



# **HUMAN RIGHTS FOUNDATION of TURKEY**

## **TREATMENT and REHABILITATION**

### **CENTERS REPORT 2007**



HRFT  
Human Rights Foundation of Turkey

# **TREATMENT and REHABILITATION CENTRES REPORT 2007**

Ankara, October 2008

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## FOREWORD

### **Yavuz Önen<sup>1</sup>**

Here we are publishing the annual Treatment Report for 2007, a report which we have been publishing since the establishment of the HRFT in 1990, based upon the data obtained from our representative offices. The information that this report presents to the public in a scientific way is about torture cases in Turkey. Torture is a crime against humanity, constituting a threat to right to life.

In these books that we publish every year, the story of a persecution is written; the persecution inflicted by the hands of public officials on citizens who are deprived of their liberty which is a crime against humanity and an embarrassing tragedy.

What we are doing by publishing annual reports is just a re-printing of this story. What changes every year is the number of torture survivors who apply to the HRFT Representatives; and the graphics, tables and statistics created accordingly.

Torture methods may vary depending on the political atmosphere. Yet, systematic violence does not change; it is continuous and stable, though its degree may vary.

In these books we conceal faces and names. Neither torture survivors nor torturers are mentioned. These scientific narratives prepared by experts are general and abstract. However, the information revealed sheds light upon the concealed facts. Our applicants, the resisting people, are made visible. Most of them are subjected to unregistered violence during uncontrolled processes. In the detention places that are commonly known, trained soldiers, police and civilian officials are on duty. Their tools and methods are the same everywhere. Those who are actually responsible, the politicians in government, ignore torture allegations and by doing so neglect their duties. They are stuck in their seats. So far there has not been one honourable case of resignation as a result of occurring torture cases. Torture suspects are under protection and interrogations against them are exceptions. The lawsuits filed are timed out, delayed or they result in light punishments. Every year similar cases occur and the vicious circle continues.

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<sup>1</sup> HRFT President

The situation described above recurred in 2007, in an atmosphere where democracy, rule of law and human rights have been debated upon more intensively than ever in the history of Turkey. I believe that it is necessary to record information regarding this atmosphere in the introduction of this book in order to generate and improve the collective memory.

Political and social movements were the most striking characteristics of the last year. This vivacity caused by the election of the new President and general elections encompassed the State as well. The Constitutional Court and the Turkish Armed Forces (TAF) loomed in a way influencing the political scene. As the Constitutional Court made a judgment that the votes of 2/3 of the Turkish Grand National Assembly are a requisite for electing the President of the Republic, an early election was called. Thus the election of Abdullah Gül as President was delayed until the aftermath of the parliamentary elections.

The TAF was against a President whose wife wears headscarf to climb to the Çankaya Palace. So TAF adopted several memorandums in April and May, all aimed at influencing the public opinion. Its evaluations on the political and social life of Turkey and its reminders on protection and defence of the laic republic came to the top of the agenda.

The vivacity was also in the civil sphere. Parallel to the memorandums declared by the TAF, the opposition took to the street at large "Republican Meetings" before the Presidential elections. Participation in these meetings was high, the laic front was able to display their footing in society in seven different provinces.

During this political turmoil, several suicide attacks aimed at the civilian population occurred. The bombs left ten civilians dead and tens of civilians wounded in İzmir, Ankara and İstanbul.

Another point about this political atmosphere to be mentioned is the arms and soldiers stationed by the TAF at the Iraqi border and the continuous cross border operations. Security zones were established in three provinces before the elections and propaganda was made to prevent people from voting for the Democratic Society Party. A non-declared state of emergency regime was put into practice and the strategy of solving the Kurdish question with military methods did not change; the shadow of war loomed over Turkey.

Scrutinizing the election manifesto of the Justice and Development Party (JDP), the Republican People's Party (RPP) and the Nationalist Movement Party (NMP) - the parties that were regarded certain to get seats in the Parliament - prior to the elections we did not come across any serious promises regarding peace and democracy which is what we actually need. Instead concerns about security and terror were standing at the forefront.

However, after this atmosphere of turmoil and the constitutional amendments, Presidential elections and general elections took place, and on 28 August Abdullah Gül was elected as the 11th President of the Turkish Republic. On the 22 July early



general elections the JDP obtained 46.7% of the votes and gained a majority in the Parliament. The 60th cabinet was formed under the prime ministry of Recep Tayyip Erdoğan. The second winner of the elections was the Democratic Society Party (DSP). The DSP joined the elections with independent candidates and won 20 seats. Consequently, representatives of two political movements labelled as potentially risky by the TAF - the DSP and the JDP - joined the political arena of Turkey powerfully.

An important action by the government after the elections was to revive the society by preparing a new draft Constitution. While different sections of the civil society were working on this draft, the government gave up on its initiative. The part of the society that had been hopeful about preparations of a new Constitution was disappointed.

Due to the increase in the PKK attacks in September- October the military action escalated. Within two months more than 50 soldiers were buried. The TAF claimed that these attacks stemmed from the region controlled by the Iraqi Regional Kurdish Administration and requested authorisation for a cross border operation. On 17 October the TGNA answered this request with a permit and on 1 December the TAF carried out the first air operation. On 21 February 2008 the TAF started air borne and land operations to the PKK camps. Approximately ten thousand soldiers reached the Zap camps in the north of Iraq in severe winter conditions and carried out an eight-days operation.

As a result;

I tried to briefly present the main incidents of a process expanding into the first months of 2008 and explain the political climate in Turkey. I tried to show the difficult consequences this atmosphere brings forth for human rights defenders. In an atmosphere resembling the "Last Judgment" it was difficult to oppose violence. Our voices were not heard in the chaos. Our demands for peace had no place on the agenda of politicians who prioritize security. A frightened society did not ask for more democracy and freedom. On the contrary racism escalated in the war atmosphere and the will to live together fraternally and in peace could not become visible, despite our endeavours. In this process when the demands of the social opposition and workers were neglected, harsh measures were taken against demonstrators. Rule of law based upon human rights still did not exist in 2007. Instead the military and police were more visible than before. Pressures on freedom of expression and political life continued systematically. The cost of being oppositional was heavy.

Since the amendment of the Police Duties and Authorities Law, the police have been using force recklessly. The number of suspicious deaths in detention increased. Six people died in detention and four in prisons. During the armed conflict 407 people lost their lives, 104 of whom were members of security forces. The number of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 was 452. 310 applicants stated that they had been subjected to torture within the same year. The number of torture survivors increased by 44 % compared to the previous year. "Zero tolerance

to torture” is a general truth and even made it on the agenda of the JDP, the party that composes the government alone and that has the majority in the Parliament. However, the reality is that torture is continuing as does tolerance for the torturers.

We commemorate Hrant Dink, a journalist of the Agos newspaper, a human rights defender and our friend, who was murdered in January 2007. We will perpetuate the aspirations for peace and fraternity that hundreds of thousands of participants of the funeral of Hrant Dink cried for. We will strengthen our struggle for a world and Turkey without torture. We will continue to be in solidarity with torture survivors. I believe that this book will be contributory to such an endeavour.

I would like thank to our friends and workers who provided data for and prepared 2007 Treatment and Rehabilitation Centres Report.

## INTRODUCTION

### **Metin Bakkalcı<sup>2</sup>**

Although prohibition of torture, just like the prohibition of slavery, is one of the most distinctive features of the development of humanity, today torture continues to be used by the modern state power as an inhumane punishment/ deterrence method.

The data obtained from international human rights organisations brings into sharp relief the fact that torture is inflicted not only in military dictatorships and authoritarian regimes, but also in “democratic” countries and it may also result in deaths.

Especially after 9/11, in countries all over the world including Turkey, the attitudes and policies legitimizing and expanding torture and protection of torturers on the grounds of “combating terrorism” have become more acceptable.

“The World Public Opinion on Torture”, conducted by the University of Maryland and presented on 24 June 2008, displays a very worrying trend, even when only comparing the years 2006-2008.

“Four countries included in both surveys show dramatic increases in support for allowing the torture of terrorists: India (from 32% to 59%), Nigeria (39% to 54%), Turkey (24% to 51%), and South Korea (31% to 51%). Substantial increases also occurred in Egypt (25% to 46%) and the United States (36% to 44%).”<sup>3</sup>

While the scientific quality of this study has not been evaluated by us yet, the results confirm an extremely dangerous course of events which we have become concerned about.

The year 2007, which started with murder of our beloved friend Hrant Dink, has been a special year in that very important incidents compose what, in many aspects, can be considered a turning point for Turkey in the future course occupied the political, social and human rights agenda in Turkey. Worrying political and social developments that have recently become more intense have been causing, on the

<sup>2</sup> M.D, HRFT Treatment and Rehabilitation Centres Coordinator

<sup>3</sup> [www.worldpublicopinion.org](http://www.worldpublicopinion.org) p.3

one hand, serious human rights breaches, mainly right to life, prohibition of torture, freedoms of thought and expression, and, on the other hand, a serious erosion in the sensitivity to human rights. The authoritarian, discriminative and racist mentality that dominates large official and civilian sectors of Turkish society has become a destructive threat against everyone, from political opposition parties to civil society organisations, from scientists to human rights defenders; in brief, against our whole democratic life.

As a reflection of this atmosphere, there has been an increasing brutality in the attitude and behaviour of the security forces, especially after the amendment of the Duties and Authorities of the Police Law which was enforced in June, 2007. This situation, which translates into a worrying increase in torture and ill-treatment cases, is naturally reflected in the increased work load of the Human Rights Foundation of Turkey's Treatment and Rehabilitation Centres.

As a matter of fact, in 2007, there has been a dramatic increase in the number of applicants to the HRFT's centres in five cities (Adana, Ankara, Diyarbakır, İstanbul, İzmir) who claim to have been subjected to torture, and an increase in the number of applicants who were subjected to torture within the same year of application.

In 2006, the number of applicants to the HRFT who stated that they were subjected to torture was 337, whereas in 2007, it was 452.

Beyond the increase in number of applicants, the number and proportion of applicants who were subjected to torture within the same year of application has also increased. In 2006, the number of applicants who were subjected to torture was 222 (65%), whereas in 2007, it was 317 (70%).

In addition to the numerical increase in the annual number of applicants, it is observed that torture and ill-treatment has become more brutal and out-of-control compared to previous years.

This situation is displayed in the prevalence of our finding, that we highlighted in our previous reports, which claims: "In the light of ascertainment on national and international situation, torture is prevailing; rise and falls may occur in its intensiveness in the upcoming period, and it is possible to say that it may be intensively inflicted when needed by the authorities".

Moreover, the "zero tolerance to torture" discourse of the governmental authorities for prevention of torture has not become a real will, despite positive legal amendments in the 1999-2005 period; yet the process reversed, and the tendency of legal, administrative and practical impunity of torture has become an important factor in the prevalence of torture. In other words, instead of "zero tolerance to torture", the reality has become "tolerance to torture".

On the other hand, we have detected that due to the 12 September period and the following conflict climate; approximately one million people were subjected to torture and ill-treatment. We believe it is our moral responsibility as human rights

and democracy defenders to intervene in this situation, which we define as a threat to the health of society, and to fulfil a transformative function.

In the light of such an approach, the Human Rights Foundation of Turkey (HRFT) was established in 1990 in order to provide physical and psychological treatment and rehabilitation services to those who have been subjected to torture, and other cruel, inhumane, degrading treatment and punishments and to document human rights breaches.

HRFT still continues its work of treatment and rehabilitation for torture survivors in five treatment and rehabilitation centres in Adana, Ankara, Diyarbakır, İstanbul and İzmir. At the five existing treatment and rehabilitation centres, a total of 11,238 torture survivors and their relatives were served in the years preceding 2008.

To solve physical, psychological and social problems of the applicants to our Foundation, hundreds of health workers, either professional or volunteer, serve as multidisciplinary teams.

In addition to providing treatment services, the treatment project includes conducting training, scientific research, and scientific activities in order to increase the quality of these services. In this frame, we have organized and participated in many national and international meetings.

In parallel to treatment and rehabilitation activities, the HRFT has carried out the following activities:

- The problem of torture, its prevalence, the traumas that torture survivors go through, and the importance of prevention of torture as a human rights issue have been brought to the agenda of the public opinion.
  - Human rights breaches have been regularly monitored; documented and annual human rights reports have been published. The issues monitored by the HRFT in the scope of human rights include, in addition to torture: extrajudicial killings, disappearances in detention, abductions, displacements, refugee issue, freedom of expression and all sorts of discrimination.
  - Several training courses and scientific conferences on torture and human rights violations have been organized, some of which are mentioned below, and we have participated in many programmes.
- In the scope of the Istanbul Protocol trainings, which is the first international document of effective investigation and documentation of torture, organized by HRFT in collaboration with the Turkish Medical Association and the Society of Forensic Medicine Specialists, the "Training of Trainers" was organized on the 19th through 21st of January, 2007 in Istanbul. The Istanbul Protocol (IP) Training of Trainers modules and materials developed for this training have been the first of their kind in the world, beyond Turkey. On the other hand, this programme has been a basis for both preparing the training materials and formation of a pool of trainers for the IP trainings in Turkey for 5,500 physicians, prosecutors and judges.

- The HRFT assumed the responsibility of coordinating the training committee of the Istanbul Protocol training project which has been carried out in cooperation with the IRCT from 2006 to 2008 in 10 countries (in addition to Morocco, Georgia, Mexico, Sri Lanka and Uganda, which were in the first project, including Ecuador, the Philippines, Kenya, Egypt, Serbia).

- The 5th International Psychological Trauma Symposium was organized in Istanbul on 7-9 December 2007, the organisation of which we assumed together with the Kocaeli University Faculty of Medicine; the Istanbul University Faculty of Medicine; the Psychiatric Association of Turkey; the Norwegian Medical Association; and the Turkish Medical Association.

Its main theme being "Digging up the Wounds, Healing the Wounds", the symposium covered the individual, social, national and international dimensions of psychological trauma and its recovery through organising, cooperation and clinical intervention. More than 240 participants from over 25 countries where psychological trauma is experienced came together; participants came from countries stretching from Australia to Canada and from South Africa to Peru in order to share their observations and experiences during 14 plenaries, 4 conferences, 9 workshops and 1 forum.

-The "Psychotherapeutic Training Programme", started in cooperation with the "Süddeutsche Akademie für Psychotherapie" in 2006, which includes an orientation seminar and training programme for the psychiatrists and psychologists working in or supporting the HRFT from outside, was continued in 2007.

- Regarding the asylum/ refugee question which has been on our agenda for a while, relations have been developed with the United Nations High Commissioner for Refugees (UNHCR) in the frame of concrete programmes. On 30-31 October and 29-30 November 2007, two training programmes were organized. These programmes aimed at referring tortured asylum seekers to the HRFT and covered interview techniques for the interviewers at the UNHCR. Additionally, a "care for caregivers" supervision programme for the UNHCR interviewers has been initiated. Negotiations for broader and more effective activities on this issue are continuing.

- We have been effectively participating in the activities of some initiatives oriented towards treatment and rehabilitation of torture survivors and some refugees, especially in various European countries. In this framework, the most recent meeting of the European Network was organized in Turkey on 19-21 April 2007.

- Several scientific activities have been carried out regarding the detection of torture and improving the quality of ongoing work.
- Research on "Measuring Life Quality" of our applicants, which started in 2003, was accomplished in 2007 thanks to it being a thesis subject of one of our colleagues. There is a plan to evaluate the results of this study and apply them in all of our centres.

- We have completed a “Medical Atlas of Torture” for physicians/ medical workers; a project on which we had been working for a while. An atlas on this issue was on the agenda for a long time. We are proud to say that an atlas of this size and content is the first of its kind in the world.
- Again in this period, we translated the United Nations Manual on the Effective Prevention and Investigation of Extra-Legal, Arbitrary and Summary Executions – or, the Minnesota Protocol, into Turkish and published for the first time.
- 2 scientific studies on our applicants were presented in International Myopain Congress in the USA on 19-23 August 2007, and it had important repercussions.
- Alternative medical reports were developed through the physical and psychological monitoring of torture survivors. These reports were accepted at the European Court of Human Rights and national courts of appeal.
- We have worked on recovering the damage caused by isolation in prisons and we have brought the issue to the agenda of public opinion. A joint text was prepared on the isolation issue during the 5th International Psychological Trauma Symposium by the UN Special Rapporteur on Torture and many other experts to be opened for discussion by relevant UN bodies.
- “Health as a Bridge for Peace”: Perspective for the Middle East, which has been on our agenda for a while, has gained acceptance by persons and institutions that we are in contact with, especially in the Middle East. A joint study has been initiated, and the first meeting of his study will be held in Turkey with participation of IFHHRO and the Norwegian Medical Association, which are willing to cooperate with us on this issue.

The “Project to raise awareness and promote ratification of “the Optional Protocol to the United Nations Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment” in Turkey”, which we believe will make considerable contributions in the prevention of torture, and the project named “Review of legislation on torture and implementation of it during EU harmonization process in Turkey and training, providing legal service and raising public awareness in order to prevent torture in Turkey” have been conducted in this period.

HRFT has collected concrete data on the pervasiveness of torture, detention practices, torture methods, legal practices and prison conditions throughout several years of quantitative and statistical evaluation of the data collected during treatment and rehabilitation activities and gained a substantial accumulation on physical and psychological disorders caused by torture. These studies make imperative contributions in the endeavours for abolition of torture and problems caused by torture.

This report, which aims at making an updated evaluation of the work of the Human Rights Foundation of Turkey Treatment and Rehabilitation Centres, is also prepared in order to better understand the problems at hand in Turkey.

In Turkey, a serious and qualified struggle against torture, appreciated by the whole world, has been carried out. The work of the HRFT is a product of hundreds of sensitive human rights defenders and health workers in various cities of the world who work for a common objective. In this struggle, there are important contributions and efforts of many persons and institutions from different sections of society, fields of thought and expertise; most of them part of the human rights movement.

Of course, the biggest share of the struggle is carried by those who can say “I was tortured!” despite all the inhumane treatment that they have been through.

It is for this reason that, despite everything, we are able to be hopeful about the future and say “we are not alone; we work together for a world without torture”.

We would like to extend our gratitude to all of our friends who contributed to this work and stood in solidarity with us and all relevant institutions which have supported our work from the beginning, mainly the Human Rights Association and the Turkish Medical Association.

Ankara, July 2008



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**HRFT**  
**Treatment and Rehabilitation**  
**Centres Report**

**2007**  
***Evaluation Results***

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## **EVALUATION RESULTS OF THE HRFT TREATMENT AND REHABILITATION CENTRES FOR THE YEAR 2007<sup>1</sup>**

452 people applied to the Treatment and Rehabilitation Centres of the Human Rights Foundation of Turkey in 2007. 14 of these applicants were acquaintances or relatives of torture survivors. The following evaluation presents information obtained from interviews and medical examinations of 438 applicants who stated that they had been subjected to torture and ill-treatment.

### **METHODOLOGY**

The data used in our evaluation has been obtained by physicians, social service experts, and consultant physicians working at the HRFT Treatment and Rehabilitation Centres, through interviews, medical examinations and other diagnostic procedures.

After being collected in application files and forms designed for data preservation, the data was then entered into a specially-developed computer programme called "Human Rights Foundation of Turkey Applicant Recording". The evaluations were analysed by transferring data gathered in this programme to data processing and statistical programmes.

The data was evaluated in two major parts. In the first part, the data obtained from 435 of 438 applicants was examined (3 applications were excluded due to missing information in their folders, or such reasons), while in the second part, the information obtained from 310 of 317 applicants, who stated that they were subjected to torture and ill-treatment in detention in 2007, was examined (7 applicants who were subjected to torture for the last time at a prison are excluded). A comparative analysis of the data on the applicants who were tortured in the said year will concretely contribute to evaluation of the developments in our country.

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<sup>1</sup> This report is prepared based on the data obtained from the HRFT Treatment and Rehabilitation Centres. Since its establishment, HRFT has always stated that the number of people who have applied to our centres and the total number of those subjected to *torture and other cruel, inhuman, degrading treatment or punishment* in Turkey can not necessarily be directly related. However, this does not change the fact that the annual statistical distribution of the HRFT applicants, who have been subjected to torture and other *cruel, inhuman, degrading treatment or punishment*, is significant as data.

Within this evaluation in two parts, the first chapter examines the social and demographic characteristics of the applicants, the second chapter analyses the results obtained from the narratives about torture and ill-treatment, while the third chapter evaluates the medical processes of the applicants. The last chapter of the first part presents the results of the treatment and rehabilitation activities carried out for the applicants in 2007.

Before 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 centres and months in which the applications were made, the number and distribution of applicants stating that they have been subjected to torture and ill-treatment in detention in 2007 and the channels of contact which directed the applicants to the HRFT.

### Number and Distribution of the Applicants

438 people applied to the Human Rights Foundation of Turkey Treatment and Rehabilitation Centres within 2007 stating that they had been subjected to torture and ill-treatment. Additionally, 14 people applied as relatives of torture survivors and asked to receive treatment. These people were excluded from evaluation. The distribution of the applicants in the year 2007 according to the centres of the Foundation is presented in Table 1.

**Table 1. The distribution of the applicants in 2007 according to the HRFT Treatment and Rehabilitation Centres**

HRFT Centre	Number of torture Survivors	Number of Relatives of Torture Survivors	Total Number of Applicants
Adana	114	3	117
Ankara	35	0	35
Diyarbakır	35	1	36
İstanbul	185	0	185
İzmir	69	10	79
<b>Total</b>	<b>438</b>	<b>14</b>	<b>452</b>

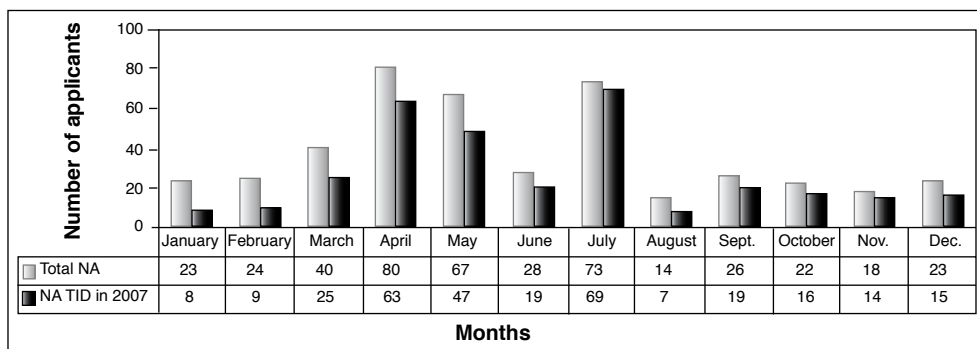
Among 438 applicants, 310 people stated that they had been subjected to torture and ill-treatment in detention during 2007. 193 applicants were subjected to torture and ill-treatment in 2005, and 222 applicants in 2006. It is observed that the number of applicants who were tortured within the same year as their application is increasing. The distribution of these applicants according to the HRFT centres is given in Table 2.

The distribution of the applicants to our Treatment and Rehabilitation Centres according to months is presented in Graphic 1. It is observed that the number of applicants to the HRFT Treatment and Rehabilitation Centres was higher in the first half of the year than the second half of the year, just as it was last year.

**Table 2. The distribution of applicants who stated that they been subjected to torture and ill-treatment in detention in 2007 according to the HRFT Treatment and Rehabilitation Centres, and their proportion to all applicants**

HRFT Centre	Number of Torture Survivors applied in 2007	Total Number of Applicants	Proportion to all Applicants
Adana	82	114	71,93
Ankara	24	35	68,57
Diyarbakır	6	35	17,14
İstanbul	151	185	81,62
İzmir	47	69	68,12
<b>Total</b>	<b>310</b>	<b>438</b>	<b>70,78</b>

**Graphic 1. The distribution of the applicants in 2007 according to months**



Regarding the people and institutions which referred applicants to the HRFT, it is observed that the number of applicants who were referred to the HRFT by democratic organisations and parties outnumber the rest. They are followed by those who applied without any referral, and those who were referred by the previous HRFT applicants and the Human Rights Association. 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 2007.

## I- EVALUATION RESULTS OF ALL APPLICANTS

### A- SOCIAL AND DEMOGRAPHIC CHARACTERISTICS

#### 1 - Age and Sex:

The age of the applicants ranged from 8 to 64 years of age. The average age was 28,6. The number of applicants at the age of 18 or under was 41 (9,4%). Of these 41 applicants, 40 applied to HRFT for being tortured in 2007. Compared to the previous two years, it is observed that the number of applicants younger than 18 years of

age is increasing: in 2005, the number of applicants between 0-18 years old was 13 (1,9%), and in 2006 the number was 24 (7,2%). The distribution of the applicants according to their ages is given in Table 4.

**Table 3. The distribution of the information channels on the HRFT for all applicants and for those applicants who were subjected to torture and ill-treatment in detention in the year 2007**

Information Channels	All Applicants	%	TiD in 2007	%
Democratic Organizations or Parties	117	25,8	86	27,8
Directly	95	21,0	67	21,6
Recommendations of Other HRFT Applicants	93	20,5	49	15,8
The Human Rights Association	81	17,9	67	21,6
Advocates	38	8,4	27	8,7
Recommendations of the HRFT Personnel	13	2,8	7	2,3
Press	9	1,9	6	1,9
Recommendations of the HRFT Volunteers	6	1,3	1	0,3
<b>Total</b>	<b>452</b>	<b>100,0</b>	<b>310</b>	<b>100,0</b>

**Table 4. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to their ages**

Age Group	Number of Applicants	%
0-18	41	9,4
19-25	148	34,0
26-30	113	26,0
31-35	47	10,8
36-40	35	8,0
41-45	21	4,8
46 and above	30	6,9
<b>Total</b>	<b>435</b>	<b>100,0</b>

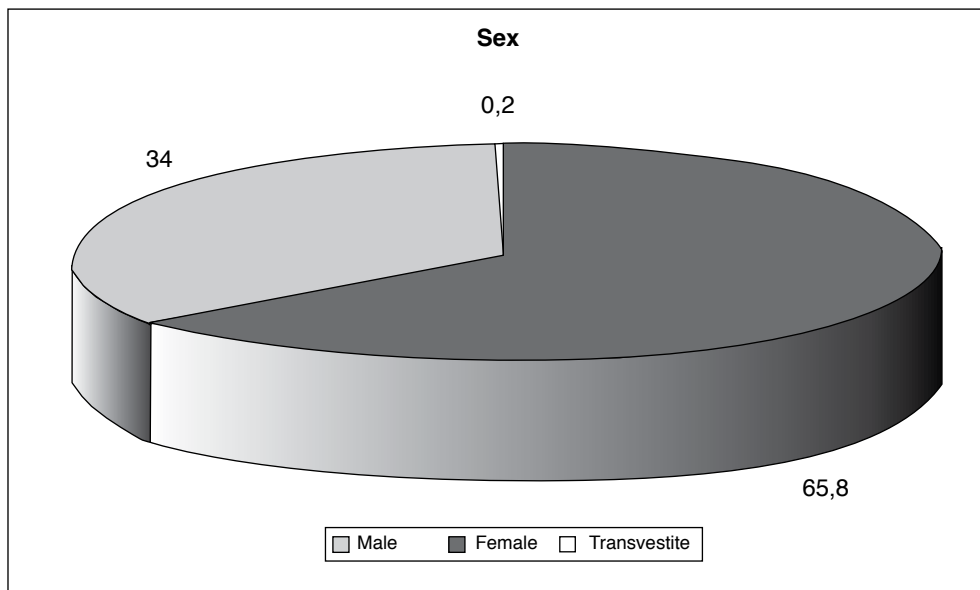
286 of the applicants are male (65,7%), 148 are women (34%) and 1 is transvestite (0,2%) (Graphic 2).

## 2- Place of Birth

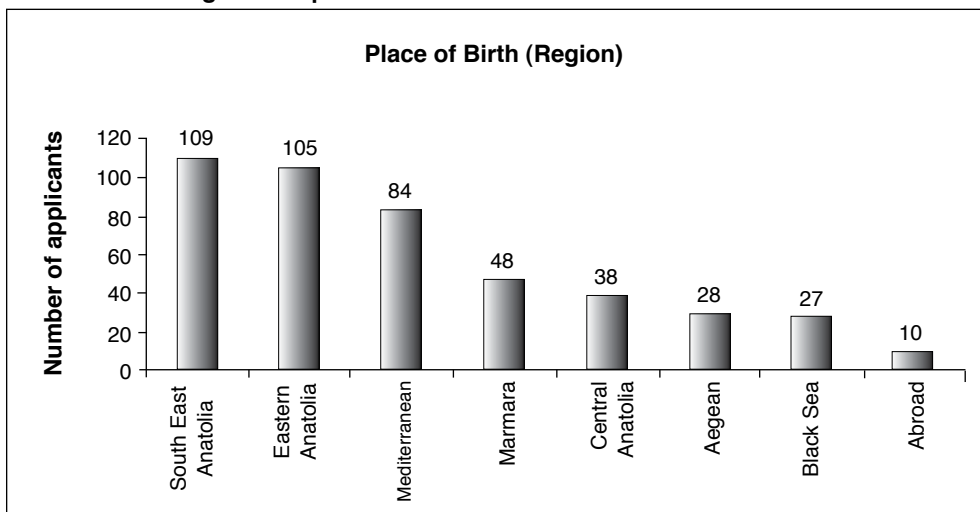
It is observed that approximately 1/4th of the applicants were born in the South-Eastern Anatolian Region, while those who were born in Eastern Anatolia and in the Mediterranean were the second and third most frequent applicants, respectively. The applicants born in Eastern and South-Eastern Anatolia compose 47,7% of all applicants. The applicants born in the Mediterranean composed 18, 7%, in Marmara

Region 10.7%, in Central Anatolian 8,5%, in Aegean 6,2%, in Black Sea 6% and those born abroad composed 2,2% of the applicants. The distribution of all applicants according to their place of birth is given in the Graphic 3.

**Graphic 2. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to their sex**



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



Regarding the birth places at the provincial level, Diyarbakır was first in 2006 with the highest number of applicants (48) born there, while İstanbul was first in 2007 with 37 applicants born there. This can be substantiated by the high number of applicants to our İstanbul Representative. In addition to this situation, at the provincial level, the aggregation in the South Eastern and Eastern Anatolia can be substantiated by the numerous applicants from several provinces of these regions.

Other provinces with a high number of applicants in this list are; Tunceli with 35 applicants, Adana with 33, Mardin with 29, Hatay with 25, Diyarbakır with 20, İzmir with 19, Siirt with 17 and Gaziantep with 16.

### 3- Educational Background and Employment Status

248 of the applicants in 2007 (57%) were elementary or high school graduates, 100 of them were (25,3%) primary school graduates or literate, and 63 of them (14,5%) were university graduates or have dropped out of university. 14 of the applicants (3,2%) were illiterate. A more detailed distribution of the educational background of the applicants is given in Table 5.

**Table 5. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to their educational level**

<b>Educational Level</b>	<b>Number of Applicants</b>	<b>%</b>
High School	171	39,3
Primary School	93	21,4
Elementary School	77	17,7
University- drop out	32	7,4
University- Graduate	31	7,1
Literate	17	3,9
Illiterate	14	3,2
<b>Total</b>	<b>435</b>	<b>100,0</b>

When analysing the employment status of the applicants, it is observed that 174 applicants (40%) were unemployed during the interview. 84 applicants (19,3%) were university students, and 24 applicants (5,5%) were primary or elementary school students. Among the applicants, there were 17 (3,9%) press members in 2007, while there were 3 (0,9%) last year.

The employment status of the applicants is presented in more detail in Table 6.

### B- PROCESS OF TORTURE

The number of applicants to the HRFT in 2007, for torture and ill-treatment, who are included in this evaluation is 435. Looking at the date of their most recent torture, 310 applicants were tortured in 2007, 80 applicants between 2001 and 2006, 11 applicants between 1996 and 2000, and 16 applicants before 1995 (Graphic 4). The distribution of the date of the most recent torture according to years is given in Table 7.

**Table 6. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2007 according to their employment/ profession**

<b>Profession or Employment</b>	<b>Number of Applicants</b>	<b>%</b>
Unemployed	174	40,0
University Student	84	19,3
Industrial worker in the private sector	27	6,2
Student of primary or secondary schools	24	5,5
Housewife	24	5,5
Employed in an NGO	20	4,6
Tradesmen (working in a shop or office of their own)	19	4,4
Journalist/ media sector	17	3,9
Office worker in the private sector (Secretary, Bank Clerk etc.)	11	2,5
Construction worker	9	2,1
Artist	6	1,4
Retired	5	1,1
Peddler	4	0,9
Attorney	3	0,7
Office worker in the Public Sector (Secretary, Bank Clerk etc.)	2	0,5
Teacher	2	0,5
Worker in Agriculture sector	2	0,5
Farmer, fisher etc...	1	0,2
Nurse	1	0,2
<b>Total</b>	<b>435</b>	<b>100,0</b>

This evaluation is conducted regarding 417 applicants - of 435 applicants, 18 of them who were not subjected to torture during their most recent detention period were excluded.

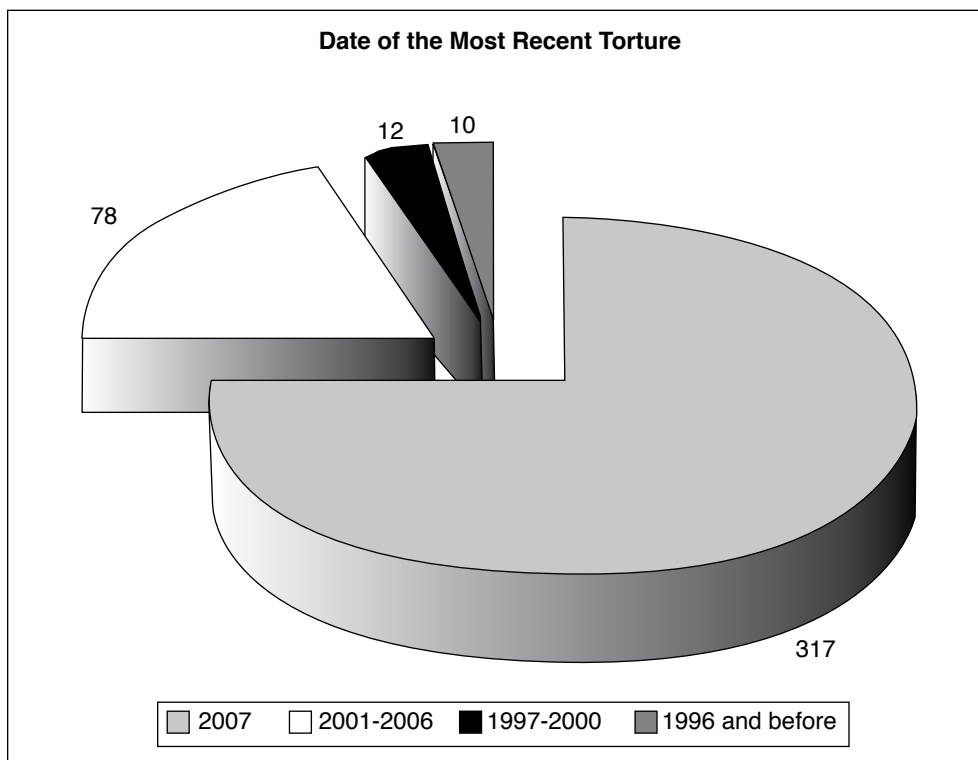
Of the 317 applicants who were tortured during the period of their most recent detention, 7 people, who experienced the most recent torture in prison, are excluded. The data obtained from the remaining 310 applicants are analysed in the second part.

### **1- Process of Detention and Torture in Detention**

Of 435 applicants in 2007, 374 (86%) stated that they had been tortured for political reasons, 60 (13.8%) for non-political reasons and 1 (0,2%) for asylum. The proportion of those detained due to non-political reasons has increased compared to previous years (8,6 % in 2004, 5,2% in 2005, 11,7% in 2006). According to reports published by human rights organisations, a large number of people who were detained due to non-political reasons were subjected to torture before they were released and were threatened not to apply to human rights organizations and judicial authorities. This leads us to believe that the number of actual applicants is much lower than the real number of torture survivors.



**Graphic 4. The distribution of the applicants in the year 2007 according to the period when they were last tortured**



**Table 7. The distribution of the applicants in the year 2007 according to the most recent year of torture**

Year of the Most Recent Torture	Number of Applicants
1996 and before	10
1997	2
1998	3
1999	1
2000	6
2001	1
2002	6
2003	4
2004	6
2005	9
2006	52
2007	317
<b>Total</b>	<b>417</b>

Regarding the duration of the most recent detention period of the applicants, 241 applicants (55,4%) were detained for less than 24 hours, 105 applicants (24,1%) for 2 days, 37 applicants (8,5%) for 3 days, 16 applicants (3,7%) for 4 days, 12 applicants (2,8%) for more than 1 month, 9 applicants (2,1%) between 16-30 days, 9 applicants (2,1%) between 5-7 days, 6 applicants (1,4%) between 8-15 days.

As it can be more clearly seen in the second section, where the data on the applicants who were tortured in 2007 is evaluated, that there is a significant decrease in the detention periods. However, it is evident that this development still does not forward the implementation of the clause in the European Convention on Human Rights under Article 5/3, which states that one should be brought before the competent legal authority immediately. Moreover, the ongoing practice of unregistered short detention periods continues to be an underlying reason for the insufficiency of improvements in detention practices which prevent torture.

The distribution of the duration of the most recent detention period is given in the Table 8.

**Table 8. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the duration of their most recent detention**

Duration of the most recent detention	Number of applicants	%
Less than 24 hours	241	55,4
24-48 hours	105	24,1
49-72 hours	37	8,5
73-96 hours	16	3,7
5-7 days	9	2,1
8-15 days	6	1,4
16-30 days	9	2,1
More than 1 month	12	2,8
<b>Total</b>	<b>435</b>	<b>100,0</b>

As regards the place from which the applicants were detained, it appears that 327 applicants (75,2%) were detained when outdoors, while 64 applicants (14,7%) were detained at home. Detaining people when they are outdoors constitutes a great risk resulting in arbitrary and unrecorded detentions.

The distribution of applicants according to the place of their most recent arrest is presented in Table 9.

Regarding the distribution of the place of torture most recently experienced by the torture survivors, 175 applicants (40,2%) were tortured at security directorates, 105 applicants (24,1%) outdoors, and 71 applicants (16,3%) at the police stations.

**Table 9. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the place of their most recent arrest**

Place of the most recent arrest	Number of Applicants	%
Outdoors	327	75,2
Home	64	14,7
Public Office	17	3,9
Work Place	9	2,1
Other	8	1,8
Organisation (NGO office, press office, etc)	8	1,8
Not Known	2	0,5
<b>Total</b>	<b>435</b>	<b>100,0</b>

Table 10 shows the distribution of the hours when that the applicants were detained.

**Table 10. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the hour of their most recent detention**

Hour of the most recent detention	Number of Applicants	%
08:00-18:00	275	63,2
18:00-24:00	120	27,6
24:00-08:00	38	8,7
Not Known	2	0,5
<b>Total</b>	<b>435</b>	<b>100,0</b>

The distribution of the applicants according to the place of torture is given in Table 11.

**Table 11. The distributions of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the place of their most recent torture in detention**

Place of the Most Recent Torture in Detention	Number of Applicants	%
Security directorate	175	40,2
Outdoors	105	24,1
Police Station	71	16,3
Gendarmerie headquarters	20	4,6
Car	15	3,4
Home	14	3,2
Gendarmerie Station	9	2,1
Not known/not remembered	4	0,9
Other	4	0,9
Empty*	18	4,1
<b>Total</b>	<b>435</b>	<b>100,0</b>

*\*People who were not subjected to torture during their most recent detention but applied on the basis of torture experienced in former detention periods or in prison*

As regards the regional distribution of the place of the most recent torture, it appears that the Marmara Region comes the first, followed by the Mediterranean and the Central Anatolian Regions (Table 12).

**Table 12. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the region of their most recent torture in detention**

Region of the Most Recent Torture	Number of Applicants	%
Marmara	158	36,3
Mediterranean	83	19,1
Central Anatolia	77	17,7
Aegean	45	10,3
South-Eastern Anatolia	32	7,4
Eastern Anatolia	12	2,8
Abroad	8	1,8
Black Sea	2	0,5
Empty*	18	4,2
<b>Total</b>	<b>435</b>	<b>100,0</b>

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

The distribution of the applicants according to the provinces is presented in Table 13.

**Table 13. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2007 according to the province of their most recent torture in detention**

Province of the Most Recent Torture	Number of Applicants	%
İstanbul	152	34,9
Ankara	75	17,2
Adana	68	15,6
İzmir	44	10,1
Diyarbakır	14	3,2
Mersin	12	2,8
Abroad	8	1,8
Şırnak	5	1,1
Batman	4	0,9
Gaziantep	4	0,9
Şanlıurfa	4	0,9
Van	4	0,9
Hatay	3	0,7
Tunceli	3	0,7
Kocaeli	2	0,5
Tokat	2	0,5
Other	13	2,6
Empty*	18	4,2
<b>Total</b>	<b>435</b>	<b>100,0</b>

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

Looking at the centres in more detail, where the most recent torture is inflicted, it appears that the Anti-Terror Branch (ATB) in Adana draws attention with a large number of torture incidents, followed by Ankara Security Directorate, Ankara ATB, İstanbul Beyoğlu Police Station and İstanbul ATB.

Table 14 displays the centres of the most recent torture in which more than 3 cases occurred.

**Table 14. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the centres where the most recent torture took place**

The centre where the most recent torture took place	Number of Applicants	%
Adana ATB	29	6,7
Ankara Security Directorate	26	6,0
Ankara ATB	25	5,7
İstanbul Beyoğlu Police Station	16	3,7
İstanbul ATB	14	3,2
Tuzluca Police Station	9	2,1
İstanbul Security Directorate Security Branch	8	1,8
Diyarbakır ATB	7	1,6
İzmir Bozyaka ATB	6	1,4
Beşiktaş Security Directorate	4	0,9
Gaziantep ATB	4	0,9
İzmir Basmane Police Station	4	0,9
Eski İzmir Police Station	4	0,9
Kasımpaşa Police Station	4	0,9
Mersin ATB	4	0,9
Avclar Central Police Station	3	0,7
Cizre Security Directorate	3	0,7
Other Security Directorates and ATB	48	11,0
Other Police Stations	30	6,9
Other Gendarmerie Centres and JITEM	22	5,1
Other Gendarmerie Stations	6	1,4
Other	2	0,5
Not known/ not remembered	6	1,4
Not tortured at a centre*	133	30,6
Empty**	18	4,1
<b>Total</b>	<b>435</b>	<b>100,0</b>

\* Tortured outdoors, at home, in a car or another place.

\*\* People who were not subjected to torture during their most recent detention applied on the basis of torture experienced in prison or in former detention period.

The distribution of the torture methods inflicted on the applicants in their most recent detention is presented in Table 15. (This evaluation was carried out over the remaining 417 applicants, when 18 applicants who were not tortured during their most recent detention are excluded from 435 torture survivors.)

**Table 15. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the methods of torture inflicted during their most recent detention**

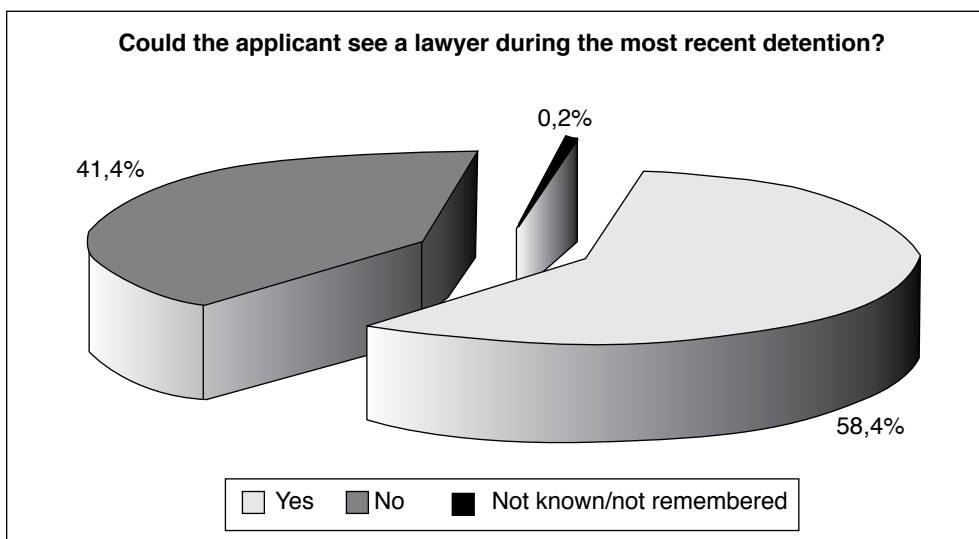
Method of Torture	Number of Applicants	%
Beating	360	86,3
Insulting	353	84,7
Humiliating	266	63,8
Other threats against him/her	188	45,1
Subjecting to chemicals	127	30,5
Forcing to obey nonsense orders	106	25,4
Restricting food and water	98	23,5
Sexual harassment	97	23,3
Death threat	95	22,8
Continuous hitting on one part of body	94	22,5
Forced to witness (visual/audio) torture of others	87	20,9
Restricted defecation and urination	83	19,9
Other positional torture methods	75	18,0
Restricted sleep	69	16,5
Forced extensive physical activity	68	16,3
Pulling out hair/moustache/beard	66	15,8
Stripping naked	65	15,6
Threats against relatives	61	14,6
Forced to wait on cold floor	61	14,6
Cell isolation	57	13,7
Blindfolding	41	9,8
Other	39	9,4
Torture in the presence of relatives/friends	37	8,9
Forced to listen to marches or high-volume music	29	7,0
Pressurized/cold water	27	6,5
Squeezing testicles	25	6,0
Suspending on a hanger	24	5,8
Electricity	23	5,5
Suffocation	21	5,0
Suspending or crucifying	15	3,6
Mock execution	11	2,6
Asked to act as an informer	9	2,2
Falanga	9	2,2
Strappado	8	1,9
Hanging upside down	6	1,4
Medical intervention by force	5	1,2
Rape	3	0,7
Burning	3	0,7
Hindering visits	1	0,2
<b>Total</b>	<b>2812</b>	<b>6,7*</b>

\* Average number of torture methods one person is subjected to

## 2- Legal Procedures During and After Detention:

254 of all applicants in 2007 (58,4%) stated that they were able to see a legal representative during their most recent detention. (Graphic 5).

**Graphic 5. The ratio of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 regarding interviews with lawyers**



The number of applicants who were released from their most recent detention without being taken before a prosecutor is 151 (34,7%). 148 applicants (34%) were released by a prosecutor or a court (Table 16).

**Table 16. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to their situation after the most recent detention**

Situation After the Most Recent Detention	Number of Applicants	%
Released without facing prosecutor	151	34,7
Released by prosecution office or court	148	34,0
Was arrested	135	31,0
Not known/not remembered	1	0,2
<b>Total</b>	<b>435</b>	<b>100,0</b>

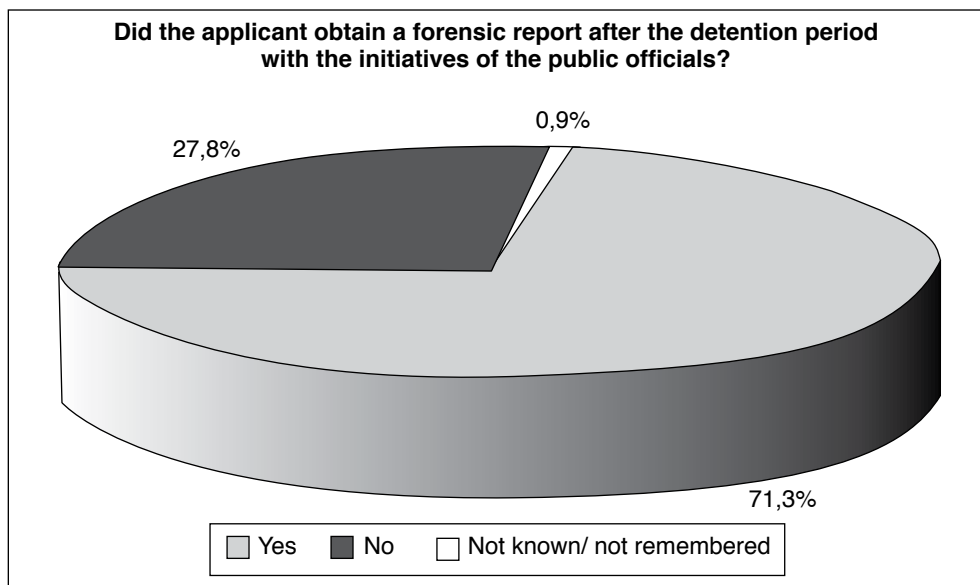
Regarding the legal process following the most recent detention period of the applicants, it is observed that only 34 lawsuits (7,8%) filed against the applicants resulted in conviction. There were no lawsuits filed against 144 applicants (33,1%) and the lawsuits filed against 167 applicants (38,4%) are going on (Table 17).

**Table 17. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to their trial processes after detention**

<b>Trial Process After Last Detention</b>	<b>Number of Applicants</b>	<b>%</b>
Trial in progress	167	38,4
Applicant was not tried	144	33,1
Whether a suit is filed or not is unknown	75	17,2
Applicant was tried and convicted	34	7,8
Applicant was tried and acquitted	10	2,3
Applicant was tried, result unknown	4	0,9
Nolle Prosequi	1	0,2
<b>Total</b>	<b>435</b>	<b>100,0</b>

The number of applicants who obtained a forensic report after the most recent detention, on the initiative of the officials is 310 (71,3%), whereas 121 applicants (27,8%) could not obtain a forensic report (Graphic 6).

**Graphic 6. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to whether they obtained a forensic report on the initiatives of public officials after the detention period or not**



Forensic examination of 168 applicants out of 310 applicants (54,2%) was carried out at the branches of Forensic Medicine Institutions, while 113 applicants (36,5%) were examined at hospitals (Table 18). Moreover, 15 applicants stated that they obtained forensic reports on their own initiative.



**Table 18. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the place of forensic medical examination after the most recent detention**

Place Of Forensic Medical Examination After The Most Recent Detention	Number of Applicants	%
Branch of Forensic Medicine Institution	168	54,2
Hospital	113	36,5
Health Centre	14	4,5
Detention Place	7	2,3
Not known/not remembered	5	1,6
Forensic Medicine Institution	3	1,0
<b>Total</b>	<b>310</b>	<b>100,0</b>

In regards to the statements of 310 applicants who underwent forensic medical examination after detention about their evaluations of the forensic examination process, security forces were not taken out of the room during forensic examination of 99 applicants (31,9%). 131 applicants (42,3%) stated that the forensic physician did not listen to their complaints, 176 (56,8%) stated that the forensic physician did not take note of their complaints, 192 (61,9%) stated that the forensic physician did not examine as s/he ought to and 162 stated that (52,3%) the forensic physician did not prepare a medical report in accordance with the findings (Table 19).

**Table 19. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the evaluations regarding the forensic examination after detention**

Evaluations Regarding Forensic Examination	Yes	%	No	%	Not known /not remembered	%	Total	%
Were the security forces taken out of the room during the forensic medical examination?	210	67,7	99	31,9	1	0,3	310	100,0
Did the forensic physician listen to their complaints?	178	57,4	131	42,3	1	0,3	310	100,0
Did the forensic physician take note of the complaints?	132	42,6	176	56,8	2	0,6	310	100,0
Did the forensic physician examine as s/he ought to?	117	37,7	192	61,9	1	0,3	310	100,0
Did the forensic physician write a report that was in accordance with the findings?	91	29,4	162	52,3	57	18,4	310	100,0

90 applicants (20,7%) stated during their interrogation by the court or prosecutor that s/he was tortured; and 66 applicants (15,2%) filed a complaint to the prosecutor with a separate petition. 273 applicants (62,8%) stated that they did not make any complaints about torture.

### 3- Imprisonment period

Among all applicants, the number of torture survivors who had been at a prison at some point is 188 (42,8%). 148 applicants (34%) had been at a prison after their most recent detention period. The length of stay at prison after the most recent detention period varies between 15 days and 228 months and the average duration is 23,5 months.

Total duration of the imprisonment period of the 186 applicants with a prison history is given in the table 20. According to this, 80 applicants in 2007 (similar to 2006), approximately ¼ of all applicants, were held in prison between 3-12 months. Almost 1 out of every 20 applicants with a prison history stayed in prison between 11- 25 years.

**Table 20. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the duration of their imprisonment**

Total duration of imprisonment	Number of Applicants	%
0-2 months	33	17,7
3-12 months	80	43,0
13-36 months	28	15,1
37-60 months	10	5,4
61-84 months	10	5,4
85-108 months	8	4,3
109-132 months	8	4,3
11-20 years	8	4,3
More than 20 years	1	0,5
<b>Total</b>	<b>186</b>	<b>100,0</b>

In regard to the time elapsed between the release of the 186 imprisoned applicants and their application to the HRFT, we see that 73 applicants (39,2%) applied within less than 1 month, 51 applied (27,4%) between 1-12 months, 58 applied (31,2%) after more than 1 year. 186 applicants (73,1%) were released from prison pending trial, 38 applicants (20,4%) were released as a result of the end of their imprisonment period (Table 21).

Of the applicants with a prison history, those who stayed at an F-Type prison carry special importance since they were subjected to isolation conditions. Of 186 applicants who has a prison history, 62 applicants stayed at an F-Type prison (33,3%). The imprisonment duration of these 62 applicants at an F-Type prison varied between 1- 77 months, with an average duration of 15 months. The number

**Table 21. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the reasons of release**

The Reason for Release from the Prison	Number of Applicants	%
Pending trial	136	73,1
End of the imprisonment duration	38	20,4
Acquittal	8	4,3
Amnesty / Conditional Release	4	2,2
<b>Total</b>	<b>186</b>	<b>100,0</b>

of applicants who stayed in a single cell at an F-Type prison is 30 (48,4%). The duration of imprisonment of these 30 applicants to a single cell varied between 1- 50 months, with an average of 7,8 months.

Moreover 17 applicants have had an isolation punishment for some reason during their imprisonment (9,1%) and the isolation period varied between 1- 240 days, with an average of 49,1 days.

15 of 186 applicants with an imprisonment history experienced a special security operation at prison. 14 of them (93.3%) experienced a prison operation against hunger strikes which took place at several prisons concurrently on 19 December 2000.

**Table 22. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007, according to the operation they experienced while in prison**

Prison Operations	Number of Applicants	%*
19 December 2000	14	93,3
Buca 1995	1	6,7
Burdur 1999	1	6,7
Diyarbakır 1996	1	6,7
Ümraniye 1996	1	6,7

\* The ratio of the applicants who experienced this prison operation to the total number of applicants who experienced a prison operation

Regarding the special traumas that 15 applicants went through during the prison operations, we see that 10 of them (66%) were subjected to chemical substances. 8 applicants were kept on a wet and cold floor for a long time, 7 of them were isolated in a cell, 5 of them were tortured in vehicles used for transportation of prisoners, 5 of them were stripped naked, 3 were wounded with a piece of shrapnel, 3 were trapped under rubble and 2 were burned (Table 23).

Among 186 applicants with a prison history, 131 applicants claimed to have been tortured at the prison. 5 applicants stated that, while in prison, they were taken to be interrogated again and 4 of these stated that they were tortured during this interrogation.

The distribution of the torture methods that 131 applicants experienced in prison are given in table 24.

**Table 23. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the traumas they experienced during the prison operations**

Traumas experienced during the Prison Operations	Number of Applicants	%
Subjection to chemical substances	10	66,7
Left on a cold and wet floor for a long period of time	8	53,3
Cell isolation	7	46,7
Tortured in vehicles used for transportation of prisoners	5	33,3
Stripped and kept naked	5	33,3
Wounded by bomb or shrapnel	3	20,0
Trapped under rubble	3	20,0
Burning	2	13,3
<b>Total</b>	<b>43</b>	<b>2,8*</b>

*\*15 people who experienced the prison operations have experienced more than one trauma; thus, the total number is greater than 15. Therefore the number 2,8 is not a percentage but is an average number of traumas that one person went through.*

**Table 24. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the methods of torture in prison**

Torture Method	Number of Applicants	%
Insulting	89	47,8
Beating	84	45,2
Humiliating	70	37,6
Hindering visits	59	31,7
Stripping naked	58	31,2
Cell Isolation	51	27,4
Forcing to obey nonsense orders	41	22,0
Other Threats against himself/ herself	37	19,9
Forced to wait on cold floor	36	19,4
Restricting food and drink	31	16,7
Death Threat	30	16,1
Forced excessive physical activity	22	11,8
Continuous hitting on one part of body	21	11,3
Sexual harassment	18	9,7
Restricted defecation and urination	17	9,1
Restricted sleep	17	9,1
Strangling	15	8,1
Forced to witness (visual/audio) torture of others	15	8,1
Pulling out hair/moustache/beard	10	5,4
Other	9	4,8
Threats against relatives	9	4,8
Rectal Inspection	8	4,3
Forced to wear uniform clothing	8	4,3
Other positional torture methods	7	3,8
Subjecting to chemicals	7	3,7

Forced to listen to marches or high-volume music	6	3,2
Pressurized / cold water	6	3,2
Blindfolding	5	2,7
Torturing in the presence of relatives/friends	5	2,7
Falanga	4	2,2
Electricity	3	1,6
Mock execution	3	1,6
Burning	2	1,1
Medical intervention by force	2	1,1
Asked to act as an informer	1	0,5
Suspension on a hunger	1	0,5
Squeezing testicles	1	0,5
<b>Total</b>	<b>1113</b>	<b>5,9*</b>

*\* Average number of torture methods one person is subjected to*

More than 2/3 of the applicants with a prison history were subjected to torture at prison. We observe that torture methods such as stripping naked, beating, insults, threats, which constitute violence against one's personal integrity, are still widely being inflicted on the persons deprived of their liberty in prison.

It has been stated that torture and ill-treatment practices to prisoners occur mostly during inquiries and searches, while going to a hospital or court, or to meet with their family or legal representatives.

The distribution of the answers of 186 applicants with a prison history to the questions about prison conditions are given in Table 25.

**Table 25. The distribution of the answers of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 about the prison conditions**

<b>Prison Conditions</b>	<b>Positive</b>	<b>Partly Positive</b>	<b>Negative</b>	<b>Total</b>
Accommodation	3	28	155	186
Nutrition	1	24	161	186
Hygiene	2	25	159	186
Air ventilation	4	27	155	186
Communication	6	22	158	186
Health Services	3	19	164	186
Conditions of Transfers	3	16	167	186
Access to publications/media	3	28	155	186

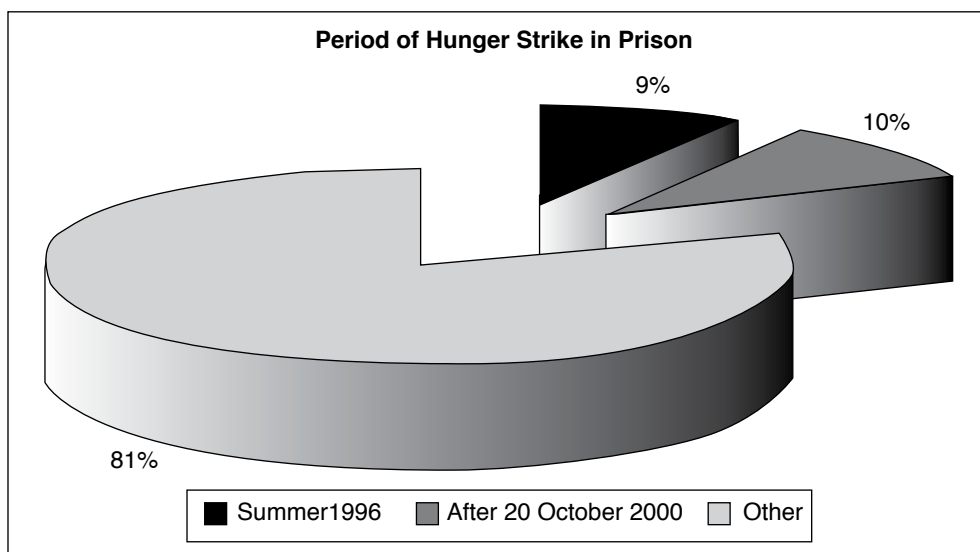
78 out of 186 applicants (36,0%) stated to have participated in a hunger strike in prison at various times and for various reasons. 65 applicants (83,3%) were on a hunger strike for between 0-50 days. The longest period of a hunger strike was 369 days, followed by 263 and 225 days.

**Table 26. The categorical distribution of the hunger strike durations of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007**

Duration of the Hunger Strike	Number of Applicants	%
0-50 days	65	83,3
51-100 days	10	12,8
101-150 days	-	-
151-200 days	-	-
201-250 days	1	1,3
251-300 days	1	1,3
More than 350 days	1	1,3
<b>Total</b>	<b>78</b>	<b>100,0</b>

8 applicants participated in the hunger strike which started after 20 October 2000 in F Type prisons and 7 applicants stated that they went on hunger strike during August 1996. 63 applicants were on hunger strike at various times (Graphic 7).

**Graphic 7. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the period of their hunger strike in prison**



## C- MEDICAL EVALUATION

This chapter contains information on the health condition of the applicants, which was obtained from the anamnesis, physical examination and other tests, conducted by physicians working at the HRFT Centres, together with consultant doctors (psychiatrists, psychiatrists, ophthalmologists, ENT experts, etc.).

In this chapter, the treatment process of 435 torture survivors who applied to the HRFT Treatment and Rehabilitation Centres is evaluated. This process can be best

understood by first describing the methodological approach of the HRFT. In the first interview, the applicant tells his/ her experiences of torture and his/ her complaints to the doctor in his/ her own words. Then the applicant is asked to tell about those complaints, which, in his/ her opinion, are connected with torture. Following this, the doctor asks for the necessary laboratory tests and consultations after an examination and evaluation. He/she expresses his opinion openly to the applicant. In the last stage, the anamnesis, examination and tests are evaluated altogether and the relation between the illness and torture is established. In this stage, it is important to evaluate the health of the applicant in a holistic way.

First, an effort is made to introduce the applicant to all the members of the treatment team during the application process of the torture survivors to the HRFT Treatment and Rehabilitation Centres. Those applicants who are not willing to see a psychiatrist are simply informed of their option to see a psychiatrist without any pressure.

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

During the process of establishing the relationship between diagnoses and torture, one of the following relations is selected for each of diagnoses:

- it is the single etiological factor;
- it worsened or made a pathological state apparent;
- it is one of the etiological factors;
- no relation;
- the relation could not be detected.

### **1- Medical Complaints of the Applicants:**

All of 435 applicants in 2007 have a psychological or physical problem. The total number of complaints is 3432.

Looking at the distribution of these applicants according to systems, it is observed that the number of psychological complaints is the greatest (32,3%)(Table 27).

The most common psychological complaint is "sleeping disorder" which is seen in more than ¼ of the applicants (120 applicants - 27,6%). The most common physical complaint is headache (120 applicants - 27,6%). The most common 10 physical and psychological complaints are given the Table 28 and Table 29.

**Table 27. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the type of physical or psychological complaints.**

<b>Systems</b>	<b>Number of Complaints</b>	<b>%</b>
Psychological	1110	32,3
Musculoskeletal	645	18,8
Dermatological	358	10,4
General	311	9,1
Neurological	249	7,3
Ear, Nose and Throat	162	4,7
Ophthalmologic	136	4,0
Digestive	133	3,9
Urogenital System	108	3,1
Respiratory	91	2,7
Oro-dental	62	1,8
Cardiovascular	54	1,6
Endocrinological	13	0,4
<b>Total</b>	<b>3432</b>	<b>100,0</b>

**Table 28. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the frequency of their physical complaints**

<b>10 Most Common Physical Complaints</b>	<b>Number of Complaints</b>	<b>% Among the Applicants</b>	<b>% Among the Physical Complaints</b>	<b>% Among all Complaints</b>
Headache	120	27,6	5,2	3,5
Discoloration of the skin	96	22,1	4,1	2,8
Low-back pain	88	20,2	3,8	2,6
General pain in the body	81	18,6	3,5	2,4
Fatigue, weakness	81	18,6	3,5	2,4
Visual impairment	60	13,8	2,6	1,7
Back pain	59	13,6	2,5	1,7
Panicula	59	13,6	2,5	1,7
Pain in the neck	57	13,1	2,5	1,7
Stomach ache	49	11,3	2,1	1,4
Pain in the shoulder	49	11,3	2,1	1,4
Other physical complaints	1523	-	65,6	44,4
<b>Total</b>	<b>2322</b>		<b>100,0</b>	<b>67,7</b>



**Table 29. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the frequency of their psychological complaints**

10 Most Common Psychological Complaints	Number of Complaints	% Among the Applicants	% Among the Psychological Complaints	% Among all Complaints
Sleeping disorders	120	27,6	10,8	3,5
Irritability	100	23,0	9,0	2,9
Concentration difficulties	89	20,5	8,0	2,6
Irritability from the police	85	19,5	7,7	2,5
Amnesia	85	19,5	7,7	2,5
Anxiety	78	17,9	7,0	2,3
Distress	71	16,3	6,4	2,1
Tension	65	14,9	5,9	1,9
Fear	60	13,8	5,4	1,7
Urge to cry	48	11,0	4,3	1,4
Other psychological complaints	309	71,0	27,8	9,0
<b>Total</b>	<b>1110</b>	<b>-</b>	<b>100,0</b>	<b>32,3</b>

**2- Findings of the physical examinations:**

The total number of physical findings obtained as a result of physical examinations is 1550. Looking at the distribution of them according to the systems, one can see clearly that the most common findings belong to the dermatological (34,3%) and musculoskeletal systems (Table 30).

**Table 30. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the physical findings of the medical examinations**

Systems	Number of Findings	%
Dermatological	531	34,3
Musculoskeletal	469	30,3
Oro-Dental	141	9,1
Ear, Nose and Throat	138	8,9
Ophthalmologic	102	6,6
Digestive System	75	4,8
Urogenital System	59	3,8
Cardiovascular System	15	1,0
Respiratory System	11	0,7
Neurological System	7	0,5
Endocrinological System	2	0,1
<b>Total</b>	<b>1550</b>	<b>100,0</b>

The most common physical findings are ecchymosis (38,4%) and pain and sensitivity in the muscles (32%). Most common 10 findings are given in the Table 31.

**Table 31. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to their physical findings**

10 Most Common Physical Findings and Other Findings	Number of Findings	% Among Applicants	% Among All Physical Findings
Ecchymosis	167	38,4	10,8
Muscular pain and sensitivity	139	32,0	9,0
Erosion	88	20,2	5,7
Pain and restriction of the movements of the neck	64	14,7	4,1
Scar tissue	59	13,6	3,8
Edema	58	13,3	3,7
Costovertebral sensitivity	44	10,1	2,8
Pain and restriction of the movements of the shoulder	43	9,9	2,8
Missing teeth	35	8,0	2,3
Crusted wound	34	7,8	2,2
Other physical findings	819	-	52,8
<b>Total</b>	<b>1550</b>	<b>-</b>	<b>100,0</b>

### 3- Psychiatric Symptoms and Findings:

134 of the applicants (30,8%) have seen a psychiatrist. A psychiatric symptom was diagnosed in 129 of the applicants during their interviews with a psychiatrist. Looking at the distribution of these findings and symptoms anxiety, concentration difficulties and sleeping problems are diagnosed in more than half of the applicants. Table 32 shows the psychiatric symptoms and findings diagnosed in 10 applicants or more, out of 134 applicants who had seen a psychiatrist.

### 4- Diagnoses:

The evaluation of the diagnoses of the applicants was carried out among 401 applicants who were diagnosed until the end of 2007. Regarding the 138 different diagnoses, it appears that soft tissue trauma was the most common among physical diagnoses (224 applicants, 55,9%); while post traumatic stress disorder was the most common among psychiatric diagnoses (27 applicants, 6,7%). Table 33 and 34 show the 10 most common physical and psychiatric diagnoses and their frequency among the 401 applicants.

**Table 32. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to their psychological symptoms and findings**

<b>Psychological Symptoms and Findings Observed in at Least 10 of the Applicants</b>	<b>Number of Symptoms and Findings</b>	<b>Percentage of Applicants who were examined by a psychiatrist %*</b>	<b>Percentage Among Psychiatric Symptoms and Findings %</b>
Anxiety	83	61,9	5,6
Concentration difficulties	77	57,5	5,2
Difficulties in falling or staying asleep	76	56,7	5,1
Fatigue/weakness	60	44,8	4,1
Memory impairment	58	43,3	3,9
Irritability and/or outburst of anger	57	42,5	3,9
Intense physiological distress at exposure to stimuli associated with the trauma	55	41,0	3,7
Increase or decrease in sleep duration	53	39,6	3,6
Somatic anxiety symptoms (palpitation, distress, sweating, vb.)	52	38,8	3,5
Intense psychological distress at exposure to stimuli associated with the trauma	52	38,8	3,5
Sense of detachment or estrangement from others	51	38,1	3,5
Recurrent and intrusive distressing recollections of the traumatic event	48	35,8	3,2
Recurrent and distressing dreams of the traumatic event	46	34,3	3,1
Depressive mood	45	33,6	3,0
Response of intense fear, helplessness or horror to the traumatic events experienced or witnessed	45	33,6	3,0
Efforts to avoid activities, places or people that arouse recollection of the trauma	43	32,1	2,9
Changes in appetite/weight (increase or decrease)	42	31,3	2,8
Sense of foreshortened future	40	29,9	2,7

Efforts to avoid thoughts, feelings or conversations associated with the trauma	36	26,9	2,4
Intense vigilance	34	25,4	2,3
Flashback experiences and acting or feeling as if the traumatic event were recurring	33	24,6	2,2
Exaggerated startle response	31	23,1	2,1
Markedly diminished interest or participation in significant events	31	23,1	2,1
Agitation (irritability, hyperactivity)	30	22,4	2,0
Absent mindedness	30	22,4	2,0
Apathy	28	20,9	1,9
Diminished psychomotor activity	26	19,4	1,8
Difficulties in decision making	25	18,7	1,7
Restricted range of affect (blunted affect)	24	17,9	1,6
Decrease in sexual interest	23	17,2	1,6
Dysphoric mood	23	17,2	1,6
Lack of self esteem	19	14,2	1,3
Other psychological findings	102	76,1	6,9
<b>Total</b>	<b>1478</b>		<b>100,0</b>

**Table 33. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to their physical diagnoses**

<b>10 Most Common Physical Diagnoses</b>	<b>Number of Applicants</b>	<b>%</b>
Soft tissue trauma	224	55,9
Myalgia	103	25,7
Cut or bruises on the skin	82	20,4
Myopi- hypermetropia	23	5,7
Periorbital ecchymosis	20	5,0
Anemia	19	4,7
Nasal Deviation	18	4,5
Pharyngitis	15	3,7
Sinusitis	15	3,7
Gastritis	13	3,2

**Table 34. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to their psychiatric diagnoses**

<b>10 Most Common Psychiatric Diagnoses</b>	<b>Number of Applicants</b>	<b>%</b>
PTSD (chronic)	27	6,7
Major depressive disorder, single episode	24	6,0
Generalized anxiety disorder	19	4,7
Acute stress disorder	18	4,5
PTSD (acute)	16	4,0
Adjustment disorder	11	2,7
Sleeping disorder	6	1,5
Other anxiety disorders	5	1,2
Subliminal, unspecified psychiatric symptoms	4	1,0
Obsessive compulsive disorder	4	1,0

No symptoms related to torture and trauma process were diagnosed in 36 (8,3%) of 435 applicants in 2007.

When the relation between the diagnosis and the torture process experienced by the applicant is examined, disregarding those diagnoses that were not found related to the trauma, it appears that in 63 % of all diagnoses found relevant to the trauma the torture period was regarded as the only etiological factor, in 14% of the cases it was regarded as one of the factors, while in 8 % of the cases it aggravated or inflamed the pathological situation.

## **D- TREATMENT AND REHABILITATION PROCESS**

In this chapter the treatment and rehabilitation services provided at the HRFT Treatment and Rehabilitation Centres and their results are evaluated.

### **1- Applied Treatment Methods**

As regards the treatment methods applied to a total number of 435 applicants, it appears that 315 applicants were prescribed medication (72,4%), 98 applicants (22,5%) were given psychopharmacotherapy; 62 applicants (14,3%) were given exercise programmes, 33 applicants (7,6%) received psychotherapy, while 14 applicants (3,2%) were treated surgically. The distribution of the treatment methods is presented in Table 35.

### **2- Results of the Treatment and Rehabilitation Applicants:**

The results of physical therapy treatment to the applicants to the HRFT Treatment and Rehabilitation Centres are given in the Table 36.

The results of the psychiatric treatment to the applicants to the HRFT Treatment and Rehabilitation Centres are given in the Table 37.

**Table 35. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in the year 2007 according to the treatment methods applied**

Applied Treatment Methods	Number of Applicants	%
Medication	315	72,4
Recommendations on daily life	162	37,2
Psychopharmacotherapy	98	22,5
Exercises	62	14,3
Psychotherapy	33	7,6
Surgical treatment	14	3,2
Eye glasses	10	2,3
Orthopaedic implements (Orthesis, crutches, sole support, etc.)	9	2,1
Dental treatment	5	1,1
Physical therapy	2	0,5
Other	1	0,2
<b>Total</b>	<b>711</b>	<b>1,6*</b>

\*The average number of treatment methods applied to one applicant.

**Table 36. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the results of physical treatment**

Results of the Physical Treatment	Number of Applicants	%
The treatment was completed	301	69,2
No disorder was detected related to torture or prison experience	47	10,8
The treatment was discontinued	32	7,4
The treatment was discontinued without a diagnosis	28	6,4
The treatment continues	20	4,6
The diagnostic stage continues	7	1,6
<b>Total</b>	<b>435</b>	<b>100,0</b>

**Table 37. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 according to the results of psychiatric treatment**

Results of the Psychiatric Treatment	Number of Applicants	%
No disorder was detected related to torture or prison experience	105	24,1
The treatment continues	42	9,7
The treatment was discontinued	36	8,3
The treatment was completed	36	8,3
The applicant refused psychiatric treatment	31	7,1
The applicant did not appear at the first appointment	12	2,8
The applicant did not want psychiatric treatment	6	1,4
The treatment was discontinued without diagnosis	4	0,9
The diagnostic stage continues	3	0,7
The psychological treatment of the applicant was undertaken by the physician working in the Centre	1	0,2
<b>Toplam</b>	<b>276</b>	<b>63,4</b>

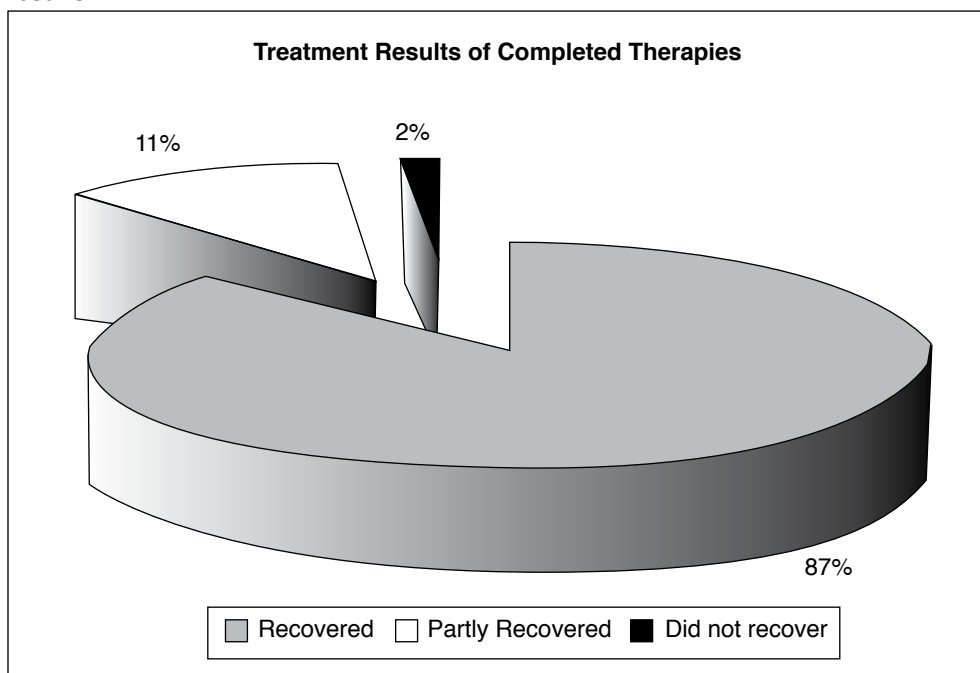
The course of the treatment and rehabilitation stages of all the applicants in 2007 until the end of the same year is presented in Table 38.

**Table 38. The results of the physical and psychiatric treatment stages of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007**

Progress of the Files	Number of Applicants	%
The treatment was completed	266	61,1
The treatment was discontinued	60	13,8
The treatment continues	52	12,0
The treatment was discontinued without diagnosis	27	6,2
No illness was detected in connection with torture or prison experience	24	5,5
The diagnostic stage continues	6	1,4
<b>Total</b>	<b>435</b>	<b>100,0</b>

232 of the 266 applicants, whose treatment was completed in 2007, recovered completely while 30 applicants recovered partly (Graphic 8).

**Graphic 8. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007, 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 2007

This section focuses on evaluating the social and demographic characteristics, the information obtained on the process of torture and the medical evaluations of 310 applicants to the HRFT in 2007 who stated that they had been subjected to torture in detention in 2007.

Information on when and where the applicants were subjected to torture most recently provides objective criteria in evaluating the claims that torture still continues to be inflicted systematically. The fact that 310 torture survivors applied to HRFT in 2007 for being subjected to torture indicates a continuous and gradual increase of this number. The number of applicants who were subjected to torture within the year of application to the HRFT was 222 in 2006, and 193 in 2005. These data confirm that torture is still a systematic practice.

### A- SOCIAL AND DEMOGRAPHIC CHARACTERISTICS

#### 1- Age and Sex

The ages of the applicants vary between 8 and 61. The average age of the applicants is 30,7. 40 applicants (12,9%) are 18 years old or younger. The distribution of the applicants according to their ages is presented in table 39.

**Table 39. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year, according to their ages**

Age Group	Number of Applicants	%
0-18	40	12,9
19-25	119	38,4
26-30	84	27,1
31-35	21	6,8
36-40	25	8,1
41-45	12	3,9
46 and over	9	2,9
<b>Total</b>	<b>310</b>	<b>100,0</b>

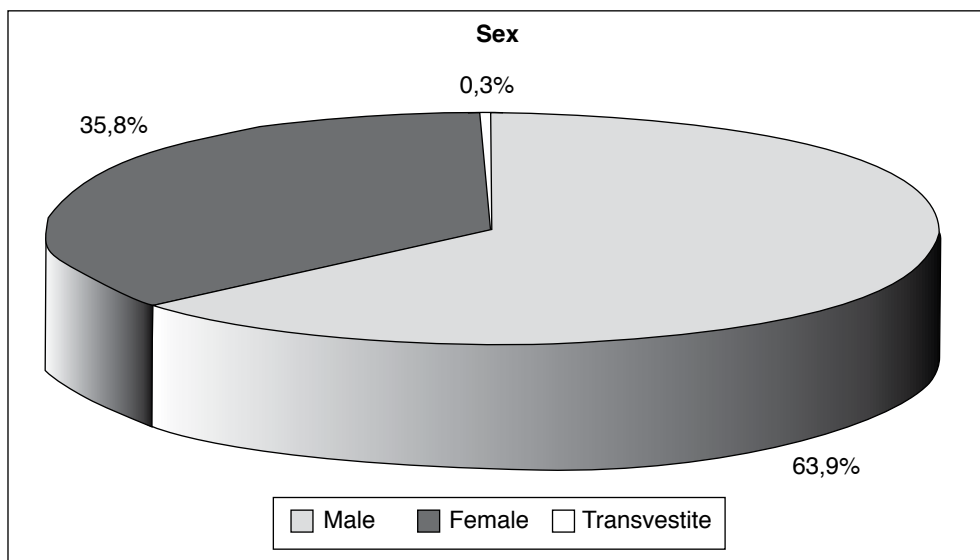
198 applicants (63,9%) are male, 111 (35,8%) are female and 1 (0,3%) is transvestite. (Graphic 9).

#### 2- Place of Birth

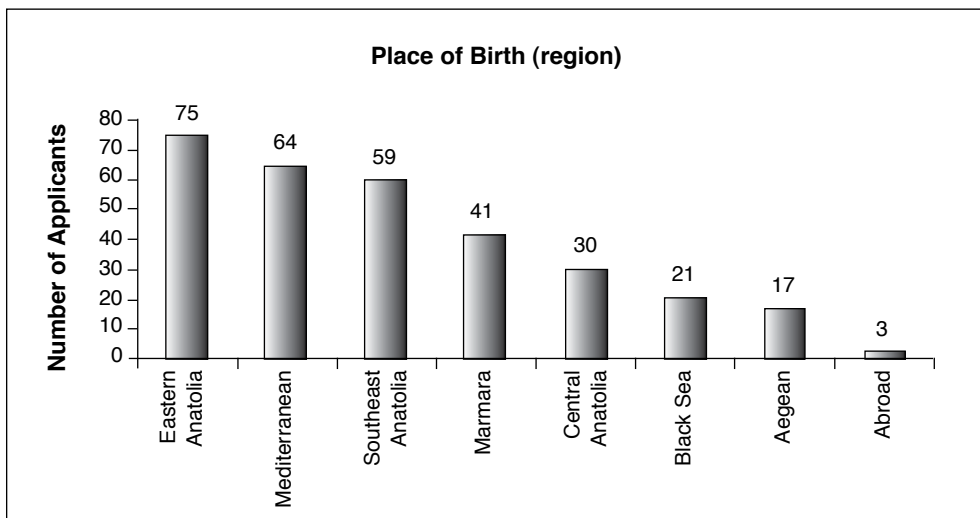
Almost ¼ of the applicants (24,2%) were born in the Eastern Anatolian Region, 20,6% in the Mediterranean Region, 19% in the South-Eastern Anatolian Region, 13,2% in the Marmara Region, 9,7% in the Central Anatolian Region, 6,8% in the Black Sea Region, 5,5% in the Aegean Region and 1% abroad. The regional distribution of the birthplaces of the applicants is given in Graphic 10.



**Graphic 9. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year, according to their sex**



**Graphic 10. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year, according to their birthplace**



Regarding the birth places at the provincial level, İstanbul was first with 32 applicants (10,3%), followed by Adana (25 applicants, 8,1%), Tunceli (25 applicants, 8,1%), Hatay (19 applicants, 6,1%), Mardin (18 applicants, 5,8%), İzmir (15 applicants, 4,8%), Gaziantep (12 applicants 3,9%) and other provinces.

### 3- Educational Background and Employment Status

184 (59,4%) of the applicants were elementary school or high school graduates, 71 (22,9%) applicants were primary school graduates or literate, while 45 applicants (14,5%) graduated from or dropped out of university. 10 (3,2%) of the applicants were illiterate. A more detailed distribution of the educational background of the applicants is provided in Table 40.

**Table 40. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year, according to their educational background**

<b>Educational Background</b>	<b>Number of Applicants</b>	<b>%</b>
High school	126	40,6
Primary School	59	19,0
Elementary School	58	18,7
University Graduate	24	7,7
University Drop Out	21	6,8
Literate	12	3,9
Illiterate	10	3,2
<b>Total</b>	<b>310</b>	<b>100,0</b>

Regarding the employment status of the applicants, it appears that 97 applicants (31,3%) were unemployed during the interview. 73 applicants (23,5%) were university students, 24 applicants (7,7%) were industrial workers in the private sector and 22 applicants (7,1%) were primary or elementary school students. Among the applicants there were 15 press members (4,8%).

The employment status of the applicants is presented in more detail in Table 41.

## B- PROCESS OF TORTURE

Among the applicants to the HRFT in 2007, 310 applicants were subjected to torture in detention in the same year. Although 317 applicants were subjected to torture within 2007, 7 applicants, whose most recent torture was in prisons, are excluded from the evaluation in this chapter. The information obtained from the 310 applicants who were tortured in detention is included in this evaluation.

### 1- The Process of Detention and Torture

261 of the applicants (84,2%) who were subjected to torture in detention within 2007 stated that they had been tortured because of political reasons, while 48 applicants (15,5%) stated that they had been tortured for non political reasons. 1 person stated that s/he was subjected to torture because of being a refugee.

As for the length of their most recent detention, 192 applicants (61,3%) were detained for less than 24 hours and 86 applicants (27,7%) were detained between 24-28 hours. **1 applicant (0,3%) was detained for longer than 1 month.**

**Table 41. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year, according to their employment status**

Profession or Employment	Number of Applicants	%
Unemployed	97	31,3
University student	73	23,5
Industrial worker in the private sector	24	7,7
Student of primary or secondary schools	22	7,1
Housewife	16	5,2
Tradesmen (working in a shop or office of their own)	15	4,8
Journalist	15	4,8
Office worker in the private sector (secretary, bank clerk etc.)	7	2,3
NGO worker	7	2,3
Construction worker	8	2,6
Expert at an NGO	5	1,6
Retired	5	1,6
Artist	5	1,6
Peddler	4	1,3
Advocate	2	0,6
Office worker in the public sector (Secretary, bank clerk etc.)	1	0,3
Teacher	1	0,3
Employed in the agricultural sector	1	0,3
Farmer, fisherman, etc	1	0,3
Nurse	1	0,3
<b>Total</b>	<b>310</b>	<b>100,0</b>

The distribution of applicants according to the length of the most recent detentions is presented in Table 42.

**Table 42. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year, according to the length of their most recent detentions**

Length of the Most Recent Detention	Number of Applicants	%
Less than 24 hours	192	62
24-48 Hours	86	27,7
49-72 Hours	25	8,1
73-96 Hours	6	1,9
5-7 Days	0	0,0
More than 1 month	1*	0,3
<b>Total</b>	<b>310</b>	<b>100,0</b>

*\*An asylum seeker was detained for a total of 88 days outside Turkey.*

As regards the places from which the applicants were arrested, it is found that 264 applicants (85,2%) were arrested when outdoors (on the street or in some other open space). The distribution of the places of arrest for the most recent detention is presented in Table 43.

**Table 43. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year, according to the place of their most recent arrest**

Place of the most recent arrest	Number of Applicants	%
Outdoors	264	85,2
Home	28	9,0
Public Office	10	3,2
Work Place	4	1,3
Other	2	0,6
Organisation (NGO office, press office, etc)	1	0,3
Not known	1	0,3
<b>Total</b>	<b>310</b>	<b>100,0</b>

The distribution of the hours when applicants were arrested is given in Table 44.

**Table 44. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year, according to the time of their most recent arrest**

The hour of the most recent arrest	Number of Applicants	%
08:00-18:00	196	63,2
18:00-24:00	91	29,4
24:00-08:00	23	7,4
<b>Total</b>	<b>310</b>	<b>100,0</b>

As regards the place of torture during their most recent detention, 110 applicants (35,5%) were tortured in security directorates, 96 applicants (31%) outdoors, while 61 applicants (19,7%) were tortured in police stations.

The distribution of the applicants according to the place where they were tortured is presented in Table 45.

As regards the regional distribution of the place of the most recent torture, it appears that the Marmara Region comes the first. It is followed by the Mediterranean and Central Anatolian regions (Table 46).

As for the provincial distribution of the most recent torture İstanbul, Ankara, Adana and İzmir were the first three. Provincial distribution of the places of torture in detention is given in the Table 47.

**Table 45. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year according to the place of their most recent torture in detention**

Place of the Most Recent Torture in Detention	Number of Applicants	%
Security directorate	110	35,5
Outdoors	96	31,0
Police station	61	19,7
Car	14	4,5
Gendarmerie headquarters	12	3,9
Home	9	2,9
Gendarmerie station	5	1,6
Other	2	0,6
Not known/not remembered	1	0,3
<b>Total</b>	<b>310</b>	<b>100,0</b>

**Table 46. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year according to the regions in which they experienced the most recent torture**

Region of Most Recent Torture	Number of Applicants	%
Marmara	140	45,2
Mediterranean	63	20,3
Central Anatolia	64	20,6
Aegean	32	10,3
South-Eastern Anatolia	7	2,3
Eastern Anatolia	3	1,0
Abroad	1	0,3
<b>Total</b>	<b>310</b>	<b>100,0</b>

**Table 47. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year according to the provinces in which the applicants were last subjected to torture**

City of Most Recent Torture	Number of Applicants	%
İstanbul	138	44,5
Ankara	64	20,6
Adana	57	18,4
İzmir	32	10,3
Mersin	5	1,6
Diyarbakır	4	1,3
Gaziantep	2	0,6
Van	2	0,6
Şanlıurfa	1	0,3
Hatay	1	0,3
Tunceli	1	0,3
Kocaeli	1	0,3
Tekirdağ	1	0,3
Abroad	1	0,3
<b>Total</b>	<b>310</b>	<b>100,0</b>

Looking at the centres, where the most recent torture was inflicted, in more detail, it appears that Ankara Security Directorate, Ankara Anti-Terror Branch (ATB) and Adana Anti-Terror Branch draw attention with a large number of torture incidents, followed by İstanbul Beyoğlu Police Station. Table 48 displays the centres of the most recent torture in which more than 3 cases occurred.

**Table 48. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year according to the centres where the most recent torture took place**

Centre of the most recent torture in detention	Number of Applicants	%
Ankara Security Directorate	23	7,4
Adana ATB	22	7,1
Ankara ATB	22	7,1
Beyoğlu Police Station	16	5,2
İstanbul Security Directorate Security Brach	8	2,6
İstanbul ATB	7	2,3
Tuzluçayır Police Station	5	1,6
Beşiktaş Security Directorate	4	1,3
İzmir Basmane Police Station	4	1,3
Eskiizmir Police Station	4	1,3
Kasımpaşa Police Station	4	1,3
Avcılar Central Police Station	3	1,0
Other Security Directorates and ATB	26	8,4
Other Police Stations	23	7,4
Other Gendarmerie Centres	14	4,5
Other Gendarmerie Stations	3	1,0
Other	1	0,3
Was not subjected to torture at a centre*	121	39,0
<b>Total</b>	<b>310</b>	<b>100,0</b>

*\*Those who were subjected to torture outdoors, at home, in a car or at other places*

Table 49 presents the torture methods inflicted on the applicants during their most recent torture.

## **2- Legal Procedures During and After Detention**

191 of all applicants in 2007 (61,6 %) stated that they could see an advocate during their most recent detention (Graphic 11).

The number of applicants who were released by the public prosecutor or a court after their most recent detention is 139 (44,8%). 128 applicants (41,3%) were released without being taken before a prosecutor. 43 applicants (13,9%) were arrested.

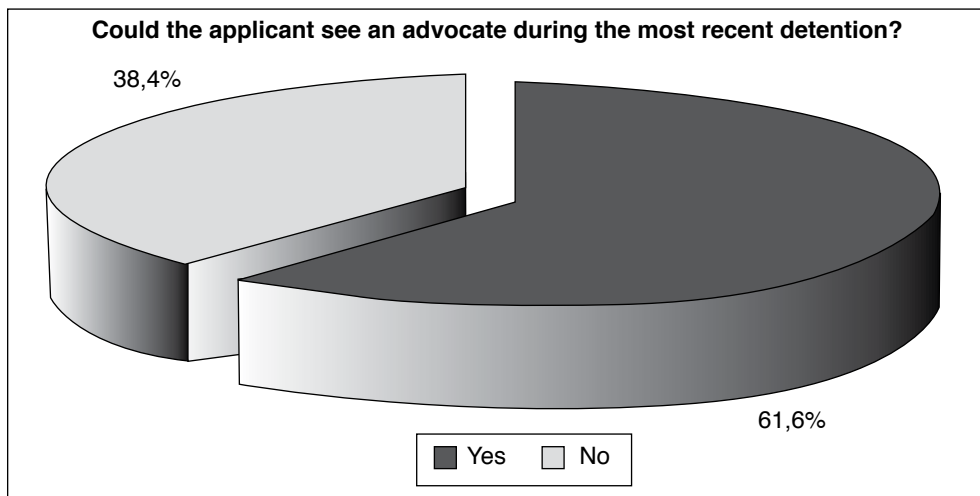
**Table 49. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year according to the methods of torture.**

<b>Torture Method</b>	<b>Number of Applicants</b>	<b>%</b>
Beating	280	90,3
Insulting	263	84,8
Humiliating	187	60,3
Threats against himself/ herself	135	43,5
Subjecting to chemicals	116	37,4
Forcing to obey nonsense orders	74	23,9
Continuous hitting on one part of body	71	22,9
Sexual harassment	68	21,9
Restricting food and water	62	20,0
Forced to witness torture (auditory/visual)	62	20,0
Death threats	57	18,4
Restricted defecation and urination	57	18,4
Other positional torture methods	54	17,4
Forced to extensive physical activity	48	15,5
Pulling out hair/moustache/beard	42	13,5
Threats against relatives	39	12,6
Other	33	10,6
Restricted sleep	30	9,7
Torturing in the presence of relatives and friends	30	9,7
Stripping naked	29	9,4
Forced to wait on cold floor	29	9,4
Cell isolation	22	7,1
Forced to listen to marches or high volume music	13	4,2
Suffocating	12	3,9
Squeezing testicles	4	1,3
Blindfolding	2	0,6
Asked to act as an informer	2	0,6
Pressurized/cold water	1	0,3
Suspending on a hanger	1	0,3
Electricity	1	0,3
Mock execution	1	0,3
Strappado	1	0,3
Hanging upside down	1	0,3
Medical intervention by force	1	0,3
<b>Total</b>	<b>1828</b>	<b>5,8*</b>

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

There are no lawsuits filed against 118 applicants (38,1%). Lawsuits filed against 113 applicants (36,5%) are going on. It is unknown whether there are any lawsuits filed against 72 applicants (23,2%). 3 applicants (1%) were acquitted. The results of lawsuits filed against 3 applicants (1%) are unknown. Only 1 applicant (0,3%) was convicted as a result of her/ his lawsuit. (Tables 50 and 51).

**Graphic 11. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year according to their access to a lawyer**



**Table 50. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture according to their situation after detention**

Situation After Most Recent Detention	Number of Applicants	%
Released by prosecution office or court	139	44,8
Released without facing prosecutor	128	41,3
Was arrested	43	13,9
<b>Total</b>	<b>310</b>	<b>100,0</b>

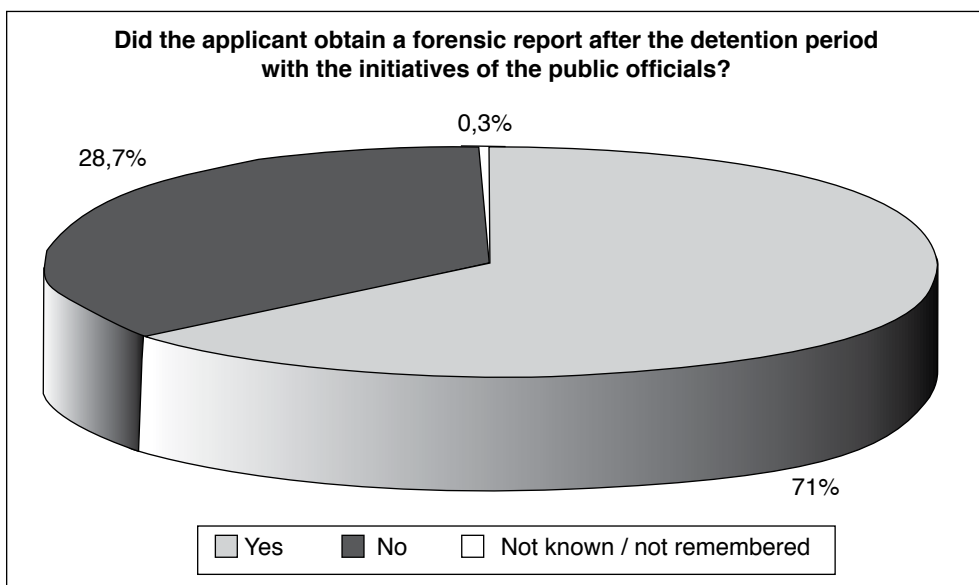
**Table 51. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture according to the process of their trial after their most recent detention**

Trial Process After Last Detention	Number of Applicants	%
Applicant was not tried	118	38,1
Trial in progress	113	36,5
Whether a suit is filed or not is unknown	72	23,2
Applicant was tried and acquitted	3	1,0
Applicant was tried, result unknown	3	1,0
Applicant was tried and convicted	1	0,3
<b>Total</b>	<b>310</b>	<b>100,0</b>



The number of applicants who obtained a forensic report after the most recent detention, on the initiative of the officials is 220 (71%) (Graphic 12).

**Graphic 12. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year according to whether they obtained a forensic report on the initiatives of public officials after the detention period or not**



134 of 220 applicants (46,9%) were examined at the branches of the Forensic Medicine Institution, 75 applicants (34,1%) were examined at hospitals (Table 52). Moreover, 13 applicants stated that they obtained forensic medical reports upon their own initiative after the most recent detention.

**Table 52. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 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	%
Branch of Forensic Medicine Institution	134	60,9
Hospital	75	34,1
Health centre	6	2,7
Not known/not remembered	2	0,9
Forensic Medicine Institution	2	0,9
Detention Place	1	0,5
<b>Total</b>	<b>220</b>	<b>100,0</b>

In regards the statements of 220 applicants who underwent forensic medical examination after detention about their evaluations of the forensic examination process; security forces were taken out of the room during forensic examination of 162 applicants (73,6%). 137 applicants stated that (62,3%) the forensic physician listened to their complaints. However 117 applicants (53,2%) stated that the physician did not take note of their complaints properly and 129 applicants (58,6%) stated that the physician did not examine as s/he ought to. Only 72 applicants (32,7%) out of 220 stated that the physician prepared a medical report in accordance with the findings (Table 53).

**Table 53. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year according to the evaluations regarding the forensic examination after detention**

<b>Evaluation of Forensic Examination</b>	<b>Yes</b>	<b>%</b>	<b>No</b>	<b>%</b>	<b>Not Known/ not remembered</b>	<b>%</b>	<b>Total</b>	<b>%</b>
Were the security forces taken out of the room during the forensic medical examination?	162	73,6	58	26,4	-	-	220	100,0
Did the forensic physician listen to the complaints?	137	62,3	83	37,7	-	-	220	100,0
Did the forensic physician take note of the complaints?	103	46,8	117	53,2	-	-	220	100,0
Did the forensic physician examine as s/he ought to?	91	41,4	129	58,6	-	-	220	100,0
Did the forensic physician write a report that was in accordance with the findings?	72	32,7	109	49,5	39	17,7	220	100,0

65 applicants (21%) stated during their interrogation by the court or prosecutor that s/he was tortured and 51 applicants (16,5%) filed a complaint to the prosecutor with a separate petition. 1 applicant (0,3%) filed a complaint to the prosecutor with a separate petition on guidance of the HRFT. 190 applicants (61,3%) stated not to have made any complaints about torture.

### 3- Imprisonment period

Among the applicants who were subjected to torture in 2007, the number of torture survivors who had been at a prison at some point is 84 (27,1%). 43 applicants (13,9%) had been at a prison after their most recent detention period. The length of their stay at prison after the most recent detention period varies between 1 days and 72 months with an average of 4 months.

## C- MEDICAL EVALUATION

This chapter contains information on the health condition of the applicants which was obtained from the anamnesis, physical examination and other tests, conducted by physicians working at the HRFT Centres together with consultant doctors (psychiatrists, physiatrists, ophthalmologists, ENT experts etc).

### 1- Medical Complaints of the Applicants

308 applicants in 2007 (99,9%) who were subjected to torture in the same year stated to have either physical or psychological complaints. 2 applicants (0,1%) did not have any complaints. 308 applicants complained about 2293 health problems altogether. The distribution of these complaints according to systems shows that in 2007 most of them were psychological complaints, similar to 2006 (28,2%) which is followed by musculoskeletal system (13,3%) and dermatological complaints (Table 54).

**Table 54. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year according to the frequency of their physical and psychological complaints**

Systems	Number of Complaints	%
Psychological	647	28,2
Musculoskeletal System	502	21,9
Dermatological	306	13,3
General	236	10,3
Neurological System	164	7,2
Ear, Nose and Throat	109	4,8
Ophthalmological	81	3,5
Digestive System	64	2,8
Urogenital System	60	2,6
Respiratory System	54	2,4
Oro-dental	37	1,6
Cardiovascular System	30	1,3
Endocrinological System	3	0,1
<b>Total</b>	<b>2293</b>	<b>100,0</b>

Headache is the most common complaint, found in 1/4th of applicants (78 applicants, 25,3%). It is followed by discoloration of the skin with 77 applicants (25%). As for the psychological complaints the most common is irritability (67 applicants, 21,8%) followed by sleeping disorders (64 applicants, 20,8%). The most common 10 physical and psychological complaints are given in the Tables 55 and 56.

**Table 55. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year according to the frequency of their physical complaints**

10 Most Common Physical Complaints	Number of Complaints	% Among the Applicants	% Among the Physical Complaints	% Among all Complaints
Headache	78	25,3	4,7	3,4
Discoloration of the skin	77	25,0	4,7	3,4
General pain in the body	74	24,0	4,5	3,2
Panicula	58	18,8	3,5	2,5
Fatigue/weakness	57	18,5	3,5	2,5
Back pain	50	16,2	3,0	2,2
Graze	46	14,9	2,8	2,0
Pain in the neck	43	14,0	2,6	1,9
Pain in the chest/ ribs	42	13,6	2,6	1,8
Pain in the shoulder	40	13,0	2,4	1,7
Other physical complaints	1081	-	65,7	47,1
<b>Total</b>	<b>1646</b>	<b>-</b>	<b>100,0</b>	<b>71,8</b>

**Table 56. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year according to the frequency of their psychological complaints**

10 Most Common Psychological Complaints	Number of Complaints	% Among the Applicants	% Among the Psychological Complaints	% Among all Complaints
Irritability	67	21,8	10,4	2,9
Sleeping disorders	64	20,8	9,9	2,8
Irritability from the police	53	17,2	8,2	2,3
Concentration difficulties	48	15,6	7,4	2,1
Distress	48	15,6	7,4	2,1
Tension	44	14,3	6,8	1,9
Anxiety	43	14,0	6,6	1,9
Amnesia	41	13,3	6,3	1,8
Fear	41	13,3	6,3	1,8
Urge to cry	30	9,7	4,6	1,3
Other psychological complaints	168	54,5	26,0	7,3
<b>Total</b>	<b>647</b>	<b>-</b>	<b>100,0</b>	<b>28,2</b>

## 2- Findings of the physical examinations

In 230 applicants out of 310 who were tortured in 2007, a physical finding was obtained as a result of physical examinations. The total number of physical findings is 1185. The distribution of the findings according to the systems shows that the most common findings belong to the dermatological (40,4%) and musculoskeletal systems(32%) (Table 57).

The most common physical findings are skin ecchymosis (71,3%) and muscular pain and sensitivity (53,9%). The most common 10 findings are given in the Table 58.

**Table 57. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year, according to the physical findings**

<b>Systems</b>	<b>Number of Findings</b>	<b>%</b>
Dermatological System	479	40,4
Musculoskeletal System	379	32,0
Ear, Nose and Throat	104	8,8
Ophthalmological	78	6,6
Oro-dental	52	4,4
Digestive System	37	3,1
Urogenital System	33	2,8
Respiratory System	9	0,8
Cardiovascular System	8	0,7
Neurological System	5	0,4
Endocrinological System	1	0,1
<b>Total</b>	<b>1185</b>	<b>100,0</b>

**Table 58. The distribution of the applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year, according to the physical findings**

<b>10 Most Common Findings and other Findings</b>	<b>Number of Findings</b>	<b>% Among the Applicants</b>	<b>% Among the Physical Complaints</b>
Ecchymosis	164	71,3	13,8
Muscular pain and sensitivity	124	53,9	10,5
Erosion	85	37,0	7,2
Edema	57	24,8	4,8
Pain and restriction of the movements of the neck	43	18,7	3,6
Scar tissue	37	16,1	3,1
Crusted wound	34	14,8	2,9
Pain and restriction of the movements of the shoulders	31	13,5	2,6
Ecchymosis around the eyes	30	13,0	2,5
Incision	30	13,0	2,5
Other psychical findings	550	-	46,4
<b>Total</b>	<b>1215</b>	<b>-</b>	<b>100,0</b>

### 3- Psychiatric Symptoms and Findings:

70 of the applicants (22,6%) have seen a psychiatrist. Looking at the distribution of psychiatric findings and symptoms, anxiety, concentration difficulties and difficulties in falling or staying asleep were diagnosed in almost half of the applicants who were examined by a psychiatrist. Table 59 shows the psychiatric symptoms and findings diagnosed in 10 applicants or more, out of 70 applicants.

**Table 59. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year, according to the psychiatric symptoms and findings**

Psychiatric Symptoms and Findings Observed in at Least 10 of the Applicants	Number of Symptoms and Findings	% Among the Applicants who saw a psychiatrist	% Among the psychiatric Symptoms and Findings
Anxiety	48	68,6	6,3
Concentration difficulties	45	64,3	5,9
Difficulties in falling or staying asleep	42	60,0	5,5
Irritability and/or outburst of anger	31	44,3	4,0
Intense psychological distress at exposure to stimuli associated with the trauma	30	42,9	3,9
Intense physiological reactions to stimuli associated with the trauma	29	41,4	3,8
Somatic anxiety symptoms (palpitation, distress, sweating, vb.)	29	41,4	3,8
Fatigue/weakness	27	38,6	3,5
Feelings of detachment from others	27	38,6	3,5
Extreme increase or decrease in sleep duration	26	37,1	3,4
Recurrent and intrusive distressing recollections of the traumatic event	26	37,1	3,4
Memory impairment	25	35,7	3,3
Responses of intense fear, helplessness or horror to the traumatic events experienced or witnessed	25	35,7	3,3
Efforts to avoid activities, places or people that arouse recollection of the trauma	25	35,7	3,3

Changes in appetite/weight (increase or decrease)	25	35,7	3,3
Recurrent and distressing dreams of the traumatic event	24	34,3	3,1
Efforts to avoid thoughts, feelings or conversations associated with the trauma	22	31,4	2,9
Intense vigilance	20	28,6	2,6
Absent mindedness	20	28,6	2,6
Depressive mood	19	27,1	2,5
Flashback experiences and acting or feeling as if the traumatic event were recurring	18	25,7	2,3
Sense of foreshortened future	16	22,9	2,1
Exaggerated startle response	16	22,9	2,1
Apathy	15	21,4	2,0
Agitation (irritability, hyperactivity)	14	20,0	1,8
Dysphoric Mood	14	20,0	1,8
Markedly diminished interest or participation in significant events	13	18,6	1,7
Difficulties in decision making	11	15,7	1,4
Restricted range of affect (blunted affect)	11	15,7	1,4
Muscular tension	11	15,7	1,4
Decrease in sexual interest	10	14,3	1,3
Other psychological symptoms or findings	52	-	6,8
<b>Total</b>	<b>766</b>	<b>-</b>	<b>100,0</b>

#### 4- Diagnoses:

The evaluation of the diagnoses of the applicants was carried out among 273 applicants who were diagnosed until the end of 2007. Regarding the 105 different diagnoses, it appears that soft tissue trauma was the most common among the physical diagnoses (223 applicants, 81,7%), while Acute Stress Disorder was the most common among the psychiatric diagnoses (18 applicants, 6,6%). Tables 60 and 61 show the 10 most common psychical diagnoses and psychiatric diagnoses which were found in two or more applicants among 70 applicants who saw a psychiatrist, and their frequency among 273 diagnosed applicants.

**Table 60. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in said year, according to the frequency of the most common physical diagnoses**

10 Most Common Physical Diagnoses	Number of Applicants	%
Soft tissue trauma	223	81,7
Myalgia	96	35,2
Cuts or bruises on the skin	80	29,3
Periorbital Ecchymosis	20	7,3
Anemia	15	5,5
Nasal Deviation	13	4,8
Myopi- hypermetropia	13	4,8
Bone Fracture	10	3,7
Lombar Strain	9	3,3
Positive findings in bone scintigraphy	9	3,3

**Table 61. The distribution of applicants to the HRFT Treatment and Rehabilitation Centres in 2007 who were subjected to torture in the said year, according to the frequency of the most common psychiatric diagnoses**

Psychiatric Diagnosis Diagnosed on at Least Two People	Number of Applicants	%
Acute stress disorder	18	6,6
PTSD (Acute)	13	4,8
Generalized anxiety disorder	12	4,4
Major depressive disorder, Single Episode	10	3,7
PTSD (Chronic)	6	2,2
Adaptation problems	5	1,8
Sleeping Disorders	3	1,1
Other Anxiety Disorders	2	0,7
Subliminal, unspecified psychiatric symptoms	2	0,7

When the relation between the diagnosis and the torture process experienced by the applicant is examined, disregarding those diagnoses that were found irrelevant to the trauma, it appears that in 79,6 % of all diagnoses found relevant to the trauma, the torture period was regarded as the only etiological factor. In 7,3 % of the cases it was regarded as one of the factors, while in 6,1 % of the cases it aggravated or inflamed the pathological situation.

18 of 310 applicants (5,8%) who were subjected to torture in 2007 did not receive any diagnosis related to torture and ill treatment by the end of 2007.



### III- EVALUATION and CONCLUSION

- In 2007, we have contributed to the treatment and rehabilitation of 452 torture survivors, all of the relevant data can be found in this report. (In 2006, the number of applicants was 337.)
- Considering that the number of applicants is 452, there has been an increase of 34% in the number of applicants compared to last year's figures. The number of applicants has mainly risen in Ankara, Istanbul and Izmir, whereas the reduced number of applicants in Diyarbakır is striking.
- Beyond the increase of the number of applicants, the number and proportion of applicants who were subjected to torture within the same year has also increased. In 2006, the number of applicants who were subjected to torture was 222(65%), whereas in 2007, it was 317(70%). This is an important clue for maintaining our activities in the upcoming period with determination.
- 41 of the applicants (9.4%) are children and 14 of them are relatives of torture survivors.
- Regarding the distribution of our applicants according to their birth places, the applicants born in South Eastern Anatolia (25%) and in Eastern Anatolia (23%) take the lead. Taking into consideration the applicants born in the said regions, the need for a peaceful- democratic solution to the Kurdish question becomes more apparent.
- 9 of our applicants were not Turkish citizens. Their countries of origin are as follows: 2 Iraq, 2 Lebanon, 1 Ethiopia, 1 Kenya, 1 Angola and 1 Burundi. Among them, Lebanese and Burundian applicants were subjected to torture in Turkey, and the rest in their home countries.
- The ratio of female applicants is 35%, and there is a relative increase compared to the previous year. (In 2006, it was 29%)
- There is a relative increase in the number of applicants who were tortured due to ordinary offences. (In 2007 it was 14%, in 2006, 11%)
- The proportion of interrupted treatment process is 12%, showing similarity with the previous years.
- As the "Measuring the Life Quality" study, which is a valuable study in measuring the quality of our services for our applicants, accomplished in this period shows we are providing to our applicants a qualified service.

To make a general evaluation on torture phenomena in Turkey;

- a. The main reason of the numerical increase in 2007 is tendencies of the security forces towards becoming more authoritarian, something which has become more concrete especially after the amendment of the Duties and Authorities of the Police Law within last year, despite our warnings, and the erosion of the sensitivity they are expected to show towards human rights breaches.
- b. Among torture methods that our applicants were subjected to in 2007, beating (89%) and insulting (83%) were the most common. Additionally, there have been

other methods such as death threats, other threats, forced witnessing (visual/audio) of torture to others, torturing in the presence of others, forcing to obey nonsensical orders, continuously hitting on one part of the body, pulling hair, moustache, beard, forcing to excessive physical activity, forcing to wait on cold floor, spraying tear gas, sexual harassment and squeezing testicles.

c. Regarding the physical diagnoses, we observe that in 2007, torture and ill treatment practices have become more brutal and wilder compared to previous years. This is an indicator of the above said increasing authoritarianism and erosion in humanitarian sensitivity. As a result of these brutal and wild practices, we encountered various heavy traumas such as several breaks, damaged and missing organs, torn eardrums. In addition to physical diagnoses, there were several psychological diagnoses, mainly post traumatic stress disorder.

d. Among the places of torture in 2007, the proportion of torture in security centres (where there are special teams) (35.5%) is significant. Additionally, the increase of torture in the places other than official detention places (such as outdoors, cars etc.) is striking.

Numerous people are subjected to torture and ill treatment after having been “deprived of their liberty”, however they may be released without any official procedure. In this way, a sort of “arbitrary detention” occurs, since there are no records.

As for official detention places, torture and ill treatment is inflicted until detention is officially recorded (most often until examination by a physician). Therefore, the relatively positive developments concerning the length of official detention and access to lawyer during official detention period are not sufficient in the prevention of torture.

Furthermore, torture and ill treatment occurs often until the first forensic examination, which makes it difficult to investigate and punish the perpetrators.

e. A comparison of the data of 2007, which is presented here, indicates that there is a positive correlation between the most common torture and ill treatment methods and high number of applicants who were subjected to torture and ill treatment at police stations, outdoors or in the streets in 2007. Most of the physical diagnoses of the applicants are based on the findings caused by heavy physical trauma, which is supportive of this relationship.

This relationship between the place of torture and torture methods and diagnoses indicate that, in 2007 the reason behind torture has been mainly to intimidate or coerce, punish or establish authority as stated in the UN definition, rather than to obtain information. Consequently, this situation on the one hand brings the drastic consequences of the amendment of the Duties and Authorities of the Police Law into sharp relief, and on the other hand, reiterates the fact that anybody in Turkey of any age from 7 to 70, of any sex, or occupation, irrespective of their social status, political opinion and religious view, having committed a crime or not, is under the risk of being tortured at anytime and anywhere and that unfortunately, conditions are convenient for this.

In other words, our experiences show that torture is inflicted and can be inflicted again when it is deemed necessary by some certain groups.

On the other hand, torture comprises of all kinds of violence against personal integrity of those deprived of their liberty. Violence against individuals one by one, consequently fulfils an important function in reproduction of violence at the societal level. In this sense, numerical evaluations are important, yet torture as a phenomenon has a meaning beyond the numbers.

f. Violence is being inflicted widespread and systematically during meetings and demonstrations by security forces. There is a striking increase in the practice of direct, widespread and systematic violence inflicted on demonstrators by security forces without detaining them.

g. Impunity of Torture: As is known, impunity is both a consequence of systematic torture and a tool that makes it possible. Because perpetrators and those responsible for torture find the courage to inflict torture again as far as they are protected against punishment legally and de facto the threat of torture over masses is made perpetual.

Many people can be subjected to torture and ill treatment after being “deprived of their liberty”, yet they may be released without any procedure. This is a form of “arbitrary detention” since there are no records.

As a result of negative regulations in the recent period, detainees have not been given sufficient information about their rights, or they are not allowed to enjoy their rights, or it is delayed until the end of interrogation.

The principle of immediately informing relatives is not always respected, or his/her meeting with an advocate is prevented claiming that he/she did not want to meet and without showing other evidences, or necessary conditions are not provided while meeting an advocate.

In addition to these defects in practice, with the new Anti Terror Law, new restrictions have been brought to the access of detainees to a lawyer. According to the law, a detained suspect can enjoy legal assistance of only one lawyer and this assistance may be forbidden within the first 24 hours. Moreover, according to the same law, the detained suspect may on the decision of a judge be restricted to a “monitored meeting” with his/her lawyer where an officer is present, a practise which violates the principle of confidentiality.

Preparatory investigations against torture allegations are still being carried out by the security forces themselves. During these investigations security forces most of the time do not carry out the necessary procedures, or do not collect evidences. Equally, most of the time prosecutors do not carry out the procedures by taking into consideration the evidences in the case folders but ask for a written application.

As for the courts, when they encounter torture claims or findings during a prosecution, they remain negligent about them, and do not feel the need to file complaints to the prosecutors about torture. All of these actions and non-actions result in impunity of the torturers.

Another way which is often used to achieve impunity for torturers is the filing of counter claims against torture victims after torture, for resisting the police. This way, the victims cannot protest against the procedure that they have been through and pursue justice.

Notwithstanding, there are a few lawsuits filed against the security forces for torturing and using excessive force. However the lawsuits usually result in impunity for time lapse, reduction for goodwill, or amnesty for employment record.

The legal assistance to torturers against whom lawsuits are filed, also serves the impunity. What is more, the scope of this assistance is widened in the new Anti Terror Law to include the advocates of the torturers, selected by them. The new ATL ensures trial without arrest to the anti terror officials for the crimes they commit on duty.

The extended period of trials, and the judicial authorities not fulfilling their responsibility to be fair while interpreting and implementing the legislation are other causes of impunity.

Medical reports for detecting and documenting torture can still be deficient and insufficient, which is another cause of impunity. The psychological findings are as important as physical findings in proving torture allegations. However, the medical personnel who provides the medical reports is unfortunately not qualified enough on the forensic medicine techniques to detect the physical and psychological traces of torture. Moreover, the personnel responsible for examining the persons before or after detention or while they are taken to the prisons, is working under the Ministries of Justice and Interior, which constitutes a serious obstacle to independent and objective scientific evaluation.

The Forensic Medicine Institution not being autonomous and independent damages its reliability. Especially in those cases where the perpetrators are public officials, which is usually the case with torture, it then gets more difficult to prove the crime. The medical doctors, who should prove the findings of torture, can be subjected to the pressure of the administration as much as of the police force, so they might be threatened. The result of this is that torture is not documented, thus indirectly the perpetrators remain unpunished.

#### h. Prison question:

186 of our applicants have a prison history. 62 of them had been at an F Type prison.

Especially at F Type prisons, isolation policies are continuing, which is a human rights violation itself. Despite the initiative to improve the isolation conditions by a circular of the Ministry of Justice published on 22 January 2007, the practice has not changed much as the requirements of the circular were not realized due to various reasons. Thus complaints about the isolation policies increased.

In addition to the said complaints, our applicants of the recent years display a different profile than those who applied in earlier years after being released from

prison. The concrete results of isolationist prison policies, which we have been theoretically expressing and anticipating earlier, can be observed now. (Complaints and diagnoses of our applicants are striking.)

To conclude;

Today, torture remains a serious issue in Turkey, and it has been gaining more weight recently. Today, anybody in Turkey, of any age, sex, occupation, social status, political view and belief, whether having committed a crime or not, is still at risk of being tortured anytime and anywhere. It is not sufficient only to conclude international conventions and to enact laws and circulars in domestic law. In order to properly implement the content of the laws and conventions at issue, it is necessary to take many other legal, juridical, administrative, educational and cultural measures.

For instance, in order to investigate torture and ill-treatment allegations, it is imperative not to wait for another complaint; instead, if there is already sufficient suspicion about the issue, a prosecution should be initiated *sua sponte*. Judiciary police should be established with personal employee rights defined by the Chief Public Prosecutor.

The procedure of the Istanbul Protocol, which has been approved by the United Nations, should be applied in order to detect physical and psychological traces of torture of those who complain about being tortured.

The Optional Protocol to the UN Convention against Torture, that allows the development of effective monitoring mechanisms which have important role in the prevention of torture, should be ratified by Turkey and it should be implemented by opening all detention places, official or unofficial, to visits of national and international mechanisms.

All of the circulars, regulations and laws, such as the Police Duties and Authorities Law, that cause impunity should be reviewed and amended in terms of their integrity and consistency.

In order to properly implement the legal developments, the implementers should be trained and effective supervision should be conducted.

It is possible to extend this list further. Yet, what is more important is to change the current mentality and to have a convincing will and determination that can realize these changes.

As we have been expressing so far, the HRFT and the HRFT Treatment and Rehabilitation Centres which have been working on the one hand for prevention of torture and on the other hand for treatment of torture survivors, as a societal apology place from torture survivors, will continue their work with determination to make a dream of a Turkey and a world where such activities would be unnecessary come true.

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