ACTORS IN A “CHEAP COMEDY”: DISSIDENTS IN SOVIET PSYCHIATRIC HOSPITALS, 1968-1974

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A thesis submitted to the faculty at the University of North Carolina at Chapel Hill in partial fulfillment of the requirements for the degree of Master of Arts in Russian and East European Studies in the College of Arts and Sciences.

Chapel Hill
2015

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ABSTRACT

(Under the direction of Donald J. Raleigh)

This paper examines the Soviet government's hospitalization of political dissidents diagnosed with mental disorders between 1968 and 1974. Relying primarily on memoir accounts produced by the victims of Soviet punitive psychiatry, the purpose of this paper is to explicate the purpose, function, and effectiveness of the Soviet program of committing dissidents to psychiatric institutions. It concludes that this program served primarily to control behavior, rather than suppress ideas or counter-ideologies, embarrassing to the Soviet government. Furthermore, it suggest that in many cases committing dissidents to mental hospitals served the state as a means of negotiating with dissidents and reaching an agreement on what constitutes acceptable behavior, instead of functioning simply as a way to remove them from general society. This paper also argues that some dissidents possessed means of pressuring the state, and that the dialogue between political malcontents and government authorities was not a one sided conversation.
ACKNOWLEDGEMENTS

I would like to use this space to thank a number of people who helped me in a variety of ways as I completed this project. I would hear it until the end of time if I did not first mention my parents, J. Selby and Mary Kiffer, who have somehow managed to tolerate me for the past twenty six years.

I would also like to thank the people at CSEEES who have countless times gone out of their way to help me. There are too many examples to mention here. Specifically I would like to thank (in no particular order) Dr. Bob Jenkins, Dr. Jacqueline Olich, Irina Olenicheva, and Violet Anderson for all their help and patience. I am also grateful that I had the opportunity to enter UNC with eight other talented students in the Russian and East European Studies cohort. They are all talented individuals who have contributed to my time here. I would especially like to thank Austin Yost, who read all of the drafts of this work and provided valuable feedback.

I am also incredibly grateful to the department of history and UNC. The faculty and students “adopted” me as one of their own and validated my decision to become a professional historian. I am especially grateful to Dr. Chad Bryant and Dr. Eren Tasar who served on my committee and provided a welcome combination of moral support and needed criticism.

Among my friends, I need to thank Andal Narayanan and Ben Williams. They are two of the kindest people I’ve ever met. Their support was essential to this project.

Finally, I need to thank my adviser Dr. Donald J. Raleigh. This project would not have been possible without him. He is a great scholar and a great person. I remain very grateful for everything he has done for me.
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INTRODUCTION

“If you don’t want to be kept here very long, don’t act so important. People don’t want to think. They won’t understand you if you speak too much. Don’t intellectualize, keep it simple: ‘I want to go home, I want kasha.’”¹ A paramedic (fel’dsher) offered this friendly advice to Alexander Sergeevich Esenin-Vol’pin, a prominent Soviet dissident and one of the founders of Soviet Human Rights movement,² as he was being transported to Moscow City Psychiatric Hospital no. 5 to undergo psychiatric treatment. The cause of his treatment was the result of years of opposition to the Soviet government rather than any symptoms of mental illness. However, Esenin-Vol’pin was on route to a public mental hospital, not a prison. The purpose of his visit, and the hospitalization of many other dissidents, was to learn the difference between what constituted and acceptable and unacceptable behavior in the eyes of the regime. As the paramedic suggested, the sooner he learned his place, the sooner he could go home.

In the late 1960s and 1970s a burgeoning dissident³ movement proved a growing source of international and domestic embarrassment for the Soviet Union of Leonid II’ich Brezhnev

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¹ A.S. Esenin-Vol’pin, Filosofija, Logika, Poëziia, zashchita prav cheloveka: Izbrannoe (Moscow: Rossiĭskiĭ gosudarstvennyĭ gumanitarnyĭ universitet, 1999), 103.


³ The Russian word for dissent is inakomyslie. The literal translation of inakomyslie is “differently thinking,” but this fails to capture the true meaning of the word. It is often translated as “dissent” – which in English may simply mean to hold an opinion different from that of the majority. However, in Russian “dissent” possesses a more specific definition denoting action taken for a minority position and/or against the majority opinion or structure. Therefore, inakomyslie may perhaps best be understood as active dissent, which implies “different thinking” as well as, more importantly, different behavior. Therefore, dissent in this paper should be understood as active opposition to the state, rather than simply possessing oppositionist opinions.
(1964-1982). Increasingly focused on human rights, grassroots opposition to the Soviet system that took the form of protests, letter writing campaigns, and circulation of *samizdat* (materials copied by hand or on a typewriter and circulated domestically) and *tamizdat* (materials published abroad), challenged the regime’s claims of near universal popular support for the Communist Party and its leaders. To deal with the problem, in the late 1960s Soviet leaders began to use psychiatry as a tool to combat what they saw as political opposition. Hospitalization in a psychiatric institution provided a means of solving the USSR’s image problem. As Valerii Il'inichna Novodvorskaia, a political victim of the Kazan Special Psychiatric Hospital and after 1991 a Russian politician, points out, using the judicial system to punish dissenters would have destroyed the image of a population united behind its leaders. However, there was no need for the government to explain the presence of disturbed people, because as Novodvorskaia put it, “In the West there are also plenty of crazies.”

Yet, these methods also allowed dissidents the opportunity to use a narrative of psychiatric abuse against the Brezhnev regime. In this way, the psychiatric hospital became the site of a faceoff between Soviet political dissidents and the authorities.

Although the experience of each hospitalized dissident is unique, some generalizations can be made about punitive psychiatry in the Soviet Union under Brezhnev. In some cases, patients claimed they were hospitalized in order to save the state the embarrassment of putting them on trial. In other instances, they believed they were locked up to encourage them to cease politically dangerous activity or to obtain information from them. But they never doubted the political nature of their “treatment.” As Iuriĭ Vladimirovich Mal'tsev, an Italian language and

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Additionally, there are two words in Russian for dissidents—*dissidenty* and *inakomysliaushcie*. I translate both terms as dissidents. However, any mention of dissidents in this paper should be read while bearing in mind the active connotation of the Russian definition of dissent.

4 Valerii Novodvorskaia, *Po tu storonu otchaianiia* (Moscow: Novosti, 1993), 49
cultural specialist committed to Kashchenko Psychiatric Hospital in October 1969, observed, attempts to explain psychiatric treatment to patients as medically necessary always came off as transparent and half-hearted. When the authorities tried to do so, “they spoke with false voices, like hapless amateurs on a poorly constructed stage.” There was no hiding the fact that psychiatry was an excuse to talk politics.

Scholarship on the Soviet Union has only recently begun to tell the story of the Soviet dissident movement, a topic difficult to research during the years of Soviet power for obvious reasons. Although the historiography of political opposition to the state continues to grow, the topic of political abuse of psychiatry has yet to be sufficiently explicated from a historical perspective. Despite provoking an impressive amount of English-language and other foreign-language literature by political scientists, psychiatrists, and other experts in the 1970s and 80s,


and boasting wide coverage in American and West European newspapers, the historical
discussion of the role punitive medicine played in the development of the conflict between
dissidents and the state remains underdeveloped.8

The purpose of this paper is to examine and illuminate dissident accounts of the Soviet Union’s program of punitive psychiatry and involuntary hospitalization from 1968 through 1974. Drawing on four of the most influential memoirs describing personal experience in Soviet mental institutions, in addition to the most important contemporaneous samizdat journal Khronika Tekushchikh Sobitii (KhTS), (the Chronicle of Current Events), and other relevant samizdat sources, I consider two principle aspects of dissident accounts of their hospitalization. First, what transgression, in the author’s opinion, resulted in his or her incarceration? Second, how did dissidents write about life inside the psychiatric hospital? What do descriptions of their prescribed “treatments” and interactions with doctors reveal about the state’s approach to dissidents and its impact on dissent? By looking at these accounts, I hope to draw some generalizations about the Soviet Union’s program of punitive medicine and the experience of dissidents in psychiatric hospitals.

It is important to note, that while dissent in the Soviet Union was diverse and multifaceted, I focus exclusively on political dissidents, i.e. dissidents opposing the Brezhnev regime on political grounds. However, the Soviet Union used psychiatry as a repressive tool to combat all types of dissent. Religious and national oppositionists of a number of different sects and ethnicities were among the victims of Soviet political psychiatry. I choose to concentrate on

8 Sidney Bloch and Peter Reddaway were the two most prominent producers of such works and advocated for the international community to pressure the Soviet Union to release dissidents interned in mental hospitals. See, Sidney Bloch and Peter Reddaway, Psychiatric Terror: How Soviet Psychiatry is Used to Suppress Dissent (New York: Basic Books, 1977); Sidney Bloch and Peter Reddaway, Soviet Psychiatric Abuse: The Shadow over World Psychiatry (Boulder, CO: Westview Press, 1984). For examples of contemporaneous literature by other authors, see Harvey Fireside, Soviet Psychoprisons (New York: Norton, 1979).
political dissidents due to the fact that the sources available to me, allow for a clearer explication of their interactions with the state. Additionally, the histories of political, religious, and national dissent in the Soviet Union are ultimately different stories with their own origin and evolution—even as they pertain to psychiatric abuse. Therefore, I decided to limit myself to explicating the relationship between political dissidents and the state and to leave other branches of dissent to future scholars.

Memoirs are an invaluable source for historians, allowing access to the constructed thoughts, motivations, and feelings of our subjects, but nonetheless are a difficult source to interrogate. Slavicist Beth Holmgren asserts that memoirs invoke a relationship between the authors and readers “in which the reader can presume independent knowledge of the events and experiences the writer represents.” Holmgren reminds us, however, that, “the memoir [came] to be used in Russia as a mode of wrestling and bestowing power, of endorsing and subverting the sociopolitical status quo, and, almost invariably, valuing the individual self insofar as it interpreted, served, and connected with the ‘real’ context it depicted.”

Reading the firsthand accounts I work with in this paper, I have tried to keep in mind the authors’ objectives both to create a historically “accurate” account of events as well as their personal politics.

The memoirs I address in this paper, all products of the Brezhnev era, fall into the genre historian Phillip Boobbyer calls “dissident biography.” He writes, “The dissident biography . . . differs from other contemporary biographies in that it was rooted in a ‘specific dialogue with

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11 Ibid., xxii.
power’ and a certain ‘paradigm of protest.’”

The audience of these works was not the regime or their political opponents, who they did not attempt to influence. Rather, they addressed “a third party—public opinion—both at home and abroad.”

The primary goal of these authors was to advertise their plight and mobilize public opinion to support their cause. To do so they addressed both a domestic and international audience.

The memoirs I work with in this paper are Iuriĭ Mal'tsev’s *Reportazh iz sumasshedshego doma* (Report from a Madhouse), Evgeniĭ Nikolaev’s *Predavshie Gippokrata* (The Betrayal of Hippocrates), Zhores Medvedev’s *Kto sumasshedshii* (Who’s Crazy?, coauthored with his brother Roĭ Medvedev), and Leonid Pliushch’s *Na karnavale istorii* (History’s Carnival).

They are part of a small canon of memoir literature detailing the personal experience dissidents had with punitive psychiatry in the Soviet Union. Excluding article-length works, there are five other memoirs written in the Soviet period, besides the works I use, which fit into this canon.

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12 Boobbyer, *Conscience, Dissent and Reform in Soviet Russia*, 80-81.

13 Ibid., 81.


Additionally several more autobiographical works have been published since the fall of the Soviet Union.\textsuperscript{16} I selected the works above because they shed light on the era after the crushing of the Prague Spring when the Soviet Union began a crackdown on domestic political opposition signaling the end of the Thaw. Furthermore, I privileged memoirs of dissidents hospitalized both in public mental hospitals (\textit{psikhiatricheskaia bol'nitsa obshchego tipa})—designed to serve the public and treated those who were not considered “socially dangerous elements”—and special psychiatric hospitals (\textit{psikhiatricheskaia bol'nitsa spetsial'nogo tipa}, \textit{spetsial'naia psikhiatricheskaia bol'nitsa}, \textit{psikhiatricheskaia bol'nitsa, spetspsikhbol'nitsa}, SPB). Essentially the mental ward of a prison, SPBs were designed to treat convicted criminals who were considered to present a danger to society.\textsuperscript{17} I take this approach to compare the difference in experience and treatment at the two types of institutions. With the exception of Nikolaev’s account, the authors wrote their accounts during or shortly after their incarceration. The authors come from diverse backgrounds, but they all collectively belong to the Soviet “intelligentsia.” This was not an intentional choice on my part, but reflects the Soviet government’s anxiety toward the intelligentsia during this period.

I complement these memoirs with references to \textit{Khronika Tekushchikh Sobitiï} that carried information on the cases of all the authors in question, and in some instances influenced their cases, and the fact that both men were hospitalized in the early sixties when the mechanisms for hospitalization were decidedly different. See Petr Grigorenko, \textit{V podpol' e mozhno vstreit' tol'ko krys}-- (New York: Izd-vo Detinets, 1981); Vladimir Bukovskii, \textit{I vozbrashchaetsia veter}-- (New York: Khronia, 1978). Grigorenko’s account is available only in Russian. Bukovskii’s is available in English. See \textit{To Build a Castle: My Life as a Dissenter}, translated by Michael Scammell (New York: Viking Press, 1978). Iuriĭ Sergeevich Belov wrote about his time in a psychiatric hospital in Sychyovka in the later 1970s. I do not examine the work because it describes a significantly later period than the other memoirs in the canon. See \textit{Razmyshleniia ne tol'ko o Sychèvke: Roslav' 1978.} (Frankfurt: Posev, 1980).


\textsuperscript{17} These special psychiatric hospitals were often, though not always (as in the case of Leningrad SPB), attached to prisons or camps. They were sometimes referred to as prison psychiatric hospitals (\textit{psikhiatricheskaia bol'nitsa tiuremnogo tipa}).
outcome. Widely considered a reliable source that “contained real news, uncensored news, [the journal was compiled by] a staff of sorts that had talked with unfettered sources of information and that, in some cases, had directly witnessed events and freely written about them.”\textsuperscript{18} It is important to note that my sources are the product of men and women who participated in an opposition movement that advocated and practiced a “widespread commitment to truth-telling and not lying.”\textsuperscript{19} While I do not assume that everything they wrote was truthful, I do read their works with this commitment in mind.

The period between 1968 and 1974 is a particularly fruitful time to investigate dissident accounts of involuntary hospitalization because a new generation of dissidents came of age, influenced by the 1965 arrest and subsequent trial, in early 1966, of Iuliî Daniël’ and Andreĭ Siniavskii.\textsuperscript{20} This event, as well as the Soviet Union’s invasion and occupation of Czechoslovakia in 1968, signaled “the end of de-Stalinization.”\textsuperscript{21} More active and inventive than the opposition of the N.S. Khrushchev era (1953-1964), this generation established KhTS in 1968 among many other accomplishments.\textsuperscript{22} These years, especially the period between 1972 and 1974, also saw increased government persecution and repression of dissent. As historian


\textsuperscript{19} Boobbyer, Conscience, Dissent and Reform in Soviet Russia, 77.

\textsuperscript{20} Andreĭ Donatovich Siniavskiĭ and Iuliî Markovich Daniël’ were arrested for publishing perceived anti-Soviet works abroad in a 1965-66 show trial. It was the first Soviet show trial aimed exclusively at literary crimes and sparked a large wave of protests both domestically and internationally. For more, see Denis Kozlov, The Readers of Novyi Mir: Coming to Terms with the Stalinist Past (Cambridge, MA: Harvard University Press, 2013): 239-62.

\textsuperscript{21} Horvath, The Legacy of Soviet Dissent, 18; Boobbyer, Conscience Dissent and Reform in Soviet Russia, 76.

\textsuperscript{22} Boobbyer, Conscience Dissent and Reform in Soviet Russia, 76.
Benjamin Nathans so aptly put it, “These were the years of the vilification of Andrei Sakharov by the Soviet press (1973), the publication of Aleksandr Solzhenitsyn’s *Gulag Archipelago* and his expulsion from the USSR (1973-1974), and the arrest of numerous activists associated with the *samizdat* journal *Chronicle of Current Events* (1972-74).”  

The campaign of repression culminated in the temporary cessation of KhTS in 1973 and a conspicuous lull in the dissident movement by 1974. While dissidents proved both creative and courageous in trying to effect change in their relations with the state, “their main focus,” the authorities continued to enforce their version of the boundaries of acceptable behavior and political activity, and not ineffectively. Psychiatric hospitals represented a place where these two approaches intersected as dissidents and the state came into direct conflict. Therefore, the accounts of the patients of political psychiatry provide a unique insight into the relationship between the Soviet government and its opponents at a critical moment in history, and may help us understand how dissidents perceived that relationship and how they hoped to change it.

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PUNISHMENT FOR WHAT? DISSIDENTS ANALYZE THEIR TRANSGRESSIONS

Like prison sentences, fines, and other official punishments, forced confinement in mental institutions constituted a response to deviant behavior by demonstrating the consequences that would be suffered by an offending individual. Thus the authorities designed this program to teach both the perpetrator and society at large the consequences of unacceptable behavior. The difference between internment in a mental institution and more conventional punishment was that the authorities usually reserved the former to address infractions that were not technically illegal, although nonetheless unacceptable. This is especially true for transgressions resulting in a stay in a regular public mental hospital where in the vast majority of cases the authorities released dissidents after less than one year of “treatment” and usually after several months or less.26 The majority of political dissidents forced to undergo unnecessary psychiatric treatment endured the ordeal at a public psychiatric hospital.27 The Soviet authorities addressed more serious transgressions, including unambiguously illegal activity, by sending the guilty parties to special psychiatric hospitals.

It is difficult to determine the exact number of victims Soviet political psychiatry due to the fact that not every case leaked onto the pages of KhTS and other samizdat journals, and few

26 Medvedev, Nikolaev and Mal'tsev were all released after less than three months.

27 Under Soviet law citizens needed to be charged with a crime in order to be sent to a SPB, a decision that could be made only by a court. Additionally, citizens charged with a crime were not always ordered to a SPB. Some were hospitalized in public institutions. Although it is impossible to generate any reliable statistics with the material available to me, a good litmus test is the compilation Kaznimey sumasshestviem that provides short biographies of select victims of Soviet political psychiatry from the early 60s (with mention of one earlier case from the 50s) to 1971. Despite focusing overwhelmingly on dissidents who were formally charged with a crime, the collection still lists sixteen cases of hospitalization in a public hospital compared to fourteen cases of incarceration in a SPB. See A. Artemova, L. Rar and M. Slavinskiǐ, compilers, Kaznimey sumasshestviem (Frankfurt: Posev, 1971).
dissidents wrote memoirs or other accounts of their hospitalization. Dutch historian Andre Koppers identified 341 individuals who were hospitalized for dissent (not exclusively for political dissent) between the early 1960s and 1989.\textsuperscript{28} I do not doubt that the number of actual victims exceeds the concrete number of cases listed by Koppers, however, I lack the requisite information to suggest the realistic number of individuals forced to undergo psychiatric evaluation for political reasons.

What behavior landed Soviet citizens in these public mental institutions? In the eyes of Mal'tsev it was never a mystery how he ended up at the Kashchenko Psychiatric Hospital in Moscow on 17 October 1969, as revealed in a frank conversation with a nurse on his first day in the hospital:

“Ah, newbie! Well come over here, let’s get acquainted. How did you end up with us?”
“I wanted to go abroad.”
“Ahhh, well no worries, stay with us for a little, they’ll cure you,” she said reassuringly. I looked at her in surprise. They will cure [me] of the desire to go abroad?\textsuperscript{29}

Mal'tsev’s narrative focuses on his punishment for desiring to leave for Italy, a country that he devoted years of his life to studying, and the inherent irony in that situation. For instance, he complained at an interrogation prior to his commitment, “In your opinion, anyone who leaves their country is abnormal? In that case, you are obligated to consider abnormal, for example, Lenin. Well, he left Russia.”\textsuperscript{30} However, Mal'tsev likely exaggerates the role his desire to immigrate to Italy played in his incarceration. As early as 1964, he wrote two letters to the Supreme Soviet of the Soviet Union complaining About the government’s refusal to allow him to

\textsuperscript{28} Andre Koppers, \textit{A Biographical Dictionary of the Political Abuse of Psychiatry in the USSR} (Amsterdam: International Association on the Political Abuse of Psychiatry, 1990), 74-176.

\textsuperscript{29} Mal'tsev, \textit{Reportazh iz sumasshedshego doma}, 48-49.

\textsuperscript{30} Ibid, 32.
emigrate and detailing his desire to forfeit his Soviet citizenship. In 1968 he penned a letter to the United Nations Commission for Human Rights asking them to defend his right to leave the country. Explaining his motivation for wishing to emigrate, he wrote:

I want to leave this country because, as an intellectual, I find it impossible to go about my business here. I do not subscribe to official Soviet ideology, I do not believe in communism. And therefore, in a country where a declaration of the principles of communist party mindedness (kommunis nicheskoĭ partiinosti) in art is absolutely necessary, I am doomed to spiritual annihilation.

It is important to note that a denial of a request to emigrate was not uncommon. Additionally, while the sources do not provide any numbers, it can be assumed that the Supreme Soviet, General Secretary, and other government organs and individuals received a sizeable number of letters complaining about refused applications for an exit visa. It seems incredulous that the authorities, in this case the KGB, would detain Mal'tsev for either applying to emigrate or for complaining about being denied permission to emigrate. Indeed, his letters were published in 1968 by the Soviet émigré publishing house “Novyĭ Zhurnal” and with the cooperation of foreign sympathizers reprinted in “a few foreign newspapers” in English and possibly other languages. The memoirs of Soviet citizens forcibly hospitalized in psychiatric institutions, as well as samizdat sources and other materials, reveal that the authorities possessed no tolerance for negative depictions of the Soviet Union accessible to an international audience. What was

32 See editor’s note in Mal'tsev, Reportazh iz sumasshedshogo doma, 30.
33 This was especially true for Soviet Jews who demanded to emigrate in large numbers during the Brezhnev era. See Piet Buwalda, They Did not Dwell Alone: Jewish Emigration from the Soviet Union, 1967-1990 (Baltimore: Johns Hopkins University Press, 1997).
34 See Buwalda, They Did not Dwell Alone.
35 See editor’s note in Mal'tsev, Reportazh iz sumasshedshogo doma, 30.
acceptable (or at least tolerated) speech and behavior before a domestic audience could be considered activity both dangerous and detrimental to the Soviet state in front of a foreign audience.

Exposing the Soviet Union to foreign criticism, however, was not a strict prerequisite for involuntary hospitalization. Evgeniĭ Nikolaev’s memoir *The Betrayal of Hippocrates* (*Predavshie Gippokrata*) credits his internment to a history of chronic noncooperation with party organs and the leadership at his work place, the All-Union Scientific Research Institute for Decontamination and Sterilization (VNIIDiS). Nikolaev, a biologist specializing in viral hemorrhagic fever, details a constant battle to avoid politics at his institute. He describes his coworkers almost as caricatures of Communist party devotees who repeatedly refute Nikolaev’s references to the law by citing the responsibility of every member of the institute to participate in “the life of the collective” and any political activity that entailed.36 His conversations with his superiors and colleagues along these lines proceed formulaically. First, Nikolaev provides a logical explanation for his refusal to participate in politics:

Go to the *subbotnik* (voluntary workday) yourself, if you like it so much. I’m not going. The subbotnik is a communist affair, and I’m not a party member. It’s completely unnecessary for me to be there. You have the right only to invite me to the subbotnik, but not more than that. You have no right whatsoever to order my participation . . . subbotniks, like other political events, are supposed to be carried out voluntarily.

His logical clarifications of personal philosophy and his rights under Soviet law are usually followed by the outraged response of his colleagues, in this case the head of Nikolaev’s laboratory, a certain Polezhaev: “You’re demonstrating political immaturity! Soviet power gave

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you an education!” These outbursts inevitably end with an unsubtle promise of consequences. Polezhaev continues, “You’ve been due for a prison sentence of twenty-five years or so for a while now, like under Stalin. Or to be shot.” These events culminated in Nikolaev’s firing following a vote of the institute’s academic council in early September 1970.

Nikolaev was not arrested until a few weeks after his firing. In the intervening period he began a letter writing campaign to Izvestiia, Chelovek i zakon (Man and the Law, a monthly journal focusing on social morals), Pravda, and other papers denouncing his unlawful firing and his repression by the Communists at the VNIIDiS. He also attempted to begin a legal campaign against the Ministry of Health—the parent organization of the VNIIDiS—visiting there twice between his dismissal and arrest. On 24 September 1970, the same day as his second appearance at the Ministry of Health, the police detained Nikolaev at 10:00 PM for questioning in connection with “a fight.” Instead, the police transported him to Moscow City Psychiatric Hospital no. 15. While it is likely that Nikolaev’s campaign against his illegal firing constituted the reason for his hospitalization, his initial conversation with the psychiatrists focused on his behavior at work and refusal to cooperate with Communist party organs at the institute.

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37 Ibid., 12.
38 Ibid., 13.
39 Ibid., 21-22.
40 Chelovek i zakon began to be published only in 1971, so Nikolaev likely misremembered here probably because he was simply listing major periodicals of the time. See “Chelovek i zakon” in Bol’shaia sovetskaia entsiklopediia, edited by A. M. Prokhorov, v. 29, third edition (Moscow: Sovetskaia entsiklopediia, 1978), 54.
41 Nikolaev, Predavshie Gippokrata, 22-23. None of the letters were ever published and some remained unsent before his arrest.
42 Ibid., 23.
43 Ibid., 24.
Doctor: And why do you refuse to participate in the social life of the collective: you didn’t go to the communist subbotniki? Didn’t participate in any political classes? Didn’t select a social responsibility (sotsobiazatel’stvo)? Why? N: All these events should be carried out voluntarily, and no one has the right to force me to participate in them. D: And you consider your behavior at work to be normal? N: Yes, I consider it normal.

Nikolaev, after the doctor disappeared, managed to read the product of his interview—a recommendation for his admission to the hospital: “For the last year [his] anti-Soviet feelings have been growing stronger. At work he ignored social-political responsibilities, mocked them. Fought with his colleagues. He was dismissed from his position.” Nikolaev claims there was no effort to conceal the fact that his hospitalization resulted from a violation of social norms and his unconcealed rejection of the Communist party. Although he violated no law, his behavior was unacceptable in the eyes of his superiors and the Soviet Union’s security organs.

The transparency displayed by the authorities is remarkable. These memoirs contain little discussion of formal diagnoses. Rather, the doctors and other staff proved willing to forgo any efforts to conceal the political reasons for the detention of these individuals in the guise of genuine concern over their mental health. This allowed the doctors to engage in dialogue with their patients regarding their political transgressions and to seek their cooperation in reaching an agreement with the patient regarding their future behavior. They were undoubtedly helped in

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44 Nikolaev writes that members of his laboratory were expected to select a social responsibility (a politically conscious task of some sort, such as hanging banners, or volunteering for extra work) to fulfill in celebration of the 100th anniversary of Lenin’s birth.

45 Nikolaev, Predavshie Gippokrata, 24

46 Ibid., 25

47 In contrast KhTS made a point of, when possible, listing the diagnosis of the hospitalized dissident. This followed their mission of recording and transmitting the facts pertinent to each case. To provide a few examples, see the case of Aleksandr Alekseĭ Dobrovol’skĭĭ described in “Protess Galanskova, Ginzburga, Dobrovol’skogo i Laskovolf,” Khronika Tekushchikh Sibitiĭ 1 (30 April 1968): 3; The case of Valeriĭ Lukanin discussed in “K godovshchine vtorzheniia v Chechoslovakiu,” Khronika Tekushchikh Sibitiĭ 9 (31 August, 1969): 4; The case of Iuliia Vishnevskaiia discussed in “Kratkie soobshcheniia,” Khronika Tekushchikh Sibitiĭ 16 (31 October, 1970): 37.
these efforts by the voluntary responses of Mal'tsev, Nikolaev, and others who described the reasons for their hospitalization as various manifestations of dissident behavior, therefore expressing agreement with the doctors that their political behavior was the cause for their commitment to an asylum, be it just or unjust in their minds. As we shall see, however, even in cases in which dissidents refused to volunteer reasons for why the state selected them to undergo a psychiatric evaluation, the authorities would usually suggest a political motivation if the interrogated individual declined to do so.

Meeting with Aleksandr Efimovich Lifshits, the head doctor of the Kaluga Psychiatric Hospital, located southwest of Moscow, for the first time on 29 May 1970, Zhores Aleksandrovich Medvedev—dissident writer and biologist and twin brother of dissident historian Roĭ Aleksandrovich Medvedev—suspected the incident was connected to a KGB raid on a friend’s apartment in February. A search of the premises resulted in the confiscation of several samizdat documents including the manuscript of his book *International Collaboration in the Scientific Community and National Borders*.\(^48\) When prompted to provide an explanation for why Lifshits deemed their meeting necessary, however, he simply replied, “It seems that you yourself should provide me with an answer to that question.”\(^49\) It did not take long for Lifshits to move “away from general questions of little meaning to the main business,” Zhores’s foreign publications.\(^50\) Of particular concern was a 1962 work aimed at Trofim Denisovich Lysenko, a Soviet biologist and agronomist responsible for the pseudoscience of “Lysenkoism”

\(^{48}\) Medvedev, *Kto sumasshedshii?*, 9.

\(^{49}\) Ibid., 23.

\(^{50}\) Ibid., 24.
(Lysenkovshchina), entitled “Biological Science and the Cult of Personality.”\textsuperscript{51} Regarding that publication, Lifshits commented:

I managed to read it not long ago. It’s a polemical piece. But everyone forgot about Lysenko years ago, the fight over genetics is over. But you, instead of forgetting that episode and peacefully working in the laboratory, recently published your polemical work abroad. How do you explain that? What purpose did it accomplish?\textsuperscript{52}

The conversation then turned to several other manuscripts prepared by Zhores with an emphasis on those that he, or others, managed to publish outside the Soviet Union.

Zhores Medvedev’s case represents another example of the USSR’s concern with actions that, although ostensibly legal, could embarrass the Soviet Union. Lifshits criticized Medvedev’s work for its lack of scientific merit. Since Lysenkoism had already been debunked, Lifshits described the publication as a transparent attempt to embarrass the Soviet Union by dwelling on past, and already resolved, mistakes. As illustrated by the examples discussed above, such actions included the distribution of samizdat, publication of documents abroad, or an attempt to proselytize against the Soviet system or Communist party in major Soviet publications such as Pravda or Izvestia, as in the case of Nikolaev. Although it was impossible to publish a critical piece in these papers, the letters would nonetheless be read and passed on to the country’s security organs. While the authorities possessed no legal means of punishing these actions, detaining delinquent individuals under the guise of the need for a psychiatric evaluation and involuntarily hospitalizing them allowed the state not only the opportunity to intimidate

\textsuperscript{51} Lysenkoism was a pseudoscience that emphasized the environmentally acquired inheritance of traits in crops. The authorities outlawed scientific disapproval of his theories in 1948. By the time of Zhores Medvedev’s hospitalization, Lysenko’s influence had declined significantly, although when Medvedev’s work was completed in 1962, Lysenko still served as head of the Institute of Genetics at the Soviet Academy of Sciences. For more on Lysenko and Lysenkoism, see Nils Roll-Hansen, The Lysenko Effect: The Politics of Science (Amherst, NY: Humanity Books, 2005); Valeriĭ Šoĭfer, Lysenko and the Tragedy of Soviet Science (New Brunswick, NJ: Rutgers University Press, 1994).

\textsuperscript{52} Medvedev, Kto sumasshedshii?, 24.
offenders, but also to provide a forum where their deviant behavior could be candidly discussed and where dissidents could be persuaded to mind their behavior in the future. Despite the fact that the authorities always addressed dissidents from a position of power, mental hospitals became a site of negotiation between political malcontents and the authorities, where the two sides negotiated the boundaries of acceptable and unacceptable behavior.

While internment in a public, “regular,” psychiatric hospital forced dissidents and others to endure months of hardships and deprivation of freedom, they managed to take solace in the fact that the authorities decided not to send them to a special psychiatric hospital where their situation would have been undoubtedly worse. During his first night of treatment, Mal'tsev consoled himself “with the thought that I had landed in Kashchenko, and not in a spetshospital, where they usually harass politicos. I had heard many horrible things.”53

According to KhTS, the first SPB existed in Kazan before the German invasion of the Soviet Union in 1941; the exact year of its founding is unknown. Following the war, the state established a special “colony” for criminals suffering from psychiatric illnesses in the city of Sychëv in Smolensk oblast, and in 1952 a SPB opened in Leningrad (it was often referred to by its address, 9 Arsenal'naia street). In the late 1960s, SPBs began to proliferate with the establishment of new institutions in Cherniakhovsk in Kaliningrad oblast (1965), in Minsk (1966), and in Dnepropetrovsk (1968). 54 KhTS describes the psychiatrists and doctors at these institutions as employees of the MVD55, under whose jurisdiction the SPBs operated, and

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53 Mal'tsev, Reportazh iz sumasshedshego doma, 37.
54 Sud'ba inakomyshlennykh psikhicheskikh bol'nymi,” Khronika Tekushchikh Sobitiï 8 (30 June 1969), 14.
55 Ministry of Internal Affairs, in charge of the Soviet Union’s police force.
emphasized that the staff considered the patients to be inmates. The Chronicle states that only the politicals and the chronically mentally ill who, in the opinion of the KGB, “presented the greatest danger” to society, were sent to these sites.56

Unlike hospitalization in a public mental hospital, internment in a SPB never began unexpectedly with a knock on the door. Dissidents unfortunate enough to be checked into one of the USSR’s special psychiatric hospitals first needed to be charged with a crime.57 Once that was done, the state investigator could request that the accused undergo a psychiatric evaluation to determine whether or not he or she was “mentally competent” to stand trial and accept responsibility for the crime with which he or she had been charged. This did not require the permission of either the prosecution or defense.58 If the examining psychiatrists then found the accused to be “mentally incompetent” to stand trial, the presiding judge could exercise the option to send the accused to a psychiatric hospital, public or SPB, for treatment. Thus, while the transgressions formally spelled out in legal proceedings that resulted in dissidents being ordered to SPBs for compulsory treatment are unambiguous, the question of why the state decided to declare them mentally ill, rather than try them in court and sentence them to a more orthodox punishment, such as a prison sentence or hard labor, is a question worth exploring.

Dissidents tended to speculate that commitment to a SPB spared the state any embarrassment that a trial could potentially provoke. “The simplest means of assuring that a

56 “Sud'ba inakomysliashchikh, ob"iavlennykh psikhicheski bol'nymi,” 14.
57 There were some rare exceptions to this rule. KhTS reported the case of a certain “Vladimir,” who was detained and severely beaten by police who mistook an epileptic seizure as a symptom of drunkenness. He somehow ended up at Kazan SPB after his wife threatened to bring a criminal case against the officers involved. It is unknown how this case was resolved or how long Vladimir spent at Kazan SPB. This case, and others like it, seem to be the result of panicked or otherwise disorganized impromptu decision making and a serious deviation from the normal procedure of the security organs. See, “Kazanskaia Spetspsikhbol'nita,” Khronika Tekushchikh Sobitiĭ 10 (31 October, 1969): 27-28.
58 See article 58 of the Criminal Code of the RSFSR, “Primenenie prinuditel'nikh mer meditsinskogo kharaktera k dushevnobol'nym,” reprinted in Artemova, Kaznymye sumasshestviam, 498.
person does not stand trial,” wrote Natal’ia Gorbanevskaia, the founder and first editor of KhTS and prominent political dissident, “is to declare him mentally incompetent.” Reflecting on the process that followed the arrest of her and seven others who openly demonstrated against the Soviet occupation of Czechoslovakia on 25 August 1968, she even stated her “surprise” that “they did not decide to declare all seven mentally incompetent, to declare the demonstrators ‘a group of crazies’: who the heck (kto zhe), besides lunatics, surrounded by shouts of unanimous approval will openly say ‘no.’” She concluded that the Soviet authorities needed some of the participants to stand trial “in order to preserve a degree of transparency, lawfulness, and openness” in their response to the protest.

The Soviet government possessed good reason to be wary of high profile trials of its political opponents. The show trials of dissidents in the late 1960s, particularly the Sinyavskiĭ-Daniêl’ trial, proved to be one of the foundational influences of a new generation of Soviet dissidents, sometimes referred to as the “generation of 1966,” which demonstrated increasing disillusionment with the viability of the Soviet system and a willingness to openly defy it. Nathans argues that the arrests of Sinyavskiĭ and Daniêl' marked the “transition to the civil rights phase of the [dissident] movement,” with thousands of individuals protesting against the arrests,


60 Ibid., 291-92. Of the eight arrested five (Larisa Iosifovna Bogoraz, Vadim Nikolaevich Delone, Pavel Mikhailovich Litvinov, Vladimir Aleksandrovich Dremliuga, and Konstantin Iosifovich Babitskii) were found guilty and sentenced to various terms of exile and/or hard labor that ranged from two years and ten months to five years. Viktor Isaakovich Faïnberg was declared mentally incompetent and did not stand trial. Tatiana Baeva convinced KGB agents she accidentally found herself in the midst of the protest and was released. Gorbanevskaia had recently given birth and was not tried. Although she was rearrested in 1969 and sent to Kazan SPB. For more on the trial of the demonstrators, see Gorbanevskaia, Polden’. For information on the second arrest and subsequent hospitalization of Gorbanevskaia, see “Sud nad Natal’ei Gorbanevskoi,” Khronika Tekushchikh Sobitiĭ 15 (31 August, 1970): 2-10.

61 Ibid., 292.

62 Term coined by dissident intellectual Andreï Amalrik.

63 Boobbyer, Conscience, Dissent and Reform in Soviet Russia, 75-6.
lack of transparency, and subsequent trial. The subsequent round of arrests and firings suffered by the protesters “sparked a chain reaction of further protests, more arrests and trials, and new rounds of protests.” In contrast to cases in public psychiatric hospitals, SPBs concealed from the public eye cases that could spark domestic unrest or provoke the wrath of foreign public opinion. The state used SPBs as a means of controlling information rather than as a tool to persuade dissidents to reform their behavior.

Returning to the 25 August 1968, demonstration on Red Square, there is the question of why, out of all the participants, the state decided to declare “incompetent” only Faĭnberg. The logic seems clear. The KGB agents on Red Square severely beat Faĭnberg, knocking out several of his front teeth. He also received a “cerebral concussion.” The court that declared Faĭnberg incompetent sat in session without him present. More than likely they had no wish to display the outcome of his beating. As for Gorbanevskaia, she had recently given birth, and as a result was released the same day as her arrest as she needed to breast feed her child. However, like Faĭnberg, the authorities ordered her to undergo psychiatric analysis at the Serbskiĭ Institute, the country’s principle center of forensic and judicial psychiatry. As with Faĭnberg, this decision demonstrates the Soviet Union’s concern with its image. The trial of a new mother was not something the authorities wanted to broadcast. Ultimately, the state released Gorbanevskaia with

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66 Gorbanevskaia, Polden’, 292.
67 Ibid., 55.
68 Ibid., 73.
the ambiguous diagnosis of “possible sluggish schizophrenia.” This conclusion spared the state the embarrassment of punishing Gorbanevskaia but provided documented medical cause to pursue her case in the future. Gorbanevskaia, who continued to be an important member of the dissident community and a prolific generator of samizdat materials, was rearrested in 1969 and sent to the Kazan SPB.

One discernible pattern among instances of citizens charged with crimes and declared incompetent is that they rarely were present during court proceedings. A declaration of mental incompetence would have nominally justified their absence and avoided the possibility of open defiance or the embarrassment of visible harm either self-inflicted or the result of beatings. Such was the case in the trial of Leonid Pliushch.

Leonid Ivanovich Pliushch, a mathematician and engineer employed by the Cybernetic Institute at the Ukrainian Academy of Sciences until 1968, once dreamed of working for the KGB, but in the 1960s he became deeply involved in dissident activity and the human rights movement. Pliushch is best known for penning a letter to the newspaper Komsomol'skaia Pravda harshly criticizing the 1967-68 trial of fellow human rights activists Iuriĭ Timofeevich

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69 Ibid., 75; Sluggish (or “slow flow” schizophrenia is a theorized type of schizophrenia or in milder cases psychosis that is usually latent and affects only a person’s social actions. The progression of the illness is very slow, and therefore patients may be symptomatic or asymptomatic. The disease may require intensive treatment or no treatment at all. Because of the ambiguity of the illness, many theorized that it was invented solely to be used as a repressive instrument. Indeed, many of the individual hospitalized for political reasons were diagnosed as suffering from some variant of sluggish schizophrenia. For more on sluggish schizophrenia, see Paul Calloway, Russian/Soviet and Western Psychiatry (New York: John Wiley & Sons, 1993), 150-6.

70 See “Sud nad S'atal’i Gorbanevskoi.”

71 In this era the Soviet Union made a concerted effort not to try people openly who committed acts of self-harm or attempted suicide based on political motives. For example, see the case of Il’ia Rips, a Latvian student who self-immolated in protest of the Soviet Union’s refusal to allow Jews to emigrate to Israel on 13 April 1969. He was declared not responsible for his actions and sent to a public mental hospital for compulsory treatment. See “Sud’ba inakomysliashchikh, ob"avlennych psikhicheskoi bol’nym,” Khrontikha Tekushchikh Sobitiĭ 8 (30 June, 1969): 31. Also see the case of the student, a certain Bopolov, who threw himself into the Moscow River after his expulsion from the Komsomol for writing a letter criticizing Soviet actions in Prague. See Artemova, Kaznymye sumasshestviem, 19.

72 Pliushch, Na karnavale istorii, 19.
Galanskov and Alexander II'ich Ginzburg, which directly resulted in his firing, and for his participation in the Initiative Group for the Defense of Human Rights in the USSR.\(^{73}\) In January 1972 the authorities arrested Pliushch and charged him under article 62 of the Criminal Code of the Ukrainian SSR concerning anti-Soviet agitation and propaganda with the goal of subverting the government.\(^{74}\) While he was in prison the court twice ordered Pliushch to undergo a psychiatric evaluation.\(^{75}\) The two examinations, performed respectively by the co-chairs of inpatient forensic society at the Serbskiĭ Institute Professor Daniil Romanovich Lunts and Academician Andreĭ Vladimirovich Snezhnevskiĭ, resulted in a diagnosis of schizophrenia and chronic mental illness. In January 1973, one year after his arrest, Pliushch was charged with signing a critical letter sent to the United Nations as a member of the Initiative Group and sentenced to undergo compulsory treatment at Dnepropetrovsk Special Psychiatric Hospital.\(^{76}\)

Although Pliushch found himself at a SPB for an ostensibly medical reason, as was the case with Mal'tsev, Nikolaev and Medvedev, the staff never made any effort to conceal that their primary concern rested on his political views. His doctor, Ėlla Petrovna Kamenetskaia, after briefly examining him upon his arrival, commented, “No matter, we’ll soon cure [you] of your delusional politics.” Pliushch protested, “But you still don’t know anything about my case!”

\(^{73}\)“Protesty v sviazi s protsessom,” *Khronikha Tekushchikh Sobitiĭ* 1 (30 April 1968): 7. Galanskov and Ginzburg were tried alongside Alekseĭ Aleksandrovich D’rovol’skiĭ and Vera Iosifovna Lashkova for anti-Soviet agitation and propaganda in connection with the publication of the samizdat journal *Feniks* (Phoenix) and the publication abroad of the *White Book*. Colloquially known as the “Trial of the Four,” the case became one of the most famous Soviet political trials of the Cold War era. For more on Galanskov, Ginzburg and the Trial of the Four, see Yuri Feofanov and Donald D. Barry, *Politics and Justice in Russia: Major Trials of the Post-Stalin Era* (Armonk, NY: M.E. Sharpe, 1996).


\(^{75}\)Pliushch, *Na karnavale istorii*, 562; 573-74.

\(^{76}\)“Delo Leonida Pliushcha,” *Khronikha Tekushchikh Sobitiĭ* 29 (31 July 1973): 34.
dismissively replied, “Academician Snezhnevskii knows. He never makes mistakes.” Here Kamenetskaia not only is transparent in her desire to treat his political transgressions rather than any form of “schizophrenia,” but she also illustrates the importance of hierarchy in SPBs, by communicating to Pliushch that she has no interest in contradicting the findings of doctors holding positions in the upper echelons of the Ministry of Health, and also by stressing that Snezhnevskii’s diagnoses were essentially orders, “He never makes mistakes.”

Some dissidents argued that the authorities designed political psychiatry to act not only on individuals, but on society at large. In addition to avoiding any potential embarrassment in connection with forcing dissidents to stand trial, Valeriia Novodvorskaia argues that “psychiatric terror” served as a “weapon” to fulfill two practical goals. Writing in 1993, while running in the Russian legislative elections of that year, and reflecting on her own imprisonment in Kazan SPB for handing out poems satirically thanking the party for a number of crimes, she states that political psychiatry served both an international and domestic purpose for the government. Internationally, it “preserved the monolithic image of the Soviet people, who passionately believed in their leaders and ideals.” As she points out, the appearance of too many domestic enemies “would have blown up this conception.” But there was no need for the government to provide an explanation for the presence of disturbed people, “In the West there are also plenty of crazies.” Domestically, Novodovorskaia contends that hospitalization “discredited alternative ideas of societal development and the opposition in the eyes of the general population (prostoĭ narod).”

Novodovorskaia’s analysis provides a level of logic to speculation that the program was in place to avoid placing certain dissidents on trial. As she asserts, while the West had cause to

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77 Pliushch, Na karnavale istorii, 590.
78 Novodovorskaia, Po tu storonu otchaiania, 49 j
protest the lack of political liberties—present in their own nations—it would be ridiculous to suggest that the USSR was the only nation that committed the mentally ill. This program also did help to preserve the integrity and centrality of Communist party ideals. While alternatives to communism may have appealed to a percentage of the Soviet population, people are naturally much less likely to perceive the ideas of mental patients as credible.

Although Public and Special Psychiatric Hospitals served different purposes, it is possible to see similarities between the two institutions. They both aimed to stifle political opposition, to guard the international reputation of the USSR, and to discredit challenges to the primacy of communism and the Communist party. To this end, the staff at both types of institutions displayed a willingness to discuss dissidents’ political views and actions without the disguise of medical treatment or necessity. However, “treatment” proceeded differently at the two categories of hospital. What were these differences? How did doctors at public mental institutions and SPBs hope to act on and influence dissidents in their charge? What strategies did dissidents employ to mitigate their hardship? An examination of the discussion of daily life and treatment in memoir accounts helps to reveal the goals of psychiatric treatment of political dissent, as well as the methods for accomplishing those objectives, in the eyes of dissidents subjected to involuntary hospitalization.

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79 Pliushch claims that provincial authorities were far less hesitant to severely punish dissident behavior than their counterparts in major urban areas such as Moscow, Leningrad, and Kiev. In his opinion, behavior that would at worst land an individual in a public mental institution in a city could see them sent to a SPB or labor camp in the provinces. See Pliushch, *Na karnavale istorii*, 603.
IN THE MENTAL WARD: NEGOTIATIONS, IDENTITY, AND PSYCHIATRIC VIOLENCE

The Soviet Union’s program of punitive psychiatry served as the site of some of the only prolonged and direct contact between dissidents and the state. While similar interaction between political oppositionists and authorities took place in prisons and camps, the relations between the two sides in public psychiatric hospitals constituted a dialogue, shaped by power relations between the two sides and a hierarchy of authority. Therefore, each side sought to negotiate from a position of strength. This is a prominent theme in dissident accounts.

In the eyes of dissidents interred in public mental institutions, doctors saw their purpose as addressing unacceptable, although legal, behavior, and ensuring that the individuals in question acknowledged and agreed to abide by the boundaries of acceptable political behavior in the future. Unlike the GULAG system and other Stalinist forms of punishment that endeavored to provoke a “spiritual change” in the minds of its opponents and win them over to communism, punitive psychiatry primarily addressed conspicuous behavior and displayed little regard for changing dissidents’ disposition toward the Communist party.\(^8^0\) In this regard the hospital staff aimed to provoke a superficial change. Soliciting their patients’ cooperation, the public psychiatric hospital became the setting for a prolonged negotiation between the state and

committed political dissidents, although the authorities always possessed far more chips with which to negotiate.

The first step in the process of negotiations was always the “arrest” and involuntary commitment of the individual. This show of force reminded the arrestee that the authorities determined how the law operated and that the increasingly popular “legalist” philosophy of dissent that stressed interpreting Soviet law literally and holding the authorities accountable to it, would not serve them well while under psychiatric supervision.  

Doctors and police brushed off any mentions of the unlawfulness of the arrests and commitments. Iuriĭ Mal'tsev interrogated the head doctor at Kashchenko upon his arrival:

“If I am not mistaken,” I said, “According to the law you can only involuntarily commit ill people with violent tendencies, who present a danger to those around them.”

“You are mistaken,” he said.  

The police similarly rebuffed Zhores Medvedev’s assumptions. Refusing to take his place in the police car summoned to escort him to a psychiatric evaluation, Medvedev chastised the officer for forcibly entering his home, “If you are a police major, you should know the laws about the sanctity of a citizen’s domicile. After all, the police are an organ of security, order, and lawfulness.” The major answered, “We are an organ of force!” and even “slammed his fist into his chest.” While keen to establish that they acted from a position of power, the tone of the authorities softened dramatically once “treatment” actually began.

Dissidents believed their commitment was connected to their political activities. And even in the case of some, such as Zhores Medvedev, who refused to offer an explanation for their

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81 See Nathans, “The Dictatorship of Reason.”

82 Mal'tsev, Reportazh iz sumasshedshego doma, 37.

83 Medvedev, Kto sumasshedshi, 29.
supposed “illness,” doctors did not hesitate to steer their interrogation in a political direction. Thus, from the start, both doctors and patients accepted political deviance as the reason for the dissidents’ hospitalization. Importantly, by volunteering political explanations for their compulsory psychiatric evaluations, dissidents participated in their diagnosis. In these instances both parties agreed that the patients’ dissident activities were the reason they “required” psychiatric treatment. Thus, the diagnosis appears mutual, rather than unilaterally decided by the state. In the case of Zhores Medvedev, the state went one step further in order to ensure his complicity in his treatment. The head doctor of Kaluga Psychiatric Hospital A. E. Lifshitz appeared at his apartment accompanied by several police officers and suggested that it was in Medvedev’s best interests to “voluntarily appear for a psychiatric evaluation.” Although he refused, it is clear that, from the beginning stages of the process of committing dissidents, the state sought cooperation from its political opponents and strived to cultivate an image of acting in concert with them as opposed to one-sidedly working against them.

The staff of public psychiatric hospitals in the Soviet Union possessed a number of means of encouraging dissidents to cooperate. Their greatest tool in that regard was time. Only a commission of three doctors, usually chaired by a representative of the Serbskiĭ Instititure, held the power to discharge patients. Deterioration or even lack of improvement in an individual’s “condition” could lead to a prolonged stay at the hospital if the presiding doctors believed that releasing the patient was not in his interests. Therefore, it behooved patients to cultivate the impression that treatment was positively affecting their “illness,” especially since, unlike prison

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84 Ibid., 22.
or camp sentences that are completed after a set period of time, hospitalization could be indefinite.

Although Soviet law mandated that involuntarily committed patients be evaluated by a panel of three doctors within twenty-four hours after their hospitalization, this meeting often did not take place until weeks after an individual’s commitment. Citing *Legal Regulations on Public Health,*\(^86\) the first issue of KhTS reported that although, “upon arrival at the hospital within twenty-four hours the individual should be examined by a commission of three people,” that did not occur in the case of [Aleksandr Sergeevich Esenin-] Vol'pin, nor in the case of Gorbanevskaiia.”\(^87\) In fact, of the sources I examined, with the exception of Zhores Medvedev’s case, there is not a single mention of any of these dissidents meeting with a commission within twenty-four hours of their arrival. Mal'tsev and some of his fellow patients even compared the delay in his hearing to Samuel Becket’s play *Waiting for Godot,* the implication being that “Professor Godot” would never arrive.\(^88\) However, the authorities typically subjected malcontents to hospital life for one to three to four months. This provided dissidents with a taste of what could result from future transgressions, and as people who now possessed a record of psychiatric treatment, they could easily be recommitted at the state’s pleasure.\(^89\)

Dissident accounts of their period of confinement agree the authorities hoped to find common ground with their patients and that their daily life was loosely structured and relatively

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\(^{86}\) KhTS refers to the collection (sbornik) *Zakonodatel’stvo po zdravoookhraneniium* published in Moscow in 1963. However, despite repeated efforts I cannot find a citation for this work. See “Repressii v sviazi s protestami,” *Khronika Tekushchikh Sobitiĭ* 1 (30 April, 1968), 10.

\(^{87}\) “Repressii v sviazi s protestami,” 10.

\(^{88}\) Mal’tsev, *Reportazh iz sumasshedshego doma,* 58.

comfortable. Zhores Medvedev refers to this as “the liberal period” of hospitalization, during which the staff allowed patients to receive guests, including other well-known political dissidents, and also allowed them access to the hospital library, television room, film screenings, and other privileges. The doctors likewise tried to make the impression that they considered themselves on the same side as their patients and used the various privileges at their disposal in an attempt to generate a rapport with their subjects.

Managing to meet with a doctor, Konstantin Maksimovich, on his second day at the hospital, Iuriĭ Mal'tsev recounted the psychiatrist’s surprise at the fact the staff had initially settled his charge in the “loud ward” of the hospital. He promised Mal'tsev an immediate transfer to the “peaceful ward,” as the doctor already ascertained that he was a man of “sound judgment (zdravomysliashchiĭ).” He further assured Mal'tsev that he believed there were no political motivations behind his hospitalization, and he saw no obvious signs of mental illness in him, “But, you understand, I don’t decide that question alone.” This deferential behavior is notable. There was a concrete effort to be friendly with dissident-patients, possibly in part because both doctor and patient considered themselves members of the intelligentsia and therefore comrades of a sort, but undoubtedly the efforts of doctors to solicit cooperation played a role in the respect they showed to patients. It also speaks to power relations, as patients such as Mal'tsev, despite being suspect, still legally retained their political rights and as such needed to be handled politely and could not be treated as a prisoner.

90 Medvedev, Kto sumasshedshiĭ, 101; For an example of access to guests, see Mal'tsev, Reportazh iz sumasshedshogo doma, 51; For an example of access to various privileges, see Nikolaev, Predavshie Gippokrata, 30.

91 Colloquial term among dissidents and other hospital staff and patients; see Nekipelov, Institut durakov, 30.

92 Mal'tsev, Reportazh iz sumasshedshego doma, 43.
Such polite relationships contrasted sharply with the treatment the staff displayed toward the genuinely and seriously mentally ill. Mal'tsev recounted the “treatment” one attendant handed out to a Tartar who refused to stop shouting in the middle of the night: “I thought that you were a person, but turns out you are a piece of shit. Now you’re going to get a shot of sulfozinum,” (a sulfur based drug used exclusively in Soviet psychiatry and famous for its painful side effects).\textsuperscript{93} Dissidents in psychiatric hospitals found themselves suspended somewhere in between the world of the doctors and the chaos of the “loud ward.” The fact that the doctors controlled which world they found themselves in took a psychological toll on many dissidents, leading them to believe that even if it was vile to them to cooperate, they possessed no choice in the matter. Mal'tsev chose to cooperate. During his exit interview, he made it clear that he decided to do so solely for pragmatic purposes:

“Tell us, have you now abandoned your idea of leaving the country?”
“I’ve dismissed that idea as unrealistic and impractical,” I answered.
“But you would still like to go to Italy, isn’t that so?”
“Of course. It’s the completely natural desire of a person who dedicated many years of his life to the study of Italian language and Italian culture.”\textsuperscript{94}

The medical service colonel conducting the interview dismissed Mal'tsev without further comment on the subject.\textsuperscript{95} Mal'tsev was discharged from Kashchenko on 18 October 1969, one month and one day after his admission to the hospital.

\textsuperscript{93}Ibid, 41.
\textsuperscript{94}Mal'tsev, \textit{Reportazh iz sumasshedshego doma}, 70.
\textsuperscript{95}Ibid., 70-71.
Another tool at the disposal of the authorities was their manipulation of the daily routine of life in a psychiatric hospital. Following a schedule prescribed by the authorities—when to eat, when to sleep, what pills to take, etc.—demonstrated an ability and willingness to cooperate with the state even if not all patients demonstrated awareness of that scenario. Judging by Evgeniĭ Nikolaev’s account of his first hospitalization at Moscow City Hospital no. 15, his tendency toward insubordination and his unwillingness to cooperate with Communist party organs weakened his confinement. Despite standing his ideological ground, Nikolaev generally followed the instructions of his doctors and nurses, took (or at least feigned taking) the pills prescribed to him, and “always” voluntarily attended hospital cultural outings (kul’tpokhody). Even though he claimed to do so only owing to a lack of anything better to do and because of the rare chance to escape the hospital grounds, this behavior nonetheless marked a conspicuous retreat from his outright refusal to participate in subbotniki and other cultural programs at the VNIIDiS.96 Following four months at the hospital, the staff deemed Nikolaev’s progress sufficient enough to release him, but designated him a “type II invalid” for one year to prevent him from working and ordered him to maintain certain routines including taking prescribed medicine and keeping regular appointments at a treatment center (dispanser).97

Upon his release his doctor, Liudmila Grigor’evna, reminded Nikolaev, in no uncertain terms, that his release was conditional:

Taking your medicine is compulsory. Visiting the treatment center is compulsory. And don’t even think about expressing your political views anywhere. Otherwise you’ll again be committed to a psychiatric hospital. And don’t complain to any person or place. I read your complaint to the administration of the institute on the subject of your dismissal from work. They can also commit you to

96Nikolaev, Predavshie Gippokrata, 30.
97Ibid., 31.
a hospital for such complaints. I likewise advise you not to practice politics in order to avoid future visits to the hospital.\(^98\)

Here, the doctor’s admission not only served as an attempt to influence Nikolaev’s future behavior, but also constituted a power play—the authorities could, and were willing to, use psychiatry to address political dissent even if such dissent was permitted by the constitution of the Soviet Union. The fact that Liudmila Grigor’evna admitted as much to Nikolaev suggests that the Soviet Union’s abuse of psychiatry was an open secret.

As Nikolaev himself would later discover, this was not unfounded advice.\(^99\) The authorities could deprive a former mental patient of his freedom ad infinitum as long as he continued to violate the boundaries of acceptable behavior. Although the doctors refused to inform Mal’tsev of his diagnosis, he convinced a nurse to communicate it to him, “Psychopathy. Keep under observation of the district psychiatrist.” He came to a similar conclusion as Liudmila Grigor’evna, “It means, that going forward any given day they can once again lock me up in a mental hospital.”\(^100\) The potential for future hospitalization thus acted as a check on dissidents’ behavior after they left the controlled environment of the hospital.

A number of dissidents were morally opposed to cooperating with the psychiatric organs to which the state subjected them. As Boobbyer asserts, dissidents of the late 1960s and 1970s were guided by the principal “that the consequences of people’s actions should not be the ultimate guide for their behavior, but that conscience was a superior arbiter.”\(^101\) Dissidents viewed political psychiatry as especially heinous because it attempted to eliminate their right to a

\(^{98}\)Ibid., 32.

\(^{99}\) Nikolaev was rehospitalized in February 1974 after continuing to protest his hospitalization and the politics of the Communist party. See Nikolaev, Predavshie Gippokrata, 98.

\(^{100}\) Mal’tsev, Reportazh iz sumasshedshogo doma, 70.

\(^{101}\) Boobbyer, Conscience, Dissent and Reform in Soviet Russia, 91.
conscience, to destroy their individuality. Valeriia Novodvorskaia evocatively summarized this perspective:

> Psychiatric terror is an absolute victory for evil. If you yield, they break you. There is no individuality. If you resist, they will destroy your individuality chemically or mechanically (say electrically [shock therapy]). And there can be no victory because no individuality remains: victory can be celebrated only when there is a PERSON (komu) to celebrate it.”

Dissidents expressed real concern over preserving their ethics, morals, and individuality and often refused to compromise them even in the case of intense hardship. As Nathans points out, there is a conspicuous absence of “dissident text[s] criticizing either the theory or practice of the USSR’s elaborate system of socialist rights guaranteed by the state.” Dissidents believed they were fighting for rights entitled to them under Soviet law. Esenin-Vol'pin describing how the paramedic who escorted him to Moscow City Psychiatric Hospital no. 5, advised him not to voice his principles and to cooperate with the doctors, conceded, “I considered his advice completely practical.” However he also found it to be “wishy-washy (presmykatel'skim),” and proudly remarked, “I always avoided following that type of advice and did so very transparently.”

Victor Feinberg even refused to feign cooperation as a formality to expedite his previously agreed upon release and emigration to Israel, the result of a prolonged hunger strike that endangered his life and sparked widespread domestic and international outrage. After his transfer from the Leningrad SPB to the Fifth Civil Mental Hospital, a public institution, the doctors there informed Feinberg that they planned on advocating for his release, but in order to

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102 Novodvorskaia, *Po tu storonu otchaianiia*, 49.


do so they needed to demonstrate “an improvement in his condition.” This required demonstrating “a course of treatment.” “They then asked me to choose my own treatment, offering to prescribe any drugs I liked. They even offered to throw away the drugs as long as it could be said that I had a course of treatment. I refused all these offers.” “He can’t be bent,” his wife told them. Eventually they abandoned efforts to solicit his help “and did their best to get rid of me.” Feinberg’s threat of a second hunger strike, which the doctors believed could result in his death, convinced the KGB to consent to his expedited release. More often than not, however, noncooperation resulted in extended hospitalization.

Zhores Medvedev never managed to cultivate the type of superficially friendly relationship with his doctors the way Mal'tsev and Konstantin Maksimovich did or even the begrudging mutual tolerance Nikolaev and Liudmila Grigor'evna showed to each other. Although Dr. Lifshits provided him with the impression that the hospital wished to hold Medvedev for a minimum amount of time—three days—he claimed that he was unwilling to compromise his integrity in order to ensure his quick discharge. Greeting the commission with the defiant words, “the masquerade is over,” he “attempted to calmly answer” a number of questions about his work that had been published abroad, as well as various incidents at his places of work spanning back as far as five years previous. He repeated the exercise with a larger commission two days later. In both cases he insisted that he committed no illegal


106 For more on Faĭnberg’s hunger strike, see See “Golodovka Borisova i Faĭnberga,” Khronika Tekushchikh Sobitiĭ 19 (30 April, 1971): 9-13


108 Medvedev, Kto sumasshedshii, 68; 71.
actions. His unacceptable answers, coupled with his repeated violations of the hospital regiment, convinced the commission to detain Zhores Medvedev at the hospital. Thus, Lifshits demonstrated that, while he could not force Medvedev to cooperate, he possessed the authority to detain the dissident as long as he continued to prove unwilling to engage in any meaningful dialogue.

Although Medvedev claimed that his treatment became increasingly harsh, he makes no mention of violence or psychical abuse or even an unnecessary course of treatment. Rather, he asserts that the conversations with doctors became franker and they stopped veiling their threats:

“What sparked Solzhenitsyn’s problems?” Bondareva [(another doctor at Kaluzhskiaia Psychiatric Hospital, first and patronymic unknown)] asked suddenly.
“What does that have to do with me?” I answered with a question.
“Oh don’t start (chto vy), I’m asking not as a doctor, I’m simply asking.”

About a week before his discharge, the administration bluntly warned Medvedev, as Liudmila Grigor’evna had cautioned Nikolaev, to discontinue his political delinquency: “You should completely quit the practice of publishing and concentrate your attention on scientific work. If you continue that activity, you will inevitably end up with us again.” By 17 June 1970, the day of Medvedev’s release, the situation had changed dramatically. A shaken and apologetic Dr. Lifshits shook Medvedev’s hands and begged him above all “not to write any notes about [his]

\[^{109}\text{Ibid., 72.}\]
\[^{110}\text{Ibid., 81.}\]
\[^{111}\text{Bonadreva is alluding to the crackdown on dissident writer Alexander Solzhenitsyn—best known for One Day in the Life of Ivan Denisovich and The Gulag Archipelago. Beginning in the mid-1960s the KGB harassed Solzhenitsyn for producing anti-Soviet literature that exposed transgressions of the Soviet system. He was expelled from the Writers’ Union on 12 November 1969, a few months before Zhores Medvedev’s hospitalization.}\]
\[^{112}\text{Medvedev, Kto sumasshedshii?, 105.}\]
\[^{113}\text{Ibid., 106.}\]
time in the Kaluga hospital.\textsuperscript{114} Zhores credited his sudden release to the efforts of his brother Roĭ to campaign on his behalf, highlighting an important element of the negotiations between dissidents and the state.

Dissidents, even in psychiatric hospitals, were not powerless against state repression. The dramatic turn in events in the case of Zhores Medvedev was the result of three weeks of coordinated efforts to secure his release spearheaded by his twin brother Roĭ. Responsible for half of the chapters in the co-written memoir, \textit{Kto sumashshedshī?}, Roĭ initiated a public awareness campaign and mobilized a number of prominent dissidents to call for Zhores’s release. Balancing his protest activities with frequent visits to the hospital, Roĭ informed a wide circle of people, including his brother’s acquaintance and famed Soviet nuclear physicist and human rights activists Andreĭ Dmitrievich Sakharov, who began writing letters and signing petitions.\textsuperscript{115} Roĭ also attempted to draw international attention to the case, at one point, along with Sakharov, targeting an international symposium on molecular genetics, where foreigners would be present, at the Institute of Genetics of the Soviet Academy of Science. Roĭ entered the hall where all the participants were already present and wrote in large letters on the blackboard: “A.D. Sakharov is in the auditorium collecting signatures to protest the internment of Zhores Medvedev in a psychiatric hospital.”\textsuperscript{116} Roĭ credits a widely circulated letter sent by Sakharov to Brezhnev calling for Zhores’s immediate release as the key to the protest.\textsuperscript{117}

\textsuperscript{114} Ibid., 113.
\textsuperscript{115} Ibid., 31
\textsuperscript{116} Ibid., 53.
\textsuperscript{117} Ibid., 86. For text of Sakharov’s letter, see Ibid., 84-86.
Over the next week the hospital was bombarded with telegrams and letters defending Zhores. These items “unnerved Lifshits.” Bondareva initially attempted to ignore them, arguing that it was not possible for him to have so many close acquaintances from the cultural and scientific elite and declared her intention of retaining him for a few more months. Barely ten days after Sakharov’s letter was distributed, however, the hospital agreed to discharge him. Lifshits and Bondareva wished Zhores the best of luck, ensured him that their concerns were purely medical, and that “for them the interest of patients was the highest concern.” The Medvedev brothers’ odyssey underlines the fact that dissidents possessed means of pressuring doctors and the state. Receiving daily letters of protests from household names intimidated doctors and likely forced them to consider whether retaining their patient was in their best interests. For the state security services, the benefits of hospitalizing one dissident were likely outweighed by the threat of an organized protest movement. Political psychiatry contained many elements of negotiation. Some dissidents managed to win the day by speaking from a position of greater power than their doctors—however, this was not usually the case and it is difficult to determine how representative Medvedev’s experience is.

Zhores Medvedev was not the only dissident to credit his release to the intervention of third parties. Mal'tsev noted that the administration permitted him to see visitors, including the well-known dissidents Petr Iakir and Iuliï Kim. He recounted that after their meeting one of them ran into a foreign journalist and his situation became known to the general secretary of the

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118 Ibid., 109.
119 Ibid., 110.
120 Ibid., 112.
121 Mal'tsev, Reportazh iz sumasshedshego doma, 51.
European Community of Writers (COMES), Giancarlo Vigorelli.\textsuperscript{122} Within a few days the doctors were shaking his hand, addressing the wannabe émigré as “comrade,” and the bureaucratic procedures necessary for his discharge had been set in motion.\textsuperscript{123} Likewise, returning to work after his release,\textsuperscript{124} Nikolaev’s coworkers informed him that his case had been mentioned in KhTS and the samizdat journal \textit{Posev}, and had been widely discussed.\textsuperscript{125} These three cases illustrate the power of publicity and international pressure to influence the state’s treatment of hospitalized dissidents. They also show that even in psychiatric hospitals, these considerations gave dissidents the ability to negotiate from a position of power if they cultivated the right connections, in some cases securing their release despite making no, or minimal, concessions, to the hospital administration regarding their political activities. This not only suggests substantial limits on the state’s ability to control information and enforce the country’s unwritten rules of political behavior, but also vindicates the government’s fear of the dissident movement.

Special Psychiatric Hospitals operated significantly differently. Their task was the long-term treatment and observation of violent and criminally inclined mental patients. This is evidenced by Leonid Pliushch’s language in \textit{Na karnavale istorii}. He refers not to patients, but to inmates and prisoners. Guards are interchangeable with doctors, nurses, and orderlies in his account. Doctors, in Pliushch’s narrative, contrary to their comparatively friendly counterparts at

\textsuperscript{122} Ibid., 52. Giancarlo Vigorelli was well acquainted with the Soviet literary community and expressed interest in the cases of Soviet authors persecuted for publishing abroad. See, Kozlov, \textit{The Readers of Novyi Mír}, 241-42.

\textsuperscript{123} Mal'tsev, \textit{Reportazh iz sumasshedshego doma}, 52.

\textsuperscript{124} Despite receiving an invalid certificate that was designed to prevent him from returning to work, Nikolave said that after he stopped talking his medicine, he felt “normal,” and decided to return to work anyway. How his superiors reacted to this is unclear. See, Nikolaev, \textit{Predavshie Gippokrata}, 33.

\textsuperscript{125} Ibid.
public institutions, acted like commandants of a concentration camp. The patients even nicknamed Pliushch’s first doctor, Élla Petrovna, Ilse Koch.126 Although Pliushch argues that the hospital’s most feared doctor, Nina Nikolaevna Bochkovskiaia, was worthier of that moniker,127 he depicts the latter as an unsympathetic sadist who interacted with patients only in order to dole out punishments. He recounted one of her typical appearances:

She rushed into the ward and in a cold, lifeless voice said:
“Petrov, you were swearing at the nurse again! Sulfates [sera]!”
“Ivanov, they say that you were masturbating.”
“And are there more dirty rumors about you, Sidorov?”
To everyone [she ordered] “New doses of antipsychotics (neiroleptikov)”.

Unlike in public mental hospitals, drugs were frequently used to punish politicals or otherwise to encourage them to cooperate. The staff as a whole proved unsympathetic to all patients, although politicals and genuine criminals (vory)—usually fakers trying to temporarily escape the prison next to the hospital, perceiving the conditions in the “madhouse” as preferable to those in prison proper—were generally afforded better treatment than the genuinely disturbed.129 One fellow patient warned Pliushch, “Everything’s mayhem here (that is complete unlawfulness). If you start to fuck with the doctors, nurses, or orderlies, you’re finished. They’ll kill [you] with medicine, the orderlies will beat [you] and not let [you] go to the bathroom. All politicals bite

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126 Ibid., 595. Ilse Koch, “the Bitch of Buchenwald,” was the wife of the commandant of Nazi Germany’s Buchenwald concentration camp. She was accused of ordering the execution of tattooed inmates in order to collect their skin. See William L. Shirer, The Rise and Fall of the Third Reich (New York: Simon & Schuster, 1990), 885.

127 Pliushch, Na karnavale istorii, 613.

128 Ibid., 615-16.

129 Some of the orderlies even apologized to Pliushch and other inmates for not allowing them tobacco during their first days in the hospital, “We didn’t know you were real criminals, we thought you were crazies,” see ibid., 593.
their tongues (*pomalkivaiut*), and you should too.”¹³⁰ In contrast to their public counterparts, the SPBs proved a living hell.

Patients possessed good reason to keep a low profile. The drugs prescribed at the hospital to politicals varied: “to some they give lighter ones, to others a little harder. Just hope they don’t give [you] haloperidol or thioproperazine (*mazheptil*).”¹³¹ The inhabitants of the hospital frequently witnessed the side effects of these drugs and quickly learned to fear them, especially haloperidol. In his memoir, Pliushch writes: “I see the effect of haloperidol on the inmates in quarantine. One is suffering convulsions, writhing all over. Unable to lie down, he stands up. His head twisted to the side, his eyes bulged. A second is panting, sticking out his tongue. A third is shouting, calling the nurse, asking for an antidote—medicine to combat the physical effects of haloperidol.” Pliushch notes, “It became clear that they give out so much haloperidol in order to instill fear, weaken the will to resist, and expose the fakers.”¹³² Pliushch portrays himself and his fellow prisoners as victims of psychiatric abuse and a regime of terror. In Dnepropetrovsk SPB the staff possessed all the power. Any breaking of the rules, including suicide attempts, were answered with beatings in addition to drugs.¹³³ His portrayal suggests that ultimately the only way to survive this living hell was, as his fellow captive suggested, to bite your tongue.

¹³⁰ Ibid., 591.

¹³¹ Ibid. Haloperidol and thioproperazine are still used to treat schizophrenia in western medicine despite the fact that they carry the risk of horrendous side effects, which in rare cases can include hypothermia, psychotic disorders, and sudden death. See Stefan Leucht, et al., “Comparative Efficacy and Tolerability of 15 Antipsychotic Drugs in Schizophrenia: A Multiple-Treatments Meta-Analysis,” *The Lancet* 382, no. 9896 (September 2013): 951-62.


¹³³ Ibid., 620.
Yet even among murderers and rapists, the staff considered politicals to be especially dangerous. They treated them cautiously, taking careful measures to ensure that they could not continue dissident activities within the mental ward. Unlike in public mental hospitals, the authorities in SPBs demonstrated a greater awareness of the potential for inmates to convey information to the outside world and this in turn could be used to pressure the Soviet government to release them—as in the case of Mal'tsev and Medvedev. Pliushch suggests that he escaped punitive doses of sulfates or haloperidol only because the administration feared his wife, who was allowed to visit Pliushch for the first time only during his sixth month at the hospital, and her potential to use any information about his treatment. Nonetheless, he still suffered prescribed doses of a number of antipsychotics. The staff also exercised a policy of separating politicals from one another, although in practice this was not always possible, and also discouraged other patients from associating with “socially dangerous” people such as Pliushch. He maintains that the doctors prescribed higher doses of haloperidol to inmates he engaged in regular conversation with as a means of discouraging them from socializing with him. Additionally, Pliushch complains of being frequently moved from ward to ward (some notorious for harsher treatment, others for being more relaxed). He reasons that these moves were not designed to punish or reward his behavior, but rather were the consequence of the movement of

134 Ibid., 597.

135 Ibid.

136 Tat'iana Pliushch, Zaiavlenie Prokuroru Dnepropetrovskoi oblasti USSR, 20 December, 1974, in Na karnavale istorii, 675-76.

137 Pliushch, Na karnavale istorii, 613.
other politicals. If another dissident was sent to his ward, the staff needed to move Pliushch elsewhere.

Pliushch’s representation of the hospital environment and policies suggests that both the state and the SPB authorities feared politicals. Perceiving dissidents as a volatile element in a controlled environment, the staff expressed anxiety over their potential to conspire, and thus endeavored to separate politicals. It appears that doctors also worried about the ability of dissidents to pollute the minds of other patients with their “detrimental politics,” and strived to separate them from the hospital’s “anti-Soviet” patients. As a result, politicals became a pariah caste within SPBs, isolated and handled with caution. This is reflected by the attitudes of nurses and doctors. Nurses complained that politicals were “yids, anti-Soviet and prevented the other patients from recovering.” Even some fellow patients, usually the genuinely mentally ill, occasionally berated Pliushch for his oppositionist politics (although he notes that “almost all the patients are on good terms with politicals and the majority of orderlies as well”). While he portrays most doctors at the institute as universally cruel regardless of their personal politics, he says of the doctor assigned to his case, Liudmila Alekseevna Liubarskaia, “she was not a sadist, just an idiot. She sincerely believed that a person who was throwing away his career, who was bringing hardship upon himself and his family, a mathematician who practices politics, is not

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138 Ibid., 597.
139 Ibid., 595.
140 Ibid., 613.
141 Ibid., 596.
142 Ibid.; Ibid., 595.
right in the head. ”143 Pliushch thus suggests that the medical staff believed dissidents represented a social danger and displayed no reluctance to treat them.

How did doctors attempt to neutralize their especially dangerous dissident-patients? First, doctors expressed a desire to keep dissidents in SPBs indefinitely. Pliushch argues that the medical staff interacted with him, scrutinized his letters, and monitored his behavior in an attempt to fish for symptoms of behavior that could be interpreted as a sign of mental illness. For example, Pliushch maintained his relationship with his son by writing fairytales and sending them to him because the boy requested that his father send him some stories. Élla Petrovna suggested this was indicative of infantilism and that “it could become good material for the history of [his] disease.”144 Pliushch was well aware of the fact that doctors could use virtually any of his behavior or written or spoken words to document “symptoms.” Interestingly, during Pliushch’s pretrial period spent in the custody of the Kiev KGB, his cellmate was a psychiatrist by profession, Feliks Lifshits. Lifshits advised him that his answers to the inquiries of psychiatrists should be “balanced”: “You can’t be cheerful, you can’t be downcast. You can’t be logical, you can’t be illogical.” But in response to Pliushch’s inquiry, “Well, isn’t too much ‘balance’ also abnormal?” Feliks conceded, “It’s possible.”145 Despite the fact that Pliushch describes inventing symptoms as an easy task, he acknowledges that the doctors, above all Nina Nikolaevna, proved talented masters of constructing an objectively convincing case for mental illness in politicals. “[She] studied my letters well and learned my weak points, and therefore occasionally succeeded in provoking me into an emotional outburst.”146 Therefore, doctors

143 Ibid., 620.
144 Ibid., 611.
145 Ibid., 563.
146 Ibid., 625.
scrutinized patients for behavior that could be portrayed as symptomatic of their disease, but also attempted to draw flashes of anger, and other demonstrative reactions, out of them in order to bolster the hospital’s case for further treatment, and custody, of their political inmates. The hospitals had no wish to release such dangerous elements back into society.

SPBs, in Pliushch’s narrative, also served the interests of the Soviet Union’s security agencies. Pliushch claims that his doctors frequently mined him for information on samizdat and other dissidents. He states that he steadfastly refused to provide any information, “Are you an investigator or a doctor? I’ll answer medical questions, but not investigative ones.” However, the doctors insisted that cooperation with some inquiries was the only way to secure freedom, “You will answer all of our questions, if you want to get out of here.”147 The promise of freedom or other concessions, such as a temporary escape from drugs, in exchange for information proved a tempting offer for some politicals, although an impressive number of them assert that they refused to give out any useful intelligence. Pliushch notes that visits from the KGB inevitably followed a productive interrogation and such appearances were not uncommon.148 Thus, there is evidence of an element of negotiation and dialogue in SPBs, but the power dynamic behind them were clearly far less malleable than in public psychiatric hospitals.

Pliushch mentions that each confession by a fellow political was a blow to his moral. None more so than the capitulation of Viktor Aleksandrovich Krasin and Petr Ionovich Iakir, founding members of the Initiative Group for the Defense of Human Rights alongside Pliushch and others. Following their arrest in 1972 they cracked under pressure and provided the KGB with an enormous amount of information about KhTS and samizdat in general. At their trial they

147 Ibid., 592.
148 Ibid., 618.
publically confessed to anti-Soviet activity and recanted, sparking one of the most “difficult moments for the human rights movement, and the Chronicle ceased to appear for a while.”\textsuperscript{149} Pliushch recounts that the impact of their actions on politica... words. Many couldn’t think, couldn’t speak.”\textsuperscript{150} From Pliushch’s reaction it is clear that breaking prisoners served a double purpose for the state, not only providing them with valuable intelligence but also a weapon to lower the morale of the dissident movement as a whole. Iakir and Krasin’s surrender forced Pliushch to question his faith in the human rights movement and fellow politica... I though that [Iakir] would sooner kill himself then betray his friends.”\textsuperscript{151} It was the low point of the dissident movement under Brezhnev.

How did dissidents react to this seemingly hopeless situation? Initially encouraged by stories he heard of earlier dissidents in SPBs, “very brave people,” Pliushch’s romanticized ideal of resistance to the bitter end was spoiled by conversations with fellow dissidents: “The politica... [my anti-Soviet actions] (just not in writing).”\textsuperscript{152} As Russian literature scholar Rebeca Reich points out, a diverse group of dissidents employing different approaches to their involuntary hospitalization all concluded that “those examined for political reasons were unlikely to alter their fate.”\textsuperscript{153}

Prominent Russian dissident Vladimir Bukovskii’ and Ukrainian dissident and psychiatrist Semën Gluzman formulated an approach to navigating the lawlessness and constant

\textsuperscript{149} Boobbyer, \textit{Conscience, Dissent and Reform in Soviet Russia}, 85.

\textsuperscript{150} Pliusch, \textit{Na karnavale istorii}, 616-17.

\textsuperscript{151} Ibid., 617.

\textsuperscript{152} Ibid., 595.

\textsuperscript{153} Reich, “Inside the Psychiatric Word,” 576.
behavioral scrutiny of institutional political psychiatry in their co-written piece, “A Manual on Psychiatry for Dissidents.” Bukovskii and Gluzman designed the “Manual,” completed in 1974, as a handbook for dissidents enduring compulsory psychiatric “treatment.” Originally published in the samizdat journal *Khronika zashchity prav v SSSR* in 1975 and dedicated to “Leonid Pliushch, a victim of psychiatric terror,” the manual advised dissidents that their best chance of escape was to feign mental illness and suggest that Soviet psychiatry was successfully curing them.\(^{154}\) A gradual demonstration of the adoption of correct political views and an improvement in symptoms (i.e. a disavowal of past dissident activity) served as the only means of receiving a discharge from a SPB, “In that and only in that is their hope of escape.”\(^{155}\) As Gluzman later stated, “Our text is frightening . . . precisely because it shows that it was impossible to defend oneself within this system of legal coordinates.”\(^{156}\) Thus, many dissidents in psychiatric hospitals realized that in order to ensure their freedom they needed to reach an agreement with the authorities and work within the parameters of a broken system.

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\(^{155}\) Ibid., 60.

\(^{156}\) Semyon Gluzman, interview, Kiev, 22 May 2009, quoted in Reich, “Inside the Psychiatric Word,” 575.
CONCLUSION: THE METHOD TO THEIR MADNESS

Why were these memoir accounts written? A close examination of these texts reveals a universal disillusionment with the Soviet system, in contrast to the dissident movement of the Khrushchev era that focused on reforming the system. It was beyond reform in the eyes of Brezhnev era oppositionists. As Philip Boobbyer asserts, the intellectuals of the Brezhnev period “saw the state as alien and predatory.”

Zhores and Roĭ Medvedev’s work privileged the theme of the revival of repression by highlighting the lawlessness of the current regime and by showing its dysfunctional attributes. They do so in two ways. First, by emphasizing his doctors’ interest in his expose of Lysenko, Zhores links the Stalinist era repression of ideologically incorrect scientific theories to his own persecution under Brezhnev. Second, Medvedev highlights the inability of the Soviet Union to function, according to its own laws. This theme runs throughout the work, from the policeman who claimed to represent “an instrument of force,” rather than “organ of security, order, and lawfulness,” to the numerous doctors, KGB agents, and others who allowed a sane man to be forcibly hospitalized.

Leonid Pliushch criticized the Brezhnev regime by depicting it as soulless and devoid of human values. He favors comparisons to Nazism and concentration camps over allusions to the

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158 Boobbyer, Conscience, Dissent and Reform in Soviet Russia, 2.
159 Medvedev, Kto sumashchedshii?, 29.
Stalin era as evidence by his frequent mention of the nickname “Isla Koch” that the prisoners applied to their female doctors. He argues that the Gestapo “influenced and inspired” the KGB “in brandishing the art of torture.” Pliushch gives additional power to this theme by recounting his conversation with fellow politicals who advised him to agree with any diagnosis and keep a low profile. He portrays a dissident community that viewed itself as largely powerless to stand up to the state that imprisoned them.

What Horvath writes about Solzhenitsyn can be applied to these accounts as well: they “confront the reader with routine dehumanization.” This is accomplished by implicitly showing that, if a person challenged the Soviet system through behavior, writing, or other conspicuous mediums the state did not consider him mentally competent. This theme is present not only in the authors’ descriptions of the confines of psychiatric hospitals, but also in events preceding the authors’ hospitalization. For example, Nikolaev’s claim that his institute refused to give serious weight to his scientific work because he refused to go to subbotniki and participate in the collective life of his workplace demonstrates everyday consequences for refusing to subscribe to official ideology. Perhaps an even more powerful example is Zhores Medvedev’s description of Dr. Lifshitz’s appearance at his apartment and demand that he appear voluntarily at Kaluga hospital for a psychiatric evaluation, in essence a request that he voluntarily participate in his own repression. These accounts succeed in creating an image of an authoritarian political system that would have reminded their audience of the Stalin era.

160 Pliushch, Na karnavale istorii, 609.
161 Horvath, The Legacy of Soviet Dissent, 16.
162 Nikolaev, Predavshie Gippokrata, 22.
163 Medvedev, Kto sumasshedshi?, 21-22.
These works also protest the nature of power relations in the Brezhnev era. While Medvedev’s and Mal'tsev’s claims that protest activity and foreign pressure helped to expedite their discharge suggest that dissidents possessed some means of pressuring the state, the works collectively suggest a grim future for Soviet dissidents. Leonid Pliushch’s especially disturbing account, along with Bukovskiĭ and Gluzman’s manual for dissenters in psychiatric hospitals, shows that, once charged with a crime, politicals saw little hope for altering their situation other than capitulation. In the late 1960s and early 1970s dissidents viewed themselves as a weak, albeit determined, movement with little realistic prospect of forcing any significant change in an increasingly repressive state.

The authors of these works claim that the system lacked any true believers. For instance, Mal'tsev’s *Reportazh iz sumasshedshogo doma*, emphasizes the absurdity of the Soviet system and failings of communism. He portrays his hospitalization as an elongated comedy—a type of charade that all the actors participate in, but that fails to fool anyone. Pliushch notes that even his mother, a devoted Communist who previously wrote to the KGB “that I was up to no good,” lost faith in the system when she visited him at the Dnepropetrovsk SPB. He recounts, “Finally my mother understood what Soviet power really is. Never before had she believed my stories about the life and methods of the Soviet bourgeoisie.”164 The masquerade was over.

It is important to remember that the story of political psychiatry—and the experience of its victims—is a Soviet story, and not just an anti-Soviet story. The narratives of each of the authors I examined stresses—to a palpable degree—the disconnect between the Soviet Union on paper and the reality of life under Brezhnev. On paper the USSR, with the most liberal constitution in the world and various political and economic rights and benefits promised to its citizens, was undeniably laudable. However, the state was constantly able to impose repressive

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164 Pliushch, *Na karnavale istorii*, 621.
measures on its citizens by either ignoring the letter of the law (i.e. not allowing universal freedom of religion) or its spirit (i.e. imprisoning political dissidents for psychiatric reasons). Navigating the difference between the limits imposed on Soviet citizens in reality and the country’s praiseworthiness on paper is part of what it meant to be Soviet.

While previous scholarship largely succeeded in capturing dissidents’ frustration with the Soviet system and the dehumanizing aspects of involuntary hospitalization, an examination of the memoirs of victims of Soviet political psychiatry likewise reveals that the program was decidedly more complicated than the works of Bloch, Reddaway, van Voren and other scholars who interrogated the topic during the 1970s and 1980s suggest. These studies focus primarily on the SPBs, emphasizing the abuse of prescription drugs and concentrating on how psychiatry was manipulated to produce the diagnoses needed to commit dissidents. In doing so, they overlook the difference between public and special psychiatric hospitals. A comparison of Pliushch’s narrative with the works of Mal'tsev, Nikolaev, and Medvedev show that, the two types of institutions “treated” two different types of dissidents and possessed different purposes. The accounts I analyze in this paper maintain that doctors at public mental institutions rarely kept dissidents for longer than four months and relied on “negotiating” with patients rather than stressing a course of drugs. This contradicts the findings of American psychiatrist Dr. Walter Reich who claimed, “Treatment [in the Soviet Union] emphasizes medication rather than talk.” Additionally, this paper demonstrates that even within mental hospitals the dialogue and power relations between dissidents and the authorities in mental hospitals was not wholly one sided. The dynamism of these negotiations is evidenced by the fact, that while an impressive number of dissidents refused to renounce their beliefs and ideals even under intense pressure,

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many surrendered to state demands during their hospitalization. The ability of an individual dissident to pressure the state usually depended on his or her domestic and individual renown and the outside networks and contacts available to them.

Despite his understanding of the flaws of the Soviet system, Mal'tsev capitulated, withdrawing his desire to emigrate as “unrealistic.”\textsuperscript{166} The memoir accounts I examine in this paper highlight the fact that, despite the universal knowledge that the Soviet state abused psychiatry, ignored its own laws, and was largely nonfunctional and unreformable, many people were willing to cooperate with the system as demonstrated by the transparency and frankness displayed by the psychiatrists and authority figures depicted in the authors’ work. In the end, Mal'tsev begrudgingly found himself among them. He lamented, “I was ashamed that I had to participate in such a cheap comedy.”\textsuperscript{167} Indeed, it is easy to see elements of a cheap or tragic comedy in the USSR’s program of punitive psychiatry, but, as Leonid Pliushch concluded, “Laughter is a useless weapon in a battle against the horrors of the madhouse.”\textsuperscript{168}

\textsuperscript{166} Mal'tsev, \textit{Reportazh iz sumashshedshogo doma}, 70.

\textsuperscript{167} Ibid., 34

\textsuperscript{168} Pliushch, \textit{Na karnavale istorii}, 585.
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