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# Occasional Paper #287 Political Passivity and Russia's Health Crisis

Debra Javeline



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This paper was written in connection with the Kennan Institute's Research Workshop on "Contemporary and Historical Perspectives on Conflict in the Former Soviet Union." Research Workshops serve as a forum at which junior scholars can develop and discuss their research pertaining to a variety of topics in the former Soviet Union. "Contemporary and Historical Perspectives on Conflict in the Former Soviet Union" brought together six scholars from a variety of disciplines, including History, Anthropology, Political Science, and Environmental Science, and was led by Mark Katz of George Mason University.

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# Occasional Paper #287 Political Passivity and Russia's Health Crisis

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## Political Passivity and Russia's Health Crisis by Debra Javeline

To the degree that anyone pays attention to mass politics in Russia—as opposed to the high politics of President Vladimir Putin and other government and financial bigwigs attention focuses on ethnic conflict, domestic unrest, or other public expressions of discontent. The skewed attention to expressed discontent or "conflict" can create the impression that conflict is a reasonably widespread phenomenon in Russia. Moreover, the implicit rationale for the skewed attention is that conflict is harmful for Russia and that the absence of conflict would be helpful and a worthy goal for Russia to pursue. There is too much conflict, and it should be reduced.

These premises are misleading. For one thing, Russia is actually a low-conflict place. Given the extraordinary amount of hardship and suffering endured by the Russian public, it is remarkable how little conflict actually arises. Second, the low level of conflict does not necessarily benefit the Russian people or their country's political and economic progress. The assumption that conflict is harmful should really be framed as a question: Given the extent and nature of the grievances in a country, what are the implications of a low-conflict public?

# THE POTENTIAL HARM OF A LOW-CONFLICT PUBLIC

The attraction of a conflict-free polity is relatively easy to understand. Conflict usually takes the form of strikes, demonstrations, riots, violence, and in extreme cases, internal war, and these behaviors can threaten state stability. Even when conflict manifests in a more benign form of mass participation where citizens use institutional means to present their grievances to policymakers, it can cause problems by leading to a clogged public agenda and by making it difficult to get things done. In both its malignant and benign forms, conflict can derail reform if not threaten the state entirely. Public passivity is therefore usually welcome. It is a relief when the public is inactive and conflict is minimal.

But this perspective on conflict reveals only one side of the story. It is also possible that the low level of conflict might be harmful. This notion is rarely entertained. To the extent that the harms of a conflictfree polity are mentioned, they are usually described in terms of inadequate interest representation. A low level of conflict allows the interests of some politically disadvantaged groups to be ignored. This is a very important concern and deserves greater attention. Another very important concern—and one that is rarely if ever mentioned—is that there might be negative health implications for a low-conflict public.

Of course, negative health implications are unlikely for a public that is low in conflict because it experiences no extreme hardships or injustices. The proposition concerns only a public with clear problems, hardships, or injustices that nevertheless rarely engages in conflictual behavior. Are there implications for the health of such a public?

My hypothesis is "yes." If a population experiences hardship, injustice, or any

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other political grievance and that population does not express these grievances, it might be more inclined toward stress and depression. Stress and depression in turn can lead to diseases like ulcers, hypertension, and even cancer and/or to socially maladaptive behavior like alcoholism and suicide. The potential harm of an aggrieved but low-conflict society is illness and death.

Below, I elaborate on this point. First, I argue that Russia has been relatively conflict free since the Soviet Union collapsed. Widespread problems in the country have gone unaddressed, and despite often desperate circumstances, little conflict has emerged. To the degree that conflict has existed, it has not necessarily been bad for Russia but rather has been one of the few mechanisms for ordinary Russians to get heard. Second, I describe recent trends in Russian morbidity and mortality. These staggeringly sad trends sit against the backdrop of a low-conflict public. Third, I argue that there appear to be some causal connections between unexpressed political frustration and Russia's public health crisis.

#### **RUSSIA'S LOW-CONFLICT PUBLIC**

Since the collapse of the Soviet Union, Russians have typically responded to hardship by doing nothing (Ashwin 1999; Crowley 1997; Howard 2002; Javeline 2003b). The biggest testimony to Russian passivity was the response to the wage arrears crisis in the 1990s. By the fall of 1998, the total unpaid wage bill in Russia amounted to about \$10 billion and affected about 70 percent of the workforce directly and almost all Russians indirectly through unpaid family members, the general uncertainty of payment irregularities, and the lost value of original wages when paid after periods of inflation. At the time, a constant stream of scholars, policy analysts, Russian politicians, and journalists

warned that Russians would soon erupt in mass protest. Russia was supposedly on the brink of a "hot autumn," a "hot spring," or a social explosion. These people reasoned that economic crises or sustained poor economic performance leads to frustration, which eventually leads to collective violence. In fact, the entire logic behind the strategy of shock therapy was that the public could tolerate economic pain for only so long, so reforms should be introduced quickly before the public had time to react.

Yet the predictions of social explosion did not come true. Despite the comprehensiveness of the wage arrears problem and other economic hardships, most Russians remained politically passive. Certainly, there were strikes and demonstrations and even occasionally more creative or grisly forms of protest, like sit-downs on railroad tracks or hunger strikes or even nailing one's hand to the wall of the factory. However, the more prevalent response to the wage arrears crisis was to do nothing. Russians did not make an organized, sustained effort to redress their grievances politically, and they certainly did not engage in riots and large-scale violent protests to challenge the state. The most generous estimates of strikers and protesters in Russia in the 1990s still represented only 1 or 2 percent of all Russian workers and also an extraordinarily small percentage of workers actually owed wages (Javeline 2003b).

Since Putin took office, the wage arrears crisis has diminished, but other economic hardships remain. Russians are still faced with low wages, job insecurity, unemployment, housing problems, and other social welfare issues (Javeline 2003a). In survey after survey, a majority say that the economic situation in Russian and their own personal economic situations are bad, and they name financial problems as the single most serious problem they face. Despite these frustrations, however, Russians are even more passive in the early 2000s than they were during the late 1990s.

Many students of Russia greet these stories with relief. The message they hear is that Russia is politically stable and there is one fewer country in the world to worry about. More conflict in the form of strikes and protests would be harmful and worrisome.

This reaction is not entirely justified. To the extent that strikes and protests have occurred, they have been good for Russia, or at least for those Russians who took action. For one thing, strikers and protesters are often effective. In the case of the wagearrears crisis, the strikers and protesters got paid. More generally, strikes in Russia have typically led to concessions (Cook 1997; Crowley 1997). This is true for miners, oil and gas workers, pilots, air traffic controllers, municipal transportation workers, hospital workers, and the like (Cook 1997). Squeaky wheels in Russia get the grease. In this respect, Russia resembles many other countries where the strike has been a fairly effective tool in forcing concessions from management and government (Tarrow 1998).

So-called conflict is simply one of the only ways that ordinary people have been able to make themselves heard in Russia. The fact that Russians had a very legitimate grievance-their wages were being withheld illegally-and that there was little conflict means that the majority of Russians were politically impotent. Today's unexpressed grievances also reveal political impotence. It is misguided to applaud this type of helplessness just because it appears to leave political leaders free of hassles. The low level of conflict may allow political leaders to go about the business of government without getting sidetracked dealing with public grievances. At the same time, what if those grievances fester and manifest themselves in other social problems?

#### **RUSSIA'S SOCIAL PROBLEMS**

It is well known that Russia has many social problems. In terms of mental health, the number of Russians treated for psychological disorders has risen more than one-third since 1989. According to the World Health Organization, by 1999, 3.5 million Russians (out of 145 million) were treated for psychological disorders, and more than one-third of Russians, or 52 million people, have "psychological disorders of various degrees" (World Health Organization 1999, 1; Feshbach 2003, xiii). In terms of "social pathologies," Russians have been drinking heavily, committing more crime, and taking their own lives at a rate that is now the highest in the world. Russians drink 4 billion bottles of vodka a year, or nearly forty bottles per adult, and an estimated 20 million Russians, or roughly one-seventh of the population, are alcoholics (Feshbach 2001; but see Feshbach 2003, 43).

Suicides in Russia have climbed from roughly 26 per 100,000 people in 1990 to roughly 40 in 2000, representing an increase of more than 50 percent in only a decade. Murders have climbed from roughly 14 per 100,000 people in 1990 to roughly 31 in 1995, representing well above a 100 percent increase in only five years. (Storey 1999; Corwin 2000; Goble 2001). In terms of nutrition, Russians have a poor diet. They consume increasing quantities of potatoes and bread, sacrifice more nutritious meat, vegetables, and fruit, and suffer important vitamin and mineral deficiencies (Clarke 1997; World Health Organization 1999, 20; Feshbach 2001). In terms of morbidity, Russians are increasingly prone to diseases like tuberculosis, cholera, diphtheria, polio, and heart disease.

And ultimately, in terms of mortality, Russians are dying. They are dying at rates

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that are alarming for a supposedly postindustrial country, and they are dying for reasons that are similarly alarming, like alcohol abuse and accidents. The rate of mortality has increased significantly for all age groups, and at its most extreme, it has doubled for men between the ages of forty and forty-four years, giving Russian men the highest rate of death in Europe (Kapstein 1997; Storey 1999; Corwin 2000). According to the gloomiest forecasts, by 2050 the Russian population will have shrunk by a third to 100 million people (Feshbach 2001) or fewer (Feshbach 2003, 5–7).

Some of the most extreme mortality trends have slowed in the past two or three years, and many of the above statistics are controversial and subject to dispute. However, the occasional modest health improvements and disputes over small statistical discrepancies are not very relevant here. More important is the general impression that many if not most Russians suffer from poor health. This point is relatively uncontroversial.

# CONNECTING POLITICAL PASSIVITY AND PUBLIC HEALTH

Obviously, political passivity or even the hardships of transition did not cause all these health problems. Many other factors have played important roles. For example, most students of Russia would point to history or culture, because Russians have been drinking heavily and eating poorly for centuries. Also, Russian population trends reflect declining birthrates as much as increasing death rates, so any explanation of mortality must be multicausal (Anderson 2001). Still, there are solid theoretical reasons to expect that political passivity belongs among the list of causes. The fields of social psychology and social movements provide relevant insights.

Social psychologists have generated a

huge body of literature on "loss of control." The premise of this research is that in the face of anger and frustration, individuals who think they cannot control their own destinies and feel powerless and helpless and believe their lives are without purpose are candidates for high stress and depression, or "psychological distress" (e.g., Nisbett and Ross 1980; Mirowski and Ross 1989; Argyle 1992; Lane 2000). Stress from lost control is said to be especially prominent among individuals who have experienced "status loss events" such as unemployment, divorce, the death of a loved one, and other losses of income, power, and prestige (Mirowsky and Ross 1989, 129). In the case of Russians and other post-Soviet citizens, most have experienced such status loss events on a personal level while also sharing in their country's major loss of status from a world superpower to developingworld charity case. Regardless of how fair this characterization is or how objectively widespread it is among other countries, the subjective loss of status on these multiple dimensions is deeply felt.

The resulting stress in turn can affect health directly by causing disease. Stress affects the nervous system, the neuroendocrine system, the immune system, and the cardiovascular system, and it leads to a higher risk for a whole range of illnesses, including hypertension, heart attack, gastric problems, stroke, ulcers, colitis, diabetes, infectious disease, and cancer. For example, low control at the workplace increases the risk of cardiovascular problems (Syme 1989; Marmot and Bobak 2000, 138). Within a given social class, unemployed people have an approximately 20 percent higher mortality rate than employed people, and people in insecure jobs have worse health than those in secure jobs (Moser, Fox, and Jones 1984; Ferrie et al. 1998). Loss of control, not the poverty, is the culprit.

These are just the direct effects of lost

control on health. There are also important indirect effects. When a person is angry and frustrated but has lost control, the resulting stress can affect health indirectly through high-risk behaviors such as poor diet, crime, excessive alcohol intake, and suicide. For example, in the United States, loss of control in the form of unemployment has been linked to alcoholism and suicide, with the unemployed being twice as likely to drink heavily and eight times as likely to attempt suicide (Argyle 1992).

Political passivity shares some characteristics with this concept of lost control. Passivity is in many ways a manifestation of lost control. Individuals who perceive a loss of control are unlikely to act. It is therefore reasonable to expect that, given similar grievances, politically passive individuals will resemble others in situations of lost control and will be more stressed and depressed than politically active individuals. As a result, politically passive individuals will have more health problems, poorer health behavior, and shorter lives.

In contrast, the literature on social movements suggests that politically active individuals should experience lower levels of stress and therefore have better physical health and fewer risky health behaviors. For example, the act of political protest is a sign of efficacy, empowerment, and control, and the causal relationship works in both directions.

On the one hand, a sense of efficacy or perceived control facilitates protest. Research has shown that protesters come from the ranks of the least marginalized and least alienated members of society. This finding runs counter to the conventional wisdom, which often blames protest on marginalization and alienation, but in fact participants in a whole range of movements including fascism in Germany (Oberschall 1973), the student movement (Keniston 1968), the civil rights movement (Morris 1981), the union movement (Moore 1975), the environmental movement, the antiabortion movement, the antinuclear movement (Leahy and Mazur 1978), and the unemployed movement (Klandermans 1979) have generally been well-adjusted, integrated members of their communities (Klandermans 1984, 583).

On the other hand, protest can facilitate a sense of efficacy or perceived control. In general, political activism can be a healthy, self-actualizing experience that increases selfrespect and empowerment. For example, members of such public interest organizations as the League of Women Voters, the Conservative Caucus, the American Civil Liberties Union, and Common Cause claim to have joined mostly to develop a feeling of efficacy (Cook 1984; Chong 1991, 75). Even participants in violent protests have rationalized that their actions have healthful effects. To quote a Watts rioter, "Violence is an alternative to despair. Through violence you can rid yourself of a torturing feeling of helplessness and nothingness" (Myers 2000, 3). One need not support the protester's advocacy of violence to agree with the observation that people who take action are different from people who do not take action. As Lichbach writes, people who protest "find dignity in place of mistreatment. They find self-respect instead of a lack of self-confidence. They begin to use more fully the skill and abilities that they possess: to work with other people, to influence, to speak up, to fight back. Through organizing, people begin to rediscover themselves....They rediscover the things in their family, their gender, their ethnic or language group, their race that give them strength" (Lichbach 1995, 121; also see Kahn 1982, 7).

Of course, there are other ways to achieve self-respect and empowerment. A person could gain these benefits from networking with family and friends or even from athletic pursuits. Still, political involvement is an overlooked and potentially important remedy to feelings of helplessness and the resulting negative health outcomes, whereas political passivity instead may facilitate negative health outcomes.

## **EVIDENCE FROM RUSSIA**

A great deal of evidence suggests that poverty-related diseases have played a very small role in Russia's mortality increase since 1989. Instead, the principal culprits have been cardiovascular disease and external causes. Similarly, populations that are traditionally vulnerable to poverty-related mortality, such as children and the elderly, are not the principal victims of Russia's health crisis. The principal victims are middle-aged men, especially those aged forty to forty-four years. Between poverty and death, some mechanism is intervening, and that mechanism is likely psychological or emotional.

Specifically, powerlessness, hopelessness, or "loss of control" is the likely intervening variable (Leon et al. 1997; Marmot and Bobak 2000, 147; Shkolnikov, Field, and Andreev 2001, 147). Identifying loss of control as the problem sheds light on why Russia's two leading causes of death are cardiovascular disease and alcohol abuse (which features prominently in accidents or "death by external causes" in Russia). Both causes of death are more prevalent among individuals who perceive a loss of control. Identifying loss of control as the problem also sheds light on why men have suffered disproportionately higher mortality. Men identify more with their occupational and political roles, rather than their family roles, so they are more frustrated and stressed by the loss of control in these arenas that has accompanied market transition. Men also cope with stress and frustration differently. They "abuse alcohol,

engage in violent or suicidal behavior, smoke more, and eat less healthily" (Watson 1995; Shkolikov, Field, and Andreev 2001, 153).

### POLICY IMPLICATIONS

If political passivity has no effect on public health, then scholars and policymakers might be justified in treating conflict as a "social bad" and being content to see little conflict in the former Soviet Union. If, however, the effects of political passivity on public health are substantial, we need to rethink our perspective on conflict. We need to weigh the costs and benefits of conflict, factoring in that a low-conflict public becomes an unhealthy and self-destructive public with accompanying ramifications.

From a humanitarian perspective, an unhealthy and self-destructive public demands attention simply because we value health and life. From an economic perspective, an unhealthy and self-destructive public usually results in low labor productivity and low economic growth, as well as skyrocketing costs for health care, social assistance, and law enforcement. From a military and security perspective, an unhealthy and self-destructive public results in fewer eligible conscripts and poor military performance (Feshbach 2003, 67-69). In turn, these problems make it harder for political leaders to reform an economy, consolidate democracy, or otherwise improve the functioning of the political system. From this perspective, the challenges of conflict, such as a clogged public agenda or turmoil on the streets, may seem manageable and preferable.

If political passivity affects public health so negatively, then passivity rather than conflict might be the "social bad" in need of remedy. Russians and other post-Soviet citizens need some sense of control and empowerment. In the economic realm, they may benefit from public works programs that are genuinely needed by the state and also give meaning back to the lives of workers. In the social realm, they may benefit from civil society or community development programs that encourage people to take charge of their neighborhoods and communities. These types of empowerment policies would obviously not cure all Russians of physical, mental, and social diseases, but they might alleviate some problems, and they are certainly better than the current do-nothing approach that fails even to acknowledge that public powerlessness is a problem.

The Russian public faces a material crisis to be sure, but it also faces a social psychological crisis, and policymakers need to address both situations with nontraditional approaches to alleviate pervasive feelings of helplessness and loss of purpose. The cost of not addressing these problems is nothing short of the country's progress. As Prime Minister Mikhail Kasyanov himself has warned, "the problem of the decline of the able-bodied population in the Russian Federation is not simply a social problem. It is a problem . . . of either a successful or an unfavorable development of our state as a whole" (*BBC Monitoring*, February 15, 2001).

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