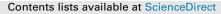
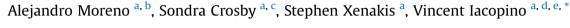
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Short report Implementing Istanbul Protocol standards for forensic evidence of torture in Kyrgyzstan



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ABSTRACT

The Kyrgyz government declared a policy of "zero tolerance" for torture and began reforms to stop such practice, a regular occurrence in the country's daily life. This study presents the results of 10 forensic evaluations of individuals alleging torture; they represent 35% of all criminal investigations into torture for the January 2011–July 2012 period. All individuals evaluated were male with an average age of 34 years. Police officers were implicated as perpetrators in all cases. All individuals reported being subjected to threats and blunt force trauma from punches, kicks, and blows with objects such as police batons. The most common conditions documented during the evaluations were traumatic brain injury and chronic seizures. Psychological sequelae included post-traumatic stress disorder and major depressive disorder, which was diagnosed in seven individuals. In all cases, the physical and psychological evidence was highly consistent with individual allegations of abuse. These forensic evaluations, which represent the first ever to be conducted in Kyrgyzstan in accordance with Istanbul Protocol standards, provide critical insight into torture practices in the country. The evaluations indicate a pattern of brutal torture practices and inadequate governmental and nongovernmental forensic evaluations.

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1. Introduction

Kyrgyzstan is a mountainous Central Asian nation with a population of approximately 5.5 million. After breaking from the former Soviet Union, Kyrgyzstan gained independence in 1991. In September 2011, President Roza Otunbayeva acknowledged that "torture in Kyrgyzstan is a part of culture and everyday life."¹ As a country in democratic transition, the Kyrgyz government has declared a policy of "zero tolerance" for torture and has begun a reform process based on UN recommendations,^{2,3} including the implementation of Istanbul Protocol⁴ standards for the effective investigation and documentation of torture and ill-treatment. We conducted 10 forensic medical evaluations of individuals alleging torture to serve as a foundation for policy reform and capacity building for the implementation of the Istanbul Protocol as part of a

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three-year effort by Physicians for Human Rights (PHR), a nongovernmental human rights organization.

2. Methods

Between January 2011 and July 2012, 472 torture and/or illtreatment complaints were placed. In Kyrgyzstan, once a complaint is submitted, it is reviewed by a prosecutor, who determines whether or not to open a formal investigation. Following review by the prosecutor, formal criminal investigations were launched into 28 of the cases; the other 444 complaints were either still open or had been formally closed; no additional information was available on these cases. The Public Foundation Golos Svobody – Rehabilitation Program for Victims of Torture referred 10 of these 28 cases to PHR; these 10 represented the Foundation's legal case load at the time. Four international experts working with PHR evaluated the 10 alleged victims, representing 35% of the criminal investigations into torture and/or ill-treatment for this period of time. The forensic medical evaluations were conducted in the capital city of Bishkek in December 2011 and February 2012. All







forensic medical evaluations were conducted in accordance with Istanbul Protocol standards.

Medical records and prior forensic evaluations were reviewed for all individuals who had them (*see* Table 1). The Public Foundation Golos Svobdy secured access to this documentation, as well as their English translations. The basis for any diagnosis made by PHR's team was the interview and examination, along with any corroboration from prior medical records, forensic evaluations, consultation notes, and imaging studies. Mental health conditions were established using criteria from the Diagnostic and Statistical Manual of Mental Disorders Fourth Edition, Text Revised. In addition to the standard neurological and mental status evaluation, the Russian version of the Montreal Cognitive Assessment (MOCA) test impairment was used to establish cognitive impairment.⁵

The data were analyzed using descriptive statistics. All individuals provided verbal consent for the use of de-identified case information for publication purposes. The study, funded by the Open Society Foundation, Central Eurasia Project, was reviewed and approved by PHR's Ethics Review Board.

3. Results

All individuals were male with an average age of 34 years (mean: 33; range: 22–61). Nine of the 10 individuals evaluated had been studying or engaged in manual, non-professional work prior the alleged events (*see* Table 2). At the time of PHR's evaluations, none of these 9 individuals had been able to resume their work or studies after the alleged incidents. Most of the alleged victims (8 out of 10) stated that the incidents took place in either the Bishkek or the Jalalabad area (*see* Table 2), and – on average – occurred 2 years (range 3 months–6.4 years) prior to the PHR evaluations.

The alleged victims reported that police officers were the perpetrators in all cases, including internal affairs/special force police unit (5 cases), local village police (2 cases) and traffic police (1 case).

In all cases, the police reportedly used physical and psychological methods of torture to force a "confession," and all but one

Table 1

Summary of prior medical and forensic documentation reviewed.

Individual No. 01	- Hospital admission records
	- Imaging study report (chest X-ray)
	- Psychotherapy notes
Individual No. 02	 Ambulatory medical record
Individual No. 03	- Hospital admission records
	 Forensic evaluation request note
	(no report produced as patient taken to
	hospital for emergent medical care)
Individual No. 04	 Hospital admission records
	 Imaging study report (magnetic resonance)
	 Forensic evaluation report
Individual No. 05	 Hospital admission records
	 Imaging study report (ultrasound)
	 Procedure note (endoscopy)
Individual No. 06	 Hospital admission records
	 Imaging study report (ultrasound and
	magnetic resonance)
	 Procedure note (electroencephalography)
Individual No. 07	 Hospital records from two separate admissions
	 Surgical subspecialty consultation note
	 Imaging study report (Doppler ultrasound)
Individual No. 08	 No records available for review, except for
	non-forensic photos taken shortly after the
	alleged events
Individual No. 09	- Hospital admission records
	- Procedure note (electromyography)
	 Surgical subspecialty consultation note
Individual No. 10	- Hospital admission records
	- Psychotherapy notes
	 Procedure note (electroencephalography)

Table 2 Demographics

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	Ν
Gender	
Male	10
Occupation prior alleged events	
Manual, non-professional work (driver, construction, merchant)	5
Student	2
Human rights activist	1
Farmer	1
Unknown	1
Occupation at the time of evaluation	
Unemployed	9
Unknown	1
Place of alleged events	
Bishkek area	5
Jalalabad area	3
Other areas	2

individual provided self-incriminating statements as demanded by the police; the alleged victims reported doing so in an effort to end the torture. In all cases, the alleged torture occurred in the course of police investigations, including ordinary crimes (7 cases), violent acts during ethnic disturbances (2 cases), and alleged involvement in political agitation during a national election (1 case) (*see* Table 3). Arrest warrants were issued in only two cases, and — in both cases — the victims alleged that the only reason the police managed to secure warrants was by planting evidence.

The majority of the alleged victims (9) suffered the alleged abuse during a single detention, while one individual reported that the abuse took place during more than one detention at different locations (*see* Table 3).

All individuals reported being subjected to threats and blunt force trauma from punches, kicks, and blows with objects such as police batons. The two most common types of intimidation were threats against the alleged victim's life and of sodomization with a police baton. Two individuals reported *falanga*, the beating of the soles of the feet. Four individuals reported asphyxiation with a plastic bag, a gas mask or a chemical substance. Two individuals described electric shocks that caused loss of consciousness. One individual suffered a life-threatening gunshot wound while being interrogated and beaten in the street by multiple police officers in connection to a motor vehicle accident; one of the officers pulled out his handgun to further intimate the individual and discharged the weapon. The individual arrived to the emergency room in hemorrhagic shock and was found to have a left brachial plexus and axillary artery injuries (*see* Table 4).

Seven individuals in total reported experiencing bruises and loss of consciousness after the abuse. Other common immediate physical sequelae were lacerations from blunt trauma (4 cases), cuts from sharp objects (4 cases), and rib fractures (1 case). Two of the

Table 3

Motives and perpetrators.

	IN
Alleged perpetrator	
Internal affairs/special force police	5
Local village police	2
Police officer otherwise not identified	2
Traffic police	1
Alleged motive — law enforcement activity	
Investigation of an ordinary crime	7
Investigation of a violent act during ethnic disturbance	2
Investigation of political agitation during national election	1
Number of detentions/arrests	
One	9
Two or more	1

N

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