borovsky’s short biography, see Zinkevych, 85.

90 *Post-Gazette*, December 7, 1981, 7. See also *Observer-Reporter*, Washington, PA, December 8, 1981, A-5.

about the duration of his hospitalization, or the methods of “treatment.” He recalled that a nurse who greeted him upon his arrival in the clinic stated after briefly studying his file: “Don’t worry, we’ll fix your way of thinking; medicine is capable of miracles.”⁹¹ Borovsky began to receive Sulphazin during the very first week in the hospital for being recalcitrant. The observational period that usually precedes a forensic examination by a group of specialists and a diagnostic conclusion were skipped, and the insulin shock therapy and neuroleptics were administered to Borovsky to validate his alleged insanity before his mother came to visit him.

In the KGB’s view, he behaved insanely, discussing Stalinism and Solzhenitsyn’s works in class. His attempt to visit Viktor Nekrasov in Kyiv was evaluated as anti-Soviet activity and as a psychiatric pathology.⁹² But most importantly, as the head of the psychiatric ward Anatoly Bezuhly stated, Borovsky’s insanity manifested itself in using a “dialect” (meaning the Ukrainian language) instead of Russian.⁹³

In the drama that unravelled around a 19 year-old man, one detail seems particularly interesting. The new tactics of the KGB were more subtle than during the Stalin era. The secret agency acted behind the scenes, using intermediaries to persecute Borovsky. The rector of the university, professors, the party and Komsomol functionaries, and doctors were those individuals who directly came into contact with Borovsky, and ultimately they were held accountable for anything they said or did. The leak of information about Borovsky abroad or anything that might have run counter to the KGB’s scenario was an ultimate responsibility of these people, not of the KGB. Borovsky understood this:

The times when the blood of honest people could not dry on the hands of the NKVD and when chekists themselves beat, choked, shot and tortured, receded into

91 Borovsky, *Potsilunok satany*, 30.

92 For his human rights activities and literary work, the writer Viktor Nekrasov (he lived in Kyiv and wrote in Russian) was cast as *antisovetchik* (an anti-Soviet element) by the Soviet authorities. In May 1974, Nekrasov was expelled from the party, and in 1974 he was allowed to emigrate. For more details about Nekrasov, see Zinkevych, 458–59.

93 Borovsky, *Potsilunok satany*, 69.

the past. Now the KGB estranges itself from this, and gives orders to others without any deep concerns about how it may appear.⁹⁴

The chekists revealed themselves only before his release from the Sloviansk hospital to make direct threats and give orders for him to make regular appearances at KGB headquarters for “conversations.” Later, having published his memoirs in the West, Borovsky described in detail the sadistic nature of these “conversations.”

It seems that sadistic inclinations were also an important criterion in the selection of orderlies for psychiatric clinics. According to many patients’ accounts, they humiliated the “patients,” beating them, exploiting them as slaves and forcing them to dance or sing.⁹⁵ There were also a great number of sadists among psychiatrists. Arkady Zhuravsky, a psychiatrist at the Sloviansk psychiatric clinic, personally administered injections of turpentine into the periosteal part of the bone to inflict an excruciating pain that escalated every hour.⁹⁶ The injections provoked neurological symptoms and caused spasms of the airways. The high dose could be lethal, causing renal and pulmonary failure. Zhuravsky’s routine question was: “Do you like Soviet power better after the injection?”⁹⁷ Occasional deaths provoked by the overdose of turpentine did not disturb the staff or the executioner who perceived them as part of the norm.⁹⁸

Again, secrecy and confidentiality played an important role in political psychiatry. Conveniently for the Soviet regime, patients’ files, as well as reports of forensic psychiatric examinations, have always been considered confidential, because secrecy and privacy are those necessary elements that help protect psychiatric patients from publicity about their mental condition, and prevent their embarrassment and trauma. Feelings of embarrassment, humiliation or guilt contribute little to therapy

94 Borovsky, *Potsilunok satany*, 24.

95 Borovsky, *Potsilunok satany*, 38.

96 Borovsky, *Potsilunok satany*, 52. This was normally the nurses’ responsibility but Zhuravsky preferred to do it himself.

97 Borovsky, *Potsilunok satany*, 53, 64.

98 Borovsky, *Potsilunok satany*, 53–54.

and to the efforts of psychiatrists to stabilize the mental state of their patients.⁹⁹ In the Soviet Union, only a limited number of people had access to the files of “Ukrainian nationalists,” “patients” of psychiatric clinics. Moreover, they are still locked in psychiatric hospitals’ archives under the pretext of preserving patients’ privacy.

However, Borovsky managed to secretly examine his 200-page file because of the kindness of a nurse who sympathized with him. According to his testimony, his file contained no evidence of chronic abuses and the actual “therapy” he received in the Sloviansk psychiatric hospital. In other words, Zhuravsky falsified information about Borovsky’s treatment, and never put his prescriptions in writing. Borovsky was routinely tortured by Sulphazin injections, but his everyday prescription reports demonstrated that he was injected with Sulphazin only once, and that he was systematically given vitamins and other useful supplements.¹⁰⁰

After three months of torture, Borovsky was released from the Sloviansk psychiatric clinic. The KGB forced him to sign a document in which he promised to work for the benefit of the Motherland and to refrain from using Ukrainian in public offices.¹⁰¹ The chekists quite cynically advised him that he should forget everything that he saw or heard in the clinic. Borovsky was instructed that if someone questioned his long absence in Lozova, he was supposed to tell them that he was resting at a resort.¹⁰²

After his release, Borovsky unsuccessfully tried to enter the Odesa Spiritual Seminary. The KGB also used its power to facilitate Borovsky’s permanent unemployment.¹⁰³ Disillusioned, he sent a telegram to the chief of the KGB of the USSR Iury Andropov. It read:

The violation of human rights by the KGB you chair is a shameful page in the history of our state which was built on the bones of honest people. The violation of

99 Thomas S. Szasz, *The Myth of Mental Illness: Foundations of a Theory of Personal Conduct* (New York: Happer & Row, Publishers, 1974), 52.

100 Borovsky, *Potsilunok satany*, 68.

101 Borovsky, *Potsilunok satany*, 73.

102 Borovsky, *Potsilunok satany*, 70.

103 Zinkevych, *Rukh oporu v Ukraini*, 85.

human rights, the trampling of human dignity and integrity, and an attempt to destroy anything national, transforming it into a common Soviet is a Nazi-like crime. I demand the end of the repression against me for my free thinking, and to restore me at the university so that I might receive a higher education guaranteed by the Constitution.¹⁰⁴

These sorts of letters that Borovsky wrote to various organizations and high party organs and his continuous contacts with Ukrainian dissidents could not be tolerated by the KGB for very long. In spring 1977, he was detained in Saburova Dacha.

The condescending explanations of the psychiatrist Sosin, at that time the Deputy Chief of Saburova Dacha, given to Borovsky's mother shed light on his perception of mental illness:

Psychiatry is a very complex thing. As an uneducated woman, you are unable to comprehend all the subtleties of this complex science. We treat people's acts that cannot be characterized as normal human behavior as a mental illness. For instance, your son's acquaintance with Rudenko¹⁰⁵ is an illness. Your son wanted to meet him without any reason. Millions of citizens live and have no desire to meet Rudenko and people like Rudenko. Yet your son wanted to meet him – this is an unhealthy phenomenon. You are a normal person, and you did not want to meet Rudenko, but your son did. Why did he? There is no answer to this question. Thus, psychiatry deems unexplainable behavior as abnormal, and accordingly those who exhibit this behavior – as psychiatrically ill people.¹⁰⁶

Was he sincere in his beliefs, or was he co-opted by the KGB to an extent that fear obscured his mind and muddled his professional principles and ethics that were nurtured in him when he was a student of a medical university? According to witnesses' accounts, Sosin received his orders directly from KGB officials or through the chief psychiatrist of Kharkiv

104 Borovsky, *Potsilunok satany*, 74.

105 Mykola Rudenko (1920–2004) was a Ukrainian writer, human rights activist and the founder of the Ukrainian Helsinki Group (UHH). In February 1977, he was arrested for anti-Soviet propaganda and agitation and sentenced to 7 years in camps and 3 years of exile. In December 1987 he was released and emigrated to Germany. Later, like Borovsky, he worked for radio "Svoboda" in New York (1988–1990). Rudenko returned to Ukraine in 1990. For details about Rudenko, see Zinkevych, 543–46.

106 Borovsky, *Potsilunok satany*, 146–47.

oblast G.A. Nikitin who decided the fates of the Ukrainian dissidents.¹⁰⁷ After the collapse of the Soviet Union, Sosin himself stated that his October 1976 appointment as the Deputy Chief of the Saburova Dacha was facilitated by Nikitin, obviously for his diligent service.¹⁰⁸ Sosin's attempt to silence Borovsky's mother reveals his full awareness of on-going psychiatric abuse that became so normal for him:

Today your son might be healthy, but tomorrow he might be found ill. Psychiatry is such a thing that behavior might be interpreted in a variety of ways. Thus, your son can be diagnosed as mentally ill at any moment, and no one will help him ... you simply have to behave yourself and be quiet and, perhaps, your son will be released soon.¹⁰⁹

Borovsky's mother's threat that she would send a telegram of complaint to Brezhnev, Andropov and the Minister of Health Petrovsky had little effect on Sosin. "Who needs them and who reads them?" he responded.¹¹⁰ The intellectual and moral divide in Sosin obviously occurred under pressure from the authorities: political psychiatry became a norm for him, and as many psychiatrists, he ceased to conceal its power before the powerless relatives of his victims.

Under pressure from the hospital's administration, Borovsky's doctor Liubov Hrytsenko demanded his recantation, as did Mykola Shevchenko who was the party chief (*partorh*) of Saburova Dacha and the head of the second psychiatric department where Borovsky was placed. Shevchenko insisted that the first sign of the restoration of Borovsky's mental health would be "his condemnation of his own behavior and an honest account about all his friends."¹¹¹ Shevchenko also emphasized that Borovsky should perceive this as friendly advice about the conditions for his release. It seems appropriate to mention here that in 1996, Sosin characterized Shevchenko as a most energetic psychiatrist and organizer, a patriot of

107 Borovsky, *Potsilunok satany*, 154.

108 Sosin, "Dva goda."

109 Borovsky, *Potsilunok satany*, 155.

110 Ibid.

111 Borovsky, *Potsilunok satany*, 149.



Victor Borovsky is talking to Key Clubbers.

Courtesy of the Indiana University-Purdue University Indianapolis University Library Special Collections and Archives. Published in *Kiwanis Magazine*, November–December 1979, 14.

Saburova Dacha, and a decent human being. Moreover, Sosin recommended the authorities promote Shevchenko, and in 1978 Shevchenko became the chief of Saburova Dacha serving as such until 1988.¹¹² It would be very tempting to characterize this recommendation as not only a professional collegiality but also as a common bond of guilt, the guilt of the criminal past that linked these two individuals together forever.

Yet the Saburova Dacha employed not only doctors, such as Sosin and Shevchenko, but also those few who had the courage to say, at least informally, that Borovsky was absolutely healthy. Liubov Hrytsenko was

112 Sosin, “Dva goda.”

rather open with Borovsky's friend Henrikh Altunian¹¹³ and, according to Altunian, she even prepared Borovsky for his forensic examination, advising him to answer doctors' provocative questions in a certain way to avoid being diagnosed with schizophrenia. Yet, the KGB quickly silenced Hrytsenko, and even forced her to provide a false deposition against Altunian that helped later sentence him to a prison term.¹¹⁴

Constant physical and mental abuse, amplified by the abrogation of basic constitutional and human rights, dehumanized some and made others more resilient. For many, recanting was morally impossible. So it was for Borovsky. The violence and brutality he and other people in the Sloviansk psychiatric clinic experienced merely strengthened his principles. Repentance for him was impossible on an almost biological level.¹¹⁵ Zhuravsky's words "the treatment is designed so that you see the society the way we want you to see it, not the way you see it in your imagination" made Borovsky resilient: he never admitted his guilt despite torture and humiliation.¹¹⁶

As mentioned earlier, the torture in psychiatric clinics was prolonged and sophisticated. Political prisoners experienced beatings, rapes, heavy doses of neuroleptics, and were even forced to swallow live frogs and foreign objects.¹¹⁷ Surveillance and censorship in psychiatric clinics was no less torturous and painful. "Patients" were allowed to write letters only to their relatives at the discretion of their psychiatrists or nurses: the censors' task was to identify anti-Soviet statements that would ultimately confirm a psychiatric pathology that had been previously "diagnosed." The orderlies especially enjoyed standing behind "patients" and reading while they were writing their letters. This was perceived by many as a

113 Henrikh Altunian (1933–2005) was a human rights activist from Kharkiv who was one of the founders of the Initiative Group on Human Rights in the USSR. He was a political prisoner in 1969–1972 and 1981–1987. For more biographical details, see Zinkevych, 46–47.

114 Henrikh Altunian, *Tsena svobody: Vospominaniia dissidenta* [*The Price of Freedom: Memoirs of a Dissident*] (Kharkiv: Folio, 2000), 132–34.

115 Borovsky, *Potsilunok satany*, 64.

116 Borovsky, *Potsilunok satany*, 66–67.

117 For more details, see Terelya, *Witness to Apparitions*, 152.

sophisticated torture that suppressed and ruined them morally and intellectually.¹¹⁸ Borovsky was not permitted to write letters.

Those “patients” who wrote their letters in Ukrainian and used the Ukrainian language during forensic psychiatric examinations at the Serbsky Institute were diagnosed with an “acute psychosis provoked by nationalism.”¹¹⁹ The psychiatrist of the infamous Dnipropetrovsk special psychiatric clinic Ella Kamenetska, when hearing Mykola Plakhotniuk’s Ukrainian word *sil* (salt), asked the orderly: “Slavik, take the patient for your training. Teach him to speak Russian. We use here “sol!” Slavik responded: “No problem. I will teach him.”¹²⁰ To be sure, psychiatric abuse and beatings were designed to excoriate “Ukrainian nationalism” and to have corporal effects, prolonging pain and suffering to infinity, and punishing the recalcitrant every day by a “thousand deaths” they experienced in horror.¹²¹ It was designed to leave a permanent scar in the souls of oppositionists who were supposed to live for the rest of their lives with the memory of horror and fear which would substantiate psychiatrists’ claims about their insanity: the horror would mark them as “sick” and as the “others,” which would doom them for isolation even when they would be “free” – outside the fence of a psychiatric clinic.

Similarly to Borovsky, many Ukrainian patriots resisted Soviet anti-Ukrainian policies and terror. Two waves of repression in the late sixties and early seventies that were designed to curtail the nationalist movement in Ukraine intensified popular resistance to terror, especially among the Ukrainian intelligentsia. At the peak of psychiatric abuses, in 1976 in Kyiv the Ukrainian intelligentsia organized a human rights organization – the Ukrainian Helsinki Group (*Ukrainska Helsinska Hrupa*, UHH) to promote compliance with the Helsinki Accords, a group that maintained

118 Plakhotniuk, *Kolovorot*, 168.

119 Plakhotniuk, *Kolovorot*, 169. Mykola Plakhotniuk is a Ukrainian doctor and a victim of punitive psychiatry. For his biography, see Zinkevych, *Rukh oporu v Ukraini*, 499–500.

120 Plakhotniuk, *Kolovorot*, 170.

121 Michel Foucault, *Discipline and Punish: The Birth of the Prison* (New York: Vintage Books, 1995), 33–34.

close links with similar groups in Moscow, Georgia, Armenia and Lithuania.¹²² The UHH was conceived to defend human rights and to fight for the national survival of Ukraine. Today it is a documented fact that repressions that specifically targeted the members of this organization (the earliest arrests began in early 1977 and the latest occurred in 1984) did not break them. Over eight years, only one person repented out of the forty-one individuals who were repressed. Thirty-nine members experienced the entire arsenal of torture practiced by the regime, in camps and psychiatric clinics. Mykhailo Melnyk committed suicide before he was arrested. As a Jew, Volodymyr Malynkovych was allowed to emigrate. Valery Marchenko, Oleksa Tykhy, Iurko Lytvyn and Vasyly Stus were tortured to death in the camps.¹²³ Those who survived renewed the organization in 1988 under the title the Ukrainian Helsinki Union (*Ukrainska Helsinska Spilka*), and played a crucial role in establishing an independent Ukraine.

Because of the efforts of former political prisoners to renew the Ukrainian liberation movement, in March 1987, in his report to Volodymyr Sherbytsky, the head of the KGB in Ukraine Stepan Mukha (1982–1987) suggested that the famous representatives of the Ukrainian intelligentsia, such as Oles Honchar, Borys Oliinyk and others should be incited to publish articles which would condemn anti-Soviet activities of Ukrainian nationalists who returned from the camps.¹²⁴ Mukha insisted that this approach would once again demonstrate the humanity of the Soviet regime that allowed criminals charged with anti-Soviet agitation and propaganda to integrate into the social fabric of Soviet life. As in the late twenties and the early thirties, having received orders from on high, periodicals were sprinkled with scathing articles that condemned Ukrainian nationalists.

122 Farmer, *Ukrainian Nationalism*, 165–66.

123 Levko Lukianenko, “Do istorii Ukrainiskoi Helsinskoï Spilky,” [“A History of the Ukrainian Helsinki Union,”] 12. According to the KGB report to the Central Committee of the Communist Party in Ukraine and Volodymyr Shcherbytsky, 48 UHH members were sentenced to various terms in prison. See the photocopy of the document in Shevchenko, 441. For more details about Melnyk, Malynkovych, Marchenko, Tykhy, Lytvyn and Stus, see Zinkevych, *Rukh oporu v Ukraini*, 372–74, 399–400, 412–14, 426, 648–50, 630–35.

124 See the photocopy of the document in Shevchenko, *Ukrainska Helsinska Spilka*, 445.

The terms, such as “accomplices,” “nationalists” and “extremists” that were applied by the chekists to Viacheslav Chornovil, Levko Lukianenko, Pavlo Skochok, Ievhen Sverstiuk, Ivan Svitlychny, and Bohdan and Mykhailo Horyn, travelled from the KGB’s reports directly to newspaper articles.¹²⁵

Gorbachev’s perestroika had little effect on the reconceptualization of the KGB’s terms for Ukrainian nationalists. In his 1988 reports to the Central Committee, Mykola Holushko who replaced Mukha as the head of the KGB in Ukraine (1987–1991) continued to identify Rafalsky and other Ukrainian patriots as mentally sick individuals.¹²⁶ The “nationalistic manifestations,” such as the signs on buildings and fences “Live long free Ukraine” and the drawings of the *Tryzub* (trident, the state coat of arms of Ukraine that features the Ukrainian flag’s colours, blue and yellow) that began to appear more and more frequently in various Ukrainian cities and towns made the KGB nervous. As a result, their operational work and surveillance intensified, and they sought more effective methods for neutralization of nationalists.¹²⁷ KGB reports to the highest party organs issued in 1988–1989 are quite revealing, and demonstrate serious concerns of the secret police about the radicalization of “nationalistic groups.” They characterized the Ukrainian Helsinki Union an “anti-socialist” organization and its members as individuals who led an anti-social lifestyle, participating in seminars about democracy and humanism and spreading negative information and “rumours” about the Chernobyl tragedy. Moreover, they dared, it was said, to belittle regional party secretaries, and even the founder of the Communist party and the Soviet state. Further, the report casually states that consequently they were forcibly interned in regional psychiatric hospitals for forensic psychiatric examination, as if this sort of human behaviour was a certain sign of mental

125 For more details on these Ukrainian intellectuals, see Zinkevych, *Rukh oporu v Ukraini*, 158–62, 383–87, 559–62, 566–70, 599–600, 706–10.

126 See the photocopy of the document in Shevchenko, *Ukrainska Helsinska Spilka*, 517.

127 See the photocopy of the August 1988 KGB report signed by the Deputy Head of the KGB in Ukraine V. Yevtushenko in Shevchenko, 542. See also the December 1, 1988 KGB report signed by Holushko about the rejuvenation of Ukrainian national symbols advocated by the Ukrainian intelligentsia in Shevchenko, 593–95.

illness.¹²⁸ The KGB's reports in the capital were mirrored by similar reports written in Kharkiv. In 1989, the head of the KGB Administration in the Kharkiv oblast N.G. Gibadulov routinely referred to the activities of the Ukrainian Helsinki Union as manifestations of Ukrainian bourgeois nationalism, a rhetorical echo from the Stalin era.¹²⁹

Borovsky was no longer in Ukraine during perestroika. In late May 1977, after five months of "treatment," the forensic commission at the Kharkiv psychiatric hospital wrote a verdict: mentally healthy. His case resonated not only among Ukrainian dissidents but also internationally. However, even after the verdict, on Nikitin's order, Borovsky was kept in Saburova Dacha for another week.¹³⁰ The KGB told Borovsky he could cease communication with Ukrainian dissidents or be interned in a psychiatric clinic for the rest of his life, or he would be exiled from the Soviet Union. Borovsky was released from Saburova Dacha on the condition that he would immigrate to Israel, although he was not Jewish.¹³¹ He was only 21 years old when he was exiled from the USSR. He resided in New York, and worked for the radio station "Svoboda" (PC, Radio Liberty) which was routinely "jammed" by the Soviets to prevent Soviet citizens from listening to "foreign propaganda."¹³² But he remained actively involved in the human

128 See the May 10, 1989 KGB report to the Secretary of the Kherson *obkom* of the Communist Party of Ukraine about the activities of the member of the Ukrainian Helsinki Union Hura in Shevchenko, 613–14. The report was signed by the Head of the KGB Administration in Kherson I.V. Taranenko.

129 See, for instance, the October 19, 1989 KGB report to the first secretary of the Kharkiv *obkom* V.P. Mysnychenko signed by Gibadulov in Shevchenko, 703–07. The Kharkiv KGB was especially concerned with the "anti-Soviet nationalist activity" of the Ukrainian poet Stepan Sapeliak. In June–October 1989, the KGB organized and orchestrated an attack against Sapeliak in the press.

130 Amnesty International Publications, *A Chronicle of Current Events: Journal of the Human Rights Movement in the USSR*, 46 (1977), (New York: Khronika Press, 1978): 85.

131 *The Ukrainian Weekly* 68, March 23, 1980, 5.

132 Altunian, *Tsena svobody*, 129, 135. In the mid-seventies, besides Borovsky, many Ukrainian dissidents worked for Radio Liberty, such as Leonid Plushch, Nadia Svitlychna, Moisei Fishbein and others. Using pseudonyms, the Ukrainians Emma Avdievska, Ihor Kachurovsky, Ihor Hordievsky, Bohdan Osadchuk, Ivan Maistrenko and Borys Levytsky participated in various activities initiated by Radio Liberty.

rights movement. He protested against the invasion of Soviet troops in Afghanistan, and demanded freedom for political prisoners in the Soviet Union. On November 24, 1984, together with Mykola Movchan, Borovsky wrote an open letter to Raisa Gorbacheva in defense of political prisoners and victims of political psychiatry.¹³³ Borovsky was among many who realized at a very early stage of his resistance to Soviet repressions and terror that the more coercive the system became, the more courageously people behaved. Opposition in Ukraine grew in numbers, and silencing the dissent became a daunting task and another delusory utopia of the state.¹³⁴

Conclusion

Rethinking psychiatric terror in the Soviet Union seems to be a necessary exercise in light of the recent trends in Russia – the remilitarization of political culture and power, and “a return to Soviet psychiatric persecution of dissidents” and those who criticize Putin and his regime.¹³⁵ One of the Russian protesters in the so-called “Bolotnoe delo” Mikhail Kosenko was condemned to forced psychiatric treatment and became another victim of punitive psychiatry, a practice that has been rejuvenated under Putin.¹³⁶ Claims of Kosenko’s mental incompetence and government silence

133 *The Ukrainian Weekly* 47, November 24, 1985, 1, 11. Borovsky and Movchan asked Raisa Gorbacheva to intervene with her husband Mikhail Gorbachev on behalf of two Ukrainians, the political prisoner Petro Ruban and the English teacher Anna Mykhailenko from Odesa whose guilt was that she used the Ukrainian language, communicating with her students, and “suggested to them that they read more Ukrainian books than Russian.” The KGB fabricated criminal cases against both. Mykhailenko, on false charges, was sentenced to camps but later was transferred to the Serbsky Institute of Forensic Psychiatry.

134 Borovsky, *Potsilunok satany*, 76. During the last year of his life he suffered from cancer. He passed away on May 11, 2009 in New York.

135 “Psych Ward Verdict for Russian Protester ‘A Return to Soviet Psychiatric Persecution of Dissidents,’” *Agence France-Presse*, October 10, 2013, accessed March 26, 2014, <http://www.rawstory.com/rs/2013/10/10/psych-ward-verdict-for-russian-protester-a-return-to-soviet-psychiatric-persecution-of-dissidents/>.

136 The NGO Amnesty International that is focused on human rights attributed the status of prisoners of conscience to several peaceful protesters, including Mikhail Kosenko, who participated in the May 6, 2012 peaceful protest demonstration “The March of the Millions” against Putin’s presidential inauguration. See the website “Bolotnoe

about his criticism of Putin's regime exemplify the restoration of political psychiatry, practices that better contextualize the neo-totalitarian regime in Russia.¹³⁷ The "medicalization" of social behavior and politics are also noticeable in Ukraine,¹³⁸ and further potential importation of abusive practices from Russia to Ukrainian territories influenced, infiltrated, or invaded by Putin are a concern that should be taken seriously. Complacency with the status-quo in psychiatry as a discipline and as a branch of medicine, and a lack of professional engagement and scholarly research in this area might result in the rejuvenation of pernicious practices of political psychiatry in this part of the world.

The 19th century American writer Ralph Waldo Emerson argued that words devalued and distorted the truth and the reality. He has posited that the age of words should be followed by "an age of silence, when men

delo" (October 3, 2013), accessed March 18, 2014, <http://bolotnoedelo.info/news/3975/amnesty-international-priznala-trex-figurantov-bolotnogo-dela-uznikami-sovesti>. For more details about Kosenko who was declared insane and "diagnosed" with paranoid schizophrenia by psychiatrists at the Serbsky Institute in Moscow, see "Psych Ward Verdict;" "Russia: Withdraw Charges Against Protesters; No Compulsory Psychiatric Treatment," *Human Rights Watch*, October 4, 2013, accessed March 18, 2014, <http://www.hrw.org/news/2013/10/04/russia-withdraw-charges-against-protester>; Sergei L. Loiko, "Activist to get mental treatment," *Los Angeles Times*, October 9, 2013, A3. For details about the earlier case of the Russian poet Yulia Privedyonnaya who was prescribed a month-long psychiatric examination at the Serbsky Institute for organizing the Poetical Association that seemed problematic to the authorities, see Peter Leonard, "Russian faces Soviet-Style Treatment in Psychiatric Ward," *Waterloo Region Record* (Ontario, Canada), January 22, 2010.

137 Between 1998 and 2004, psychiatrists at the Serbsky Institute, possibly encouraged by the Russian security services, pressed the Duma to return to Soviet-law on psychiatric care that would allow specialists to detain and forcibly treat people who exhibited signs of opposition to the regime. For details see "Russia Considering Restoring Soviet-Era Law on Psychiatry, Opening Door to Political Abuse," The Jamestown Foundation (November 15, 2012), *United Nations High Commissioner for Refugees*, accessed March 18, 2014, <http://www.refworld.org/docid/50a4d26f2.html>; see also the interview of the President of the Independent Psychiatric Association of Russia Yuri Savenko "In Russia, the Mental Health System May be Used to Silence Political Dissent," *Mental Illness* (2013): 124–30.

138 See Robert van Voren, "Yanukovych Victim of Soviet Psychiatric Abuse?" *Euromaidan PR*, February 2, 2014, accessed March 26, 2014, <https://euromaidanpr.wordpress.com/2014/02/02/yanukovych-victim-of-soviet-psychiatric-abuse/>.

shall speak only through facts” to restore the “health” and the value of words.¹³⁹ If applied to the political, cultural and social practices of the Communist regime in the Soviet Union, Emerson’s idea appears to be reversed: silence about the crimes against humanity committed by the Soviet state necessitated the invention of new words, notions and concepts that were nothing but lies which delayed the emergence of a new age of words, politically meaningful and transparent. Psychiatric terror was concealed by placing it in the realm of new idioms of confidentiality, inaccessible for popular discussions or debates.

Yet, an attempt to hide and, at the same time, to intensify psychiatric terror was a gross error of Soviet leaders. The overdose of violence and lies had drastic repercussions for the regime. As embarrassing as it was, internationally the truth about post-Stalinist brutality and savagery in the USSR eventually emerged, and in January 1983, in anticipation of shameful expulsion from the World Psychiatric Association (WPA), the All-Union Society of Psychiatrists withdrew from the WPA, claiming that the accusations of psychiatric abuses in the USSR were unfounded.¹⁴⁰

However, the arbitrariness of punishments and everyday heinous crimes against humanity committed in Soviet psychiatric hospitals became visible and obvious for observers inside and outside the Soviet Union. The Soviet authorities’ boundless certainty of the illegibility of these crimes and their presumed unprovability had an unintended effect. Punitive psychiatry cultivated and tempered people like Bukovsky, Pliushch, Grigorenko, Borovsky and many others.¹⁴¹ Their alleged madness and

139 R.W. Emerson, *Basic Selections from Emerson: Essays, Poems, Apothegms*, ed. Eduard C. Lindeman (New York: Mentor Books, 1960), 173.

140 Robert van Voren, *On Dissidents and Madness: From the Soviet Union of Leonid Brezhnev to the “Soviet Union” of Vladimir Putin* (New York: Rodopi, 2009), 63; see also Bloch and Reddaway, *Soviet Psychiatric Abuse*, 9.

141 For the individual history of Petro G. Grigorenko, see his *Memoirs*, and Greg Eghigian, ed. (with Gail Hornstein’s contribution), *From Madness to Mental Health: Psychiatric Disorder and Its Treatment in Western Civilization* (New Brunswick, N.J.: Rutgers University Press, 2010), 317–28; for a discussion of Leonid Pliushch’s case, see Tatyana Khodorovich, ed., *The Case of Leonid Plyushch*, trans. Marite Sapiets, Peter Reddaway and Caryl Emerson (Boulder, CO: Westview Press, 1976).

suffering made them famous all over the world and respected for their courage to resist state violence. In a sense, the Soviet state immortalized them in people's memory, undermining its own foundations and ideology.

During the decades of the 1960s–1980s, the suppression of the autonomist strivings of nationals, including Ukrainians, was the primary task of the Soviet party leaders. The efforts of Brezhnev and Andropov were rather effective: by the late 1970s most activists were imprisoned and interned in psychiatric wards. The cadre rotation in Ukraine (the Ukrainian party boss Petro Shelest was replaced by Volodymyr Shcherbytsky, and the Ukrainian KGB head Vitaly Nikitchenko – by Vitaly Fedorchuk) solidified centralized control over nationalities policy. Silence about the state's crimes and lies were institutionalized, and as Edward Crankshaw has noted, they became “an instrument of policy, cherished, burnished.”¹⁴²

The KGB Chairman of the USSR Andropov played a decisive role in installing the practices of psychiatric terror and designing cover-up operations to hide from the West the fact that the state was murderously destroying the minds of sane people by drugging them and isolating them from the rest of society. This task seemed to present few difficulties or moral concerns for Andropov, who was tempered in the re-Sovietization of Hungary and Czechoslovakia that was implemented through terror and blood. Crankshaw has posited that Andropov, unable to beat the system, joined it, and “what he will be remembered for has been the systematic elimination of dissidents wherever they showed their heads.”¹⁴³ Psychiatric clinics “curing” oppositionists to the Soviet regime became a major industry under Andropov.¹⁴⁴

The medicalization of social behaviour appears to be one of the symptoms of authoritarian regimes which employ it as a method of social control. Using medical terms, the acute stage of the Soviet authoritarian

142 Edward Crankshaw, “Yury Andropov: Prisoner of His Country's Lies,” in *Putting Up with the Russians: Commentary and Criticism, 1947–84* (New York: Elizabeth Sifton Books, Viking, 1984), 156.

143 Crankshaw, “Yury Andropov,” 157–58.

144 Crankshaw, “Yury Andropov,” 158.

regime, Stalinism, made little use of political psychiatry. Its emergence coincided with the chronic stage of authoritarianism which required more subtle and less radical means of destruction of opposition, and mirrored the emergence of stable hierarchical structures in society. This inevitably led to the expansion of psychiatric clinics, psychiatrists' power and state laws that allowed forcible hospitalization, abuse and neglect. Pseudo-medical interventions, ordered by the state, were perfect tools for silencing the opposition. Hiding behind pseudo-medical concepts and diagnoses, such as "sluggish schizophrenia," "the paranoid reformist delusion," "mania of justice-seeking," "Marxismomania" and the like, the state, assisted by psychiatrists it had co-opted, acted like courts: they made verdicts and executed them. What was extremely valuable for the regime was that this occurred in psychiatric wards which were much better guarded than prisons and camps. Silence triumphed there.

Koriagin, a psychiatrist who used to work in Saburova Dacha, believed that Snezhnevsky's theory of sluggish schizophrenia did not produce the phenomenon of political psychiatry but on the contrary, the Soviet system built on principles of coercion and violence generated Snezhnevsky and his theory.¹⁴⁵ This facilitated the creation of more subtle forms of violence that supposedly helped stabilize the regime and prevent it from inner crises. However, as Zizek argues, coercive systems that are grounded in more subtle forms of violence, which are experienced on a subconscious level, often lead to catastrophic consequences. The seemingly smooth functioning of economic and political systems suddenly collapses. He identified this phenomenon as "systemic violence."¹⁴⁶ Zizek claims that this form of violence constitutes the "invisible background" and the very fabric of people's everyday lives.¹⁴⁷ In the Soviet Union, a similar "background" exacerbated by the fear of punishment produced Snezhnevsky and psychiatrists like him. In a sense, the emergence of his theory and its

145 Van Voren, *Koryagin*, 37.

146 Zizek, *Violence*, 2, 9.

147 Zizek, *Violence*, 10.

catastrophic consequences for humanity were inevitable, given the steady and monotonous functioning of the system that relied on systemic violence.

Fear, “an essential presence in the asylum” and in any place of confinement,¹⁴⁸ became a desirable final result of the pseudo-treatment of dissenters, and a long-lasting self-reinforcing element of people’s psyches. As Podrabinek has suggested, the authorities preferred to “drive them [“patients”] to degradation and intimidate them permanently.”¹⁴⁹ The ruthlessness of the state that employed intimidation, repression, and political psychiatry in the 1960s–1980s left a permanent scar in people’s memory, and precisely this factor played a role in Ukraine’s national revival in the late 1980s and the early 1990s. The deplorable state of Ukrainian culture, but most importantly, the old wounds of humiliated dignity and pride, dehumanization, and the amputated wholeness of people’s mental and moral inner core reactivated resistance in the late 1980s when the Soviet system took the first steps in its restructuring.¹⁵⁰

Dmitry Gorenburg’s point about the alleged oscillation of Soviet nationalities policy between Russification and ethnophilia is highly debatable. However, he has rightly noted that Soviet assimilation policies and Russification defined the character of the nationalist movements during Gorbachev’s perestroika.¹⁵¹ In the context of state practices in the 1960s–1980s, assimilation was merely a euphemism for the limited choice the majority of Ukrainians had: assimilation, or repression. Therefore, Gorenburg’s observation should be further clarified: not assimilation policies per se but sadism and violence, through which assimilation policies were imple-

148 Foucault, *Madness and Civilization*, 245.

149 Podrabinek, *Punitive Medicine*, 137.

150 Iury Shcherbak reminded us that mass awakening of peoples usually occurred under the influence of dramatic events and shocking human experiences. See Iury Shcherbak, *Ukraina v zoni turbulentnosti: demony mynuloho i tryvohy XXI stolittia [Ukraine in the Zone of Turbulence: Demons of the Past and Anxieties in the Twenty First Century]* (Kyiv: Ukrainskyi pysmennyk, 2010), 315.

151 Dmitry Gorenburg, “Soviet Nationalities Policy and Assimilation,” in *Rebounding Identities: The Politics of Identity in Russia and Ukraine*, ed. Dominique Arel and Blair A. Ruble (Washington, D.C.: Woodrow Wilson Center Press, 2006), 299.

mented in Ukraine, precipitated the political climax in the republic in the late 1980s and the early 1990s. Political psychiatry and its practices further antagonized the Ukrainian intelligentsia, fostering its desperation to free Ukraine from the ties of the Union, and predisposing their sense of urgency to call for the national referendum for Ukrainian sovereignty in 1991.

In 1987, Gorbachev's perestroika brought release to 64 political prisoners from psychiatric clinics.¹⁵² Subsequently, approximately 800,000 patients who were charged with anti-Soviet agitation and propaganda were removed from the psychiatric registry list.¹⁵³ An additional investigation should be conducted to identify how many Ukrainians and other nationals were in this list. Tragically, those who were released from psychiatric clinics never recovered in a neurological sense. Those who were tortured by haloperidol injections developed a chronic extra-pyramidal syndrome and experienced chronic nightmares.¹⁵⁴ It is equally tragic that we will never know how many people had been murdered in psychiatric clinics by injections and torture, and how many people had been shot by the guards when they were trying to escape from special psychiatric clinics. These sorts of statistics are completely missing from the picture.

The issue of lustration remains one of the most salient questions that relates to psychiatric terror. Although it is beyond the scope of this study, a brief discussion might clarify the problems related to the former Soviet psychiatrists' lustration. Generally speaking, lustration of those who were directly involved in psychiatric abuse has never been implemented, and those doctors who collaborated with the KGB have never repented. For instance, Sosin, who was personally involved in Borovsky's torture in Saburova Dacha, today heads the Narcology Department at the Ukrainian Institute of Doctors' Advancement and the Private Narcology Center "Avitsenna" in Kharkiv.¹⁵⁵ A former expert in schizophrenia, he cures people

152 Van Voren, *Cold War*, 318.

153 Mlechin, "Pochti ezhednevno..." 17.

154 Podrabinek, *Punitive Medicine*, 91, 92.

155 See the official website of the Private Narcology Center "Avitsenna," accessed March 26, 2014, <http://narkocentr.com.ua/?id=44>.

from alcoholism in Ukraine today. He writes memoirs about Saburova Dacha, where he discusses everything but Soviet political psychiatry.

In 1991 the Ukrainian Ministry of Health conducted a survey which revealed that among 568 psychiatrists who participated in the survey only 50 percent advocated publicizing psychiatric abuse in Ukraine. Every fourth person rejected informational leaks about political psychiatry, and every tenth person considered those who publicized the knowledge about it the enemies of psychiatry.¹⁵⁶ In 1989, Rafalsky who spent more than twenty years in prisons and psychiatric clinics praised honest psychiatrists and lamented that the majority of Soviet psychiatrists still kept silent about psychiatric abuse and the crimes the Soviet state committed against humanity.¹⁵⁷

Koriagin reminded us that one can judge a society by the way it treats its mentally ill.¹⁵⁸ He supported the idea of Soviet psychiatrists' lustration.¹⁵⁹ In contrast, Gluzman who is today the head of the Ukrainian Psychiatric Association prefers to focus on the problems of contemporary psychiatry and psychiatric care in Ukraine. He believes that the positive effects of this project might be very limited. Although lustration laws remain a highly debatable issue, they would undoubtedly facilitate democratic reforms in the states throughout Eastern Europe. Mark S. Ellis has demonstrated that lustration laws in Russia, Ukraine and other states that formerly belonged to the former Communist bloc were never enforced and, in fact, were counterbalanced by other laws that made it possible to classify information about individuals who used to work for the Communist Party and the secret police, and who were engaged in operations that could be qualified as crimes against humanity.¹⁶⁰

Gluzman's and van Voren's rejection of the narratives about political psychiatry that are depicted in black and white and their calls to decipher

156 Korotenko and Alikina, *Sovetskaia psikhiatriia*, 10.

157 Rafalsky, "Reportazh niotkuda," 219.

158 Koryagin, "Autobiographical Notes," 24.

159 Koryagin, "Compulsion in Psychiatry," 398.

160 Mark S. Ellis, "Purging the Past: The Current State of Lustration Laws in the Former Communist Bloc," *Law and Contemporary Problems* 59.4 (1996): 195–96.

the “shades” of the past and present realities deserve attention. Narratives that exploit a binary concept lack analytical depth. Binaries as an analytical tool have recently become a warning for scholars, a sign of superficiality and limited vision. However, for many, binary oppositions are “useful, indeed unavoidable,” as it was for Frederic Jameson. For instance, Michael Wood has posited that the most important thing is to see the binary oppositions’ parts “as entangled in each other”: their relation is more significant than their difference.¹⁶¹ In case of political psychiatry, binaries, such as the state and psychiatrists, and psychiatrists and their “patients,” should be considered in the context of the political system that functioned rather smoothly for decades in a mode of systemic violence but eventually fractured as a result of the extreme imbalance of violence. Ironically, it is unavoidable to consider this imbalance without considering a binary: violence and non-violence.

As many scholars have argued, including Foucault, detention in prisons and the state’s abuse of power there led to recidivism.¹⁶² In a similar fashion, detention in mental institutions and the “excesses” of torture provoked a “relapse” to nationalism and political activism among the “patients.” The fear instigated by the KGB that penetrated into the depths of society generated a state of latent resistance that was temporarily subdued by terror and state violence. Psychiatric methods designed to dehumanize dissenters undermined the “carceral texture of society.” The nationalists’ isolation and incarceration inside the psychiatric clinic resulted in their greater presence outside, internationally, inciting new discourses and the romanticizing and mythologizing of their suffering. Their feeling of injustice was inflamed by state violence and became “untamable.”¹⁶³

Foucault has argued that “power and knowledge directly imply one another,” and “knowledge extends and reinforces the effects of this power.”¹⁶⁴

161 Michael Wood, “Report from the Interior,” *London Review of Books*, 9 January 2014, 30.

162 Foucault, *Discipline and Punish*, 265–66.

163 See Bigot de Préameneu’s discussion about the arbitrary power of administration in prison and prisoners’ recidivism in Foucault, *Discipline and Punish*, 266.

164 Foucault, *Discipline and Punish*, 27–29.

Naturally, conflicts, struggles and social turmoil constantly “traversed” the domains of power and knowledge. But it is equally true that knowledge when it is resistant to power generates a domain of silence which assists power to preserve its political investments. Silencing the public and obfuscating undesirable knowledge about abuses of power are vital to state control and ideological conquests.

In a sense, political psychiatry was a secret political operation inscribed in silence, which was a significant factor in consolidating and centralizing power in the Soviet Union. The three decades of silence about psychiatric abuse applied to Ukrainian dissent is an incredible example of the power silence is capable of. Through the press and mass media, people’s alleged psychiatric disorders were made visible and serious, and their national strivings and grievances disappeared in obscurity through propaganda and misinformation. The techniques of discipline, such as repression and psychiatric terror, required cover-up operations and silence, because the space within silence is usually devoid of diverse voices and therefore permits little dissent. Without dissent, there is little resistance, thereby guaranteeing maintenance of the existing power structure.

In the context of barbaric applications of political psychiatry in the Soviet Union, Walter Benjamin’s statements do not appear too radical. On one occasion he argued that “there is no document of culture which [was] not at the same time a document of barbarism”; on another, he posited that “it is virtually impossible to write a history of information separately from a history of the corruption of the press.”¹⁶⁵ During the era of late socialism, the state controlled information about its dissidents through several channels, including the press. A common assumption is that whoever controls the discourse or conversation has power. An opposite supposition seems equally true: whoever commands silence also has power, and the knowledge about the mechanisms of psychiatric abuse in Ukraine opens the window into the past to reveal how powerful silence was in the Soviet Union.

165 Quoted in Leland de la Durantaye, “Sedan Chairs and Turtles,” *London Review of Books*, 21 November 2013, 22.

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