

Refugee Review Tribunal

AUSTRALIA

RRT RESEARCH RESPONSE

Research Response Number: CHN30418
Country: China
Date: 1 August 2006

Keywords: CHN30418 – China – Prisons – Psychiatric Patients – Psychiatric Hospitals – Political Prisoners

This response was prepared by the Country Research Section of the Refugee Review Tribunal (RRT) after researching publicly accessible information currently available to the RRT within time constraints. This response is not, and does not purport to be, conclusive as to the merit of any particular claim to refugee status or asylum.

Questions

- 1. The applicant explains the birth of his son with reference to there being ‘conjugal rights’ in prison. Are there any reports of this in China?**
- 2. Are there recent reports on the mistreatment of psychiatric patients generally in China?**
- 3. There seem to be many reports on the use of psychiatric institutions for political opponents (actual and perceived); are these ‘dedicated’ facilities, and do they observe meaningful distinctions between political opponents and the mentally ill?**

RESPONSE

- 1. The applicant explains the birth of his son with reference to there being ‘conjugal rights’ in prison. Are there any reports of this in China?**

Although 1991 news article states conjugal visits were not permitted in Chinese prisons, 1992, 1994 and 1998 sources mention that such visits are permitted in certain circumstances.

A 1991 *The Globe and Mail* news article, in the context of dissidents being jailed, stated:

Ms. Wang learned of her husband’s 13-year sentence from the evening news. Now 38, he will be 51 by the time he is free. She will be 47. Chinese prisons do not permit conjugal visits. Ms. Wang said she is resigned to being childless (Wong, Jan 1991, ‘Bucking System’, *The Globe and Mail*, 23 March – Attachment 1).

However, a 1994 Canadian Immigration and Refugee report cites 1994 Human Rights in China (HRIC) information and 1992 information from Hongda Harry Wu in the following terms:

Under the Provisional Regulations on Re-Education Through Labor and the Executive Regulations on the Administration of Re-Education Through Labor

provisions, persons undergoing re-education, unlike those subjected to reform through labour, are entitled to “conjugal visits” among other rights (HRIC 4 June 1994, 13). However, one source interviewed by Human Rights in China (HRIC) stated that he had never heard of anyone who was undergoing re-education being permitted to act on this regulation (ibid., 14). This source was told that “conjugal visits were a reward for people who were doing a good job for getting re-educated, [but] not a right which anyone in re-education could enjoy.” (ibid.).

According to Wu, family visits to prisoners of re-education camps usually last from 20 or 30 minutes and are monitored by a public security cadre (1992, 103; also see Ladany 1992, 127). Wu further stated that, however, “prisoners with good records as well as those whose families are high-level cadres or have connections have more liberal visiting privileges.” (ibid.)... (Immigration and Refugee Board of Canada 1994, CHN19018.E – *China: Information on the Shui Tuo Detention Centre near Fuzhou City in Fujian province, and on whether spouses of prisoners detained in this detention centre can engage in procreative activities during their visits*, 2 December – Attachment 2).

In 1998 a dissident, having reportedly served 18 years in Chinese jails, stated that prisoners were given favours, including conjugal visits, as a reward “for beating him up” (Gittings, John 1998, ‘China’s dissident abroad’, *The Guardian*, 9 January – Attachment 3).

The Economist, reporting in June 2001 on the Tianjin Municipal Prison, said that overnight conjugal visits were included in rewards to prisoners who behave (‘Some better, most still awful’ 2001, *The Economist*, 21 June http://www.economist.com/PrinterFriendly.cfm?story_id=666542 – Accessed 26 July 2006 – Attachment 4).

More recent articles on conjugal visits are:

- In April 2004 it was reported that conjugal visits for inmates of five prisons in Gansu province, which had the privileges for 10 years, were cancelled (‘Beijing’ 2004, *South China Morning Post*, 12 April – Attachment 5).
- In January 2006, in the context of Beijing Women’s Prison allowing conjugal visits for selected prisoners during the Spring Festival Holiday, the article noted that many other prisons allowed conjugal visits (‘Women prisoners get conjugal visits’ 2006, *Shanghai Daily*, 9 January – Attachment 6).

2. Are there recent reports on the mistreatment of psychiatric patients generally in China?

Specific current information on the treatment of psychiatric patients generally in China was not found in the sources consulted.

Generally, on people with disabilities, the most recent US State Department report on human rights wrote:

The law protects the rights of persons with disabilities and prohibits discrimination; however, conditions for such persons lagged far behind legal dictates, failing to provide persons with disabilities with access to programs designed to assist them. According to the official press, all local governments have drafted specific measures to implement the law (US Department of State 2006, ‘Persons with Disabilities’ in

Country Reports on Human Rights Practices for 2005 – China, 8 March – Attachment 7).

It continued on mentally ill persons:

The law forbids the marriage of persons with certain acute mental illnesses, such as schizophrenia. If doctors find that a couple is at risk of transmitting disabling congenital defects to their children, the couple may marry only if they agree to use birth control or undergo sterilization. The law stipulates that local governments must employ such practices to raise the percentage of healthy births. Media reports publicized the forced sterilization of mentally challenged teenagers in Nantong, Jiangsu Province (US Department of State 2006, 'Persons with Disabilities' in *Country Reports on Human Rights Practices for 2005 – China, 8 March – Attachment 7).*

One academic, Dr. Kam-shing Yip, argued in a recent paper that community mental health services in China face many difficulties such as high demand with scarce resources, withdrawal of government funding, inaccessibility of services to deprived and rural areas, tight political control, high mental health illiteracy and problems in formulating multidisciplinary teams. He noted that since the 1990s, hospitals, outpatient clinics and day hospitals have been responsible for half their own funding (Yip, Kam-shing 2006, 'Community Mental Health in the People's Republic of China: A Critical Analysis', *Community Mental Health Journal*, February, Vol. 42, No. 1, p.45,49 – Attachment 8).

Yip writes that it is only highly developed cities (e.g. Shanghai, Beijing) which can offer a list of comprehensive services and:

...In other less developed cities, there are only asylum like hospitals and some under-developed outpatient clinics. In many rural villages, home-based beds (minimal outreach service in form of home visit and medication by local health workers) tend to be the only alternative. It is difficult to provide continuous and comprehensive mental health services to a population of 1.3 billion, when 75% of them live in deprived and remote rural areas in China (Yip, Kam-shing 2006, 'Community Mental Health in the People's Republic of China: A Critical Analysis', *Community Mental Health Journal*, February, Vol. 42, No. 1, p.46 – Attachment 8).

He notes that:

...Nevertheless, professions like social workers and psychologists are newly developed in China. Mental health services in China are solely served by medical professionals who are not accustomed to working within a multidisciplinary team setting with non-medical professionals...(Yip, Kam-shing 2006, 'Community Mental Health in the People's Republic of China: A Critical Analysis', *Community Mental Health Journal*, February, Vol. 42, No. 1, p.p47-48 – Attachment 8).

On Chinese psychiatrists the Chair of the Geneva Initiative on Psychiatry has written:

...the vast majority of Chinese psychiatrists are good, ethical colleagues who almost certainly abhor political abuse and do not practice it. The point is that political abuse goes on at a governmental level, that is, through the security organs, just as Soviet abuse was essentially dictated by the MVD and KGB...(Jacoby, Robin 2005, 'Psychiatric Abuse in China', *Psychiatric News*, 3 June, Vol. 40, No. 11 <http://pn.psychiatryonline.org/cgi/content/full/40/11/33?maxtoshow=&HITS=10&hit>

[s=10&RESULTFORMAT=&fulltext=china&searchid=1&FIRSTINDEX=0&sortspe
c=relevance&resourcetype=HWCIT](#) – Accessed 27 July 2006 – Attachment 9).

According to the President of the World Psychiatric Association, the Chinese Society of Psychiatry (CSP) has acknowledged that:

...it had identified instances in which Chinese psychiatrists had failed to distinguish between spiritual-cultural beliefs and delusions, and as a result persons had been misdiagnosed and mistreated. The CSP explained that this was due to lack of training and professional skills of some psychiatrists rather than the result of systematic abuse of psychiatry...(Okasha, Ahmed 2005, 'WPA Continues to Pursue Concerns About Chinese Psychiatric Abuses', *Psychiatric News*, 4 February, Vol. 40, No. 3 <http://pn.psychiatryonline.org/cgi/content/full/40/3/24> – Accessed 27 July 2006 – Attachment 10).

On mental health law, the World Health Organization (WHO) reports that there is no existing mental health legislation in China. Laws that deal with some mental health issues are the Criminal Law (1980), the Criminal Procedure Law (1980), the Civil Law (1987), the Civil Procedure Law (1982), the Law on the Protection of Disabled Persons (1990), the Law on Maternal and Infant Health Care (1994) and the Marriage Law (2001) (World Health Organization (WHO) 2005, 'China', *Mental Health Atlas 2005*, p.3,5 http://www.who.int/globalatlas/predefinedReports/MentalHealth/Files/CN_Mental_Health_Profile.pdf – Accessed 27 July 2006 – Attachment 11).

One source, in another WHO report, notes that some difficulties in adopting mental health legislation are:

First, many stakeholders consider mental health legislation as just "care and treatment" legislation, limited to provision of institution-based services. Secondly, the professionals and the health system in general are tending to resist change from a familiar system. Thirdly, many professionals fear that enacting new legislation might increase the likelihood of their being blamed by patients and relatives for the failures of the system. Hence professionals such as psychiatrists and nurses, who could potentially be the most enthusiastic proponents of new legislation, remain indifferent to the issue (World Health Organization (WHO) 2005, *WHO Resource Book on Mental Health, Human Rights and Legislation*, p.105 http://www.who.int/mental_health/policy/who_rb_mnh_hr_leg_FINAL_11_07_05.pdf – Accessed 27 July 2006 – Attachment 12).

The UN Working Group on Arbitrary Detention has also reported that there is no uniform national legislation on forcible admission and holding in mental institutions; there are some provisions in some autonomous regions and provinces, however these regulations vary between provinces and lack consistency (Commission on Human Rights 2004, 'Report of the Working Group on Arbitrary Detention: Mission to China', *United Nations Economic and Social Council*, E/CN.4/2005/6/Add.4, 29 December, para. 61/p.16 <http://daccessdds.un.org/doc/UNDOC/GEN/G05/102/74/PDF/G0510274.pdf?OpenElement> – Accessed 27 July 2006 – Attachment 13).

The UN Working Group on Arbitrary Detention reported that:

62. The decision to deprive someone of his/her liberty by placing him in a mental health institution against his/her will, as well as to release him/her, seems to be in the

hands of psychiatrists employed by the mental health institutions. No genuine avenue is available to challenge such a decision before an outside and independent body (Commission on Human Rights 2004, 'Report of the Working Group on Arbitrary Detention: Mission to China', *United Nations Economic and Social Council*, E/CN.4/2005/6/Add.4, 29 December, para. 62/p.16 <http://daccessdds.un.org/doc/UNDOC/GEN/G05/102/74/PDF/G0510274.pdf?OpenElement> – Accessed 27 July 2006 – Attachment 13).

Other information on mental health in China is attached:

- The WHO has provided information on mental health services (World Health Organization (WHO) 2005, 'China', *Mental Health Atlas 2005* http://www.who.int/globalatlas/predefinedReports/MentalHealth/Files/CN_Mental_Health_Profile.pdf – Accessed 27 July 2006 – Attachment 11).
- Human Rights Watch and the Geneva Initiative on Psychiatry have released a publication, written by Robin Munro, providing extensive information on political psychiatry in China. It includes a chapter, 'The Legal Context', on the general applicability of the law for mentally ill persons who have committed a crime (Munro, Robin 2002, *Dangerous Minds: Political Psychiatry in China Today and its Origins in the Mao Era*, Human Rights Watch and Geneva Initiative on Psychiatry, August, New York, Chapt. V/pp.96-116 – Attachment 14).
- A 1999 Country Research Response provides DFAT advice on treatment of the mentally ill in China (Country Research 1999, *Research Response CHN13470*, 13 May, quest. 3/pp.1-2 – Attachment 15).

3. There seem to be many reports on the use of psychiatric institutions for political opponents (actual and perceived); are these 'dedicated' facilities, and do they observe meaningful distinctions between political opponents and the mentally ill?

Ankang hospitals

According to the US State Department Ankang institutions are high-security psychiatric hospitals for the criminally insane directly administered by the Ministry of Public Security (US Department of State 2006, 'Arrest and Detention' in *Country Reports on Human Rights Practices for 2005 – China*, 8 March – Attachment 7).

A December 2005 article on Wang Wanxing, a dissident released from a psychiatric hospital and subsequently deported to Germany, describes the Ankang system as:

...a secret network of special psychiatric hospitals in which people who have committed no crime other than failing to agree with the government can be confined indefinitely without trial. As in the old Soviet Union, China classifies dissidents as being "mentally ill", arguing that their activities against the state are a form of madness. Human rights campaigners believe some 3,000 "political" inmates are currently kept in the hospitals, though the precise figure isn't known. The numbers have been swelled in recent years with the jailing of numerous practitioners belonging to the Falun Gong dissident movement, as well as local activists who have complained about corruption or poor working conditions. There are around 25 Ankang – the name means "peace and health" – institutes for the criminally insane in China; the government's eventual plan is to build one Ankang for every city with a population of one million or more ('In the grip of the Ankang' 2005, *The Guardian*,

20 December – Attachment 16).

Estimates of the number of ankaang institutions vary between 20 to “around 25” (US Department of State 2006, ‘Arrest and Detention’ in *Country Reports on Human Rights Practices for 2005 – China*, 8 March – Attachment 7; ‘In the grip of the Ankaang’ 2005, *The Guardian*, 20 December – Attachment 16).

Of interest is information accessed from the Chinese Psychiatry Online website¹ describing the Beijing Ankaang Hospital (‘Beijing Ankaang Hospital’ 2005, Chinese Psychiatry Online <http://www.21jk.com/common/ehospital/hospitalcontent.asp?recordid=1307> – Accessed 31 July 2007 – Attachment 17).

It is reported that dissidents, persistent petitioners, political and trade union activists, underground religious believers, China Democratic Party members and Falun Gong adherents are imprisoned in Ankaang facilities (US Department of State 2006, ‘Arrest and Detention’ in *Country Reports on Human Rights Practices for 2005 – China*, 8 March – Attachment 7; Jacoby, Robin 2005, ‘Psychiatric Abuse in China’, *Psychiatric News*, 3 June, Vol. 40, No. 11 <http://pn.psychiatryonline.org/cgi/content/full/40/11/33?maxtoshow=&HITS=10&hits=10&RESULTFORMAT=&fulltext=china&searchid=1&FIRSTINDEX=0&sortspec=relevance&resourcetype=HWCIT> – Accessed 27 July 2006 – Attachment 9).

No information was found in the sources consulted on a meaningful distinction between political opponents and the mentally ill in Ankaang hospitals.

According to Wang Wanxing the majority of inmates in the psychiatric hospital were mentally ill, only he and one other political prisoner were the exceptions (‘In the grip of the Ankaang’ 2005, *The Guardian*, 20 December – Attachment 16)

The US State Department also reported:

...Some dissidents, persistent petitioners, and others were housed with mentally ill patients in these institutions...(US Department of State 2006, ‘Arrest and Detention’ in *Country Reports on Human Rights Practices for 2005 – China*, 8 March – Attachment 7).

Wang Wanxing described treatment of patients in a psychiatric hospital as follows:

Two nurses at the hospital struggled to cope with up to 70 patients, he says; it was a regime of mismanagement and anarchy. The treatment meted out to inmates included electric shocks, insulin shocks and forced injections. “One prisoner, Huang Youliang, went on hunger strike. After he tore up his blanket the nurses let the other patients jump on him and force food down his throat. He choked. I watched him die. Another farmer, who was slightly wrong in the head, was given an electroshock during acupuncture treatment. He also died.

“The days were the same. We were woken at 6am and had breakfast at 7am. There was a roll call. There was lunch, a nap and dinner. The rules were, don’t run away, and don’t kill anybody.”

¹ The website describes itself as organised by the Chinese Society of Psychiatry and Beijing Huilongguan Hospital and sponsored by the Ministry of Health and Chinese Medical Association

Wang avoided confrontation with hospital staff. At first the nurses forced him to take anti-psychotic drugs, which left him tired and dizzy; later the drugs stopped. (Often, he managed to hide the tablets in his mouth and spit them out.) Wang's fame abroad meant that he led a relatively privileged existence. He was allowed to listen to the BBC, and to have monthly visits from his wife, Wang Junying. "We got one hour only. Sometimes people were watching," Junying says ('In the grip of the Ankang' 2005, *The Guardian*, 20 December – Attachment 16).

Munro also provides accounts of conditions in Ankang hospitals (Munro, Robin 2002, *Dangerous Minds: Political Psychiatry in China Today and its Origins in the Mao Era*, Human Rights Watch and Geneva Initiative on Psychiatry, August, New York, Chapt. VI/pp.123-126 – Attachment 14).

The State Department reports that patients in Ankang hospitals are said to be given medicine against their will and subjected to electric shock treatment (US Department of State 2006, 'Arrest and Detention' in *Country Reports on Human Rights Practices for 2005 – China*, 8 March – Attachment 7).

On the admission of people to Ankang hospitals, the UN Working Group on Arbitrary Detention reported:

63. For offenders whose accountability is diminished or who are not liable because of their mental state, there are some 23 mental health institutions nationwide, run by public security organs (Ministry of the Interior). Before the cases are sent to a court, the decision to transfer suspected criminals to such institutions as well as to release them lie exclusively with the public security organs, without an effective remedy available to the patient (Commission on Human Rights 2004, 'Report of the Working Group on Arbitrary Detention: Mission to China', *United Nations Economic and Social Council*, E/CN.4/2005/6/Add.4, 29 December, para. 63/p.17 <http://daccessdds.un.org/doc/UNDOC/GEN/G05/102/74/PDF/G0510274.pdf?OpenElement> – Accessed 27 July 2006 – Attachment 13).

An article on the website Chinese Psychiatry Online writes on admission and discharge procedures for an Ankang hospital:

The subjects are: criminal offenders with mental disorders, and with a forensic psychiatric opinion of no criminal responsibility; offenders suspected of mental disorders waiting for specialist observations. Criminals with complete or diminished responsibility who are not competent to stand trial, or to serve a sentence, or mentally abnormal referrals from detention centres.

Admission procedure: For those who need to be admitted, the local Public Security Bureau at county level or above must submit the application. On admission, the referring unit, usually the police, must complete the form entitled "the application form for admission of compulsory patients", and present the forensic psychiatric report.

...

The procedure for discharge from AnKang Hospital, Criteria: The treatment lasts for at least one year, and the patient has had at least two discharge tries; Clinical recovery; Social supervision available; Good performance during discharge tries. For patients who meet the discharge criteria, the guardian submit a formal application, the hospital perform a comprehensive assessment, fulfill the approval form for discharging mentally disordered offenders, get approval from the hospital president in

charge, and stamped by the medical affair department. The hospital sends the approval form for discharging mentally disordered offenders to the local public security bureau and police station, and signed by the head of the bureau at county level or above. Stop discharge during special time (Hu, JiNian 2005, 'Current Situation of Forensic Psychiatry in China, Some Ethic Regulations on Mentally Disordered Offenders', Chinese Psychiatry Online, 27 February <http://www.21jk.com/english/articlecontent.asp?articleId=27573> – Accessed 31 July 2007 – Attachment 18).

According to Munro the term “forensic psychiatry” refers “to the field of professional cooperation between psychiatrists and the police or judicial systems” (Munro, Robin 2002, *Dangerous Minds: Political Psychiatry in China Today and its Origins in the Mao Era*, Human Rights Watch and Geneva Initiative on Psychiatry, August, New York, footnote 6/p.3 – Attachment 14.

Munro also sets out police criteria for various types and categories of mentally ill offenders who are compulsorily admitted to Ankang. See: Munro, Robin 2002, *Dangerous Minds: Political Psychiatry in China Today and its Origins in the Mao Era*, Human Rights Watch and Geneva Initiative on Psychiatry, August, New York, Chapt. VI/pp.120-123 – Attachment 14.

Delusions

For information on political delusional behaviour see chapter IV “A short guide to political psychosis” in Munro, Robin 2002, *Dangerous Minds: Political Psychiatry in China Today and its Origins in the Mao Era*, Human Rights Watch and Geneva Initiative on Psychiatry, August, New York, Chapt. IV/pp.90-95 – Attachment 14.

Of interest is a November 2005 news article concerning Wang Wanxing which refers to a “psychiatric report” submitted by the Chinese police to the German government. The article states:

According to a “psychiatric report” by Chinese police to the German Government, Mr Wang still suffers from “paranoid psychosis” and “political monomania” but was otherwise normal.

“When the topic of conversation turns to politics, his (mental) activities are still characterised by delusions of grandeur, litigation mania and a conspicuously enhanced pathological will,” the report said. Litigation mania or political monomania are unrecognised as a mental illness anywhere else but often used by Chinese police (McDonald, Hamish 2005, ‘China: Former inmate tells of torture’, *The Age*, 7 November <http://www.theage.com.au/news/world/former-inmate-tells-of-torture/2005/11/06/1131211945880.html?oneclick=true> – Accessed 8 November 2005 – Attachment 19).

In January 2006 a Human Rights Watch release noted that Dutch psychiatric experts found that Wang was not suffering from any disorder which could justify his admission to a psychiatric hospital (Human Rights Watch 2006, *China: No Medical Reason to Hold Dissident*, 17 March <http://hrw.org/english/docs/2006/03/17/china13010.htm> – Accessed 21 March 2006 – Attachment 20).

List of Sources Consulted

Internet Sources:

Search Engines

Google search engine <http://www.google.com.au/>

Databases:

FACTIVA (news database)

BACIS (DIMA Country Information database)

REFINFO (IRBDC (Canada) Country Information database)

ISYS (RRT Country Research database, including Amnesty International, Human Rights Watch, US Department of State Reports)

RRT Library Catalogue

Department of Foreign Affairs and Trade 1993, *Report of the Second Australian Human Rights Delegation to China, 8-20 November 1992*, Australian Government Publishing Service, Canberra

Dikötter, Frank 2002, *Crime, Punishment and the Prison in Modern China*, Columbia University Press, New York

Dutton, Michael R. 1992, *Policing and Punishment in China*, Cambridge University Press, Cambridge

List of Attachments

1. Wong, Jan 1991, 'Bucking System', *The Globe and Mail*, 23 March (FACTIVA)
2. Immigration and Refugee Board of Canada 1994, *CHN19018.E – China: Information on the Shui Tuo Detention Centre near Fuzhou City in Fujian province, and on whether spouses of prisoners detained in this detention centre can engage in procreative activities during their visits*, 2 December (REFINFO)
3. Gittings, John 1998, 'China's dissident abroad', *The Guardian*, 9 January (FACTIVA)
4. 'Some better, most still awful' 2001, *The Economist*, 21 June (http://www.economist.com/PrinterFriendly.cfm?story_id=666542 – Accessed 26 July 2006)
5. 'Beijing' 2004, *South China Morning Post*, 12 April (FACTIVA)
6. 'Women prisoners get conjugal visits' 2006, *Shanghai Daily*, 9 January (FACTIVA)
7. US Department of State 2006, 'Arrest and Detention', 'Persons with Disabilities' in *Country Reports on Human Rights Practices for 2005 – China*, 8 March
8. Yip, Kam-shing 2006, 'Community Mental Health in the People's Republic of China: A Critical Analysis', *Community Mental Health Journal*, February, Vol. 42, No. 1
9. Jacoby, Robin 2005, 'Psychiatric Abuse in China', *Psychiatric News*, 3 June, Vol. 40, No. 11 (<http://pn.psychiatryonline.org/cgi/content/full/40/11/33?maxtoshow=&HITS=10&hit>)

[s=10&RESULTFORMAT=&fulltext=china&searchid=1&FIRSTINDEX=0&sortspec=relevance&resourcetype=HWCIT](#) – Accessed 27 July 2006)

10. Okasha, Ahmed 2005, 'WPA Continues to Pursue Concerns About Chinese Psychiatric Abuses', *Psychiatric News*, 4 February, Vol. 40, No. 3 (<http://pn.psychiatryonline.org/cgi/content/full/40/3/24> – Accessed 27 July 2006)
11. World Health Organization (WHO) 2005, 'China', *Mental Health Atlas 2005* (http://www.who.int/globalatlas/predefinedReports/MentalHealth/Files/CN_MentalHealth_Profile.pdf – Accessed 27 July 2006)
12. World Health Organization (WHO) 2005, *WHO Resource Book on Mental Health, Human Rights and Legislation*, p.105 (http://www.who.int/mental_health/policy/who_rb_mnh_hr_leg_FINAL_11_07_05.pdf – Accessed 27 July 2006)
13. Commission on Human Rights 2004, 'Report of the Working Group on Arbitrary Detention: Mission to China', *United Nations Economic and Social Council*, E/CN.4/2005/6/Add.4, 29 December, paras. 60-66/pp.16-17 (<http://daccessdds.un.org/doc/UNDOC/GEN/G05/102/74/PDF/G0510274.pdf?OpenElement> – Accessed 27 July 2006)
14. Munro, Robin 2002, *Dangerous Minds: Political Psychiatry in China Today and its Origins in the Mao Era*, Human Rights Watch and Geneva Initiative on Psychiatry, August, New York, Preface/pp.1-5, Chapt. IV/pp.90-95, Chapt. V/pp.96-116, Chapt. VI/pp.117-128.
15. Country Research 1999, *Research Response CHN13470*, 13 May
16. 'In the grip of the Ankang' 2005, *The Guardian*, 20 December (FACTIVA)
17. 'Beijing Ankang Hospital' 2005, Chinese Psychiatry Online (<http://www.21jk.com/common/ehospital/hospitalcontent.asp?recordid=1307> – Accessed 31 July 2007)
18. Hu, JiNian 2005, 'Current Situation of Forensic Psychiatry in China, Some Ethic Regulations on Mentally Disordered Offenders', Chinese Psychiatry Online, 27 February (<http://www.21jk.com/english/articlecontent.asp?articleId=27573> – Accessed 31 July 2007)
19. McDonald, Hamish 2005, 'China: Former inmate tells of torture', *The Age*, 7 November (<http://www.theage.com.au/news/world/former-inmate-tells-of-torture/2005/11/06/1131211945880.html?oneclick=true> – Accessed 8 November 2005) (CISNET China CX139530)
20. Human Rights Watch 2006, *China: No Medical Reason to Hold Dissident*, 17 March (<http://hrw.org/english/docs/2006/03/17/china13010.htm> – Accessed 21 March 2006) (CISNET China CX149375)