



HRFT

Human Rights Foundation of Turkey

**TREATMENT and REHABILITATION
CENTERS REPORT
2004**

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INTRODUCTION

Metin Bakkalçı*

The Human Rights Foundation of Turkey (HRFT) is a specialised organisation founded in 1990 and aims to provide people who have been subjected to torture and other cruel, inhuman, degrading treatment and punishments, with physical and mental treatment and rehabilitation services and document cases in five treatment and rehabilitation centres, existing today (Adana, Ankara, Diyarbakır, İstanbul and İzmir).

Even the figures and statistical information obtained by the Treatment and Rehabilitation Centres of the HRFT alone, unfortunately show that despite all the precautions taken by the Constitution and despite subscribed regulations and international conventions, *torture and other cruel, inhuman degrading treatments or punishments* in Turkey still continue to be a serious problem. It should be noted that the HRFT has contributed greatly to those developments, which are considered to be positive ones.

This report has been written to make a current evaluation of the work of the Treatment and Rehabilitation Centres of the HRFT and also pursues the aim to achieve a better understanding of the problem in question in Turkey.

In the year 2004, the issue of torture has been a special one on the agenda, especially with regard to the accession process to the European Union. Considering the 2004 Regular Report on Turkey's Progress towards Accession and the resolutions of the 17th December 2004, torture will continue to be a special issue on the agenda in the coming period. It appears that the issue of torture was discussed with political considerations and that far from there being a conscientious outcry, there have been efforts to stress some justificatory reflexes of political attitudes, which do not respect scientific approaches to torture.

* Dr., Coordinator of the HRFT Treatment and Rehabilitation Centres

Considering this situation, it is extremely urgent that the work of our Foundation, which bases itself on knowledge and, at the same time, on the necessity of a conscientious outcry, must be made more systematical.

This urgency becomes the more important when the efforts to justify torture worldwide, especially in Iraq, are considered.

There have doubtlessly been positive legal-administrational developments regarding torture in recent times, thanks to the efforts up to date and the relations with the European Union. Despite the positive developments mentioned above however, the characteristic quality of this whole process is that as yet there is no sincere determination, especially no political determination, when it comes to the absolute prevention of torture. When international definitions of systematical torture and the experiences of the past 15 years of (HRFT) are considered, it becomes apparent that there is no holistic approach to the subject and that in the context of the discussion about the question whether torture in Turkey is systematic or not – a question, which was foremost in the public discussions of autumn 2004 - the comments of the Prime-minister show clearly how serious the problem is.

By the beginning of the year 2004, a number of 8835 people had applied to our Treatment and Rehabilitation Centres in five cities (Adana, Ankara, Diyarbakır, İstanbul ve İzmir). With the additon of 922 further applicants, the total number of applicants reached 9757 by the end of 2004. Some hundreds of health workers, in both professional and voluntary capacity, give health services in multidisciplinary teams for the treatment of the physical, psychological and social problems of the applicants.

The Treatment project not only provides treatment services but also includes work on the improvement of the quality of this service by organising trainings, scientific research and scientific events. A large number of national and international meetings were organised and attended with this aim.

Apart from training sessions on the national level in the year 2004, participation of our Foundation in the Istanbul Protocol Training Project in five countries (Marocco, Georgia, Mexico, Sri Lanka and Uganda) along with the IRCT, the Turkish Medical Association and the PHR, has demonstrated the expertise of the HRFT in this area.

In the last period of the year, the practice of “isolating prisoners in F-type prisons, especially in single or three persons cells” stayed in the agenda, which received a “legal” character, when the “Law on Execution of Sentences” came into force. This was especially the case, since the experiences with the Type F prisons and the related hungerstrikes were continued, even though the number of the strikers fell considerably. Furthermore, a special issue on our agenda has been the re-incarceration of those prisoners facing health problems due to their hungerstrike, who had been set free but were put in prison again on the basis of the reports, submitted by the same Forensic Medicine Institute, that their health was returned to norill.

A special issue on our agenda arose from the fact that a large number of the 3000 prisoners naturally applied to our Treatment Centres. These were set free at the end of the year due to the regulations of the New Turkish Penale Code, which came into force on 1st June 2005 and in the drafting of the topics on “torture” of which the HRFT endeavoured to be directly involved. This development has shaped itself into an intensive issue on our agenda, at least in the period at hand.

Work on reports and alternative forensic reports was continued this year as well.

The section 6 of article 67 of the Code of Criminal Procedures, which is due to come into force on 1st June 2005, has been drafted as follows: “The public prosecutor, the participant, his representative, the suspect or accused, the defender or his lawful representative can provide themselves with a scientific standpoint on the issue of the trial, or to be used in the drafting of the experts report or about the experts report.” It is probable that the number of applications to the HRFT to obtain such a specialist view will rise on the basis of this article and therefore necessary preparations are being made to make more efficient use of our expertise in this area.

The project “Independent Legal Expertise in Preventing Torture”, which has been initiated by the HRFT in co-operation with the Forensic Medicine Specialists’ Association has contributed greatly to work in this area.

The work of the Foundation has been impaired in the year 2004 by the attempts of the Izmir Bar Association to prevent the work of the Izmir Torture Prevention Group, which contributed greatly to the work mentioned above. The issue of the continuance of the work of the Torture Prevention Group is on the agenda of the Foundation.

As we persisted in stating in the past years,

The issue of “refugeeism” has become a more important issue on our agenda with regard to our work on treatment and rehabilitation because of various reasons like growing inequality in the world and especially the efforts of “so-called developed countries” to limit human mobility and, additionally, to accelerate programmes aiming to send refugees back to their home countries.

The new computer programme, which had been developing in the previous two years, began to be used in 2004. The programme proved itself to be useful in providing the data for the year 2004 in a short time. By making use of the experiences of the year 2004, a more organised work atmosphere will be developed from the year 2005 onwards. The new programme will be of extraordinary use since it provides the opportunity to obtain current data and active surveillance.

The work of the HRFT is the work of hundreds of sensitive people, health professionals and human rights advocates, concentrated around a common aim in different cities of the country. We would like to thank all our friends who contributed to our work and to all associated institutions, who supported our work from the very beginning, especially the Human Rights Association and the Turkish Medical Association.

Ankara, May 2005

PREFACE

Yavuz Önen*

Human Rights 2004

On the top of the world agenda in the year 2004 was Iraq as a country, in which international law and primary rights were violated. The violence against members of the resistance movement against the invasion led by the USA and the attacks of the members of the resistance led to the deaths of many civilians. The cases of torture of a sexual nature practiced by US soldiers in the Abu Gharib prison and heedlessly shown to the world, bombings of civil targets like hospitals, schools, houses and mosques in Karbala and Felluce, killings of a great number of civilians are crimes against humanity and against the Geneva convention. Organisations like the UN, EU, EC, CESC etc remained silent in most cases. International organisations working on human rights made no effective efforts. As the HRFT we proclaimed our opinions to the general public. We repeated our demand that the USA sign the convention on the International Criminal Court. We also refused the invitation presented to the HRFT by the USA Consulate General to be present at the speech of the USA President George Bush, while he was in Istanbul during the NATO summit.

The year 2004 ended with a catastrophe. The Tsunami waves caused by an earthquake on the scale of 9 in the Indian Ocean killed more than 125 thousand people as estimated today. They destroyed the constructed environment and the infrastructure in the places they affected. An international solidarity movement was initiated to collect the bodies and answer the immediate needs of up to 5 million people. This disaster demonstrated the need of discussing the issue of safety in the face of natural catastrophes in the context of international

*President of the HRFT

strategies. Our greatest expectation is that the technology and finances used for the military be used for creating safer living space for millions of defenceless people instead. We will carry the pain of lost lives in us, we will not forget what happened. We will examine ways of future solidarity by building up relations with local human rights organisations.

The year 2004 was an important year because of the stage of the relations between Turkey and the EU.

The issue of proclaiming a date for the accession negotiations for full membership of Turkey in the EU Council summit on the 17th December and legal alterations made in this context was the most important factor determining our political life in the year 2004. Due to these developments, human rights was in the agenda of the 59th government, four new laws were put in force and the AKP government made efforts to create an image of Turkey, who realised the political criteria expected of her. Various segments of society criticised or protested against these efforts.

The decree allowing traditional languages and dialects to be broadcast in national radio and television stations was proclaimed in The Official Gazette and put in force. The first radio transmission started on the 7th June in Bosnian. Radio transmissions continued with weekly programmes of a duration of half an hour in Arabic, Kurmanci, Circassian and Zaza. However, the protests made by the Bar Association of Diyarbakir and Gün TV against the restrictions made to local television stations were refused by the Council of State.

With the addition of a clause to article 90 of the constitution, it came to force that international conventions be held above national ones in cases, in which national regulations do not coincide with international conventions on principle rights and freedoms.

The Ministry of Internal Affairs ruled that meetings and demonstrations of NGOs could be recorded by the police only with the permission of the head of public administration.

For the first time a civilian was appointed General Secretary of the National Security Council. The regulations on the decree of Law on Compensation of Damages Caused by Terror and Anti-Terror Struggle were published. The State Security Courts were abolished. In their stead, "special criminal courts" were established. Military presence in the committees of the High Council for Radio and

Television (RTÜK), The Council of Higher Education (YÖK), the High Council of Communication, the Commission on Protection of Children from Harmful Publications was abolished. The New Turkish Penal Code raised the minimum and maximum limits for torture crimes and heavy torture crimes on the basis of their results, while cases of torture resulting in death are to be sentenced for life. We approve of these regulations because of their deterrent character. However, the fact that "ill-treatment" as a crime was included in these regulations led to concerns. Article 305 under the heading "Crimes against National Interests" in the New Turkish Penal Code, is a significant proof that some opinions will continue to be treated as crimes. According to the New Turkish Penal Code, journalists can also be sentenced to heavy punishments if some of the crimes mentioned in the New Turkish Penal Code are committed "via the press". Prisoners will not be made to wear uniforms and there will be no solitary confinement. Prisoners will not be subjected to torture or cruel, inhuman, humiliating and disgracing treatment. The rule on forced labour of prisoners was alleviated. However, the F-type prisons with cells for solitary confinement were not shut down. The article 25 of the New Press Law is also of a character limiting and restricting free thought. According to the changes made in the Code of Criminal Procedures, the duration of detention will not exceed 24 hours, the prosecutor will be empowered to extend this duration up to three days in cases of collective crimes, arbitrary detentions will decrease. The duration of arrest will not exceed six months. Security forces will only be allowed to do raids and searches with the leave of the judge or on the written order of the prosecutor. However, the draft law on "Law Enforcement", which we claim to be of great importance in preventing torture. The foundation of associations along the Law of Associations facilitated activities on an international level.

The alterations made in order to prevent torture are positive ones. There must be more cleaning up in the laws in this area. Gendarmerie privates and specialist sergeants with an appointment of one year take part in interrogations within their sphere of duty. This method is not only problematic with regard to a proper interrogation but makes it more difficult to make investigations against security forces. Security forces accused of torture are defended by lawyers in state service. Thus, seven or eight lawyers are employed in the Security Centre, which is to the advantage of people accused of torture.

However, recent amendments transferred to the Ministry of Inner Affairs the right to organise psychological operations, which had belonged to the General Secretary of the National Security Council and which, in the past years, had

caused cases of uncleared murders, extrajudicial executions, disappearance under detention, death due to torture, torture, demolition of villages and forced migration as well as deportations. We feel worried about this situation in a country, in which pressure on civil life and basic rights is also applied by civilians.

The EU Helsinki summit in 1999 plays an important role in the political life of Turkey. Since this date, the governments of the Turkish Republic prepared a "National Programme" and began with the process of the adoption of EU acquis. One of the actors in these official endeavours, seldom seen in the years before, was civil society. However, relations with non governmental organisations were, on the whole, for show only. It is clear, that the process of the EU membership is decisive and directive in these steps of democratisation. Public demands were largely ignored in this process.

The Government and Civil Society

The fact that the European Council set a date for the commencement of the adoption of the EU acquis, points to a new dynamic and long process. It is the basic duty of various segments of society and of human rights organisations, to produce positive effects in defending, protecting and developing human rights. Activities such as monitoring violations of human rights, identifying them and presenting them to the public, without making concessions of the values of human rights, will have to be continued in the new period as well. The negotiations, which are due to start in October 2005, is defined as open ended, long and may be interrupted or stopped along the demands articulated in the letter of recommendation and the framework of the council. This process, which commenced with the Ankara Convention of 1963 depends on its successful completion by the governments, on the success of relations with society and on the recognition of a political stance, which regards true democratic values as a benchmark.

Even if it remains to be seen how successful the AKP administration will be in this matter, the relations it had with NGOs in the past might give some clues. One of the important issues of the year 2004 came to be discussed by the "Report on Minorities". This report, which was adopted by the Human Rights Advisory Board had to face negative reactions from certain people and the government. Individuals who had been part of the team preparing and voting for the report, which analysed a pluralistic and differentiated society in the legal framework EU and Turkish law, including the Lausanne Treaty, faced serious threats. Following discussions, which included the Human Rights Advisory Board, a campaign was

initiated against the council, in which the Directorate of Human Rights was also active. In any case, the governments had not felt the need to apply to the Human Rights Advisory Board regarding the 260 draft laws made in the past periods. The commissions which were established to carry out the function of the Human Rights Advisory Board in its establishment rule and regulation, were active. However, the "Report on Torture", which was completed by one of these commissions and presented to Abdullah Gül, Minister of Foreign Affairs and Minister responsible of Human Rights, no answer was received.

A further important discussion was triggered by the Commissioner in charge of EU Expansion Verheugen's question during his visit to Turkey, shortly before finishing his report of the 6th October for the Council, whether torture is systematic or not. This was because the problem in question did actually continue to exist. Also in the year 2004 was torture used in a widespread, continuous manner, having specific aims and systematically by police, gendarmerie and special forces in interrogation centres and other places. It appears by the applicants to the HRFT and the ascertainties of the Human Rights Association that this is the case. 348 of the 922 applicants who were treated in the HRFT Treatment Centres, stated that they were tortured in the year 2004. In the preceding year, 925 people were treated, 340 of whom stated to have been tortured in the year 2003. These figures show that there has been no change with regard to the year 2003. In any case, the fact that torture continues to exist, was also recognised in the EU Commission Report. Unfortunately, however, the suggestions we made to the government to put an end to torture were disregarded, the Government did not live up to its declaration of "Zero Tolerance to Torture" and torturers continued to be violent under legal and administrative protection. According to the findings of the HRFT Documentation Centre, five people lost their lives under detention, while 291 people were subjected to torture in the year 2004 (these numbers do not exclude those beaten up in meetings and demonstrations).

Peaceful demonstrations of various segments of society, of students, trade unions and NGOs faced excessive violence by police forces. Pepper gas came to be the "oxygen" of meetings and demonstrations. Preceding the NATO summit, which took place in Turkey in June, a great number of news agencies, magazines, trade unions and associations were raided by security forces and tens of thousands of people were submitted to security investigations.

The number of extrajudicial executions in the year 2004 rose dramatically. The murder cases of Gümüşhane and Kızıltepe showed that security forces can abuse

their right to use firearms wherever and whenever they want to. According to the findings of our Foundation, 21 people were killed in cases of extrajudicial executions, stop warning and random fire. A further number of 10 people were killed by unidentified assassins. 31 people, 14 of whom were children were killed and 78 people, 34 of whom were children were injured by the explosion of landmines and unattended explosives, in the whole Turkey, but especially in the regions of the former State of Emergency Rule.

The prison problem, which has been continuing for years, also remained unsolved this year. According to the findings of the HRFT and during the protests against solitary confinement, one person died on death fast in prison in the year 2004, while 6 people committed suicide by setting themselves on fire. According to the information given by the Ministry of Justice, 139 people died of natural causes in prison, 25 people committed suicide, 1 person died of death fast and 4 people were killed by other inmates in the year 2004. When the five people are added, who set themselves on fire, it appears that a total number of 175 people lost their lives.

In the past year no serious step was taken towards the Region under the State of Emergency (**OHAL**). An expectation towards a drafting of a regional democratisation and development to contribute to the solution of the Kurd issue, was not taken seriously by the government.

Similarly, no serious steps were taken towards the return of internally forcibly displaced people to their homes. In spite of the Law on Compensation of Damages Caused by Terror and Anti-Terror Struggle, a great number of damages were disregarded and NGOs were excluded from commissions determining damage. However, there has been no endeavours to abolish the system of village guards, which continues to be the greatest obstacle to the return of these people to their hometowns.

In the year 2005, we will take into account the characteristics of the new phase we are entering and we will be more effective and productive. We will continue with our efforts to realise Human Rights, democracy and peace. We wish all our people a healthy and happy new year.

**HRFT
Treatment and Rehabilitation
Centres Report**

**2004
*Evaluation Results***

EVALUATION RESULTS OF THE HRFT TREATMENT AND REHABILITATION CENTRES FOR THE YEAR 2004¹

922 people applied to the Treatment and Rehabilitation Centres of the Human Rights Foundation of Turkey in the year 2004. Considering that the number of applicants is 922, the annual applicant number is not significantly different than that of the year 2003 (925 applicants). 24 of these applicants were made by relatives of torture survivors. The following evaluation presents information obtained in interviews and medical examinations of 898 applicants, stating that they have been subjected to torture and ill-treatment.

METHODOLOGY

The data used in our evaluation has been obtained in interviews, medical examinations and other diagnostic procedures.

The data was entered in a specially developed SQL based computer programme under the name of "Human Rights Foundation of Turkey Applicant Recording", after being collected in application files and forms, designed for data preservation. The evaluations were analysed by transforming data gathered in this programme to the programmes MS Office Access 2003 and MS Office Excel 2003. The tables, graphics and statistical calculations were made by using the programmes Office Excel 2003 and SPSS 12.0 for Windows.

For the first time this year, the evaluation was made in two major parts. In the first section of the evaluation, the data obtained from all of the 898 applicants

¹ The report has been based on the data obtained by the HRFT Treatment and Rehabilitation Centres. The organisation has stated constantly, that no direct relation can be deduced between the application figures to the HRFT Treatment and Rehabilitation Centres and the total number of persons who were subjected to *torture and other cruel, inhuman and degrading treatments or punishments*. However, it remains a fact that the statistical distribution of the HRFT applicants over the years, who were subjected to *torture and other cruel, inhuman degrading treatments or punishments* can be regarded as fairly significant indicators.

was examined, while in the second section, the information obtained from 348 of the total number of people, who stated that they were subjected to torture and ill-treatment in detention in the year 2004 was examined. This way, a comparative analysis of the data relating to people who were tortured in the said year will concretely contribute to our evaluation of the developments in our country in this area.

Of these evaluations in two sections, the first chapter examines the social and demographic characteristics of the applicants, the second chapter analyses the results obtained from the statements of torture and ill-treatment, while the third chapter evaluates the medical processes of the applicants. The last chapter of the first section presents the results of the treatment and rehabilitation work related to these applicants in the year 2004.

Before passing on to the evaluation of the data obtained from the applicants, information on the following points will be provided: The distribution of the applicants according to the HRFT offices and months in which the applicants were made, the number and distribution of applicants stating that they have been subjected to torture and ill-treatment in detention in 2004 and the channel of contact which directed the applicants to the HRFT.

Number and Distribution of the Applicants

898 people applied to the the Human Rights Foundation of Turkey, Treatment and Rehabilitation Centres in 2004, stating that they had been subjected to torture and ill-treatment. Additionally 24 people applied as relatives of torture survivors and asked to receive treatment. These people were left outside the evaluation. The distribution of the applicants in the year 2004 according to the offices of the Foundation are presented in Table 1.

Table 1. The distribution of the applicants in 2004 according to the HRFT Treatment and Rehabilitation Centres

Centre	Number of Examined Torture Survivors	Number of Relatives of Torture Survivors	Total Number of Applicants
Adana	197	6	203
Ankara	45	2	47
Diyarbakır	149	6	155
İstanbul	359	5	364
İzmir	148	5	153
Total	898	24	922

From the total number of 898 people who applied in the year 2004, the number of people who stated that they had been subjected to torture and ill-treatment in detention was 348 (in the year 2003, the number of applicants, who had been subjected to torture had been 340). The distribution of these applicants according to the HRFT offices are presented in Table 2.

Table 2. The distribution of people applied in 2004, stating that they had been subjected to torture and ill-treatment in detention in the same year according to the HRFT Treatment and Rehabilitation Centres.

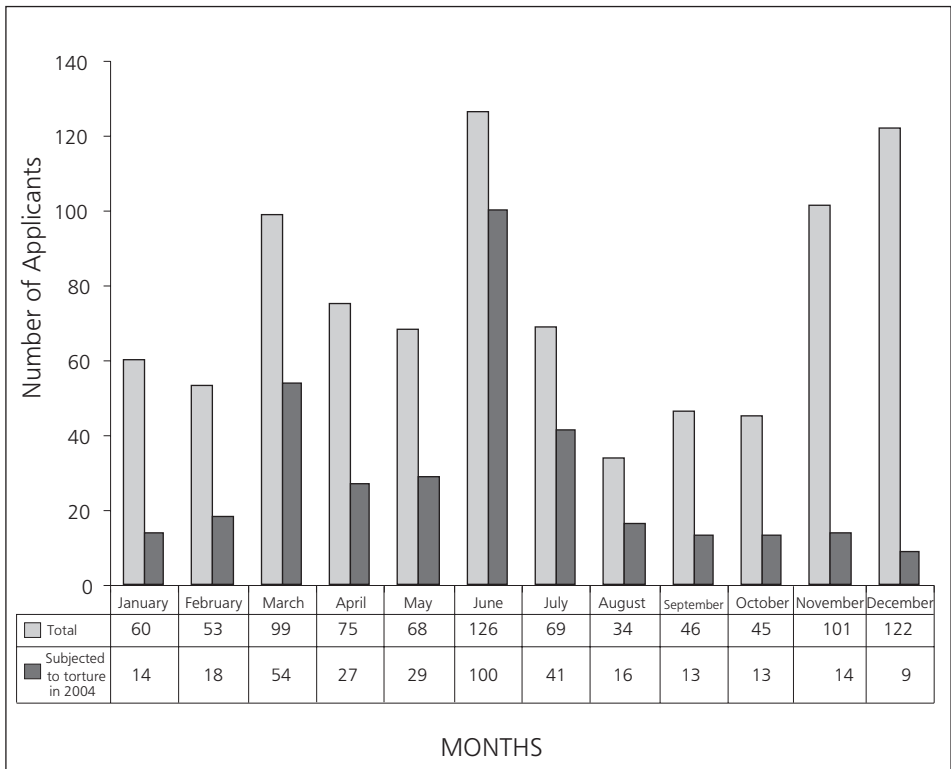
Centre	Number of Applicants
Adana	44
Ankara	14
Diyarbakır	21
İstanbul	229
İzmir	40
Total	348

The distribution of the applicants to our Treatment and Rehabilitation Centres according to months is presented in Graphic 1. According to this graphic, applicants were most often in the months of June, December, November and March respectively.

More than half of the applicants in the months of June and March were made to the Istanbul office. Around 80% of the applicants in June and more than half of the applicants in March were made by people stating that they were subjected to torture and ill-treatment in detention in 2004. These numbers are partly because of various social movements like student protests and anti-war protests in March, large number of detentions and the excessive use of force by the police during the protests against the NATO summit in June in Istanbul, as well as the fact that most of the people who had been taken into detention were released shortly afterwards.

The applicants made in the months of December and November on the other hand were made to the Istanbul, Adana, Diyarbakır and İzmir offices respectively and approximately 90% of the applicants were people who had been subjected to torture and ill-treatment in previous years. The great number of applicants in these months was due to the fact that after the new Turkish Penal Code passed in the parliament, a great number of political prisoners were released before their time and that some of these people started to apply to the Foundation because

Graphic 1. The distribution of the applicants whom were tortured in 2004 and previous years according to months in the year 2004



of the health problems related to torture or ill-treatment they experienced either during detention or in prison. Applicants relating to the new penal code continued in the first months of the year 2005.

Regarding the people and institutions which referred applicants to the HRFT, it appears that in most cases, the applicants were made directly without any reference, followed by applicants referred by the Human Rights Association, democratic organisations and parties. One important reason of increase in the ratio of direct applicants compared to previous years must be the fact that the work of the HRFT is better known (13,3 % for the year 2002). Table 3 presents the distribution of the information channels on the HRFT for all applicants and for those applicants involving statements of torture and ill-treatment in detention in the year 2004.

Table 3. The distribution of the information channels on the HRFT for all applicants and for those applicants involving statements of torture and ill-treatment in detention in the year 2004.

Information Channel	All Applicants	%	Applicants Tortured in 2004 in Detention	%
Directly	296	33,0	159	45,7
via the Human Rights Association	196	21,8	106	30,5
via Democratic Organisations and/or Parties	182	20,3	26	7,5
on Advice of HRFT applicants	147	16,4	28	8,0
via lawyers	47	5,2	26	7,5
on advice of HRFT volunteers	16	1,8	0	0,0
on advice of HRFT professionals	8	0,9	0	0,0
via press	6	0,7	3	0,9
Total	898	100,0	348	100,0

The following sections of the evaluation will consist of two major sections. In the first section the total of 898 applicants will be evaluated, while the second section will deal separately with the 348 applicants which include statements of torture and ill-treatment in detention in the year 2004.

I- EVALUATION RESULTS OF ALL APPLICANTS

A- SOCIAL AND DEMOGRAPHIC CHARACTERISTICS

1- Age and Sex:

The age of the applicants ranged from 11 to 79 years. The average age was 31,8 ± 9,7. The number of applicants at the age of 18 or under was 41 (4,6 %). The table below presents the age of the applicants in the year of their application and therefore naturally does not directly state the age they were subjected to torture in.

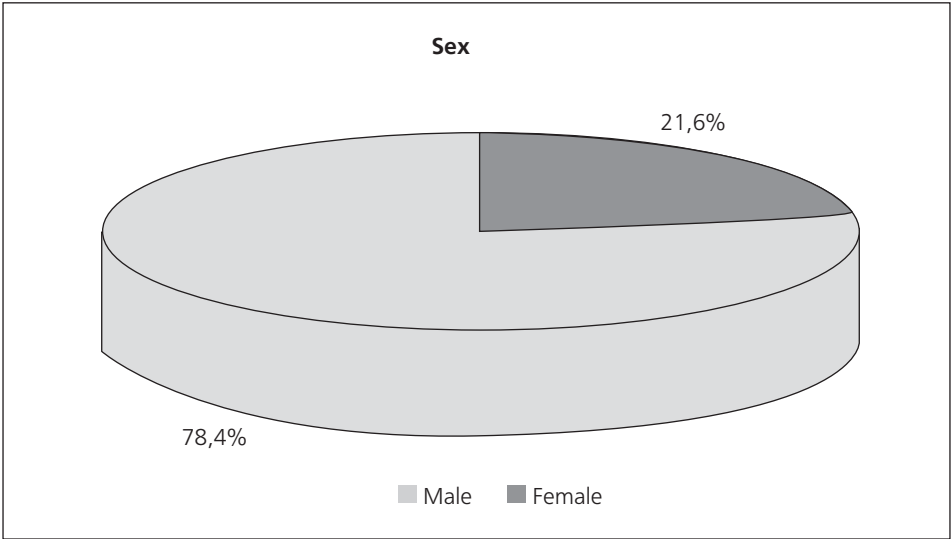
Some positive legal regulations were made for people under 18. According to these, security forces do not have the right to take people under 18 in detention or take their statements and retain only the right to catch. Although directorates responsible of children were set up in cities and statements are to be taken by the prosecutor, there are still many problems in the implementation, including unrecorded detention. It is important for the solution of these problems that the regulations are guaranteed and sanctions are enforced. The distribution of the applicants according to age groups is presented in Table 4.

Table 4. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to their age.

Age group	Number of Applicants	%
0-18	41	4,6
19-25	224	24,9
26-30	174	19,4
31-35	176	19,6
36-40	120	13,4
41-45	84	9,3
46 ve üstü	79	8,8
Toplam	898	100,0

704 of the applicants are male (78,4 %), while 194 are female (21,6 %) (Graphic 2).

Graphic 2. Distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to sex

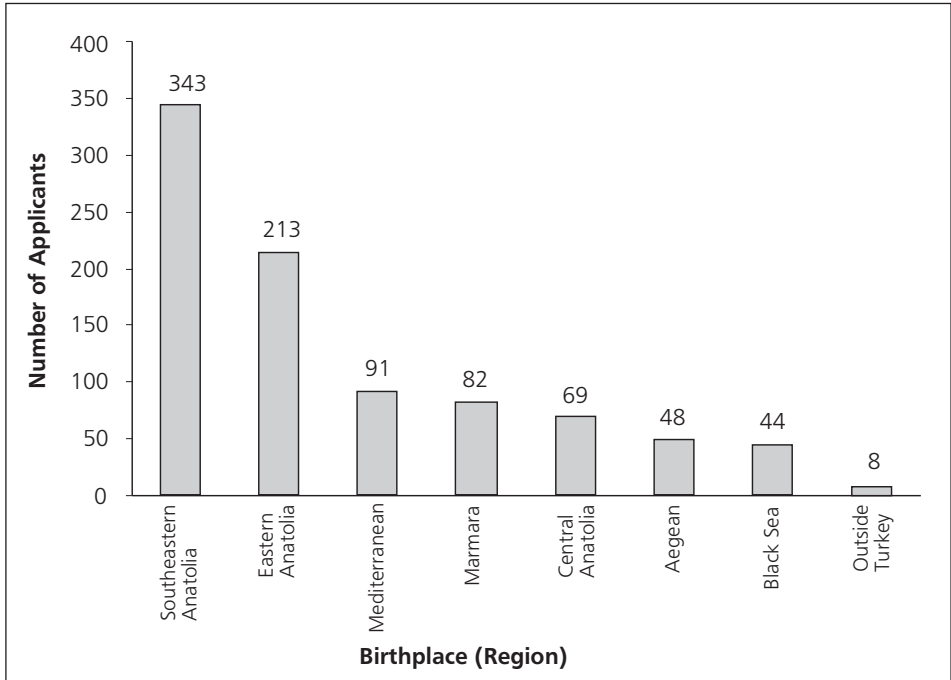


2- Place of Birth

Approximately 40% of the applicants were born in the South-Eastern Anatolian Region, while those born in Eastern Anatolia and in the Mediterranean Region take up the second and third places respectively. The proportion of applicants born in Eastern and South-eastern Anatolia makes up around 62% of the total

number of applicants. 10,1% of the applicants were born in the Mediterranean Region, while 9,1 % were born in the Marmara Region. The distribution of the applicants according to their place of birth is presented in Graphic 3.

Graphic 3. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres according to place of birth.



When the units of places of birth are cities, it becomes apparent, that most applicants were born in Diyarbakir (134 people, 14,9 %), in Istanbul (66 people, 7,3 %), Siirt (48 people, 5,3 %) and Tunceli (45 people, 5,0 %).

A major reason for the high proportion of Eastern and South-Eastern Anatolian Regions in the distribution according to places of birth of torture survivors is thought to be the high amount of citizens with a Kurdish origin.

3- Educational Level and Employment Status

394 (43,9 %) of the applicants graduated from secondary school or high school, 354 (39,4%) graduated from primary school while 117 (13%) graduated from or dropped out of university. 33 (3,7%) of the applicants were illiterate. A more detailed distribution of the educational level of the applicants is provided in Table 5.

Table 5. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres according to their educational level.

Educational Level	Number of Applicants	%
Illiterate	33	3,7
Literate	68	7,6
Primary School	286	31,8
Secondary School	127	14,1
High School	267	29,7
University Drop Out	53	5,9
University	64	7,1
Total	898	100,0

Regarding the employment status of the applicants; 591 people (65,8%) appear to be unemployed at the time of the interview. 94 people (10,5 %) were university students, while 21 people (2,3 %) were students of primary or secondary schools. Additionally, 17 applicants (1,9 %) were members of the press.

As in the previous years, the proportion of unemployed applicants grows and points to a problem area, which should be examined and worked on specifically. Factors like the loss of employment due to detention and prison processes, drop out from school and problems faced in job applications play a role in this problem. The employment status of the applicants is presented in more detail in Table 6.

B- THE PROCESS OF TORTURE:

The number of people who applied to the HRFT because of torture and ill-treatment in the year 2004 is 898. Regarding the year in which these applicants were last subjected to torture, it appears that 367 people were tortured in the year 2004, 228 people between the years 1999-2003, 250 people between the years 1994-1998 and 53 people in the year 1993 and before (Graphic 4). Regarding the large numbers of applications after 1994, the large number of applicants, who came to our centres after long periods of imprisonment must be taken into consideration. The distribution of the applicants according to the time, which elapsed between torture and application is presented in Table 7.

Table 6. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to their employment status.

Profession or Employment	Number of Applicants	%
Unemployed	591	65,8
University Student	94	10,5
Tradesmen (working in a shop or office of their own)	33	3,7
Industrial worker in the private sector	24	2,7
Construction worker	23	2,6
Student of primary or secondary schools	21	2,3
Housewife	19	2,1
Journalist	17	1,9
Office Craft in the private sector (Secretary, Bank Clerk etc.)	16	1,8
Employed in an NGO	13	1,4
Pedlar	11	1,2
Farm worker	8	0,9
Retired	7	0,8
Artist	5	0,6
Lawyer	4	0,4
Office Craft in the Public Sector (Secretary, Bank Clerk etc.)	3	0,3
Industrial Worker in the Public Sector	3	0,3
Teacher	3	0,3
Farmer	2	0,2
Engineer	1	0,1
Total	898	100,0

Graphic 4. The distribution of the applicants in the year 2004 according to the period when they were last tortured.

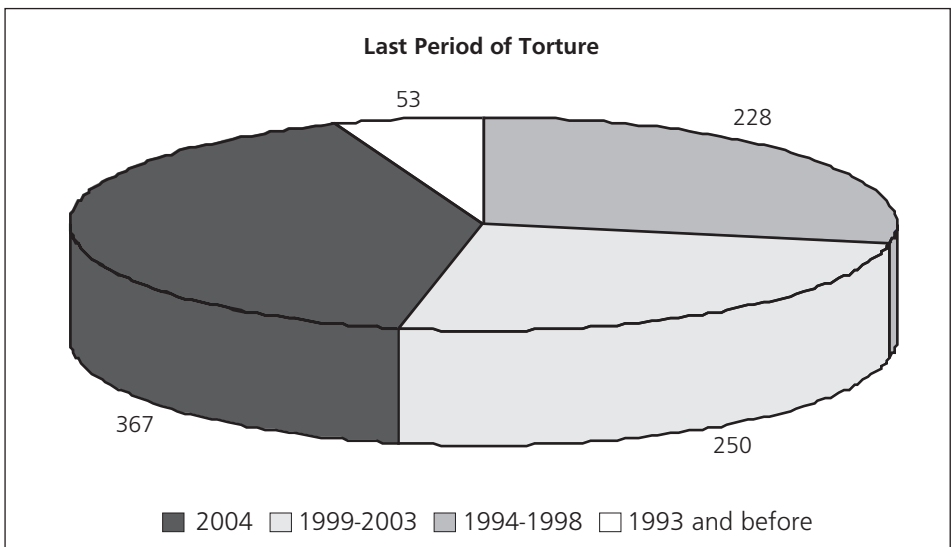


Table 7. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the period when they were last tortured.

Last Torture Year	Number of Applicants
1993 and before	53
1994	73
1995	61
1996	50
1997	31
1998	35
1999	33
2000	77
2001	35
2002	29
2003	54
2004	367
Total	898

Among the 367 applicants made in the year 2004, the information obtained from 348 applicants will be examined separately in the second section, excluding 19 people who last experienced torture in prison.

1- The process of Detention and Torture in Detention:

819 (91,2%) of the applications made in the year 2004, had political reasons while 77 people (8,6%) stated experiencing torture because of ordinary offences (according to reports published by Human Rights organisations, a large number of people who were taken in detention due to ordinary offences and were subjected to torture, do not apply. However, the relative increase in applicants whom were detained due to ordinary offences and subjected to torture in 2004, will be discussed in the second section).

Moreover, one person stated that he was subjected to torture because he was an asylum-seeker, while a further person gave her sexual preference as the reason for being tortured.

Regarding the detention period last experienced by the applicants, 313 (34,9%) people remained in detention for less than 24 hours, 193 (21,5%) between 8-15 days and 120 people (13,4%) between 16-30 days.

As will be seen more clearly in the second section, which will deal with the evaluation of torture survivors whom were tortured in 2004, there is an evident decrease in the detention periods.

As will be examined in section two, this decrease in the detention periods could be regarded as a positive development. However it is evident that this

development does not realise the decree in the European Convention on Human Rights Article 5/3, stating that "Everyone arrested or detained in accordance with the provisions of paragraph 1.c of this article shall be brought promptly before a judge or other officer authorised by law to exercise judicial power [...]. Furthermore, considering methods developed for the torture and further cruel, inhuman and degrading treatment and punishments in periods of four days and the results of these practices and additionally un-recorded short-termed detentions, it becomes evident that this is still a most serious and important issue.

The duration of the most recent detentions of the applicants are presented in Table 8.

Table 8. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres according to the duration of their most recent detention

Most Recent Detention Duration	Number of Applicants	%
Less than 24 hours	313	34,9
24-48 hours	88	9,8
49-72 hours	42	4,7
73-96 hours	45	5,0
5-7 days	73	8,1
8-15 days	193	21,5
16-30 days	120	13,4
Longer than one month	23	2,6
Not known	1	0,1
Total	898	100,0

As regards the place where the applicants were detained, it appears that 525 people (58,5%) were outdoors while 295 (32,9%) were in their homes.

Our experiences with arrests, which take place outdoors, show that such practices make unrecorded detentions easier to carry out. The distribution of applicants according to the place of their last arrest is presented in Table 9.

Table 9. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2004 according to the place of their last arrest

Place of Last Arrest	Number of Applicants	%
Outdoors	525	58,5
Home	295	32,9
Organisation (NGO office, press office, etc)	30	3,3
Public office	25	2,8
Working place	13	1,4
Other	9	1,0
Not known	1	0,1
Total	898	100,0

The distribution of the applicants according to the time of arrest is presented in Table 10.

Table 10. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2004 according to the time of arrest

Time of the Arrest	Number of Applicants	%
08:00 - 18:00	557	62,0
18:00 - 24:00	172	19,2
24:00 - 08:00	165	18,4
Bilinmiyor	4	0,4
Total	898	100,0

Regarding the place in which the applicants last experienced torture in detention, it appears that 500 people (55,7%) were in the security centre, 202 people (22,5%) were outdoors, while 65 people (7,1%) were in the gendarmerie centre. Since it appears to be constructive to evaluate this issue in the light of recent developments, this matter will be dealt with in more detail in the second section. The distribution of the applicants according to the place where they were tortured is presented in Table 11.

Table 11. The distributions of the applicants to the HRFT Treatment and Rehabilitation Centres according to the place of most recent torture in detention

Place of Most Recent Torture in Detention	Number of Applicants	%
Security centre	500	55,7
Outdoors	202	22,5
Gendarmerie centre	65	7,2
Police station	53	5,9
Police car	23	2,6
Gendarmerie station	20	2,2
Home	7	0,8
Other	3	0,3
Not known/not remembered	4	0,4
Empty*	21	2,4
Total	898	100,0

**People who were not subjected to torture during their last detention and who applied on the basis of torture experienced in former detention periods or in prison*

As regards the regional distribution of the region of most recent torture, it appears that the Marmara Region holds the first position, followed by the Mediterranean Region and the South-Eastern Anatolian Region (Table 12).

Table 12. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the region of the most recent torture in detention

Region of Most Recent Torture	Number of Applicants	%
Marmara	338	37,6
Mediterranean	167	18,6
Southeastern Anatolia	152	16,9
Aegean	109	12,1
Eastern Anatolia	55	6,1
Central Anatolia	46	5,1
Black Sea	5	0,6
Abroad	4	0,4
Not known	1	0,1
Empty*	21	2,3
Total	898	100,0

* People who were not subjected to torture during their last detention and who applied on the basis of torture experienced in prison or in former detention periods

Regarding the cities in which the applicants were last subjected to torture, it appears that İstanbul, Adana, İzmir, Diyarbakır ve Ankara take up the first places. The distribution of the applications according to the cities in which they experienced torture in detention is presented with the first twenty cities in Table 13.

Table 13. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the cities in which they were last subjected to torture

City of Most Recent Torture	Number of Applicants	%
İstanbul	323	36,0
Adana	109	12,1
İzmir	85	9,5
Diyarbakır	81	9,0
Ankara	41	4,6
Mersin	34	3,8
Mardin	26	2,9
Manisa	13	1,4
Batman	12	1,3
Şırnak	11	1,2
Hatay	10	1,1
Van	10	1,1
Antalya	9	1,0
Siirt	9	1,0
Aydın	8	0,9
Tunceli	8	0,9
Ağrı	7	0,8
Şanlıurfa	7	0,8
Bingöl	6	0,7
Gaziantep	6	0,7
Other	61	6,8
Not known	1	0,1
Empty*	21	2,3
Total	898	100,0

**People who were not subjected to torture during their last detention and who applied on the basis of torture experienced in prison or in former detention periods*

The use of the programme in the Treatment and Rehabilitation Centres from the beginning of 2004 on, provided the opportunity to monitor centres practicing torture directly and do specific work regarding this subject.

As regards the centres in which apply torture, it appears that the Anti-Terror Branches (ATB) in Istanbul, Adana, İzmir, Diyarbakır, Mersin, Ankara and Mardin, as well as the Center of Special Forces in Diyarbakır, the Security Centre in Istanbul, the Gayrettepe Security Centre in Istanbul, the Security Centre in Adana and Gendarmerie Intelligence Service (JITEM) in Diyarbakır stand out as the places where torture is most common.

The first twenty centres in which applicants were subjected to torture are presented in Table 14.

Table 14. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the centres in which they last experienced torture

City of Most Recent Torture	Number of Applicants	%
İstanbul ATB	72	8,0
Adana ATB	60	6,7
İzmir ATB	56	6,2
Diyarbakır Security Centre – Center of Special Forces	28	3,1
Diyarbakır ATB	24	2,7
Mersin ATB	24	2,7
Ankara ATB	23	2,6
İstanbul Gayrettepe Security Centre	19	2,1
İstanbul Security Centre	14	1,6
Adana Security Centre	13	1,4
Diyarbakır Gendarmerie Intelligence Service (JITEM)	13	1,4
Mardin ATB	11	1,2
Adana Yüreğir Gendarmerie Centre	7	0,8
Batman ATB	7	0,8
İstanbul Beyoğlu Police Station	7	0,8
Mardin Gendarmerie Centre	7	0,8
Şanlıurfa ATB	6	0,7
Tarsus ATB	6	0,7
Antalya ATB	5	0,6
İstanbul Beşiktaş Police Station	5	0,6
Other Security Centres and ATBs	132	14,7
Other Police Stations	51	5,7
Other Gendarmerie Centres and JITEM	28	3,1
Other Gendarmerie Centres	20	2,2
Not tortured in centres*	235	29,0
Not known/not remembered	4	0,4
Empty**	21	2,4
Total	898	100,0

*Applicants experiencing torture outdoors, at home, in a vehicle and other places

** People who were not subjected to torture during their last detention and who applied on the basis of torture experienced in prison or in former detention periods

The distribution of the torture methods inflicted on the applicants is presented in Table 15 (This evaluation comprises 866 people of the total number of 898 applicants excepting 21 people who were not subjected to torture during their last detention period and 1 person who could not provide information). Since it will be constructive to consider this matter in the light of recent developments, a more detailed analysis will follow in section 2.

Table 15. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the methods of torture they experienced during their last detention

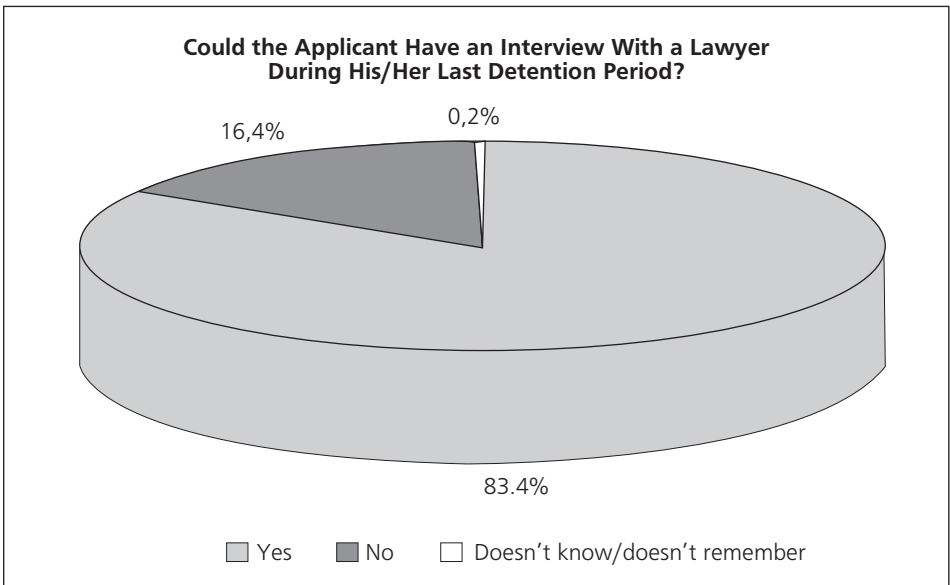
Method of Torture	Number of Applicants	%
Beating	762	88,0
Insulting	724	83,6
Blindfolding	463	53,5
Death threats	462	53,3
Other threats against his/her person	417	48,2
Stripping naked	401	46,3
Restricting sleep	371	42,8
Cell isolation	361	41,7
Forcing to wait on cold floor	342	39,5
Restricting food and water	337	38,9
Pressurized/cold water	328	37,9
Electricity	325	37,5
Restricting defecation and urination	306	35,3
Squeezing testicles	260	30,0
Sexual harassment	251	29,0
Other positional torture methods	233	26,9
Suspension on a hanger	230	26,6
Forcing to listen to marches or high volume music	218	25,2
Forcing to witness (visual/audial) torture to others	210	24,2
Forcing to obey nonsensical orders	194	22,4
Treaths against relatives	176	20,3
Forcing to extensive physical activity	152	17,6
Humiliation	151	17,4
Pulling out hair/moustache/beard	131	15,1
Falanga	127	14,7
Application of chemical substances	126	14,5
Continuously hitting on one part of the body	125	14,4
Asking to act as an informer	98	11,3
Mock execution	92	10,6
Torturing in the presence of relatives/ friends	70	8,1
Strangling	44	5,1
Rape	36	4,2
Burning	21	2,4
Medical intervention without consent of people and by force	8	0,9
Other	59	6,8
Total	8611	9,9*

*Average number of torture methods one person is subjected to

2- Legal Procedures During and After Detention

147 (16,4%) of the applicants subjected to torture in detention stated that they were able to talk to a lawyer during their most recent detention (Graphic 5). As it will be constructive to consider this matter in the light of recent developments, it will be taken into hand more thoroughly in section 2.

Graphic 5. The ratio of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 regarding interviews with lawyers



The number of applicants who were set free without charges and without facing prosecutor is 226 (25,2%). 161 applicants (17,9%) were set free by the prosecution office or the court. 414 applicants (46,1%) were imprisoned, while the trials of 158 applicants (17,6%) still continue (Tables 16 and 17).

Table 16. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to their situation after detention

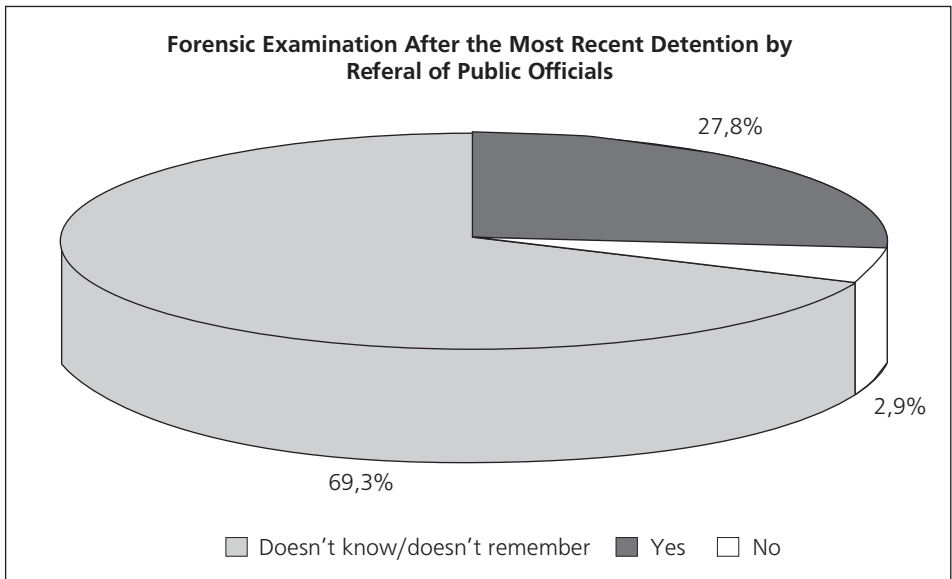
Situation After Last Detention	Number of Applicants	%
Was arrested	509	56,7
Was set free without facing prosecutor	226	25,2
Was set free by prosecution office or court	161	17,9
Not known/not remembered	2	0,2
Total	898	100,0

Table 17. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to their trial processes

Trial Process After Last Detention	Number of Applicants	%
Applicant was tried and convicted	414	46,1
Applicant was not tried	226	25,2
Applicant was charged, the trial continues	158	17,6
Not known whether there is a trial	57	6,3
Applicant was tried and acquitted	34	3,8
Applicant was tried, result unknown	8	0,9
Not known/not remembered	1	0,1
Total	898	100,0

The number of applicants whom was referred to a health institute for forensic examination by public officials according to legislations in force is 622 (69,3%) (Graphic 6).

Graphic 6. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to whether they were referred for a forensic report by public officials



Around half of these 622 applicants (309 people, 49,7%) were examined in hospitals or health centres, while 199 people (32%) were examined in the Forensic Medicine Institute in Istanbul or in branches of Forensic Medicine Institute in other cities. 52 people (9,2 %) report that they were examined in their place of detention (Table 18). Furthermore, 73 people stated that they provided themselves with forensic reports on their own initiative.

Table 18. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to their place of forensic medical examination after their most recent detention

Place of Forensic Medical Examination After Most Recent Detention	Number of Applicants	%
Hospital	202	32,5
Branch of Forensic Medicine Institute	166	26,7
Health center	107	17,2
Place of detention	57	9,2
Forensic Medicine Institute	33	5,3
Not known/not remembered	57	9,2
Total	622	100,0

As regards the statements of 622 applicants who underwent forensic medical examination after detention, approximately 2/3 of the applicants reported that the security forces were taken out of the room during the forensic examination (424 people, 68,2%), that the physician took note of their complaints (383 people, 61,6%), that the physician provided himself with the anamnesis of the applicants (414 people, 66,6%) and that he/she wrote a report in accordance with the findings (386 people, 62,1%), while around _ of the applicants (458 people, 73,6%) stated that the physician examined as he ought to (Table 19).

Table 19. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to their evaluation of the forensic examination after detention

Evaluation of Forensic Examination	Yes	%	No	%	Not known /not remembered	%	Total	%
Were the security forces taken out of the room during the forensic medical examination	177	28,5	424	68,2	21	3,4	622	100,0
Did the physician take note of the complaints?	228	36,7	383	61,6	11	1,8	622	100,0
Did the physician provide himself with the anamnesis of the patient?	196	31,5	414	66,6	12	1,9	622	100,0
Did the physician examine as he ought to?	139	22,3	458	73,6	25	4,0	622	100,0
Did the physician write a report that was in accordance with the findings?	100	16,1	386	62,1	136	21,9	622	100,0

According to the evaluation of the applicants, the Forensic Medical Institute, compared with the other institutions, complies best with the rules of forensic examination. Of the 33 applicants who were examined in the Forensic Medical Institute, 17 (52%) stated that the doctor asked the security forces to leave the room, 25 people (76%) stated the doctor took note of their complaints, 22 people (67%) stated that the doctor provided himself with an anamnesis, 21 people (64) reported that they were examined properly and 17 people (52%) that the report was in accordance with the findings. These numbers are reduced when it comes to the branches of Forensic Medicine Institute (the answers from 166 people are 31%, 45%, 39%, 27% and 17% respectively). Positive answers on the forensic examination are reduced even more when it comes to hospitals and health centers (the answers from the total number of 309 people are 32%, 37%, 31%, 24% and 16% respectively), while the answers of applicants who were examined in detention fall under 10% (the answer from 57 people are 4%, 7%, 7%, 5%, 4% respectively).

349 of the applicants (38,9) stated that they were subjected to torture during their interrogation in court or in the prosecution office and additionally 150 people (16,7 %) made a claim to the prosecution office afterwards. Furthermore, 6 applicants made a claim to the prosecution office on the advice of the HRFT. 349 people (41,9%) people stated that they did not make any claim against security forces.

These issues will be dealt with further in the second section since their evaluation in the light of recent developments will be constructive.

3- The imprisonment period

The number of applicants who have been imprisoned at one point or other amounts to 579 (64,4%) while the number of those who were imprisoned after their most recent detention is 525 (58,5%). The duration of their stay in prison varies between 2 days and 244 months. The approximate duration is 83,3 months (Standart variation: 47,69, Median: 107 months).

The total distribution of the duration of the imprisonments of the 579 applicants is presented in Table 20. According to these data, around 1/4 of the applicants (216 people) consists of people who remained in prison for 9-11 years, while one out of every ten imprisoned applicants was behind walls for 11-20 years.

Table 20. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the duration of their imprisonment

Total Duration of Imprisonment	Number of Applicants	%
0-2 Months	34	5,9
3-12 Months	64	11,1
13-36 Months	57	9,8
37-60 Months	29	5,0
61-84 Months	55	9,5
85-108 Months	66	11,4
109-132 Months	216	37,3
11-20 Years	58	10,0
Total	579	100,0

As regards the time, which elapsed between the release of the imprisoned 579 applicants and their application to the foundation, it appears that 225 of these applicants (38,9%) applied to the HRFT within a month of their release, while 248 people (42,8%) applied in 1-12 months.

Furthermore, it appears that approximately 60% of the 579 people released from prison (346 people), were released because they had served their time, while 94 people (16,2%) were released because of an amnesty, on conditional release or because of postponements of their sentences due to health problems (Table 21).

Table 21. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the reasons of their release from prison

Grounds of Release From Prison	Number of Applicants	%
End of sentence	346	59,8
To be tried without detention	108	18,7
Amnesty / Conditional Release	81	14,0
Acquittal	25	4,3
Postponement due to health problems	13	2,2
Empty	6	1,0
Total	579	100,0

Among the applicants who have been imprisoned, those who were subjected to isolation in the F type prisons are especially important. Out of the 579 imprisoned applicants, 132 people were confined to F type prisons (22,8%). The imprisonment period of these people in F type Prisons varies between 1 month and 59 months, with an approximate duration of 19,3 months (Standart Variation: 16,06, Median: 11 months). The number of applicants among the 132 former F type prisoners, who were confined to a single cell amounts to 32 (24,2%). The approximate detention period of these people in these cells varies around 1 and 46 months and is 7,2 months (Standart Variation: 9,91, Median: 4 months).

Practices based on isolation, which started as prototypes in F type prisons and turned to standart procedures in some prisons, will be dwelled on under a special heading in the coming period in the Treatment and Rehabilitation Centres.

Furthermore, there are 64 applicants, who were punished with isolation on various grounds in prisons (11,9%). The isolation period of these applicants varies between 1 day and 180 days, with an approximate of 29 days (Standart Variation 37,46, Median 15 days).

223 of the 579 imprisoned applicants (38,5%), were experienced a prison operation. More than 70% of these applicants (157 people) experienced the prison operations, which took place simultaneously in a great number of prisons on 19th December 2000 as an answer to hunger strikes. Furthermore, there are 66 applicants, who witnessed the 1995 Buca prison operation and others (Table 22).

Table 22. The distribution of applicants, who had been imprisoned, to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the operation they witnessed while in prison

Prison Operation	Number of Applicants	%
19 December 2000	157	70,4
Buca 1995	25	11,2
Diyarbakır 1996	9	4,0
Ümraniye 1996	6	2,7
Ulucanlar 1999	5	2,2
Burdur 1999	2	0,9
Others	19	8,5
Total	223	100,0

As regards the specific traumas which were experienced by these applicants, it appears that the most common trauma experienced by approximately half of the applicants experiencing prison operations, consist of subjection to chemical materials and beatings; furthermore, that 12 people were wounded by guns, while 7 people were wounded by bombs or shrapnels (Table 23). 66 people stated that they were hindered from receiving medical treatment after the prison operations.

Table 23. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the traumas they experienced during the prison operations

Traumas Experienced in the Prison Operations	Number of Applicants	%
Subjecting to chemical substances	108	48,4
Beating and harassment	105	47,1
Leaving on a cold and wet floor for a long period of time	34	15,2
Tortured in vehicles used for transportation of prisoners	32	14,3
Stripping and keeping naked	26	11,7
Cell isolation	21	9,4
Wounding with a gun	12	5,4
Wounding by bomb or shrapnels	7	3,1
Trapped under rubble	3	1,3
Burning	3	1,3
Total	351*	1,6*

**Since the 223 people who experienced traumas more than one during the prison operations, the total number is greater than 223. Therefore, the number 1,6 is not a percent but the average number of traumas a person experienced*

Among the 579 applicants who were imprisoned, the number of applicants stating that they were subjected to torture in prison amounts to 350. Furthermore 12 of the applicants stated that they were taken away to be

interrogated while serving their sentence and that 10 of them were tortured during interrogation. The distribution of the torture methods these 350 people were subjected to is presented in Table 24.

Table 24. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the methods of torture

Torture Method	Number of Applicants	%
Beating	300	85,7
Insulting	264	75,4
Death threat	104	29,7
Other threats against the person	95	27,1
Stripping naked	91	26,0
Cell isolation	86	24,6
Hindering visits of relatives/lawyers	82	23,4
Forcing to obey nonsensical orders	67	19,1
Forcing to lie or wait on a cold and wet floor for a long period of time	57	16,3
Restricting food and drink	53	15,1
Other positional torture methods	47	13,4
Humiliating	46	13,1
Restricting sleep	40	11,4
Forcing to excessive physical activity	36	10,3
Forcing to witness (visual/auditory) torture to others	35	10,0
Sexual harassment	29	8,3
Forcing to listen to marches or high volume music	23	6,6
Pulling out hair/moustache/beard	23	6,6
Restricting defecation and urination	22	6,3
Forcing to wear uniform clothing	22	6,3
Falanga	21	6,0
Blindfolding	20	5,7
Torturing in the presence of relatives	20	5,7
Pressurized/cold water	17	4,9
Threats to relatives	17	4,9
Rape	16	4,6
Continuously hitting on one part of the body	15	4,3
Subjecting to chemical substances	14	4,0
Asking to act as an informer	6	1,7
Squeezing testicles	6	1,7
Electricity	4	1,1
Strangling	4	1,1
Medical intervention without consent of people and by force	4	1,1
Suspension on a hanger	3	0,8
Mock execution	2	0,6
Other	23	6,6
Total	1714	4,9*

*The average number of torture methods experienced by one person

Considering that torture and ill-treatment involves any kind of violence towards the physical and mental integrity of incarcerated people, prisons appear to have an important place among torture application areas.

Cases of torture and ill-treatment are reported to be experienced during controls and searches, during transportation to interviews with lawyers or family members or during transportations to hospitals or the court.

The distribution of the answers to questions on the conditions in prisons, by 573 of the 579 applicants who had been imprisoned is presented in Table 25.

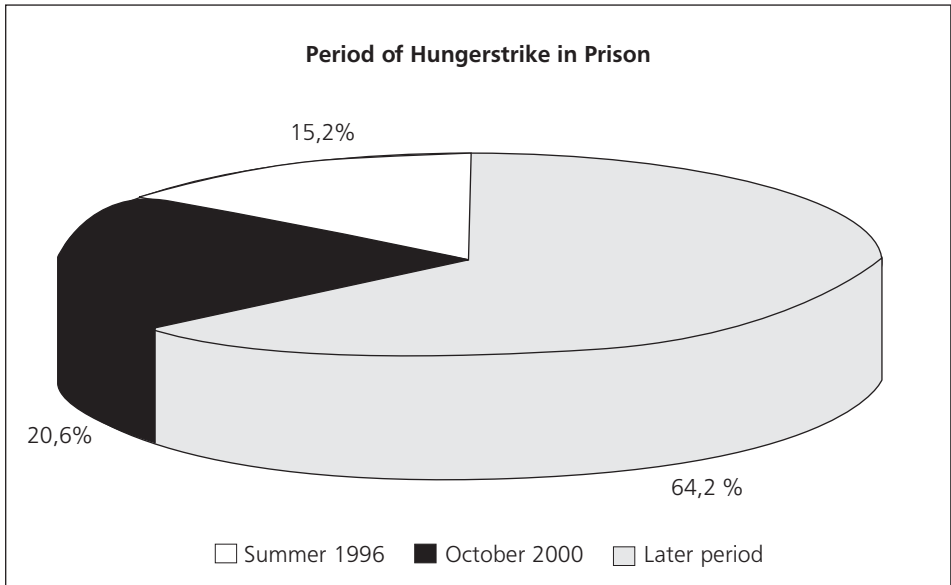
Table 25. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to their answers to the conditions in the prisons they were last kept in

Conditions	Positive	Partly Positive	Negative	Total
Accommodation	34	127	412	573
Nutrition	22	99	452	573
Hygiene	16	98	459	573
Access to open air and sport facilities	27	123	423	573
Communication facilities	28	98	447	573
Health services	30	69	474	573
Conditions of transfers	27	68	478	573
Reaching to publications/media	33	127	413	573

Cezaevi öyküsü olan 579 başvuru içinde 486 kişi (%83,9) cezaevinde değişik zaman ve nedenlerle açlık grevi yaptığını belirtmektedir. Bu başvuruların 100'ü (%20,6) 20 Ekim 2000 sonrasında F tipi cezaevlerine karşı başlayan, 74'ü ise 1996 yılı Ağustos ayında yapılan açlık grevi eylemlerine katıldıklarını belirtmişlerdir. 312 kişi ise çeşitli dönemlerde açlık grevi yapmışlardır (Grafik 7).

486 of the imprisoned 579 applicants state that they went on hungerstrike in prison on varying occasions and because of various reasons. A hundred of the applicants (20,6%) reported to have taken part in the hunger strikes against F type prisons, starting on 20th October 2000 and 74 people reported to have taken part in the hunger strikes starting in August 1996, while 312 people went on hungerstrike on various other occasions (Graphic 7).

Graphic 7. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the period of their hungerstrike in prison



C- MEDICAL EVALUATION

This chapter contains information on the health situation of the applicants, which was obtained by the anamnesis, physical examination and other tests, made by physicians working in the Centres together with consultants (psychiatrists, physiatrist, ophthalmologists, ENT specialist etc) of the Treatment and Rehabilitation Centres.

The process in which the 898 people who applied to Treatment and Rehabilitation Centres because they had been subjected to torture will be better understood if the methods of the HRFT are described first. In the first interview, the applicant relates his experiences of torture and his complaints to the doctor in his own words. The applicants tells of those complaints, which, in his opinion, are connected with torture. Following this, the doctor asks for the necessary laboratory tests and consultations after examination and evaluation. He/she expresses his opinion openly to the applicant. In the last stage, the anamnesis, examination and tests are evaluated as a whole and the relation between the disorder and torture is established. In this stage it is important to consider the health of the applicant as a whole.

During the application process to the HRFT Treatment and Rehabilitation Centres, it is aimed that the applicants meet all the members of the treatment team, but such applicants, as do not wish to consult the psychiatrist, are simply informed of their having the option to and are not pressed further.

After the evaluation, the applicant receives suggestions as to possible treatment methods for disorders not related to torture, while disorders related to torture are treated in the HRFT Treatment and Rehabilitation Centres. The applicant is first informed about the programme suggested for his treatment and rehabilitation. After a joint evaluation (e.g. when specific conditions of the applicant affects the programme), necessary amendments are made to the programme which is subsequently carried out.

For the establishment of the relation of diagnosed disorders with torture, one of the following relations for each of the following diagnosis is used: The only etiological factor; worsened or made apparent an existing pathological state; one of the etiological factors; no relation; and a relation could not be established.

1- Medical Complaints of the Applicants

All of the 898 applicants of the year 2004 had physical or psychological complaints. Musculoskeletal complaints were the most common with 576 of the applicants (64,1%). The second most common of all complaints were psychological ones, stated by 469 (52,2%) of the applicants. The applicants reported 6702 different kinds of complaints. As regards the distribution of these complaints with respect to systems, it becomes apparent that psychological complaints are the most common of all (34,4%) (Table 26).

Table 26. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the frequency of their physical and psychological complaints

Systems	Number of Applicants	Percentage Among Applicants	Number of Complaints	Percentage Among Complaints
Musculoskeletal	576	64,1	1090	16,3
Psychological	469	52,2	2305	34,4
Neurological	342	38,1	458	6,8
Digestive	302	33,6	562	8,4
Dermatological	285	31,7	526	7,8
General	217	24,2	321	4,8
Urogenital	206	22,9	342	5,1
Ear, Nose and Throat	198	22,0	312	4,7
Ophtalmological	194	21,6	259	3,9
Respiratory	177	19,7	264	3,9
Cardiovascular	117	13,0	143	2,1
Oro-Dental	88	9,8	112	1,7
Endocrinological	8	0,9	8	0,1
Total	3179*	.*	6702	100,0

*As one applicant may have complaints about more than one system, the total is larger than 898 and 100%

The most common among psychological complaints are those related to sleeping disorders and appear in more than 1/3 of the applicants (310 people). The most common physical complaint is headache (242 people). The most common 10 physical and psychological complaints are presented in Tables 27 and 28.

Table 27. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the frequency of their physical complaints

10 Most Common Physical Complaints	Number of Complaints	Percentage of Applicants	Percentage of Physical Complaints	Percentage of all Complaints
Headache	242	26,9	5,5	3,6
Stomachache	203	22,6	4,6	3,0
Discoloration of the skin	138	15,4	3,1	2,1
Visual impairment	132	14,7	3,0	2,0
Low back pain together with pain in legs	124	13,8	2,8	1,9
Low back pain	120	13,4	2,7	1,8
Fatigue, weakness	113	12,6	2,6	1,7
Shoulder pain	108	12,0	2,4	1,6
Back pain	103	11,5	2,3	1,5
Knee pain	97	10,8	2,2	1,4
Other physical complaints	3017	-	68,8	45,3
Total	4397	-	100,0	68,6

Table 28. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the frequency of their psychological complaints

10 Most Common Physical Complaints	Number of Complaints	Percentage of Applicants	Percentage of Physical Complaints	Percentage of all Complaints
Sleeping disorders	310	34,5	13,4	4,6
Anxiety	282	31,4	12,2	4,2
Amnesia	277	30,8	12,0	4,1
Irritability	258	28,7	11,2	3,8
Concentration difficulties	230	25,6	10,0	3,4
Feelings of detachment from others	176	19,6	7,6	2,6
Flashbacks	157	17,5	6,8	2,3
Urge to weep	151	16,8	6,6	2,3
Nightmares	134	14,9	5,8	2,0
No enjoyment of life	101	11,2	4,4	1,5
Other psychological complaints	229	-	10,0	3,4
Total	2305	-	100,0	34,4

2- Findings of the physical examinations

Physical examinations showed that 798 of the 898 applicants had physical disorders. Findings in connection with the muscoskeletal system were the most common with 428 afflicted applicants (47,7 %). This is followed by dermatological findings, which were reported in 385 people (42,9%). The total number of physical findings amount to 2796, as regards the distribution of which according to systems, it appears that findings in connection with the musculoskeletal system (25,4%) and dermatological findings (23,3%) are the most common (Table 29).

Table 29. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the physical findings of the medical examinations

Systems	Number of Applicants	Percentage of Applicants	Number Findings	Percentage of Findings
Musculoskeletal	428	47,7	710	25,4
Dermatological	385	42,9	652	23,3
Oro-Dental	198	22,0	446	16,0
Digestive	195	21,7	251	9,0
Ear, Nose and Throat	182	20,3	257	9,2
Urogenital	146	16,3	187	6,7
Ophthalmological	68	7,6	94	3,4
Respiratory	65	7,2	74	2,6
Neurological	30	3,3	45	1,6
Cardiovascular	25	2,8	25	0,9
Functional Disabilities	12	1,3	12	0,4
Endocrinological	5	0,6	5	0,2
Total	1739*	-*	2796	100,0

**As an applicant may have more than one finding regarding a system, the total is larger than 798 and 100%.*

The most common physical findings are ecchymosis (21,8%) and muscular pain and sensitivity (20,8%). The distribution of the most common 10 findings and other findings is presented in Table 30.

Table 30. The classification of the applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to their physical findings

The Distribution of the Most Common 10 Findings and Other Findings	Number of Findings	Percentage of Applicants	Percentage of all Physical Findings
Ecchymosis on the skin	196	21,8	7,0
Muscular pain and sensitivity	187	20,8	6,7
Epigastric sensitivity	149	16,6	5,3
Missing teeth	125	13,9	4,5
Scar tissue	111	12,4	4,0
Sensitivity on costovertebral angle	105	11,7	3,8
Skin erosion	92	10,2	3,3
Dental discoloration	87	9,7	3,1
Edema	85	9,5	3,0
Tooth decay	75	8,4	2,7
Other findings of the musculoskeletal system	523	58,2	18,7
ENT findings	257	28,6	9,2
Other dermatological findings	168	18,7	6,0
Other findings related to mouth-dental disorders	159	17,7	5,7
Other findings related to the digestive system	102	11,4	3,6
Ophtalmological findings	94	10,5	3,4
Other findings related to the urogenital system	82	9,1	2,9
Findings related to the respiratory system	74	8,2	2,6
Neurological findings	45	5,0	1,6
General findings	38	4,2	1,4
Findings related to the cardiovascular systems	25	2,8	0,9
Functional disorders	12	1,3	0,4
Endocrinological findings	5	0,6	0,2
Total	2796	-	100,0

3- Psychiatric Symptoms and Findings:

410 of the applicants (45,7%) had an interview with a psychiatrist. The interviews with these applicants revealed psychiatric symptoms and findings in 359 people. Regarding the distribution of these symptoms and findings, it appears that more than half of the applicants had anxiety, difficulties in falling or staying asleep, concentration difficulties, memory impairment and irritability and/or a lower

reaction threshold. Psychological symptoms and findings observed in 10 and more of the 410 applicants are presented in Table 31.

Table 31. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to their psychological symptoms and findings

Psychological Symptoms and Findings Observed in at Least 10 of the Applicants	Number of Symptoms and Findings	Percentage of Applicants Who Were Examined by a Psychiatrist	Percentage Among Psychiatric Symptoms and Findings
Anxiety	246	60,0	6,5
Difficulty in falling or staying asleep	235	57,3	6,2
Concentration difficulties	224	54,6	5,9
Memory impairment	216	52,7	5,7
Irritability and/or outburst of anger	210	51,2	5,6
Fatigue/weakness	162	39,5	4,3
Feelings of detachment from others	153	37,3	4,1
Intense physiological reactions to stimuli associated with the trauma	142	34,6	3,8
Increase or decrease in sleep duration	141	34,4	3,7
Intense psychological distress at exposure to stimuli associated with the trauma	137	33,4	3,6
Changes in appetite/weight (increase or decrease)	118	28,8	3,1
Flashback experiences and acting or feeling as if the traumatic event were recurring	116	28,3	3,1
Markedly diminished interest or participation in significant events	115	28,0	3,1
Hypervigilance	114	27,8	3,0
Recurrent and intrusive distressing recollections of the traumatic event	106	25,9	2,8
Exaggerated startle response	105	25,6	2,8
Agitation (irritability, hyperactivity)	104	25,4	2,8
Sense of foreshortened future	104	25,4	2,8
Efforts to avoid activities, places or people that arouse recollection of the trauma	104	25,4	2,8
Recurrent distressing dreams of the event	103	25,1	2,7
Efforts to avoid thoughts, feelings or conversations associated with the trauma	98	23,9	2,6
Responses of intense fear, helplessness or horror to the traumatic events experienced or witnessed	96	23,4	2,5

Depressive affect	95	23,2	2,5
Diminished psychomotor activity	79	19,3	2,1
Restricted range of affect (blunted affect)	67	16,3	1,8
Decrease in sexual interest	62	15,1	1,6
Obsession	47	11,5	1,2
Not being to remember significant parts of the trauma	46	11,2	1,2
Dysphoric mood	45	11,0	1,2
Depressive mood	30	7,3	0,8
Suicidal thoughts or attempt	27	6,6	0,7
Dysphoria	22	5,4	0,6
Compulsion	22	5,4	0,6
Delusion	10	2,4	0,3
Other psychiatric symptoms or findings	68	-	1,8
Total	3769	-	100,0

4- Diagnosis

The evaluation of the diagnosis on the applicants involved 880 applicants, who were diagnosed till the end of the year 2004. Regarding the 199 different diagnosis, it appears that soft tissue injury was the most common among physical diagnosis (251 people, 28,5%), while posttraumatic stress disorder was the most common among psychiatric diagnosis (149 people, 16,9%). The most common 10 psychiatric diagnoses and their frequency among the 880 applicants who have been diagnosed, are presented in the tables 32 and 33.

Table 32. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to their physical diagnoses

The 10 Most Common Physical Diagnosis	Number of Applicants	%
Soft tissue injury	251	28,5
Gastritis	75	8,5
Cut or bruises on the skin	44	5,0
Lumbar strain	39	4,4
Infection of the urinary system	34	3,9
Myalgia	32	3,6
Gastroduodenal ulcer	28	3,2
Sinusitis	27	3,1
Lumbar disk disorder	26	3,0
Hemorrhoid	25	2,8

Table 33. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to their psychiatric diagnoses

The 10 Most Common Physical Diagnosis	Number of Applicants	%
PTSD (chronic)	149	16,9
Major depressive disorder	87	9,9
Adjustment disorder	47	5,3
Generalized anxiety disorder	38	4,3
Acute stress disorder	24	2,7
PTSD (acute)	20	2,3
Obsessive compulsive disorder	19	2,2
Other mood disorders	10	1,1
Other anxiety disorders	6	0,7
Panic disorder	7	0,8

When the relation between the diagnosis and the torture experienced by the applicant is examined, while disregarding such diagnoses as were not related to the trauma, it appears that in 47% of all diagnoses related to the trauma, the torture period was regarded as the only etiological factor, in 30,9% of the cases it was regarded as one of the etiological factors, while in 22,1% of the cases it aggravated or inflamed the pathological situation.

Out of the 898 applicants in the year 2004, no disorder connected to the torture and trauma period could be found in 39 of the applicants (4,3%).

D- THE TREATMENT AND REHABILITATION PROCESS

This chapter includes the treatment and rehabilitation services provided in the HRFT Treatment and Rehabilitation Centres and their results.

1- Applied Treatment Methods

As regards the treatment methods applied on a total number of 898 applicants, it appears that 661 of them were given medication other than psychoactive drugs (73,6%), that 272 people (30,3%) were given psychoactive medicines; 134 people (14,9%) people were given an exercise programme and 48 people (5,3%) were given physical treatment, 98 people (10,9%) received psychotherapy while 22 people (2,4%) were treated surgically. The distribution of the treatment methods used is presented in Table 34.

Table 34. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the treatment methods applied

Applied Treatment Methods	Number of Applicants	%
Medication	661	73,6
Psychoactive medication	272	30,3
Recommendations on daily life	211	23,5
Exercises	134	14,9
Psychotherapy	98	10,9
Physical treatment	48	5,3
Surgical treatment	22	2,4
Orthopaedic implements (Orthesis, crutches, sole support, etc.)	18	2,0
Eye glasses	8	0,9
Total	1472	1.6*

**The average number of treatment methods applied on one applicant*

2- Results of the Treatment and Rehabilitation Applicants

The results of the applied treatment and rehabilitation methods to the applicants to our Treatment and Rehabilitation Centres are presented in Table 35.

Table 35. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the results of physical treatment

Results of the Physical Treatment	Number of Applicants
The treatment was completed	459
The treatment continues	143
No disorder was detected related to torture or prison experience	135
The treatment was discontinued	57
The treatment was discontinued without a diagnosis	45
The diagnostic stage continues	40
Total	879

The results of psychiatric treatment processes applied to applicants to our Treatment and Rehabilitation Centres are presented in Table 36.

Table 36. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 according to the results of psychiatric treatment

Results of the Physical Treatment	Number of Applicants
The treatment continues	145
The treatment was discontinued	117
The treatment was completed	83
The treatment was discontinued without diagnosis	41
The diagnostic stage continues	24
The applicant did not appear at the first appointment	11
The applicant did not want psychiatric treatment	10
The psychological treatment of the applicant was undertaken by the physician working in the Centre	7
Total	438

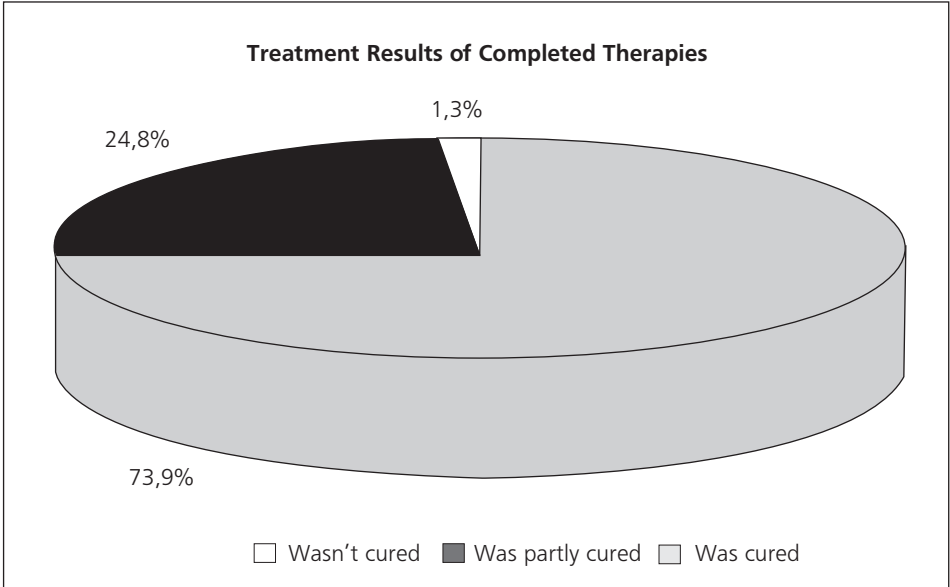
The progress of the treatment and rehabilitation stages of all the applicants in 2004 till the end of the year is presented in Table 37.

Table 37. The results of the physical and psychiatric treatment stages of the applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004

Progress of the Files	Number of Applicants
The treatment was completed	387
The treatment continues	223
The treatment was discontinued	151
The treatment was discontinued without diagnosis	52
No illness was detected in connection with torture or prison experience	39
The diagnostic stage continues	38
Empty	8
Total	898

286 of the 387 applicants, whose treatments were completed in the year 2004, were cured completely, while 96 were partly cured (Graphic 8).

Graphic 8. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004, whose treatments were completed, according to the treatment results



II- EVALUATION OF THE APPLICANTS WHO WERE SUBJECTED TO TORTURE AND ILL-TREATMENT IN DETENTION IN THE YEAR 2004

This section contains a separate evaluation of the social and demographic characteristics, the information obtained on the process of torture and the medical evaluations of the 348 people among the applicants to the HRFT in the year 2004, who stated to have been subjected to torture in detention in the same year. Information on when the applicants were last subjected to torture, provides an objective criterion with regard to the claims that torture still continues to be applied systematically. The fact that 348 people applied to the HRFT in the year 2004 is one which supports the notion that torture is still a systematic procedure.

A- SOCIAL AND DEMOGRAPHIC CHARACTERISTICS

1- Age and Sex

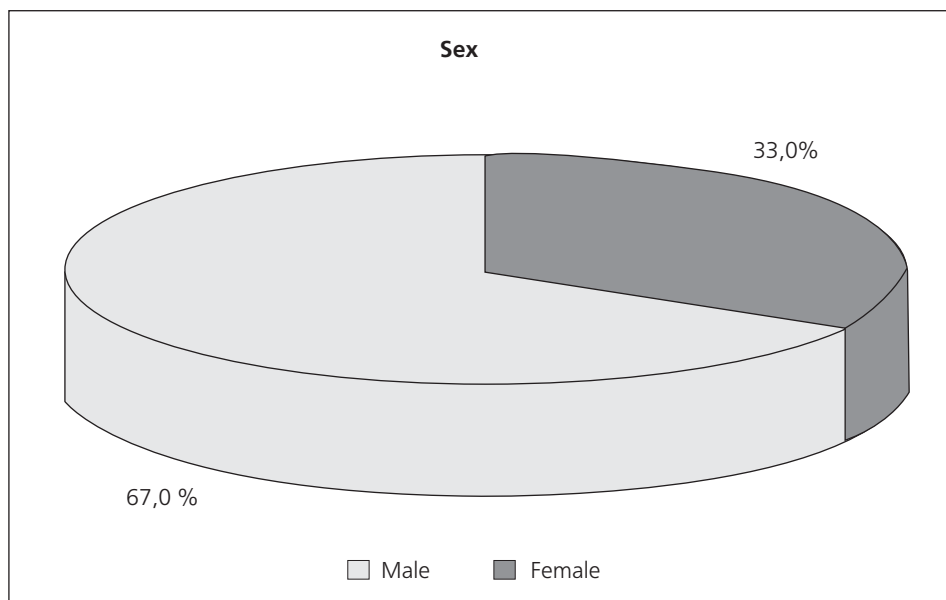
The age of the applicants varies between 13 and 68. The average age of the applicants is $26,9 \pm 9,2$. 34 applicants were at the age of 18 years or younger (9,8%). As stated in the first section and regarding the proportion of people under 18 years experiencing torture, this figure seems to be more realistic. The distribution of the applicants according to age is presented in table 38.

Table 38. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year, according to their age

Age Group	Number of Applicants	%
0-18	34	9,8
19-25	173	49,7
26-30	55	15,8
31-35	32	9,2
36-40	17	4,9
41-45	18	5,2
46 and over	19	5,5
Total	348	100,0

233 of the applicants were male (67%) while 115 were female (33%) (Graphic 9)

Graphic 9. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year, according to their sex

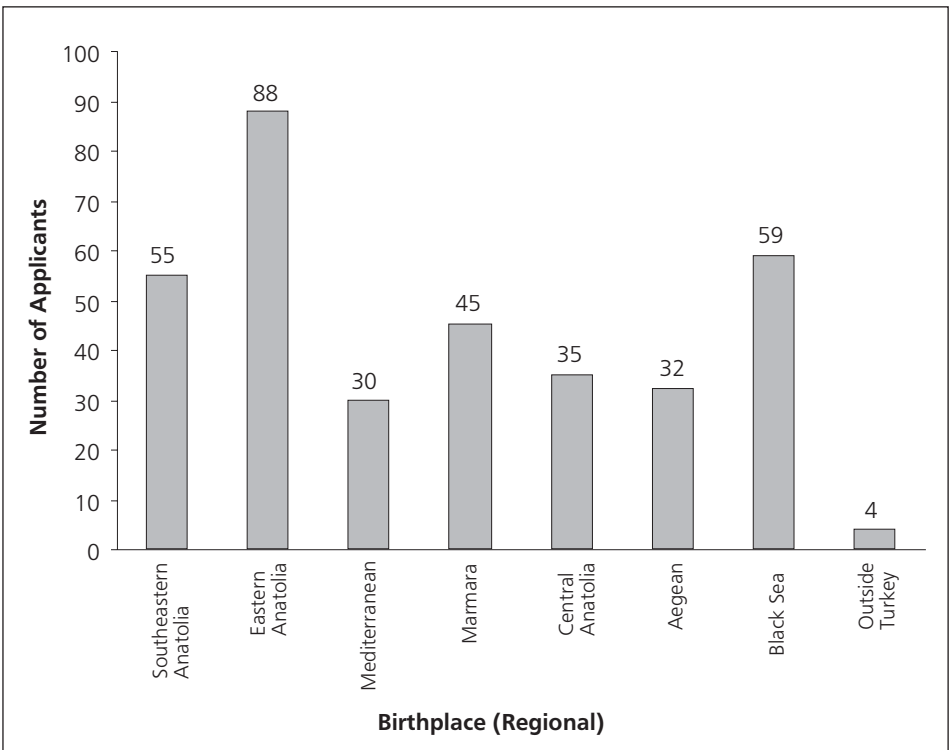


It should be observed that the proportion of women, who have been subjected to torture during the year is higher than that of the proportion of women in the total number of applications in the year 2004.

2- Place of Birth

Around 40% of the applicants were born in the Eastern and Southeastern Anatolian Regions, while those born in the Black Sea and Marmara Regions are the third and fourth most common. Applicants born in the Black Sea Region make up approximately 17% of the applicants, who were subjected to torture in detention, while those born in the Marmara Region make up around 13%. The distribution of the applicants according to their birthplace is presented in Graphic 10.

Graphic 10. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year, according to their birthplace



When cities are taken as the units of places of birth, it becomes apparent, that most applicants were born in Istanbul (47 people, 13,5%), Tunceli (25, 7,2%), Adana and Diyarbakir (23 people each, 6,6%) and Hatay (18 people, 5,2%).

3- Education Level and Employment Status

205 (58,9 %) of the applicants graduated from secondary school or high school, 96 (27,6%) graduated from primary school or are literate, while 36 (10,3%) graduated or dropped out of university. 11 (3,2%) of the applicants were illiterate. A more detailed distribution of the education level of the applicants is provided in Table 39.

Table 39. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year, according to their education level

Education Level	Number of Applicants	%
Illiterate	11	3,2
Literate	11	3,2
Primary School	85	24,4
Secondary School	49	14,1
Highschool	156	44,8
College-University Drop Out	7	2,0
College-University	29	8,3
Total	348	100,0

Regarding the employment status of the applicants, it appears that 151 people (43,4%) were unemployed. 77 people (22,1%) were university students, while 17 people (4,9%) were students of primary or secondary schools. There were also 11 members of the press (3,2 %) among the applicants.

It should be observed that the ratio of unemployed torture survivors is considerably lower than the ratio of the total of the applicants in the year 2004. This issue points to the gravity of the problem of unemployment among applicants who were imprisoned for a long time. The employment status of the applicants is presented in more detail in Table 40.

Table 40. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year, according to employment status

Employment or Profession	Number of Applicants	%
Unemployed	151	43,4
University Student	77	22,1
Tradesmen (working in a shop or office of their own)	18	5,2
Student of primary or secondary schools	17	4,9
Industrial worker in the private sector	16	4,6
Employed in an NGO	13	3,7
Journalist	11	3,2
Office craft in the private sector (secretary, bank clerk etc.)	10	2,9
Housewife	8	2,3
Pedlar	7	2,0
Construction Worker	5	1,4
Retired	4	1,1
Artist	4	1,1
Lawyer	2	0,6
Teacher	2	0,6
Farmer	1	0,3
Office craft in the public sector (secretary, bank clerk etc.)	1	0,3
Industrial worker in the public sector	1	0,3
Total	348	100,0

B- THE PROCESS OF TORTURE

Among the people who applied to the HRFT in 2004 because of torture and ill-treatment, 348 people were such as were subjected to torture while in detention in 2004. Although 367 out of all applicants were subjected to torture in the year 2004, those 19 who were last tortured in prisons were not included in the evaluation. Only such information as was obtained from the 348 applicants, who were tortured while in detention was included in the evaluation.

1- The Process of Detention and Torture

Of the applicants, who were subjected to torture in detention in 2004, 292 (83,9%) stated that they were tortured because of political reasons, while 54 people (15,5%) gave ordinary offences as the cause for torture. Furthermore, 1 person stated that he was subjected to torture because of being a refugee, while 1 person gave her sexual preferences as the cause.

As the ratio of tortured applicants, taken into detention because of ordinary offences of the total applicants in 2004 amounted to 8,6%, the fact that the percentage of torture survivors, who were charged with ordinary offences is 15,5%, suggests that people facing problems because of ordinary offences tend to apply to our Centres more often today. Reasons for this increase might be that the HRFT is better known in public, that there is a relative increase in the tendency of individuals to seek justice and especially the rise in the efforts of bar associations and human rights organisations towards torture survivors.

As regards the duration of the most recent detention of the applicants, it appears that 255 people (73,3%) remained in detention for less than 24 hours, while 61 people (17,5%) remained in detention between 24-48 hours. The duration of the most recent detention of 6 people (1,7%) was between 5-7 days. As stated in the interpretation of the figures in the first section, there is an observable decrease in durations of detentions. The distribution of the duration of the most recent detentions is presented in Table 41.

Table 41. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year, according to the duration of their most recent detentions

Duration of Most Recent Detention	Number of Applicants	%
Less than 24 hours	255	73,3
24-48 hours	61	17,5
49-72 hours	15	4,3
73-96 hours	10	2,9
5-7 days	6	1,7
Not known	1	0,3
Total	348	100,0

As regards the places where the applicants were taken into detention, it appears that 302 people (86,8%) were outdoors. The distribution of the places, where the applicants were last taken into detention is presented in Table 42.

Table 42. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year, according to the place of their most recent arrest

Place of Most Recent Arrest	Number of Applicants	%
Outdoors	302	86,8
Public office	18	5,2
Organisation (NGO office, press offices, etc)	10	2,9
Home	13	3,7
Work place	4	1,1
Other	1	0,3
Not known	348	100,0

The distribution of the applicants according to the time of arrest is presented in Table 43

Table 43. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year, according to the time of their most recent arrest

Time of Most Recent Arrest	Number of Applicants	%
08:00 - 18:00	278	79,9
18:00 - 24:00	38	10,9
24:00 - 08:00	31	8,9
Not known	1	0,3
Total	348	100,0

As regards the place where the applicants were tortured during their last detention periods, it appears that 196 people (56,3%) were outdoors, 70 people (20,1%) were in police departments, while 41 people (11,8%) were tortured in police stations.

It is significant, that there is a remarkable increase in the subjection of a major part of our applicants to torture and ill-treatment outdoors. The most important characteristics of such places is that practices in questions are not recorded. This situation indicates, that the real number of the practices in question are in reality quite high, while it also demonstrates how arbitrarily people may be detained. Furthermore, it indicates that violence is turning into a systematical method. Since such incidents, including the treatment of people in vehicles, unofficial detentions and abductions, are not recognised by officials, it becomes impossible to take legal action against the responsible officers.

On the other hand, despite increasing as a percentage, the ratio of the Security Centres including special branches, is rather high. The distribution of the applicants according to the place where they were tortured is presented in Table 44.

Table 44. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year according to the place of most recent torture in detention

Place of Most Recent Torture in Detention	Number of Applicants	%
Outdoors	196	56,3
Security centre	70	20,1
Police station	41	11,8
Police car	23	6,6
Gendarmerie centre	9	2,6
Home	3	0,9
Gendarmerie station	3	0,9
Not known/not remembered	2	0,6
Other	1	0,3
Total	348	100,0

As regards the regions in which the applicants were last subjected to torture, it appears that the most common region is the Marmara region, followed by the Mediterranean and Aegean regions (Table 45).

Table 45. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year according to the regions in which they last experienced torture

Region of Most Recent Torture	Number of Applicants	%
Marmara	238	68,4
Mediterranean	35	10,1
Aegean	32	9,2
Southeastern Anatolia	23	6,6
Central Anatolia	15	4,3
Eastern Anatolia	4	1,1
Not known	1	0,3
Total	348	100,0

Regarding the cities in which the applicants were last subjected to torture, it appears that İstanbul, Adana, İzmir, Diyarbakır ve Ankara take up the first places. The distribution of the applicants according to the cities in which they experienced torture in detention is presented for the first twenty cities in Table 46.

Table 46. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year according to the cities in which the applicants were last subjected to torture

City of Most Recent Torture	Number of Applicants	%
İstanbul	236	67,8
Adana	34	9,8
İzmir	25	7,2
Diyarbakır	17	4,9
Ankara	15	4,3
Aydın	5	1,4
Manisa	2	0,6
Siirt	2	0,6
Tekirdağ	2	0,6
Tunceli	2	0,6
Van	2	0,6
Batman	1	0,3
Gaziantep	1	0,3
Hatay	1	0,3
Mardin	1	0,3
Şırnak	1	0,3
Not known	1	0,3
Total	348	100,0

Regarding in more detail the centres in which torture was applied, it appears that the Anti-Terror Branch (ATB) in İstanbul, Diyarbakır and İzmir, the Security Centre in İstanbul, Adana Yüreğir Gendarmerie Centre, İstanbul Beyoğlu Police Station, Diyarbakır ATB, İstanbul Beşiktaş Police Station and Ankara Çankaya District Security Centre spring to eye.

The first twenty centres in which applicants were subjected to torture are presented in Table 47.

Table 47. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year according to the centres in which they last experienced torture

Centre in Which the Applicant Last Experienced Torture	Number of Applicants	%
İstanbul ATB	14	4,0
İstanbul Security Centre	11	3,2
Adana Yüreğir Gendarmerie Centre	6	1,7
İstanbul Beyoğlu Police Station	6	1,7
Diyarbakır ATB	6	1,7
İstanbul Beşiktaş Police Station	5	1,4
İzmir ATB	5	1,4
Ankara Çankaya District Security Centre	5	1,4
İstanbul Fatih District Security Centre	3	0,9
İstanbul Gayrettepe Security Centre	3	0,9
Adana Security Centre	2	0,6
Manisa Akhisar Security Centre	2	0,6
Ankara Anafartalar Police Station	2	0,6
Ankara Security Centre	2	0,6
İstanbul Feriköy Police Station	2	0,6
İstanbul Kocasinan Central Police Station	2	0,6
Siirt ATB	2	0,6
İstanbul Yakacak Police Station	2	0,6
İstanbul Zeytinburnu Police Station	2	0,6
Diyarbakır Çarşı Police Station	2	0,6
Other Police Stations	19	5,5
Other Security Centres and ATBs	14	4,0
Other Gendarmerie Centres and JİTEMs	4	1,1
Other Gendarmerie Centres	2	0,6
Not tortured in centres*	223	64,1
Not known/not remembered	2	0,6
Total	348	100,0

*Applicants who were tortured outdoors, in vehicles or other places

The distribution of the torture methods which the applicants were subjected to during their last detention is presented in Table 48.

Table 48. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year according to the methods of torture

Method of Torture	Number of Applicants	%
Beating	306	87,9
Insulting	223	64,1
Subjecting to chemical substances	124	35,6
Other threats against the person	93	26,7
Death threats	56	16,1
Humiliating	48	13,8
Sexual harassment	34	9,8
Forcing to obey nonsensical orders	30	8,6
Other positional torture methods	24	6,9
Forcing to wait on cold floor	22	6,3
Forcing to witness torture (auditory/visual)	22	6,3
Torturing in the presence of relatives and friends	22	6,3
Restricting food and water	22	6,3
Blindfolding	20	5,7
Restricting sleep	18	5,2
Threats against relatives	18	5,2
Cell isolation	16	4,6
Stripping naked	14	4,0
Forcing to extensive physical activity	14	4,0
Restricting defecation and urination	14	4,0
Continuously hitting on one part of the body	14	4,0
Pulling out hair/moustache/beard	9	2,6
Pressurized/cold water	8	2,3
Asking to act as an informer	7	2,0
Forcing to listen to marches or high volume music	6	1,7
Squeezing testicles	3	0,9
Electricity	3	0,9
Strangling	3	0,9
Mock execution	3	0,9
Burning	2	0,6
Suspending on a hanger	1	0,3
Falanga	1	0,3
Rape	1	0,3
Other	17	4,9
Total	1218	3,5*

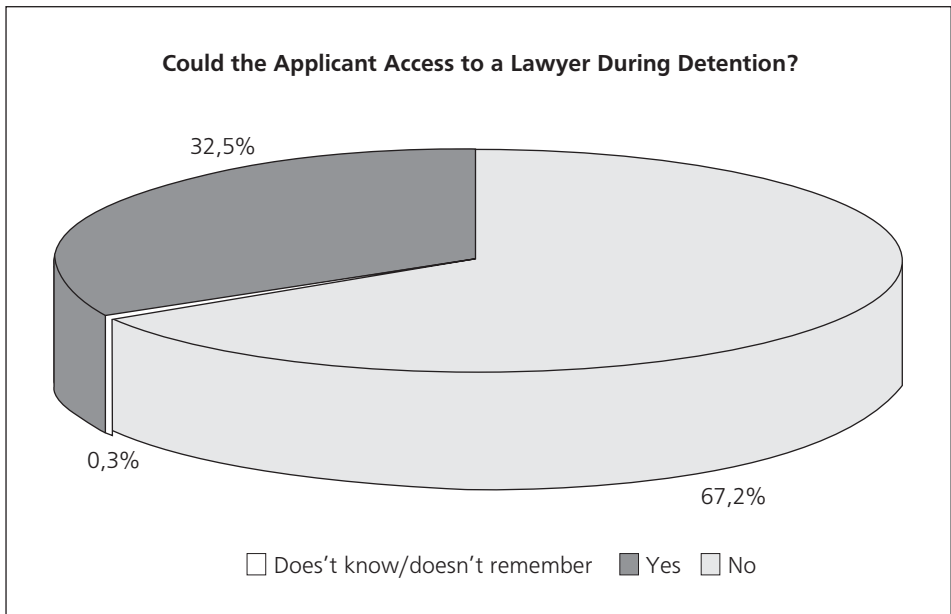
*The average number of torture methods a person was subjected to.

It should be observed that beating and humiliating rank very high while the percentage of other methods decrease.

2- Legal Procedures During and After Detention

113 (32,5%) of the applicants stated that they were able to have an interview with a lawyer during their detention. Compared to the years before, there is an increase in the access to legal services. However, the fact that 67,2 % of our applicants were not able to contact a lawyer is disturbing.

Graphic 11. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year according to their access to a lawyer



The number of applicants who were set free without charges and without facing prosecutor is 197 (56,6%). 128 applicants (36,8%) were set free by the prosecution office or the court. The cases against 3 applicants (0,9%) resulted in prison sentences while the trials of 104 applicants (29,9%) still continue (Tables 49 and 50).

Table 49. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture according to their situation after detention

Situation After Most Recent Detention	Number of Applicants	%
Was set free without facing prosecutor	197	56,6
Was set free by prosecution office or court	128	36,8
Was arrested	22	6,3
Not known/not remembered	1	0,3
Total	348	100,0

Table 50. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture according to the process of their trial after their last detention

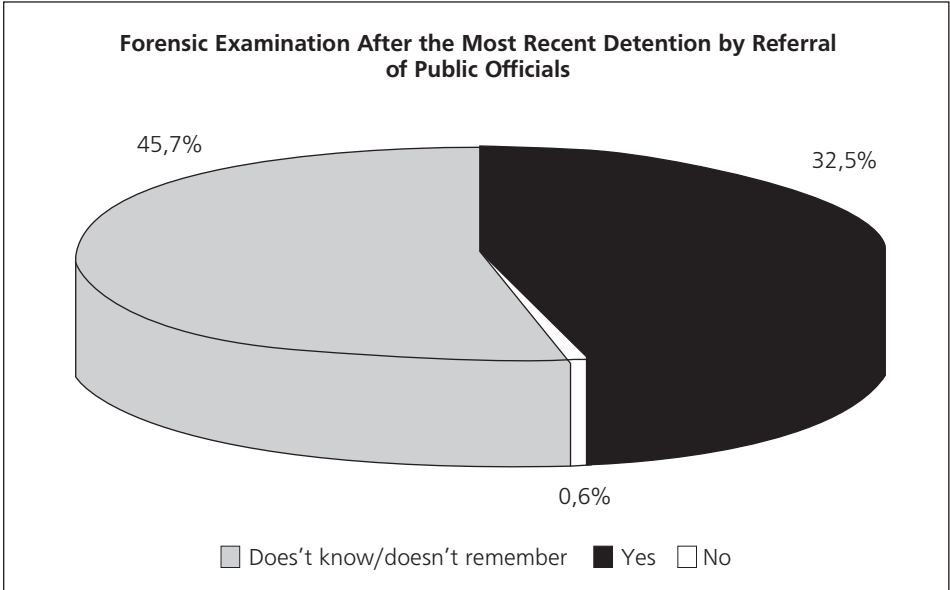
Trial Process After Last Detention	Number of Applicants	%
Applicant was not tried	197	56,6
Applicant was charged, the trial continues	104	29,9
Not known whether there is a trial	38	10,9
Applicant was tried, result unknown	4	1,1
Applicant was tried and convicted	3	0,9
Applicant was tried and acquitted	1	0,3
Not known/not remembered	1	0,3
Total	348	100,0

The fact that a very large part of our applicants was set free without even facing the prosecutor demonstrates how arbitrarily people may be detained and that this practice itself is used as a penalty.

On the other hand, information on the legal process of cases, which begin with detention is important with regard to discussions on the legal system.

The number of applicants whom was referred to a health institute for forensic examination by public officials according to legislations in force is 187 (53,7%) (Graphic 12).

Graphic 12. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year according to whether they were referred for a forensic report by public officials



Around 2/3 of these 187 applicants (127 people, 67,9%) were examined in hospitals or health centres, while 56 people (32,6%) were examined in the Forensic Medicine Institute in Istanbul or branches of Forensic Medicine Institute in other cities (Table 51). Furthermore, 41 people state that they provided themselves with forensic reports on their own initiative.

Table 51. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year according to their place of forensic medical examination after their most recent detention

Place of Forensic Medical Examination After Most Recent Detention	Number of Applicants	%
Hospital	85	45,5
Health center	42	22,5
Branch of Forensic Medicine Institute	32	17,1
Forensic Medicine Institute	24	12,8
Place of detention	1	0,5
Not known/not remembered	3	1,6
Total	187	100,0

As regards the statements of the 187 applicants who underwent forensic medical examination after detention, approximately 2/3 or the applicants reported that the security forces were taken out of the room during the forensic medical examination (119 people, 63,6%), that the forensic doctor took note of their complaints (125 people, 66,8%), that the forensic doctor provided himself with the anamnesis of the applicants (115 people, 61,5%) and that he/she wrote a report in accordance with the findings (68 people, 36,4%), while around _ of the applicants (87 people, 46,5%) stated that the forensic doctor examined as he ought to have (Table 52)

Table 52. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year according to their evaluation of the forensic examination after detention

Evaluation of Forensic Examination	Yes	%	No	%	Not known /not remembered	%	Total	%
Were the security forces taken out of the room during the forensic medical examination	119	63,6	61	32,6	7	3,7	187	100,0
Did the forensic doctor take note of the complaints?	125	66,8	58	31,0	4	2,1	187	100,0
Did the forensic doctor provide himself with the anamnesis of the patient?	115	61,5	67	35,8	5	2,7	187	100,0
Did the forensic doctor examine as he ought to?	87	46,5	87	46,5	13	7,0	187	100,0
Did the forensic doctor write a report that was in accordance with the findings?	68	36,4	58	31,0	61	32,6	187	100,0

According to the evaluation of the applicants, compared to the other institutions, the Forensic Medicine Institute complies best with the rules of forensic medication. Of the 20 applicants who were examined in the Forensic Medicine Institute, 15 (75%) stated that the doctor asked the security forces to leave the room, 19 people (95%) stated the doctor took note of their complaints, 17 people (85%) stated that the doctor provided himself with an anamnesis, 9 people (45%) reported that they were examined properly and 13 people (65%) that the report was in accordance with the findings. These numbers are comparable to those of the branches of Forensic Medicine Institute Branches, and

even higher when it comes to the removal of the security forces and proper examination (the answers from 36 people are 86%, 86%, 85%, 64% and 50% respectively). Positive answers on the forensic examination are reduced even more when it comes to hospitals and health centers (the answers from the total number of 127 people are 55%, 57%, 50%, 41% and 28% respectively).

Regarding forensic examination, there are some relatively positive developments, though not enough. Beyond some legal regulations, the work of doctors and human rights organisations working in this area should be remembered especially.

However, it is apparent that such work aiming at the abolition of the deficiencies in question must be continued in a multi-dimensional manner. It is evident that forensic examinations must be carried out in accordance with the guidelines and that the reports must be written in accordance with the findings if torture is to be avoided and officials using torture are to face penalties.

47 the applicants (13,5%) stated that they were subjected to torture during their interrogation in court or prosecution office and 86 people (24,7 %) made a claim to the prosecution office after detention period. Furthermore, 4 applicants made a claim to the prosecution office on the advice of the HRFT. 209 people (60,1%) people stated that they did not make any claim against security forces.

3- The Imprisonment Phase

Among those applicants, who were tortured in detention, 63 people (18,1%) have been imprisoned at one point or other. The number for those who were imprisoned after their most recent detention is 27 (7,6%). The duration of their stay in prison varies between 2 days and 7 months. The approximate duration is 2,2 months (Standart variation: 1,86, Median: 2 months).

C- MEDICAL EVALUATION

This chapter contains information on the health situation of the applicants, which was obtained by the anamnesis, physical examination and other tests, made by physicians working in Centers together with consultants (psychiatrists, physiatrists, ophthalmologists, ENT experts etc) of the Treatment and Rehabilitation Centres.

1- Medical Complaints of the Applicants

All of the 348 applicants who were subjected to torture in detention, in the year 2004 had physical or psychological complaints. Musculoskeletal complaints were the most common, with 258 of the applicants, who were subjected to torture in detention (74,1%) reporting related complaints. The second most common of all complaints were dermatological ones, stated by 181 (52,0%) of the applicants. 87 applicants (25,0%) related psychological complaints. The applicants reported 1826 different kinds of complaints. As regards the distribution of these complaints with respect to systems, it becomes apparent that musculoskeletal complaints (28,4%) and dermatological complaints (21,5%) are the most common of all (Table 53).

Table 53. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year according to the frequency of their physical and psychological complaints

Systems	Number of Applicants	Percentage Among Applicants	Number of Complaints	Percentage Among Complaints
Musculoskeletal	258	74,1	517	28,4
Dermatological	181	52,0	392	21,5
Neurological	117	33,6	151	8,3
Psychological	87	25,0	364	20,0
General	72	20,7	95	5,2
Digestive	55	15,8	74	4,1
Ophthalmological	42	12,1	61	3,3
Ear, Nose and Throat	42	12,1	55	3,0
Respiratory	27	7,8	32	1,8
Urogenital	25	7,2	41	2,2
Oro-Dental	21	6,0	25	1,4
Cardiovascular	12	3,4	16	0,9
Total	939*	-*	1823	100,0

**As one applicant may have complaints about more than one system, the total is larger than 898 and 100%*

The most common psychological complaints are those related to sleeping problems and appear in a little less than 1/5th of the applicants (62 people). The most common physical complaint is skin discolouration (118 people). The most common 10 physical and psychological complaints are presented in Tables 54 and 55

Table 54. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year according to the frequency of their physical complaints

10 Must Common Physical Complaints	Number of Complaints	Percentage of Applicants	Percentage of Physical Complaints	Percentage of all Complaints
Discolouration of skin	118	33,9	8,1	6,5
Headache	94	27,0	6,4	5,2
Swelling	83	23,9	5,7	4,6
Abrasion of skin	58	16,7	4,0	3,2
Back ache	58	16,7	4,0	3,2
Back pain together with pain in leg	57	16,4	3,9	3,1
Trauma traces on skin	55	15,8	3,8	3,0
Shoulder pain	55	15,8	3,8	3,0
Neck-arm pain	49	14,1	3,3	2,7
General pain on whole body	39	11,2	2,7	2,1
Other physical complaints	797	-	54,5	43,7
Total	1463	-	100,0	80,3

Table 55. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year according to the frequency of their psychological complaints

10 Must Common Psychological Complaints	Number of Complaints	Percentage of Applicants	Percentage of Psychological Complaints	Percentage of all Complaints
Sleeping problems	62	17,8	17,0	3,4
Anxiety	57	16,4	15,7	3,1
Irritability	42	12,1	11,5	2,3
Amnesia	36	10,3	9,9	2,0
Concentration difficulties	32	9,2	8,8	1,8
Nightmares	24	6,9	6,6	1,3
Flashbacks	21	6,0	5,8	1,2
Urge to weep	18	5,2	4,9	1,0
Feelings of detachment from others	18	5,2	4,9	1,0
No enjoyment of life	14	4,0	3,8	0,8
Other psychological complaints	40	-	11,0	2,2
Total	364	-	100,0	20,0

2- Findings of the physical examinations

As a result of physical examinations, 323 of the 348 applicants, who were subjected to torture in detention were observed to have physical disorders. Findings in connection with the dermatological system were the most common with 247 afflicted applicants (71,0 %). This was followed by muscoskeletal findings, which were reported in 207 people (59,5%). The total number of physical findings amount to 1086. As regards the distribution of these findings according to systems, it appears that findings in connection with the dermatological system (45,1%) and muscoskeletal findings (27,7%) are the most common (Table 56).

Table 56. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year, according to the physical findings

Systems	Number of Applicants	Percentage of Applicants	Number of Findings	Percentage of Findings
Dermatological	247	71,0	490	45,1
Musculoskeletal	207	59,5	301	27,7
Oro-dental	39	11,2	98	9,0
Ophthalmological	40	11,5	61	5,6
Ear, Nose and Throat	41	11,8	58	5,3
Urogenital	21	6,0	26	2,4
Digestive	17	4,9	24	2,2
Respiratory	9	2,6	9	0,8
Neurological	4	1,1	5	0,5
Cardiovascular	3	0,9	3	0,3
Functional disability	3	0,9	3	0,3
Total	631*	-*	1086	100,0

** As an applicant may have more than one finding regarding a system, the total is larger than 798 and 100%.

The most common physical findings are ecchymosis (55,2%) and muscular pain and sensitivity (41,2%). The distribution of the most common 10 findings and other findings is presented in Table 57.

Table 57. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year, according to the physical findings

The Distribution of the Most Common 10 Findings* and Other Findings	Number of Complaints	Percentage of Applicants	Percentage of All Physical Complaints
Ecchymosis on the skin	192	55,2	17,7
Muscular pain and sensitivity	143	41,1	13,2
Skin erosion	88	25,3	8,1
Edema	81	23,3	7,5
Cuts in the skin	31	8,9	2,9
Crusted wound	27	7,8	2,5
Pain and restriction of the movements of the neck	23	6,6	2,1
Scar tissue	23	6,6	2,1
Ecchymosis around the eye	21	6,0	1,9
Bleeding in the eye	20	5,7	1,8
Pain and restriction of the movements of the shoulders	20	5,7	1,8
Other disorders of the musculoskeletal system	115	33,0	10,6
Findings related to mouth-dental disorders	98	28,2	9,0
ENT Findings	58	16,7	5,3
Other dermatological findings	48	13,8	4,4
Findings related to the urogenital system	26	7,5	2,4
Findings related to the digestive system	24	6,9	2,2
Other ophthalmological findings	20	5,7	1,8
Findings related to the respiratory system	9	2,6	0,8
General findings	8	2,3	0,7
Neurological findings	5	1,4	0,5
Findings related to the cardiovascular systems	3	0,9	0,3
Functional disorders	3	0,9	0,3
Total	1086	-	100,0

*11 findings are presented as there were two findings which were observed on 20 people and shared the 10th place

3- Psychiatric Symptoms and Findings:

77 of the applicants (22,1%) had an interview with a psychiatrist. The interviews with these applicants revealed psychiatric symptoms and findings in 69 cases. Regarding the distribution of these symptoms and findings, it appears that more than half of the applicants displayed anxiety, difficulties in falling or staying asleep, concentration difficulties and irritability and/or a lower reaction threshold.

Psychiatric symptoms and findings observed in 10 and more of the 77 applicants are presented in Table 58.

Table 58. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year, according to their psychological symptoms and findings

Psychological Symptoms and Findings Observed in at Least 10 of the Applicants	Number of Symptoms and Findings	Percentage of Applicants Who Were Examined by a Psychiatrist	Percentage Among Psychological Symptoms and Findings
Anxiety	52	67,5	6,3
Difficulties in falling or staying asleep	46	59,7	5,6
Concentration difficulties	44	57,1	5,3
Irritability and/or outburst of anger	40	51,9	4,8
Intense physiological reactions to stimuli associated with the trauma	37	48,1	4,5
Intense psychological distress at exposure to stimuli associated with the trauma	37	48,1	4,5
Fatigue/weakness	36	46,8	4,4
Increase or decrease in sleep duration	34	44,2	4,1
Recurrent and intrusive distressing recollections of the traumatic event	32	41,6	3,9
Hypervigilance	31	40,3	3,8
Memory impairment	31	40,3	3,8
Exaggerated startle response	30	39,0	3,6
Flashback experiences and acting or feeling as if the traumatic event were recurring	29	37,7	3,5
Efforts to avoid thoughts, feelings or conversations associated with the trauma	29	37,7	3,5
Response of intense fear, helplessness or horror to the traumatic events experienced or witnessed	29	37,7	3,5
Efforts to avoid activities, places or people that arouse recollection of the trauma	28	36,4	3,4
Recurrent distressing dreams of the event	28	36,4	3,4
Changes in appetite/weight (increase or decrease)	27	35,1	3,3
Agitation (irritability, hyperactivity)	24	31,2	2,9
Sense of detachment or estrangement from others	22	28,6	2,7
Markedly diminished interest or participation in significant events	19	24,7	2,3
Sense of foreshortened future	16	20,8	1,9
Depressive affect	12	15,6	1,5
Restricted range of affect (blunted affect)	12	15,6	1,5
Depressive mood	11	14,3	1,3
Diminished psychomotor activity	11	14,3	1,3
Dysphoria	10	13,0	1,2
Inability to remember significant parts of the trauma	10	13,0	1,2
Other psychological symptoms or findings	58	-	7,0
Total	825	-	100,0

4- Diagnosis

The evaluation of the diagnosis involved 334 applicants, who were diagnosed till the end of the year 2004. Regarding the 76 different diagnoses, it appears that soft tissue injury was the most common among physical diagnosis (247 people, 74,0%), while acute stress disorder was the most common among psychiatric diagnoses (22 people, 6,6%). The most common 10 physical diagnosis, the psychiatric disorders diagnosed on two or more people their frequency among the 334 applicants who have been diagnosed, are presented in the tables 59 and 60.

Table 59. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year, according to the frequency of the most common physical diagnosis

The 10 Most Common Physical Diagnosis	Number of Applicants	%
Soft tissue trauma	247	74,0
Cuts or bruises on the skin	44	13,2
Myalgia	21	6,3
Bone fracture	17	5,1
Traumatic conjunctivitis	10	3,0
Gastritis	7	2,1
Allergic conjunctivitis	7	2,1
Infections of the urinary system	6	1,8
Refraction problems	4	1,2
Lumbar strain	4	1,2

Table 60. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2004 who were subjected to torture in said year, according to the frequency of the most common psychiatric diagnosis

Psychiatric Diagnosis Diagnosed on at Least Two People	Number of Applicants	%
Acute stress disorder	22	6,6
PTSD (Chronic)	19	5,7
PTSD (Acute)	16	4,8
Major depressive disorder	13	3,9
Obsessive compulsive disorder	3	0,9
Generalized anxiety disorder	3	0,9
Other mood disorders	2	0,6

When the relation between the diagnosis and the torture experienced by the applicant is examined by disregarding such diagnosis as were not related to the trauma, it appears that in 87,8% of all diagnoses related to the trauma, the

torture period was regarded as the only etiological factor, in 7% of the cases it was regarded as one of the factors, while in 5,2% of the cases it aggravated or inflamed the pathological situation.

Out of the 348 applicants, who were subjected to torture in detention in the year 2004, no disorder connected to the torture and trauma period could be found in one of the applicants (1,4%).

EVALUATION and CONCLUSION

The main aim of the HRFT - an organisation working on the prevention and abolition of torture - is to create a Turkey where nobody is put to the torture.

Considering the total number of comparable annual applications to the HRFT Treatment and Rehabilitation Centres, the high proportion of those applicants, who have been subjected to torture and other cruel, inhuman degrading treatments or punishments, the places where applicants experience these (the most common being security offices with trained units), the rise in facing such treatment in places out of record (outdoors, in vehicles etc.), the rise in methods untraceable on the body, the problem of penalty and current harassments faced by the HRFT and similar human rights organisations, then it becomes evident that – unfortunately - despite some legal amendments made in our country, especially since 1999, it is evident that torture and other cruel, inhuman degrading treatments or punishments continue to exist today in a widespread and systematic manner.

Torture includes all kinds of violence against the personality of imprisoned people as a whole. This violence against individuals also functions as a way to reproduce violence in society. Therefore the phenomenon of torture has a significance beyond qualitative assessments, even though qualitative assessments are important.

- Considering that the number of applicants is 922, it appears that the total number of applicants does not differ significantly from that of the year before (925). The number of applicants, who have been subjected to torture in the year 2004 is 348, which is also not significantly different than that of the year before (the number of applicants, who had been subjected to torture in 2003 was 340).

- The percentage of the applicants who have been subjected to torture in the year in question is 37,7% and as such is similar to the figures of the years before.

- There is an observable decline in the duration of detentions.

- There is a 20,1% decline in the proportion of Security Centres (where special branches are on duty) among places where torture happens
- Nevertheless, the apparent rise in the places beyond official detention areas (such as places outdoors or vehicles) is important considering its results and also the tendencies in our country.
- Especially significant this year are the cases of torture after "abductions", which seem quite well prepared. These cases show that torture can and does happen, when some people or organisation find it necessary. This can doubtless be only the case in the suitable political setting.
- There is an observable rise in direct, common and systematic violence by security forces, especially during demonstrations, when the people are not taken into detention on purpose.
- There are observable differences in torture methods (there is a rise in common beating and psychological methods, while other, "classical" methods are in the decline).
- Unfortunately, when need arises, a required amount of torture helps to reproduce violence and the culture of torture on a social level (The fact that the world was made witness to the torture cases in Guantanamo and Iraq could be regarded from this perspective).
- Our work has shown that the proceedings in prisons in our country have an important role in reproducing violence and the culture of torture.

In our work with applicants released from prison this year (404 applicants in the year 2004) we are unfortunately confronted by the results of the prison policy, especially in the past four years, besides and by means of chronic complaints

Among the applicants released from prison we face a profile very different from that of the years before. We are now acquainted first hand with the results of the prison methods based on isolation, which, up to now, we were expressing on a theoretical basis (The complaints and diagnosis of our applicants are extremely remarkable).

These practices, which started as a prototype in the F type prisons but are used more commonly, especially in some prisons, functions as a reproducer of the culture of torture inherent in isolation and violence in individuals as well as in society (efforts to keep the problem of prisons away from the public agenda and efforts to reproduce violence on the social level are parallel).

Therefore retrospective and prospective scientific work on isolation is planned.

A large part of the 3000 people, released from prisons on the basis of the new Turkish Penal Code to be on force in 1st June 2005, have applied to our treatment centres, especially in the last months of the year 2004. It is predicted that this development will be a priority in the agenda. Therefore the approach to the treatment and rehabilitation of our applicants must be added force to, especially where those with chronic complaints are concerned.

As a contribution to our approach to our applicants with chronic complaints, the work on the book "Pain in Torture Rehabilitation", the last meeting regarding which was made in 2004, is planned to be published in 2005.

As psychological treatments of our applicants are getting more intensive, work in this area must be made more effective.

Our failure to realise the social support project is unfortunate, especially considering our applicants who were released from prison. It is a priority in the agenda to develop a holistic project on prisons, which includes the social support dimension.

Treatment and Rehabilitation towards our hunger striker applicants continued, even if not on a level comparable to that of the years before. 100 hunger strikers are still in the treatment and rehabilitation programme.

Despite continuing treatment and rehabilitaton programmes for our hunger striker applicants, we are facing problems in sustaining our relations to some of our applicants, due to pretexts such as the re-incarcerment of applicants on the basis of the invalidity of existing reports.

Especially from the end of 2003 on, we worked on the matter of the re-incarcerment of prisoners, who were released as a result of a illevolent adaption of the article 399 of Code of Criminal Procedures. The public and authorities were informed, as the issue required. Due to the decision of the European Court of Human Rights to "question the impartiality of the Forensic Medical Institute" as a result of the "Interpretation Reports", prepared competently by Chambers of Medicine, this problem was solved to a large degree.

The HRFT and the Treatment and Rehabilitation Centres of the HRFT, who make great efforts to prevent torture and at the same time work on the treatment of the health problems tortured people face, will continue to work determinedly to turn into reality the vision of a Turkey and a world, where such efforts will be needless.

