

Report of the Special (Political Abuse of Psychiatry) Committee on South Africa

Council asked the Special (Political Abuse of Psychiatry) Committee to consider allegations of the political abuse of psychiatry in South Africa. The Special Committee considered all documentation available to them and one member of the Committee was able to make a brief on-site inspection of facilities. At its meeting in January 1983, Council endorsed the following Report and it was agreed that this should be published in the *Bulletin*. I was also asked to send the Report to College members in South Africa, and this is being done.

GERALD TIMBURY
Registrar

Summary and conclusions

Allegations that psychiatry is used to suppress political dissent

To our knowledge, there is no evidence that psychiatry in South Africa is being used as a means to suppress political dissent, or indeed for any political purpose. The original allegations of such unethical practice arose in a document of the United Nations Special Committee Against Apartheid, a report prepared for the WHO. But this report was not based on a visit to South Africa, and the allegations were not substantiated with evidence. Since then a Special Committee of the American Psychiatric Association has visited South Africa (its report is published in the *American Journal of Psychiatry* (1979) 136, 1498–1506); it concluded that political misuse had not occurred. Similarly, Dr. Stanley Platman, Assistant Secretary for Mental Health in the Department of Health and Mental Hygiene of the State of Maryland, who made a comprehensive visit to several South African psychiatric facilities during 1981/82, concluded that the political abuse of psychiatry did not exist. Our own committee member visited South Africa in November 1978 and arrived at the same conclusion.

Allegations that apartheid has an effect on the mental health of Black South Africans

It was alleged in the WHO Report that the system of apartheid, particularly the separation of families through the migrant labour policies, leads to mental ill-health among South African Blacks. Although we have not found 'scientific' evidence to support this allegation, it is abundantly clear that apartheid is responsible for severe social dislocation and that human suffering is an inevitable result. We believe that this is a social and political issue, rather than a psychiatric one; psychiatrists, however, perhaps have the responsibility to conduct research into such a vital social concern, in order to establish more clearly what is the effect of a specific social policy on the well-being of a

particular population group.

Allegation of discriminatory practice in the provision of psychiatric services

The evidence is substantial that discrimination in the provision of psychiatric services based on race exists in South Africa, both in State run hospitals and in the group of twelve psychiatric hospitals run by the private Smith, Mitchell Company. In the latter group of facilities, for example, the *per diem* subsidy for White patients is approximately two and a half to three times that for Black patients. The reports of the APA Committee, Dr Platman, and our own committee member are all in agreement that psychiatric facilities for Black patients, at least in the Smith, Mitchell Company hospitals, are decidedly inferior to those for White patients. This applies to such basic requirements as toilet facilities, wards, dining facilities, clothing and food. Although we are acutely aware that psychiatric facilities in other countries vary tremendously in quality, discrimination in the provision of psychiatric facilities *on the grounds of race* is to us totally unjust and unacceptable.

Discrimination on racial grounds also applies to the salaries of professional psychiatric and para-medical staff. For example, there are gross disparities in the salary structure between Black and White nursing assistants, with Whites receiving twice the salary of Blacks. Although disparities diminish with increasing seniority, both in the nursing and medical professions, salaries for White staff always exceed those of their Black counterpart.

Segregation of psychiatric facilities

The system of apartheid requires that racial groups are segregated when it comes to medical care, and this includes psychiatry. Thus, hospitals may be limited to one racial group or, within the same institution, wards are racially segregated. Although, theoretically, staffing should also be based on racial segregation, there is some cross-over. We find such segregation unacceptable, although we realize that this is a feature of governmental policy and not determined by psychiatrists themselves.

With the remit of our Committee, we can conclude that the actual misuse of psychiatry for political purpose does not occur in South Africa. Discriminatory practices, however, do certainly occur, but, since this issue is beyond our remit, we believe that Council should consider the evidence and act appropriately. Finally, we regard the probable negative impact of apartheid on South African Blacks as a social and political issue, but one that should be researched by the psychiatric profession in South Africa.