FISEVIER

Contents lists available at ScienceDirect

# Forensic Science International

journal homepage: www.elsevier.com/locate/forsciint



# Case Report

# Diagnosis of torture after 32 years: Assessment of three alleged torture victims during the 1980 military coup in Turkey



Umit Unuvar<sup>a,1,\*</sup>, Halis Ulas<sup>b</sup>, Sebnem Korur Fincanci<sup>a,c</sup>

- <sup>a</sup> Human Rights Foundation of Turkey, Istanbul, Turkey
- <sup>b</sup> Dokuz Eylul University Medical Faculty, Department of Psychiatry, Izmir, Turkey
- <sup>c</sup> Istanbul University, Istanbul Faculty of Medicine, Department of Forensic Medicine, Istanbul, Turkey

#### ARTICLE INFO

#### Article history: Received 5 February 2013 Received in revised form 27 July 2014 Accepted 27 August 2014 Available online 6 September 2014

Keywords:
Torture
Istanbul Protocol
Documentation
Chronic patients
Psychological assessment
Physicians' responsibility

#### ABSTRACT

Torture is a crime against humanity and it is frequently encountered in countries that have a history of military intervention such as Turkey. Torture still exists despite absolute prohibition by human rights and humanitarian law. More than 1 million people were tortured in Turkey since 1980 coup d'état. Documentation of medical evidence is a prominent step for prevention of torture. *Manual on the Effective Investigation and Documentation of Torture* and Other Cruel, Inhuman or Degrading Treatment or Punishment (Istanbul Protocol) provides international standards for medical documentation of torture. A holistic approach to trauma stories together with physical and psychological findings has been the main frame of the Protocol. The aim of this study is to discuss physicians' responsibility for prevention of torture, and to emphasize the importance of holistic approach to the assessment of particularly chronic patients.

A team of two forensic medicine experts and a psychiatrist examined three male patients, who allegedly had been tortured severely during the 1980 military coup. The team arranged necessary referrals and diagnostic examinations. After conducting a comprehensive medical examination, some physical and psychological findings of trauma were observed and documented even after 32 years.

The medico-legal evaluation and documentation of these cases many years after torture under the guidance of Istanbul Protocol were presented and significance of psychological assessment was especially emphasized. Furthermore, possible evidence of torture after a long period and physicians' responsibility for prevention of torture is discussed.

© 2014 Elsevier Ireland Ltd. All rights reserved.

### 1. Introduction

Torture is one of the most common forms of human rights abuse in countries with a history of military coups such as Turkey. 1980 coup d'état in Turkey is one of the cruelest examples. Nearly one million people were tortured in ten years term following the military intervention [1].

One of the main reasons for persistence of torture is ineffective investigation, examination and documentation despite absolute prohibition of torture by human rights and humanitarian law all over the world. Istanbul Protocol, which has been endorsed by the United Nations, defines effective procedures of investigation as well as the evaluation and documentation of medical evidence of

torture [2]. The Protocol provides not only a standard and holistic approach to assessment of torture survivors, but also can be used as solid evidence and serve justice. World Medical Association defines the role of a physician in effectively combating torture in Declarations of Tokyo [3] and Hamburg [4], and refers to Istanbul Protocol as the standard guideline of a comprehensive documentation in the Helsinki Resolution [5].

In this study, three patients who allegedly have been subjected to severe physical and psychological torture methods during 1980 military coup are presented. Two forensic medical experts and one psychiatrist, who are experienced in trauma evaluation, examined the torture survivors. After preliminary examination, referrals to various specialties and diagnostic tests were conducted depending on the requirements of the patients. The importance of a holistic approach under the guidance of Istanbul Protocol and particularly that of psychological assessment while examining torture survivors even after a long period of time like 32 years is emphasized. The possible evidence of torture years after the event and the role of physicians in prevention of torture are discussed.

<sup>\*</sup> Corresponding author at: Human Rights Foundation of Turkey, Bozkurt mah. Turkbeyi sok., No 113/6, Sisli, Istanbul, Turkey. Tel.: +90 212 2493092; fax: +90 212 2927996.

E-mail address: uunuvar@gmail.com (U. Unuvar).

<sup>&</sup>lt;sup>1</sup> Permanent address: Riza Bey sok., No 1/7, 34437 Gumussuyu, Istanbul, Turkey.

#### 2. Case presentations

Informed consent was granted at each stage of interview, examination and documentation while all findings of external examination were photographed. Referrals to Otorhinolaryngology, Neurology, Orthopedic surgery, Urology, Ophthalmology, Thoracic Medicine were arranged depending on the findings of physical examination and whole-body bone scintigraphy of three patients were performed. Referrals and diagnostic imaging revealed no findings that can be associated with trauma.

#### 2.1. Case 1

A 72 years old male who was 40 years old at the time of torture and had suffered torture for 4 months. Time since torture is 32 years.

#### 2.1.1. Torture methods stated

Blindfolding, beating, phalanga to the feet and hips, electrical torture, cross suspension, butcher suspension, reverse butcher suspension, Palestinian suspension, other types of positional torture (putting and turning in a wheel, forced standing while the body is leaning on the wall with index fingers stretched above the body, binding to the hot radiator while the hands tied from behind), bear suffocation (holding from underarms and clasping the hands on the back of the neck pushing the neck forward), spraying pressurized cold water, forced witnessing of torture to others, threat, humiliation, deprivation of food and water, preventing urination and defecation, sleep deprivation, immersion (immersing head into water), forcing to lie on concrete and cold ground after spraying water, threats against himself, fake execution, cigarette burns.

#### 2.1.2. Complaints

In 1980, after the Palestinian suspension; pain that lasted for 2–3 months, unable to hold a spoon and feed himself, disability to wash his hair for being unable to raise his hands and now difficulties still exist. After phalanga; pain that lasted for 10–15 days, unable to walk, swelling and bruises of the feet, infected wounds on ankles. After immersion torture; difficulty in breathing, respiratory problems, high fever at nights. After tire spinning and bear suffocation; pain in ribs. After beating of the face and head; pain, inability to move chin, difficulty in eating, hearing loss in left ear. After blows, kicks and/or beating with an instrument (truncheon, shovel, stick, etc.); pain, bruises, wounds, and scars which still existing. After electrical torture; difficulty in urinating, urinary incontinence and sexual dysfunction. After cigarette burns; burn marks, which still exist.

#### 2.1.3. Physical examination findings

- A hyperpigmented and indented,  $1.5~\rm cm \times 1.2~\rm cm$  scar tissue located on 1/3 above on frontal part of right tibia (Fig. 1). He states that he was beaten by a shovel, and it was an infected wound which took 2 months to recover.
- A hyperpigmented and indented, 0.5 cm diameter round shaped scar tissue located on the inside of right wrist. He describes it as cigarette burn mark.

# 2.1.4. Psychiatric assessment

2.1.4.1. Psychiatric history. He had no psychiatric complaints and history before. He said that his complaints started after his detention in 1980. He described loss of consciousness from time to time during torture (electric shock, immersion, phalanga) and deterioration in perception of time and space during torture. He



Fig. 1. Wound scar on tibia.

stated that he experienced constant anxiety, despair and fear of death since he was detained. Almost every night he had night-mares such as his friends being tortured and listens to their screams in the first days of detention. The frequency has lessened while he has had similar nightmares once or twice a month in the last 4–5 years.

He still recalls the screams under torture and feels as if he is reexperiencing that time whenever he hears a baby crying or screaming. This comes along with symptoms such as anxiety, tachycardia and trembling. He describes complaints such as having intensive trouble with any stimuli that reminds him of torture. For example; he turns off TV or changes the TV channel when watching news and programs on torture, or he leaves the room when torture is discussed. There were also symptoms such as loss of interest, not enjoying things that he used to enjoy, feeling inept and significant decline in attention. He declared that he has a sleep disturbance while he was in custody such as difficulty in falling and staying asleep. Despite relative decline in the frequency and intensity of the complaints, they still remain.

2.1.4.2. Psychiatric complaints. Sleep disturbances, having night-mares, having intrusions about the torture he experienced, anxiety, feeling depressed, intolerance to noise, intolerance to speech and places that reminds him of the torture he experienced.

2.1.4.3. Psychiatric examination. He was conscious, cooperative and oriented to the place, time and person. His speech was spontaneous. He had eye contact. His mood and affect was irritable and depressive. Cognitive skills are preserved. Intelligence and perception are normal. Flashbacks about memories of the torture experience were present. There were intrusions about traumatic events and repeated unwilling recalling. His thought flow was normal; in thought content there were intrusive thoughts about his traumatic experience. He has no expectations from life. He also describes having difficulties in falling and staying asleep and he suffers anger bursts.

He was diagnosed with Chronic Post-Traumatic Stress Disorder and Major Depression after psychiatric examination.

## 2.2. Case 2

A 63 years old male who was 31 years old at the time of torture and had been subjected to torture for 4 months. Time since torture is 32 years.

#### 2.2.1. Torture methods stated

In addition to torture methods in Case 1, he was kept in a cell full of water, all of his toenails were removed by a pliers, had suffered repetitive anal rape with a truncheon for 7–8 times.

# Download English Version:

# https://daneshyari.com/en/article/6552440

Download Persian Version:

https://daneshyari.com/article/6552440

<u>Daneshyari.com</u>