

## Political neutrality and international cooperation in medicine

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*International cooperation is an integral part of furthering medical and scientific progress. Many specialist societies exist for that purpose and have written into their constitutions that such cooperation and coordination is their aim. They hope to achieve their aims by exchange, in all languages, of information and by so doing strengthen the relations between individual physicians and scientists as well as between corporate professional bodies from different countries. However, at the same time emphasis is laid on the political neutrality of such organisations. Increasingly, this 'neutrality' is being questioned as doctors and scientists become aware of abuse and distortion of their profession taking place in other countries. H Merskey highlights the problems and offers his opinion on the ethics of maintaining these professional relationships with colleagues abroad who are involved in such abuse and distortion.*

The General Assembly of the World Psychiatric Association meeting in Honolulu on 31 August, 1977 for the VI World Congress of Psychiatry passed the following resolution.

'That the WPA take note of the Abuse of Psychiatry for political purposes and that it condemn those practices in all countries where they occur and call upon the professional organisations of psychiatrists in those countries to renounce and expunge those practices from their country and that the WPA implement this resolution in the first instance in reference to the extensive evidence of the systematic abuse of Psychiatry for political purposes in the USSR.'

The week before, the World Federation of Mental Health, an organisation comprising psychiatrists and other health professionals and lay people, approved a similar position and drew it to the attention of the World Psychiatric Association. The resolution of the WPA is unprecedented in that this was the first time that a great power had been specifically condemned by an international professional association. Protests and words of concern on this issue had previously been addressed to the USSR by some national organisations both in psychiatry and in other fields. Thus, in December, 1971, the Board of Directors of the Canadian Psychiatric Association had passed a resolution of concern over alleged

Soviet abuses of psychiatry<sup>1</sup> and in 1973 the Royal College of Psychiatrists condemned them in a strong resolution.<sup>2</sup> The ill-treatment of scientists has also led to formal and sometimes very strong complaints by a number of American Scientific Societies including the American Association for the Advancement of Science.<sup>3</sup> The Institute of Electrical and Electronic Engineers, which is an international but predominantly North American Society, protested on behalf of several Jewish scientists.<sup>4</sup> The US National Academy of Sciences intervened especially on behalf of Academician Sakharov.<sup>5</sup> The Royal Netherlands Academy of Science issued a protest to the USSR in regard to Diploma Tax on emigrants.<sup>6</sup> There were also French protests about abuses of psychiatry. However, the Honolulu vote represented a judgment on a new level – that of an international, professional body criticising not only the practices of a government but also those of its colleagues. The implications of this for professional relationships are important.

It is never easy for psychiatrists to accept that their colleagues in other countries are deliberately abusing their professional subject and its ethics. Many first responses to this suggestion were sceptical. Only the gradual accumulation of evidence, the Bukovsky documents,<sup>7</sup> Bukovsky's own presence in the West, the testimony of former Soviet prisoners such as Leonid Plyushch, and that of former Soviet psychiatrists such as Dr Marina Voikhanskaya and Dr Boris Zoubok gradually convinced the English speaking world and psychiatrists in some Continental-European countries that psychiatry was being deliberately abused in the USSR. This evidence was lately summarised in scholarly detail and impressive quantity by Bloch and Reddaway.<sup>8</sup> Yet the vote was decided only by a narrow margin – 90 to 88, with 19 member societies voting in favour, 33 against and three (having eight votes) spoiling their ballots or abstaining.

This result is best understood in the light of the voting system which allocates votes up to a maximum of 30 to member societies according to the number of members in each society for whom a subscription is paid to the WPA. Some member societies represent more than one country, the Royal College of Psychiatrists representing both Britain and Eire, the Australasian College representing both Australia and New Zealand. Other countries have more than one member society – e.g. France has four, Brazil

has four, Mexico has two. The American Psychiatric Association had thirty votes, the All Union Society of Neuropathologists and Psychiatrists of the USSR had twenty-three. The ballots were secret but from the views expressed by delegates it is clear that the votes of the English speaking world together with those of a few Continental-European, Latin-American and Oriental member societies were just sufficient to outweigh the East European votes combined with those of most or all of the Scandinavian societies and some other European, Latin-American, African and Oriental societies.

Haltingly, and by the narrowest of margins, the WPA had reached a specific decision on a fundamental issue: the nature of international relationships in regard to professional societies. It is likely that physicians and scientists in future will have to make decisions on this issue and it is important to consider the justification both for maintaining and breaking medical and scientific relationships.

### Relationships between countries

Relationships between countries appear to be conducted on the basis of mutual interest. It is not my purpose here to discuss whether this is entirely true or whether it is justified. Public opinion, especially in democratic countries, may require governments to say or do things for idealistic reasons but it is also widely accepted that states bargain with each other in terms of military and economic power. Democratically elected politicians who claim to abhor dictatorship nevertheless meet the most atrocious tyrants and smile at them. Neville Chamberlain flew to discussions with Hitler; Roosevelt and Churchill met Stalin; the Organisation of African Unity which comprises at least some democratic governments had as its Head, General Idi Amin whose barbarities have been widely execrated. As long ago as the early part of the seventeenth century, Sir Henry Wootton described an ambassador as 'an honest man sent to lie abroad for the commonwealth'. It is accepted that unless a point has been passed at which discussion seems wholly fruitless, states maintain relationships with each other. To serve their functions diplomats have established a system of protocol or procedure which, at least superficially, requires polite discussion and safe conduct between all those who possess diplomatic credentials no matter how bad their moral and ethical credentials may be.

### Relationships between professionals

Relationships between professionals are sometimes thought to be on a similar basis. Persons expressing the official views of international societies have been known to say, 'We are strictly neutral' in respect of criticisms of one member society by another.

In 1971, the Executive Committee of the WPA

which prepares the agenda of the General Assembly of that body struck out a Canadian complaint against abuses of psychiatry in the USSR on the grounds that it was inappropriate to discuss a complaint by one member society against another. In his opening address in 1977 at Honolulu, Dr Howard Rome laid heavy emphasis on the 'neutrality' of the WPA. Many people listening felt this indicated a wish that the whole question of criticism of the Soviet Union had not been raised.

Most international professional societies seem to operate on the premises that they are

- 1) Furthering the advance of their subject
- 2) Promoting international harmony.

The WPA, for example, includes the following in its constitution.

*Purpose:* The purpose of the Association is to co-ordinate on a world-wide scale the activities of its member societies, and to advance inquiry into the aetiology, pathology and treatment of mental illness.

*Means:* The means employed to achieve this purpose are as follows:

- 1) The exchange in all languages of information concerning the medical problems of diseases.
- 2) The strengthening of relations between psychiatrists working in various fields and between psychiatric societies existing in different countries. . . .'

I have not sought to examine the constitution of other scientific bodies especially that of ICSU (The International Council of Scientific Unions) but it seems a fair assumption that the officers and memberships operate from similar guidelines whether or not these are laid down.

Bloch and Reddaway<sup>8</sup> have argued that even the rather general terms of the WPA constitution clearly call for a discussion of the ethics of a member society if those ethics are suspect. For a world medical organisation can hardly exist to promote the better care of patients without examining the allegation that significant individuals from one of its member societies or even the society as a whole are sponsoring the ill-treatment of some detained persons. In his review of their book Hare<sup>9</sup> who acknowledges the existence of the abuses to which they have drawn attention says, without evidence, that it would seem to many to be improper to ask if Soviet psychiatrists had 'yielded to political pressure to inter dissidents on a trumped-up charge (sic) of mental disorder'; and that 'an official answer must be no'. Yet since he agrees that abuses are occurring or have occurred it is hard to understand how anyone could deny that psychiatrists must have colluded with the authorities to produce them. And whilst an official body might refuse to look at the question it needs better defences for a policy of

inaction than those of neutrality (against evil?) and the preservation of international harmony by means of the blind eye technique.

I would argue that even if benefit to patients or the maintenance of ethical standards are not spelled out as part of the programme of any medical society (whether national or international), they must be taken implicitly to be part of the most important premises on which such societies operate. A general principle can be articulated that certain basic rules or minimum conditions should govern the operations of every scientific or technical group: e.g. truthful reporting, fiscal honesty and fairness between members, decorum in personal relationships, etc. An International Society of Philatelists should be expected to reject any individuals or groups whose collections are based on theft or fraud. A *fortiori*, a medical organisation cannot accept or retain as members those who not only deliberately break the basic rules of relationships but also abuse the fundamental ethical aims of the society and the rest of its members.

This is the first respect in which medical organisations differ from governments in regard to international relationships. The proper purpose of government may be served by dealing with rogues, liars and cruel tyrants. That of medical organisations cannot be advanced on the same basis. Although these principles are easier to see in regard to medicine and ill-treatment of patients (or pseudo-patients), they also apply to scientific societies. Geneticists in the West would merely have undermined their own discipline if they had politely accepted the adherents of Lysenko as representing a national scientific body simply because Soviet geneticists were politically obliged to propagate his views.

From these arguments it is evident that a firm distinction must be drawn between the functions of politicians and diplomats in international relationships and those of physicians, scientists and other professions. The former may have a duty to hold converse with those who act untruthfully and in violation of ethics. Physicians and scientists have a duty to detach themselves from such persons or societies. It is true that if scientific societies rupture relationships this can disturb international harmony. But they have a professional obligation which exceeds the issue of harmony. Prosecuting attorneys, judges and the police may disturb such harmony as exists between society and accused persons, but that is a consequence which they accept for good reason.

Another benefit which is liable to be lost or reduced as a result of international ruptures is the spread of education in a subject. That benefit is often an aim of international societies. However, there is no benefit to education or training in spreading bad advice or fostering bad examples of professional behaviour. It will not help the medicine

of the offender or that of any other country if senior Western psychiatrists are seen to accept or condone the abuse of psychiatry for political purposes. Such a course of action would handicap psychiatry in dealing with the plentiful problems which it has in raising standards and preventing incidental and unsystematic abuses. Education in genetics, likewise, could only have suffered if geneticists in the West had accorded deference to the Lysenko model.

Yet another argument which is sometimes used to justify avoiding condemnation is that the contact which we maintain with scientists who work under the aegis of oppressive régimes is helpful to those individuals and allows them to take home their experience of a better approach.

Ziman has dealt with this view as follows: '... many of the Russian visitors to the West are of very low scientific standing and are apparently more competent at picking up snippets of scientific information than communicating at the highest intellectual level with our own leading scholars. The average Soviet scientist of good repute has so little expectation of making a foreign visit himself that he would not be greatly perturbed if those particular exchanges were inhibited'.<sup>10</sup>

In any case, even if this were not correct we should still have to consider that the moral objections to maintaining relationships with those who abuse or distort a professional subject undercut any argument in favour of compliant acceptance of abhorrent behaviour.

### Questions of politics

When the issues which we have been considering arise there is often short notice of the problem. Some countries only issue visas to delegates from other countries on the eve of a conference. Hallmarks have been booked, deposits paid, and complicated travelling arrangements established, frequently by thousands of scientists. There is a keen wish to get on with scientific business as well as the projected interesting or attractive journey. Inevitably the first response of many delegates is one of irritation or distress. Why, they ask, do we have to be bothered with these political problems when we are doctors or scientists, concerned to advance our profession? I hope I may have demonstrated some of the reasons why, albeit reluctantly, we must all be concerned with these issues. The fundamental problem is that unless they are tackled when they arise the basis of science and the basis of medicine are undermined. Nevertheless those who raise these problems are sometimes accused of injecting politics into a situation which should be free from political controversy. It is certainly true that political issues are involved but the blame lies with the governments or agencies who cause the problems and not with the doctors or scientists who are attempting to resolve them ethically. It is the

responsibility and the duty of all of us to secure proper ethical conditions for the pursuit of medicine and science, free from the constraints and ulterior motives which governments may from time to time seek to impose. If we do not do this we collude with the abuse.

### References

- <sup>1</sup>Survey, 1971, No. 81, page 113. Resolution of the Board of Directors of the Canadian Psychiatric Association. 19 January, 1971.
- <sup>2</sup>Resolution of the Royal College of Psychiatrists, 4th of November, 1973. Second Annual Report of the College. 1974. Page 5.
- <sup>3</sup>Resolution of the Convention of the American Association for the Advancement of Science, San Francisco, March 1, 1974, cited at hearings of the Committee on the Judiciary U.S. Senate, 94th Congress. US Government-Printing Office. Stock No. 052-070-02750. Pages 70 to 71.
- <sup>4</sup>Resolution of the Board of Directors IEEE, 11 September, 1973. *IEEE Spectrum*. November, 1973. Page 58.
- <sup>5</sup>*Nature*, (1973). 245. Page 67.
- <sup>6</sup>Letter of the Secretary-General. Professor C. H. MacGillavry. Royal Netherlands Academy of Arts and Sciences. July 3, 1973.
- <sup>7</sup>Abuse of Psychiatry for Political Repression in the Soviet Union. (1973). Hearing of the Judiciary, United States Senate. September 26, 1972. New York, Arno Press.
- <sup>8</sup>Bloch, S. and Reddaway, P. (1977). *Russia's Political Hospitals. The Abuse of Psychiatry in the Soviet Union*. Gollancz. London. Published in the USA as *Psychiatric Terror*, Basic Books, N.Y.
- <sup>9</sup>Hare, E H (1977). Treating Dissenters. *British Medical Journal*, 2. Pp. 1136-1138.
- <sup>10</sup>Ziman, J (1973). The Problem of Soviet Scientists. *Nature*, 246. Pp. 322-323.