

The military coup in Chile in 1973, the immediate reaction of international organisations, and the founding of the first rehabilitation program for torture victims in 1977

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Abstract

This paper documents the historical steps of the immediate reactions of the United Nations, Amnesty International, the World Council of Churches (WCC), the Inter-American Commission on Human Rights, and lawyers' organisations in support of the victims of torture and others suffering gross violations of their human rights, as perpetrated by the Chilean military from 1973 to 1990. This article is also the history of the founding of the first rehabilitation programs for torture victims in Chile in 1977 and the other care programs for victims under local and international churches' protection during the worst period of the military dictatorship. The actions of denunciation and defense of the victims were possible through national and international networks sustained in collaborative work from inside and outside Chile, which lasted for 17 years. The results and lessons learned projected the creation of new commissions, funds, and international networks that continue today in the international arena. The rehabilitation programs under the dictatorship began as a solidarity response to the needs of victims. The rehabilitation programs, born during the dictatorship, projected their practice and experience to create a comprehensive health program as part of the State's reparation measures. The testimonies of the victims made it possible to understand the consequences of human rights

violations on individuals and society. State policies and civil society actions have sought to contribute to the reparation of victims through rehabilitation actions directly.

This paper is part of the memory of that past by reconstructing the solidarity actions of denunciation and rehabilitation, and the details of which are often unknown.

Introduction

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The military coup and reaction international organisations

Chile has been one of the long-standing democracies in Latin America. Salvador Allende, a medical doctor, member of the Socialist Party of Chile, and a well-known Marxist, was defeated

in the 1958 and 1964 elections as a presidential candidate. He was elected president of Chile in 1970. He was the first Marxist democratically elected in the world. This was a new political outcome that unique political effect generated tremendous international interest.

The duly elected democratic government of Salvador Allende was overthrown in a military coup d'état on September 11, 1973. The commanders in chief of the Army, the Navy, the Air Force, and the Director-General of the Corps of Carabineros (national police) jointly established a military government that became one of the more repressive dictatorships in the western hemisphere. A Decree-law was published on September 11, 1973, stating four components of the so-called "Government Military Junta" (Junta Militar de Gobierno).

President Nixon described Allende in his memoirs as a pro-Castro Marxist politician. He wrote that he, President Kennedy, and President Johnson authorised the CIA to help avert the communist takeover in Chile. (Nixon, 1978, p. 489-490).

A state of siege, as a state of war, was proclaimed throughout the nation. The country was mainly under the military code of justice that had extreme impacts on Chile's previous political and social status. The National Congress, political parties, trade unions, and professional organisations dissolved. Arbitrary detention, forced disappearance, and political killings were systematically implemented from the first day against the former government members and followers.

Each branch of the army forces has its intelligence service. They were the Military Intelligence Service (SIM), Navy Intelligence Service (SIN, in Spanish), Air Force Intelligence Service (SIFA), and the Carabineros Intelligence Service (SICAR). These services were actively involved in repression between 1973 and 1974 (Comisión Nacional de Prisión

Política y Tortura, 2004). The Directorate of National Intelligence (DINA) was created on June 14, 1974, and was responsible for coordinating, supervising, and producing intelligence information for the government. A General directed the DINA under the direct supervision of the Junta and later that of President Pinochet. (UN Report, 1975, p. 50).

The United Nations General Assembly, Amnesty International, and International Commission of Jurists issued statements calling for international intervention to stop executions, arbitrary arrests, torture, and deportations of civilians who supported the Allende government and refugees living in Chile that time.

Amnesty International (AI)

Amnesty International launched its first worldwide campaign to abolish torture in 1973: Amnesty International [AI] in London and the USA published the first report on the prevalence of torture worldwide and by country in 1973. The operational definition of torture used by AI in this study was: "Torture is the systematic and deliberate infliction of acute pain in any form by one person on another, or in a third person, to accomplish the purpose of the former against the will of the later." (Amnesty International 1975). The World Medical Association adopted a similar definition in its Declaration of Tokyo in 1975. (World Medical Association (WMA) 1975).

In October, at the UN meeting in New York, Amnesty International Secretary-General Martin Ennals was given assurances by the Chilean Foreign Minister, Admiral Ismael Huerta Diaz, that »torture is against the principles of the Chilean Government« and that all prisoners will be given a fair trial and the right to appeal their sentence. Admiral Huerta Diaz invited Amnesty International to visit Chile

and assured Mr. Ennals that such a mission would be free to carry out investigations.

An AI mission visited Chile from November 1-8, 1973. This was the first international mission after its foundation. The delegates were Professor Frank Newman, professor of law at the University of California, Judge Bruce W. Sumner, presiding judge of the Supreme Court of Orange County, California, and Roger Plant, a researcher in the Latin American Department of AI's International Secretariat.

The mission's terms of reference were to investigate all violations of human rights implemented by the military. Professor Frank Newman gave testimony on the findings of the AI mission to members of the Committee on Foreign Affairs of the United States House of Representatives on December 7, 1973. AI sent a cable to Chile's Military government protesting long prison sentences and death sentences on December 11, 1973.

The mission's report was sent in December 1973 to the Chilean Government. In a letter to General Pinochet, Martin Ennals urged that:

- extrajudicial executions, arbitrary detention, and torture be stopped,
- a list of victims of these violations be published,
- an account of the disappeared persons be made, and
- detained persons, against whom charges have not been filed, be released.

A detailed report of its finding in Chile was published in September 1974. The government, in a public statement, rejected the report. (Amnesty International Report, 1974, p.79).

The Inter-American Commission on Human Rights

The Inter-American Commission on Human Rights of the Organization of American States

(IACHR-CIDH) reported that the United Nations Commission on Human Rights, the International Labor Organization (ILO), the World Council of Churches, Amnesty International, and the International Organization of Jurists, among others, reacted with alarm to what was happening in Chile. Some of these organisations sent their representatives to the country in 1973.

The IACHR received complaints on September 14, 1973, from Amnesty International and the International Commission of Jurists. The IACHR sent a communication to the Chilean Minister of Foreign Affairs Admiral Ismael Huerta (September 20, 1973), giving an account of these episodes and the consent given by the Government of Chile for the visit of the Executive Secretary next days. (CIDH, 1974).

United Nations immediate action

As a member of the United Nations [UN], Chile must fulfill article 1, paragraph 3, and article 55 to "respect human rights and fundamental freedom for all without distinction as to race, sex, language, or religion."

The charter gives the UN the power to study, examine, and make recommendations to fulfill these obligations by the state. It was essential to study the UN's intense, focused, and prolonged reaction to Chile's severe violation of human rights. (United Nations, 1995, p. 143-144).

The General Assembly adopted resolution 3059 based on Article 5 of the Universal Declaration of Human Rights on November 2, 1973, which affirms that no one should be subjected to torture or cruel, inhuman, or degrading treatment or punishment. The resolution also urges all governments to become parties to existing international instruments, which contain provisions relating to the prohibition of torture. The General Assembly decided to examine the question of torture in their next year's session.

UN establish an ad hoc Working Group

The General Assembly, on November 6, 1974, under resolutions 32/119 Protection of Human rights in Chile, expressed big concern about reports of gross and massive violations of human rights, particularly those related to human life and liberty. The General Assembly adopted a resolution that created an Ad Hoc Working Group to »inquire into the present situation of human rights in Chile« visit the country, and present a report based on oral and written evidence gathered from all relevant sources.

In compliance with the General assembly's resolution, The Commission of HHRR nominated an Ad Hoc working group of five members in their capacity. The Chairman was Mr. G. A. Ali Allana from Pakistan, who appointed the four additional members. Mr. Leopoldo Benites from Ecuador, the President of the General Assembly at its twenty-ninth session; Abdoulaye Dièye, a member of the Supreme Court of Senegal; Professor Félix. Ermacora, a member of the Austrian parliament, and Mrs. M. J. T. Kamara, a social worker from Sierra Leone.

Despite the Chilean government's refusal to permit the Ad Hoc group to visit the country following its mandate, they presented a report to the thirtieth session of the agenda General Assembly as document A 10285, October 7, 1975.

The General Assembly reviewed the reports of the Ad Hoc Working Group on Human Rights in Chile and the documents submitted by the Chilean authorities in December 1976 and 1977.

The General Assembly concluded that constant and flagrant violations of basic human rights and fundamental freedoms continue to occur in Chile and expressed its profound indignation to extend the mandate of the Ad Hoc Working Group.

The Ad Hoc Working Group on Violations of Human Rights in Chile visited the country in July 1978. They reported some improvements, but violations continued with a lack of progress in investigating the fate of missing and disappeared persons, dissolution of labor organisations, confiscations of their properties, and the refusal of Chilean authorities to accept responsibility.

Declaration on the Protection of All Persons from Being Subjected to Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment

For the first time, the General Assembly adopted a Declaration on the Protection of All Persons from Being Subjected to Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment.

This critical declaration of 12 articles was made under resolution 3452 on December 9, 1975.

The first article defined torture as “any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted by or at the instigation of a public official on a person for such purposes as obtaining from him or third person information or confession, punishing him for an act he has committed or is suspected of having committed, or intimidating him or other persons. It does not include pain or suffering arising only from inherent in or incidental to, lawful sanctions to the extent consistent with the Standard Minimum Rules for the Treatment of Prisoners.”

The second article established that “any act of torture or other cruel, inhuman, or degrading treatment or punishment is an offense to human dignity and shall be condemned as a denial of the purposes of the Charter of the United Nations and as a violation of the human rights and fundamental freedoms proclaimed in the Universal Declaration of Human Rights.”

Following articles identify the state's responsibilities, defining the duty to take effective measures "to prevent torture and other cruel, inhuman, or degrading treatment or punishment from being practiced within its jurisdiction," and assure "the training of law enforcement personnel and of other public officials who may be responsible for persons deprived of their liberty shall ensure that full account is taken of the prohibition against torture and other cruel, inhuman, or degrading treatment or punishment" and to "... promptly proceed to an impartial investigation even if there has been no formal complaint." (Article 9).

United Nations established a Special Rapporteur on Human Rights in Chile

The UN General Assembly decided after a three-year mandate of the Ad-Hoc Group to replace it with a Special Rapporteur on the Situation of Human Rights in Chile. They would report directly to the Commission on Human Rights and the General Assembly (Resolution 33/175).

This was the first time that the UN General Assembly had created a country-specific Special Rapporteur on Human Rights active from 1979 to 1990. (United Nations General Assembly Resolution A/34/583/Add.1, N 1, November 21, 1979). The first Rapporteur was Abdoulaye Dièye (Limon & Power, 2014).

The General Assembly in Resolution 34/179 on December 17, 1979, declared: »Recalling the previous report concluded that the situation of human rights has not improved but deteriorated in many areas; concern on reports of the discovery of hundreds of unmarked graves in the cemetery of Santiago; reiterates its indignation and strongly urge the Chilean authorities to respect and promote human rights and investigate and clarify the fate of persons missing and disappearing. The Resolution also extended the mandate of the Special Rapporteur Abdoulaye

Dièye." After 1981, Rajsoomer Lallah replaced Mr. Dièye, and in 1985 Mr. Fernando Volio Jimenez (Costa Rica) was designated as Rapporteur (Sánchez, 1990, p. 65).

United Nations designated Antonio Cassese Special Rapporteur: Foreign economic aid and assistance and human rights in Chile

The Sub Commission on Prevention of Discrimination and Protection of Minorities of Human Rights Commission requested Antonio Cassese in 1976 as a special Rapporteur to prepare a study on the impact of foreign economic aid and assistance on respect for human rights in Chile.

The Rapporteur set out to investigate Chile's general economic and social situation. He tried to determine what kind of repercussion the economic policy carried out by the present government and what impact it has had on the economic, social, and cultural rights of the population. He also wanted to know whether that policy turned out to promote the effective implementation of those human rights of the Chileans or whether it proved detrimental to the realization of human rights. To undertake this research, it was necessary to determine the main trends of the economic policy pursued by the Chilean authorities.

The Rapporteur concluded that inequality resulted from the economic policy adopted by the government to favor small, elite, large landowners, financiers, industrialists, and military whose interests ignore the needs of the majority of the population (Fernández, Bohoslavsky & Smart, 2019).

United Nations establishes a Special Rapporteur on Enforced Disappearances in Chile

In 1978, the Human Rights Commission asked Félix Ermarcora, a member of the Working Group of Human Rights in Chile, to investigate

forced disappearances in Chile. In 1979, Ermacora delivered the “Report of the Expert on the Question of the Fate of Missing and Disappeared Persons in Chile.” This was a 91-page report that also analyses the state’s responsibility under international law. (UN Human Rights Commission, 21 November 1979).

The report stated: «The Government of Chile has the duty of explaining and clarifying to the international community the fate of these disappeared persons; to punish those responsible for the disappearance; to compensate the relatives of the victims and to take measures to prevent the recurrence of such cases in the future ... the disappearance of the disappeared persons in Chile is a violation of international humanitarian law (...) the disappearance of these persons constitutes a persistent pattern of human rights violations and a serious humanitarian problem for the relatives who wish to know, as is their right, what has happened to their relatives.» (United Nations, 1979, Supplement Six, p. 115).

After an exhaustive examination of the available documentary evidence, there was no indication whether any of the disappeared detainees were alive, including pregnant women and their babies. His report created the Working Group on Enforced and Involuntary Disappearances in 1980 as the Commission’s first thematic special procedure.

Establishment of the United Nations Trust Fund for Chile

For the first time, the General Assembly decided to establish a voluntary fund, called the United Nations Trust Fund for Chile, through resolution 33/174 on December 20, 1978. This fund was a plan to give humanitarian, legal, and financial aid to persons whose human rights have been violated by detention or imprisonment in Chile, those forced to leave the country, and relatives of persons in the above category.

Under the Financial Regulations of the United Nations, this fund was administered by the Secretary-General with the advice of a Board of Trustees, composed of a chair and four members with vast experience of the situation in Chile, who was appointed to serve for a three-year term. The Director of the Division of Human Rights and, with the advice of the Board of Trustees, determined the procedures for soliciting voluntary contributions to the Fund.

On August 14, 1979, the Secretary-General announced that he had appointed the following persons to serve for a three-year term on the Board of Trustees of the United Nations Trust Fund. Mr. Ghulam Ali Allana (Pakistan) as chairman, Mr. Leopoldo Benites (Ecuador), Mr. Hans Danelius (Sweden), Mrs. Marian J.T. Kamara (Sierra Leone), and Mr. Adam Lopatka (Poland). The Board members serve in their capacity. The Controller shall ensure that the operation and control of the Fund shall be by the Financial Regulations and Rules of the United Nations. The controller shall be responsible for reporting the financial transactions of the Fund (UN Report A/34/648 1979).

The United Nations Trust Fund for Chile changed to United Nations Voluntary Fund for Torture Victims

Three years after implementing the Trust Fund for Chile, the General Assembly re-designated this Fund as The United Nations Voluntary Fund for Torture Victims (UN VFFTV). This Fund was established by the General Assembly in Resolution 36/151, on December 16, 1981, with a mandate to support torture survivors and their families in any part of the world.

The United States Voluntary Fund for Torture Victims has been administered following the Financial Regulations of the United Nations by the Secretary-General, with the advice of a Board of Trustees of the Fund composed of a chair and four members with vast

experience in the field of human rights, acting in their capacity. (General Assembly Resolution 36/151).

The Fund is managed by the Office of the United Nations High Commissioner for Human Rights, with the advice of a Board of Trustees composed of independent experts from the five world regions.

The 40th anniversary of the Fund was in 2021, and it has already approved 171 direct assistance annual grants in 79 countries across all regions of the world. This assistance has contributed to the rehabilitation of more than 47,000 victims of torture and their families each year. (UN High Commissioner HR, 2006).

United Nations work of the Special Rapporteurs continued in Chile

The United Nations is concerned about human rights violations in Chile. Deeply worried about the persistence and, in certain respects, the deterioration of situations that affect the enjoyment and exercise of human rights and fundamental freedoms in Chile, extended the mandate of Special Rapporteur each year.

The last Special Rapporteur was Fernando Volio Jiménez that took over in 1985. Based on his report, the General Assembly condemns the persistence of torture, the repression of social protests, arbitrary detentions, and the death of opponents, among other actions. The Chilean government systematically rejected the reports, pointing out that the rapporteur did not consider the progress made and the resurgence of terrorism in the country.

On December 8, 1987, Fernando Volio made his third visit to Chile. The special rapporteur arrived in the country days before the Plebiscite and visited electoral precincts on October 5th. In March 1989, he resigned from his post for health reasons. The Chilean government informed the United Nations that it would not accept the appointment of any ad

hoc rapporteur, considering it a useless and unproductive route (Vargas, 1990; United Nations, E/CN, 4/1989/3).

The General Assembly takes note of the Special rapporteur's report and congratulates Chile for the peaceful progress towards the re-establishment of democracy. The General Assembly urged the government to ensure the independence of the judiciary and effective judicial procedures. In addition, it encouraged the government to investigate all cases of severe violations of human rights that occurred in the past.

The UN Commission on Human Rights, after the restoration of civilian democratic power after recent elections, decided that the mandate of the Special Rapporteur would not be renewed. (The General Assembly on resolution 44/166 on December 15, 1989).

Report of a mission of inquiring to Chile and the foundation of Physician for Human Rights in the US

Dr. Jonathan Fine was the Medical Director of North End Community Health Center in Boston, Massachusetts. He received a request to travel to Chile to investigate the situation of three physicians who were victims of torture in June 1981¹. Dr. James S. Koopman, Assistant Professor, Dept. Epidemiology, Uni-

1 Giorgio Solimano, MD faculty at Columbia University, and Roberto Belmar, MD faculty at the Montefiore Hospital, members of Chile Democrático (Democratic Chile), received the information of three distinguished physicians detained in Chile. They asked Dr. Fine and Dr Koopman, also members of the American Public Health Association, to travel to Chile in a fact-finding mission. The travel was sponsored by The American Public Health Associations (APHA), the American Association for the Advancement of Science (AAAS), the National Association of Social Workers, Physician Forum, and the Emergency Committee to Defend Chilean Health Workers.

Table 1. International organisations that visited Chile

Organisations	Visit Chile	Action	Results
Amnesty International (AI)	November 1 to 8 1973	AI Report 1974	The military rejected the report
UN High Commission for Refugees (UNHCR)	Chilean office under the refugee convention	Five shelters for refugees	Financed with emergency funds of UN
World Council of Churches (WCC)	A delegation remained in Chile for 4 months in 1973	Finance and supervised CONAR refugee program	More than 12,000 refugees in Chile were relocated

Table 2. United Nations General Assembly Resolutions on Protection of Human Rights in Chile

	Resolution Symbol	Publication Date
Ad Hoc working group	3219 XXIX	November 6, 1974
Protection of person of torture and CIDT	3452 XXX	December 9, 1975
	31/124	December 16, 1976
	32/118	December 17, 1977
	33/174	December 20, 1978
UN Trust Fund for Chile Special Rapporteur	33/175 33/176	December 20, 1978
	A/34/583/Add,1N1	November 21, 1979
Special Rapporteur	A34/179	December 17, 1979
Rapporteur on economic assistance		1976
Rapporteur on enforced disappearance.		1978
Fund for Chile change to UN Voluntary Fund for Torture Victims	36/151	December 16, 1981
General Assembly extended mandate of Special Rapporteur on Chile	36/157	December 16, 1981
General Assembly extended mandate of Special Rapporteur on Chile	39/46	March 11, 1981
UN Commission on Human Rights ends the mandate of the Special Rapporteur on Chile	44/166	December 15, 1989
UN Commission on HR ends the mandate of the Special Rapporteur on Chile.	Supplement No.2 1990/78	March 7, 1990

Table 3. United Nations Reports on Protection of Human Rights in Chile

UN Section	Mandate	Report	Document Symbol	Publication Date
General Assembly Secretary-General	Protection HR	Report 132 pages Annex 120 pages	A/1028	October 7, 1975
Economic and Social Council	Impact of Foreign economic Aid	Rapporteur Report Antonio Cassese	E/CN.4/Sub.2/412 Four volumes	August 3, 1978
General Assembly	Fate of missing and disappeared persons	Report of Expert 99 pages.	A/34/583/Add.1	November 21, 1979
Economic and Social Council	Human Rights on Chile	Report of Rapporteur Fernando Volio	E/CN.4/1989/7	November 17, 1989
Commission on Human Rights	Economic and Social Council	Report on the 46 session. Supplement No. 2		March 7, 1990

versity of Michigan, School of Public Health, and Ann Arbor, Michigan received the same call. The three tortured physicians were Dr. Manuel Almeida, aged 57; Dr. Pedro Castillo, 54; and Dr. Patricio Arroyo, 49. They were detained because they gave medical care to victims of torture and went on hunger strikes denouncing political repression. The mission remained in Chile from June 7 to 11. They could visit physicians in the jail and verify that they had been tortured. They also had a meeting with Jose M. Eyzaguirre, the acting president of the Supreme Court. The international pressure was efficient, and the three physicians were released, and the charges dropped. (Jefferys, 1981).

Dr. Fine and Koopman presented in a press conference on June 15 a fact-finding report that was published by the American Public Health Association (Human Rights, 1981). The New York Times and some medical

journals, such as the British Medical Journal, Science, and Lancet published the information about the three tortured physicians in Chile. (New York Times, 1981; Jadresic, 1981; Lyall, 2018; Wade, 1981; Jefferys, 1981). They also presented their findings at the Hearings of the House of Representatives Subcommittee on Human Rights and US Policy in the Multilateral Development Banks on July 21, 1981. The committee also published the hearing².

This mission changed Dr. Fine's life forever. He decided he would leave his medical practice and dedicate himself to the defense of human rights as a full-time work. He founded with his own economic resources the American Committee for Human Rights. Later, with John Constable's commitment, Carola

2 Serial No.97-20 of July 21-23, 1981. US Government Printing Office. Washington, 1981.

Eisenberg, Jack Geiger, Jane Green Schaller, and Robert Lawrence founded Physician for Human Rights in 1986. He was the first Executive Director (PHR, Lyall 2018, BMJ).

Legal, social, medical and psychological assistance for the rehabilitation of torture victims in Chile. The foundation of the first programs

The fall of the Popular Unity government elected was in 1970. There was the death of President Salvador Allende, and the installation of the military junta of government under General Augusto Pinochet, who was the commander in chief of the army, and mobilised international and national organisations that were helping the persecuted people.

In September 1973, two ecumenical initiatives started. One was in favor of foreign refugees (CONAR) and the other supported persecuted Chileans (COPACHI). It also caused the presentation of numerous complaints and denunciations alleging violations of human rights to the United Nations, the International Labor Organization, the Inter-American Commission of Human Rights, and international NGOs.

Foreign refugees: protection and social, and legal assistance.

The UNHCR (High Commissioner for Refugees) delegate in Chile, Oldrich Haselman, reached an agreement with the government on September 24 to install five shelters under the protection of the United Nations for foreign refugees, who were mainly Latin Americans. The UN Convention on Refugees framework was signed by Chile in 1951 and its 1967 Protocol, which the Allende government had ratified in 1972, allowing these agreements.

On September 20, 1973, a UNHCR office opened in Santiago. An ecumenical organisation, created by the bishop of the Lutheran



Figure 1. Memorial of medical doctors executed during Pinochet dictatorship

Church, Helmut Frenz, with the support of the World Council of Churches, the International Committee of the Red Cross (ICRC), the Intergovernmental Committee for European Migration (ICEM), and American Friends Service Committee (AFSC Quakers) had an official authorization to aid detainees and refugees granted by Decree-Law 1308 of October 3, 1973 (Espinoza, 2012).

Helmut Frenz described CONAR's main activities as providing material (food and lodging) and spiritual assistance to the refugees and medical services; legal aid for their departure and their relocation to other countries; resolving documentation problems; and legal advice in cases where required by the authorities (Frenz, 2006 p. 138). The WCC launched an *Emergency Task Force on the Chilean situation* in November 1973. (Calandra B 2010, p.25).

Demand grew from 600 refugees in September 1973 to 3,574 in March 1974. More than 40 countries received 2,608 of them, and 288 were repatriated to their countries of origin. In addition, some 1,500 fled illegally to Peru and Argentina. (CIDH, 1974). The military, after international pressure, accepted the creation of nine more refugee centers. These centers lodged 4,442 persons until 1974. (Garcés & Nicolls, 2005, Pp. 27-28).

Pro Paz Committee (1973- 1975) The “Committee of Cooperation for Peace in Chile (COPACHI)” was founded in October 1973 by the Methodist, Lutheran, Catholic, Pentecostal Churches, and the Jewish community. It was the first organisation to assist Chilean victims. COPACHI provided free medical care and mental health services through a network of volunteers, medical doctors, psychiatrists, and psychologists. In 1975, 2,166 people in Santiago consulted for mental health services. The health program provided a total of 64,986 consultations, including medical specialists and mental health care (COPACHI, 1975). The Committee dissolved under the pressure of the military government. (Bastias, 2014, p. 98).

Vicariate of Solidarity (1976-1992) The Cardinal Raúl Silva Henríquez as archbishop of the Archdiocese of Santiago, established the successor organisation, the Vicariate of Solidarity, in January 1976. The Vicariate gave legal, social, medical, and spiritual assistance to the Chilean victims of repression until the democratic government was in place in 1992. The two psychologists of COPACHI, incorporated with a psychiatrist, worked, providing mainly emergency consultation during the first years.

Social Aid Foundation of Christian Churches (Fundación de Ayuda Social de las Iglesias Cristianas (FASIC) is an ecumenical institution, founded in April 1975 to continue the

work of CONAR, and is supported by Methodist, Lutheran, Orthodox, Pentecostal, and Catholic Church representatives. The military junta, on April 12, 1975, published the Decree-Law (DL) 504, allowing the commutation of the prison sentence to “extrañamiento” (serving a sentence in freedom in another country without permission to return). The beneficiaries were the political prisoners sentenced by military tribunals. FASIC processed the arrangements for travel (visa, air ticket, and arrival in the refuge country) for individuals and their families. They also provided social and psychological care to the prisoner and his family until his departure. Between 1975 and 1980, 3,983 former political prisoners were released through FASIC for commutation of sentence and 3,299 family members (Orellana & Hutchinson, 1990, p 170; Harper, 2007).

As mentioned above, the denunciation of human rights violations led to the country’s condemnation by United Nations General Assembly every year. The former ambassador of the Popular Unity Government before the United States, Orlando Letelier, was assassinated in the embassy’s road in Washington in September of 1976, increasing the international pressure on the Chilean dictatorship. In this political context, the military junta dictated an Amnesty Decree-Law in April 1978, “to all persons who committed criminal acts, whether as perpetrators, accomplices, and accessories, when the State of Siege was in force, between September 11, 1973, and March 10, 1978” (DL 2191). Many former prisoners were able to decide whether to remain in the country or to continue the process of seeking refuge in other countries. The main effect was the dismissal of all ongoing legal proceedings for human rights violations. Extrajudicial executions, the disappearance of persons, and complaints of torture went unpunished.

Table 4: Legal, social, medical and psychological assistance institutions

1973	Coup d'Etat
1973	CONAR. Support to foreign refugees Ecumenical initiatives. COPACHI. Support of Chileans inside the country - Ecumenical UNHCR office in Santiago
1973-75	Pro-Paz Office
1975	FASIC - Fundación de Ayuda Social de las Iglesias Cristianas (Social Aid Foundation of Christian Churches). - Methodist, Lutheran, Orthodox, Pen- tecostal, and Catholic Church representatives
1976-92	Vicaria de la Solidaridad (Vicariate of Solidarity)
1979-	PIDEE - Fundación para la Infancia Dañada por Estados de Emergencia (Foundation for Children Harmed by States of Emergency)
1980-	CODEPU – Corporación para la defensa de los Derechos del Pueblo (Cor- poration for the Defense of People's Rights)
1985	CINTRAS – Centro de Investigación y Tratamiento del Estrés – (Stress Re- search and Treatment Center) – First IRCT centre in Chile.
1988	ILAS - Instituto Latinoamericano de Salud Mental y Derechos Humanos - (Latin American Institute of Mental Health and Human Rights)
1990	End of dictatorship
1991	PRAIS - Programa de Reparación y Atención Integral de Salud para las víc- timas de violaciones a los derechos humanos - Program of Reparations and Comprehensive Health Care for Victims of Human Rights Violations – Gu- bernamental Programme.

The needs of the victims who remained in the country were wide-ranging: protection, legal defense, housing, food, and health and mental health care. The agencies created to provide these services initially functioned as an emergency response, seeking to alleviate suffering, and responding to the most urgent needs. The intensification of repression and the severe consequences on individuals generated the need to expand medical and psychological care capacity.

Medical and psychological care to victims of torture

FASIC developed a specialised team that collaborated with mental health teams created in

other agencies in the following years. Some medical doctors who had collaborated with COPACHI had to go into exile. Some of them came up with the idea of forming a specialised program for the mental health care of the victims. Paz Rojas, neuropsychiatrist, Fanny Pollarolo, Mario Vidal, Mario Inzunza, psychiatrists, and Mariano Requena, a specialist in Public Health, contributed to formulating the project, which began at FASIC towards the end of 1977 as Programa Médico Psiquiátrico (PMS) ["Medical Psychiatric Program"] (Garcés & Nicholls, 2005, p. 68). After 1978, the first team was formed by Eliana Morales as a family therapist, and Eliana Ortiz and Norma Rojas as social workers; Elizabeth

Lira, Eugenia Weinstein, Rosario Dominguez, and Adriana Maggi as psychologists; Elena Gómez, Sofía Salamovich and María Angélica Monréal as psychiatrists. Fanny Pollarolo was its first director.

The program gave medical, psychological, and social care to victims of torture and their families, to relatives of forced disappearance victims, and to relatives of extrajudicial execution victims. After the first ten months of services, they cared for 382 victims. (Garcés & Nicolls, 2005, p. 69). After 1985, 4,174 persons received medical and psychological services (Weinstein, Lira & Rojas, 1987, p 17).

The clinical work initiated at FASIC made it necessary to use different formats (written and recorded) to work with the victims. The work methodologies combined medical and psychotherapeutic treatment and psychosocial follow-up of complex and overwhelming situations in conditions of vulnerability and insecurity of both victims and health teams.

Each victim had a file, which included legal and social information. This record refers to the “fact” that triggers the problem and defines the type of violation in question, operating as a situational diagnosis. The file’s organisation was according to the primary situation, such as “former political prisoners,” “relatives of disappeared detainees,” or “politically executed.” The search for treatment methods that would allow the victims to recognize and deploy their resources to cope with almost catastrophic experiences for many of them defined the therapeutic approach. The first publication on the team’s work appeared in a Chilean Jesuit magazine called *Mensaje* in 1978. It denounced the practice of torture, the consequences on the victims, and the difficult task of rehabilitation in very repressive political conditions: “Detenidos políticos: sufrimiento y esperanza” (Rodríguez, 1978).

The FASIC team prepared an international seminar for professionals working with victims of human rights violations in Chile and Latin America and professionals working with Latin-American refugees in Europe. The meeting brought social workers, lawyers, psychologists, physicians, and psychiatrists, mainly from Vicariate, FASIC, and other collaborators, to Punta de Tralca, a safe Catholic church house on the beach near Santiago [“The house of Cardinal Raul Silva Henriquez”] in April 1980. The papers and interventions on this meeting, published in 1982 in two-volume books, disseminated the experience and reflections achieved by these teams discussing the problems, clinical approaches, and difficulties working with victims under dictatorship. The book is “Crisis Política y Daño Psicológico. Lecturas de Psicología y Política” [Political Crisis and Psychological Harm: Readings in Psychology and Politics]. The authors residing in Chile appeared under pseudonyms³.

They began in 1978 with the documentation of testimonies to collect in textual form some particularly extreme and brutal situations of suffering from torture for their legal denunciation, which was requested by the consultants. The relationship between patient and therapist developed in a context that required sustained emotional and social support. Years later, a scientific article described the experience. (Cienfuegos & Monelli, 1983). The FASIC team published after 1984 under their names: “Psicoterapia y represión política” in México. After 1986 “Exilio 1986-1978”, [Exilio] and “Trauma, duelo y reparación” (1987) have the institutional affiliation. These writings describe the therapeutic approaches,

3 The book was reedited without changes in 2017, adding the authors’ names in a list.

the fundamental concepts used, and some results under the dictatorship.

The therapeutic process was based on the reconstruction of the traumatic experience; alleviating of symptoms; emotional elaboration (working through) of the traumatic experience; linking to the existential meanings of the subject's life; recovery of their social role; and collective links. (Weinstein, Lira & Rojas, 1987, p. 65).

The "Fundación para la Infancia Dañada por Estados de Emergencia" (PIDEE) [Foundation for Children Harmed by States of Emergency] started to provide psychological care, psycho-pedagogical support, and recreational workshops to children and young people affected by the political repression of their parents, in 1979. It reached about 12,000 children and young people.

The "Corporación de Promoción y Defensa de los Derechos del Pueblo" (CODEPU) [Denunciation, investigation, and treatment of the tortured and their family group] was founded in 1980. In 1981, a multidisciplinary team was structured for the "Denunciation, investigation and treatment of the tortured and their family group" with the name of DIT-T. Tortured and political prisoners inside prisons and their families received medical and psychological care by teams of DIT-T. They also assisted relatives of the executed, victims of forced disappearance, and returnees from exile. Its founder Paz Rojas wrote (...), "Suppose we would like to identify our work in epidemiological terms. In that case, we could say that the denunciation corresponds to a primary prevention level. It tries to create awareness and shape opinion to prevent political repression and torture. Our individual and collective therapeutic action is part of secondary prevention. Its attempt to repair the damage and, finally, our intransigent commitment to help build a society in which human rights are truly

respected constitutes, in our opinion, the third level of prevention." (CODEPU, 1989, p. 1).

The "Centros de Investigación y Tratamiento del Estrés" (CINTRAS) [The Stress, Research and Treatment Centre] started in 1985 with the International Rehabilitation Center for Torture Victims in Denmark's [IRCT] support. The CINTRAS team provided medical-psychological treatment to victims of serious human rights violations. Between 1985 and 1991, 1,344 people participated in different care programs. The professional teams offered individual, family, and group therapy. According to their statements, the therapeutic approach implemented theoretical and technical epistemological resources from the different currents of modern psychotherapy (Vidal, 1993; Madariaga, 2002). In addition, they implemented occupational therapy workshops for patients with severe psychic damage.

The "Instituto Latinoamericano de Salud Mental y Derechos Humanos (ILAS) [Latin American Institute of Mental Health and Human Rights]. In 1988, professionals who worked before in FASIC founded ILAS. The team provided therapeutic, medical, social, and psychological care to individuals and families that were mainly diagnosed as extremely traumatized, tortured people, relatives of victims of forced disappearance, and relatives of victims of political execution. The ILAS team developed clinical and psychosocial research. Established collaboration with governmental and non-governmental organisations supported health and mental health teams in several regions (Magallanes, Araucanía, Bío Bío, Tarapacá) before the end of dictatorship. They developed seminars and collaborative activities with Latin American professionals. They published articles and books documenting their work (Lira, Becker, & Castillo,

1990; Becker, Lira, Castillo, Gómez&, Kovalskys, 1990).

Some ILAS professionals participated in the recommendations for public policies on reparations for victims of human rights violations that included the provision of medical and psychological care. Some of them worked with the *National Commission for Truth and Reconciliation*, providing emergency support and mental health services to relatives and families who testified before the Commission and collaborated over the *National Commission for Truth and Reconciliation* recommendations regarding the health of victims.

Programa de Reparación y Atención Integral de Salud para las Víctimas de Violaciones a los Derechos Humanos 1973-1990 (PRAIS) [Program of Reparations and Comprehensive Health Care for Victims of Human Rights Violations]

At the end of the dictatorship, six mental health care teams in Santiago coordinated regularly. They contributed to creating the reparation program for victims of human rights violations recognised by the State of Chile, which started in 1991. Psychologists, psychiatrists, and social workers from the human rights organisations developed a psychosocial approach for clinical, medical, and psychosocial care (Agger & Jensen, 1996). This approach recognised the importance of acknowledging the victims by society and the therapeutic value of both access to justice and symbolic and solidarity actions in their favor. These actions were part of a rehabilitation process, despite the limited resources of the therapeutic teams and the impossibility of symbolic reparations under the dictatorship (Lira, 2001).

PRAIS is a health care program aimed at rehabilitating individuals and families affected by human rights violations during the

military dictatorship. A ministerial resolution established the right of free health, mental health, and care for victims recognised by the State (Domínguez et al., 1994). Law 19,980 (2004) officially defined PRAIS as a rehabilitation program for victims of human rights violations recognised by the State. The law specified that all beneficiaries have free health care at all public health services in Chile. On June 30, 2006, a ministerial resolution (“resolución exenta” N° 437) updated PRAIS technical regulation (N° 88) and complemented the law. It added a new category, recognizing the right to care for those working to protect human rights and providing services to victims for at least ten years under the dictatorship. (Lawyers, medical doctors, social workers, psychologists, journalists, and other workers of Human Rights organisations).

Chilean State has progressively recognised victims and their relatives (until the third generation), providing them the right to rehabilitation as part of the reparation process. The number of beneficiaries has been increasing every year. Despite the official purposes, it has been described that 16% of victims suffer from physical and psychological consequences years or decades after torture regardless of received medical and psychological care (Gómez-Varas, 2016). At the end of 2019, the number of beneficiaries reached near 800.000. After law 19.980 (2004) more medical doctors, psychiatrists, psychologists, and social workers were created under PRAIS, reaching 29, installed in regional hospitals.

From the beginning of the program, PRAIS’s clinical and therapeutic approach used the experiences of teams of social workers, psychiatrists, and psychologists, who worked under the dictatorship. The slogan of PRAIS is ‘Back to Life.’ Professionals working with victims have learned from the beginning that there is a need to connect the whole personal

experience of the victim, not only the traumatic one, with the social and political context. PRAIS also offers opportunities to process the memories of traumatic experiences through social activities. Rehabilitation in this context has implied working with victims, their families, and relatives for years to recover dignity and the capacity to give meaning to their own lives (Lira, 2016, p 216).

Final reflections

This article traces the trajectory of the pioneer actions of International Human Rights Organizations to stop political repression and human rights violations after the military coup. It shows how activities, initially directed at the situation in Chile, gave way to permanent instances and mechanisms for all countries. United Nations nominated an Ad Hoc Working Group on Human Rights for the first time in Chile. Later, the president of this working group was designated as a special rapporteur on human rights for the first time. One member of the same group was named a rapporteur on enforced disappearances in 1979. Years later, this work evolved into a convention. United Nations implemented a Trust fund for Chilean victims that becomes the UN Voluntary fund for torture victims.

This article also traces a genealogy of health actions mainly for torture victims. Health services were initiated in networks of volunteer professionals in 1973, which then created a care center in 1977 under the protection of the churches in Santiago, which was followed and expanded by other independent centers also installed in regions after 1980. This trajectory culminated when the National Commission for Truth and Reconciliation (1990-91) recommended creating “a special program and the funding and coordination will have to come from the Ministry of Health. Such a program should seek technical cooperation

from non-governmental health organisations, particularly those that have provided health care to this population and have accumulated valuable experience over all these years” (National Commission on Truth and Reconciliation, 1993, p 1068. (n 23). After 1991, started the health rehabilitation program (PRAIS) implemented throughout the country under the Ministry of Health, lasting until now.

As described in this paper, from 1973 through 1990, the victims of gross human rights violations in Chile and their families were given much-needed medical care and other critical support by physicians, psychologists, lawyers, and social workers. Their work was made possible by the protection offered to them by local and international organisations from the first beginning.

Denunciation of the existence of torture, its methods, and the groups affected was initially conceived as a legal task, carried out by lawyers starting with writs of habeas corpus and complaints against those responsible for arbitrary detention and torture. Later, medical doctors and psychologists denounced the medical and psychological consequences of torture. Denunciation became possible as therapeutic work became more systematic and clinicians identified and understood the emotional impact of political repression on victims and society.

In all the human rights institutions, the healing work resulted from denunciation, investigation, and treatment. The testimony method is an example of the unification of three principles:

- The testimony denounces the human rights violations.
- It supplies new knowledge about the repressive system.
- It has a healing effect on the person who bears witness.

With the benefit of hindsight, the experiences summarized here to provide lessons learned that have transcended the situation in Chile. The needs of the victims were at the center of the investigation and denunciations, seeking to establish the truth of what happened, generating national and international actions seeking justice and reparation, and reflected in international human rights law.

The health and mental health services organized in response to the emergency anticipated forms of reparation consolidated in health and memory policies in many other places. That has allowed new knowledge and answers to the needs of victims, integrating professional disciplines ethical and political perspectives at the service of the rehabilitation of victims and their families.

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Abbreviations

- AAAS American Association for the Advancement of Science
- AFSC Quakers American Friends Service Committee
- AI Amnesty International
- APHA American Public Health Association
- CIA Central Intelligence Agency (USA)
- CIDH Comisión Interamericana de Derechos Humanos [Inter-American Commission on

- Human Rights]
- CINTRAS Centro de Investigación y Tratamiento del Stress [The Stress Research and Treatment Center]
- CODEPU Corporación para la Defensa de los Derechos del Pueblo [Corporation for the Defense of People's Rights]
- CONAR Comisión Nacional de Refugiados [National Commission of Refugees]
- COPACHI Comité de Cooperación para la Paz en Chile [Committee of Cooperation for Peace in Chile]
- DINA Dirección de Inteligencia Nacional [Directorate of National Intelligence]
- DIT-T Denuncia, investigación y tratamiento del torturado y su grupo familiar [Denunciation, investigation, and treatment of the tortured and their family group]
- FASIC Fundación de Ayuda Social de las Iglesias Cristianas [Social Aid Foundation of Christian Churches]
- IACHR Inter-American Commission on Human Rights [In Spanish CIDH]
- ICEM Intergovernmental Committee for European Migration [In Spanish CIME]
- ICRC International Committee of the Red Cross
- ILAS Instituto Latinoamericano de Salud y Derechos Humanos [Latin American Institute of Mental Health and Human Rights]
- ILO International Labor Organization
- IRCT International Rehabilitation Center for Torture Victims. Denmark.
- PIDEE Fundación para la Infancia Dañada por Estados de Emergencia" [Foundation for Children Harmed by States of Emergency]
- PMS Programa Médico Psiquiátrico [Medical Psychiatric Program]
- PRAIS Programa de Reparación y Atención Integral de Salud para las víctimas de violaciones a los derechos humanos 1973-1990 [Program of Reparations and Comprehensive Health Care for Victims of Human Rights Violations 1973- 1990]
- SICAR Servicio de Inteligencia de Carabineros [Carabineros Intelligence Service]
- SIFA Servicio de Inteligencia de la Fuerza Aérea [Air Force Intelligence Service]
- SIM Servicio de Inteligencia Militar [Military Intelligence Service]
- SIN Servicio de Inteligencia Naval [Navy Intelligence Service]
- UNHCR United Nations High Commission for Refugees
- UN United Nations
- UN VFFTV United Nations Voluntary Fund for Torture Victims.
- USA United States of America
- WCC World Council of Churches
- WMA World Medical Association