

# Less-lethal weapons: ocular trauma in Chile as psychosocial trauma. Challenges from a human rights and comprehensive perspective

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## Key points of interest

- Survivors of ocular trauma from state violence suffer the consequences of psychosocial trauma.
- Rehabilitation of survivors of psychosocial trauma must consider comprehensive reparation, the right to truth, justice and guarantees of non-repetition.
- Psycholegal support and survivor organisations are relevant in recovery from psychosocial trauma

## Abstract

**Introduction:** In October 2019 in Chile, massive protests broke out in the so-called social uprising. The repressive response of the armed forces and Carabineros (Police) resulted in serious and massive violations of human rights, with between 400 and 500 victims of ocular trauma caused mainly by shots from anti-riot shotguns, constituting the largest number of cases in the world linked to a single event. It is proposed to evaluate the different dimensions of the impact of ocular trauma due to state violence, using the concept of psychosocial trauma and a support model that integrates the medical-psychological and social dimensions. **Methods:** Human rights violations of the period are described, focusing on cases of ocular trauma, and state and civil society responses. The requests of a survivors' organisations regarding truth, justice and reparation is presented. A clinical case of ocular trauma treated in our centre is analyzed. **Results:** Survivors of ocular trauma manifest post-traumatic reactions regardless of the severity of their ocular injuries. The impact on the mental health of survivors of ocular trauma due to state violence is a phenomenon where the psychic and psychosocial impact of trauma due to socio-political violence intersects with the short- and long-term mental health effects. **Discussion:** The impact of sociopolitical trauma must be understood considering both the individual and social subject, considering their cultural, socioeconomic and political reality. Recovery from traumatic psychological injury must be addressed in its medical, sensory rehabilitation, psychological and psychosocial dimensions, including processes of social recognition, search for justice and comprehensive reparation of damage. In contexts of impunity, a model is proposed that integrates rehabilitation with psycho-legal support, promotion of agency and organisation, within the framework of commitment to the movement and principles of human rights.

**Keywords:** State Violence, ocular trauma, psychosocial trauma, comprehensive reparation, human rights

### Social uprising in Chile and the impact of ocular trauma

#### *The social revolt of October 2019*

In October 2019 in Chile, massive protests were unleashed in the so-called social uprising or revolt, which began in Santiago and soon spread to practically all regions of the country, continuing until March 2020. The immediate trigger for the crisis was the hike in public transport fares in the capital, which led to a series of mass evasions in the Santiago metro, organised by high school students. This movement was the culmination of an escalation of social protests in previous years over student, social security, feminist, environmental and other demands.

The political system was unable to provide effective solutions to this series of demands, anchored in structural inequality, that the current democratic system has not been able to resolve. Chile is 68% more unequal than the average OECD country and the average income in the country does not reflect the GDP growth of the last decade (Instituto Nacional de Derechos Humanos [INDH], 2019). In addition to this structural inequality and the deficit in ensuring social rights, which weakened the credibility of the political system's ability to resolve popular unrest, a series of scandals were added in the years prior to the social outbreak, such as: set-ups by Carabineros de Chile (state police) to accuse members of the Mapuche people<sup>1</sup> of acts in which they had not participated, the murder of Mapuche community members, embezzlement of funds in the police and the army, and irregular financing of political campaigns, which ended up undermining confidence in many public institutions.

The spark that ignited the demonstrations occurred with the first mass evasions in the capital's underground train around October 10, 2019, which progressively escalated, as a result of the violent police response. The demonstrations had their peak on Friday October 18, when the metro service was completely interrupted and massive protests were generated in various parts of the capital; people were banging pots and pans, and looting and burning some metro stations. As a result of this critical situation, on the night of October 18, the president at the time, Sebastián Piñera, decreed a constitutional state of emergency in the Metropolitan Region, which enabled the military and the police to take action, as well as the establishment of other measures such as a curfew. In the days that followed, the protests spread to various regions of the country, as did the state of emergency measures. In a national television broadcast on October 20, the President of the Republic made the following statement, which for many triggered memories of the recent dictatorial period: *"We are at war against a powerful, implacable enemy that respects nothing and no one and is willing*

*to use violence and crime without limit"*. Once again, the people were seen as the "enemy of the fatherland".

The protests lasted for several weeks, reaching a climax on October 25 with mass marches in Santiago and several other regions of the country; more than a million people marched peacefully in the capital alone. Aware that the basis of structural inequality lay in the political constitution approved through a fraudulent plebiscite in 1980 during the Pinochet dictatorship (Spyer & Alvarado, 2021), the slogans of these demonstrations focused especially on the demand to convene a constituent assembly to draft a new constitution. On November 15, in an attempt to find an institutional solution to the social unrest, most political parties signed an agreement to initiate a constituent process, the so-called "agreement for peace and a new constitution". However, social protests continued until the beginning of 2020, only to be interrupted by the COVID-19 pandemic crisis.

#### *Massive human rights violations and eye trauma*

The response of the forces of order and security, both the police and the army during the period of constitutional state of emergency, resulted in serious and massive human rights violations throughout the country, as noted by various international organisations that visited Chile in the context of the social uprising (United Nations Office of the High Commissioner for Human Rights [OHCHR], 2019; Amnesty International [AI], 2020; Human Rights Watch [HRW], 2019), and the National Institute of Human Rights (INDH, 2019) itself in its report for 2019. The report of the United Nations High Commissioner for Human Rights (2019) states: *"from 18 October onwards, a high number of serious human rights violations have been committed. These violations include excessive or unnecessary use of force that led to arbitrary deprivation of life and injuries, torture and ill-treatment, sexual violence, and arbitrary detentions. (...) the improper use of less lethal weapons and cases of ill-treatment, are recurrent over time and space, and involve the same alleged perpetrators and victims. (...) The alarmingly high number of people with injuries to the eyes or face attests to this serious violation"* (p. 29).

The National Institute of Human Rights as of October 2023 (INDH, n.d.) counted 3,777 victims who reported violations of their human rights in the context of the protests, including 7 deaths and 3,581 people with physical injuries not resulting in death, registering a total of 6,807 reported incidents. Of the total number of victims, 16% were children or adolescents and 25% were women. As of 30 November 2019, the INDH (2019) reported 1,807 injuries by firearms, 87.42% by "less lethal" weapons (mainly pellets from riot shotguns with

1 The Mapuche are the largest group of indigenous people in Chile.

multi-projectile cartridges), 2.58% by lethal weapons and 10% unclassified weapons. It also reported 1,462 injuries from other causes, including injuries from tear gas bombs, from blows inflicted by the police or members of the Armed Forces, and various traumas caused by state agents. For the same period of time, the Ministry of Health presents a statistic of 11,179 people injured in the context of the social conflict (the difference in the figure is explained by the fact that the INDH only counts injuries caused by state agents who reported the incident to this institution). The massive scale of these human rights violations has not been seen in Chile since the Pinochet dictatorship.

Carabineros, through an official request from a group of journalists, stated that between October and December 2019 they fired 152,000 12-gauge cartridges, each with 12 pellets, becoming the main method of injury to the population during the outbreak (Weibel & Jara, 2020). Reynhout (2020), in a ballistic study, shows that even when following the recommendations for use, there is a high probability that the projectiles will cause eye trauma. On the other hand, there is evidence that the pellets used during the uprising contain toxic metals, harder than the so-called “rubber” pellets, causing greater tissue injury. A study of the composition of pellets extracted from eye injuries shows that they have a composition of 20% rubber and 80% of various other compounds, mainly silica, barium sulphate and lead (Jorquera & Palma, 2019). Many victims to this day still have pellets in different parts of their bodies that cannot be removed, with the consequent risk to their long-term health (Ministerio de Salud de Chile [MINSAL], 2023a).

National and international public opinion was particularly shocked by the large number of injuries in the form of eye trauma caused mainly by buckshot or pellets from riot guns, “less lethal” weapons that use kinetic impact projectiles and are authorised by the police in various parts of the world for the control of public order in mass demonstrations. Eye trauma in Chile during the period of the social uprising, ranging from contusions to penetrating wounds and eye bursts, has accounted for the largest number of such cases in the world (Rodriguez et al., 2021).

The Ministry of Health defines ocular trauma as “*trauma caused by blunt or penetrating mechanisms to the eyeball and its peripheral structures, causing tissue damage of varying degrees of affectation (...) with temporary or permanent compromise of visual function*” (MINSAL, 2022, p. 7). In the case of severe ocular trauma, various complications can occur, even leading to anatomical or functional loss of the organ, despite adequate treatment.

Officially, in 2019, the INDH counted a total of 347 eye injuries caused by state agents and later, in a 2020 report, recorded a total of 445 cases of eye trauma “*resulting from the indiscriminate, excessive and out-of-protocol use of firearms and other*

*projectiles*” (INDH, 2020, p. 15), finding that 8% corresponded to ocular open-globe injury (a full-thickness wound of the eye-wall) or total loss of the organ. To date, there have been 220 complaints for some type of eye trauma, 82 related to loss of vision and 50 of them related to ocular open-globe injury. The Comprehensive Eye Repair Programme (PIRO) implemented by the Ministry of Health reports 397 cases entered into the programme by March 2022, and 60 cases of eye trauma registered but not finally entered into the care programme. There is still confusion regarding the total number of victims of eye trauma, an example of this being the controversial decrease of the official number of cases reported by the INDH (2021) to 181 (those cases prosecuted), while its official website, continues to report a total of 220<sup>2</sup>. Finally, survivors’ organisations count more than 500 cases, as they submitted to an investigative commission of the Chilean Chamber of Deputies (Cámara de Diputados de Chile, 2021). Among the victims there are two survivors with bilateral ocular open-globe injury and permanent total loss of vision, one from a riot shotgun and the other from severe craniofacial trauma caused by the impact of a tear gas canister fired by the police. After the social uprising, less frequent cases have continued to occur, the latest being a woman with an open-globe injury with a pellet lodged in her eye, an aggression that occurred, significantly, on 11 September 2023, the commemoration of the fiftieth anniversary of the 1973 coup d’état.

A study by the Ophthalmology unit of the Hospital del Salvador, a hospital in the capital that treated eye injuries during the social uprising, reported that between October and November 2019, 259 patients were evaluated for eye trauma, 75% of the cases were due to kinetic impact projectiles, and the rest to injuries caused by other types of aggression, including tear gas bombs, blows from batons or fists, water from the water cannon and firearms. About 50% of the cases had blindness or severe vision loss and approximately 20% suffered eye open-globe injury (Rodriguez et al., 2020).

### State response and civil society organisations

The “Agreement for Peace and the New Constitution” of November 2019 was the effort of the political system to respond to the unrest among Chilean society during the social revolt, setting rules to initiate a constituent process that would replace the 1980 Constitution inherited from the military dictatorship, with a new text drafted in a democratic manner/context. In October 2020, a plebiscite was held that approved the drafting of a new constitution through an elected constitutional convention, that delivered a progressive constitutional project that was re-

2 www.indh.cl

jected by the citizens in a second plebiscite in September 2021. The political forces then agreed to promote a new process, this time much more limited both in terms of democratic participation and time, with the resultant conservative proposal also being rejected in a plebiscite in December 2022. This concluded a process of constitutional change as a means of addressing the causes of the crisis of the social revolt in October 2019.

In parallel, on 22 November 2019, the government of Sebastián Piñera created the Technical Advisory Committee on Human Rights, headed by the Undersecretariat for Human Rights, in order to respond to the recommendations made to the State of Chile in relation to the right to protest and the role of the police. From this coordination, the Programa Integral de Reparación Ocular (PIRO) (Comprehensive Eye Reparation Programme) was implemented in order to provide care and reparation to victims of eye trauma in the context of the social unrest. This programme operated in the Hospital del Salvador in Santiago and only had one psychiatrist, one psychologist, one ophthalmologist, one occupational therapist, one medical technologist, one occupational therapist, two social workers, one support technician and one administrative assistant to attend to all the victims in the country. In July 2022, the new government, headed by President Gabriel Boric, created the Plan de Acompañamiento y Cuidados a Personas Víctimas de Trauma Ocular (PACTO) (Support and Care Plan for People Victims of Ocular Trauma), strengthening the previous programme, which, from that moment on, has addressed health care in an ongoing manner, emphasising mental health and having responsible health workers in different parts of the country. There is a technical regulation for operation, approved in August 2023 (MINSAL, 2023b). However, organisations have been critical, emphasising the fact that it does not attend to victims of non-ocular injuries, that there are problems in the programme's funding<sup>3</sup> and that it is dissociated from progress in other reparation measures.

The national budget law also included a provision to finance presidential pensions for victims of violence during the social upheaval who had a permanent, complete or partial impairment of their ability to work, subject to accreditation by the National Human Rights Institute (INDH). As of 03 January 2023, 367 pensions had been granted. At present, a controversy has arisen regarding these presidential pensions, questioning their validity and seeking ways to cancel them in some cases, stating that people who have a criminal record or have judgements against them would not be worthy of them.

For its part, on 8 January 2020, the Chamber of Deputies created a Special Commission of Inquiry into the actions of the government and the police, on the control of public order issue. In numerous sessions, victims, human rights organisations and authorities were heard, concluding that serious, massive and widespread human rights violations had occurred and that the policy exercised had the purpose of punishing and discouraging the civilian population from exercising their legitimate right to protest. In its conclusions, the Inquiry stated that the State has a duty to investigate, punish the guilty parties and make reparations to the victims. To this end, it recommended strengthening the PIRO Programme, developing a comprehensive reparation policy and instructing the State Defence Council to agree to accept all compensation claims filed by victims of human rights violations that occurred from October 2019 onwards. None of these recommendations have been fully implemented by the Chilean State.

In both the Chamber of Deputies and the Senate, various bills have been presented that seek to legislate on the use of force, placing greater requirements on the use of dissuasive means in demonstrations; others aim to address structural aspects of state security legislation, pardon or amnesty for political prisoners of the uprising and several bills refer to reparations, but none of them have reached the quorum necessary for their approval, so they continue to be discussed in parliament.

In August 2022, a Roundtable for Integral Reparation was created by the government, with the active participation of victims in zonal meetings, in which various proposals were discussed and the opinions of professionals and academics were heard. All of this was recorded, systematised and consolidated in a proposal that was disseminated among the survivors in January 2023. However, it should be noted that, more than four years after the social upheaval, the implementation of these recommendations by the State has been slow and scarce, and have not fully complied with its obligations in terms of Truth, Justice, Reparation and Guarantees of Non-Repitition.

#### *Civil society response*

The response from civil society was immediate: students and health professionals in particular banded together and organised to establish points of assistance in the streets, providing first aid care to those injured in the demonstrations since 19 October 2019. Organisations such as the Red Cross, Salud a la Calle, Movimiento Salud en Resistencia and others did the same. A health network of more than 15 organisations was established to respond to the violence of the State during the first weeks of the social outbreak. Supply collection centres were also set up,

3 In 2023 the Chamber of Deputies decreased by 100% the special budget allocated to this item for 2024.

coordinating donations in Chile and abroad, with hundreds of volunteers organised throughout the country.

Health posts provided medical assistance, psychological first aid and legal support to victims. Timely referrals for more complex cases to health centres were arranged in coordination with the State emergency service, and deferred check-ups and evaluation of old pellet wounds were carried out. The organisations estimate that the informal health network attended to 4,600 victims in first aid posts, where 75% were men, 21% women, 4% non-binary, 7% were adolescents between 14 and 17 years old, and there were cases of children under 17 years old, pregnant women and older adults (Movimiento Salud en Resistencia, 2019).

Human Rights Observers Brigades were also organised, made up of hundreds of volunteers who recorded the aggressions committed by the police at demonstrations and police stations. Lawyers and law students counselled victims and filed civil and criminal complaints to shed light on crimes and seek punishment for the perpetrators. Several Professional Associations were active through their respective Human Rights Departments, producing reports, studies, organising forums, talks and providing assistance in their respective specialities. It is important to highlight the role of the College of Ophthalmologists, which produced crucial reports on the high number of victims of eye trauma. For its part, the Chilean Medical Association produced multiple reports on injuries and health damages, following the principles of the Istanbul Protocol, data that has been very useful in judicial proceedings (Colegio Médico, 2020).

#### *Little progress in justice and persistent impunity*

Despite the efforts made by civil society organisations, the scant and slow response of the Chilean justice system to the cases of human rights violations perpetrated during the social unrest is devastating. Four years on, of the 10,568 complaints filed, only 27 cases have led to convictions. That is to say, only 2% of matters have been brought to justice (AI, 2023). By 2021, the Prosecutor's Office had already closed 46% of the cases without formalised charges (Weibel, 2021), and by the fourth anniversary of the outbreak in October 2023, 80% of the cases had been closed (Mellado, 2023).

Our Centre for Mental Health and Human Rights is representing in court six victims of eye trauma, including the two survivors with double eye open-globe injury. In these cases, the actions of police officers transgressed their own rules and regulations for the establishment of public order and the use of force, and failed to respect the principles of legality, proportionality, gradual escalation and accountability established by the United Nations, for the legitimate use of force.

The biggest problem in obtaining justice has stemmed from the difficulty in identifying the perpetrators of the crimes, as there has been silence on the part of the agents of the agencies involved, and a refusal or delay in handing over documents, records and evidence. This has been compounded by the destruction or alteration of the body camera footage of the agents and their records. Only in one of the cases have we achieved justice in criminal matters, since after an exhaustive investigation carried out by the Public Prosecutor's Office and after a long oral trial, a conviction was secured against the direct perpetrator for the crime of unlawful coercion causing very serious injuries. They were sentenced to imprisonment for 12 years and 183 days, a process that is currently under final judgement.<sup>4</sup> At the same time, in this case, an administrative inquiry was carried out that ended with the dismissal of two Carabineros captains, and a civil claim for compensation is in process, having been accepted in the first instance by the courts.

The other cases are still at the investigation stage with no one formalised and the respective civil claims for reparation still being processed.

#### **Victims' groups and their demands**

Victims of violence by state agents began to meet and seek each other out shortly after the start of the mobilisations in October 2019. Thus, as early as November, the first victims' meetings were held, in which interested social actors also participated, seeking mutual support and coordination. They were mainly developed in the first two years after the outbreak, providing socio-affective support, recognition, as well as guidance on legal and health care needs. Subsequently, they have remained movements that carry out public awareness-raising and policy advocacy activities, coordinating with public and civil society institutions to advance reparations and justice. The most well-established organisation during that time and that maintains activities to this day is the Coordinadora de Víctimas de Trauma Ocular (CVTO) (Ocular Trauma Victims Organisation), an organisation led by survivors and family members.

For the organisations, it has not been an easy road and they have a critical view of what has happened in terms of justice and reparation. Along with the limited advances in justice, they have had to confront adverse public opinion and political signals that tend to blame them and criminalise their life stories and demands. The hostile and stigmatising socio-political context often translates into a worsening or making chronic the survivors' mental health problems, which over time has led to fatigue and lack of participation in the organisations. In the words of a leader

<sup>4</sup> Case RIT 60-2022 of the Oral Criminal Court of San Bernardo.

of the Coordinadora de Víctimas de Trauma Ocular, what she perceives is “*a change in society that is more hostile, not only in common interactions but also towards the people who were attacked, we are stigmatised, judged, treated as criminals... it has been very hard not to feel empathy from the people or the government’s intention to take action regarding human rights*”.

Despite the existing state health programmes, the opinion of the collective is that they do not meet their needs. The evaluation of the PIRO and PACTO programmes is that they are insufficient for the existing demand, with poor coverage in regions, few professionals (and without all the necessary specialties), little access to psychological care and without the assistance of psychiatrists on a reliable basis. The lack of training in human rights and ethical commitment of some professionals has led to experiences of re-victimisation and privatisation of trauma (in the sense of psychological internalization of suffering, which results in silence and experiencing harm as an individual/private problem, dissociated from the social roots of violence). The programme lacks social, labour, economic and educational intervention dimensions, which have been impacted for eye trauma survivors, and are an aspect of a comprehensive rehabilitation programme.

#### *Demands from the victims’ collective*

From August 2022 to March 2023, the Coordinadora de Víctimas de Trauma Ocular, together with other organisations and survivors, participated in meetings of a reparation roundtable promoted by the Human Rights Secretariat of the Ministry of Justice and Human Rights, which gathered the collective’s views and requests for reparation (Ministerio de Justicia y Derechos Humanos de Chile [MinjuDDHH], 2023). From these discussions, proposals and recommendations emerged regarding the State’s responsibilities concerning reparation and respect for human rights:

- Right to Truth. This includes the recommendation that the State take measures to clarify the events that occurred during the social uprising, specifying their social, economic, political and cultural causes; that it address the impact of the violence on children and other specially protected groups; and that it create a truth commission that recognises the status of victims.
- Right to Justice. It is recommended to strengthen access to adequate justice, to strengthen support processes in trials, to investigate crimes diligently, to avoid repeated testimonies in various institutional instances and to pursue the punishment of those responsible.
- The recommendations on Comprehensive Reparation address aspects of compensation (such as the creation of reparation pensions for those whose lives or work have been affected, and compensation for medical expenses) and restitution (such as

reinsertion into the labour market, academic reintegration and the creation of study grants for victims).

- For health rehabilitation, recommendations included: a) The creation of a physical and mental health care programme that is “*continuous, regular, free and lifelong, with universal access and cultural relevance*” (MinjuDDHH, 2023, p. 46) throughout the country, where officials are trained in a human rights and gender approach. b) Support for access to health services for victims in areas far from specialised care. c) That the programme has a comprehensive approach and includes the different types of victims of institutional violence. d) Technical and ethical quality of health and justice professionals, which minimises the experience of re-victimisation in care and drop-outs from support programmes.
- Guarantees of Non-Repetition underlines the need to address the socio-economic causes of the outbreak and the processes of stigmatisation and institutional discrimination. It also includes proposals to strengthen national human rights institutions, human rights education programmes and a rights-based approach in law enforcement and security institutions.
- Regarding Memory, the aim is to promote the production of knowledge and cultural projects on the social revolt and human rights, the creation of documentation centres and the protection of spaces of memory in places that were significant during the social demonstrations.

#### **Case report of N., eye trauma survivor**

Since the social uprising of 18 October 2019, the NGO CINTRAS (Centre for Mental Health and Human Rights, a member of the International Rehabilitation Council for Torture Victims - IRCT) has assisted people who have suffered eye trauma and their families, facilitating their psychosocial and physical rehabilitation through psychological care, occupational therapy, psychiatric and physiotherapeutic treatment, employment support, counselling and legal support during the rehabilitation process. In total, CINTRAS has so far attended to 149 victims of human rights violations in the context of the social outbreak, 18 of them with eye trauma injuries.

N. is a young male university student who was 17 years old at the time of the attack. It is important to note that his mother had been detained during the military dictatorship and his grandfather was a political prisoner and torture survivor during that period. In the early hours of Saturday 21 December 2019, N. was demonstrating with friends and around 30 neighbouring families in his neighbourhood in the city of Santiago. From inside a gas vehicle that arrived in the area, three unmarked policemen got out and, without any provocation from the demonstrators, began to shoot with riot shotguns and tear gas

towards the people from about 10 metres away. N. was hit by 7 pellets fired at close range, two in his legs, three in his arms, one in his gluteal zone and one in his face. He suffered total loss of vision in his left eye due to an eye open-globe injury. Carabineros did not help and N. had to be taken by his family to one and then another private clinic in the capital.

N. has received comprehensive rehabilitation at our centre since February 2020 to date, with care from a psychiatrist, psychologist, legal assistance from a lawyer and occupational therapy. At the beginning he received home support due to his visual impairment, where the degree of affectation of his time-space orientation and the degree of difficulty for his functional performance were evaluated. An intervention aimed at teachers and students was also coordinated with the management of the school where N. was studying to ensure his integration in a safe and non-discriminatory environment; safe access routes were implemented in the establishment, he obtained a suitable location within the classroom and the pedagogical material was modified to accommodate his visual impairment. N. always refused to use a cane as instructed.

As he began his rehabilitation process at CINTRAS, N. was seen by an ophthalmologist, a member of the Human Rights Department of the Chilean Medical Association, who carried out an evaluation and summary of the medical care received to date. The ophthalmologist drew up a medical report on the injuries inflicted on him in the context of the human rights violations, diagnosing: ocular open-globe injury due to pellet impact in the left eye, palpebral injury in the left eye due to pellets, multiple pellet injuries in the upper and lower right and left limbs and left gluteal zone, risk of post-traumatic stress disorder. In October 2020, he was classified by the State as suffering from a permanent visual sensory impairment of 24.8%.

At the beginning, N. presented with many nightmares, difficulty falling asleep, frequent headaches, re-experiencing and flashbacks, difficulties that gradually disappeared over the course of the months of treatment. He still has feelings of hopelessness, impotence and anger about the experience, directed against all the forces of law and order, especially against Carabineros. He also suffers from hyper-alertness and hyper-activation, with recurrent fears of losing his other eye, and experiences anxiety when in contact with the police. For example, when he went to take the tests required for university admission at the end of 2020, when he arrived at the school, police officers carried out the usual identity check in this context, which caused him an anxiety crisis.

The family suffering caused by the repressive experience is evident. His sister has required psychological support following the assault and the whole family group has been financially

affected by the health expenses associated with the treatment of the physical injuries.

Another disturbing aspect of N.'s recovery was dealing with the early limitations of mobilisation due to the COVID-19 pandemic. After having participated in a social outburst where millions of people took to the streets under the slogan "Chile woke up" with demands for equality and dignity, the pandemic suddenly brought him back home to prevent contagion. During 2020, the country was under quarantine and curfew, and restrictive four-hour travel permits made it very difficult for him to participate in his rehabilitation activities.

During June 2022, N. was evaluated at the Forensic Medical Service of the Ministry of Justice and Human Rights, a procedure requested by the prosecution in a case sponsored by the National Institute of Human Rights and the lawyer of our centre. A psychologist and an ophthalmologist carried out an expert assessment based on the Istanbul Protocol and drew up a report highlighting the permanent disability resulting from the eye trauma caused by the firearm with functional and aesthetic sequelae, post-traumatic anxious-depressive symptoms, and the concordance between the physical and psychological findings and the allegations of abuse. N. states how these new evaluations affect him emotionally, despite the meaning that the search for justice has for him, "*Now, after they did the physical examination here, having to recount everything, I have dreams again of gunshots, of police officers nearby and all that*".

N. has elaborated that, despite the life break he experienced, he will never regret what he lived through and expresses feelings of pride in his participation in a just movement. Today, after the rejection of the project for a more progressive constitution in September 2022, he is frustrated by the fact that social changes did not transpire: "*that Chile that woke up, went back to sleep*". Regarding his visual rehabilitation, he considers that he has normalised seeing with only one eye, has resumed his occupational and functional life, takes more precautions and has a better psychological integration of the traumatic experience.

However, he maintains reactions of re-traumatisation associated with subjective responses to socio-political keys: the scant recognition by the state and society of victims of eye trauma, the stigmatisation of victims, the poor progress in justice and the setback in political projects for change. He maintains a low level of trust in institutions. The suicide of four victims of eye trauma has had a notable impact on N., reactivating traumatic emotional processes from a shared experience and a high level of identification with the affected community. It expresses the need to repair the dignity of those affected, blaming the State for the abandonment and precariousness of their lives.

In the case of N., the community's power of reparation has been evident. The support and recognition of his family, neighbours, friends, survivors' organisations and human rights organisations have played a key role in the security, the link with the community and the capacity to express and elaborate on the de-privatisation of pain.

**Reflection and conclusions. Eye trauma as psychosocial trauma: challenges from a human rights and reparation perspective.**

The damage caused by state violence during the social uprising in Chile in the form of eye trauma is evident both in the number of people impacted and the extent of their injuries. The case of N. generates several relevant considerations, including: the traumatic reactions in the form of anguish and avoidance show us the deterrent effect that State violence can have on mobilised people, limiting their right to protest; the evident transgenerational connection of the struggles and the damage that links the experience of the dictatorship with that of the social revolt; the impacts that the search for justice can have by exposing survivors to successive evaluations that force them to recall the events in order to retell them, with the accompanying risk of re-victimisation, especially when the procedure is inadequate or ill-timed. These are issues that deserve a broader and deeper analysis, but which do not fit within the context of this paper.

The human wound produced by eye trauma due to State violence has an impact on different dimensions and can be evaluated in a more comprehensive way utilising the concept of psychosocial trauma, which accounts for the impact on the bodies and vision of survivors, as well as on their mental health, interpersonal and broader social relationships, identity, frames of reference and their relationship with the social and political development of groups and institutions. Trauma as a "total social fact" (Madariaga, 2018), involves the person in an integral way, impacting on a biological, psychological and social level; it can only be fully understood by considering the reality of the individual subject (individual trauma) as well as its dimension as an event installed in the social subject (social/collective trauma), its cultural, socio-economic and political reality. The social subject in social psychology is the group of people united by a common identity and experience, who have agency over the society in which they live. It is necessary to bear in mind that the trauma produced by socio-political and organised violence has its origin in and impacts on social relations, reflected in the concept of psychosocial trauma, coined by Ignacio Martín Baró based on the experience of violence in Latin America (in Madariaga, 2018).

The impact on the mental health of survivors of eye trauma due to state violence is an obvious phenomenon with complex roots, where risk factors for both the psychic and psychosocial impact of trauma due to socio-political violence<sup>5</sup>, and the short- and long-term mental health effects of eye trauma itself intersect with varying levels of long-term physical disability. As the existing literature shows (Alexander et al., 2001; Lester et al., 2022), we have observed that reactive emotional adjustment to ocular trauma, whether or not produced by violence, involves a particular grieving process associated with both physical recovery and the contextual developments of the post-traumatic period. This is most evident in those survivors who have lost vision in one or both eyes and require complex surgical interventions, adaptation to prostheses and rehabilitation in the functionality of activities of daily living.

For survivors of trauma in the social revolt, various mental health impacts of different types of violence have also been described. These include emotional shock reactions, panic attacks, dissociative states, acute stress reactions, post-traumatic stress reactions, anxiety and depression disorders, chronic pain, substance use and sleep disorders (Movimiento Salud en Resistencia, 2023; Madariaga, 2019), emphasising the tendency for symptoms to become chronic in clinical populations and highlighting neuropsychiatric symptoms secondary to high doses of lead in blood.

All eye trauma survivors report post-traumatic reactions in clinical experience, both in those with permanent visual impairment and in those who have regained vision and function. One consequence of these post-traumatic manifestations has been the four cases of eye trauma victims who have completed suicide and the multiple cases observed by the community of survivors with suicidal ideation or attempts. Suicides have a clear impact on the wider survivor community, reactivating post-traumatic and emotional processes, where emotions of anger and frustration are recurrently expressed, with a tendency to privatise the experience and difficulties in its expression. Survivors are generally emphatic in attributing the causes of suicides to lack of recognition, impunity and insufficient reparation, including the absence or inadequacy of psychological accompaniment and treatment programmes.

Part of the experience and life impact of trauma for eye injury survivors is expressed in a text published four years after the social unrest (CVTO, 2023) by 18 survivors in the form of stories, poetry, songs and illustrations, which reveal a shared

5 *The mental health impact of collective, organised and/or political violence can be further elaborated in de Jong 2003, Goenjian et al 2000, Iñaki et al (eds) 2000, Krug et al. 2002, Madariaga 2002.*



subjectivity expressed in the public space, and also confronts and combats the social emotions of shame and silence (Wyatt, 2023). Significant elements stand out in the narrative: experiences of suffering, life change and recovery; changes in worldview and interpretations in relation to carabineros and the social order they defend in protests; their participation as social actors in demonstrations with collective emotions of hope and change; the importance of immediate and sustained support from others; the grief of learning that they have permanently lost their sight; the impact on family and intimate relationships; the experience of unemployment; personal and community coping mechanisms; the connection of the experience with the dictatorship; the life change with a new subjectivity and identity, among others. Most contextualise their harm and signify it within broader social realities (injustice, repression, resistance). Some fragments are eloquent and share this sense:

“We have not only lost our sight and eyesight. We have lost our emotional stability, jobs, money, education, relationships, a sense of security and, often, hope”.

“There are days when there is hope, there is strength to fight for a better country, one where there is justice, equity and a dignified life. But there are other days when the damage, the trauma and the abandonment are more powerful”.

“Impunity reigns in this country and it is up to us to ensure that living in Chile never again costs us an eye of the face”. (Spanish term for an arm and a leg).

“During the outbreak, I was thinking about the phrase I grew up with, ‘So that never again in Chile’, the phrase that never became flesh, because I saw how we were repeating a history of blood and this time it was my turn to live it”.

In rehabilitation practice, where we accompany both victims of the dictatorship and victims of the social uprising, we can clearly see the common elements of socio-political origin of the traumatic processes and their clinical expression. The linking of the experience of meaning in survivors of ocular trauma with survivors of human rights violations during the dictatorship is frequent, creating a communion and a sense of community between both groups, which is expressed in joint social activities and participation of both groups in demonstrations that seek progress in reparation. In this context, it should be noted that the social uprising mobilised ambivalent emotional reactions in the survivors of the dictatorship; on the one hand, they felt hope and recognition of their social struggles, but on the

other, it led to re-traumatisation. New psycho-emotional experiences frequently developed in previously traumatised people, who were exposed in different ways (in demonstrations, in media) to violence and harm by agents of the State to a new generation. These elements of repetition would constitute one of the bases of the harm to survivors of trauma of socio-political origin becoming chronic (Madariaga, 2019).

*Recovery with a reparative approach as an alternative to psychosocial trauma: Psychosocial elements.*

Recovery from traumatic psychological injury in survivors of eye trauma requires an understanding of the complexity beyond the eye injury, to include medical, sensory rehabilitation, psychological aspects, and those dimensions intimately related to the psychosocial impact, such as the processes of social recognition, the search for justice and reparation for the harm caused. The implications of the contexts of impunity and lack of social recognition for re-traumatisation and its threats to recovery make it necessary to integrate social cues and community and wider societal resources for recovery. In order to address this, CINTRAS uses a model of support that integrates the dimensions of medical-psychological treatment (with its phases of stabilisation/security, resignification and recovery of the life project), psycho-legal support, support and promotion of social cooperation, agency and organisation within the framework of commitment to the human rights movement and principles.

One way of articulating the needs for healing and reparation from the perspective of health and legal teams is the psycho-legal approach, which in general terms is the accompaniment of survivors and their organisation in the processes of seeking justice and reparation (in its different phases<sup>6</sup>), using both psychological and legal knowledge, always trying to ensure that they suffer as little psychological damage as possible in the process. We agree with Pérez-Sales (2023) when he says that this approach “*has had an empowering and reparative effect, as a process guided by the survivor, it means taking back control, facing fears and memories and fighting for dignity and moral reparation*” (p. 13). Within this approach we can highlight two dimensions that have been relevant to reparation. The first has to do with the need for documentation of health, psychological and psychosocial harm (socio-economic, family, occupational and community participation aspects); in this sense, the training and approximation of harm assessments using the principles and guidance of the Istanbul Protocol integrated with a

6 Phases including protection, documentation, counselling for survivors and professionals in the legal and medical-psychological system, preparation for trial, accompaniment at trial and in subsequent proceedings.

psychosocial perspective have enabled the best experiences in this area. Another relevant dimension is the psycho-legal accompaniment itself, generally carried out in the collaboration between the psychologist and the lawyer. The joint work of legal and health professionals in dealing with cases allows for a more comprehensive and coordinated approach.

The role played by survivors' organisations, not only in accompaniment and counselling, but also in the struggle to push for political and institutional changes in order to advance justice and reparation, is crucial in the recovery and re-signification of the experience of survivors of psychosocial trauma. In a context of lack of recognition and impunity, group action by survivors can lead to a process of recovery from associativity (social collaboration), as they become activists for their own recovery in community, fighting for the respect of their own rights or for the rights of people from wider society. This often shifts the sense of suffering and pain from an individual or personal subjectivity towards a positive sense of pain, which enables the social narrative of the experience (de-privatisation), mobilising social support resources, participating in reference and recognition groups, and fostering social action. The dialogue of rehabilitation services with the views and needs of organisations has given special meaning to the participation of eye trauma survivors in their recovery processes.<sup>7</sup> Victims' organisations of social uprising and eye trauma have, like victims' organisations of the dictatorship, been one of the main forces in the struggle for advances in truth, justice and reparation, and share the historical characteristics described by Pérez-Sales (2023) of providing mutual support and empowerment, enabling an organisation that fosters training and awareness, and conducting political advocacy and public awareness raising that includes the pursuit of justice through litigation.

The Chilean and Latin American experience has taught us that rehabilitation and accompaniment of healing processes in survivors of eye and psychosocial trauma due to human rights violations can only be understood if we consider health rehabilitation as part of the overall reparation.<sup>8</sup> In turn, health reparation is inseparable from the search for truth and justice (Brinkmann, 2006), as well as the right to non-repetition and memory. Survi-

vors understand this, which is reflected in the demands made to the State as well as to the services that serve them. Particularly relevant is the existence of physical and psychological rehabilitation services that are comprehensive, continuous, non-discriminatory (by type of victimisation), with sufficient territorial reach, timely and, above all, trauma-sensitive, as well as respectful of dignity and human rights (with "ethical and technical quality" and with a committed therapeutic bond). Integrated reparation services should include support to survivors in their most felt needs for truth and justice, with appropriate expert assessments and professional and human accompaniment in judicial processes. An appropriate way to address this is with integrated health services in their medical-psychological, legal and rehabilitation dimensions, with a family and community approach, including the survivor's vision in the delivery of the service and encouraging their participation and association. As part of comprehensive reparation, rehabilitation services should also support survivors in the various dimensions of satisfaction measures and in the exercise of memory.

Chile maintains its debt to truth, justice and reparation for the survivors of psychosocial trauma caused both by the dictatorship and by the actions of its State agents in the context of the social revolt of 2019, exemplified in this article by the victims of ocular trauma. The struggle for the right to comprehensive reparation is an ethical imperative for the reconstruction of the life projects of those affected and constitutes a cornerstone for overcoming the contexts of impunity that enable repetition.

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7 The participation of survivors is a relevant dimension of the rehabilitation standards that the International Council for Victims of Torture as a global anti-torture movement has set for the rehabilitation of survivors. Other standards relevant to the needs of victims are access to justice and independent services, which should be comprehensive, accessible, technically capable, respectful and culturally sensitive (IRCT, 2020).

8 The principles of reparation can be explored further in United Nations General Assembly. (2005)

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