THE POSITION OF PSYCHIATRISTS IN THE FIELD OF INTERNATIONAL RELATIONS

Formulated by the Committee on International Relations of the Group for the Advancement of Psychiatry

Report No. 11
3617 W. 6th Ave., Topeka, Kansas

January, 1950

I. Preamble:

The knowledge of psychiatrists can bring much of value to the solution of group as well as individual problems. As citizens, psychiatrists, by virtue of their particular training, carry a special responsibility for utilizing this knowledge to its fullest possible extent, without claiming sole or special wisdom in settling the problems of nations or the future of society.

II.

The specific competence of the psychiatrist is derived from his knowledge of individual motivations. Since groups are composed of individuals, this special knowledge can contribute to the understanding of group relations.

III.

In the field of international affairs psychiatrists can at present best utilize their knowledge through such activities as:

A. Encouraging group conferences in which social and political scientists and other trained personnel with field experience will participate. Wherever possible, such conferences should be conducted in university settings or under other suitable auspices.

B. The establishment of inter-discipline institutes for research and training programs, having one or more of the following purposes:

   1. To educate younger psychiatrists and other specialists in the methods of interdisciplinary collaboration.

2. To orient experienced individuals in the same methods.

3. To encourage cross-fertilization of related fields, especially between university faculties.

4. To develop skills for broadening the acceptance of psychiatrists and other social scientists as needed participants in the field of advisory and consultant services to government.

5. To prepare personnel by suitable training methods to meet calls from agencies of government when special knowledge of human relations is required.

6. To study actual problems, presented by government officials or other experts with field experience, as a basis for teaching—a method comparable to the case teaching methods in Law and Medicine.

C. Exploring possible contacts with leaders of government who are known to have understanding of the social sciences.

D. Making available to authorities in occupied countries, through collaboration with other social scientists and historians, precise knowledge of the psychological issues involved in their tasks.

E. Supporting in every way possible all programs sponsored by the United Nations, or its specialized agencies, for the improvement of human relations.
F. Making careful case studies of exiled leaders and of the problems of political refugees and displaced persons.

G. Studying the psychology of leaders and their followers at local, national, and international levels.

H. Making comparative studies of the psychology of psychopathic leaders in various countries.

I. Studying those factors which obstruct or delay the orderly progress of parliamentary procedures in national and international assemblies and thus interfere with the attainment of reasonable compromises.

J. Examining public statements by national leaders, with a view to achieving a more accurate evaluation of their content.

K. Assisting in the preparation of manuals of information for government officials and commercial agents sent on missions to other countries, so designed as to insure an intelligent orientation to the principal historical and traditional attitudes prevalent in these countries.

L. Emphasizing through appropriate channels the importance of psychological considerations in the planning and implementation of international policies, which are often considered solely from the economic viewpoint.

IV.

Particular emphasis should be laid on the following considerations if psychiatrists are to develop their full usefulness in the field of international relations:

A. They should be cautious in making suggestions or recommendations until:
   1. They have had sufficient field experience to become adequately acquainted with given problems;
   2. They have had sufficient contact with the administrators and others concerned to have achieved mutual understanding.

B. They should consider it their primary function to focus their efforts on problems of urgent concern to those responsible for their solution. Wherever possible, the officials concerned should be invited to participate in the discussions. The scientific personnel of such conferences should in all cases include individuals who have had some field experience in the area under discussion.

APPENDIX TO THIS REPORT

In order to clarify some past confusion regarding the verbal semantics and functions of the interdisciplinary approach the following definition is offered by the Committee on International Relations:

The term interdisciplinary approach, (also called multidiscipline, interprofessional, or multiprofessional), refers to teamwork by experts in diverse fields of specialization on a mutually agreed project. This approach has been developed in response to the difficulties encountered in defining and analyzing problems which are complex and many-sided in their causes and effects. In most cases the understanding of such problems and the planning of concerted action toward their solution transcend the confines of a particular profession or discipline. A synthesis is called for, therefore, which the interprofessional approach aims to accomplish, through integration of the knowledge and skills developed in diverse fields of scientific endeavor having relevance to the problem on hand.

(2)
DISTRIBUTION OF THIS REPORT

Request List from Members of the American Psychiatric Association (approx. 3,100)

Request List from Psychiatric Nurses, Psychiatric Social Workers, Psychologists, Medical Libraries, etc.

State Mental Hygiene Organizations

State Mental Health Authorities of United States

Provincial Directors of Mental Health Services in Canada

Member Organizations of the World Federation for Mental Health

Professors of Psychiatry and Professors of Preventive Medicine of Medical Schools of United States and Canada

GAP

Single copies of this Report are available to any professional person upon request; two or more copies at 10 cents each.

Address: Group for the Advancement of Psychiatry
3617 W. Sixth Ave.
Topeka, Kansas
Group for the Advancement of Psychiatry

The Group for the Advancement of Psychiatry has a membership of approximately 150 psychiatrists, organized in the form of a number of working committees of about 10 members each, which direct their efforts toward the study of various aspects of psychiatry and toward the application of this knowledge to the fields of mental health and human relations. GAP is an independent group and its Reports represent the composite findings and opinions of its members only, guided by its many consultants.

Collaboration with specialists in other disciplines has been and is one of GAP’s working principles. Since the formation of GAP in 1946 its members have worked closely with such other specialists as anthropologists, biologists, economists, statisticians, educators, lawyers, nurses, psychologists, sociologists, social workers, and experts in mass communication, philosophy, and semantics. GAP envisages a continuing program of work according to the following aims:

1. To collect and appraise significant data in the field of psychiatry, mental health and human relations;
2. To re-evaluate old concepts and to develop and test new ones;
3. To apply the knowledge thus obtained for the promotion of mental health and good human relations.

Committee on Academic Education
Dan L. Farnsworth, Cambridge, Mass.
O. Spurgoen English, Philadelphia, Vice-Chair
Grace Baker, New York
Earl D. Bond, Philadelphia
Charles W. S. Fair, New Haven
Edward J. Humphreys, Trenton
Frank J. O'Brien, Brooklyn
William M. Shanahan, Chicago

Committee on Child Psychiatry
William S. Langford, New York, Chair
Frederick H. Allen, Philadelphia, Vice-Chair
E. E. Landis, Louisville
J. Franklin Robinson, Wilkes Barre
John A. Rose, Philadelphia
Mabel Ross, Washington
Emmy Sylvester, Chicago
Stan Snavely, San Francisco
Adrian Vander Veer, Chicago

Committee on Clinical Psychology
Paul Buxton, Iowa City, Chair
Daniel W. Badal, Cleveland
Norman Cameron, Madison
George E. Gardner, Boston
Herbert I. Harris, Boston
James G. Miller, Chicago
Fritz Redlich, New Haven

Committee on Cooperation with Government Agencies
Calvin S. Drayer, Philadelphia, Chair
Norman G. Billet, Washington
John M. Campbell, Jr., Washington
Dale Cameron, Washington
T. E. Dancy, Montreal
Malcolm J. Farrell, Waverley
Thomas A. Harris, Washington
Gordon B. Hinton, Vancouver
Lewis I. Sharp, New York
Lauren H. Smith, Philadelphia

Committee on Family
John P. Spiegel, Chicago, Chairman
Sidney Berman, Washington
Wilfred Bloomfield, Framingham
James M. Cunningham, Detroit
Milton Kipkirkpatrick, New Orleans
Henry C. Schumacher, San Francisco
George S. Stevenson, New York

Committee on Forensic Psychiatry
Philip Q. Roche, Philadelphia, Chair
Vernon C. Branham, Washington
Walter Bromberg, Reno
Hervey Cleckley, Augusta, Ga.
Frank J. Curran, Charlottevile
Manfred S. Gottschacher, Baltimore
LeRoy Maeder, New York

Committee on Hospitals
Walter Barton, Boston, Chair
Kenneth E. Appel, Philadelphia
Brian Bird, Cleveland

Committee on International Relations
John A. P. Millet, New York, Chair
Franz Alexander, Chicago
Raymond de Saussure, New York
Frank Fremont-Smith, New York
John M. Murray, Boston
Florence Powdermaker, New York
J. R. Rees, London (Honorary)
W. Donald Ross, Cincinnati
George H. Stevenson, London, Ontario

Committee on Medical Education
William Malamud, Boston, Chair
Spaффord Ackerly, Louisville
Douglas D. Bland, Cleveland
F. G. Ebaugh, Denver
F. J. Garty, Chicago
Alan Gregg, New York
Ives Hendrick, Boston
Maurice Levine, Cincinnati
Karl Menninger, Topeka
Thomas A. C. Rennie, New York
John Romano, Rochester, N. Y.
Milton Rosenbaum, Cincinnati

Committee on Preventive Psychiatry
J. S. Gottlieb, Iowa City, Chair
John W. Appel, Philadelphia
Ivan Berlin, Detroit
Hugh T. Carmichael, Chicago
Arthur M. Doyle, Toronto
David M. Levy, New York
Eric Lindemann, Boston
Norman Reider, San Francisco
Leon Saul, Philadelphia
Milton J. E. Senn, New Haven

Committee on Psychiatric Nursing
Harry Solomon, Boston, Chair
Wilbur R. Miller, Iowa City
Elvin V. Semard, Boston
Francis H. Sleeper, Augusta, Me.
Lloyd J. Thompson, Winston-Salem
Robert L. Worthington, Seattle
David A. Young, Raleigh

Committee on Psychiatric Social Work
Jules Coleman, Denver, Chair
Lewis L. Robbins, Topeka, Vice-Chair
A. Z. Barshak, New York
Marion Kentworthy, New York
Hyman Lippman, St. Paul
Joseph J. Michaels, Denver
Eric E. Welsch, New York

Committee on Psychiatry in Industry
Leo H. Bartemeier, Detroit, Chair
Temple Burling, Ithaca
Ralph T. Collins, Rochester, N. Y.
Frederick R. Hanson, New York
William E. Kelso, Louisville
Alexander Leighton, Ithaca
Hewitt Varney, Washington
Walter D. Woodward, New York

Committee on Public Education
Paul Lemkan, Baltimore, Chair
Edward G. Billings, Dover
Carl Birger, New York
Robert H. Felix, Washington
John H. Greist, Indianapolis
John D. Griffin, Toronto
John P. Lambert, Katoah
Howard S. Rome, Rochester, Minn.
Julius Schreiber, Washington
C. G. Stogdill, Ottawa
Charles W. Tidd, Beverly Hills
Harry L. Weinstock, New York

Committee on Research
Jacob E. Finesinger, Boston, Chair
George L. Engel, Rochester, N. Y.
Thomas M. French, Chicago
Edwin F. Gildea, St. Louis
Merton M. Gilkin, Rockbridge
Roy G. Grinker, Chicago
Joseph Hughes, Philadelphia
Lawrence C. Kolb, Rochester, Minn.
I. Arthur Minksy, Cincinnati
Jurgen Rouss, San Francisco

Committee on Social Zonas
Helen V. Meulcan, Chicago, Chair
Nathan W. Ackerman, New York
Charlotte Babcock, Chicago
Viola Bernard, New York
Sol Ginsburg, New York
Gerhart J. Piers, Chicago
Janet Riech, New York
Arthur H. Ruggles, Providence
Rutherford B. Stevens, New York

Committee on Therapy
Maxwell Gitelson, Chicago, Chair
Bernard Buder, Boston
William H. Dunn, New York
M. M. Frolich, Ann Arbor
M. Ralph Kaufman, New York
Lawrence S. Kubie, New York
Theodore Lidz, Baltimore
Alfred O. Ludwig, Boston
Sydney Marjolin, New York
George N. Raines, Bethesda
William C. Menninger, Topeka

Chairman
Henry W. Brosin, Chicago

Secretary
January, 1939