TORTURE AND A DOCTOR

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ABSTRACT
Modern media today emphasize about ongoing humanitarian & human rights disasters. The latest torture these days is characterized by adopting technological sophistication that leaves behind few physical traces. Nonetheless, agencies such as Amnesty International have provided convincing proof of applying torture in many countries. ‘The Lancet’ highlights evidence that doctors, physician assistants, nurses, medics at Abu Gharaib assisted in or remained silent in the face of prisoner abuse. Lieutenant Colonel Joe Richard, a spokesman for the Pentagon criticized the Lancet article as a “broad – brushed indictment” based on “allegations” [1]. But if the Medical faculty is able to document the victims in a fair manner they can come out of these allegations.

This article is a miniscule contribution to the medical faculty to inculcate awareness about the degrading, inhumane act(s) and how one can go about to curb or eradicate the same.

KEY WORDS: Torture, inhumane, medical faculty

INTRODUCTION
Torture and violence have been identified since time immemorial. There are tales, which tell us about the Kings torturing their subjects, or prisoners of war or thieves in order to keep the empire under control. The application of torture is to dehumanize the victim. Of late, torture has emerged a worldwide phenomenon. Torture is considered unjustified and illegal under any circumstances. According to a recent report of the Amnesty International, the Governmental torture takes place in 65 out of the 144 countries studied. [2] Considering the ethical value of a doctor it is imperative on part of one self to protect the individuals from such treatment by effective investigations & documentations to provide evidence of torture & ill treatment so that torturers are made accountable for their actions [3]. The reason behind torturing an individual has not changed much but the methods employed for torturing have changed.

Istanbul Protocol Manual defines torture as “any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person for reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent of acquiescence of a public official or other person acting in an official capacity”. It does not include pain or suffering arising only from inherent in or incidental to lawful sanctions [4].

The main purpose of torture is to deliberately disturb not only the physical and emotional well-being of individuals, but grading the dignity and will of the community as a whole.
Types of torture:
a) Physical torture
b) Psychological torture

Methods of torture have changed; traditional methods mainly used physical pain, where as modern torture involves psychiatric, pharmacological & psychological techniques more than physical pain [5]. It has been challenging for the doctors to scrutinize the allegedly tortured victims or individuals to document and present in a fair manner.

Frequently, victims themselves do not reveal the torture experience to the doctor; for the fear of reprisals, be overwhelmed by humiliation, or be reluctant to retrieve painful memories and fear stigmatization to themselves and their families [6]. But the victims may approach a doctor when once the symptoms develop, as the modern torture effects are seen after a long time [7].
PHYSICAL TORTURE [8]

1. Beatings:
   a. In general
   b. To the soles of the feet (falanga, falaka, baatinada)
   c. With the palms on both the ears simultaneously (el telefone)
   d. On the abdomen, while lying on a table with the upper half of the body unsupported (operating table, el quirófano)
   e. To the head.

2. Suspension:
   a. By the wrist (la bandera)
   b. By the arms or neck
   c. By the ankles (mercelago)
   d. Head down, from a horizontal pole placed under the knees, with the wrists bound to the ankles (parrot’s perch, jack, pau de arara)
   e. Bhutanese technique – tight clamping of the thighs or legs with bamboo, sometimes for a number of days. The torturer may press the two sides of the clamps with his legs or may stand on the two sides of the clamps (chepuwa) [9].

3. Near suffocation:
   a. Forced immersion of head in water, often contaminated (wet submarine, pileta, latina)
   b. Tying of a plastic bag covering the head and face (dry submarine)
   c. Gagging

4. Electric:
   a. Torturing with electric shocks, usually placing electricity terminals in the vagina, mouth, anus, or over testicles and nipples [10].
   b. Heated metal skewer inserted into the anus (black slave).

5. Sexual abuse:

6. Forced posture:
   a. Prolonged standing (el planton)
   b. Forced straddling of a bar (saw horse, el cabellete)

7. Miscellaneous:
   a. Dehydration
   b. Animal bite (spiders, insects, rats, mice, dogs etc.)

The methods employed by the torturer depend on the available sources and the methods commonly employed in their locality earlier.

PSYCHOLOGICAL TECHNIQUES [2]

1. Coercion technique: Constrain or forcing or threatening the individual to reveal thing(s) that would be beneficial for the threatening/forcing party.

2. Deprivation technique: Deprivation from food, sleep, health service, hygiene, nutritional, sensory.

3. Incongruent acts: That is violation of one’s culture or religious norms, such as forcing to eat beef or pork that amounts to spiritual torture for higher caste Hindus [9].

4. Cultural shock: severe distress caused by a major cultural change is termed cultural shock. This condition arises when individuals suddenly find themselves in a different culture in which they feel completely alien e.g.: American jailers in Iraq made their prisoners of war to listen to heavy metal songs [11].

The most common forms of torture encountered during various studies are severe beatings, threats, humiliation, suspension, sexual violations [12, 13].

The most common complaints are headache, various cardio pulmonary symptoms, and sleep disturbances with nightmares, impaired concentration, memory and emotional instability [12, 14.]

The most common long term Psychological sequelae of torture are Post Traumatic Stress Disorder (PTSD) and Traumatic Stress Related (TSR) symptoms. In a survey 9.4% of participants showed PTSD and 76-78% showed TSR symptoms [15].In another study 11.8% had all symptom criteria for PTSD, 54.4% had anxiety symptoms and 38.8% had symptoms of depression [16].

Thus the study results revealed that psychiatric morbidity related to human rights violations, traumatic events, and terrorism has a long-term effect on one’s life.

The medical community dealing with torture victims should have a general idea about the types, and sequelae of torture before going further into management of the case. The critical evaluation of
data collected during in depth interviews with torture victims is the core of documentation of torture.

ROLE OF DOCTORS
- Investigate and document medical evidence.
- Treat torture victims and his / her family.
- Prevent torture.
- Oppose any form of physician involvement in torture.

Descriptions of where and by whom examinations were conducted and the reporting of information in a format that would ideally include history, physical and psychological findings and diagnosis would greatly improve communication between health professionals as well as facilitate the evaluation of information on this topic. Thus, health professionals are in a unique position to foster the prevention of torture.

The Istanbul protocol [17] which provides the guidelines or footsteps at each and every level is to be followed by the doctors for proper management and documentation.

One has to remember to
- Avoid the procedures reminding the victim of torture he or she has been subjected to.
- Provide physical & Psychological treatment simultaneously.
- Treat the entire family of the torture victim.
- Document the findings in a prescribed format as per guidelines (Istanbul Protocol).
- And rehabilitation should be a part of the treatment.

CONCLUSION
Having some such basic knowledge about torture one can strive to get justice to the victims and to the society. The doctors armed with such knowledge about torture will be in a better position to probe into this degrading nature with relevant technical skills and they can manage to treat and rehabilitate the torture victims but also document the evidence in a unique way to foster the prevention of torture. Such evidence can attract international attention on human rights abuses even when they are totally denied by various groups and governments that commit them.

REFERENCES
