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In this issue

This issue opens with **Van den Bergh and colleagues**' analysis of 63 narrative medico-legal reports from Denmark, in which Amnesty International's Medical Group evaluations of asylum seekers were transformed into structured data. Their findings, drawn from evaluations carried out between 2013 and 2025, document high rates of physical, psychological, and deprivation-based torture methods, along with significant associations between teléfono and hearing loss and between falanga and reduced sensation in the lower limbs, illustrating the epidemiological value of systematising narrative torture documentation.

Hartmann and colleagues explore how states have written the UN Convention against Torture into domestic criminal law, and whether liability stops at state-linked perpetrators or extends to non-state actors. Using original global data, the article finds that nearly two-thirds of State Parties criminalise torture as an autonomous crime, and around a quarter of these cover all non-state actors. Case studies of Uganda, which adopted a broad definition including private perpetrators, and Kenya, which largely kept the Convention's state-centred approach, show how domestic politics, institutions, and history shape the design of anti-torture legislation.

Llorens and colleagues then turn to former political prisoners in Venezuela, drawing on two participative action research projects to examine both the individual and relational harms of imprisonment and the resilience strategies survivors and their families develop to sustain relationships and regain agency. Their contribution underscores the value of collaborative methodologies that position survivors as active participants in the research.

Beriso offers a legal analysis of Ethiopia's constitutional framework, examining how the FDRE Constitution's Article 18(1) prohibits cruel, inhuman, or degrading treatment without explicitly naming torture. Drawing on comparative analysis with Uganda, South Africa, and Nigeria, the article traces the constitutional, criminal-law, and transitional-justice consequences of this omission and proposes legislative elements needed to bring Ethiopian law into alignment with the Convention against Torture.

Kelepa examines Lesotho's outstanding obligation to domesticate the UN Convention against Torture, arguing that as a dualist state Lesotho requires standalone anti-torture legislation rather than reliance on unincorporated treaty text. Drawing lessons from comparable jurisdictions and case law in which Lesotho's courts have nonetheless developed protective doctrine through precedent, the article sets out concrete legislative recommendations for closing this gap.

Alsairafi presents a cross-sectional study of 383 Palestinian adults detained by Israeli authorities during the October 2023 war, examining the prevalence and comorbidity of depression, anxiety, and PTSD among survivors. The study finds an extremely high and highly comorbid symptom burden, with near-universal torture exposure limiting the predictive power of standard demographic and exposure variables, reinforcing the need for integrated, trauma-informed care and continued documentation.

Pikirenia and colleagues contribute a cross-sectional survey of 77 former Belarusian political prisoners who emigrated following the 2020 post-election crackdown. Combining quantitative data with semi-structured interviews, the study documents widespread physical and psychological ill-treatment during detention, high rates of suicidality in custody, and the centrality of humiliation and isolation as tools of coercion, findings that support revised Istanbul Protocol-based approaches treating imprisonment, release, and forced migration as a single exposure trajectory.

John Hawkins then looks ahead to the future of coercion, moving beyond the ticking-bomb debate that still dominates discussion of interrogational torture. He argues that defence-funded brain-computer interfaces, combined with large language models and fusion databases, could support what he terms "nano-totalitarianism": a convergence of pervasive personal data, neurodata, adaptive AI, and technologically mediated coercion capable of penetrating and continuously conditioning the inner sphere of the person. Tracing a lineage from the MKULTRA experiments to the logic of surveillance capitalism, the essay is explicit in distinguishing demonstrated current capability from plausible convergence and speculative possibility, offering a cautionary framework for anticipating how torture may evolve.

In the Case Report section, **Pulin and colleagues** describe a clinical case series of telefono-type auditory violence among Bangladeshi migrants transiting through Libya, identified through the MSF People on the Move project in Agrigento, Sicily. The series highlights the persistence of otologic symptoms long after the initial injury and argues for greater clinical awareness of this under-recognised form of torture among recently arrived migrants.

The issue closes with two Book Reviews. **Sara López** reviews Lutz Oette's *The Transformation of the Prohibition of Torture in International Law* (Oxford University Press, 2024), while **Gunge** reviews *Tortured as a Child: Torture, Forced Migration and the Right to Rehabilitation* (Johansson Metso, 2026), an interdisciplinary anthology from the Swedish Red Cross Competence Centre for the Rehabilitation of Torture

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and War Trauma that highlights the continued invisibility of children as torture survivors within legal and healthcare systems.

Together, the contributions in this issue span the documentation and epidemiology of torture, legal accountability and treaty implementation, the mental health consequences

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Quantifying medical evaluations of torture survivors: An analysis of 63 narrative reports from Denmark

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Key points of interest

- This research found that the 63 participating alleged survivors of torture were on average subjected to more than ten different torture methods and suffered a substantial burden of physical and psychological symptoms several years after exposure.
- Narrative reports of medical evaluations of alleged victims of torture conducted according to the Istanbul Protocol contain important data for research, and this study shows it is feasible to code these reports into quantitative data for descriptive analyses of torture methods and health findings.
- However, methodological challenges remain, including in relation to categorisation of torture methods, definition of a torture episode, non-standardised reporting, and absent negative findings. Adoption of standardised documentation frameworks and complementary quantitative health measures may strengthen future research in this area.

Abstract

Introduction: Denmark receives asylum seekers who allege to have experienced torture in different geographical and political contexts. The Istanbul Protocol provides internationally recognised guidelines for medico-legal documentation of such incidents. Doctors from Amnesty International's Medical Group regularly conduct medical evaluations of asylum seekers, which were analysed to assess the prevalence and patterns of alleged torture methods and their health consequences. *Methods:* Data from medical evaluations were coded, entered into a database, and subsequently exported to R version 4.4.3 using RStudio for analysis. Torture methods were grouped into physical, sexual, psychological, and deprivation categories. Symptoms were summarised for two periods, i.e., within one month after the alleged torture, and at the time of the medical evaluation. *Results:* 63 evaluations were conducted during 2013-2025 among persons aged 12-70 years who were born in 18 different countries. Collectively, 103 torture episodes were reported, with a mean number of distinct torture methods of 10.7 per person. Exposure to physical torture methods was reported by 96.8%, psychological torture by 87.3%, deprivation by 81.0%, and sexual torture by 39.7%. Most episodes occurred in police stations (33.0%) and prisons (17.5%). Many reported physical symptoms at the time of evaluation, and among individuals with available HTQ scores, 93.1% scored above the established

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cut-off of 2.5, suggestive of PTSD. *Discussion:* This study illustrates the additional epidemiological value of transforming narrative reports into systematically structured data that allows for analyses of torture exposure and health outcomes. Wider adoption of standardised documentation analytical frameworks and complementary quantitative health measures may contribute to a more comprehensive understanding of the health consequences of torture and other ill-treatment.

Keywords: torture and ill-treatment, documentation of torture, health, Istanbul Protocol

Introduction

Torture and other ill-treatment remain widespread human rights violations, affecting individuals worldwide.[1] Survivors of torture make up a significant proportion of asylum seekers. In Denmark, studies have found that 13-45% of refugees have been exposed to torture prior to arrival (Amnesty International Denmark, 2024; Andersen et al., 2020; Hvidegaard et al., 2023; Masmas et al., 2008; Ostergaard et al., 2020). Research consistently shows that torture survivors often experience profound and long-lasting psychological, somatic and social consequences (Amris et al., 2019; Campbell, 2007; Carinci et al., 2010; De C Williams & Van Der Merwe, 2013; Diaz & Wallin Lundell, 2025; Goldfeld et al., 1988; Lunde & Ortmann, 1990; Williams et al., 2010).

Medico-legal documentation of torture plays a central role in the rehabilitation of survivors, the substantiation of asylum claims, and the pursuit of accountability for torture survivors, and the Istanbul Protocol (Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (IP)) provides internationally recognised guidelines for such documentation (OHCHR, 2022). The main aim of clinical evaluations as per the Istanbul Protocol is to provide an interpretation of the degree to which medical findings support the alleged exposure to torture and/or ill-treatment.

In Denmark, forensic medical evaluations in asylum cases are commissioned by the authorities when deemed relevant to the asylum assessment. However, the number of such evaluations is low. According to unpublished data obtained from the three departments of forensic medicine in the country, a total of 35 medical evaluations were conducted by these departments during 2013-2025. Most evaluations took place at the beginning of the period, and none during 2022-2024.

When no authority-commissioned evaluation is requested, asylum seekers and their legal representatives may seek an independent assessment in accordance with the IP from Amnesty International's Medical Group. While the primary purpose of medico-legal documentation under the IP is to support survivors in legal and clinical processes, these detailed reports represent a valuable resource for epidemiological research. Relatively few studies have systematically transformed complete narrative medical documentation into a structured dataset using a predefined coding framework. Converting such documentation into quantitative datasets may therefore provide complementary insight into patterns of torture exposure and health outcomes.

The present study is a retrospective descriptive feasibility study that provides a quantitative analysis of the medical evaluations conducted by Amnesty International's Medical Group in Denmark between 2013 and 2025. The main aims were to assess the feasibility of transforming Istanbul Protocol narrative clinical documentation into structured data suitable for epidemiological analysis and to present the descriptive findings related to alleged torture exposure and health. A secondary exploratory aim was to determine whether it was possible to identify associations between exposure and health consequences. The strengths, limitations and practical challenges are discussed.

Methods

Data Management

Data were derived from digitalised medical documentation reports written during 2013-2025 by medical doctors who are part of Amnesty International's Medical Group. Evaluations typically comprise an interview and a medical examination, documenting alleged torture experiences and health findings. Results were noted in a narrative report and stored in digital form. The reports distinguished between current symptoms, defined as symptoms experienced within the month preceding the medical evaluation, and symptoms in the first month after torture, which were reported retrospectively during the medical evaluation. Symptoms suggestive of PTSD were assessed using Part IV of the original 16-item Harvard Trauma Questionnaire (HTQ).

1 In this article, the term "torture" is used as an umbrella term for torture and other ill-treatment and refers to the definition in the UN Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (UN, 1984)

The HTQ was administered using the Danish-language form and was self-administered, with assistance from a professional interpreter when required; the interviewer could clarify or reformulate items if needed. Narrative reports generally included the total HTQ score and clinical interpretation rather than the completed item-level assessment.

Amnesty International Denmark removed direct personal identifiers from the reports, including names and refugee numbers, and hereafter transferred the anonymised records to DIGNITY. The records were transferred and stored safely, and were accessible only to DIGNITY staff directly involved in the data analysis. Unique study identifiers were assigned to the records, which were hereafter entered into a database developed by DIGNITY for medical documentation reports in line with the Istanbul Protocol. The database was built in KOBO Toolbox, hosted on a secure EU server,[2] and developed by DIGNITY's health staff prior to the present study. The database includes more than 900 variables and sub-variables covering demographic characteristics, torture exposure, physical and psychological findings, and consistency assessment. Variable categories were inspired by previous research on torture categorisation methods (Milewski et al., 2023) and organised according to the domains of the Istanbul Protocol. The structure enables systematic coding of data from narrative medical evaluations of victims of torture and was applied for research purposes for the first time in the current research.

Only the data processors had access to the database in KOBO Toolbox, which was secured by a two-step authentication process. To further ensure data confidentiality and security, dates of birth were modified when entering data into the database, using a predefined key. Also, the country in which the medical evaluation had taken place - i.e., Denmark for all individuals - was modified to a random country.

The second data processor subsequently reviewed initial data entry by the first data processor to identify and correct errors. Discrepancies and corrections were documented in a shared Excel spreadsheet and resolved by consensus, thereby ensuring intercoder reliability. During data entry, a logbook was maintained to document case-specific issues and information that could not be coded into the database.

Using the database's predefined coding framework based on the Istanbul Protocol, narrative medical reports were systematically coded to enable quantitative analysis. Free-text descriptions were reviewed and coded into structured variables which were developed prior to analysis. Variables were coded as binary or categorical based on explicit information documented in the reports. When multiple torture methods or settings were explicitly described, each was coded as being present. Explicit, non-specific descriptions were coded as "other/unspecified", and variables not explicitly mentioned were coded as "missing". This approach ensured that the resulting dataset reflected documented allegations as reported.

Torture episodes were coded according to the sequence and number of episodes described in the reports. An episode was defined as either a single violent incident of torture or ill-treatment not involving deprivation of liberty, or as a continuous period of deprivation of liberty during which torture or other ill-treatment was reported. Within such a period, exposure to torture or other ill-treatment may have occurred across multiple locations and perpetrators.

Episode duration was coded as the reported period of exposure to torture or other ill-treatment. Thus, if the deprivation of liberty lasted longer than the reported exposure, only the exposure period was coded as the episode duration. If torture or other ill-treatment was documented throughout the period of deprivation of liberty, the full duration was coded, even when the nature of the torture or other ill-treatment varied over time. Cessation dates and exact durations were often documented imprecisely in the narrative reports. Episode duration was therefore coded using broad categories (hours, days, weeks, months, years). At the same time, the interval to medical evaluation was calculated from the reported onset date, which was more consistently extractable. This measure reflects time since onset rather than time since cessation of the most recent torture episode and may overestimate time since last exposure for prolonged episodes.

Body regions affected by beatings, whipping and kicking were coded using predefined variables and recorded as 'present' only when explicitly described, allowing multiple regions to be coded per episode. For example, non-specific reports of being beaten were coded as "beatings" and as "missing" for anatomical region. For analysis, the upper limbs, torso, gluteal area, and lower limbs were grouped as the body, and results were presented for three regions: body excluding the head and genitals, head/face, and genitals. Falanga and teléfono were coded as separate variables when explicitly reported or clearly described in the reports as constituting falanga or teléfono.

Statistical Analysis

Statistical analyses were conducted using R version 4.4.3 (R Core Team, 2025) in RStudio version 2026.6.0.242 (RStudio Team, 2026). Descriptive statistics were used to summarise demographic characteristics, torture exposure, and health findings. Continuous variables were reported as mean ± standard devia-

2 https://eu.kobotoolbox.org/

tion (SD) or median with interquartile range (IQR) as appropriate, and categorical variables as numbers and percentages.

Torture exposure was analysed at both the person and episode level. In person-level analyses, individuals were counted once per torture method or category, regardless of the number of reported episodes. Person-level analyses were used to examine cumulative exposure and associations with health outcomes, whereas episode-level analyses were used to describe characteristics and contextual patterns of torture episodes.

Torture methods were grouped into physical, sexual, psychological, and deprivation categories (Milewski et al., 2023). Physical and psychological symptoms were summarised for two periods: 1) symptoms in the first month after torture, reported retrospectively during the medical evaluation, and 2) current symptoms, defined as symptoms experienced within the month preceding the evaluation. HTQ total mean scores were categorised using the commonly applied cut-off value of 2.5, with scores ≥2.5 considered suggestive of clinically significant PTSD symptoms (Mollica et al., 1992).

As secondary exploratory analyses, selected associations involving torture exposure were examined. Associations between torture methods and country of alleged torture episode were examined descriptively using cross-tabulations due to sparse country-level data. Episode-level mixed-effects logistic regression was used to assess the association between sexual torture and gender, accounting for repeated episodes within individuals. Differences in HTQ total mean scores were assessed using t-tests or analysis of variance (ANOVA), as appropriate, for exposure to sexual torture, duration of the longest torture episode, number of torture episodes, and number of distinct torture methods (<5, 5-9, 10-14, 15-19, ≥20), all selected a priori. Associations between torture methods and current symptoms were explored using unadjusted logistic regression models, comparing exposed and unexposed individuals. The torture methods and symptoms analysed were selected based on clinical and existing hypotheses regarding plausible exposure-outcome relationships. For these exploratory analyses, undocumented exposures or symptoms were generally interpreted as absent, except for sexual dysfunction, which was treated as missing unless explicitly reported because of its assumed sensitivity to underreporting. Analyses were conducted among individuals or episodes for which data were available on both the exposure and outcome of interest; therefore, denominators varied across analyses. Odds ratios (ORs) and 95% confidence intervals (CIs) were calculated, and statistical significance was assessed using a two-sided significance level of 0.05.

Ethical Considerations

This project involved secondary analysis of de-identified data and was conducted in accordance with the General Data Protection Regulation (GDPR). DIGNITY and Amnesty International Denmark jointly agreed on all procedures for data transfer, access, storage, and processing in advance to ensure compliance with applicable data protection requirements. During the data handling process, there were no breaches in data security.

Amnesty International Denmark granted permission for secondary use of the reports for research purposes. Data were anonymised, results are not person-attributable, and data were handled with strict data protection and confidentiality safeguards. Under the Danish Committee Act on Research Ethics Review of Health Research Projects, studies based on secondary analysis of existing de-identified data, without new participant contact, intervention or use of human biological material, are not subject to review by a regional research ethics committee. The project was therefore handled in accordance with the applicable data-protection and data-controller framework.

Results

Study Population

A total of 63 individuals - 56 males and 7 females - were examined during 2013-2025. The individuals' ages at the time of the medical evaluation ranged from 12 to 70 years, with a mean age of 37.9 (Table 1). Persons were born in 18 different countries, the most frequent being Afghanistan (12.7%), Iran (11.1%), Russia (9.5%), Iraq (9.5%) and Sudan (9.5%) (Figure 1). Notably, there was a substantial proportion of missing information about religious affiliation, civil status, and educational level. Information on the date of arrival in Denmark was missing in the reports of 24 individuals (38.1%). Among those with available data, the median time between arrival in Denmark and the medical evaluation was 3.2 years (IQR 1.7-5.9) (Table 1).

Alleged Torture Exposure and Characteristics of Alleged Torture

All individuals had an alleged history of torture or other ill-treatment, consistent with the inclusion criteria. Collectively, a total of 103 torture episodes were reported. While the majority reported one torture episode, over 40% of individuals reported more than one episode (Table 2). The median time between the onset of the latest torture episode and the medical evaluation by Amnesty International's Medical Group was 5 years, ranging from 1 to 23 years (Table 2).

Most torture episodes were reported to have occurred in Iran (23.3%), followed by Russia and Sudan (Figure 2). The years during which the torture episodes had taken place varied

Table 1. Demographic characteristics

	n=63
Gender	
Female	7 (11%)
Male	56 (89%)
Other	0 (%)
Missing	0 (0%)
Mean Age, years*	**Mean ± SD (Min-Max)** **37.9 ±11.6 (12-70)**
Age Group*	
<18	1 (1.6%)
18-29	17 (27.0%)
30-44	27 (42.9%)
45-59	14 (22.2%)
60+	3 (4.8%)
Missing	1 (1.6%)
Region of Origin	
Asia	13 (20.6%)
Middle East/North Africa	21 (33.3%)
Sub-Saharan Africa	19 (30.2%)
Europe	8 (12.7%)
Missing	2 (3.2%)
Religion	
Christian	2 (3.2%)
Muslim	20 (31.7%)
Other	3 (4.8%)
No religion	1 (1.6%)
Missing	37 (58.7%)
Civil status	
Married	34 (54.0%)
Divorced	3 (4.8%)
Domestic partnership	1 (1.6%)
Single	7 (11.1%)
Missing	18 (28.6%)
Educational level	
Master's level or higher	3 (4.8%)
Bachelor	5 (7.9%)
Short tertiary	7 (11.1%)
Secondary	18 (28.6%)
Primary	9 (14.3%)
No education	8 (12.7%)
Missing	13 (20.6%)
Time between arrival in Denmark and medical evaluation, years (n=39)	**Median (IQR)** **3.2 (1.7-5.9)**

*Age at time of medical evaluation

Table 2. Alleged torture exposure

	n=63
Number of torture episodes	
One	35 (55.6%)
Two	20 (31.7%)
≥ Three	8 (12.7%)
Torture methods	
Physical	61 (96.8%)
Psychological	55 (87.3%)
Sexual	25 (39.7%)
Deprivation	51 (81.0%)
Number of distinct torture methods	Mean ± SD 10.7 ± 5.9
Number of distinct torture methods	
<5	5 (7.9%)
5-9	26 (41.3%)
10-14	20 (31.7%)
15-19	6 (9.5%)
≥ 20	6 (9.5%)
Time between onset of latest torture episode and medical evaluation, years (N=54)*	Median (IQR) 5 (3-9)

***Table 2**. Alleged torture exposure (continued)*

	n=103
Duration of alleged episode	
Hours	25 (24.3%)
Days	20 (19.4%)
Weeks	21 (20.4%)
Months	25 (24.3%)
Years	7 (6.8%)
Missing	5 (4.9%)
Place of torture**	
Police station	34 (33.0%)
Prison	18 (17.5%)
At home	10 (9.7%)
In public	8 (7.8%)
Intelligence service	7 (6.8%)
Military camp	4 (3.9%)
Other/Unspecified	13 (12.6%)
Missing	15 (14.6%)

*Excluding individuals with missing year of onset for most recent episode.
**One torture episode may include more than one place of torture, as an episode may refer to a continuous period during which torture or ill-treatment occurred across multiple locations.

from 1990 to 2022, with missing data on the year of exposure for 14 episodes. Alleged exposure to torture methods was diverse, with physical violence constituting the most frequently documented category, reported by 96.8% of individuals. The most common forms of physical violence were beatings, kicking and tying of body parts, including handcuffing (Figure 3). Among episodes involving beatings, beatings with instruments were more frequently described than beatings with the hands. Out of the 103 torture episodes reported, 61.2% included any form of blunt trauma to the body excluding head and genitals (40.8% included beatings with instruments, 25.2% included beatings with the hands, 34.0% included kicking), 45.6% included blunt trauma to the head/face (31.1% included beatings with instruments, 30.1% included beatings with the hands, 14.6% included kicking), and 6.8% of episodes included blunt trauma to the genitals (5.8% included beatings with instruments, 1.9% included beatings with the hands, 1.9% included kicking). Falanga and teléfono were coded separately as specific beatings and are not included in the above-mentioned prevalences. Falanga and teléfono were reported in 13.6% and 4.9% of episodes, respectively. Psychological torture was reported by 87.3% of individuals, deprivation of any kind by 81.0%, and sexual torture by 39.7%. The mean number of distinct torture methods reported per person was 10.7±5.9 (Table 2). At the episode level, a median number of 7 (IQR: 3-9) distinct torture methods were reported.

The duration of reported torture episodes varied, with episodes lasting hours and episodes lasting months most frequently reported (24.3% each), followed by episodes lasting weeks (20.4%) and episodes lasting days (19.4%). The most frequently reported places of torture were police stations (33.0%) and prisons (17.5%) (Table 2).

Health Findings

Prior to alleged torture exposure, pre-existing chronic physical disease was documented in four reports (6.3%) and pre-existing mental health issues were documented in one report (1.6%), where the person was suffering from anxiety and PTSD prior to torture exposure.

Symptoms in the first month after torture were retrospectively reported at the medical evaluation and were documented less frequently than symptoms experienced during the month preceding the evaluation, particularly for psychological symptoms. Musculoskeletal symptoms were the most frequently reported physical symptoms both within the first month after torture and at the time of the medical evaluation, followed by central nervous system symptoms (Figure 4). Among specific symptoms reported to have been present within the first month after torture, headache and musculoskeletal pain were the most frequent physical symptoms. Psychological symptoms within the first month after torture were reported by almost half of the individuals (Figure 4), most commonly general anxiety, as reported by 41.3% of individuals, followed by sleeping problems (14.3%).

At the time of the examination, most individuals reported pain in at least one body region, affecting 100% of women and 89.3% of men, most commonly headaches and musculoskeletal pain (Figure 5). Psychological symptoms were reported by 98.4% of individuals at the time of examination, with sleeping problems, flashbacks, and difficulties concentrating being the most frequently reported symptoms (Figure 5). The mean HTQ score was 3.03±0.41, with 93.1% of 58 individuals for

***Figure 1**. Country of birth (n=63)*

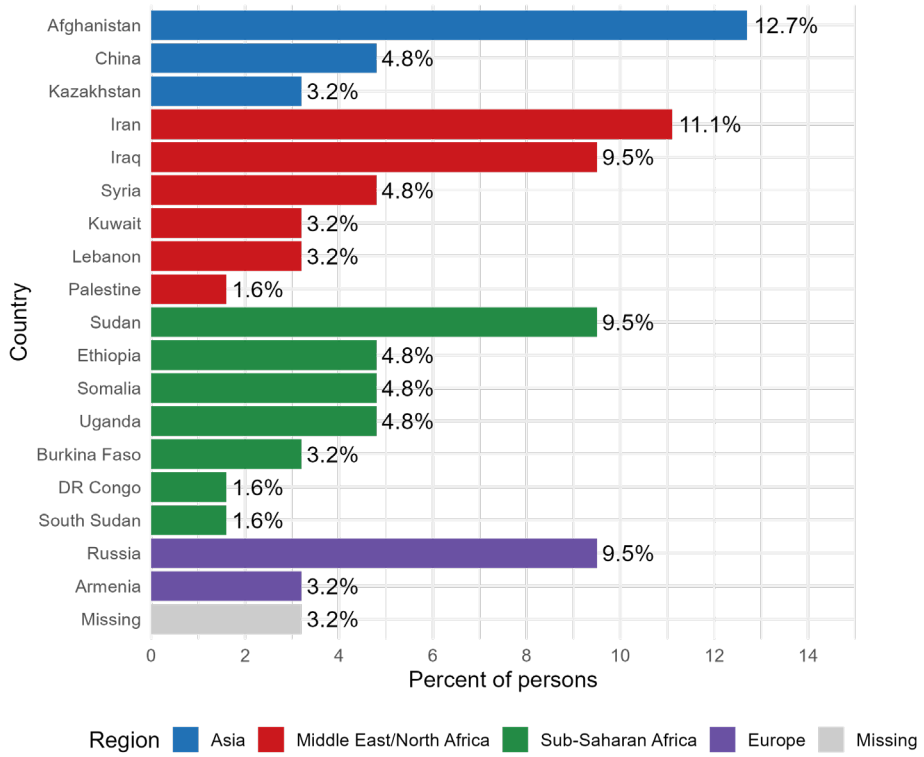


***Figure 2**. Country of alleged torture episode (n=103)*

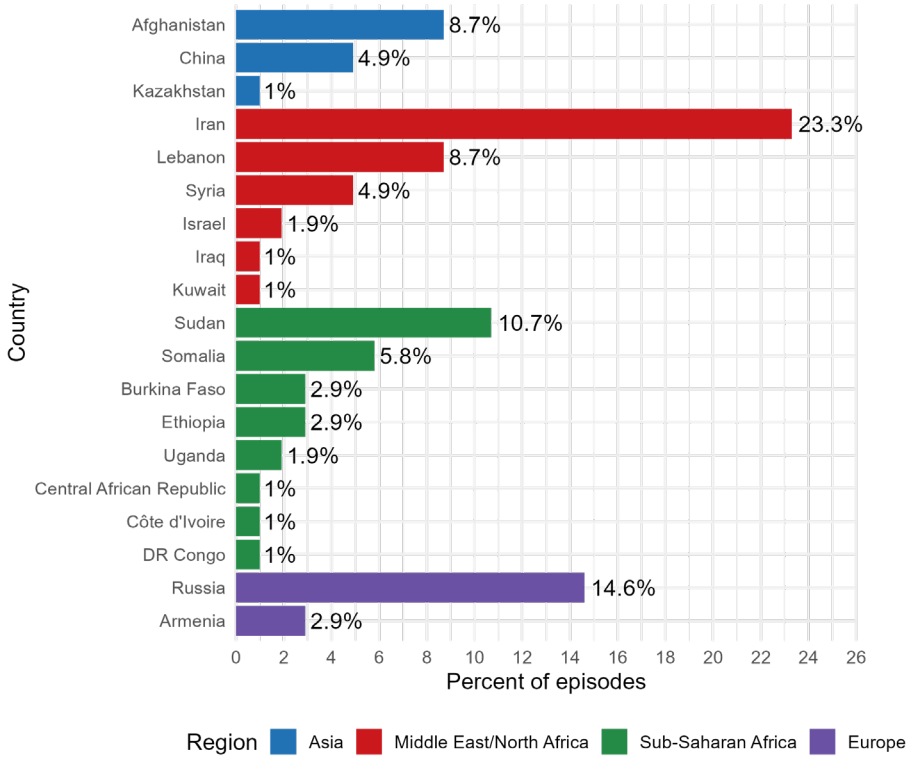


Figure 3. *Alleged exposure to distinct torture methods, person-level (n=63)*

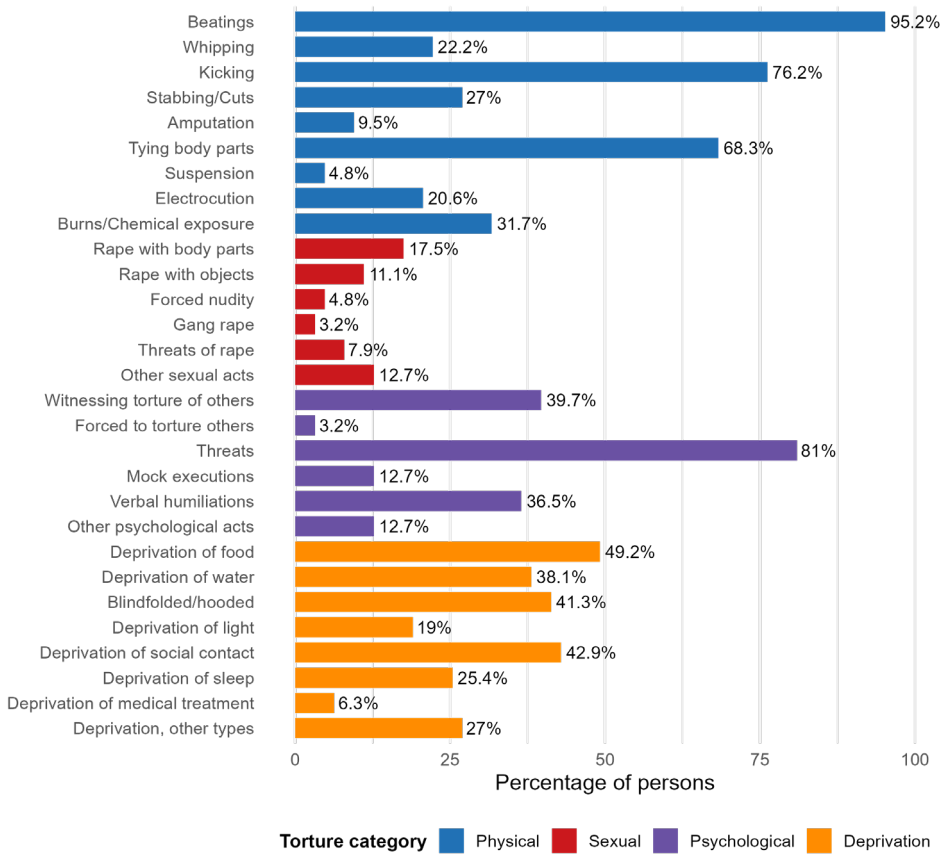
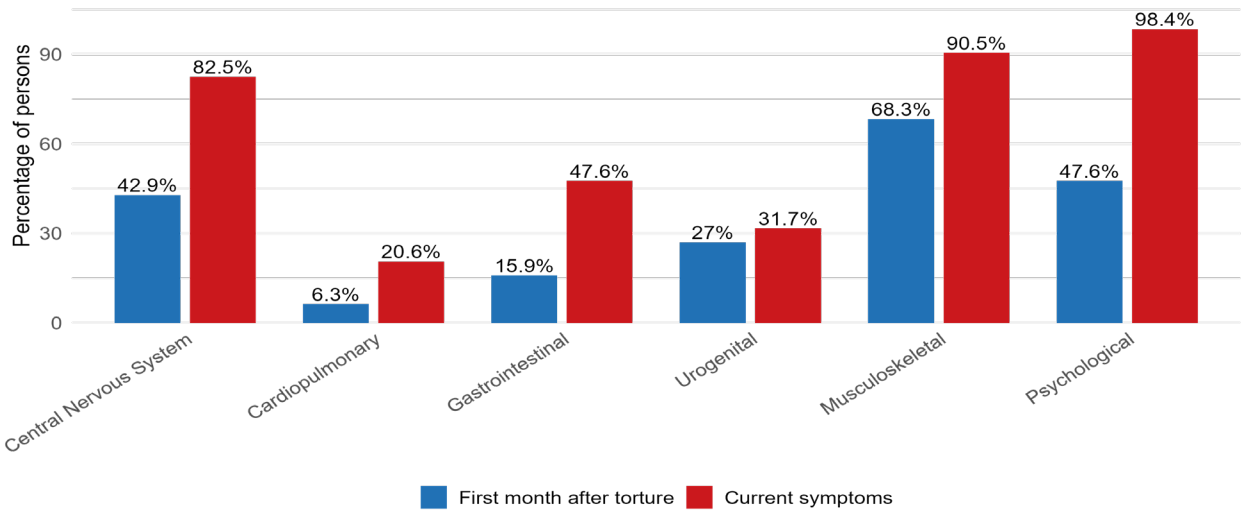
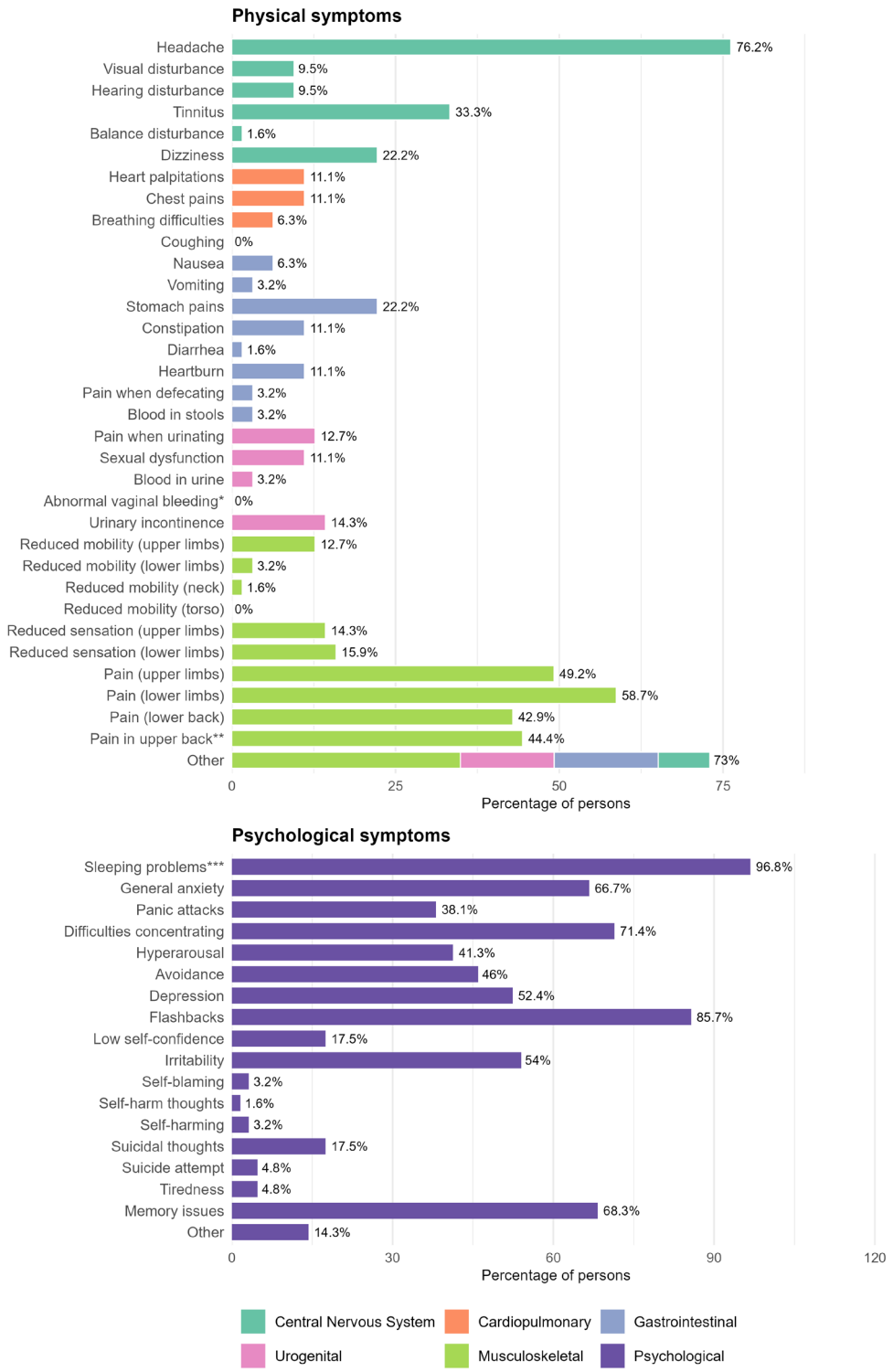


Figure 4*. Reported Symptoms (n=63).*



Symptoms within the first month after torture were retrospectively reported at the medical evaluation; current symptoms refer to the month preceding the evaluation.

***Figure 5**. Physical and psychological symptoms at the time of examination (n=63) (Rathke et al., 2020; Norredam et al., 2005; Thomas et al., 2023; Petreca et al., 2024)*



* Bleeding not caused by menstrual cycle.
** Including shoulders and neck.
*** Including nightmares.

whom scoring was done having scores above the established cut-off of 2.5, suggestive of PTSD.

Medication use at the time of the medical evaluation was common and reported by 40 of the 63 individuals (63.5%). The most frequently reported medications were sedatives, including sleeping medication and tranquilizers, and analgesics, used by 33.3% and 30.2% of individuals respectively. Medication for chronic somatic illness was reported by 25.4%. Among psychotropic medications used at the time of examination, antidepressants were reported by 12.7%, antipsychotics by 9.5%, and mood stabilizers by 1.6% of individuals.

Association between Selected Torture Methods and Demographic Characteristics

Torture episodes reported by women more frequently included sexual torture (including rape, threats of rape, forced nudity and other sexual acts) compared with episodes reported by men, although the estimate was imprecise (OR 11.0, 95% CI 1.30-92.80; p=0.017).

Specific torture methods were broadly distributed across countries of alleged exposure, and no distinct country-specific patterns were identified in exploratory analysis.

Association between Health Symptoms and Torture Exposure

Exploratory analyses among individuals with available HTQ scores did not demonstrate statistically significant differences in HTQ total scores by the duration of the longest reported torture exposure (p=0.739), number of torture episodes (p=0.939), number of distinct torture methods (p=0.228) or exposure to sexual torture (p=0.556).

Associations between selected torture methods and health symptoms at the time of the medical evaluation were examined, comparing exposed and unexposed individuals. Statistically significant associations were observed between teléfono and hearing loss and falanga and reduced sensation in lower limbs, but data was limited, the lowest confidence intervals for the odds ratios only slightly above 1, and the confidence intervals large.

Discussion

This study examined a heterogenous group of torture survivors evaluated by Amnesty International's Medical Group over a thirteen-year period. It demonstrated the possibility of coding narrative reports into quantitative data and found a high burden of persistent physical and psychological symptoms several years after torture exposure. This group of torture survivors had not undergone forensic medical documentation by the authorities but instead had been referred by their lawyer to an independent medical evaluation by Amnesty International's Medical Group, often with the aim of supporting their asylum claim.

The study population was diverse in terms of country of origin, country of alleged torture, torture setting, duration of torture episode, and number of torture episodes, yet was unified by extensive co-exposure to multiple torture methods, with a mean of 10.7 distinct methods per person. Interpretation of torture method-specific health outcomes is therefore challenging, particularly in light of the substantial time interval between the torture exposure and the medical evaluation and the potential for recall-related misclassification of both exposure and symptoms.

Fewer symptoms were reported for the first month after torture than at the time of the medical evaluation. This finding may reflect recall bias associated with the long interval between exposure and medical evaluation, together with information bias arising from non-systematic or lacking health symptoms assessment, particularly for psychological symptoms which are often underreported unless explicitly assessed (Bushnell et al., 2005; Peters et al., 2009; Robinson & Roter, 1999). Persistent symptoms were common at the time of the medical evaluation, with pain reported by 90.5% of individuals, indicating a substantial burden of ongoing physical morbidity consistent with previous findings in populations of torture survivors (Modvig & Quiroga, 2020; Olsen, Montgomery, Bøjholm, et al., 2006; Olsen, Montgomery, Carlsson, et al., 2006; Thomsen et al., 2000). The high prevalence of persisting psychological symptoms is consistent with previous literature on persistent trauma-related sequelae among torture survivors (Dibaj et al., 2020; Modvig & Quiroga, 2020; Steel et al., 2009; Turner & Gorst-Unsworth, 1990) and is reflected in the high proportion of individuals with HTQ scores ≥ 2.5, suggestive of PTSD. Psychiatric morbidity, including PTSD, depression, anxiety and psychosis, is common among torture survivors (Rathke et al., 2020; Steel et al., 2009). However, this study did not establish formal psychiatric diagnoses but instead relied on self-reported symptoms and HTQ scores, which may be present without meeting diagnostic criteria.

Psychological symptom severity, measured using the HTQ score, was not found to be associated with duration of torture episode(s), number of torture episodes, or number of distinct torture methods. However, given the limited sample size, high degree of co-exposure, and coarse exposure measures, the absence of statistically significant findings does not indicate that these exposure dimensions are unrelated to psychological outcomes. Qualitative aspects of torture including loss of control, perceived threat to life, humiliation, and unpredictability, have been emphasized in previous trauma research as important

for psychological outcomes (Aprigio & Gauer, 2024; Başoğlu, 1998; Ozer et al., 2003), but these dimensions could not be assessed directly in the present study. Psychological outcomes may also be influenced by post-migration stressors, including ongoing insecurity related to asylum status, as well as individual vulnerability factors such as prior mental health status, coping resources, and personality characteristics. Previous studies have suggested that rape is associated with a higher risk of PTSD than other types of trauma (Breslau, 1991; Dalgaard et al., 2021; Hooberman et al., 2007). The results of this study do not support these findings, but this may reflect the small sample size rather than absence of a relationship.

In exploratory analysis, two statistically significant associations were found between a specific torture method and a health symptom at the time of the medical evaluation, i.e., between teléfono and hearing loss and between falanga and reduced sensation in lower limbs. The data on this was, however, very limited and the confidence intervals large. Therefore, the findings should be read with caution. Nonetheless, the findings are presented because they are consistent with what is well known clinically and illustrate how data can be meaningfully extracted and analyzed to generate hypotheses on the interlinkage between specific trauma and health consequences. On the other hand, the fact that only two associations were found may reflect the extensive co-exposure to multiple torture methods and to other types of trauma, and the largely non-specific nature of health symptoms. The health consequences of exposure to sexual torture were examined using HTQ scores as a measure of psychological symptom severity and sexual dysfunction as a multifactorial outcome with both psychological and physical components. In the present study, no statistically significant association was observed between exposure to sexual torture and either HTQ scores or sexual dysfunction. Given the limited sample size and the substantial co-exposure to multiple torture methods, the absence of statistically significant findings should be interpreted cautiously and does not preclude clinically meaningful associations.

Previous studies have documented both impaired sexual functioning and psychological sequelae among survivors exposed to sexual torture (Ba & Bhopal, 2017; Domovitch et al., 1984; Lunde et al., 1981; Lunde & Ortmann, 1990; Norredam et al., 2005). Others have also documented broader interpersonal and social consequences of sexual violence and torture, including trust difficulties and impaired capacity for intimate relationships (28, 38–40). Such social and relational impairments constitute an important dimension of health as defined by the World Health Organization (World Health Organization, 1946) but were not included in the present dataset as information about this dimension was not systematically documented in the reports analyzed.

Torture episodes reported by women more frequently included sexual torture than those reported by men. Although the difference was statistically significant, the number of episodes reported by women was limited, resulting in a wide confidence interval around the estimated odds ratio. The magnitude of the effect should therefore be interpreted with caution. The finding is nevertheless consistent with previous studies (Hooberman et al., 2007; Lunde & Ortmann, 1990; Milewski et al., 2023; Mundy et al., 2020), but may also reflect differential reporting, as stigma, shame and cultural factors may contribute to underreporting (Roberts et al., 2010; Thomas & Kopel, 2023).

Descriptive analysis of torture methods by country did not reveal any country-specific patterns, which is expected given the limited sample size. Even large-scale studies have not found country-specific patterns (Milewski et al., 2023). However, the detailed structure of the database, including information on the timing of torture episodes, provides a framework that could facilitate analysis of temporal trends within and across country contexts in larger datasets.

This study illustrates the potential of detailed medical documentation and highlights the utility of standardized, quantifiable measures, such as the HTQ score, for capturing symptom severity. It also illustrates the need for complementary instruments assessing other dimensions of health impact including pain, depression, anxiety, and quality of life. The findings moreover suggest that severe torture exposure and persistent health sequelae may not always be identified or acknowledged as needing further examination and treatment through formal referral pathways within the asylum process. Although the effect of the medical evaluation on the individuals' asylum outcome could not be measured in this study, studies in other countries suggest the importance of medical documentation in asylum processes, both by state authorities and other organizations (Clément et al., 2017; Franceschetti et al., 2019; Mandel & Worm, 2007).

A methodological contribution of this study is the development and application of a structured coding framework and database for systematically coding narrative medical evaluations in line with the Istanbul Protocol, into quantitative data. Previous studies have shown the value of forensic medical data in describing torture exposure, geographical patterns, and physical and psychological sequelae amongst torture survivors (Busch et al., 2015; Hougen, 1988; Milewski et al., 2023; Modvig & Quiroga, 2020; Perez Sales, 2020). The present study builds on this approach by showing that medical reports can

be structured for epidemiological analysis, thereby supporting research on torture exposure and health outcomes.

Limitations

Medical documentation of torture often comes with challenges. Physical injuries may be nonspecific, healed, or disguised by time, while psychological consequences can be complex and influenced by ongoing stressors such as displacement or insecure legal status.

In this study, the limited sample size and heterogeneity of the data constitute important limitations for comparative statistical analyses. These challenges are compounded by the nature of torture exposure itself. Torture survivors are rarely subjected to a single form of torture or other ill-treatment; rather, exposure typically involves multiple methods which may have occurred over extended periods of time. In the coding, multiple acts, methods, locations, or perpetrators were considered part of the same torture episode, when they occurred within one continuous period of deprivation of liberty. This approach underestimates the number and complexity of discrete torture exposure. In the present sample, individuals were on average exposed to over ten distinct torture methods over varying periods of time, ranging from hours to years. Given this high degree of co-exposure, together with the largely non-specific nature of many health symptoms, attributing specific health outcomes to individual torture methods was shown to be challenging. In addition, health outcomes may be influenced by additional unmeasured confounders, including exposure to armed conflict and stressors related to displacement and migration. These limitations are not unique to the present study but are characteristic of epidemiological research examining the health consequences of specific torture methods and underscore the need for substantially larger datasets to improve statistical power and reduce the risk of both type I (false positive) and type II (false negative) errors.

Torture survivors constitute a highly heterogeneous population exposed to complex and overlapping combinations of torture methods, with experiences that are inherently individualized. While coding narrative accounts into binary or categorical variables enables quantitative analysis and serves an important epidemiological purpose, this process inevitably entails loss of contextual detail and may not fully capture the complexity, severity, or subjective meaning of individual experiences. Non-specific descriptions, such as beatings reported as occurring "all over the body," required conservative coding decisions, leading to reduced anatomical specificity.

Furthermore, the structure and level of detail of reports varied across examining clinicians, introducing additional variability in data quality and completeness. In some reports, specific torture methods were explicitly identified, whereas in others, exposures were described narratively without explicit categorization, requiring interpretation by the coders. This was particularly relevant for deprivation-based and psychological methods, where classification relied more heavily on interpretation, increasing the potential for misclassification. While the Istanbul Protocol outlines five degrees of consistency to assess how well the physical and psychological findings correspond with an alleged method of torture or other ill-treatment (OHCHR, 2022),[3] this was not consistently applied across reports. Similar challenges have been reported in a recent publication, showing discrepancies in the assignment of Istanbul Protocol consistency levels (Argo et al., 2026). In this study, most reports indicated a general assessment 'consistent with' which makes it difficult to assess the relationship.

Nearly all assessments relied on interpreter-mediated interviews. Although communication was generally described as adequate, some reports documented difficulties, and the inherent limitations of interpretation may have contributed to measurement error.

An inherent limitation of epidemiological research on the health consequences of specific torture methods is the challenge in quantifying exposure intensity. Health consequences are likely to depend not only on exposure to a specific torture method but also on the duration and intensity of that exposure. In this study, no direct measures of the intensity of individual torture methods were available, and overall episode duration cannot serve as a valid proxy, as intensity may vary substantially within a given episode. In addition, perceptions and reporting of intensity are subjective and may moreover be influenced by pre-existing physical or psychological health conditions, which are challenging to assess retrospectively when relying on self-reported information.

Another important limitation of the study concerns the nature of the data source. The medical reports were produced for clinical and documentation purposes rather than research, and negative findings were not systematically recorded. Consequently, absence of documentation could not be assumed to reflect absence of exposure or symptoms, resulting in missing data and potential misclassification. For the analysis of association between torture methods and symptoms, missing information about exposure to a specific torture method and undocumented symptoms were handled as absent. While this approach allowed for inclusion of a larger number of observa-

3 i.e., 'not consistent with', 'consistent with', 'highly consistent with', 'typical of', and 'diagnostic of'.

tions in the analysis, it may have led to misclassification, potentially influencing observed associations between torture methods and health outcomes. Only the health outcome 'sexual dysfunction' was handled differently, as it seemed not to be routinely assessed and is known to be particularly sensitive to underreporting. When not explicitly reported, sexual dysfunction was therefore coded as missing.

In this study, the median time between the onset of the most recent torture episode and the medical evaluation was 5 years, 93.1% of individuals with available scores had an HTQ score above 2.5, and 68.3% of individuals reported memory issues at the time of the medical evaluation. This introduces a risk of recall bias, with potential underreporting or misclassification of both torture exposure and symptoms that were present in the first month after torture. Such misclassification may be further exacerbated by cultural stigma and shame, particularly in relation to sexual torture and symptoms of sexual dysfunction.

The study population consists of individuals presenting for medical evaluation by Amnesty International's Medical Group, which limits generalizability to all torture survivors because of risk of selection bias. Individuals seeking such evaluations may be more likely to have experienced more severe and/or more persistent symptoms or may have more complicated histories or asylum procedures. This clinical selection, however, also enables a level of detailed exposure characterization and medical assessment that is rarely achievable in larger population-based studies.

Finally, the study design does not allow for causal inference and limits the generalizability of the findings. The primary aim of this study was not to establish causality or to produce broadly generalizable estimates, but rather to generate hypotheses and illustrate the epidemiological potential of systematically collected medical data. While the foremost purpose of medical documentation reports of torture remains to support survivors in their health care and legal processes, their structured use also offers an important opportunity to advance research on the health consequences of torture and other ill-treatment.

Conclusion

The findings describe a heterogeneous and clinically complex group of torture survivors with extensive and repeated exposure to multiple torture methods and a substantial burden of physical and psychological symptoms several years after exposure.

This retrospective feasibility study shows that heterogeneous narrative medical documentation reports can be converted, through intensive expert coding and adjudication, into structured data capable of describing documented torture exposures and health findings. This is of value in relation to descriptive studies. However, it also demonstrates major limitations arising from non-standardized reporting, absent negative findings, uncertain episode definitions, extensive co-exposure and small samples. Prospective use of a standardized minimum dataset, complementary validated health measures and formal assessment of coding reliability would be required before such data could support robust analyses of method-specific health consequences. Should it be possible to overcome these challenges, Istanbul Protocol narratives contain a wealth of information that could improve knowledge about the interlinkage between torture exposure and health outcome and the ability to support survivors in their health care and legal processes.

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Who can torture? Criminalising torture by state and nonstate actors under the UN Torture Convention

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Key points of interest:

- Nearly two-thirds of the State Parties to the UN Torture Convention have criminalised torture as an autonomous crime, with a quarter of these extending criminal liability to nonstate actors beyond the UNCAT definition, including private individuals.
- State Parties differ not only in whether they criminalise torture, but also in how they define torture perpetrators, illustrating important variation in the domestic interpretation of international human rights obligations.
- The findings indicate that international commitments, domestic political dynamics, policy learning, institutional and legal fit, and historical experiences of violence interact in shaping national approaches to defining torture perpetrators – illustrated by the processes of the anti-torture laws' adoption in Uganda and Kenya.

Abstract

Introduction: Although State Parties to the United Nations Convention against Torture (UNCAT) are called on to criminalise torture in domestic law by the Committee against Torture, national legislation varies considerably in both the adoption and design of torture offences. This article examines how states have domesticated UNCAT's prohibition of torture, focusing in particular on whether domestic criminalisation limits criminal liability to state-linked perpetrators or extends it to a broader range of nonstate actors. *Method*: Drawing on original global data on domestic torture legislation, the article maps patterns in the criminalisation of torture across UNCAT State Parties. It complements this analysis with qualitative case studies of Uganda and Kenya, using theories of the domestic implementation of international human rights obligations to explore how international commitments, domestic political dynamics, institutional and legal frameworks, and historical experiences of violence shaped different legislative approaches. *Results*: The findings reveal substantial variation in how States criminalise torture. Drawing on the new dataset, the article shows that nearly two-thirds of State Parties have criminalised torture as an autonomous crime, and around a quarter of these extend criminal liability to all nonstate actors. The case studies suggest that while international commitments encouraged legislative reform in both countries, different combinations of strategic adaptation, institutional and legal fit, and historical patterns of violence contributed to divergent legislative designs. Uganda adopted a broad definition encompassing private actors as torture perpetrators, whereas Kenya largely retained UNCAT's state-centred approach. *Conclusions*: The findings indicate that international human rights obligations are not incorporated uniformly into domestic law but are interpreted and adapted through domestic political, institutional, and historical contexts. By shifting attention from whether states criminalise torture to how they design torture legislation, the article contributes to scholarship on the domestication of international human rights law and

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offers new hypotheses about the sources of variation in national anti-torture legislation in terms of the definition and scope of torture perpetrators.

Keywords: United Nations Convention against Torture, human rights, criminalisation of torture, state and nonstate actors

Introduction

Despite the absolute prohibition of torture under international human rights law, including the United Nations Convention against Torture (UNCAT), torture remains widespread. Recent reports document alleged incidents in 125 countries across all regions (Mark et al., 2023).[1] The UN Committee against Torture (CAT) has consistently called on State Parties to criminalise torture in domestic law, a step intended to strengthen accountability and reduce impunity. Under the Convention, torture consists of severe pain or suffering intentionally inflicted for a specific purpose by a public official or a person acting in an official capacity (UNCAT, Art. 1). This study examines how State Parties to UNCAT have domesticated the Convention's provisions on the criminalisation of torture, focusing in particular on variation in the scope of perpetrators covered by domestic legislation.

International and regional treaties encompass the prevention, prohibition, prosecution and redress of torture with elaborated protection mechanisms. Yet torture continues with impunity (UN Special Rapporteur on Torture, 2021, para. 1), committed not only by state actors like police and military, but increasingly also by nonstate actors such as armed groups and criminal gangs. UNCAT only captures this development in part, as it considers nonstate actors comparable to state agents as torture perpetrators – that is, nonstate actors that have functions that are akin to governments or that are acting as de facto authorities (Zach, 2019, para. 125). The focus on state actors as torture perpetrators has been the object of feminist critiques ever since the conception of the crime under human rights law; however, this will not be the focus of study or analysis of this article. State practice diverges on whether the prohibition of torture extends to nonstate actors beyond the ones included in UNCAT, including actors with no comparable governmental role, such as businesses or even private individuals. This results in major inconsistencies in how states criminalise torture, with profound and concrete repercussions for the prosecution of the crime at the domestic level. Criminalisation determines which acts—and whose acts—can be prosecuted, and it shapes how redress and rehabilitation for survivors are defined. Thus, State Parties to UNCAT may, in practice, have very different means of indicting, prosecuting, and sentencing perpetrators of torture. The shared international legal regime (UNCAT) may, thus, play out very differently in labelling crimes over time and across State Parties, with major consequences for whether, and if so which, actors are held accountable for their crimes and how redress and rehabilitation are articulated. Criminalising torture in national law provides a legal framework for prosecuting purposes and securing remedies; if the national legal framework is insufficient, acts of torture may go unpunished. Also, labelling a specific act of grave violence as torture brings with it international obligations for states, such as ensuring appropriate penalties, modes of liability,[2] universal jurisdiction, excluding it from statutes of limitations, as well as eliminating it from amnesties and immunities.

This article examines how State Parties to UNCAT have domesticated the Convention's provisions on the criminalisation of torture. We provide a global mapping of domestic torture legislation, identifying both whether states have enacted an autonomous offence of torture[3] and whether they restrict criminal liability to the perpetrators encompassed by UNCAT or extend liability to a broader range of nonstate actors. Building on scholarship on the domestic implementation of international human rights commitments, we then use Uganda and Kenya as illustrative examples to explore how domestic actors interpret and adapt international legal obligations in different political and historical contexts.

The article makes three main findings. First, it uncovers significant variation among State Parties to UNCAT: while most have criminalised torture as a separate offence, only a minority extend liability to all nonstate actors. Second, the case studies of Uganda and Kenya suggest that different combinations of international pressure, strategic adaptation, institutional and legal fit, and historical experiences of violence may contribute

1 This dataset is built on the yearly reports of the US Department of State Country Reports on Human Rights Practices. Data capture cases where torture was practiced frequently or occasionally in the most recent reporting year (2022).

2 For the commission, attempt, complicity, instigation, consent, or acquiescence of the act of torture.

3 Either in a stand-alone act or integrated in the Criminal Code.

to variation in the design of domestic torture legislation. Third, these findings show the value of placing variation in torture legislation within broader theories of the domestication of international human rights obligations, thereby generating new hypotheses for future research on the design and implementation of national anti-torture laws.

These findings contribute to previous research in three ways. Empirically, we offer a global dataset that captures not only whether torture is criminalised in line with UNCAT but also whether criminalisation includes a wider set of nonstate perpetrators.[4] It thus distinguishes itself from existing datasets by including not only the liability of state actors, or actors with an official capacity, but also a wider set of nonstate actors. Theoretically, we contribute to scholarship on the domestic implementation of international human rights obligations by shifting attention from the adoption of torture legislation to variation in its design. Drawing on broader theories of human rights implementation and domestication, we explore how international commitments, domestic political dynamics, policy learning, institutional and legal fit, and historical experiences of violence interact in shaping national approaches to defining torture perpetrators. Methodologically, we bridge legal and social science approaches. Classical legal interpretation is used to interpret the meaning and scope of torture and its perpetrators in national legislation,[5] while quantitative analysis of the original global dataset identifies broader comparative patterns. These analyses are complemented by qualitative case studies of Uganda and Kenya, which use process-based evidence to explore the mechanisms that may underlie the legislative variation identified in the global mapping.

Literature review and analytical framework

The research on torture criminalisation is comparatively limited to that on the reasons behind treaty ratification (Goodliffe & Hawkins, 2006; Sandholtz, 2017; Simmons, 2009; Vreeland, 2008) or on the impact of UNCAT (and other treaties) on the respect for human rights (Fariss, 2018; Goodman & Jinks, 2003; Hathaway, 2002; Simmons, 2009). Legal scholars have explored legislative and constitutional provisions on torture, including its definition under international law and the interpretation of the scope of perpetrators (Boulesbaa, 1999; Casey-Maslen, 2025; Cheah, 2021; Clapham & Gaeta, 2018; Fernandez & Muntingh, 2016; Gaeta, 2021; Marchesi, 2008; Oette, 2024; Rodley & Pollard, 2006, 2009). Casey-Maslen (2025) contributed a global mapping of national anti-torture legislation, and while it covers how torture is criminalised nationally, it lacks information on the status of torture perpetrators as state or nonstate actors. Studying the prohibition of torture in national constitutions, Chilton and Versteeg (2015) find that such prohibitions do not affect the rate of torture on an aggregate level. Berlin (2020) examines the diffusion of domestic criminal laws concerning genocide, war crimes, and crimes against humanity. In a study directly relevant to torture criminalisation, Berlin (2023) examines the adoption and strength of domestic torture laws, conceptualised as the number of UNCAT elements included in the law, covering the adoption and amendment of laws from 1920 to 2017. Drawing on these data, Berlin (2023) finds that countries with stronger torture laws, more closely aligned with UNCAT provisions, on average experience reduced rates of police torture.

While these existing studies describe or evaluate torture legislation, we know comparatively little about why states adopt different legislative models. To understand variation in torture legislation, we therefore draw on broader scholarship examining how states domesticate international human rights norms and obligations. Such research suggests several broad factors and mechanisms through which treaty commitments become reflected in domestic legislation. One line of research emphasises domestic political conditions, including the level of respect for human rights (Fariss, 2018), influence from civil society and international organisations (Wotipka & Tsutsui, 2008), and regime type or democratisation (Goodliffe & Hawkins, 2006; Ryckman, 2016). A second perspective focuses on governments' responses to international norms, emphasising processes such as strategic adaptation, where governments act instrumentally in response to growing pressure; moral persuasion, where governments adopt the discourse of human rights and perceive themselves to be bound by human rights obligations; institutionalisation, where human rights norms become a normalised standard in policy and behaviour; and socialisation, where norms are fully internalised (Risse & Sikkink, 1999). A third body of work examines policy diffusion, in which governments are influenced by the actions of others or, for example, by international organisations (Shipan & Vold-

4 The dataset and replication materials for this article, including information on whether and when State Parties adopted an autonomous torture offence and the scope of perpetrators covered by the legislation, is available through Harvard Dataverse.

5 Classical legal interpretation draws on the sources of international law, including international conventions, international custom, general principles of law as well as national judicial decisions and legal publications, as set out in Article 38 of the Statute of the International Court of Justice. Classical legal interpretation builds on general rules of interpretation in international law, as codified in Articles 31 and 32 of the Vienna Convention on the Law of Treaties, UNTS 1155 331, 23 May 1969.

en, 2008; Simmons et al., 2006). These diffusion mechanisms include learning, where governments draw on the successes or failures of others to inform their action (Meseguer, 2005); coercion and pressure, through which the costs and benefits of governments are affected (Nielsen & Simmons, 2015; Simmons et al., 2006); and imitation, emulation, or mimicking, where governments adopt "appropriate" policies or do so more unreflectively (Simmons et al., 2006). Finally, these processes are often conditioned by domestic institutional opportunities, including the fit with existing legislation, policy and institutions, political prioritisation, and windows of opportunity in the form of reform moments such as democratisation, peace agreements, or constitutional change (Baird, 2011; McKibben & Western, 2020; Molloy, 2021).

Rather than offering an exhaustive account of implementation, this review identifies the principal mechanisms that may shape the domestication of international human rights obligations. Existing scholarship primarily explains why states adopt human rights legislation but offers less guidance on variation in the substantive design of such legislation. In particular, it says little about why some states define torture in line with the perpetrator categories contained in UNCAT while others extend criminal liability to a broader range of nonstate actors. We therefore use these perspectives as complementary analytical lenses for examining how domestic actors interpret, negotiate, and sometimes strategically reshape international legal obligations. The empirical analysis explores how these mechanisms interact with countries' historical experiences of torture and political violence in shaping the design of domestic anti-torture legislation.

Method

This study examines variation in how State Parties to UNCAT criminalise torture in domestic law, focusing in particular on differences in the scope of perpetrators covered by national legislation.

Our methodological approach combines classical legal interpretation with empirical social science methods. Classical legal interpretation allows us to identify how states define torture in national legislation, how they delimit the category of perpetrators, and how closely these definitions align with (or diverge from) UNCAT and the interpretation of the torture prohibition under human rights law. Through close reading of statutes, preparatory works, and constitutional provisions, we assess how governments interpret the meaning and purpose of the torture offence.

Quantitative and descriptive methods are used to shed light on whether and how State Parties to UNCAT have criminalised torture as a separate offence. We follow CAT's interpretation that torture is criminalised when it is incorporated into domestic criminal law, either as a stand-alone act or as a specific offence in the Criminal Code.[6] This global analysis draws on an original dataset covering the period from 1984 (when UNCAT was adopted) to 2023.[7] The dataset captures two core aspects of national anti-torture legislation. First, we examine whether torture is criminalised as a separate crime. This coding draws on information from national legislation, reports, and concluding observations from and/or state reports to the Committee against Torture (CAT); where missing, we used corresponding documents from the UN Human Rights Committee.[8] In rare cases, we consulted reports or documents from other international organisations.[9] While nearly all constitutions prohibit torture (Elkins et al., n.d.), and some countries may regulate it through other legal provisions, these are beyond the scope of this article, as are provisions criminalising torture specifically as a crime against humanity or a war crime. Nor do we address how courts in monist countries implement UNCAT, as access to relevant case law is both limited and uneven.

Second, we examine how national legislation defines torture perpetrators, asking whether domestic laws follow the perpetrator categories contained in UNCAT or extend criminal liability to a broader range of nonstate actors. The Convention defines torture as an act "inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity" (Convention against Torture, 1984, Art. 1). This formulation has been interpreted as encompassing certain nonstate actors who exercise authority or control over territories or populations comparable to that of state officials (Zach, 2019; see S. S. Elmi v. Australia, 1999, para. 6.5).

Our interest lies in legislative approaches that go beyond this minimum scope by extending criminal liability to nonstate actors who do not exercise governmental authority or functions comparable to those of the state. Such actors can include

6 This excludes countries that treat torture solely as an aggravating circumstance to another offence, as well as countries that criminalize torture only when committed extraterritorially.

7 The caveat is that there might be other or newer versions of criminal codes and stand-alone acts that may show other results than our dataset. We encourage anyone with information in this regard to reach out to us.

8 This is the case for the Gambia, Georgia, Guyana, Jamaica, and the Dominican Republic.

9 This is the case of Libya where resources of the UN Office of the High Commissioner for Human Rights have been used: https://www.ohchr.org/sites/default/files/Documents/Countries/LY/TortureDeathsDetentionLibya.pdf accessed 11 June 2024.

armed nonstate actors, organised criminal groups, private security companies, and even private individuals.

We code this dimension as a binary variable, distinguishing between State Parties that follow the UNCAT definition and those that interpret the UNCAT definition as a minimum threshold. The category of State Parties that widen the circle of nonstate perpetrators does so in four distinctive ways. States may (1) define torture perpetrators as private individuals, (2) define perpetrators in generic terms, such as "anyone" or "whoever", (3) define only the prohibited act without specifying the status of the perpetrator (e.g., referring simply to "any act"), or (4) explicitly extend liability to armed or criminal groups irrespective of their 'official capacity'. Although this group of countries have slightly different conceptions of nonstate torture perpetrators, they are coded together because they represent the group of States conceiving the UNCAT definition not as a standard but rather as a core level of protection, fit for adapting to their national contexts. Details of this coding are provided in connection with Figure 2.

Qualitative analysis is used to explore the processes through which states interpret and domesticate UNCAT's provisions on torture, drawing on the analytical framework outlined above. The qualitative analysis examines how mechanisms identified in the literature, such as strategic adaptation and domestic political opportunity structures, are reflected in the legislative processes surrounding anti-torture laws. The case studies also explore how these broader mechanisms interact with countries' historical experiences of torture and political violence in shaping the scope of domestic torture legislation. As such, the qualitative analysis is intended to develop theoretically informed explanations and generate hypotheses about the factors that may contribute to variation in legislative design. The analysis draws on parliamentary debates, reports to UN bodies, legislative drafts and preparatory works, reports by legislatures and parliamentary committees, and publications from civil society organisations and national human rights institutions (NHRIs).

Uganda and Kenya were selected as illustrative examples because they represent the clearest divergence identified in the global dataset. Uganda's legislation explicitly extends criminal liability for torture to private actors, whereas Kenya largely follows the perpetrator categories contained in UNCAT. This contrast makes the cases well suited for exploring alternative pathways through which states interpret and translate international legal obligations into domestic legislation. The two countries also share several important contextual characteristics. Both have a common-law legal heritage, belong to the same regional human rights system, have experienced long histories of torture, and have undergone periods of constitutional and political reform. Both have active civil society organisations and NHRIs that engage with international human rights mechanisms, and both criminalised torture as a separate offence within a relatively short period of time. Yet despite these similarities, they adopted markedly different legislative approaches to defining torture perpetrators. While the analysis cannot establish causal relationships, it provides insight into plausible mechanisms linking broader theories of human rights implementation to variation in the design of domestic torture legislation.

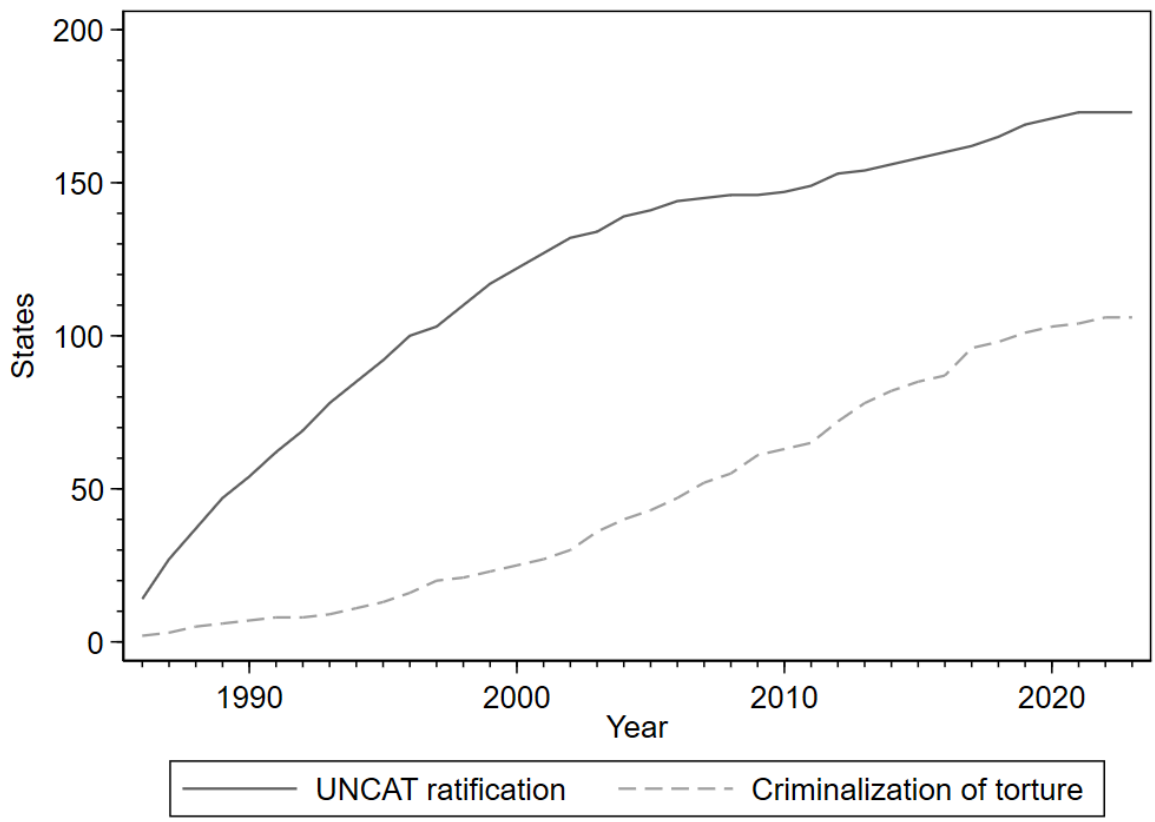
Findings: Global patterns of criminalisation of torture

In the following, we present descriptive statistics on how states have criminalised torture as a separate offence. We begin by examining the relationship between UNCAT ratification and the criminalisation of torture. The Convention against Torture (1984, Art. 4.1) establishes that State Parties shall "ensure that all acts of torture are offences under its criminal law", including torture that is committed outside the context of an armed conflict or that is not part of a crime against humanity. According to the Convention's preparatory works, states may fulfil this obligation either by enacting a stand-alone torture offence or by making acts of torture punishable under other criminal offences in national law (Burgers & Danelius, 1988, p. 129). The travaux préparatoires therefore indicate that the Convention leaves states some discretion regarding the legislative form through which torture is criminalised (Burgers & Danelius, 1988, p. 129).

The Committee against Torture has subsequently adopted a more specific interpretation. The commentary to UNCAT warns that the absence of a specific offence of torture in the criminal law "may cause a legal *vacuum*" (Katona, 2019, para. 3.3.1), and CAT has consistently, in its concluding observations and General Comments, held that it is of utmost importance to name and define torture under a specific criminal label in national law to alert to the special gravity of the crime.[10] Consist-

10 See for instance: UN Committee against Torture, General Comment No. 2 Implementation of Article 2 by State Parties, CAT/C/GC/2 paras 9–11 (2008). The Committee often reiterates the message to explicitly name the offence of torture in national law, most clearly put in General Comment 2 on the implementation of Article 2 of the Convention, and the obligation to effectively prevent acts of torture. General Comment 2 affirms that "Serious discrepancies between the Convention's definition and that incorporated into domestic law create actual or potential loopholes for impunity", the General Comment continues stating that naming and defining torture in national law will "directly advance the Convention's overarching aim of preventing torture and ill-treatment", promoting its aim,

Figure 1. *Number of State Parties to UNCAT and number of these that have criminalised torture*



ent with this interpretation, and for the purposes of this study, we focus on the existence of an autonomous offence of torture in domestic criminal law. This reflects our view that a distinct offence provides the clearest legal basis for accountability and facilitates consistent comparison across national legal systems.

Figure 1 shows the number of State Parties to UNCAT over time and how many of these have criminalised torture as a separate offence.[11]

Figure 1 shows that although UNCAT is a widely ratified treaty, with 173 State Parties by the end of 2023, the criminalisation of torture as an autonomous crime has lagged significantly behind. Ratifications were rapid and widespread until roughly 2010, but the criminalisation pattern follows a slightly different trajectory. A persistent gap – indicating delays in domestic implementation – appears when comparing the two lines (of ratification and criminalisation, respectively). In 2000, only about 20% of State Parties had criminalised torture as a separate crime; by 2010 the figure had reached over 40%, and by 2020 nearly 60%. A few countries, such as Argentina and Sudan, enacted torture offences before ratifying UNCAT,[12] while others – New Zealand and Sri Lanka among them – criminalised torture in the same year as ratification.[13] Among

and "alerting everyone, including perpetrators, victims, and the public, to the special gravity of the crime of torture".

11 States enter the analysis when they ratify UNCAT, i.e., when they become State Parties. This includes, for example, Argentina, which adopted legislation before ratifying the Convention. This choice ensures that comparisons take place between the same population of states.

12 The other State Parties criminalizing torture before ratifying UNCAT are: Andorra, Canada, the Central African Republic, Cyprus, the Dominican Republic, Egypt, Greece, Ireland, Montenegro, Guinea-Bissau, and Sao Tome and Principe.

13 The other State Parties adopting legislation in the same year as ratification are: Antigua and Barbuda, Honduras, Malta, and the United Kingdom.

the relatively late adopters, the average time between ratification and criminalisation now exceeds 13 years.

While these figures are descriptive, they reveal an important pattern: many State Parties have not interpreted—or at least have not implemented—UNCAT as requiring a standalone torture offence in law. Whether the Convention itself requires such an offence remains a matter of legal debate and is beyond the scope of this article. As discussed above, the issue can be traced to the Convention's preparatory works, which indicate that states retain some discretion regarding the legislative form through which torture is criminalised.

The dataset's patterns suggest that ratification and criminalisation are not only temporally distinct but also driven by different political, legal, and strategic logics. Ratification has been widespread and relatively quick, often reflecting international pressure, reputational incentives, or low domestic political cost. Criminalisation, however, involves deeper legal reform which may have implications for security forces and legislative processes that may trigger more direct domestic contestation. Overall, it is clear that criminalisation of torture as a separate crime has been both rarer and more of a drawn-out process than ratification of UNCAT has been. Beyond timing, the substance of criminalisation also varies. As discussed, states may choose to criminalise torture committed solely by state actors or persons acting in an official capacity, as defined in UNCAT, or extend criminal liability to nonstate actors without a comparable governmental function. Extending criminal liability to all nonstate actors would be in line with Article 1.2 of UNCAT, establishing that the definition of torture in the convention "is without prejudice to any international instrument or national legislation which does or may contain provisions of wider application". Consequently, in addition to the variation in ratification of UNCAT and in subsequent criminalisation of torture, there is also variation in how torture has been criminalised domestically, specifically in the range of perpetrators covered. Figure 2 shows the variation over time among State Parties to UNCAT when it comes to which actors their criminalisation encompasses.[14]

Three main findings emerge from the patterns in Figure 2 on the scope of perpetrators covered by criminalisation. First, most State Parties that have criminalised torture as a separate offence have adopted UNCAT's scope of torture perpetrators, limiting liability to state agents and nonstate actors exercising comparable official functions. By the end of 2023, only 30 out of 106 State Parties that criminalised torture as an autonomous crime had extended the offence to also cover nonstate actors, beyond those with comparable governmental functions. We have not found any State Party that criminalises torture exclusively by nonstate actors. The widened scope of torture perpetrators is conceived very differently across countries, and CAT shows no consistent stance on the scope of perpetrators. In some concluding observations (specifically Mexico, Costa Rica, and Slovenia), the Committee (2008, 2011, 2019) does not remark on the definition of torture covering also private individuals as perpetrators. However, in others (Belgium, Armenia, Italy, Montenegro, and Ecuador) this is underlined as problematic (CAT, 2009, para. 14; 2012, para. 10; 2014, para. 6; 2017a, para. 11; 2017b, para. 10).

Among the 30 countries that include nonstate actors (beyond the UNCAT definition), most use broad and general phrasing such as "anyone",[15] "who",[16] "a person",[17] "any other person",[18] "whoever",[19] "he",[20] or "when the perpetrator is not a public official".[21] Some countries make it clear in the legislative text that torture can be committed by private individuals; this is the case of Uganda,[22] the Maldives,[23] Mexico,[24] and Nigeria.[25] A third group of eight countries does not define the status of the perpetrator at all, but instead frames the offence solely in terms of the prohibited conduct, using formulations such as "any act", "actions", or "constranger/submeter alguém".[26] Because these provisions do not restrict liability to particular categories of perpetrators, they appear to permit the prosecution of torture committed by private individuals as well as public officials.

Bolivia and Guatemala stand out among the 30 countries that criminalise torture by nonstate actors, as they extend lia-

14 The category of State Parties criminalizing torture by all nonstate actors includes two exceptions: Bolivia and Guatemala, which restrict liability to criminal groups. Importantly, this limitation does not hinge on the exercise of a comparable governmental function.

15 Belgium (quiconque), Montenegro, Algeria, Rwanda and Luxembourg (toute personne), and Italy (chiunque).

16 Costa Rica and Nicaragua (quién), Cabo Verde (quem)

17 Latvia and Ecuador ('la persona').

18 Nepal.

19 Serbia.

20 Colombia (él).

21 Paraguay ("cuando el autor no fuere funcionario").

22 "any person whether a public official or other person acting in an official or private capacity".

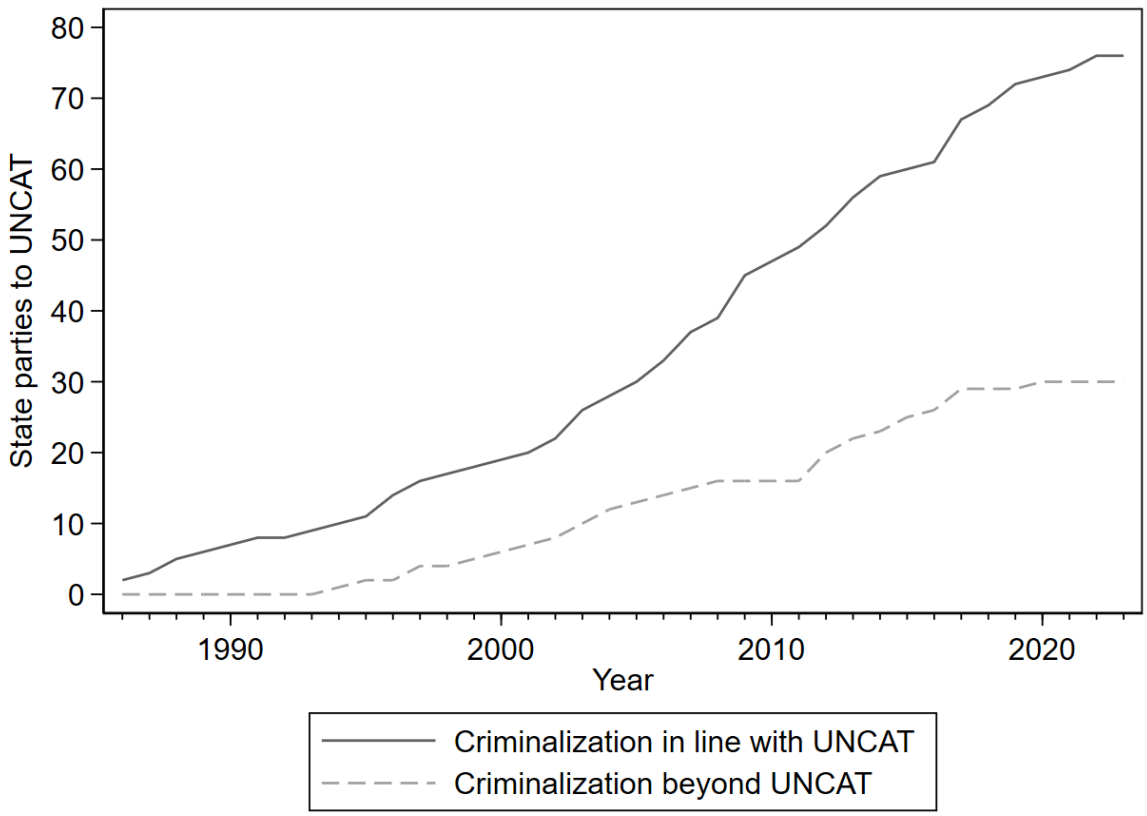
23 "'Torture' is defined as an act, or deed, of a public servant, or by the instigation of, or with the consent of, or with the acquiescence of the public servant, or by private individuals".

24 "También comete el delito de tortura el particular que".

25 "tout autre individu".

26 France and Central African Republic ("le fait de soumettre une personne à des tortures"), Dominican Republic, Brazil, Armenia, Ukraine, Georgia and Bangladesh.

Figure 2. *Number of State Parties to UNCAT criminalising torture by state agents and persons acting in an official capacity, compared with those extending criminalisation to nonstate actors beyond the UNCAT definition.*



bility only to criminal groups. In 10 of the 30 countries, torture committed by a public official is an aggravating circumstance.[27] Three countries stipulate that the public official who commits torture will also be subject to a ban on exercising public functions for a set period of time.[28] These different definitions of nonstate torture perpetrators in law influence the scope of implementation of the legislation: given the phrasing of the laws, in 28 of the countries' instances of private violence can most likely be considered torture when reviewed by courts,[29] while in Bolivia and Guatemala, the law delimits nonstate torture perpetrators to criminal groups.

The second finding is that State Parties typically decide both to criminalise torture and to define its scope of perpetrators at the same time. States rarely revise their legislation. We found no cases where State Parties later broadened the scope of legislation (i.e., went from covering only state actors or nonstate actors with comparable functions to also including all nonstate actors), and only two countries initially included nonstate torture in their respective legislation but later changed stance. Argentina's torture criminalisation includes nonstate torture in the legislative text, but this has later been refused in Argentinian jurisprudence to better correspond to the definition in UNCAT.[30] Togo also initially included nonstate torture

27 Bolivia, Brazil, Belgium, Montenegro, Algeria, Georgia, the Central African Republic, Ecuador, Italy and Serbia.

28 Colombia, Costa Rica and Nicaragua.

29 If the rest of the constitutive elements of torture are met (severe pain or suffering, intentionality of the acts and if committed for a specific purpose).

30 Andrada Gustavo Marcelo s/ recurso de Casación, Sala 1ª del Tribunal de Casación de la Provincia de Buenos Aires, en Causa N° 33.747, (13 October 2011) "...la tortura es un delito especial que sólo puede ser cometida por un funcionario público o por un particular que actúa bajo su amparo (...) El Código Penal, es tributario en este tema de los textos convencionales y de

in its criminalisation, but this was later amended to better align with the Convention's definition (World Organisation against Torture [OMCT], 2024).[31] Thus, in practically all cases the adoption of legislation and the definition of perpetrators were simultaneous decisions; decisions which only in rare cases have been revisited.

Finally, the earliest adopters of autonomous torture laws did not include nonstate actors. France was the first to include nonstate actors beyond those included in UNCAT in its legislation in 1994, followed notably by many Latin American countries such as Guatemala (1995), Brazil (1997), and Paraguay (1997). Although criminalisation has become more widespread over time, this has not been matched by an increase in the inclusion of a wider circle of nonstate actors as perpetrators. The patterns in Figure 2 indicate that the time trend in including nonstate actors as perpetrators, beyond those included in UNCAT, is not increasing at the same rate as overall criminalisation. Thus, over time, a relatively increasing proportion of State Parties has opted to criminalise torture by state actors and nonstate actors with comparable functions, rather than to also include acts of torture by all nonstate actors. While descriptive data cannot fully explain this trend, one plausible interpretation is that states increasingly prefer to align their legislation with the definition of perpetrators found in UNCAT. This interpretation is consistent with Berlin's (2023) finding that domestic torture laws have increasingly converged toward the elements contained in UNCAT. Combined with the observations that states very rarely change the scope of perpetrators, this means that these trends persist – and increase – with time.

In sum, variation exists not only in whether State Parties criminalise torture at all but also in which perpetrators are covered. While 106 State Parties to UNCAT have criminalised torture, the majority (76) limit the definition to state actors or nonstate actors with comparable functions, and only 30 extend it to a wider set of nonstate actors. To better understand the variation identified in the global mapping, we now turn to the illustrative examples of Uganda and Kenya.

Kenya and Uganda as illustrative examples: Understanding the variation in the definition of 'torture perpetrators'

As shown in Table 1 below, while both countries criminalise torture as a separate offence, they differ markedly in their definition of perpetrators. Uganda extends criminal liability to persons acting in both official and private capacities, whereas Kenya largely limits liability to public officials or persons acting on their behalf. Rather than seeking to establish definitive causal explanations, the case studies draw on the analytical framework developed above to explore how international commitments, domestic political dynamics, institutional and legal fit, and historical experiences of violence may have contributed to these divergent legislative outcomes.

Table 1. *Scope of perpetrators under the torture legislation of Kenya and Uganda*

Kenya	**Uganda**
"For the purposes of this Act, "torture" means any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person [...] when such pain or suffering is inflicted *by or at the instigation of, or with the consent or acquiescence of* ***a public officer or a person acting on behalf of a public officer*** [...]" (Prevention of Torture Act 2017, Art. 4).	"In this Act, torture means any act or omission, by which severe pain or suffering whether physical or mental, is intentionally inflicted on a person *by or at the instigation of or with the consent or acquiescence of* ***any person whether a public official or other person acting in an official or private capacity*** [...]" (The Prevention and Prohibition of Torture Act 2012, Art. 2(1)).

Uganda: Torture has played a prominent role in Uganda's history. It was pervasive under Idi Amin's dictatorship (1971-79), and although the National Resistance Movement government presented itself as a rights-respecting alternative, torture has persisted throughout President Museveni's tenure (Centre for Policy Analysis [CEPA], 2017). Torture has been committed by a wide range of actors, including state security agencies such as the Police, People's Defence Forces, and Prisons Service; armed insurgent groups, most notably the Lord's Resistance Army (LRA); and private actors, including vigilante groups and mobs (Ssengendo et al., 2015, p. 20; Uganda Human Rights Commission [UHRC], 2015a, p. 19, 2020). While human rights violations have long been widespread, violence in Uganda has often been characterised by both state repression and conflict involving nonstate actors (Schmitz, 1999, pp. 72–73).

su génesis histórica." Given this evolution in jurisprudence, Argentina is coded as only criminalizing torture by state actors.

31 Togo is coded as criminalizing torture by nonstate actors 2015-2022 (when the study ends).

This broader context continued into the period when the anti-torture legislation was developed. The Committee against Torture (2022b, para. 11) has expressed concern about the widespread and frequent practice of torture in Uganda. Torture and ill-treatment remain among the most frequently recorded human rights violations (Ssengendo et al., 2015, p. 28; UHRC, 2024, p. 137), and state security forces continue to be implicated in torture and unlawful detention (Human Rights Watch [HRW], 2022). At the same time, violence by nonstate actors has remained a salient feature of the Ugandan context. Monitoring documented hundreds of killings linked to mob justice in 2021 (CAT, 2022b, para. 41), while data from the Uganda Human Rights Commission (2015a, p. 19) show that, in 2014, the Defence Forces accounted for 74 complaints alleging torture and ill-treatment, followed by 28 complaints against "private individuals". These patterns formed an important backdrop to the legislative process, suggesting that torture in Uganda was understood not solely as a practice of state officials but also as violence committed by armed groups and private actors.

Uganda adopted the Prevention and Prohibition of Torture Act (PPTA) in 2012, followed by implementing regulations in 2017. The Act defines torture in accordance with international standards— requiring severe pain or suffering, intent, and purpose —but extends the category of perpetrators beyond UNCAT by including persons acting either in a public or private capacity (see Table 1) (Uganda, 2012, Art. 2(1)). The legislative process reflects several mechanisms highlighted in the broader literature on the domestication of international human rights obligations.

First, the legislative process was broadly consistent with mechanisms of normative commitment and international pressure. Uganda's preparatory works identify alignment with UNCAT as a key "policy objective" (Parliament of Uganda, 2010, p. 1), while emphasising the need to strengthen the protection of human rights (Parliament of Uganda, 2010, p. 3). Uganda had also been encouraged by international and regional human rights bodies to strengthen its legal framework. The African Commission on Human and Peoples' Rights (2009, 2011, 2015) urged Uganda to adopt anti-torture legislation and later to operationalise it through implementing regulations, while CAT (2005) criticised the absence of specific anti-torture legislation following its review of Uganda's initial report. Together, these developments are consistent with research emphasising the role of international institutions and human rights commitments in encouraging domestic legislative reform.

Second, the Ugandan case is also consistent with strategic adaptation, as emphasised in parts of the literature on human rights implementation (e.g., Simmons, 2009). The timing of the legislation coincided with Uganda's engagement with the International Criminal Court (ICC). Uganda ratified the Rome Statute in 2002 and became the first country to self-refer a situation to the ICC in 2004, requesting investigation into crimes committed by the LRA in Northern Uganda (ICC, 2004). Not only the ICC investigation, but also the government's decision to broaden the scope of perpetrators in the PPTA appears consistent with a broader strategy of adapting international legal institutions to domestic political priorities (e.g., REDRESS, 2006, p. 54). Similar strategic considerations have been suggested to underlie Uganda's engagement with the ICC itself, with recent research arguing that the Museveni government used the Court strategically to target political opponents while limiting scrutiny of abuses committed by state actors (Johns & Parente, 2024; Kasande, 2024). Similarly, contemporary analyses suggest that broadening the definition of torture to include private actors enabled Uganda to extend criminal liability to nonstate (armed) groups while simultaneously demonstrating commitment to international human rights norms (REDRESS, 2006, p. 54, 2016, p. 18). Although the available evidence does not permit firm conclusions about governmental motivations, these developments are consistent with a strategic adaptation perspective in which governments implement international norms in ways that also advance domestic political interests.

Subsequent implementation provides some support for this interpretation. Although Uganda's legislation encompasses both state and nonstate actors, civil society organisations report that prosecutions under the PPTA have remained extremely limited with respect to public officials despite persistent allegations of torture by state security forces (African Centre for Treatment and Rehabilitation of Torture Victims [ACTV] & International Rehabilitation Council for Torture Victims [IRCT], 2021; ACTV et al., 2022). At the same time, the broader definition created a legal framework through which torture committed by nonstate actors could be prosecuted. While these implementation patterns cannot demonstrate that the legislation was intentionally designed for this purpose, they are consistent with the strategic adaptation argument outlined above: broadening the definition of torture expanded the state's legal tools for addressing violence by nonstate actors without necessarily strengthening accountability for torture committed by state officials.

Third, the legislative process also displays elements of policy learning. During the drafting of the legislation, the Parliamentary Committee on Legal and Parliamentary Affairs undertook study visits to Burundi and the Philippines, where anti-torture legislation had recently been adopted (Parliament of Ugan-

da, Committee on Legal and Parliamentary Affairs, 2012). Meetings with legislators, government officials, and civil society organisations informed the drafting process. Rather than simply mimicking or emulating foreign legislation, Ugandan policymakers appear to have selectively adapted comparative experiences to domestic conditions. Although neither Burundi nor the Philippines extended criminal liability to all nonstate actors, Ugandan policymakers drew on broader conceptions of torture in international criminal law and comparative legal practice to conclude that torture committed by private actors could also be criminalised in domestic legislation (Parliament of Uganda, Committee on Legal and Parliamentary Affairs, 2012, para. 5(iv)). This process corresponds closely to learning mechanisms identified in the broader literature on policy diffusion.

Finally, the Ugandan case illustrates how domestic institutional and historical factors conditioned the domestication of international norms. The literature suggests that the domestic implementation of international obligations is shaped also by the degree of institutional and legal fit with existing domestic frameworks. In Uganda, the 1995 Constitution appears to have provided such a foundation. Articles 24 and 44 establish respect for physical integrity and freedom from torture as non-derogable rights and frame these protections broadly rather than exclusively in relation to state actors. This constitutional framework therefore provided a legal basis that was compatible with extending criminal liability beyond the perpetrator categories contained in UNCAT. At the same time, the preparatory works and legislative comments repeatedly situate the legislation within Uganda's own experience of violence, referring not only to torture committed by state agents but also by private security actors and armed groups "such as Kony" (founder of the LRA) (UHRC, 2015b, p. 13). They further explain that persons acting in a private capacity "may or may not be acting on their own initiative", suggesting an awareness of the blurred boundaries between private actors, criminal organisations, and actors linked to the state (UHRC, 2015b, p. 13). At the same time, the preparatory works emphasise deterrence, reparations for victims, and the financial costs associated with state compensation awards (Parliament of Uganda, Committee on Legal and Parliamentary Affairs, 2012, para. 5(iii); Parliament of Uganda, 2010, p. 2), illustrating how international norms were interpreted through domestic legal and political priorities.

Kenya: Torture has long been associated with state repression in Kenya. The country acceded to UNCAT amid contested elections and constitutional changes that marked its transition to formal multiparty politics (Ajulu, 1998, p. 275). These developments unfolded alongside growing domestic and international pressure regarding human rights violations (Schmitz, 1999). Throughout the Moi era, torture, incommunicado detention, and the operation of torture houses were closely associated with state security agencies (Schmitz, 1999). The government responded with some institutional reforms, including the establishment of the Standing Committee on Human Rights in 1996 and amendments to the Police Act in 1997 explicitly prohibiting torture by police officers (Kenya, 1961; Republic of Kenya, 1996).

This historical experience shaped later understandings of torture in Kenya. Although human rights violations were not committed exclusively by state actors, torture during the 1980s and 1990s was predominantly associated with state repression and executive overreach (Schmitz, 1999). The Truth, Justice and Reconciliation Commission (2013) similarly concluded that successive governments and security agencies had consistently been the principal perpetrators of torture and related abuses. This understanding also emerged in parliamentary debate on the Prevention of Torture Act. During debate on the 2017 legislation, Hon. Wetangula described the state as the biggest perpetrator of human rights violations (Kenya National Assembly, 2017, p. 14). Together, these accounts suggest that torture was widely understood as a state-centred practice, providing an important backdrop to the approach to torture criminalisation.

The Kenyan legislative process reflects several mechanisms identified in the broader literature on the domestication of human rights obligations.

First, the Kenyan case supports the importance of normative commitment and international pressure. The Prevention of Torture Act emerged after a prolonged period of constitutional and legislative reform, during which both domestic and international actors consistently called for dedicated anti-torture legislation (Schmitz, 1999). Regional and international human rights bodies—including CAT (2013; United Nations Office at Geneva, 2008) and the African Commission on Human and Peoples' Rights (2014), particularly through its Committee for the Prevention of Torture in Africa—repeatedly urged Kenya to adopt legislation implementing UNCAT. Reviewing Kenya's reports in 2008 and 2013, CAT (2013; United Nations Office at Geneva, 2008) criticised the absence of domestic legislation criminalising torture and called on Kenya to enact a dedicated anti-torture law as a matter of urgency. Civil society organisations actively relied on these recommendations in their advocacy, contributing to sustained pressure for legislative reform (ICJ Kenya Section et al., 2012; Kenya Stakeholders Coalition for the UPR, 2012; World Organisation against Torture, 2024).

The emphasis on international commitments is clearly reflected in the legislative materials themselves. The Bill identifies two principal purposes: implementing the constitutional prohibition of torture and fulfilling Kenya's obligations under UNCAT (Kenya National Assembly, 2016, pp. 1021, 1038). Legislators further emphasised that the legislation would establish mechanisms for preventing torture, punishing perpetrators, and providing reparations to victims (Kenya National Assembly, 2016, pp. 1021, 1038). These developments are consistent with broader scholarship highlighting normative commitment and international institutions as important drivers of domestic implementation.

Second, compared to Uganda, the Kenyan material provides relatively little evidence that strategic political adaptation shaped the scope of perpetrators. Rather than expanding criminal liability beyond the categories contained in UNCAT, legislators largely sought to reproduce the Convention's definition in domestic law. As shown in Table 1 above, the resulting Act (Kenya, 2017, Art. 4) adopted a somewhat narrower formulation than UNCAT, but the available evidence suggests that this may have reflected legislative interpretation rather than a deliberate effort to narrow or redirect accountability. When questioned by CAT, the Kenyan delegation argued that persons "acting on behalf of a public officer" should be understood as encompassing persons acting in an official capacity, while offences committed by other private actors would continue to be prosecuted under the Penal Code (Office of the United Nations High Commissioner for Human Rights, 2022). Unlike Uganda, therefore, the Kenyan case offers little evidence that governments strategically reshaped the scope of perpetrators to pursue broader political objectives.

Third, the Kenyan case illustrates the importance of institutional and legal fit. The post-election violence of 2007–2008 constituted a critical juncture that culminated in Kenya's far-reaching constitutional reforms. The 2010 Constitution established one of Africa's most comprehensive Bills of Rights and entrenched freedom from torture as a non-derogable right (Articles 25 and 29). Although the Constitution did not define torture or identify potential perpetrators, it created a strong constitutional foundation for subsequent legislation. The Prevention of Torture Act itself explicitly presents implementation of the constitutional prohibition as one of its central objectives (Kenya National Assembly, 2016). These developments are consistent with the broader implementation literature, which emphasises that existing legal institutions and constitutional frameworks shape how international obligations are incorporated into domestic law.

At the same time, this constitutional and legal framework developed within a political context in which torture was primarily understood as an abuse committed by the state. Amnesty International Kenya has argued that the legislation "borrows heavily" from UNCAT but does not sufficiently adapt the definition to Kenyan circumstances, particularly by failing to encompass situations in which police officers operate in collaboration with criminal groups (Legal Resources Foundation, 2020, p. 72). Similarly, political debate surrounding the legislation consistently framed torture as a problem of state violence, leaving comparatively little conceptual space for extending criminal liability to private actors (ICJ Kenya Section et al., 2012, pp. 47–48).

Implementation patterns are broadly consistent with this interpretation. Despite legislation directed specifically at torture by state officials, prosecutions under the Prevention of Torture Act have remained rare, while reports continue to document widespread allegations of torture committed by police and other security agencies (CAT, 2022a; Independent Medico-Legal Unit [IMLU], 2022, 2023). The Kenyan experience therefore indicates that defining torture primarily as a state crime does not by itself ensure effective accountability in practice.

Taken together, the two case studies suggest several hypotheses that warrant broader investigation in future research. One is that states whose histories of torture involve both state and nonstate actors may be more likely to extend criminal liability beyond the perpetrator categories contained in UNCAT. A second is that strategic political incentives may encourage governments to broaden torture legislation where doing so facilitates accountability for nonstate opponents while simultaneously reinforcing claims of compliance with international human rights obligations. A third is that the design of torture legislation may be conditioned by the degree of fit between international obligations and existing domestic legal and constitutional frameworks.

Conclusion

Criminalising torture is a central element of the domestic implementation of the United Nations Convention against Torture. Yet the domestication of international legal obligations is not simply a question of whether states legislate, but also of how they define the offence in national law. Despite a growing literature on treaty ratification and implementation, comparatively little attention has been paid to variation in the design of domestic torture criminalisation, particularly regarding the scope of potential perpetrators. This article has sought to address that

gap through a global mapping of domestic torture legislation and illustrative case studies of Uganda and Kenya.

We arrive at three main findings. First, we find that there is important variation among State Parties to UNCAT when it comes to the criminalisation of torture. Nearly two-thirds of State Parties have criminalised torture as a separate offence, and only around a fourth of these in turn have included acts by all nonstate actors (with no comparable governmental functions) in such criminalisation. Although not the primary focus of this article, our findings further suggest that variation exists in how states understand and operationalise the concept of "nonstate actors", with implications for who may ultimately be prosecuted for torture.

Second, the illustrative examples of Uganda and Kenya suggest that variation in domestic torture legislation is best understood through a combination of international and domestic factors. Both countries faced similar international obligations under UNCAT and experienced sustained pressure from international and regional human rights bodies to adopt dedicated anti-torture legislation. Yet they arrived at markedly different legislative solutions. Drawing on broader theories of the domestication of international human rights obligations, the case studies suggest that international commitments interacted with domestic political dynamics, institutional and legal frameworks, and historical experiences of violence to shape different approaches to defining torture perpetrators. In Uganda, strategic adaptation and policy learning appear to have contributed to a broader definition encompassing private actors, while Kenya's legislation remained closely aligned with a state-centred understanding of torture, reflecting both constitutional developments and longstanding domestic understandings of torture as principally a form of state violence. These findings should be understood as plausible, theory-informed interpretations rather than definitive causal explanations, and point to promising avenues for future comparative research on variation in legislative design.

Third, our findings show the value of examining torture legislation through the broader literature on the domestication of international human rights law. Previous scholarship has primarily focused on why states ratify treaties or adopt implementing legislation. By shifting attention to the design of domestic torture offences, this article shows that theories of strategic adaptation, normative commitment, policy learning, and institutional and legal fit also help illuminate how international legal obligations are interpreted and translated into national legislation. The findings therefore contribute to a growing literature that views implementation not as a uniform process of legal incorporation, but as one of interpretation, adaptation, and domestication.

Our findings may also have implications for the extent to which perpetrators of torture are ultimately held accountable for violations. The experiences of both Uganda and Kenya illustrate that adopting dedicated anti-torture legislation does not by itself ensure effective accountability. In both countries, prosecutions of public officials under the anti-torture legislation remain limited despite persistent allegations of torture by state security forces. In Uganda, the broader statutory definition creates a legal framework through which torture committed by nonstate actors can be prosecuted, while civil society organisations continue to report limited use of the legislation against state officials. These implementation patterns are consistent with, although they do not demonstrate, the possibility that broader legislative definitions may facilitate accountability for nonstate violence without necessarily strengthening accountability for torture committed by state actors. Kenya, meanwhile, illustrates that even legislation specifically directed at state torture may encounter substantial implementation obstacles. Together, the two cases suggest that legislative design represents only one component of effective accountability. Whether different statutory models systematically influence subsequent prosecution patterns remains an important question for future research.

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Beyond individual trauma: Relational harm and relational resilience among former political prisoners in Venezuela

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Key points of interest

- An understanding of the relational nature of the impacts of torture, as well as resilience, is discussed based on the analysis of interviews with survivors of torture in Venezuela.

Abstract

Introduction: The interviews from two participatory action research projects are analysed to understand the impacts of torture and the expressions of resilience found in former political prisoners of Venezuela, with an emphasis on the relational aspects of both the impacts of torture and the strategies used for resilience. *Methods*: Thirty interviews from a first project were analysed and coded using reflexive thematic analysis, and eight interviews from a second project were analysed to refine the categories. *Results*: In addition to replicating findings reported elsewhere on individual suffering, these interviews, developed in collaboration with former political prisoners and their families, reveal a less-reported strand concerning the importance of relationships. Being isolated, witnessing the torture of others and suffering from what they imagine their family members to be suffering were considered the most distressing consequences. We also expand on the findings reported in other contexts regarding the importance of resilience in their testimonies. Resilience, interpreted in light of what oppression seeks to achieve, is categorised into strategies to regain agency and strategies to sustain relationships. *Discussion*: The relevance of focusing on the importance of relationships and of resilience when working with survivors of torture as a way to acknowledge their perspectives and empower their resistance is discussed. The use of participatory action research as an ethical approach that seeks to empower survivors throughout the process is also discussed.

Keywords: torture, relationship, resilience, participatory action research.

Introduction

We are interested in understanding the experiences of people who have suffered political imprisonment and torture, in order to help them resist it and to collaborate in their recovery. Numerous testimonies have been accumulated through projects developed by former prisoners themselves and their families. This study sought to analyse some of the collected material to understand the aftermath of these extreme experiences of terror.

To this end, participatory action research was conducted using reflective thematic analysis to analyse 29 interviews with former political prisoners and 1 family member from a first intervention project, and to contrast preliminary codes with 7 in-

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terviews with relatives of political prisoners and an ex-political prisoner from a second project.

Relationships and Resilience

The need to return to analyse these interviews arose from several experiences working with former political prisoners that challenge some of the more conventional views of clinical-psychological care. Research has clearly identified post-traumatic symptomatology in survivors of torture (Allodi, 1994; Bichescu, et al., 2005; Pfeiffer & Elbert, 2011; Suhaiban, Ruvolo & Javanbakht, 2019). Yet other approaches have captured the limitations of the clinical approach (Daiute, 2013; Kagee & Naidoo, 2004).

Identifying the mechanisms of trauma has been prominent in our field and has led to an emphasis of a clinical perspective that has clearly confirmed the traumatic consequences of torture. Yet our clinical work with political dissidents has highlighted the limitations of working only from that perspective. Many former political prisoners have shared their desire to testify not only to the suffering they endured but also to their efforts to resist. Many also emphasised how their suffering is not individual; they are not at peace when they are freed from prison but rather continue to suffer for those left behind and from the effects their persecution has had on their families, as well as the impact of having to witness the torture of others.

Political persecution and torture are dramatic examples of problems that affect processes ranging from the physiology of the individual to the socio-political sphere. This complexity has been a challenge in providing help to those who have suffered (Beristain, 2012). Therefore, an approach has been advocated that addresses trauma in a way that can transcend the individual perspective, or what Martín-Baró (1994) called "psychosocial trauma" and Saul (2022) "collective trauma." These approaches seek to understand not only individual processes but also the social processes that accompany them within an ecological framework.

As mentioned, interviewees emphasised not only their pain but also the stories of resistance, their convictions, and how they overcame horror. This finding, reported in other parts of the world such as Argentina, Russia, and the Basque Country (Alayarian, 2011; Caro Hollander, 2010; Pérez-Sales, 2023; Rud, Bunina, Vasilevskaia, and Filippova, 2023), invited us to question the categories most frequently used to frame these experiences. Time and again, we have heard discomfort when referring to survivors as victims, arguing that the term reduces their agency, placing them as passive, damaged entities, rather than protagonists of a struggle, which is what defines them in their own view.

Researchers have found that survivors want to share not only their testimony of what they have suffered, but also the actions that reveal their resilience, through which they can show that they were not only victims of the perpetrators' actions, but also protagonists in a story of resistance (Fondacaro & Mazulla, 2018). Salberg and Grand, who have reviewed literature on trauma stemming from the Holocaust, concluded that "the transmission of strength, resourcefulness and resilience, that operates in tandem with the transmission of wounds" had been missing in the scientific literature (p. 1, 2017).

Summerfield (1995), who worked with populations that suffered the ravages of war in Nicaragua, concluded that diagnostic assessments did not allow for an understanding of how they managed to continue functioning and move forward, nor were they reliable in regard to the need for psychological treatment. He proposed that research grounded in local perspectives would allow for the active capacity for resilience to be recorded. Finally, he criticised this approach for placing the focus of recovery in the hands of "experts" rather than the affected communities themselves, which is contrary to fostering agency.

Herman, who has been working with victims of violence for years and proposed the diagnosis of complex trauma (1997), concludes that, in order to organise work in this area, we must make listening to victims a priority. She fears, however, that the language of experts often prevents this from happening (2023).

Taking these observations into consideration, this study sought to examine ex-political prisoners' experiences, ensuring that the methodology was coherent with the need to empower them and actively incorporating their perspectives in the formulation of our objectives, data collection, and interpretation. This is sought by using a participatory action research methodology (Montero, 2004; Llorens, 2020). This has led to, among other things, include the impressions not only of the person who suffered persecution, but also of their family members. On one hand, the study focuses on understanding the importance of relationships in their suffering; on the other, it gives resilience at least equal attention, particularly how relationships are a source of it (Walsh, 2006).

To summarise, we work from a clinical community psychology perspective that seeks to privilege participant engagement through chosen methodologies and theoretical frames that strive to empower their voices, focusing on the relational aspects of torture, as well as on resilience and the role that relationships play in it. Participatory action research is a methodology that prioritises participants' voices in the formulation of problems, data collection, and the interpretation of results, intertwining the production of knowledge with concrete solu-

tions to practical issues to foster empowerment (Montero, 2006; Swantz, 2008).

Torture in Venezuela

Political repression and crimes against humanity have been systematically denounced and repeatedly confirmed by commissions from international organisations such as the UN. Research confirms the use of torture against political dissidents (Llorens, 2024) and by September 2025, the official report of the Independent International Fact-Finding Mission on the Republic of Venezuela had confirmed more than 2,400 political arrests between 2024 and 2025, crimes against humanity, the murder of at least thirty people for political reasons, twenty five of them in state custody, the detention of relatives of political actors to coerce them, clandestine detention centers, torture as state policy that includes cruel acts such as electric shocks to the genitals, prolonged suffocation, and other inhumane treatment, as well as systematic sexual violence against women, adolescents, and LGBT people, demonstrating that state terrorism is practiced in Venezuela (UN Human Rights Council, 2025).

State terrorism has been carried out increasingly for more than a decade against the civilian population, subjecting the country to what organisations monitoring the situation describe as a "permanent state of emergency" (WOLA, 2024), which has produced thousands of victims.

It is useful to include the considerations proposed by Pérez-Sales, who invites us to understand the context in which torture occurs as an essential part of what is happening and which helps to understand subsequent reactions. It is not only the specific violent episode of torture that is traumatic. The term "torturing environment" describes how the entire context is designed to dehumanise and subjugate, so that, beyond the torture sessions, the environments in which political dissidents are placed and the subsequent threat that hangs over them are part of the horror and help us understand the levels of hypervigilance that persist long after. These are environments designed to be precarious and inhumane (Efecto Cocuyo, 2025; Pérez Sales, 2020, 2026).

Along the same lines, Rud et al. (2023) argue that torture should be understood as an act within the process of attempting to control power. This understanding helps untangle some of the processes observed. Torture is an act that seeks to repress potential sources of resistance and to appease the power of dissidents. Hence, torture seeks to subdue any sense of agency, while the dissident seeks to defend it.

Along the same lines, the relationships of incarcerated citizens are essential to sustaining the struggle against a system that seeks to impose itself by isolating them. Bonds are an essential source of resilience and a channel for organising resistance. Therefore, we must include relationships in the final understanding of the impacts of torture and as strategies of resistance.

Methodology

This research stems from projects designed by and developed to support former political prisoners and their families in accordance with the participatory action research perspective (Kagan, Burton, & Siddiquee, 2008; Montero, 2004; 2010). Understanding their experiences has been a fundamental tool for organising these projects. It arises from and maintains a close relationship with organisations of former political prisoners and their families. These relationships have allowed us to immerse ourselves in the context and forge relations of trust that have shaped a shared understanding of what has been experienced, consistent with the spirit of qualitative methodology and the search for knowledge that has psycho-political validity, a key element when working in contexts of state violence (Arnoso & Eiroá-Orosa, 2010; Prilleltensky, 2004) consistent with observations from other projects with political prisoners (Rud, Bunina, Vasilevskaia, & Filippova, 2023). Former political prisoners and family members helped raise the questions proposed in this study, were present in almost all of the interviews, and, finally, two workshops to discuss preliminary findings were held with them to contrast interpretations with their impressions, helping to refine the final analysis. Participatory action research has been described as a way of building complex bridges to witnessing by "doing something" (Gentile, 2017, p. 180). Participatory action research focuses on relations with participants directly affected by the problems being studied and on resolving concrete problems through iterative reflection, which allows for the refinement of our understanding of the problem.

Based on the above considerations, an analysis was designed of interviews from two projects that, in the first case, collected the testimonies of 29 former political prisoners and one family member, with one session per participant. Secondly, given the importance that emerged from the interviewees' relationships, both in understanding their suffering and in understanding how they have resisted, after proposing preliminary themes, we compared them with the interviews of a second project in which we reviewed seven interviews with testimonies from relatives of former political prisoners and one of a former political prisoner. For a total of 38 analysed interviews (see Table 1). The authors of this analysis led the interviews for both projects. All interviews were recorded and transcribed.

The former political prisoners experienced prison terms ranging from two to forty-eight months, with an average of seventeen months. Four had been incarcerated more than once.

Table 1. *Participants/interviews*

	Former political prisoners	Family members	Totals
First project	29	1	30
Second project	1	7	8
Total interviews	30	8	38

Twenty of the ex-prisoners were male, and ten were female. Five were active politicians; the rest were ordinary citizens involved in protests against the government in one way or another. Some of these citizens had some affiliation with political organisations; some were high school or university students who led parts of the protests; others had held simple protests against the government, such as expressing their views on social media. Three of our interviewees were underage while jailed. Of the eight family members, four were wives, two were mothers, one was a son, and one was a daughter. The participants in our study suffered torture as defined by the United Nations Convention against Torture (United Nations, 1984).

The first project was developed along with the organisation *Voces de la Memoria.* With them, we interviewed twenty-nine former Venezuelan political prisoners and one family member of a political prisoner. The semi-structured interviews were conducted online in 2021 and were guided by one of the authors. The interviews sought to recover the testimony of the persecution suffered and its impacts on participants' lives. This led to psychosocial and psychotherapeutic support for eight of the participants, also carried out by one of the authors, as well as the development of a virtual reality experience to raise awareness towards the situation (Navarro, Martínez, Moriones, Llorens, Trotta, Raursø & Bruni, 2025). The second project, developed by the World Liberty Congress, was a support manual for family members of former political prisoners. Seven semi-structured interviews with relatives of political prisoners and one with a political prisoner were conducted in 2023, also online, and guided by one of the authors. The interviews sought to understand the participants' history and experience of persecution (World Liberty Congress, 2025).

The interviews were conducted by psychologists with expertise in working with trauma and survivors of political violence and who are knowledgeable about the social context in which the events took place. In the case of the first project, a former political prisoner was always present as a co-researcher and helped to foster a climate of trust. In the case of the eight interviews in the second project, these were also conducted by psychologists under the umbrella of the project led by relatives of former political prisoners who facilitated our contact and introduced us to them.

The reflective thematic analysis (Braun & Clarke, 2022) of a total of 38 direct testimonies was carried out by a team of four analysts who searched for thematic patterns. In a first phase, the four analysts worked separately, following Braun and Clarke's suggestions regarding collaborative coding. Each worked on the same ten interviews, after which impressions were contrasted to generate a preliminary set of codes based on the discussion. Afterwards, the twenty other interviews were split among the analysts, who met every two weeks to discuss code evolution and refine the agreed-upon categories. Atlas.ti was used to organise and follow up on the coding process. The perspectives of the four analysts were considered to develop a preliminary thematic proposal. Finally, the themes were contrasted with the eight interviews from the second project to assess whether the preliminary analysis fit this second set of interviews and to challenge and expand the interpretations. Findings were then presented in a series of workshops with members of both NGOs, and their impressions were incorporated into the final reports to help refine the results.

Regarding ethical considerations, all interviews were conducted with the interviewee's safety as the priority. For that reason, a manual was developed prior to both projects for all interviewers, and a workshop on trauma-informed practice was conducted with each team (Llorens, 2021). The interviews were scheduled by a team member who was either a former political prisoner or a family member of a political prisoner. Instructions were given regarding the purpose of the interviews and who would be present, helping to choose a location where the person felt safe. In the introduction to the interviews, the person was invited to share whatever they felt comfortable sharing and to stop the exchange at any point if they desired. The emotional regulation expressed during the conversation was monitored by the clinical psychologists conducting the interviews, stopping to check at moments when the exchange might be disturbing. Finally, at the end of the interview, we checked how the person was feeling and whether there were any signs of significant disturbance. Interviews were followed up with short calls to see how they were feeling the following day. Psychotherapy was offered to all of the participants, and eight of them decided to begin psychotherapeutic processes that were offered free of charge. Participants signed consent forms to use

the information for the various aspects that evolved from the projects. Not only did they sign the consents, but all of them also asked for their names to appear in the acknowledgements of the virtual museum and the manuals for family members that were produced by both projects, confirming their alliance with the process as well as their desire for their testimonies to publicly appear with their identification. The discussion of results with the participants, the sharing of the different materials that have evolved through the analysis of their testimonies and their feedback is also considered to be a central ethical consideration, aligned with a participatory action research approach that emphasises giving back voice and power to those that were oppressed.

Findings

Through our analysis, we developed four large themes to organise the data that include: the survivors/family members (regarding different categories of survivors or family members), the system (that described key characteristics of the strategies used to subjugate them), the impacts of torture and, finally, resilience, which we divided into two large sub-themes that refer to either regaining agency or relational resilience. These four themes are relevant patterns that appear in all of our interviews. This is to emphasise that expressions of suffering for others and of resilience were not exceptional but rather a very significant aspect of our interviewees' experiences. They represent a pattern that runs through all of the interviews. Finally, considerations regarding post-traumatic growth are shared, which appeared only in a few interviews, but are related to resilience and point to a strand of issues to continue to be explored.

These interviews confirm findings that have been widely reported both in scientific literature and in human rights reports in regard to the terrible consequences of political persecution and torture. But beyond discussing findings that align with previous literature on trauma, the focus is on those that broaden understanding and open up options for better support. So, for this paper, the discussion will centre on findings regarding the relational dimension of the sufferings reported as well as resilience, which relate to the aforementioned third and fourth themes.

Impacts: Relational impacts

One of the interviewees shared: "After two and a half years in captivity, you can imagine that I came out a little burnt out and crying. I cried compulsively because many of my friends were still in prison, others dead."

It is a painful testimony that reflects enduring sadness, which suggests depression. But if we look beyond the individual categories that have dominated the interpretation of the phenomenon, it is striking that, beyond this first impression, he highlights his being affected by the suffering of the friends he left behind in prison.

There was not a single interview in which the suffering of another person, either a family member or a fellow activist or prisoner, was not reported as part of the emotionally painful experiences of prison. Even more so, time and again, there were reports of people who suffered inhuman torture and yet felt that the *most* painful thing was knowing that their family or friends were also suffering. A young woman who was imprisoned as a minor and suffered various forms of torture, including rape, said that she sought psychological therapy when she was released, both because of the recurring nightmares and because of the persistent pain of having seen her family suffer for her. Another young man commented: "I always say that what hurts a prisoner the most is not necessarily their conditions, but what their family is going through."

In the same vein, isolation and the thought of having been forgotten by those outside are repeatedly reported as among the most painful experiences. This invites us to think about the phenomenon of political persecution and torture, and the impacts on survivors, not only in individual terms, but also in a relational one.

The effects of political imprisonment are not limited to the person who suffers it physically but also extend to their social bonds. In this sense, interviews with family members often reflected acute expressions of pain, even more significant than those reported by those who suffered torture on their bodies. One mother told us: "It was five months of imagining things, imagining things, imagining things, and it was the worst thing that ever happened to me, because I didn't know what was true."

This observation helps us understand how a significant portion of the cruelty exercised by the system is directed not only at the incarcerated persons, but against family and close friends, through threats, persecution and psychological torture.

Time and again, interviewees reported that one of the worst punishments was having to witness the torture of a third person. One young man described the beating of three minors by guards as "very difficult for me... it was heartbreaking." Another young man reported with pain how, during his stay in a regular prison, he had to witness different forms of torture, listen to the screams, and be present during some sessions. "It's hard," he told us. Another young man who was subjected to a long period of psychological torture emphasised how terrible it was to be in a place where he had to listen to the torture of others:

> "It's crazy, you go mad... we didn't stop being human rights activists. Even though we were prisoners. So what happens? If you're an activist, you have to do something, even if it's just telling other prisoners what you're going through. When we heard those things, the electricity or when we heard how they were beating people, we went crazy. We banged on the bars. We tried to figure out what to do, we annoyed the other prisoners so they wouldn't sleep either. We tried to cause as much trouble as possible."

Some of the intrusive traumatic memories later reported by this man have nothing to do with things suffered personally, but rather with episodes in which he witnessed the suffering of others. Other research has corroborated how witnessing torture has as much of an impact as experiencing it firsthand (Basoğlu, Livanou, & Cronbarić, 2007).

After one of the episodes described above, involving the beating of three minors, our interviewee said that he took in the three youths and tried to care for them: "cleaning their wounds and giving them a little water." He gave them the mattress from the cell where he had been sleeping and slept on the floor. This episode is similar to many others reported in the interviews. It is revealing because it speaks to the filial tendency of many former political prisoners, to how empathy generates a degree of suffering, and, above all, to how it constitutes a bastion of their resilience, as we will explain.

Resilience

Interviews are full of accounts of the strategies people used to cope with horror. Again, expressions of resilience were present in every interview. Initially, strategies were grouped as those that involve more individual expressions of coping and those that were built through relationships. However, in refining the categories, we concluded that this division is best understood by examining how each strategy seeks to resist the power it faces.

Resilience is as problematic a term as victimhood, as it highlights strengths and the capacity to overcome adversity, which can be used to minimise the atrocity committed by political persecution, seemingly leaving the responsibility on the victim's lap. Those who are left devastated, therefore, can be judged less worthy, for they have not proven resilient enough (Pérez-Sales, 2023). Taking this into account, we believe that a viable option is to understand trauma and resilience as processes embedded in interactions with power, rather than as either-or outcomes, but as ongoing and dynamic.

This is where an understanding of the torturing environment and the functioning of the authoritarian system is useful. In other words, when analysing the different actions of the prison guards and the functioning of the arbitrary justice system, it becomes clear that torture is one of many strategies used to try to subdue the will of dissidents, as well as to isolate them and diminish their influence on the population. The threats, the arbitrariness of the system, its falseness, and even the small comments made by the prison guards show how the system seeks to break the will of citizens by intimidating them, exhibiting its arbitrary power, hurting those who resist in order to break and exhibit them as examples to the rest of the population.

Resilience: Regaining agency in the face of imposition

It is in this context that resilience strategies take on meaning. Consequently, the first major category of resilience consists of strategies that individuals use to regain a degree of personal agency in the face of arbitrary and brutal power that seeks their submission. These are strategies in which the individual retains some possibility of responding to arbitrariness, of asserting his or her power, of gaining breathing space, however little.

A young activist and student leader described the police as having: "an attitude of showing that 'I'm the boss, you're the idiot here'. It's like their way of making you understand that they are in control and that you have to learn that you can't rebel."

Once they understood this dynamic, the many ways in which the interviewees challenged their jailers, even though they knew their actions could lead to further punishment, began to make sense. These are small symbolic power struggles that serve to preserve a minimal sense of agency.

A young politician, in the midst of a beating, took the hand of one of his guards, brought it to his face, and challenged him by saying: "Go ahead, you bastard, hit me." This is one of many reported gestures of defiance and self-assertion. Although more direct defiance is an extreme example, because in the face of terror, most of the time, as expected, political prisoners submit, there are a huge number of subtler versions of self-assertion.

Subjected to enormous deprivation, the interviewees describe how they sought to remain active, some by exercising, studying, tidying their cells, engaging prison guards and negotiating small privileges, or inventing ways to communicate through the prisoners' network. A young politician described how he cleaned his small cell space to resist: "You know you're screwed, you know you don't know when you're going to get out, visits may or may not be limited, but at least you control your space and that gives you some peace." One young activist had access to books and devoted himself to reading. Speaking about his time in prison, he commented, almost disconcertingly: "Having time to read as I pleased was something I enjoyed immensely. It sounds paradoxical, but it's true. In the midst of misfortune, that was something super positive."

Another young man commented on how, upon learning that one of the prisoners was American, he decided to try to learn English. Every time he had the opportunity to leave his cell, to go to the bathroom or throw out the trash, he would pass by the cell and ask him to give him a new English word, which he would then memorise. Another told us how he discovered a way to smuggle letters to his family, establishing a channel between his cell and the outside world.

Several changed their sleep schedules to sleep during the day, when the guards were most intrusive, and to stay awake at night. One interviewee told us how she slept during the day and woke up at midnight: "It was like my moment of peace, and what I did was read at that hour with a flashlight I had."

In some cases, where restrictions prevented almost any action of resistance, thinking became a strategy to preserve some control, such as a young man who, faced with extreme sensory deprivation, devoted himself to meditation.

Cognitive reframing was prominent. The use of dark humour to minimise their conditions is revealing. One of the young men who was in a cell with several minors recounted how they competed, imagining tortures much crueller than those they suffered, and then laughed, saying, "Those bastards are just lazy; they don't know how to torture!" In the same vein, several recounted unusual expressions of humour that mocked the conditions in which they found themselves. During an interrogation, when asked for his address, he replied defiantly, "If you don't know, how should I? You're the SEBIN (the Bolivarian Intelligence Service)!"

These stories, which might at first seem baffling, make sense in the context of the cognitive strategies used to regain control, minimising the power of their captors. Many shared how they adjusted their expectations to come to terms with their situation, so as not to despair in the face of justice that never came. One of the small acts of cruelty repeated in the stories was to prepare the prisoners for hearings in the trials in which the charges against them were being processed, only to leave them waiting and finally inform them that the trial had been suspended. This happened over and over again. The small hopes of some kind of access to justice were continually frustrated.

For many, it was important to make sense of this arbitrariness. Understanding that power was the only logic, knowing that they were being falsely accused and that appealing to truth was practically useless. That degree of painful realism allowed them to regain some control over their expectations.

Finding a watch was useful for one of the cells. It allowed them to organise themselves and anticipate the guards' movements. Protest actions were also attempts to resist, despite the risks involved. Given the arbitrariness, some of the protests had to be extreme. Numerous hunger strikes were described, and one spoke of a blood strike, in which he cut himself until he received the attention he demanded.

One young man, arrested for four years in a prison called "La Tumba" (The Tomb), where prisoners are subjected to white torture involving sensory deprivation, lived in a white cell, cold, without visits, without access to lawyers, without stimulation, with the same light 24 hours a day. After a long period there, he decided to go on a hunger strike that lasted 18 days, demanding access to books and crayons. Thanks to that protest, he was given access to a National Geographic magazine, a book on drawing, and paints and colours. There, he began to develop a career as a painter, which he continues now in liberty.

Without a doubt, the most dramatic example of this was a protest that began in one of the cells, where several minors were held, and turned into a riot throughout El Helicoide. The protesters managed to break some locks and take some of the guards hostage. That riot, which made international headlines, led to the release of several of the interviewees (Wilkinson, Pozzebon & Gallon, 2018).

To summarise, these seemingly different acts may be understood as expressions of resilience aimed at regaining a sense of agency, thereby illuminating a series of subtle yet significant dynamics of survival.

Making Sense: The value of political preparation

Following this line of thought, it seems useful to attend to the fact that the ability to quickly and accurately interpret the reasons for the abuses significantly distinguished the experience of politicians and activists who entered the situation with more awareness, from that of those citizens less involved in politics who spent much more time bewildered, disoriented, and, consequently, devastated by what they endured. This last group sought to clarify their innocence, to try to appeal to the justice system to recognise the arbitrariness of their suffering, surprised to be subjected to horror. Basoğlu and colleagues (1997), discussing the importance of being able to make sense of torture, have demonstrated how the unpredictability of the experience influences the degree of its traumatic impact.

The politicians and activists quickly understood that they were subject to arbitrary power, where laws were a facade, and that the real possibilities for liberation depended on political circumstances. All of which allowed them to cope better. One of them, who said he faced his incarceration with a feeling of peace, said he accepted that he would be there indefinitely and that the best thing he could do was use the time to exercise, read, and reflect on his life. Another activist, a journalist

by profession, told himself that his work during his imprisonment would be to document what was happening. A young student leader commented that his brother and some friends had been imprisoned in 2014, so that in 2017 he was "mentally prepared" for the ordeal. He understood from the outset that it was a game of intimidation to subdue him. Many turned to reading about similar circumstances to understand their situation. These frames of reference helped contextualise their experiences and give them meaning. Resilience research considers giving meaning to suffering to be key (Frankl, 2004; Walsh, 2006). Researchers working with political prisoners have reported similar findings (Hernández, 2002).

Relational Resilience: "an emotional tattoo of empathy"

While part of this effort to preserve some agency involves asserting autonomy and, in that sense, speaks of a process that emphasises individual will, it is also true that a profoundly relational aspect of resistance is already present in many of these same gestures.

Protest and the riot, for example, link efforts of personal rebellion against power to the importance of relationships. Just as many of the most painful reports of suffering were related, not to what they themselves experienced, but to what they saw their loved ones suffer or thought they suffered, the most compelling reports of resilience also referred to their relationships.

This is not surprising, since the literature has highlighted that bonds and relations are among the key elements of resilience (Daiute, 2013; Landau & Saul, 2004; Ungar, 2021; Werner, 1992). Our observations in practice had alerted us to the importance of connections, and analysis has confirmed this. One of the interviewees summarised it by saying that the prison experience left him "an emotional tattoo of empathy."

It is striking to hear the quantity and quality of acts of care that former political prisoners described. A congressman who was imprisoned recounted how he assembled "reception kits" for new inmates, with soap and toothpaste donated by supporters on the outside. He would welcome fellow prisoners who arrived beaten into the cell next to his as a small gesture of humanity. Another young lawyer recounted how, in several places where he was imprisoned with common criminals, he offered legal advice to gain their sympathy. He also gave English lessons.

These displays of mutual support for enduring their ordeal are a recurring theme. When asked, "What do you think helped you stay afloat in prison?" One participant responded: "I think being in a place with people who shared the same convictions was important."

Several made it their mission to be kind to the guards, to try to win them over as allies. Several spoke of being especially respectful, even in the face of abuse, until they managed to lower the defensiveness of those who considered themselves their enemies.

The families recounted similar experiences; the support processes were made possible by the solidarity of other families and friends. The wife of a former prisoner told how her friends prepared five lunches every day to take to the prisoner, but also to the police officers guarding him.

In the interviews, the ex-prisoners spoke of laughing together, of singing together. In a military prison, one interviewee and her friends listened to a prominent political prisoner in another cell sing the Venezuelan national anthem every morning. They were forbidden to sing along, but they made sure to whistle softly to accompany him. These are gestures of emotional connection and meaning that helped them endure. Letters as a means of maintaining connection are very important in this sense. Letters to family members abroad, letters between prisoners, clandestine methods for smuggling letters out, letters to prison officials requesting privileges —these are all examples of agency and connection.

This resilience, built through relationships, served to address immediate needs, but also to cope with emotional distress, sustain hope, and recover a sense of humanity. Among those interviewed, three couples were formed while imprisoned in El Helicoide. In a BBC report, a former prisoner of that prison, who was one of our interviewees, recounted how she fell in love with another political prisoner, now her husband, and how that was "a ray of light. It was so nice that amidst so much garbage, someone made you feel like a person" (D Olmo, 2019). Many interviewees spoke about the significance of visits during their time in prison.

Research in other contexts, such as Iran, has also focused on relational strategies, such as humour, as a protective factor (Feinstein, 2008; Ghahary, 2003; Spring, 2012). Daiute, in her work on the effects of political violence, has also stated that resilience in general can be understood as a relational process (2013).

Post-traumatic growth

Some reports go beyond describing how they managed to adapt and survive. They speak of significant processes of transformation and growth stemming from the prison, suggesting post-traumatic growth (Shiro, 2023).

As the authors who developed the term point out, some people who have experienced trauma can achieve highly positive transformations. Although, in contrast to expressions of

resilience that appear in all of the interviews, post-traumatic growth appears clearly in only a handful, and it is not generalizable, it is worth noting. This, of course, does not imply that torture is beneficial, as has been critically pointed out, but rather that the processing of experience is complex and can lead to unexpected transformations.

One of the most startling testimonies, for example, was that of a young man who was not involved in politics and had led a criminal life until being falsely accused of murdering a government political figure. He was subjected to terrible torture and ended up being sent to a political prison, finding support among the inmates: "I arrived in a completely emaciated state, beaten all over. And there, at that moment, I met many, many students who were there and who are now my friends."

One of those friends encouraged him to study and began teaching him about the National Constitution and his rights. Despite initially reporting disinterest, in a public interview he stated,

> "It awakened in me, through these people who showed me a completely different world, a hunger for knowledge. I began to read the Constitution and learned that education is a universal right, and that idea penetrated my soul. I wanted to study." (CESCOS, 2024)

After repeatedly appealing to prison authorities for permission to apply for distance learning, he was finally granted the opportunity and managed to earn his high school diploma while behind bars. Upon his release, he studied law and is currently a human rights activist. In the interview for this project, he described his transformation upon leaving prison, saying: "I was a completely changed man."

Similarly, the wife of a former prisoner explained that their relationship had been shaky before his imprisonment, but that their shared experience had deeply strengthened their convictions. Another couple expressed that, despite the lasting trauma on their relationships, mutual admiration emerged, leading to family readjustments that have strengthened their dynamics and fostered joint projects, such as a testimonial book authored collaboratively based on their shared experiences. Time and again, interviewees told us that they emerged with even stronger political convictions. One interviewee expressed it this way,

"Prison didn't diminish my desire or my spirit to search, to fight against the dictatorship. Rather, it deepened it to almost pathological levels, where now I have an obsession with not letting go, not letting go, not letting go, and it's all I think about."

Many have become human rights activists. In fact, the two projects from which these interviews originate are a testament to that, as they have been developed by former prisoners and relatives of former political prisoners who, after surviving prison, have dedicated themselves to advocating for those who remain incarcerated. It suggests that transforming those experiences into activism is sometimes a pathway to recovery.

Reflexivity/positionality statement

The testimonies analysed in this study emerged, as described, from projects that sought to empower political dissidents in various ways. So, we have explicitly worked from a positioned stance that condemns the abuses they were subjected to, seeks to forge alliances with and actively include survivors' perspectives in our interpretation of these experiences. We are all Venezuelan and actively engaged with these issues.

Our participatory approach leads us to build relations with participants. We consider that building a space for trust allowed us to have access to very personal experiences, as is the case with the extreme vulnerability of torture. Our position is interwoven with an ethical approach that prioritises safety, with a trusting relationship as an integral part. We actively sought to underscore the interviewees' agency in our exchanges, inviting them to express any discomfort and share only what they felt comfortable sharing. Our conclusions undoubtedly are influenced by these positions.

Conclusions

In that sense, the findings provide feedback regarding the methodology and offer suggestions for future work with political prisoners and their families, consistent with the proposal to examine the phenomenon through the lens of psychosocial trauma (Martín-Baró, 1994) and relationality.

The richness of the interviews stems largely from the fact that they were conducted either with a former political prisoner as a co-interviewer or as part of projects developed by the community of former prisoners and their families. Thus, a bond of solidarity permeates the entire record. It is striking how the conversations reveal profound emotional exchanges stemming from shared experiences. "I want to give you a hug," or "I love you, brother," were recurring expressions. The vast majority of the interviews concluded with gratitude for the opportunity to share their experiences and a desire to collaborate further, in contrast to the re-traumatising experiences reported from human rights data-gathering interviews. All of those interviewed chose to appear with their names in the acknowledgements of both projects' credits.

With participatory action research (Montero, 2004; 2006), the search for knowledge goes hand in hand with transformation and is consistent with the logic of relationality. We be-

lieve that the research process itself reflects the notion that the participation of survivors, the solidarity among them, and the development of record-keeping processes are, in themselves, forms of empowerment and individual and social healing. Furthermore, this project proposes that the bond between researchers and the community of former political prisoners enabled an approach that addresses the criticisms of traditional methodologies, whose conventional frameworks tend to produce results that emphasise individuality and psychopathology (Kagee & Naidoo, 2004).

Pérez-Sales (2023) has written a comprehensive reflection on the importance of resilience among torture survivors, considering crucial debates and describing many ways it has been reported. Rud et al. (2023) have also recently produced an extensive description of acts of resilience of torture survivors. Many of the strategies described resemble those lists. Resilience, understood as a way to counter what power seeks to impose on the subject, can be thought of in two distinct forms: that which seeks to regain agency and that which seeks to sustain connection.

Affective bonds have been widely considered a central resource for resilience since its original formulation (Kan & Lejano, 2023; Werner, 1993). It is also central to fully understanding the suffering derived from torture. Findings point to relationships as a central aspect of the suffering inflicted through isolation, subjecting dissidents to having to witness torture sessions of others and enduring their family members' ordeal.

It is fruitful to examine experiences of torture through a relational lens to fully understand the magnitude and nuances of the suffering, and to grasp the mechanisms for overcoming and recovering from it, helping to direct our psychosocial support towards the whole network of relationships, as well as emphasising the strengths and empowerment of that network.

This suggests that we should attend to the importance of collective processes of struggling for justice and restoring community as central aspects of recovery (Herman, 2023; Saul, 2022), thereby allowing the formulation of a more community-based approach to treatment. This also suggests looking more deeply into the influence of gender as a mediator of resilience based on connection (Özbay & Bülbül, 2024).

Perhaps the restorative potential of these horrific experiences does not come only from the sources that tend to be emphasised, be they international courts that take many years to process few cases or individual psychotherapy. Perhaps the inspiration conveyed by these testimonies themselves and the processes developed by survivors have, more than any other tool, the power to heal pain and repair some of our wounded social fabric.

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Naming torture and the legal implications of its omission from Article 18 of the FDRE Constitution

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Key points of interest

- Article 18 of the FDRE Constitution prohibits cruel, inhuman or degrading treatment but does not name torture. Articles 9(4) and 13(2) may inform interpretation, but neither writes torture into Article 18 or places it expressly within the text protected by Article 93(4)(c).
- The constitutional omission is distinct from Ethiopia's statutory failures. Article 424 does not create a comprehensive offence of torture, and Article 19(5) is not supported by a torture-specific procedure linking evidentiary exclusion to investigation and accountability.
- Ethiopia's transitional justice reforms create an immediate legislative opportunity. A Convention-compliant response requires an autonomous general offence of torture, jurisdiction, investigation, evidentiary exclusion, complaint protection, redress and rehabilitation, while amendment of Article 18 remains necessary to cure the distinct constitutional defect.

Abstract

Introduction: Article 18(1) of the Constitution of the Federal Democratic Republic of Ethiopia prohibits cruel, inhuman or degrading treatment without naming torture. The prevailing interpretive answer relies on Articles 13(2) and 9(4) to bring torture within that broader prohibition. The question is whether interpretive inclusion is legally equivalent to express constitutional recognition. *Methods*: The analysis combines doctrinal and comparative legal methods. It examines the Constitution, the Criminal Code, criminal evidence and procedure, the Convention against Torture, the African Charter and publicly accessible Ethiopian legal practice. Uganda, South Africa and Nigeria provide legislative models, while Kenya tests the relationship between constitutional naming and later statutory implementation. *Results*: Torture falls under the broader prohibition of ill-treatment but is defined separately and carries specific legal consequences. Articles 9(4) and 13(2) do not rewrite Article 18, settle the contested domestic status and enforceability of the Convention, or place torture expressly within Article 93(4)(c). The omission is not the cause of Ethiopia's separate statutory and institutional failures, but it remains an independent constitutional defect. Article 424 does not capture the full Convention definition, the international-crimes provisions depend on additional contextual elements, and Article 19(5)'s general rule against coerced evidence lacks a settled torture-specific procedure linking exclusion to investigation and accountability. *Discussion*: Transitional justice policy need not itself create criminal offences, but the implementing legislation must establish a general offence of torture and the connected jurisdictional, investigative, evidentiary and remedial framework required by the Convention. Constitutional amendment remains necessary to cure the distinct defect in Article 18.

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Keywords: Torture, Ethiopia, FDRE Constitution, Convention against Torture, transitional justice

Introduction

Torture is not merely another instance of cruel, inhuman, or degrading treatment. It belongs to that wider family of prohibited acts, but international law identifies it as a distinct and aggravated wrong, defined by severe pain or suffering, intentional infliction, a prohibited purpose, and an official nexus. That classification carries specific duties of criminalisation, jurisdiction, investigation, prosecution or extradition, evidentiary exclusion, redress and *non-derogation*. Major universal and regional human rights instruments therefore name torture expressly, and the prohibition is recognised as a peremptory norm of international law. The Convention against Torture gives the distinction an operative legal structure through Articles 1, 2, 4-7 and 12-16.

The Universal Declaration, the International Covenant on Civil and Political Rights, the African Charter, the European Convention, the American Convention and the Arab Charter each name torture alongside the wider prohibition of cruel, inhuman or degrading treatment or punishment (UN General Assembly, 1948, art 5; UN General Assembly, 1966, art 7; Organization of African Unity, 1981, art 5; Council of Europe, 1950, art 3; Organization of American States, 1969, art 5(2); League of Arab States, 2004, art 8).

Article 18(1) of the Constitution of the Federal Democratic Republic of Ethiopia (hereinafter FDRE Constitution) guarantees protection against cruel, inhuman or degrading treatment or punishment but does not name torture (FDRE, 1995a, art 18(1)). The word appears in Article 28(1), which removes limitations and restricts amnesty or pardon for criminal liability arising from crimes against humanity, including torture (art 28(1)). That provision addresses the prosecution of a particular category of grave crime. It does not establish a free-standing right held by every person against torture. The rights chapter therefore contains no express prohibition of torture, and Ethiopian ordinary criminal law contains no autonomous general offence capturing the full definition in Article 1 of the Convention against Torture.

The principal defence of the omission is interpretive. Article 13(2) directs that the rights in Chapter Three be interpreted in conformity with the Universal Declaration, the international covenants and instruments adopted by Ethiopia, while Article 9(4) makes ratified international agreements an integral part of the law of the land. Those clauses, read with Article 7 of the ICCPR and Article 1 of the Convention, are said to bring torture within Article 18's broader prohibition. The Committee against Torture reflected that position in 2011, describing the Constitution as prohibiting torture while directing its recommendation to Article 424 (Committee against Torture, 2011, para 9).

The interpretive route through Articles 9(4) and 13(2) is insufficient to cure Article 18's omission or to resolve its legal consequences. At most, those provisions allow an interpreter to argue that conduct amounting to torture may be condemned under the broader prohibition of cruel, inhuman or degrading treatment. They do not make torture an express constitutional right, place torture as a distinct legal category within Article 93(4)(c), or create the criminal, evidentiary, jurisdictional, investigative and remedial framework required by the Convention. The omission therefore leaves more than a linguistic gap. It leaves the gravest form of ill-treatment without direct constitutional recognition and forces its legal consequences to depend on interpretation, incorporation and incomplete ordinary legislation. Constitutional amendment and statutory implementation must therefore be treated as separate but connected reforms.

Methodology

The analysis examines Articles 9(1), 9(4), 13(2), 18, 19(5), 28, 93 and 105 of the FDRE Constitution; Articles 423, 424, 270-272 and the relevant ordinary offences in the Criminal Code; the rules governing confession and admissibility; and Ethiopia's obligations under the Convention against Torture and Article 5 of the African Charter. International and regional decisions are used to establish the content of those obligations, not as binding precedent in Ethiopia.

Publicly accessible Ethiopian judicial materials were searched for decisions concerning torture, coerced confessions, Articles 18 and 19(5), Article 424, *Maekelawi* prison, anti-terrorism prosecutions and reliance on the Convention against Torture. No published judgment was found in which an Ethiopian court adjudicated torture as an autonomous offence or developed a torture-specific procedure under Article 19(5). This identifies a limitation in the accessible record; it does not establish that no such proceedings have occurred.

Uganda, South Africa and Nigeria are examined as legislative models. Kenya is used separately to test the relationship between express constitutional protection and later statutory criminalisation. Reports by Ethiopian, United Nations, and civil society bodies are treated as evidence of practice and insti-

tutional conditions, not as judicial findings or as authority for legal propositions.

Torture as a distinct wrong within the wider prohibition of ill-treatment

Torture falls within the broader prohibition of cruel, inhuman or degrading treatment, but the categories are not legally interchangeable. Ireland v United Kingdom described torture as aggravated and deliberate inhuman treatment carrying a special stigma, while *Selmouni* v France confirmed that the threshold is capable of development as human-rights standards rise (Ireland v United Kingdom, 1978, para 167; *Selmouni* v France, 1999, para 101). Severity is not the only relevant consideration. Intention, prohibited purpose, official involvement, vulnerability, context and the powerlessness of a person under another's control also shape the classification under the applicable legal framework (Nowak & McArthur, 2008). The relationship is therefore one of inclusion, but the identification of the aggravated wrong remains legally consequential.

Article 1 of the Convention defines torture through severe physical or mental pain or suffering, intentional infliction, a prohibited purpose, and infliction by, at the instigation of, or with the consent or acquiescence of a public official or another person acting in an official capacity. Pain or suffering arising only from, inherent in or incidental to lawful sanctions is excluded (UN General Assembly, 1984, art 1(1)). Article 1(2) preserves instruments and national laws of wider application. Domestic law may therefore extend protection beyond the Convention's minimum definition, but it may not omit the elements required for Convention torture.

The Convention assigns particular consequences to conduct classified as torture. Article 4 requires criminalisation, Articles 5-7 require jurisdiction and prosecution or extradition, and Article 15 excludes statements obtained through torture. Article 16 addresses other cruel, inhuman or degrading treatment and expressly applies the safeguards in Articles 10-13 with the necessary substitution of terms. The distinction is not a denial of the absolute prohibition of other ill-treatment. It reflects the Convention's decision to attach additional criminal, jurisdictional and evidentiary duties to torture as defined in Article 1. General Comment No. 2 accordingly warns that discrepancies between the Convention definition and domestic law create actual or potential loopholes for impunity and explains why torture should be identified as a distinct offence (Committee against Torture, 2008, paras 9, 11).

In Questions Relating to the Obligation to Prosecute or Extradite, the International Court of Justice held that a State Party must equip itself with the legal tools necessary to perform the Convention's prosecution and extradition obligations as soon as the Convention binds it (Belgium v Senegal, 2012, paras 74-78). The judgment confirms that fragmented ordinary offences are not enough if domestic law cannot support the jurisdictional and procedural scheme required by the Convention. The judgment does not impose a constitutional-drafting rule; its significance here is that statutory implementation cannot be replaced by interpretive incorporation.

The prohibition of torture is recognised as a peremptory norm of international law (Prosecutor v *Furundžija*, 1998, paras 153-157; *Al-Adsani* v United Kingdom, 2001, para 61). The Convention separately creates presence-based jurisdiction and prosecution-or-extradition duties. An amnesty that prevents the investigation or prosecution required by the Convention, or denies the enforceable redress required by Article 14, is incompatible with those obligations. Where torture also constitutes a war crime or a crime against humanity, the African Union Transitional Justice Policy's exclusion of international crimes from amnesty supplies an additional and independent basis. Peremptory status, treaty-based jurisdiction and restrictions on amnesty are related consequences of the prohibition of torture, but each rests on a distinct legal basis.

The constitutional omission and the limits of Articles 9(4) and 13(2) of the FDRE Constitution

Article 18 prohibits cruel, inhuman or degrading treatment without naming torture. The most serious defence of that omission rests on Articles 13(2) and 9(4). Article 13(2) requires the rights in Chapter Three to be interpreted in conformity with international human rights instruments adopted by Ethiopia, and Article 9(4) gives ratified treaties domestic legal force. Read with Article 7 of the ICCPR and Article 1 of the Convention against Torture, these provisions give an Ethiopian court a plausible basis for treating torture as covered by Article 18's broader language. However, that conclusion is reached only through interpretation and incorporation; it does not confer on torture the same express constitutional status that inclusion in Article 18 would have provided.

The distinction is important because Articles 13(2) and 9(4) operate in different legal registers from express constitutional entrenchment. Article 13(2) guides the interpretation of rights already present in Chapter Three. Article 9(4) incorporates ratified treaties into domestic law. Neither provision places the Convention's definition of torture inside Article 18, gives torture express protection within the non-derogation clause in Article 93(4)(c), or creates the statutory machinery required by the Convention, including an autonomous offence, penalties, jurisdictional rules, evidentiary consequences, investigative du-

ties and remedies. They provide, at most, a route for judicial condemnation of torture in a concrete case. They cannot provide the textual certainty, constitutional classification or legislative implementation that express recognition and statutory criminalisation would supply.

The precise domestic rank of ratified human-rights treaties remains contested. Article 9(1) declares the Constitution supreme, while Article 9(4) makes ratified agreements an integral part of the law of the land. A substantial body of Ethiopian scholarship places treaties below the Constitution or at the level of proclamations; another view accords human rights treaties constitutional parity (Woldemariam, 2017). The omission survives either position. On the subordinate-rank view, the Convention cannot supply an omitted constitutional norm or the entrenchment that express inclusion in Article 18 would provide. On the parity view, the Convention remains an incorporated external instrument read alongside Article 18 rather than a textual component of Article 18 itself. Under neither view does Article 9(4) write torture into the right expressly protected by Article 93(4)(c). Ethiopia's international obligations remain binding regardless of this dispute over domestic hierarchy.

Article 13(2) remains an interpretive clause rather than a textual amendment, and its reach is itself uncertain. The authoritative Amharic version of Article 13(2), which prevails over the English text in case of divergence, does not refer to the Universal Declaration of Human Rights.[1] Whatever the precise breadth of the international materials to which the clause directs the interpreter, it cannot insert torture into Article 18 or carry it into the *non-derogable* guarantee as a named category. The constitutional argument therefore does not depend on resolving the linguistic dispute; it holds on either reading, because on either reading the protection remains interpretive rather than textual.

No proclamation, accession notice or Gazette publication reproducing the Convention was in the official repositories examined. Ethiopia's international obligation under the Convention remains intact. Domestically, however, that absence undercuts the claim that Article 9(4) supplies a readily accessible and judicially noticeable norm equivalent to express constitutional language.[2]

The institutional setting makes reliance on interpretation especially uncertain. Constitutional interpretation is vested in the House of Federation, acting on recommendations from the Council of Constitutional Inquiry, while ordinary courts refer to constitutional questions rather than finally deciding them (FDRE, 1995a, arts 62, 83, 84). Ethiopian scholarship also documents restrictive standing, limited rights litigation, and infrequent judicial reliance on ratified human rights treaties (*Abebe*, 2010, 2017; *Yeshanew*, 2008). In the Federal High Court proceedings involving Dr *Negaso Gidada*, Articles 9(4) and 13(2) were used to support direct reliance on the Universal Declaration of Human Rights and the Covenant in domestic adjudication (*Yeshanew*, 2008). The case marks an important opening in Ethiopian rights litigation, but its exceptional character also exposes the weakness of placing the burden of express constitutional text on treaty-based interpretation. A route that depends on rare judicial willingness, contested treaty status and a referral-based constitutional structure cannot offer the same certainty, visibility or institutional discipline as an explicit constitutional prohibition. The wider institutional record points

1 FDRE Constitution, Proclamation No. 1/1995, arts 9(4), 13(2), 18(1), 93(4)(c), 106. It is worth mentioning here that the Constitution does not contain a general reception clause for customary international law. Article 9(4) gives domestic legal force to international agreements ratified by Ethiopia, while Article 13(2) directs the interpretation of Chapter Three rights by reference to international human rights instruments adopted by Ethiopia. Neither provision expressly states that customary international law, as such, forms part of domestic constitutional law. The position of customary international law in the Ethiopian legal order therefore remains distinct from, and less textually settled than, the position of ratified treaties. Although the prohibition of torture is widely recognized as customary international law and as a peremptory norm, that status confirms the force of the prohibition at the international level. It does not by itself insert torture into Article 18, make torture a named constitutional right, or carry torture expressly into Article 93(4)(c). The point is reinforced by Article 106, which gives final legal authority to the Amharic version of the Constitution. If the controlling Amharic text of Article 13(2) does not contain an equivalent reference to the Universal Declaration of Human Rights, reliance on Article 13(2) as a bridge from Article 18 to the international definition of torture becomes less direct than the English translation suggests.

2 Ethiopia acceded to the Convention against Torture on 14 March 1994, and the Convention entered into force for Ethiopia on 13 April 1994: United Nations Treaty Collection, Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, status table. Proclamation No. 3/1995, arts 2(2)-(4), requires federal laws to be published in the Federal *Negarit Gazeta*, provides for judicial notice of published laws, and requires publication in Amharic and English. Searches of the Ministry of Justice legal repository, the Federal Supreme Court Digital Law Library and publicly available Gazette indices, completed on 18 June 2026, located no proclamation, accession notice or Gazette publication reproducing the Convention. Ethiopia's accession predates Proclamation No. 3/1995, so this absence is not relied upon as a retroactive breach. Nor does it affect Ethiopia's international obligations. Its significance concerns domestic accessibility, judicial notice and enforceability of the treaty norm relied upon under Article 9(4).

the same way. Ethiopia has no National Preventive Mechanism, complaint mechanisms lack independence and have been marked by reprisals against complainants, and the oversight performed by the Ethiopian Human Rights Commission remains constrained by resources and mandate (OMCT, 2025).[3]

General Comment No. 2 addresses criminalisation rather than constitutional drafting, but its rationale for naming torture is directly relevant to constitutional design. The Committee against Torture links express identification to the Convention's preventive purpose by distinguishing torture from ordinary violence and making its special gravity visible to officials, victims and the public (Committee against Torture, 2008, para 11). A constitution performs a related classificatory function: it identifies the wrongs the legal order treats as fundamental and determines their place within rights, limitations and emergency clauses. Article 28(1) cannot perform that function. It concerns limitation and amnesty for crimes against humanity and refers to torture only within that narrower context. It does not establish a general constitutional guarantee against torture. The claim is narrower than the asserted treaty duty to amend Article 18. Article 18's omission leaves torture without the constitutional visibility, classification and *non-derogable* placement that express recognition would have secured.

Article 93 and emergency protection

Article 93(4)(c) expressly exempts Article 18 from emergency suspension, and torture, as conduct, may fall within the broader prohibition of cruel, inhuman or degrading treatment that Article 18 states. Torture is not, however, expressly named in Article 18, and it is therefore not expressly carried into Article 93(4)(c) as a named constitutional category. Its identification depends on the interpretation of Article 18, read with Articles 9(4) and 13(2), and the incorporated treaty obligations, rather than on the constitutional text itself.

A *non-derogation* clause settles the status of certain protections in advance, precisely so that they do not fall to be argued at the moment emergency rule expands detention powers, weakens ordinary safeguards and places judicial control under its greatest pressure. A constitutional category that must be established through interpretation is less secure than one expressly settled in the constitutional text. The broader prohibition may well protect the conduct; what it cannot supply is the textual certainty, constitutional visibility and legal classification that express naming would provide, and it is during a state of emergency that those qualities matter most. International law prohibits torture without exception, and no Ethiopian emergency measure could lawfully authorise it. The defect is one of domestic constitutional design, not of international obligation.

The importance of express protection is demonstrated by Ethiopia's recent emergencies. The November 2021 proclamation authorised broad arrest and detention without ordinary judicial safeguards, while Ethiopian, United Nations and civil-society investigations reported torture and other serious ill-treatment during the conflict and detention operations (FDRE, 2021; EHRC & OHCHR, 2021; Amnesty International, 2021; Human Rights Watch, 2023; United States Department of State, 2022). Reports concerning the August 2023 emergency in Amhara and detention at Awash Arba likewise describe beatings, forced exposure to extreme heat, incommunicado detention and other conduct characterised by the reporting bodies as torture or ill-treatment (Amnesty International, 2024; OMCT-FIDH, 2025).

The criminal law and evidentiary failures

Article 424, titled "Use of Improper Methods", is the nearest ordinary offence. It applies to specified public servants exercising arrest, custody, supervision, escort or interrogation functions and addresses improper treatment used to obtain a statement or confession (FDRE, 2004, art 424). It can punish part of the conduct covered by Article 1, but it is not a comprehensive torture offence. Its custodial and occupational scope is narrower than the Convention's category of persons acting in an official capacity; its purposes do not capture punishment, intimidation, coercion and discrimination in full; it does not address official consent or acquiescence outside the listed custodial functions; and it is not integrated with the Convention's rules on participation, jurisdiction, investigation, exclusion and redress.

The Committee against Torture identified the core deficiencies in 2011 and recommended an offence covering all Article 1 elements and carrying penalties that reflect the gravity of torture (Committee against Torture, 2011, para 9). Reviewing Ethiopia's second periodic report in May 2023, against a record that included grave allegations of torture and ill-treatment in the Tigray conflict and in ordinary detention, the Committee repeated the recommendation to bring the definition of torture into conformity with Article 1 (Committee against Torture, 2023). OMCT reported in May 2026 that no significant legislative reform had been adopted since that review (OMCT, 2026). Its Global Torture Index assessment of Ethiopia reaches the same conclusion from the side of substance, finding that

3 The decision is relied upon through *Yeshanew's* secondary account because the judgment itself was not located in a publicly accessible court repository. It is used only as evidence that a federal court has reportedly invoked Articles 9(4) and 13(2), not for any broader proposition concerning the holding or precedential effect of the case.

the Criminal Code provides an inadequate definition of torture and imposes minimal penalties, which undermines accountability and allows impunity to persist (OMCT, 2025). Twelve years separate the Committee's first recommendation from its most recent restatement, and the offence still does not exist. The legal deficiency is therefore not that Ethiopian law can punish none of the underlying violence. It is that no general offence classifies and regulates the conduct as torture across the full field required by the Convention.

Articles 270-272 criminalise torture only where the elements of a war crime are established, including an armed-conflict nexus and the protected status or circumstances required by the provision. A political description of an operation as law enforcement is not legally decisive, but prosecution still depends on proof of those contextual elements. The Convention's ordinary offence of torture contains no such requirement. War-crimes provisions therefore cannot satisfy Article 4 for torture committed in policing, detention, emergency administration or other settings outside the established war-crime context.

Ethiopian law uses the phrase "crimes against humanity" in Article 28(1) of the Constitution and within the Criminal Code's treatment of fundamental crimes against international law, but it has not enacted a distinct modern offence equivalent to Article 7 of the Rome Statute (*Metekia*, 2022). Torture committed as part of a widespread or systematic attack may still overlap with ordinary offences or war-crime provisions, depending on the facts, but Ethiopian law does not classify and punish it as the constituent act of a modern crimes-against-humanity offence. This is a separate gap from the absence of the general Convention offence.

Article 19(5) prohibits compelled confessions and declares evidence obtained through coercion inadmissible. Its wording may be broader than Article 15 of the Convention, which specifically addresses statements obtained through torture. The constitutional rule is therefore not absent. What remains underdeveloped is the procedure required to make it effective when torture is alleged: the burden and standard of proof, a distinct judicial inquiry into provenance, the treatment of derivative evidence, the use of a statement against third persons, mandatory referral for independent investigation, protection of the complainant and appellate review. Articles 12, 13 and 15 of the Convention connect evidentiary exclusion to investigation, complaint protection and accountability; Ethiopian law does not presently provide for a corresponding torture-specific procedure.

Article 23 of the 2009 Anti-Terrorism Proclamation recognised recorded confessions as admissible evidence while preserving the ordinary rules of admissibility. It did not authorise coerced confessions, but it gave recorded statements a statutory place in prosecutions arising from detention practices repeatedly associated with allegations of coercion. In *Zelalem Workagenehu's* case, statements allegedly extracted under duress at *Maekelawi* prison were treated at the trial as an admissibility issue under the ordinary law of evidence. The allegation was therefore processed through general rules on confessions and coercion, rather than through a procedure designed specifically for torture.[4]

The Istanbul Protocol applies to the effective investigation and documentation of torture and other ill-treatment regardless of whether domestic law contains an autonomous offence. The absence of such an offence weakens the framework into which medical and forensic documentation feeds, impairing consistent classification, charging, statistical recording, accountability, reparation and rehabilitation, and leaving investigators and clinicians without a domestic offence whose elements can organise the legal use of their findings (OHCHR, 2022).

Without an autonomous offence, prosecutors must rely on bodily-injury provisions, abuse of power, Article 424 or, where the additional elements are established, war-crimes provisions. Those offences may punish aspects of the conduct, but they do not consistently capture the full Article 1 definition, activate the Convention's jurisdictional scheme or record the case as torture. The deficiency lies in legal classification and completeness, not in a claim that no offence can punish.

Practical consequences for investigation, accountability, redress and rehabilitation

Legal classification determines how conduct enters the institutional life of a legal system: the charge a prosecutor can lay, the elements an investigation is organised to establish, the category under which a court convicts and sentences, and the description under which the case is recorded. Where no offence of torture exists, conduct meeting the Article 1 definition is dispersed across ordinary assault, unlawful coercion, abuse of power or general ill-treatment. Each of those classifications captures a fragment of the wrong; none captures it as torture. Prosecution then proceeds, where it proceeds at all, on charges that reflect neither the gravity nor the official character of the conduct;

4 Global Voices reported that Zelalem Workagenehu told the trial court that statements had been extracted under duress at Maekelawi. No publicly accessible judgment establishing the court's ruling on admissibility or the weight given to the statements was located. The example is therefore used only to show that a coercion allegation arose in litigation under the general law of admissibility.

sentencing and appellate review measure a lesser offence; and forensic and psychological documentation prepared to the standards of the Istanbul Protocol has no offence whose elements it can be marshalled to prove. National statistics record no torture because no case is entered as torture, and a survivor is recognised, if at all, as the victim of an assault. The category does not create the survivor's suffering, but it affects whether institutions consistently recognise that suffering as torture and respond to it accordingly.

The same weakness runs through redress and rehabilitation. Article 14 of the Convention requires an enforceable right to fair and adequate compensation and the means for as full rehabilitation as possible, a duty the Committee against Torture has interpreted to encompass restitution, compensation, rehabilitation, satisfaction and guarantees of non-repetition (Committee against Torture, 2012). Clinical care does not depend on a criminal conviction, and documentation of abuse can proceed under the broader prohibition; a defined offence and reliable recording nonetheless make it easier to identify survivors, preserve forensic findings, connect criminal proceedings to reparation and measure whether services reach those entitled to them. The available assessments describe minimal effective remedies for survivors of torture in Ethiopia, with legal aid, psychological assistance and meaningful access to justice remaining rare and complaint mechanisms compromised by intimidation of complainants and their families (OMCT, 2025).

Transitional justice and legislative design

Ethiopia's Transitional Justice Policy, approved in April 2024, is a policy framework rather than a criminal statute. It is not defective merely because it does not itself define offences, prescribe penalties, or establish evidentiary rules. Its legal significance lies in the implementing institutions and legislation it sets in motion, including the proposed Special Prosecutor's Office, the Transitional Justice Special Bench, and the legislation governing international crimes, truth-seeking, vetting, amnesty, and reparations.

Publicly available accounts of the draft laws describe torture among the international crimes within the proposed criminal-accountability institutions. That inclusion is important but may remain incomplete. Torture under the Convention is an ordinary offence capable of commission in custody, policing and emergency administration, settings that require neither an armed-conflict nexus nor a widespread or systematic attack. Legislation treating torture only as a war crime or crime against humanity would therefore leave the Article 4 gap open.[5]

The implementing package must create a general offence of torture outside the contextual elements of international crimes and connect it to jurisdiction, prosecution or extradition, evidentiary exclusion, prompt and impartial investigation, complaint protection, redress and rehabilitation. International-crimes legislation should separately cover torture as a war crime and as a crime against humanity where the required contextual elements are established. The two tracks are complementary and should not be collapsed into a single offence.

Any amnesty framework must preserve Ethiopia's duties to investigate, prosecute and provide redress for torture. Not every act satisfying Article 1 of the Convention necessarily constitutes a war crime or crime against humanity. The legal consequences of an amnesty must therefore be derived from the character of the underlying offence and from Ethiopia's duties to investigate, prosecute and provide redress, rather than attributed automatically to the peremptory status of the prohibition. Where torture also constitutes a war crime or crime against humanity, the African Union Transitional Justice Policy's exclusion of international crimes from amnesty provides an additional and independent basis.

Legality and non-retroactivity must be addressed expressly. A newly enacted general offence operates prospectively. Accountability for earlier conduct must rest on offences applicable at the time, including properly established international crimes, without creating criminal liability by analogy. Any extension of the domestic offence to purely private conduct is a wider policy choice authorised by Article 1(2), not a requirement of Convention compliance. Conduct by non-State armed groups should also be analysed under the applicable war-crimes and ordinary criminal-law provisions.

Comparative lessons and the complete reform package

Uganda, South Africa and Nigeria demonstrate that a general offence of torture can be enacted through dedicated legislation rather than left to fragmented ordinary offences. Uganda illustrates a national choice to extend the offence beyond the Convention's official-nexus minimum. South Africa illustrates a standalone statute that defines torture, criminalises commis-

5 As of 9 April 2025, the most detailed publicly available accounts described draft legislation concerning a Special Prosecutor's Office and a Transitional Justice Special Bench, with proposed jurisdiction extending to torture among other international crimes: T. S. Metekia, "Ethiopia's Special Prosecutor's Office Needs an International Cooperation Unit" (ISS Today, 7 March 2025); T. S. Metekia, "Ethiopia's Transitional Justice Special Bench: More Than Just a Criminal Tribunal" (ISS Today, 9 April 2025). These dated sources are used only to assess the publicly described design of the proposed institutions and not to suggest that the draft legislation has been enacted.

sion and participation, provides for extraterritorial jurisdiction, rejects emergency justification and requires awareness and training. Nigeria supplies a further federal African example of dedicated anti-torture legislation and confirms that a standalone statutory regime can be adopted within a federal legal order rather than leaving torture dispersed among ordinary offences.

Kenya addresses a different question. Its 2010 Constitution expressly named torture and made the right *non-derogable*, while the statutory offence followed in 2017. The seven-year interval shows that constitutional naming does not itself create a prosecutable offence or implementation system, yet it is not idle: it supplies the supreme-law foundation and the *non-derogable* right on which legislation builds. The need to amend Article 18 follows from Ethiopian constitutional analysis; Kenya confirms that constitutional naming and statutory implementation perform distinct and complementary functions.

Binding obligations under the Convention

First, Ethiopian substantive criminal law must create a general and autonomous offence of torture that covers the essential elements of Article 1, together with attempt, complicity, and participation under Article 4(1), and penalties that reflect the grave nature of the offence under Article 4(2). The offence must operate independently of the contextual requirements of war crimes and crimes against humanity, because torture under the Convention is committed in ordinary custody and interrogation without any nexus to armed conflict or to a widespread or systematic attack. An international-crimes statute remains necessary for conduct carrying those contextual elements, and the transitional justice legislation is its natural vehicle, but the two tracks answer different wrongs and neither can absorb the other: an ordinary offence cannot express the aggravated character of torture committed as a war crime or a crime against humanity, and an international-crimes provision cannot reach the custodial torture that constitutes the ordinary case.

Second, the legislation must establish the jurisdiction required by Article 5 and the custody, preliminary inquiry and prosecution-or-extradition duties in Articles 6 and 7. Torture must be treated as an extraditable offence consistently with Article 8.

Third, evidence law and criminal procedure must implement Article 15 and connect exclusion to the duties in Articles 12 and 13. Statements obtained through torture must be excluded, except when used against a person accused of torture as evidence that the statement was made. The procedure must allocate the burden and standard of proof once a credible allegation is raised, address evidence derived from an excluded statement and require that the allegation itself trigger a defined judicial inquiry and an independent investigation, with protection against retaliation, so that exclusion operates as the entry point to accountability rather than as an isolated evidentiary ruling.

Fourth, the legal framework must implement the preventive duties in Articles 10 and 11 through training and systematic review of interrogation, custody and detention practices, and must prevent other cruel, inhuman or degrading treatment under Article 16.

Fifth, survivors must have an enforceable right to redress under Article 14, encompassing compensation and the means for as full rehabilitation as possible, with access to legal aid and to medical and psychological services, so that identification, documentation, reparation and rehabilitation operate as a connected system rather than as isolated interventions.

Ethiopian implementation measures

The Convention requires prompt and impartial investigation but does not prescribe one universal institutional model. Ethiopia's documented conditions justify a specialised and institutionally independent investigative mechanism, supported by prosecutors trained in torture cases, mandatory referral of credible allegations, forensic procedures consistent with the Istanbul Protocol, protection of complainants and witnesses, national recording of allegations and outcomes, and coordinated referral to rehabilitation and reparation services.

Command or superior responsibility should be included where justified by the applicable international-crimes framework and the hierarchical organisation of the relevant security institutions. It should not be described as an express general requirement of CAT. A wider offence covering purely private actors may be adopted under Article 1(2), but it must be identified as an Ethiopian policy choice and drafted so that the treaty definition of torture is not conceptually obscured.

Constitutional amendment

Article 18(1) should be amended to state: "Everyone has the right to protection against torture or cruel, inhuman or degrading treatment or punishment." CAT does not expressly require this constitutional wording. The necessity of amendment follows from the constitutional defect identified here: ordinary legislation cannot insert torture into Article 18, secure its express constitutional placement among the *non-derogable* guarantees, or supply the constitutional visibility and entrenchment of a named right.

Under Article 105, amendment of Chapter Three requires approval by all State Councils by majority vote, approval by a two-thirds majority of the House of Peoples' Representatives,

and approval by a two-thirds majority of the House of Federation. Statutory reform should proceed immediately, but it is complementary to constitutional amendment rather than an interim substitute for it.

Conclusion

Article 18's silence is neither the whole of Ethiopia's failure nor a harmless drafting anomaly. Torture falls within the wider prohibition of cruel, inhuman or degrading treatment, but its classification as torture activates a separately defined legal regime. Articles 9(4) and 13(2) may assist an interpreter in condemning the conduct; they do not place torture in the constitutional text, resolve the contested domestic status and enforceability of the Convention, or give the category express protection within Article 93(4)(c).

The statutory failures are separate and equally serious. Article 424 does not capture the full Convention definition; the international-crimes provisions depend on additional contextual elements; and Article 19(5) is not supported by a torture-specific procedure that connects exclusion to investigation and accountability. Transitional justice legislation must therefore establish a general offence of torture and the full jurisdictional, investigative, evidentiary, preventive and remedial framework required by the Convention.

Constitutional amendment and legislation are complementary. Legislation can define and punish the offence, establish jurisdiction, exclude tainted statements, require investigation, protect complainants and secure redress and rehabilitation. Only an amendment can name torture expressly in Article 18 and carry it expressly into Article 93(4)(c) as a named constitutional category, so that its protection during emergencies rests on the text rather than on interpretation. Ethiopia should enact the complete statutory regime and amend Article 18 so that torture is both punishable as an autonomous offence and named as a *non-derogable* constitutional wrong.

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The imperative to incorporate the Convention Against Torture (CAT) into Lesotho's national legislation

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Abstract
The Kingdom of Lesotho is a state party to the UNCAT. It is responsible for domesticating the said treaty. In Lesotho, being a dualist state, international law is not directly applicable. There should be a statute that seeks to domesticate the treaty. The study draws lessons from other CAT jurisprudence to derive a formula that can assist the country in domesticating the UNCAT. After a detailed analysis thereof, the paper makes two propositions. Firstly, Lesotho should promulgate torture-specific legislation. Secondly, the country may choose to amend the existing laws and policies to align them with international human rights principles against torture. The paper also analyses a plethora of case law in which courts addressed critical questions regarding torture. The exercise is aimed at advancing the argument that, despite the absence of clear anti-torture-specific laws, Lesotho courts have developed the formula through the doctrine of precedent, which they apply when awarding damages to persons who have approached the courts claiming to have been tortured. Lesotho courts have referred to international law in interpreting torture and have, on several occasions, frowned upon the perpetrators of the torturous activities, including state officials. The author makes several recommendations to emphasise the point that Lesotho should domesticate the UNCAT.

Keywords: Definition of Torture, Non-domestication, Court challenges, Court intervention, Recommendations

Introduction

Despite Lesotho having ratified the United Nations Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (UNCAT, 1987), it has not yet incorporated it into domestic law. It has been 25 years since the ratification, but reports of torture and related practices keep occurring at concerning rates (The Kingdom of Lesotho combined its second to eighth periodic report under the African Charter on Human and Peoples' Rights and its initial report under the Protocol to the African Charter on the Rights of Women in Africa, 2018; Jobo & Others v Commander LDF & Others, 2018; Ramorantsi Ntaote v Commander LDF & Others, 2011; SADC Report, 2015). International bodies have, on several occasions, reminded Lesotho of its duties, being to enact the law that will address torture in the country (US Department of State Report, 2023; Lesotho Council of Non-Governmental Organisations (LCN) Joint UPR submission Report 2009; Amnesty International, Lesotho,2022). As a dualist country, Lesotho should pass legislation to domesticate the treaty, including incorporating a clear definition of torture in terms of the UNCAT. Currently, without such legislation, torture is not defined by law in Lesotho. The paper contributes to the existing literature by adding to the call made to states to domesticate treaties after ratification, to give effect to international law. Further, it adds to the invitation made to Lesotho to domesticate the Convention Against Torture, as it ratified it 25 years ago. It examines the challenges Lesotho faces due to the lack of a statute defining torture and the overall absence of domestic legislation implementing the UNCAT. It references CAT jurisprudence to guide the legislature on the key elements that constitute torture. The paper ex-

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plores ways to achieve domestication, either through amending existing laws or enacting torture-specific legislation. Additionally, the paper analyses how Lesotho's courts interpret and apply international principles against torture to protect human rights. Notably, this is evident in numerous cases handled by Lesotho courts, where plaintiffs have claimed torture. Unfortunately, because of the lack of torture-specific legislation, people who seek damages through delictual claims lose access to appropriate remedies. Based on this analysis, the paper recommends that the government of Lesotho domesticate the UNCAT, not only to fulfil its international human rights obligations but also to strengthen the legal framework safeguarding citizens against torture at the domestic level.

This paper is divided into five parts after the introduction. The first one discusses the applicable international law governing torture in the legal system of Lesotho. This includes the obligation to domesticate UNCAT. This part also analyses the definition of torture in terms of Article 1 of the UNCAT. This is a starting point when constructing the anti-torture statute for states. The second part examines the national laws of Lesotho that relate to torture since there is no statute specifically relating to it. The third part explores how courts experience challenges in respect of cases brought on allegations of torture in the absence of a statute specific to torture. This is achieved by interrogating Lesotho's case law to understand the attitude of the courts and the sentences they give under different circumstances of torture. In this part, the paper analyses cases where victims were tortured in police custody, where the victims were tortured to extract admissions and/or confessions for judicial purposes to secure convictions. The fourth part concludes by reiterating the purpose of this paper, while the fifth part makes recommendations on how Lesotho can domesticate the UNCAT.

Lesotho's international legal framework

Lesotho ratified the UNCAT on 12 November 2001, but to date has not domesticated the said treaty (UPR Second Cycle report, 2015). Du Plessis and Nienaber indicate that when becoming a party to an international or regional human rights treaty, state parties agree to be bound by the provisions of the treaty (Du Plessis G & Nienaber I, 2014). Lesotho has the obligation to domesticate all the international treaties that it has ratified (Jackson JH, 1992). Lesotho is a dualist state; therefore, international treaties are not self-executing (Shale I, 2019; Shaw MN, 1997; Van Niekerk GJ, 2012). An Act of Parliament must be enacted to domesticate international law (Director of Public Prosecutions v Mohollo Tšoenyane & Others, 1999; Basotho National Party & Another v Government of Lesotho and Others).

Since Lesotho does not have a specific definition of torture, this part identifies the pillars which Lesotho can refer to in promulgating its national statute. Nowark et al. (2019) indicate that some acts which can be categorised as torture are punishable under various laws in the state; the absence of a single definition of the crime of torture as a separate criminal offence may cause a legal *vacuum,* which leaves other torturous acts uncovered and subsequently unpunished. This emphasises the need for states such as Lesotho to define torture in their laws. The Committee Against Torture (CAT) has issued a series of recommendations to guide countries on how to incorporate the definition of torture in their legislation. Some states already had torture-specific statutes that were either unclear or silent on their definition of torture. CAT assisted them in elevating their statutes to meet international standards. This part explores other jurisdictions to guide Lesotho on what route to follow, as well as the lessons to learn in the exercise of promulgating torture-specific legislation or amending the existing criminal laws to include anti-torture provisions.

The starting point in defining torture should be the UNCAT itself. Article 1 contains the following definition of torture:

> 1. For the purposes of this Convention, the term "torture" means any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity. It does not include pain or suffering arising only from, inherent in, or incidental to lawful sanctions. 2. This article is without prejudice to any international instrument or national legislation which does or may contain provisions of wider application. (UNCAT, 1987).

In the case of Ireland v. UK (1976), it was said that 'Torture constitutes an aggravated and deliberate form of cruel, inhuman or degrading treatment or punishment. Torture is inhuman treatment, which has a purpose, such as the obtaining of information or confessions, or the infliction of punishment, and it is generally an aggravated form of inhuman treatment. This may be compared with the definition of torture contained in article 7(2)(e) of the 1998 Rome Statute of the International

Criminal Court (ICC) adopted by the UN Diplomatic Conference of Plenipotentiaries on the Establishment of an International Criminal Court (United Nations, 1998; Bazzano and Massera v. Uruguay, 1977; Human Rights Committee Report, 1979).

The three pillars in defining torture are: First, the relative intensity of pain or suffering inflicted; it must not only be severe, but it must also be an aggravated form of already prohibited (albeit undefined) cruel, inhuman, or degrading treatment or punishment (Yearbook of the European Convention on Human Rights – The Greek Case, 1969). Second, the purposive element: obtaining confession statements and admissions (Committee against Torture, 2013). Third, the status of the perpetrator: a public official must inflict or instigate the infliction of the pain or suffering. This means, therefore, that for torture to occur, the perpetrator must inflict 'severe physical or mental pain or suffering' (Rodley NS, 2002). At the same time, for other inhumane acts, it must be 'great suffering, or serious injury to body or mental or physical health' (UNCAT 1987).

UNCAT primarily imposes affirmative obligations on state parties, rather than negative obligations. It requires governments to ensure that persons who commit acts of torture are subjected to criminal penalties (UNCAT, 1987). Several articles are directed primarily to the Executive Branch: They require education of law enforcement officers, systematic review of rules for detention of prisoners, and prompt investigation of any complaints 'wherever there is reasonable ground to believe that an act of torture has been committed' (UNCAT, 1987).

The UNCAT establishes the CAT to monitor the implementation of the Convention (UNCAT, 1987). UNCAT imposes various obligations on State parties. Article 2 mandates each State party to take effective legislative, administrative, judicial, and other measures to prevent acts of torture in any territory under its jurisdiction. CAT, in its concluding observations to Canada, observed that State parties should incorporate all the provisions of the UNCAT into their domestic legislation "to allow persons to invoke it directly in courts, give prominence to the Convention and raise awareness of its provisions among members of the judiciary and the public at large" (Concluding observations report on Canada, 2019). These recommendations speak directly to Lesotho.

Article 2: States parties shall take effective legislative, administrative, judicial, and other measures to prevent torture in any territory under their jurisdiction. Though the Committee has considered in a general sense which measures must be taken by States parties to prevent torture, it has equally emphasised that no exhaustive list exists and obligations to take preventive measures go beyond the items enumerated specifically in the Convention or in its interpretation (UN Subcommittee on Prevention of Torture). The duty of Lesotho to define torture through a statute seems to be the starting point because it would be unlikely that it can deal with other measures when there is no legislature defining what torture is, in the first place. Therefore, Lesotho must have the duty to promulgate the law that defines torture.

Comparative lessons from CAT jurisprudence and selected jurisdictions

Since the publication of General Comment No. 2, CAT has called on state parties whose definition of torture in domestic legislation does not comply with UNCAT Article 1 to amend their relevant legislation(Special Rapporteur on Torture Report to Tunisia, 2012; Special Rapporteur on Torture Report to Ghana, 2014). In this regard, the Committee drew attention to its General Comment No. 2, which states that serious discrepancies between the Convention's definition and that incorporated into domestic law create actual or potential loopholes for impunity.

In the same vein, the CAT recommended that Cameroon should ensure that its domestic law on torture 'fully incorporates the definition of torture under articles 1 and 4 of the Convention', and noted with concern that domestic legislation does not provide for the imposition of sentences that take into account the seriousness of the offence (arts. 1 and 4) (Concluding observations of the Committee against Torture on the fourth periodic report of Cameroon, 2010). In response to these deficiencies, the Committee advised that the Cameroonian government should provide the Committee with the necessary information for it to assess whether the State party has incorporated into its Criminal Code a definition of torture that complies with articles 1 and 4 of the Convention. The Committee emphasised that the definition of torture should set out clearly the purpose of the offence, provide for aggravating circumstances, include the attempt to commit torture, as well as acts intended to intimidate or coerce the victim or a third person. The Act should also refer to discrimination of any kind as a motive or reason for inflicting torture. The definition should also criminalise torture inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity (Sube Singh v State of Haryana, 2006). Cameroon also had to ensure that the provisions criminalising acts of torture and making them punishable by criminal penalties are proportional to the seriousness of the acts committed.

Further, the CAT recommended that Bulgaria make a comprehensive definition of torture. The definition should incorporate all the elements of Article 1 of the Convention, not

included in its Penal Code. Also, torture is not criminalised as an autonomous offence in law, as required under the Convention (Concluding observations of the Committee against Torture on Bulgaria, 2011). The CAT urged the State Party to take effective legislative measures to include torture as a separate and specific crime in its legislation. The State was also mandated to ensure that penalties for torture are commensurate with the gravity of this crime. Also, the State should ensure that the absolute prohibition against torture is non-derogable and that acts amounting to torture are not subjected to any statute of limitations (Concluding observations of the Committee against Torture on Bulgaria, 2011).

CAT made similar recommendations to Guinea (Concluding observations of the Committee against Torture on Guinea, 2014). This example emphasises the important requirement in defining torture under the statutes. The definition of torture must be consistent with Articles 1 to 4 of the UNCAT. That definition must be supported by a penalty that takes into account the gravity of the offence. This is a *sine qua non* in constructing the definition of torture, for which any definition short thereof is internationally non-compliant. The crime is regarded as an autonomous offence when there is a statutory provision that directly addresses that offence. That defines and provides for its punishment and/or sentence. Unfortunately, this does not obtain in Lesotho; instead, the Penal Code fails to define it and does not create a corresponding offence and consequently prescribe a sentence.

The formula drawn from the above-considered state recommendations of the CAT is clear. It can be construed that Lesotho must adopt a definition of torture that fully complies with articles 1 and 4 of UNCAT in two ways. This is the starting point in drafting the anti-torture legislation as deciphered above. The analysis also demonstrates that there are two ways to domesticate the treaty. First, the country can enact torture-specific legislation. Second, amend penal laws (such as the Penal Code, 2010 or the Criminal Procedure and Evidence Act, 1981), and add the offence of torture to the existing offences in those laws. What is important is that torture should be declared as an offence and that it should encompass all the elements of torture under Article 1. The punishments set thereat should also reflect the gravity of the offence and remove any justification for torture.

The prohibition of torture has achieved the status of *jus cogens* or a peremptory norm in international law (Mujuzi D, 2015; Advisory opinion on the applicability of statutes of limitation to prosecution, conviction, and punishment in respect of an offence constituting, in substance, an act of torture, 2022). To determine whether a particular form of ill-treatment should be qualified as torture, the court will have regard to the distinction embodied in the definition of torture in Article 1 of UNCAT(Ireland v. the United Kingdom, 1978; Selmouni v. France, 1999; Ilaşcu and Others v. Moldova and Russia, 2004). In addition to the severity of the treatment, there is a purposive element, as recognised in UNCAT, which defines torture in terms of the intentional infliction of severe pain or suffering with the aim, inter alia, of obtaining information or a confession, inflicting punishment or intimidation (Salman v Turkey [GC] 2000; Al Nashiri v Poland 2014; Petrosyan v. Azerbaijan 2021).

Lesotho's national legal framework

The legislative framework of Lesotho governing torture appears in fragmented sections of the law in the following manner;

The Constitution (1993), Section 8 states that,

> 1) No person shall be subjected to torture or to inhuman or degrading punishment or other treatment.
>
> 2) Nothing contained in or done under the authority of any law shall be held to be inconsistent with or in contravention of this section to the extent that the law in question authorises the infliction of any description of punishment that was lawful in Lesotho immediately before coming into operation of this Constitution.

The Criminal Procedure & Evidence Act (1981), sections 228 and 229;

> (1) Any confession of the commission of any offence shall, if such confession is proved by competent evidence to have been made by any person accused of such offence (whether before or after his apprehension and whether on a judicial examination or after commitment and whether reduced into writing or not), be admissible in evidence against such person provided the confession is proved to have been freely and voluntarily made by such person in his sound and sober senses and without having been unduly influenced thereto.
>
> 229. Inadmissibility of facts discovered by an inadmissible confession,
>
> (1) Evidence of any fact otherwise admissible in evidence may be admitted notwithstanding—
>
> that such fact has been discovered and come to the knowledge of the witness who gives evidence respecting it only in consequence of information given by the person under trial in any confession or evidence which by law is not admissible in evidence against him on such trial, and that

such a fact has been discovered and came to the knowledge of the witness against the will of the accused (Criminal Procedure & Evidence Act 1981).

The UNCRC stipulates that 'No child shall be subjected to torture or other cruel, inhuman or degrading treatment or punishment' (Convention on the Rights of the Child 1989). Neither capital punishment nor life imprisonment without possibility of release shall be imposed for offences committed by persons below eighteen years of age. The UNCRC has been domesticated through the Children's Protection and Welfare Act (Children's Protection and Welfare Act, 2011). Section 2 (1) says that 'the objects of this Act are to extend, promote and protect the rights of children as defined in the 1989 United Nations Convention on the Rights of the Child, the 1990 African Charter on the Rights and Welfare of the Child and other international instruments, protocols, standards and rules on the protection and welfare of children to which Lesotho is a signatory. This symbolises the process of ratification and domestication that must happen in the case of dualist states in respect of international law.

In respect of torture, the CPWA says that 'A child has a right to be protected from torture or other cruel, inhuman or degrading treatment or punishment, including any cultural practice which degrades or is injurious to the physical, psychological, emotional and mental well-being of the child' (Children's Protection and Welfare Act, 2011). The Education Act also restates the UNCRC that '...no child shall be subjected to torture or other cruel, inhuman or degrading treatment or punishment' (Education Act, 2010). Further, there is a Code of Good Practice which indicates that 'a teacher shall treat the learners with dignity, respect and consideration of their circumstances'(Code of Good Practice Policy, 2011).

Lesotho, in its report to the African Commission, indicated that it is difficult for the country to criminalise torture in Lesotho as there is no specific anti-torture law. The state reported that, besides sections 94 and 95 of the Penal Code, which proscribe torture committed as part of war crimes or crimes against humanity, there is nowhere in Lesotho's laws that torture has been adequately proscribed. The report indicated that officials who are implicated in cases of torture are seldom prosecuted, and where they are, they are prosecuted under the Penal Code Act for offences such as assault or murder where the torture has resulted in the death of a victim (The Kingdom of Lesotho combined in its second to eighth periodic report under the African Charter on Human and Peoples' Rights and its initial report under the Protocol to the African Charter on the Rights of Women in Africa, 2018). This corroborates the paper's argument that there is an urgent need for anti-torture legislation. More so because the state has itself demonstrated that they receive many reports of torture, some of which go undocumented.

The Lesotho Council of Non-governmental Organisations (LCN) has also noted, with serious concern, the fact that Lesotho has not enacted any legislation that implements the UNCAT. They reiterate Section 8 of the Constitution, which becomes unhelpful since there is no autonomous offence of torture in Lesotho's criminal law (Lesotho Council of Non-Governmental Organisations (LCN) Joint UPR submission Report, 2009). They also noted the difficulty that the courts face in deciding torture-related cases. LCN opines that this is a demonstration of a continuing failure of Lesotho to implement its international obligations relating to the prohibition of torture (Lesotho Council of Non-Governmental Organisations (LCN) Joint UPR submission Report, 2009). In particular, Article 4 (1) of the UN Convention against Torture, according to which: 'Every State Party shall ensure that all acts of torture are offences under its criminal law. The same shall apply to an attempt to commit torture and to an act by any person which constitutes complicity or participation in torture'(UNCAT, 1987).

In 2020, Lesotho reported that although there is no law specific to torture, the country uses section 228 as a mechanism to bar the admissibility of torture-extracted confessions (Human Rights Committee, second periodic report submitted by Lesotho, 2020). However, the Committee expressed concern over high rates of torture since 1999. The report shows widespread allegations that torture and other cruel, inhumane, or degrading treatment remain a widespread practice among law enforcement officers, in particular by the Lesotho Defence Force (LDF) and Lesotho Mounted Police Service (LMPS). Notably, for interrogation and the extraction of forced confessions (Human Rights Committee, List of issues before the submission of the second periodic report of Lesotho, 2023). The underlying fact is that Lesotho has no law that is specific to torture, and the absence of specific legislation remains an important part of the legal gaps for the continued occurrence of torture. If this gap is addressed, Lesotho would be a step ahead towards addressing systemic and legislative challenges regarding the fight against torture.

Lesotho's courts' approach to torture-related claims

Judicial use of international law

The principle of subsidiarity also requires individuals to exhaust local remedies before approaching an international or regional

body to vindicate their human rights (Socio-Economic Rights and Accountability Project (SERAP) v Nigeria, 2010; Muzerengwa & Others v Zimbabwe, 2011; H v Sweden Communication, 2016; EE v The Russian Federation Communication, 2012; BR v Italy, 2016). It is at the national level that individuals can easily access and enforce against their own governments the rights and obligations contained in the ratified international human rights treaties (Viljoen F, 2011). At the national level, individuals must be able to enforce the rights contained in the ratified instruments. Viljoen summarises the process of aligning national legal systems with international human rights standards as 'bringing human rights home'(Viljoen F, 2011). He argues that when states ratify the international human rights instruments, they undertake to implement the rights contained therein and thereby assume the responsibility to bring the rights to the national level (Viljoen F, 2011).

The courts of Lesotho have demonstrated different approaches towards the implementation of international laws, without any consistency. Shale argues that Lesotho's dualist approach to international law is inferred from the constitutional supremacy clause in section 2 of its Constitution (Shale I, 2019; Constitution of Lesotho, 1993). However, it is illustrated that, as far as human rights protection is concerned, there has been a paradigm shift in terms of how the courts have applied provisions of international instruments. Although it is not clear whether this was deliberate or not, courts have applied provisions of international instruments directly without probing into their domestication or otherwise. Because of the lack of a clear constitutional provision on how the courts must treat such instruments, there are also cases in which the courts have totally disregarded international instruments and pronounced that these cannot overrule either Sesotho customary law or statutes if they have not been domesticated into national laws (Shale I, 2019).

Legislative reforms, such as criminalisation, measures to reduce pre-trial detention, the provision of legal aid, institutional reforms of the dysfunctional criminal justice system, and training on the nexus between inequality and torture, will often be essential. Beyond this, a careful analysis is required to tackle the underlying causes of torture. This includes the material conditions, socio-economic logic in highly unequal societies, and public discourses (McGregor L, 2013). Requiring Lesotho to develop and implement coherent and integrated policies on combating torture, corruption, and poverty eradication is an important measure in a wider, systemic approach to torture prevention.

Courts in Lesotho should have universal jurisdiction over the offence of torture, irrespective of where it is committed. This jurisdiction should be provided for "expressly" in domestic law (Conclusions and recommendations of the Committee against Torture on Togo, 2006). In its concluding observations on Togo's initial report, CAT regretted how extraterritorial jurisdiction is dealt with in the State party's legislation, particularly where allegations of torture are concerned. The Committee was concerned by the fact that under Togolese legislation, torture does not constitute an extraditable offence, since it has not been defined in the Criminal Code (Concluding observations of the Committee against Torture on France, 2010). This becomes a lesson for Lesotho that, as it promulgates the anti-torture statute, it should make torture an extraditable offence.

The CAT has also recommended that a state party should have jurisdiction over torture committed outside its territory if the suspect is "simply present" in its territory (Concluding observations of the Committee against Torture on the fifth periodic report of Germany, 2011). In other words, the suspect does not have to be a citizen of the state party that asserts the jurisdiction. A fair amount of literature on human rights treaties assumes that ratification matters in some way: it begins a process of socialization of elites, stimulates public mobilization, provides ammunition for litigation, and, in some cases, sends a costly signal of a government's intention to refrain from human rights violations (Creamer CD & Simmons BA, 2015).

Lesotho has ratified UNCAT. Treaty ratification also initiates a communicative process that connects a polity with the international human rights regime at various points in time. This "constructive dialogue" centres around state reports on implementation submitted to the treaty monitoring body. Not only is reporting a legal obligation within all human rights conventions, but it is also the primary method to generate information and increase transparency about the implementation of and compliance with the treaty (The United Nations Human Rights Treaty System). This recommendation becomes applicable to the extent that Lesotho has never submitted its report to the CAT. The initial report has been due since 2002. This non-reporting makes it difficult for the CAT to assist, as it is doing with other countries alluded to above. CAT could assist Lesotho to either promulgate a totally fresh anti-torture-specific law or amend the existing laws to comply with the international standards. It is therefore important that the country submit its reports to the CAT.

Domestic courts in Lesotho are confronted with cases involving a conflict between domestic law and an international human rights treaty. In some cases, they will be able to settle these conflicts by interpreting domestic legislation in such a way as to bring it into conformity with the provisions of inter-

national law (the so-called 'harmonising interpretation'). The demonstration is made with a lot of cases in this paper. International treaties supplement domestic law, offering additional legal sources that may be interpreted and applied by domestic courts. Of course, courts should be careful to keep within the limits of their competencies, as they draw their legitimacy from constitutions, considering that their decisions may have far-reaching and sometimes unforeseen consequences. Such a last resort involvement of the courts is appropriate because, under domestic law, the judiciary is the ultimate guarantor of fundamental rights. The courts in Lesotho have come up with a very clear structure of how they calculate the damages for persons claiming to have been tortured. However, this does not take away the responsibility of the State to enact an anti-torture law or modify and amend its existing laws to define and set torture as an autonomous offence.

There are cases where the accused, or the plaintiff, complain about torture but fail to get the requisite compensation because the court would be guided by the formula, which was never augmented by the statute. This formula, if it were prescribed in the statute, would create certainty and establish the right to reparation, rather than it remaining an issue of judicial discretion. These judicial efforts, positive as they are, are not sustainable when there is no statute and remain only within the purview of judicial discretion. The courts understand the need to adopt international law as either aid to interpretation or a guiding tool in coming to their decisions. What is noteworthy is that the courts of Lesotho recognise international law in their day-to-day functioning. They also apply it whenever the opportunity to do so presents itself. The following part will demonstrate the cases in which the courts invoked international law without entering the debate of the monism and dualism dichotomy.

Exclusion of evidence

Article 15 of UNCAT puts amongst other obligations that State parties that have adopted the treaty must ensure that 'any statement which is established to have been made as a result of torture shall not be invoked as evidence in any proceedings'(UNCAT, 1987). This is one of the courts' major responsibilities to ensure that, in administering justice in the country, they do not use the evidence obtained through torture. When this is raised during the trial, the court has the responsibility to determine the question of whether the evidence in question was obtained voluntarily and not through torturous activities (Mabope and Others v R, 1986; Owori MA, 2005). Torture is currently not a specific criminal offence in Lesotho. As a result, some suspects against whom the police allegedly have used unwarranted force to extract confessions do not argue that they have been tortured; instead, that they have been assaulted (Lori Ramashala v Policeman Makutle Makutle). Yet, in practice, as the CAT has stated, the treatment amounts to torture (Burgers JH and Danelius H, 1988). This is already the practice in Lesotho in terms of the above-cited Criminal Procedure and Evidence Act. In this aspect, Lesotho remains aligned with UNCAT.

Coerced confessions

There are two situations to be discussed: cases where accused persons were assaulted and tortured to admit guilt or obtain evidence that would later be used against them in the criminal court. The evidence would either be in the form of a confession statement or informal admissions. In the case of R v Lefu Makhabeng and Another, the accused indicated that he was tortured and forced to confess before the magistrate, who was later called to come and testify (R v Lefu Makhabeng and Another,1999). The magistrate refused the allegation, and the evidence obtained purportedly through torture was admitted by the court. When the accused raises the issue that the confession was obtained through torture, the court conducts the trial to determine that aspect, and then, if ruling in favour of the accused, that confession will be excluded as part of the evidence. If the court is satisfied that there was no coercion in extracting the confession, then that will form part of the evidence. The general principle guiding the courts is that the confession or admission of guilt should be made freely without any undue influence, for it to form part of the evidence before the court.

Police brutality and detention

The other scenario is shown by cases where the accused persons were tortured in police custody. This not only shows the institutional problem entrenched in our police holding cells, but also shows that the state must promulgate laws that proscribe torture and also follow up on cases involving police who have tortured the accused persons in custody. In some cases, as shown below, the police officers torture the suspects whom they believe committed criminal acts, and later do not even open cases against them. The case of Mabekebeke Mashali and Others v The Learned Magistrate and Others (2010) is a criminal review application where the accused was assaulted and influenced by the police in detention to admit guilt to 'obtain a lenient sentence'. The said case was reviewed before the High Court, wherein the application was granted, and the High Court ordered that the trial start *de novo* before a different magistrate (Mabekebeke Mashali and Others v The Learned Magistrate and Others, 2010).

The case of Zheng Shu Xhian v Chief Magistrate and Others (2012) is an application for review of proceedings from the lower court and the setting aside of the conviction of the applicant on the grounds of alleged irregularities. The applicant averred that he was arrested by the police concerning the charge read out to him. He was detained in custody and tortured with suffocation, beatings, and other 'atrocities' during which he fainted several times; in which case he would be revived by being splashed with water all over his body (Zheng Shu Xhian v Chief Magistrate and Others, 2012). The accused gave evidence in court that he was instructed to confess. He further indicated that the police told him that if he did not confess, they would continue the torture. In return for the lesser. He later confessed. Upon release, he went to the doctor to seek medical forms and launched the review proceedings in the High Court. The court granted the application and set aside the conviction (Zheng Shu Xhian v Chief Magistrate and Others, 2012).

In the case of Liphapang Limema & Others v Commissioner of Police and Another (2011), the police suspected that the plaintiff was a thief. They ordered the accused persons to lie down, and after they had done so, they used the sticks and shamboks to whip them all over their backs. The court commented that 'it is trite that the Constitution places a premium on bodily integrity. In violation of bodily integrity, however minuscule it may appear, should be frowned upon.'

In the case of Lori Ramashala v Policeman Makutle Makutle and Others (2011), the plaintiff was taken to the inner room at the police cell, where, on arrival thereat, the first defendant had him half naked, forced him to lie on a bench in a face-down position, and had him handcuffed on the bench. The first defendant then assaulted him on his waist with a knobkerrie while another one was assaulting him with a stick under his feet. When, ultimately, the plaintiff was taken out of that police cell to meet his mother, he could not walk due to the said brutal assault, and his mother had to offer support and assist him to walk (Liphapang Limema & Others v Commissioner of Police and Another, 2011). He was ultimately taken to the Magistrate's Court with the help of his mother, who supported him from the police station to the taxi/bus stop. The plaintiff was never formally charged, even though he was taken before the Magistrates' Court. He was left outside by the first defendant and his relatives when they went into the prosecutor's office. After some time, the first defendant went to where the plaintiff had been left outside the prosecutor's office, and he informed the plaintiff that the prosecutor did not prefer charges against him; on that ground, he was released.

In the case of Mosehle Molise v Officer Commanding Thaba-Tseka police post and 2 others (2012), the plaintiff was brutally assaulted by the police while in custody on suspicion of stock theft. The events took place on 08 May 2011. The plaintiff was hospitalised for more than two weeks. The assault on him was extensive. The plaintiff was released without a charge. The court awarded him damages. In Thapelo Matsau v Commissioner of Police and Another (2011), the court dealt with an assault by the police officers on the plaintiff. The arrest was also unlawful. The plaintiff was assaulted using a knobkerrie and hammer on his toes and was kept in detention for two nights. He was awarded a combined sum of M70,000 for unlawful arrest and detention, and M80,000.00 for assaults, torture, pain, and suffering.

Judicial calls for legislative reform

The case of Kabelo Khabanyane v The Commissioner of Police & Others (2023) involves a police officer who was charged with assaulting a visually impaired person. They threw themselves into his house, knocking him down, and then kicking and beating him with sticks under the guise of conducting the investigation. The Chief Justice indicated that the following are the reasons that perpetuate police brutality. He mentioned that a lack of political will to enact distinct anti-torture legislation and a failure to prosecute members of the security services implicated in cases of torture. This encourages the police to torture suspects to extract information. Failure to prosecute those found liable for assaults and torture by the courts in civil cases. This leads to the conclusion that assaults and torture are condoned by those in authority and are thereby institutionalised.

The Chief Justice went further to propose a recommendation which could, if implemented, address to a certain extent these inhumane acts. The court made two recommendations for tackling the enablers of police brutality: first, the enactment of distinct anti-torture legislation with heavy criminal sanctions. Second, provision for redress to victims of torture that is not limited to monetary compensation but includes medical treatment and psychological support. This is a clear indication that the court is aware of how extreme the act of torture is and that it not only affects the physical but also the mental well-being of a person.

A call was also made by the court in Ratia v. Magistrate Rantso and Another (2019), where the police had forced a suspect to eat human faeces. The judgment of the court was brought to the attention of the relevant agencies for investigation and prosecution of the perpetrators of this despicable and inhuman act. But nothing has been done to hold the concerned police officers accountable. The same obtains in the case of Tjela v. Commissioner of Police and Another (2020), where the court called upon the authorities to prosecute the perpe-

trators of the inhuman acts to protect the rule of law. There are many cases in this jurisdiction where the court is called upon to award damages to plaintiffs who are tortured by police. But as it has always been reiterated in this paper, this kind of suit is mischaracterised as assault because there is no torture-specific legislation.

Courts of Lesotho have cautioned the country about the bad reputation these inhumane activities earn for the country. The following comments were made: 'Above all else, all such gross acts of brutality and inhuman treatment and abuse during military detention tarnish the reputation of the Lesotho Defence Force and Kingdom of Lesotho internationally, continentally, and on the sub-continent, sooner or later turning it into a pariah state shunned by all right-minded people. The damage that can be done may be irreversible, with drastic consequences. Lesotho exists in a global village'(Matlhokomelo Jobo and Others v Commander-Lesotho Defence Force and Others 2015). The courts of Lesotho put much reliance on the principle of bodily integrity to proscribe acts of torture (McCrudden C, 2008). Good as it may be, the challenge is that since there is no statute interpreting torture and inhumane treatment, they rely on case law to assess the quantum of damages. This remains a challenge that could easily be curbed by promulgating a statute.

In the case of Maabele Ramakatsa & Others v. Commissioner of Police (2018), the matter involved habeas corpus proceedings in which the applicants' mothers requested that the court order the police to produce the bodies of their sons, who were held in police custody for an unlawfully extended period (beyond 48 hours). The police claimed to have taken the suspects (detainees) out of the country for medical reasons. This led their mothers to rush to court, suspecting that their sons had been tortured. The court had the opportunity to recount the history of Lesotho, which was marked by acts of torture and where perpetrators were allegedly immune from prosecution due to their enforcement of internal security laws. The court had this to say;

> [27] Thus, the notorious practice of the police, (which I take judicial notice of), of calling people under the pretext of being assisted with investigations or calling them for questioning and subsequently causing them to die in police custody because of so-called interrogation fatigue (*Ho khathalla lipotsong*) is unlawful, antithetical to policing a democratic society and is reminiscent of police behaviour in the bygone era of dictatorial government when they enforced the notorious Internal Security legislation. In that era, the police arrested and detained persons and held them in custody for weeks, months and even years for purposes of investigation and extraction of admissions and confessions for commission of offences by methods of violence and solitary confinement without access by family members, their lawyers and doctors: Sello v. Commissioner of Police & Another 1980 (1) LLR 158 (HC); Moloi v. Commissioner of Police 1982-1984 LLR 58 (HC). The new democratic dispensation has adhered to a new policing culture of respect for human rights and freedoms and corresponding accountability for their violation. It is for this reason that section 8 of the Constitution outlaws in absolute terms torture and inhuman or degrading punishment or treatment (Constitution of Lesotho, 1993).

This case demonstrates how far Lesotho has come with torture perpetrated by the police. The promulgation of the 1993 Constitution tried but did not ameliorate the situation, as it only outlawed it by saying that "no person shall be subjected to torture or inhuman or degrading punishment or other treatment". The Constitution also indicates that nothing shall be deemed inconsistent with the Constitution, even if that law authorises the infliction of any description of punishment that came before 1993. This creates room for the law that prescribed inhumane treatment as a punishment that came before the Constitution to still stand. The Constitution, therefore, fails to rescue the situation to the fullest. This is why torture continues. It also does not obligate the legislature to promulgate statutes that are torture-specific. This would mean, if it were so, that the Constitution, being the supreme law, just sets the principle and then the Act of Parliament entrenches the said principle. Unfortunately, the situation is different. This is why it becomes imperative for Lesotho to start afresh and construct the anti-torture-specific law and inculcate the international principles as encapsulated in UNCAT art. 1.

Civil damages

The courts often indicate that although victims register complaints of assault and torture, often no progress is made in arrests and investigations. Often, complainants end up suing the Commissioner of Police for monetary compensation, even though they may not have the medical statements, since they may be in the hands of the police. There are many cases where the courts have ruled in favour of the complainants who sue for delictual damages against the police, where they allege acts of torture and inhumane treatment.

In the case of Commissioner of Police and Another v Rantjanyana (2011), an Inspector arrested the plaintiff, a trooper in the Lesotho Mounted Police Service, in the same force on the allegation that he had helped a prisoner to escape from prison.

The award made by the High Court was M500 000.00. It was set aside on appeal and replaced with an award of M50 000.00. In Officer Commanding Roma Police and Others v Khoete and Another (2012), the first plaintiff was awarded M50 000.00 by the trial Court for pain and suffering endured because of a gunshot wound to his leg. On appeal, the award was reduced to M15 000.00. Masupha v Tae (2014), the plaintiff, a trooper in the Lesotho Mounted Police Service, was assaulted by a superior officer at the Maseru Central Charge Office, who pulled him into an office, closed the door, punched and knocked him down, and kicked him all over the body, shouting abuse at him. The award of M 17 000.00 made by the Court a quo consisted of M2 000.00 for pain and suffering and M15 000.00 for contumelia and was confirmed on appeal.

Mohlaba and Others v Commander of the Royal Lesotho Defence Force and Another (1996), the three plaintiffs were arrested, detained in very poor conditions, and assaulted. Their incarceration lasted one year in one case and six months in the other two. On appeal, the awards were increased to M75 000.00 (in respect of the year-long detention) and M25 000.00 and M50 000.00 in respect of the other two. In Commander of the Lesotho Defence Force and Others v Letsie (2010), the plaintiff was arrested and detained for 12 days, during which time he was for three days subjected to severe and prolonged assaults for three days, which included being suffocated by placing a blanket or plastic bag over his face until he lost consciousness. At the time of the trial, he continued to experience "flashbacks". He was awarded M340 000.00 in the High Court for pain and suffering and contumelia. The award was reduced on appeal to M150 000.00.

Also, in the case of Mokotjo (2020), the court made an award of M275,000.00. There, the plaintiff had been in detention for 5 days, during which he was assaulted. In Tjela, the Court of Appeal reduced this court's award of M400 000.00 to M250 000.00. Mokhethoa Mokaka vs Commissioner of Police and Another (2012), in which the court awarded damages in the sum of M250,000 for a broken arm. Ramoholi vs Commissioner of Police (2011), in which the court awarded damages in the sum of M250,000. In Letsela Morobi vs Commissioner of Police CIV/T/230/10, damages in the sum of R100,000 for bodily injuries were awarded. In Mahlomola Makh'apha vs The Commissioner of Police (2013), the court awarded damages for unlawful arrest and detention, pain and suffering with attendant contumelia – M500,000. Loss of amenities – R100,000. Interest at the rate of 18%.

Morie Motiane v Officer Commanding Mabote Police & Others (2007), was an action for damages for both physical and psychological torture of the plaintiff by the police. He was arrested on suspicion of having committed murder. He was severely assaulted and suffocated. Medical reports showed swollen genitals, abrasions on both knees, wrist, chest, and back. Plaintiff's claim was upheld, and he was awarded M50,000.00 for pain and suffering, M30,000.00 for contumelia, and M605.00 for medical expenses. Mare Gilbert Taole v Sehloho & Others (2010), the plaintiff sought damages as a result of unlawful arrest, detention, and assault of the plaintiff by the police. He was suspected of having stolen a laptop at his workplace. Liability was admitted, but the quantum of damages claimed was contested. He was awarded M200,000 for assault, M40,000 for unlawful arrest and detention, and M200.00 for medical fees.

In Mokotjo (2020), the court was called upon to decide the extent of delictual damages where the complainant was claiming compensation in monetary value, alleging acts of torture and inhumane treatment by police. The court indicated that in cases of assault and torture, the most important factor that determines the quantum or amount of compensation is the extent of the physical injury to be established with reference to the intensity, nature, and duration of the pain and suffering. Although the court was correct in principle, if the statute regulating torture were available, the legislature would have set out the need for reparations as a right and prescribed the formula in terms of Article 14 of the Convention, emphasising the need to afford compensation considering the gravity of torture in awarding compensation to the complainants (Basic Principles and Guidelines on the Right to a Remedy and Reparations for victims of Gross Violations of International Human Rights Law and serious violations of International Humanitarian Law, 2006). This means that, in the absence of that statute, the awarding of compensation to victims of torture remains an issue of judicial discretion and not a statutorily guaranteed right (Nanima RD, 2021; Sarkin J, 2014).

The right to reparations remains a right under international law (The Universal Declaration of Human Rights, 1947; UN Human Rights Committee, General Comment No. 31, 2004; The African Court on Human and Peoples' Rights, in Mtikila v. Tanzania, Application 11/2011; Zongo and Others v. Burkina Faso, Application 004 of 2013). Under domestic law, the courts have the duty to afford effective remedies to victims of torture and inhumane treatment. This means that, over and above the judicial measures made by the courts to award damages to victims of torture, the need for the law remains. This will improve the legal guarantee, as the anti-torture law will give victims the right. The judiciary of Lesotho is remarkably doing a wonderful job of awarding damages case by case, but if the statute were in existence, it would provide a safer approach, provide a legal

guarantee, and afford the victims the right to reparations. This is a necessary protection in terms of the international treaties as mentioned earlier.

In the case of Commissioner of police v Pheello Rampheane (2025), the Court of Appeal was dealing with the quantum of damages, which the Appellant contended was excessive and unsupported by proper evidential and judicial reasoning. The Court of Appeal indicated that in making an assessment of damages, the court may be compelled to make an intelligent or informed estimate where exact proof is unavailable or incapable of precise calculation. It further indicated that the said discretion does not absolve the court from the duty to explain the basis upon which the award is made. It went further and said, 'even where damages cannot be quantified with mathematical precision and the court is constrained to make what has often been described as an "intelligent" or "informed" guess, the judicial officer remains under a duty to disclose the factors taken into account and the basis upon which the award has been reached.'

In Commander Lesotho Defence Force and Others v Tlhoriso Letsie (2009), the court stated that;

> It is well established that each case must be decided on its own peculiar circumstances, and that the trial Judge enjoys a wide discretion to award what he or she considers, in those circumstances, to be fair and adequate compensation. Nevertheless, whilst it is undoubtedly true that no two cases are precisely alike, guidance must be sought from previous awards and, in the absence of decisions regarded as directly comparable, regard should at least be had to what Potgieter JA described in Protea Assurance Co Ltd v Lamb 1971 (1) SA 530 (A) at 536B as 'the general pattern of previous awards'. It is equally important that the trial court should furnish some reasoned basis for the amount awarded in respect of general damages, difficult though that exercise may often be.

Despite the court emphasising the need for provision of reasons for its judgment, which is a form of accountability demanded of judges, the court has made an important observation for purposes of this paper. The court indicated that it is sometimes difficult to decide the amount of damages to award in a given set of circumstances. The existence of anti-torture-specific law, though it will not restrict the judges to specific amounts, will serve as guidance on statutory considerations for calculating damages. Courts will also not be put in situations having to compare cases to look for similar circumstances in order to get guidance; rather, the statute will provide it. This will make the work of the courts easier and more transparent and accountable.

In some cases, police officers leave the victims in the hands of the community. A society that is sometimes and mostly in pain tends to take the law into its own hands. Victims end up suing police for negligence and claim damages against them. An example is the case of Maci Mokhankhane and Another v Attorney General and Others (2018), where the plaintiffs were brutally assaulted by a group of twelve able-bodied men who tied them with ropes. The force with which the ropes were tied left deep scars that were clearly visible. The acts of torture and assault seemed to have gone on for a long time. The court observed that 'this should have been a traumatic experience for both plaintiffs.' The deep emotional scarring that this experience left on the plaintiffs was clearly on display in court as the 2nd plaintiff battled to contain the flow of tears as he narrated what happened to him. In his considered view and the fairness of the case, the court awarded damages as follows: Each plaintiff is awarded M50,000.00 combined total for contumelia, pain, and suffering.

In analysing the above cases, Article 4(2) of the CAT states that torture is one of the most severe human rights violations that requires a punishment severe enough to have a deterrent effect. This is the observation that was made to the Republic of South Africa in 2006 (CAT, 'Concluding Observations: South Africa, 2006). Some Scholars opine that *a* custodial sentence of between six and twenty years would best correspond to the CAT Committee's interpretation of the requirements of Article 4(2) (Nowak M et al., 2019).

When reviewing the report of Austria, CAT also indicated that a penalty in the Criminal Code of the State Party of one to ten years' imprisonment for the basic crime of torture, allowing the judge to impose a minimum sentence of one year, is insufficient (CAT, 'Concluding Observations: Austria, 2016). The CAT concluded that the minimum sentence for torture must be in accordance with Article 4(2). This means that when Lesotho drafts its legislation, it should at most make sure that the minimum sentence is that provided under Article 4 (2). This will help deal with the inconsistency that is seen in the cases above where the complainants are claiming monetary compensation in the form of delictual damages in civil courts.

Scholars such as Nowak M & Anna Z indicate that the intention to torture itself is the injustice that must be convicted. Additionally, they consider that circumstances such as the permanent disability or death of a victim, since they are aggravating factors, should not influence the severity of the sentence. They opine this because they hold that the intention of torturing a person alone holds the possibility of lasting physical and

mental effects and cannot be excluded based on the very nature of the act of torture (Nowak M & Anna Z, 2018). This means that torture need not result in permanent disability, death, or extreme consequences before criminal responsibility can arise. Those consequences become the aggravating factors. Therefore, the civil claims that are seen in the above cases are not enough because torture is multifaceted, as seen herein. The intention alone is an offence, so civil claims for damages cannot replace criminal liability.

Conclusion

The UNCAT art. 1 defines torture, while art. 2 (1) imposes an affirmative duty on the state to take effective legislative, administrative, judicial or other measures to prevent acts of torture. Significantly, these articles acknowledge both physical and mental torture, each having lasting effects on an individual. The paper shall not recapitulate the earlier analysis of the perpetrator's status. It must be a public official or someone acting as such, someone who is acting at the instigation of, or with the consent or acquiescence of the public official.

Torture, even if not committed on the scale of crimes against humanity, is regarded as a crime which threatens the good order not only of states but of the international community. Coupled with treaty obligations, the ban on torture has the customary international law status of a peremptory norm from which no derogation is permitted (Weissman DO, 2016-2017). As a result of this absolute ban, "the torturer has become, like the pirate or the slave trader before him, *hostis humani generis*, an enemy of all humankind". This statement, albeit in a civil case, applies equally to criminal cases. Torture attracts universal condemnation, and all nations have an interest in its prevention, regardless of the nationality of the perpetrator or of the place where it has occurred (Hathaway O et al., 2012).

Recommendations

Implementation of international human rights treaties is a task for all national authorities. In most systems, the legislator or the executive implements the State's international legal obligations correctly and on time. This comes through the adoption of the required legislation, or amending existing legislation, and by taking the required action, respectively.

Lesotho has two options at its disposal: first, to promulgate a law that is specific to torture and criminalise it. The CAT has indicated that, to ensure proper implementation of the Convention's provisions, the state should first recognise the provisions of UNCAT in its territory. Thereafter, the state should transpose the provisions of UNCAT into its law. In the case of Lesotho, which is dualist in nature, this means that the legislature should promulgate the law that incorporates all the provisions of the UNCAT and make them law. This will also enable the courts to invoke them directly in dealing with cases before them. Also, the prosecuting agencies will charge and prosecute people under that torture-specific law. This will benefit Lesotho, as it has been reflected above that there are no cases brought by the prosecution on cases of torture because it is not defined by any statute in Lesotho.

Second, Lesotho can amend its criminal laws to incorporate Articles 1 to 4 of UNCAT (UNCAT, 1987). This exercise will also demand that minimum sentences and fines be prescribed for such torturous activities. Other modifications, such as the prohibition of corporal punishments, are critical in ensuring that Lesotho complies with the provisions of UNCAT in its effort to proscribe torture. These efforts will not only guarantee the protection of fundamental human rights but also put Lesotho in a good state, as this obligation remains hanging over its head. Implementation of international human rights treaties is a task for all national authorities.

On both options alluded to above, torture in Lesotho must be defined expansively to incorporate all the elements contained in UNCAT art.1. (Nowak SRT, 2010) All forms of torture must be criminalised, including all attempts to commit torture and all complicity or participation in torture (CAT General Comment No 2). The obligation to take effective preventive measures means that the state should embark on broader reforms in case of systemic failings. Empirical research has demonstrated that successful police reforms create a structure and instil an ethos that enhances the likelihood of effectively implementing the State's obligations in the day-to-day work of the police or other law enforcement agencies (CAT, General Comment No 3). This entails reviewing interrogation methods, improving conditions of detention, prohibiting the extraction of evidence through torturous activities, and guaranteeing the right to liberty and a fair trial(Constitution of Lesotho, 1993; UNCAT, 1987).

Other safeguards, such as the exclusion of evidence obtained through torture, are already in place. However, the envisaged law should be able to set out torture as an autonomous offence, reflect the penalties that align with the gravity of the crime, criminalise attempt and complicity, provide for universal jurisdiction, establish independent complaint and investigation mechanisms, protect people against reprisals, provide victim-centred remedies, clearly set out the compensation mechanisms which will guide the courts of law on the standards that they have already set as reflected in the case law above, and provide for rehabilitation of torture victims.

The CAT has also indicated that the legislative measures are insufficient to address torture. The Committee believes that law enforcement agencies, including public officials, judges, magistrates, prosecutors, and lawyers, should receive training so they can apply the Convention and the Committee's jurisprudence. It remains an advantage for Lesotho that judges are already calling for the promulgation of a torture-specific law. Also, regard being had to the discussion of case law above regarding police brutality, coerced confessions, and the international calls on the state to train law enforcement officials, the issue of training remains urgent. Also, many civil cases are being brought in which perpetrators of torture seek compensation. This means that lawyers and magistrates are not far behind in appreciating issues of torture; however, the continued occurrences of torture reinforce the need for holistic implementation of anti-torture measures across state institutions.

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Depression, anxiety, and PTSD among Palestinian detention survivors assessed during the ongoing October 2023 war: Prevalence, comorbidity, and the limits of individual risk factors

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Key points of interest

- Palestinian detainees held during the October 2023 war show an extremely high, highly comorbid burden of depression (76.98%), anxiety (65.61%), and PTSD (67.99%), with 50.81% scoring above clinical screening thresholds on all three measures simultaneously
- Demographic characteristics and detention conditions, including torture breadth index, showed negligible predictive value for symptom severity in this sample — likely reflecting a ceiling effect from near-universal, extreme torture exposure rather than the absence of a true dose–response relationship
- These findings support urgent, sustained investment in integrated, trauma-informed mental health services for Palestinian detainee survivors, alongside continued human rights documentation of detention conditions

Abstract

Introduction: Palestinian detainees held during the October 2023 war have widely reported torture, but quantitative studies jointly assessing depression, anxiety, and post-traumatic stress disorder (PTSD) remain rare. We aimed to characterise the prevalence, severity, and comorbidity of these conditions and to examine demographic and detention-related predictors. *Methods:* In this cross-sectional study, we recruited 400 Palestinian adults detained by Israeli authorities during the October 2023 war and subsequently released; the large majority (94.7%) reported experiencing at least one form of torture during detention. After excluding 14 participants under 18 years of age and 8 participants detained prior to the onset of the October 2023 war, the final analytic sample comprised 378 participants. Participants were recruited through rehabilitation centres, human rights organisations, and community networks in Gaza, and completed Arabic-language PHQ-9, GAD-7, and PCL-5 measures in structured, trauma-informed interviews between late 2025 and early 2026. Multiple linear regression assessed predictors of symptom severity, and regression-based analysis examined statistical associations among the torture breadth index, PTSD symptom severity, and depression symptom severity, without implying temporal or causal ordering. *Results:* 76.98% scored in the moderate-to-severe range on the PHQ-9, 65.61% on the GAD-7, and 67.99% met the PCL-5 threshold for probable PTSD. The three conditions were strongly intercorrelated ($r = 0.61–0.68$, $p < .0001$), with 50.81% meeting thresholds for all three. Education was the only demographic variable consistently associated with depression, anxiety, and PTSD severity, though models explained under 4% of

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variance; age, gender, and torture breadth index were not significant predictors, while detention duration was additionally associated with PTSD severity specifically (see Results). PTSD severity was strongly associated with depression, whereas torture breadth index was not significantly associated with either outcome. Internal consistency was good (Cronbach's α = 0.80–0.91). *Discussion:* Palestinian detention survivors, assessed while war, displacement, and material deprivation in Gaza were ongoing, showed an extremely high and highly comorbid burden of depression, anxiety, and PTSD. The near-ceiling torture exposure in this sample may help explain the limited predictive power of individual demographic and exposure variables, and the concurrent wartime context means these symptom levels cannot be attributed to detention in isolation. These findings support integrated, trauma-informed mental health care and continued human rights documentation for this population.

Keywords: torture, detention, PTSD, depression, comorbidity

Introduction

The psychological impact of incarceration and torture

Research on prisoners of war and political detainees frames the carceral environment as a setting that systematically undermines safety, autonomy, and identity (Sykes, 1958; Goffman, 1961). Sykes's "pains of imprisonment" and later trauma frameworks—Seligman's (1972) learned helplessness and Bloom's (1997) "sanctuary trauma"—describe how prolonged, uncontrollable harm and the betrayal of protective institutions produce depression and deep psychological injury.

In the Palestinian context, detention has functioned as an instrument of political control for decades (Addameer, 2016; Jabr & Helbich, 2025), but the scale of detention following October 7, 2023, and the consistency of reports of torture during this period present a distinct empirical case. Human rights organisations and academic researchers have documented severe beatings, prolonged stress positions (including shabah/suspension), sleep deprivation, sensory overload, starvation, sexual violence, and psychological humiliation among detainees held during this period (Sehwail et al., 2025; B'Tselem, 2026; PCHR, 2025). These reports are broadly consistent with patterns documented in other conflict-related detention settings internationally, in which torture serves both an interrogative function and a broader function of controlling and demoralising a population (Einolf, 2007; Rizkalla et al., 2022). The present study contributes empirical, standardised clinical data to this documentation effort.

Literature review: Detention-related trauma, 2022–2026

Meta-analyses offer a comparative baseline: Lim et al. (2022) found pooled rates of 28.9% depression, 30.7% anxiety, and 23.5% PTSD in war-affected populations, higher among former detainees. Ahmed et al. (2024), covering 57 studies and 64,000+ participants, reported 23.7% PTSD and 25.6% depression, with greater severity among detainees—confirming that detention/torture exposure predicts markedly higher morbidity than conflict exposure alone.

Sehwail et al. (2025) studied Palestinian detainees released from Israeli prisons in the post-October 2023 period and reported near-universal exposure to torture and ill-treatment, with severe physical sequelae including fractures (26%) and amputations (7%); 83% showed moderate-to-severe depressive symptoms and 63% met PTSD criteria. Critically, Sehwail et al. reported that the cumulative number of torture methods experienced was a stronger predictor of symptom severity than any single method, and that ostensibly "non-violent" methods—such as deprivation of the sense of time—had psychological effects comparable to or exceeding those of physical injury.

Hamamra (2025) described a qualitative "collapse of the internal world" among detainees, with symptoms resembling Complex PTSD. Aldabbour et al. (2025) found detention/torture predicted depression and anxiety more strongly than losing a first-degree relative. B'Tselem (2026) and PCHR (2025) corroborate these findings, documenting starvation, sexual violence, denied medical care, and 84+ custodial deaths meeting the legal definition of torture.

Together, this literature establishes: (a) elevated depression, anxiety, and PTSD among detained torture survivors; (b) a documented dose–response relationship between torture exposure and severity (Sehwail et al., 2025); and (c) growing support for a Complex PTSD framework. The present study tests (a) and (c) with a larger sample, while complicating (b).

Theoretical framework

Four frameworks organise the analysis. Janoff-Bulman's (1992) Shattered Assumptions Theory holds that traumatic events can destroy core assumptions about the benevolence and meaningfulness of the world and the worth of the self; in a detention context marked by state-sanctioned, systematic violation, this shattering may be both personal and collective. Complex PTSD theory (Herman, 1992; World Health Organization [ICD-11], 2019) is relevant to prolonged, inescapable, repeated trauma and predicts disturbances in self-organisation, emotion regulation, and self-concept beyond the core PTSD symptom clusters.

Beck's (1967) cognitive triad frames depression through negative views of self, world, and future, plausibly exacerbated in this context by loss of social role and socioeconomic status following detention. Anxiety is examined through the Intolerance of Uncertainty model (Dugas et al., 1998), which is well suited to the unpredictability of detention length, threat of further harm, and incommunicado conditions.

Research gaps and rationale

Despite an expanding literature on Palestinian detention (e.g., Sehwail et al., 2025; Hamamra, 2025; Aldabbour et al., 2025), large-sample quantitative studies jointly assessing post-traumatic stress disorder (PTSD), generalised anxiety disorder (GAD), and depression among Palestinian detainees in the post-October 2023 period remain scarce. Existing research has largely been qualitative, based on smaller samples, or focused on earlier detention periods. Moreover, studies employing standardised assessment tools together with multivariable statistical modelling are particularly limited.

This study addresses these gaps by examining a cohort of 378 survivors and directly testing, rather than assuming, the relationships between demographic characteristics, torture breadth index, and psychological symptom severity. To our knowledge, no previous study of Palestinian detainees detained after October 2023 has simultaneously assessed depression, anxiety, and PTSD using standardised instruments in a sample exceeding 300 participants while also evaluating demographic and cumulative exposure variables through multivariable models and examining their statistical associations.

Aims and scope

Study aims

This study pursued eight specific aims, organised around three core objectives: characterising the burden of psychopathology, testing its correlates, and examining statistical associations between torture exposure and mental health outcomes.

Objective 1 — Characterise the burden:

- Estimate the prevalence and severity of depression, anxiety, and PTSD among Palestinian detention survivors detained during the October 2023 war.
- Assess the psychometric performance of the PHQ-9, GAD-7, and PCL-5 in this population, including internal consistency reliability.
- Quantify comorbidity across the three conditions.

Objective 2 — Test correlates of severity:

- Examine associations between demographic characteristics (e.g., age, gender) and symptom severity.
- Examine associations between detention conditions and symptom severity.
- Compare the relative contribution of demographic versus detention/torture-related variables to symptom severity using multiple regression.

Objective 3 — Examine associations and interpret null findings:

- Examine, using regression-based analysis, the statistical associations among torture breadth index, PTSD symptom severity, and depression symptom severity, without implying temporal or causal ordering.
- Evaluate competing substantive and measurement-based explanations for any observed independence between symptom severity and individual/exposure characteristics.

Methodology

Participants

This was a cross-sectional, observational study. No a priori power calculation was performed; the recruitment target of approximately 400 participants was set pragmatically, based on the number of released detainees that partner rehabilitation centres, human-rights organisations, and community networks in Gaza could feasibly identify, contact, and interview within the study period given prevailing security and access constraints, rather than derived from a formal sample-size calculation. The realised analytic sample of 378 nonetheless exceeds the threshold (N>100) that prior literature in this area (Section 1.2) identified as rare for studies jointly assessing depression, anxiety, and PTSD in this population, and represents a comparatively large sample for this highly constrained research context.

Recruitment was purposive and conducted through rehabilitation centres, human-rights organisations, and community networks. No probability sampling frame was available; therefore, selection bias cannot be ruled out. The gender distribution (86.5% male) mirrors the known composition of deten-

tion during the period but limits the precision of sex-stratified estimates.

Inclusion criteria required that participants: (a) be Palestinian adults aged 18 years or older; (b) have been detained by Israeli authorities during the October 2023 war; and (c) have since been released from detention.

Exclusion criteria were: (a) presence of psychotic symptoms or impaired reality orientation that would compromise insight or the reliability of self-report; and (b) incomplete or unmatched data across the three clinical instruments (PHQ-9, GAD-7, PCL-5).

All 400 individuals initially approached completed the three clinical instruments (PHQ-9, GAD-7, PCL-5), and none were excluded for psychotic symptoms. On post-hoc review, however, 14 participants were found to have been under 18 years of age at the time of data collection, and 8 participants had been detained prior to the onset of the October 2023 war; both groups fall outside the inclusion criteria (adults detained by Israeli authorities during the October 2023 war and subsequently released) and were excluded, yielding a final analytic sample of N = 378. This correction to the originally reported exclusion rationale is described further in Section 5.4.

Of 400 individuals initially recruited, 378 met the age and war-period detention criteria and were retained for analysis. Recruitment targeted adults detained during the October 2023 war who had since been released, the large majority of whom reported experiencing torture during detention. Given the known gender composition of detention during this period, a gender imbalance in the sample was anticipated; this is addressed as a limitation on the precision of gender-based subgroup analysis.

Instruments

Depression, anxiety, and PTSD symptoms were assessed with the Arabic-language PHQ-9 (Kroenke et al., 2001; 9 items, range 0–27), GAD-7 (Spitzer et al., 2006; 7 items, range 0–21), and PCL-5 (Weathers et al., 2013; 20 items, range 0–80, with Intrusion, Avoidance, Negative Alterations in Cognition and Mood, and Hyperarousal subscales). All three instruments have documented validation histories in Arabic-speaking and Middle Eastern conflict-affected populations, with prior Cronbach's $\alpha > .85$ reported for the PHQ-9 in Palestinian samples. Standard cutoffs were used for severity classification (PHQ-9: minimal 0–4, mild 5–9, moderate 10–14, moderately severe 15–19, severe 20–27; GAD-7: minimal 0–4, mild 5–9, moderate 10–14, severe 15–21; PCL-5: probable PTSD ≥ 33).

Torture breadth index was operationalised as a 4-point index (0–3) reflecting the number of torture categories experienced: psychological violence (humiliation, threats, isolation), physical violence (beatings, suspension, denial of medical care, starvation), and sexual violence (rape or attempted rape, forced nudity, sexual touching during searches or interrogation, sexual threats or verbally degrading sexual language, and forced witnessing of sexual violence against others). During the structured interview, participants were asked, for each category, whether they had experienced any one or more of the constituent acts listed for that category during detention; a category was coded as present (1) if the participant endorsed at least one constituent act within it, and absent (0) otherwise, regardless of how many constituent acts within that category were endorsed or how frequently they occurred. The torture breadth index score was then calculated as the simple sum of the three binary category scores (range 0–3). It therefore captures breadth across broad categories and does not measure the intensity, duration, frequency, or cumulative number of individual torture methods. The category list was applied as a structured coding framework during the interview; it was not treated as a validated scale of torture severity.

Procedure

Data were collected via structured, trauma-informed interviews conducted between late 2025 and early 2026 by trained psychologists and social workers, face-to-face where feasible and via secure phone or video in high-risk areas. Sessions lasted 45–90 minutes with breaks as needed. Participation was voluntary, and participants were informed of their right to withdraw at any time.

Several steps were taken to limit potential sources of bias. All interviewers were trained psychologists or social workers who completed a standardised training and calibration protocol on the three instruments and on trauma-informed interviewing before data collection began, to reduce measurement variability across interviewers. Interviews followed a fixed structured protocol and item order to limit interviewer-driven variation in how questions were presented. Interviewers received ongoing supervision throughout data collection (Section 3.5), which also served as an informal check on protocol adherence and on possible drift in how items were administered. Data entry and cleaning were performed independently of the interviewing team, and all data were de-identified before analysis to reduce the possibility that knowledge of a participant's detention history could influence coding or entry. We nonetheless note, as a limitation (Section 5.4), that non-probability recruitment through rehabilitation and human-rights organisations may itself introduce selection bias that these procedural safeguards cannot fully address.

Data analysis

Descriptive statistics, 95% confidence intervals (t-distribution), and Pearson correlations were computed for all scales. Internal consistency was assessed using Cronbach's α and McDonald's ω. Independent-samples t-tests examined differences in mean symptom scores across demographic and torture-exposure categories. Odds ratios with 95% CIs were computed for comorbidity relationships. Multiple linear regression models estimated associations between PHQ-9, GAD-7, and PCL-5 severity and age, gender, education level, detention duration, and torture breadth index. A regression-based analysis examined associations among torture breadth index, PTSD symptom severity, and depression symptom severity. The reported coefficients are descriptive regression coefficients and are not interpreted as direct effects, indirect effects, mediator effects, or evidence of temporal or causal ordering. Comorbidity was assessed by classifying participants into eight mutually exclusive categories based on clinical thresholds on each of the three scales. Analyses were conducted in SPSS (version 28), $\alpha = .05$ (two-tailed), with all data de-identified and securely stored. No correction for multiple comparisons was applied across the regression and correlation analyses. No sensitivity analyses (e.g., re-estimating the PHQ-9/PCL-5/GAD-7 models after excluding the small zero-exposure subgroup, applying multiple-comparison correction, or testing alternative severity cut-offs) were conducted for this cross-sectional analysis; this is noted as a limitation in Section 5.4, and such analyses are recommended before or alongside any future re-analysis of this dataset.

Ethical approval

The study adhered to the Declaration of Helsinki and ethical guidelines for research involving vulnerable populations. Informed consent was obtained from all participants, and confidentiality, voluntary participation, and the right to withdraw at any time were emphasised throughout the study. Interviewers received ongoing supervision to mitigate the risk of secondary or vicarious traumatisation, and immediate referral pathways to specialist community mental health services were activated whenever acute psychological distress or suicidal ideation was identified. The study protocol was approved by the Helsinki Committee for Scientific Research (Approval No. PHRC/HC/1236/25).

Results

Sample characteristics

The final analytic sample (N = 378) was predominantly male (86.5%) and married (79.1%), with moderate-to-high educational attainment (34.7% held a bachelor's degree) and high unemployment (70.6%). Detention duration varied widely (M = 6.08 months, SD = 6.77, n = 373 with interpretable dates), with 34.1% detained for less than one month and 31.0% detained for more than one year.

Of the 22 individuals excluded between initial recruitment (N = 400) and the final analytic sample (N = 378), 14 were excluded for being under 18 years of age at the time of data collection and 8 for having been detained prior to the onset of the October 2023 war (Section 3.1). Six participants in the final analytic sample had one missing item on the GAD-7 (n = 372 with complete GAD-7 data); PHQ-9 and PCL-5 data were complete for all 378 participants. This corrects the previously reported exclusion rationale, which incorrectly attributed the reduction from 400 to incomplete or unmatched instrument data; that error is acknowledged and corrected here following methodological review (Section 5.4).

Full demographic and employment characteristics are presented in Table 1. Detention duration and torture breadth index are presented in Table 2.

Torture breadth index showed a marked ceiling effect: 73.0% of participants reported experiencing all three torture categories (M = 2.47, SD = 0.93), with only 5.3% reporting no torture exposure. This skewed distribution is addressed in Section 5.2 as a constraint on the interpretability of subsequent regression-based analyses involving this variable.

Psychometric performance

Internal consistency for the three instruments was assessed using Cronbach's alpha, computed directly from item-level responses. Reliability in this sample was good and consistent with prior Arabic-language validation studies, which have documented $\alpha > .85$ for the PHQ-9 in Palestinian populations. In the current sample, Cronbach's alpha was .80 for the PHQ-9, .88 for the GAD-7, and .91 for the PCL-5. McDonald's omega ($\omega = .80$–.92) closely matched Cronbach's alpha across all three scales, indicating that the tau-equivalence assumption underlying alpha was not violated in this sample (see Table 3).

Prevalence and severity of psychological distress

Depression symptoms were elevated: 76.98% of participants scored in the moderate-to-severe range (PHQ-9 M = 14.60, SD = 5.86, 95% CI [14.01, 15.20]); severity breakdown was 2.65% minimal, 20.37% mild, 28.84% moderate, 21.96% moderately severe, and 26.19% severe. Anxiety was similarly elevated: 65.61% scored moderate-to-severe (GAD-7 M = 12.29, SD = 5.56, 95% CI [11.72, 12.85]), with 11.56% minimal, 21.77% mild, 29.30% moderate, and 37.37% severe (percentages of n

Table 1. *Sample demographic and socioeconomic characteristics*

Characteristic	n	%
Gender		
Male	327	86.5
Female	51	13.5
Marital status		
Married	299	79.1
Single	65	17.2
Widowed	8	2.1
Divorced	6	1.6
Employment status		
Unemployed	267	70.6
Government employee	37	9.8
Labourer	10	2.6
Private sector	5	1.3
Housewife	9	2.4
Mean age (SD)	39.57 (12.61)	Range 18–70

Note. Educational attainment: bachelor's degree 34.7%, secondary education 27.0%, preparatory education 22.8%, diploma 8.5%, primary education 4.8%, postgraduate 2.1%, illiterate 0.3%.

Table 2. *Detention duration and torture breadth index*

Variable	**n**	**%**
Detention duration		
< 1 month	129	34.1
1–6 months	101	26.7
6–12 months	26	6.9
> 1 year	117	31.0
Mean (SD), months	6.08 (6.77)	Range 0–22.1
Torture breadth index (0–3 categories)		
0 categories	20	5.3
1 category	57	15.1
2 categories	25	6.6
3 categories	276	73.0
Mean (SD)	2.47 (0.93)	Range 0–3

Note. Torture categories: psychological violence (humiliation, threats, isolation), physical violence (beatings, suspension), and sexual violence.

Table 3. *Severity distribution, clinical thresholds, and reliability of psychological measures*

Measure	**M (SD)**	**95% CI**	**Min. %**	**Mild %**	**Mod. %**	**Mod-sev %**	**Severe %**	**Clin. %**	**α**	**ω**
PHQ-9 (Depression)	14.60 (5.86)	[14.01, 15.20]	2.65	20.37	28.84	21.96	26.19	76.98	.80	.80
GAD-7 (Anxiety)	12.29 (5.56)	[11.72, 12.85]	11.56	21.77	29.30	—	37.37	65.61	.88	.88
PCL-5 (PTSD)	40.23 (16.77)	[38.54, 41.93]	—	—	—	—	—	67.99	.91	.92
PCL-5 Intrusion	10.82 (5.32)	[10.28, 11.36]	—	—	—	—	—	—	—	—
PCL-5 Avoidance	4.51 (2.35)	[4.27, 4.75]	—	—	—	—	—	—	—	—
PCL-5 Negative Alterations	12.05 (6.76)	[11.37, 12.73]	—	—	—	—	—	—	—	—
PCL-5 Hyperarousal	12.85 (5.83)	[12.26, 13.44]	—	—	—	—	—	—	—	—

Note. Clinical thresholds: PHQ-9 ≥ 10; GAD-7 ≥ 10; PCL-5 ≥ 33. GAD-7 uses a 4-band severity classification (no "moderately severe" band); PCL-5 uses a single clinical threshold rather than graded severity bands, so severity-band columns are not applicable for it or its subscales.

= 372 with complete GAD-7 data). For PTSD, 67.99% met the PCL-5 clinical threshold (M = 40.23, SD = 16.77, 95% CI [38.54, 41.93]). Symptom cluster means were: Intrusion M = 10.82 (SD = 5.32), Avoidance M = 4.51 (SD = 2.35), Negative Alterations in Cognition and Mood M = 12.05 (SD = 6.76), and Hyperarousal M = 12.85 (SD = 5.83).

Comorbidity: Co-occurrence of depression, anxiety, and PTSD

Comorbidity analysis showed that 12.90% of participants (n = 48) had no clinical-level symptoms on any measure, while clinical-level comorbidity across depression, anxiety, and PTSD ("triple comorbidity") was observed in 50.81% (n = 189); 73.39% (n = 273) met the threshold on at least two measures, and 87.10% (n = 324) met the threshold on at least one.

Intercorrelations and shared variance

The three measures were strongly and significantly intercorrelated: PHQ-9–GAD-7, r = .68, p < .001 (R^2 = .46); PHQ-9–PCL-5, r = .61, p < .001 (R^2 = .37); GAD-7–PCL-5, r = .61, p < .001 (R^2 = .38).

Multiple regression: Predictors of depression and PTSD severity

Regression models predicted PHQ-9, GAD-7, and PCL-5 severity from age, gender, education, detention duration, and torture breadth index (N = 373, after excluding 5 additional cases with uninterpretable detention/release dates; see Section 5.4). For depression, the overall model explained a very small proportion of variance (R^2 = .018, adjusted R^2 = .005); education was the only significant predictor (β = 0.58, SE = 0.24, 95% CI

***Table 4**. Comorbidity patterns, odds ratios, and intercorrelations among PHQ-9, GAD-7, and PCL-5*

Comorbidity patterns			
Pattern	**n**	**%**	
No clinical symptoms	48	12.90	
Depression only	28	7.53	
Anxiety only	10	2.69	
PTSD only	13	3.49	
Depression + Anxiety	33	8.87	
Anxiety + PTSD	16	4.30	
Depression + PTSD	35	9.41	
Triple comorbidity (all three)	189	50.81	
Pairwise odds ratios			
Pair	**OR**	**95% CI**	
PHQ-9 & GAD-7	8.27	[4.83, 14.15]	
PHQ-9 & PCL-5	7.34	[4.33, 12.45]	
GAD-7 & PCL-5	7.55	[4.63, 12.30]	
Intercorrelations			
Measures	**r**	**p**	**R^2**
PHQ-9 ↔ GAD-7	.68	< .001	.46 (45.56%)
PHQ-9 ↔ PCL-5	.61	< .001	.37 (36.83%)
GAD-7 ↔ PCL-5	.61	< .001	.38 (37.63%)

Note. Individuals meeting the clinical threshold for one condition were approximately 6–7 times more likely to also meet the threshold for each of the other two.

[0.12, 1.05], t = 2.44, p = .015). Age (β = 0.03, 95% CI [−0.02, 0.08], p = .184), gender (β = 0.18, 95% CI [−1.67, 2.02], p = .851), detention duration (β = −0.002, 95% CI [−0.10, 0.10], p = .976), and torture breadth index (β = 0.07, 95% CI [−0.62, 0.75], p = .850) were non-significant. For PTSD, the model explained slightly more variance (R^2 = .036, adjusted R^2 = .023); education was again a significant predictor (β = 1.34, SE = 0.68, 95% CI [0.01, 2.67], t = 1.98, p = .049), and detention duration was also a significant predictor (β = 0.32, SE = 0.14, 95% CI [0.04, 0.60], t = 2.22, p = .027) — a result not previously reported and evident only after correcting the detention-date data errors described in Section 5.4. Age (β = −0.05, 95% CI [−0.19, 0.09], p = .492), gender (β = −2.56, 95% CI [−7.79, 2.67], p = .338), and torture breadth index (β = −1.38, 95% CI [−3.34, 0.57], p = .166) were not significant. For anxiety, the model explained minimal variance (R^2 = .028, adjusted R^2 = .015); education was the sole significant predictor (β = 0.64, SE = 0.23, 95% CI [0.19, 1.09], t = 2.78, p = .006), while age (β = −0.02, 95% CI [−0.06, 0.03], p = .546), gender (β = 0.21, 95% CI [−1.56, 1.98], p = .815), detention duration (β = 0.01, 95% CI [−0.09, 0.10], p = .887), and torture breadth index (β = −0.22, 95% CI [−0.87, 0.44], p = .520) were not.

Note on confidence intervals and re-analysis: this section was re-estimated directly from the corrected raw dataset (N = 373 for the regression models; see Section 5.4 for the sample and detention-duration corrections), rather than reconstructed from previously published test statistics. Standard errors and 95% CIs shown are from ordinary least squares estimation (df = 367).

***Table 5**. Multiple regression and regression-based analysis of associations*

Multiple regression predicting depression, PTSD, and anxiety severity

Predictor	PHQ-9 β	PHQ-9 p	PCL-5 β	PCL-5 p	GAD β	GAD p
Age	0.03	.184	−0.05	.492	−0.015	.546
Gender	0.18	.851	−2.56	.338	0.212	.815
Education level	0.58	.015*	1.34	.049*	0.638	.006*
Detention duration	−0.002	.976	0.32*	.027*	0.007	.887
Torture breadth index	0.07	.850	−1.38	.166	−0.215	.520
Model R^2 (Adj. R^2)	.018 (.005)		.036 (.023)		.028 (.015)	

Regression-based associations among torture breadth index, PTSD, and depression (descriptive analysis)

Association/term	Estimate	p	Interpretation
Torture breadth index–PTSD association	β = −1.38	.166	Not significant
PTSD–depression association	β = 0.22	< .001	Strong, significant
Torture breadth index–depression association	β = 0.07	.850	Not significant
Torture breadth index–depression coefficient with PTSD included	β = 0.35	.190	Not significant
Product of coefficients (a × b)	−0.30	n/a	Descriptive product; no mediation interpretation

Note. *p < .05. N = 373 (regression models). Education reached statistical significance in all three models; detention duration was also significant for PCL-5. Each model accounts for under 4% of total variance. 95% confidence intervals for all coefficients are reported in the text of Section 4.6.

Regression-based analysis of associations among torture breadth index, PTSD, and depression

The association between torture breadth index and PTSD symptom severity, controlling for age, gender, education, and detention duration, was not statistically significant ($\beta = -1.38$, $p = .166$). The association between PTSD and depression symptom severity, controlling for the same covariates and torture breadth index, was strong and statistically significant ($\beta = 0.22$, $p < .001$). The unadjusted torture breadth index–depression association was not statistically significant ($\beta = 0.07$, $p = .850$), nor was the corresponding coefficient when PTSD symptom severity was included in the model ($\beta = 0.35$, $p = .190$). The product of the two regression coefficients ($a \times b = -0.30$) is reported descriptively and has no temporal or causal interpretation.

Symptom severity by torture breadth index

Comparing psychological outcomes across levels of the torture breadth index revealed no significant differences (ANOVA for PHQ-9: $F = 0.71$, $p = .547$; GAD-7: $F = 0.53$, $p = .664$; PCL-5: $F = 0.65$, $p = .585$). Mean scores were similar across torture breadth index levels of 0, 1, 2, and 3 (Table 6), with no monotonic dose–response pattern evident.

Discussion

Interpreting the burden of psychological distress

This study documents markedly elevated screening-positive rates for depression (76.98%), anxiety (65.61%), and probable PTSD (67.99%) among Palestinian detainees from the October 2023 war, the large majority of whom reported experiencing torture—roughly two to three times the pooled rates reported for conflict-affected populations generally (Lim et al., 2022; Ahmed et al., 2024). These rates are broadly consistent with, and in some respects more severe than, the closest comparable study of this specific cohort (Sehwail et al., 2025: 83% moderate-to-severe depression, 63% probable PTSD). Nearly half the sample (50.81%) scored above clinical screening thresholds on all three measures simultaneously, and the three conditions were strongly intercorrelated ($r = .61–.68$). We use "screening threshold" rather than "clinical criteria" throughout, since PHQ-9, GAD-7, and PCL-5 are validated screening instruments that identify probable caseness, not diagnostic instruments; no structured clinical interview was conducted in this study, and diagnostic confirmation would require one. Together, these findings describe a highly comorbid pattern of screening-positive symptoms among detention survivors assessed during ongoing wartime conditions. The pattern should not be interpreted as evidence of a single transdiagnostic trauma response: the PCL-5, particularly its negative cognition and mood domain, overlaps conceptually with the PHQ-9, and a strong inter-scale correlation cannot by itself establish a single underlying clinical construct. With this caveat noted, the pattern is broadly consistent with, and extends, prior qualitative accounts of "total" psychological collapse under prolonged detention (Hamamra, 2025), and with Janoff-Bulman's (1992) account of shattered core assumptions about safety, meaning, and self-worth under systematic, state-sanctioned violation.

The elevated anxiety symptoms observed here are similarly consistent with the Intolerance of Uncertainty model (Dugas et al., 1998): detention in this context is characterised by profound unpredictability—indefinite duration, the ongoing threat of further harm, and incommunicado conditions that deny detainees any ability to anticipate or plan—precisely the conditions under which this model predicts chronic, generalised anxiety to develop and persist.

Limits of individual risk factors: Why were demographic and torture-exposure variables weak predictors?

As confirmed by both multiple regression (Section 4.6), neither demographic characteristics (age, gender) nor detention-related

***Table 6**. Symptom severity by torture breadth index level*

Torture breadth index	n	PHQ-9 M (SD)	GAD-7 M (SD)	PCL-5 M (SD)
0	20	15.00 (5.56)	12.80 (5.14)	44.50 (19.03)
1	57	13.88 (6.11)	11.81 (5.04)	38.81 (14.80)
2	25	13.56 (6.21)	13.43 (6.65)	41.80 (17.04)
3	276	14.82 (5.81)	12.25 (5.60)	40.08 (16.98)

Note. ANOVA across exposure levels: PHQ-9 $F = 0.71$, $p = .547$; GAD-7 $F = 0.53$, $p = .664$; PCL-5 $F = 0.65$, $p = .585$ — no significant differences and no monotonic dose–response pattern.

exposure variables (duration, torture breadth index) meaningfully predicted clinical status or symptom severity, with the partial exception of a small education effect (Sections 4.6–4.7). The positive direction of the education coefficient (higher formal education associated with higher symptom severity on the PHQ-9, GAD-7, and PCL-5) is noteworthy and runs counter to the protective effect of education typically observed in non-detained populations. Several speculative explanations may account for this pattern. More educated detainees may have experienced a sharper rupture between their pre-detention life trajectory and the reality of prolonged, degrading captivity, intensifying feelings of loss, injustice, and shattered assumptions about the future. Higher education may also be associated with greater cognitive elaboration of the traumatic experience, deeper awareness of the political and legal dimensions of their detention, or differential targeting (e.g., more intensive interrogation of individuals perceived as having higher social or professional status). Alternatively, the finding may partly reflect residual confounding or the very small proportion of variance explained by the models ($R^2 < .04$). Because the effect size is modest and the present data cannot adjudicate between these possibilities, we regard this association as an open empirical question that warrants targeted qualitative and mixed-methods follow-up rather than a robust, generalizable risk factor.

This pattern contrasts sharply with prior research in comparable populations. Aldabbour et al. (2025) found detention and torture exposure to be a stronger predictor of depression and anxiety than the loss of a first-degree relative among young adults in Gaza, and Sehwail et al. (2025) found cumulative torture-method count to be the strongest predictor of symptom severity in a Palestinian post-October 2023 cohort drawn from an overlapping population and time period, though not necessarily the same individuals. We consider three non-mutually exclusive explanations for why the present study did not replicate this dose–response pattern. We deliberately avoid resolving this question in favour of any one of them, as the present data cannot adjudicate between them; however, we regard the measurement account as the most parsimonious.

A measurement account (favoured here)—ceiling and range-restriction effects. The torture breadth index used here classified exposure into only three broad categories (psychological, physical, sexual violence), yielding a 4-point (0–3) composite on which 73.0% of participants scored at the maximum. This is a textbook ceiling effect: it compresses the observable range of the predictor and mechanically attenuates any true association with outcome variables, independent of whether a real exposure–symptom gradient exists. Given that Sehwail et al. (2025) examined an overlapping population and time period using a more granular exposure measure, the most parsimonious explanation for the divergence between the two studies is methodological: a coarser index in the present study likely obscured an exposure–symptom gradient that a more granular index was able to detect. We use the term torture breadth index rather than a cumulative exposure count precisely because a "cumulative" label would be imprecise given how the index was constructed: it counts only three broad categories (psychological, physical, sexual), it more accurately reflects the breadth of reported categories than a cumulative count of specific acts, their frequency, or their severity; and a participant exposed to one method within each of the three categories receives the same maximum score as one exposed to many acts within each. We therefore refer to this measure as a torture breadth index throughout, rather than as a cumulative exposure count, to reflect this limitation transparently. A table reporting the prevalence of specific torture methods within the subsample for whom detailed method-level data are available is in preparation and will be added in a subsequent revision once that data extraction is complete.

A substantive account (more speculative)— "homogenization of trauma." When traumatic exposure is close to universal and extreme (73.0% of participants experienced all three broad categories of torture assessed), individual-difference variables that typically moderate trauma outcomes (youth, social support, prior resilience) may lose predictive power because the carceral environment itself constitutes an overwhelming, largely undifferentiated risk factor. Under this account, the non-significant torture-exposure and duration effects would reflect a genuine psychological ceiling on distress reached by nearly all detainees regardless of the specific configuration of their exposure. This interpretation remains plausible but is harder to reconcile with the opposite pattern reported by Sehwail et al. (2025) than the measurement account is.

A cultural account—collective Sumud (steadfastness). A complementary, non-competing explanation draws on the concept of Palestinian Sumud as a collective, culturally embedded stance rather than a measurable individual trait (Marie et al., 2018; Hamamra, 2025). If resilience in this context operates primarily at the level of shared cultural and communal identity—rather than as a person-level characteristic that varies detectably between individuals—this could help explain why age, gender, and other individual-difference variables failed to differentiate outcomes in this sample. As with the homogenization account, this interpretation cannot be directly tested with the present cross-sectional, individual-level data and remains one candidate explanation among the others discussed here, rather than a confirmed finding.

We consider it important, for scientific transparency, not to over-claim theoretical novelty for either the homogenization or the Sumud account for a pattern that may be substantially attributable to measurement coarseness. Future replications using a more granular torture-exposure index (e.g., counting specific acts rather than broad categories) are needed before either substantive interpretation can be considered well supported.

The PTSD–Depression Association

Independent of the torture-exposure question, the regression-based analysis showed a strong statistical association between PTSD and depression symptom severity ($\beta = 0.22$, $p < .001$). This association is compatible with theoretical accounts in which PTSD- and depression-related symptoms may overlap or co-occur in the context of shared adversity. However, the cross-sectional design does not establish temporal ordering or a common underlying clinical construct. In addition, the PCL-5 negative cognition and mood domain has conceptual overlap with the PHQ-9, so the strength of the correlation should be interpreted cautiously and should not be taken as evidence that PTSD and depression constitute a single disorder or transdiagnostic response.

Clinically, the association supports integrated assessment and treatment planning for co-occurring PTSD and depressive symptoms. Whether improvement in one symptom domain produces improvement in the other requires prospective intervention research.

Limitations

Several limitations qualify these findings. As detailed in Sections 3.1 and 4.1, the originally reported exclusion rationale (attributing the reduction from N = 400 to N = 378 to incomplete or unmatched instrument data) was incorrect; the actual reasons were the presence of 14 participants under 18 years of age and 8 participants detained prior to the onset of the October 2023 war, both outside the stated inclusion criteria. This error, along with an inconsistent use of N = 400 versus N = 383 as the analytic denominator in different parts of the originally submitted manuscript, and a set of unresolved data-entry errors in recorded detention and release dates (affecting the reported mean detention duration), has been corrected throughout this revision following methodological review; all figures in this manuscript are now computed on a single, consistent N = 378 (or the relevant complete-case subset thereof, noted where applicable). First, the three-category torture-exposure index produced a pronounced ceiling effect (Section 5.2) that limits the interpretability of all analyses involving that variable. Second, the cross-sectional design limits interpretation to statistical associations; the analysis reported in Section 4.7 is a cross-sectional, regression-based analysis and should not be interpreted as establishing temporal ordering, mediation, or causation. Therefore, we describe the analysis using association-based terminology throughout this paper. Third, the sample was restricted to detainees who survived detention and were subsequently released or made available for interview. Individuals who died in custody, remain detained, or were too severely impaired to participate are not represented. This survivor bias almost certainly leads to an underestimation of the true severity and prevalence of psychological distress in the broader detainee population. Fourth, torture exposure was assessed through self-report without independent corroboration. Although self-report was necessary given the study context, this approach may have introduced recall bias and social-desirability bias, potentially affecting the accuracy of reported exposure experiences. Fifth, women constituted only 13.5% of the sample. Although this gender imbalance reflects the demographic composition of detention during the study period, it substantially limits statistical power for gender-based analyses and restricts the generalizability of findings to women detainees, who may have experienced distinct forms of violence (including higher rates of sexual violence) and different post-release trajectories. Future studies with deliberate oversampling of women are urgently needed. Sixth, no data were collected on post-release protective factors (social support, community reintegration, access to care), precluding any test of factors that might moderate long-term outcomes. Seventh, the complete-case analysis and exclusion of individuals with psychotic symptoms—necessary to ensure reliable self-report—may have excluded some of the most severely affected survivors, suggesting that the prevalence estimates reported here are likely conservative rather than inflated. Eighth, several variables plausibly relevant to psychological outcomes in this population were not measured and could not be included in the regression models: time elapsed since release, current exposure to violence and insecurity (particularly given the continuation of the war and blockade in Gaza), displacement and housing conditions, current socioeconomic circumstances, social support, bereavement (including number of relatives killed), physical injury and chronic pain, prior trauma history, and access to treatment. Given this, the near-total absence of significant demographic and exposure predictors in the regression models (Sections 4.6–4.8, $R^2 < .04$) is at least as plausibly attributable to this unmeasured variance and to the limited exposure measurement discussed in Section 5.2, as to the substantive "homogenisation of trauma" or collective Sumud accounts also discussed there; we present all three as non-exclusive candidate explanations rather than privileging the substantive accounts over the simpler measurement-based one.

Finally, no correction for multiple comparisons was applied, and no sensitivity analyses (e.g., excluding the zero-exposure subgroup, alternative severity cut-offs) were conducted (Section 3.4); the single significant demographic predictor (education, significant for all three outcomes) should be interpreted in that light, and formal sensitivity analyses are recommended for any future re-analysis of this dataset.

Generalisability

The generalisability (external validity) of these findings is bounded in several specific ways. Within the population of Palestinian detainees held during the October 2023 war, the sample should generalise reasonably well to released, surviving detainees who engage with rehabilitation centres, human-rights organisations, or community networks similar to those used for recruitment here; it is less clear how well it generalises to detainees who avoid such services, who remain in detention, or who did not survive detention (Section 5.4). The findings likely do not generalise well to women detainees specifically, given their small representation (13.5%) in this sample. Generalisability to other conflict-detention settings, other time periods of the same conflict, or other national/cultural contexts should be treated cautiously: the extremity and near-universality of torture exposure documented here (Section 4.1) may not characterise detention experiences elsewhere, and the null demographic and exposure findings (Sections 4.6–4.8) should not be assumed to generalise to settings with a wider range of exposure severity, where the ceiling-effect account offered in Section 5.2 would predict that individual-difference predictors could regain explanatory power.

The ongoing war and blockade as interview context

Data collection (late 2025–early 2026) took place while the war and blockade in Gaza were still ongoing, and this context bears directly on interpretation rather than being a peripheral caveat. First, ongoing insecurity, displacement, and restricted movement constrained the sampling frame itself: interviews were conducted where rehabilitation centres, human-rights organisations, and community networks could safely operate and reach participants, which likely under-represents detainees in the most heavily affected or inaccessible areas and over-represents those with the mobility, safety, and communication access needed to reach a data-collection site or complete a secure phone interview. Second, the active conflict is itself a concurrent, ongoing stressor rather than a historical one: participants' symptom reports reflect not only past detention experiences but also continuing exposure to bombardment, displacement, bereavement, and material deprivation at the time of assessment, so the elevated PHQ-9, GAD-7, and PCL-5 scores reported here cannot be attributed to detention-related trauma alone. This overlapping, cumulative stress burden plausibly contributes to the ceiling and range-restriction effects discussed in Section 5.2, since severe current-life adversity may elevate and compress symptom scores across the sample regardless of variation in detention or torture history. Third, the practical conditions of conflict-zone data collection—time pressure, interviewer and participant safety concerns, and infrastructure disruptions affecting phone-based interviews—may have constrained the depth or consistency of some interviews relative to what would be achievable in a more stable setting, though the standardised training and calibration protocol described in Section 3.3 was designed to mitigate this. Findings should therefore be interpreted as characterising this population under these specific, ongoing wartime conditions, not as an estimate of the psychological sequelae of detention and torture in isolation from concurrent conflict exposure.

Clinical and policy implications

The extremely high rate of comorbidity (50.81% above screening threshold on all three measures; 87.10% above threshold on at least one) supports integrated, trauma-informed clinical approaches over single-disorder treatment pathways. The strong PTSD–depression association (Section 5.3) is consistent with the potential value of trauma-focused interventions that address both symptom clusters. Evidence-based approaches such as culturally adapted Prolonged Exposure or Cognitive Processing Therapy warrant systematic evaluation in this population; however, the present observational design cannot establish treatment efficacy, and these suggestions should be read as directional rather than as tested clinical protocols.

At a policy level, the prevalence estimates reported here—markedly higher than pooled international benchmarks—constitute empirical documentation relevant to human rights advocacy and accountability processes, and support calls for substantially expanded, culturally adapted mental health services for detainee populations, with particular attention to the small but important subgroup of women detainees.

Future directions

We recommend four priorities for future research. First, replication with a more granular, higher-resolution torture-exposure index to directly test whether the dose–response relationship reported by Sehwail et al. (2025) is confirmed once the ceiling effect identified here is addressed. Second, longitudinal designs to track symptom trajectories, distinguish transient from chronic distress, and identify predictors of recovery. Third, the development of new, culturally adapted trauma and distress measures built specifically for the Palestinian detention context—rather

than relying solely on translated Western instruments—so that item content, response formats, and symptom framing better reflect local idioms of distress and the specific forms of harm documented in this population; standard psychometric validation (e.g., confirmatory factor analysis) should accompany the development of any such new or adapted instrument. Fourth, direct measurement of Complex PTSD using validated instruments (e.g., the International Trauma Questionnaire), given that the symptom profile described qualitatively in prior work (Hamamra, 2025) suggests C-PTSD may be more prevalent than PTSD alone. Latent profile or cluster-analytic approaches may also help identify whether meaningful subgroups exist within what the present cross-sectional data cannot distinguish from a homogeneous response pattern, and studies incorporating a non-detained comparison group would help disentangle the effects of detention specifically from the broader effects of wartime exposure.

Conclusion

This study provides robust descriptive evidence that Palestinian detention survivors, assessed while the October 2023 war and its associated displacement, bereavement, and material deprivation were still ongoing, reported high levels of depression, anxiety, and PTSD, with extensive comorbidity across all three conditions. These symptoms were observed in a context that included detention histories alongside continuing wartime conditions, rather than in a context in which detention could be evaluated in isolation. These findings are consistent with, and extend, a small but growing body of work on this specific detainee cohort. At the same time, the apparent independence of symptom severity from demographic and torture-exposure variables should be interpreted cautiously. While this pattern may reflect a genuine homogenization of psychological response under extreme and near-universal exposure, it is at least equally consistent with a ceiling effect produced by a coarse exposure measure, particularly given that a closely comparable study using a more granular measure (Sehwail et al., 2025) reported the opposite pattern. We regard this as an open empirical question rather than a settled finding. While the high prevalence and comorbidity are robust descriptive findings, the apparent independence of symptom severity from individual and exposure variables remains an open empirical question pending replication with higher-resolution exposure measures. Notwithstanding these caveats, the magnitude and consistency of psychological distress documented here—affecting the substantial majority of a sample of 378 survivors—constitutes meaningful evidence for the scale of mental health need in this population and for the urgency of integrated trauma-informed care, further longitudinal and psychometric research, and continued documentation relevant to human rights accountability processes.

Data availability statement

The de-identified dataset supporting the findings of this study is available from the corresponding author upon reasonable request. Data are not publicly available due to the sensitivity of the population and the risk of participant re-identification, consistent with the terms of approval by the Helsinki Committee for Scientific Research.

Declaration of generative AI and AI-assisted technologies

During the preparation of this manuscript, the authors used generative AI tools solely to assist with language editing and rephrasing. The AI tools were not used for data analysis, interpretation of results, or generation of scientific findings. The authors reviewed and edited all AI-assisted text and take full responsibility for the content of the manuscript.

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Torture and ill-treatment among former Belarusian political prisoners after 2020

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Key points of interest

- In this sample of emigrated former Belarusian political prisoners, respondents described torture and ill-treatment as a repeated experience, beginning at arrest and continuing through pre-trial detention, sentenced imprisonment, and the period after release.
- Psychological and degrading practices were central to respondents' account. Information isolation, separation from relatives, humiliation, denial of medical care, punitive isolation, and forced dependence on the prison administration were reported as part of the detention environment, not only as isolated incidents.
- Documentation, rehabilitation, and medico-legal assessment should include both physical and psychological forms of torture and ill-treatment and should also consider post-release insecurity and migration-related stressors when assessing former political prisoners in exile.

Abstract

Introduction: Political imprisonment is associated with long-term psychological harm, but evidence from Eastern and Central Europe, particularly Belarus, remains limited. After the 2020 post-election crackdown, many former Belarusian political prisoners left the country, yet their experiences of torture and ill-treatment have not been systematically described. *Methods:* We conducted a cross-sectional survey of 77 adult former Belarusian political prisoners who reported politically motivated criminal prosecution, detention or imprisonment, and subsequent emigration after release. The questionnaire covered detention history, physical and psychological violence and ill-treatment, suicidality in custody, subjective stressors, and perceived purposes of violence. Six semi-structured interviews were used to contextualise the survey findings. *Results:* Respondents completed the assessment a median of 11 months after emigration. Violence at arrest was reported by 85.7% of respondents. During imprisonment, with a median duration of 30 months, physical torture or ill-treatment was reported by 88.3% and psychological torture or ill-treatment by 98.6%; 54.8% endorsed ten or more psychological abuse categories. Punitive isolation was reported by 52.1%, suicidal thoughts in custody by 30.1%, self-harm by 12.3%, and suicide attempts by four respondents. Humiliation of the person (81.9%) and submission or suppression of the person (80.6%) were the most frequently endorsed perceived purposes of violence. *Discussion:* In this non-random sample of emigrated former political prisoners, respondents described a recurrent pattern of physical, psychological, and degrading abuse from arrest through imprisonment and after release. Psychological and degrading forms of ill-treatment were central to these reports. The findings support revised Istanbul Protocol-based assessment,

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documentation, and rehabilitation, with attention to both detention-related trauma and post-release insecurity.

Keywords: political imprisonment, torture, psychological torture, Belarus, Istanbul Protocol

Introduction

Political imprisonment is associated with long-term psychological harm. Studies of former political prisoners in Turkey, East Germany, and Romania have documented elevated levels of post-traumatic stress, depressive, anxiety, and dissociative symptoms years and sometimes decades after release (Başoğlu et al., 1994; Bauer et al., 1993; Bichescu et al., 2005; Maercker et al., 2000; Maercker & Schützwohl, 1997). Meta-analytic evidence from populations exposed to mass conflict and displacement likewise indicates that torture exposure is strongly associated with persistent adverse mental health outcomes (Steel et al., 2009). However, these outcomes cannot be understood only as the consequences of discrete violent episodes. In politically motivated detention, harm may also arise from the structure of the detention environment itself, including chronic uncertainty, enforced dependency, humiliation, isolation, and loss of control over basic bodily and social needs.

A central development in this literature has been the recognition that psychological forms of torture and ill-treatment may produce long-term consequences as severe as those associated with physical torture (Başoğlu et al., 2007). The revised Istanbul Protocol reflects this broader understanding by emphasising the documentation of both physical and psychological torture and other cruel, inhuman, or degrading treatment or punishment (United Nations, 2022). Conceptual work on torture has further highlighted the role of unpredictability, uncontrollability, and attacks on personal autonomy and identity as mechanisms through which detention practices may become psychologically destructive (Başoğlu, 2017; Pérez-Sales, 2016). Empirical studies, however, often report physical and psychological ill-treatment together, while their co-occurrence, cumulative burden, perceived purposes, and subjective meanings remain insufficiently described.

Within this literature, Eastern and Central Europe remain underrepresented. The most systematic work has come from the former German Democratic Republic, where former political prisoners showed high rates of trauma-related symptoms long after detention (Maercker et al., 2000, 2013; Maercker & Schützwohl, 1997). These studies used a checklist of persecution and maltreatment and documented both physical and psychological torture and ill-treatment. More recently, Maercker (2023) drew attention to the continuing psychological reverberations of collective and historical trauma across post-communist societies and noted that empirical evidence remains limited for most countries in the region.

Belarus represents a contemporary case of large-scale political repression involving detention, imprisonment, torture, and other forms of ill-treatment. Following the presidential election of August 2020, Belarusian authorities responded to mass protests with arbitrary detentions, torture, and other cruel treatment in custody, and politically motivated prosecutions targeting protesters, journalists, human rights defenders, and other civil society actors (United Nations Human Rights Council, 2025; Human Rights Watch, 2020). These cases were processed by a judiciary that international monitors do not regard as independent of the executive: political trials were marked by systemic fair-trial violations, including closed-door hearings, restricted access to defence counsel, the admission of statements reportedly obtained under duress, and verdicts widely regarded as predetermined. Repression did not end with the first post-election weeks. In the following months and years, politically motivated prosecutions and detention-related abuses continued, while a substantial wave of emigration emerged from Belarus (Kazakou & Thomas, 2025; United Nations Human Rights Council, 2025).

Despite the scale of these events, empirical research on the health consequences and lived experience of those affected remains limited. Javakhishvili et al. (2023) described the development of the Samopomoch digital mental health platform for people affected by political repression in Belarus, providing one of the first peer-reviewed accounts of the psychological needs generated by the post-2020 crackdown. Kazakou and Thomas (2025) documented persistent fear, trauma related to witnessed and experienced violence, and unmet need for psychological support among Belarusians in exile, but their sample represented the broader Belarusian diaspora rather than former political prisoners specifically. Korshunau (2024) examined collective trauma in Belarusian society after 2020 and described widespread traumatic exposure and ongoing retraumatisation at the societal level. Chulitskaya and Matonytė (2025) analysed the experiences of women incarcerated for political reasons in Belarus and documented physical discomfort, targeted humili-

ation, and psychological pressure. Taken together, these studies show that the psychological impact of the 2020 crackdown is substantial. However, they do not provide systematic data on the prevalence and patterning of torture and ill-treatment, perceived purposes of violence, or subjective stressors during imprisonment among former political prisoners.

This gap is important because the Belarusian context combines several factors associated with severe and persistent psychological harm: prolonged detention, cumulative exposure to multiple forms of physical and psychological abuse, restriction of contact with relatives, information isolation, denial of medical care, punitive isolation, and forced dependence on prison administration. These features make it necessary to describe not only separate acts of violence, but also the broader pattern through which detention conditions may produce coercion, humiliation, dependency, and loss of autonomy.

The aim of the present study was to describe the prevalence and patterns of physical and psychological torture and ill-treatment reported by former Belarusian political prisoners who had emigrated after release. The study also examined respondents' perceptions of the purposes of violence and the main subjective stressors during imprisonment. Survey findings were supplemented with selected narrative material from semi-structured interviews to clarify the meaning of quantitative patterns and preserve survivors' descriptions of detention conditions.

Methods

Study Design

This article reports a cross-sectional analysis of survey data from former Belarusian political prisoners, supplemented by semi-structured interviews used to contextualise and illustrate the quantitative findings. It includes only participants with experience of reportedly politically motivated deprivation of liberty in Belarus.

Definitions

Key terms are used as follows. Torture follows Article 1 of the United Nations Convention against Torture: the intentional infliction of severe physical or mental pain or suffering by, or with the consent or acquiescence of, a public official, for a purpose such as obtaining information or a confession, punishment, intimidation, coercion, or discrimination (United Nations, 1984). Ill-treatment refers to cruel, inhuman, or degrading treatment or punishment that is prohibited under the same Convention but does not meet all of the defining elements of torture, for example where the required severity or specific purpose is absent; following standard usage in the field, "torture and ill-treatment" is used as an umbrella term covering this range of acts. Adult denotes a person aged 18 years or older.

Solitary confinement follows the United Nations Standard Minimum Rules for the Treatment of Prisoners, the Nelson Mandela Rules: confinement for 22 hours or more per day without meaningful human contact, with more than 15 consecutive days regarded as prolonged solitary confinement (United Nations, 2015). In this study, it was operationalised as placement in a disciplinary punishment cell (shtrafnoi izolyator, ShIZO) or cell-type room (PKT). The survey did not separately capture non-disciplinary forms of single-cell confinement. Because the measured construct was disciplinary placement, the terms "solitary confinement" and "punitive isolation" are used interchangeably in this paper.

The detention settings referred to in this paper follow the structure of the post-Soviet penal system. A pre-trial detention centre (sledstvennyi izolyator, SIZO) holds people during investigation and trial. After sentencing, most terms are served in a correctional colony, a guarded compound in which prisoners live in shared, barracks-style accommodation and are normally assigned to work, with the regime graded by severity. A prison, by contrast, is a stricter, cell-based institution reserved for the most serious offences or used as a harsher regime. An open-type correctional institution operates a semi-open regime with fewer restrictions on movement.

Participants and recruitment

Eligible participants were adults who reported criminal prosecution on political grounds in Belarus, experience of detention or imprisonment, and subsequent migration from Belarus after release because of the risk of further persecution. Recruitment was conducted through networks connected with former political prisoners, Belarusian diaspora communities, civil society initiatives, and personal contacts. Invitations to participate were distributed online through private communication and community channels. Independent verification of each legal case was not attempted for security and feasibility reasons.

Survey and interview data were collected between 17 February and 31 May 2025. The dataset contained 77 eligible survey records from former Belarusian political prisoners who had migrated after release. Because invitations were distributed through civil society, diaspora, and private community channels, the number of people who received an invitation could not be determined, and a response rate could not be calculated. Because of the sensitivity of the topic and the practical difficulty of re-contacting respondents, partially completed questionnaires were retained. Analyses were therefore performed on an available-case basis, and the denominator is reported for each

variable. No formal sample size calculation was performed for this focused analysis; all eligible records available during the data-collection period were included.

Survey procedures and measures

Data were collected with a custom questionnaire developed in-house by the research team. It used a Laravel (PHP) backend, a React frontend, and a MySQL database, and ran on an Ubuntu server hosted locally and controlled by the research team, so that responses were not transmitted to or stored by any third-party provider. Individualised access links were distributed to participants through the Telegram messaging application. The broader study included several psychometric instruments. In the article, the analysis was limited to variables directly related to the experience of arrest, detention, imprisonment, and post-release migration. The full questionnaire, including the voluntary consent text, is provided in Supplementary File S2.

The survey sections used in this paper covered socio-demographic characteristics, educational level, time in emigration, duration of imprisonment, duration of pre-trial detention, time between release and emigration, violence at arrest, solitary confinement, physical and psychological violence or torture during detention, suicidal thoughts and self-harm in custody, perceived major stressors during imprisonment, and respondents' views on the purpose of violence. Several survey items also allowed free-text responses. These responses were used as short narrative illustrations of specific quantitative findings.

The physical and psychological torture and ill-treatment categories were compiled as a project-specific checklist that drew on the revised Istanbul Protocol framework and on prior research on political imprisonment (Maercker & Schützwohl, 1997; United Nations, 2022), with additional context-specific items reflecting the Belarusian penal setting. The categories were developed with input from psychiatrists, psychologists, and former political prisoners, and the questionnaire was pilot-tested for usability before launch; further detail is provided in the CHERRIES checklist (Eysenbach, 2004; Supplementary File S1).

Items on torture and ill-treatment were analysed as self-reported binary variables. Overall physical torture or ill-treatment and psychological torture or ill-treatment were coded as present when respondents endorsed at least one item in the corresponding block. The cumulative psychological abuse score was calculated as the number of psychological abuse categories endorsed. Subjective stressors were rated on a 0–5 scale, with ratings of 4 or 5 indicating high subjective severity. Perceived purposes of violence were analysed as multiple-response items.

To reduce reporting pressure, participants could skip questions and partially completed questionnaires were retained. Variable-specific denominators are reported throughout the Results. Interview material was used only to contextualise survey findings and was not used to estimate prevalence.

Interview procedures

To complement the survey material, six semi-structured interviews were conducted with former Belarusian political prisoners from the same population. Interviewees were invited personally, at the time the survey was distributed, to take part in an interview after completing the questionnaire; because the survey was anonymous, their interview participation could not be linked to any survey record, and it was not possible to confirm whether a given interviewee had completed the survey. The interviews were carried out by two qualified psychologists, both Belarusians living in emigration, with professional experience in post-traumatic stress and in supporting the adaptation of former political prisoners; as practising psychologists, they were bound by professional standards of confidentiality, and they had no prior personal acquaintance with the participants. Interviews were conducted online using Zoom, with cameras on so that the interviewer and participant could see each other, and were held in Russian or Belarusian according to the participant's preference; only the audio was recorded. Before each interview, participants received information about the aims of the study, the topics to be discussed, the voluntary nature of participation, and the possibility of pausing or stopping at any time, and verbal informed consent, including consent to audio recording, was obtained at the start of each session.

The interview guide focused on several predefined domains: access to information and contact with relatives during imprisonment, everyday living conditions and hygiene, access to medical care, interactions with prison administration, and perceived short-term and long-term consequences of detention. This structure allowed the interviews to follow a common framework while leaving room for participants to expand on issues they considered central.

Audio recordings were transcribed into text and checked against the recordings for accuracy. In this paper, the interviews were not used for formal qualitative coding or thematic analysis. Instead, selected quotations were used to provide context for the survey findings, clarify the meaning of particular quantitative patterns, and preserve the participants' own descriptions of detention conditions and their consequences. Quotations presented in this paper were translated from Russian or Belarusian into English by bilingual members of the research team.

Data security and ethical considerations

The survey was anonymous: it collected no names, contact details, or other directly identifying information. The access links were individualised and were sent to recipients personally, but they served only as random tokens that allowed a partly completed questionnaire to be resumed and prevented duplicate submissions; they did not record the recipient's identity. The survey platform stored data in a protected environment with restricted administrative access. Interview recordings and transcripts were stored separately from other study materials, and only authorised members of the research team had access to them.

The study was conducted in accordance with international ethical standards for research involving human participants. The study protocol and participant-safety procedures were reviewed by the Centre for Migration Studies at Adam Mickiewicz University in Poznań. Following detailed consultations with the research team, the Centre issued a positive ethics and safety opinion on 11 May 2025. Because the study addressed traumatic experiences, participants were informed in advance that they could skip any question or withdraw at any stage without consequences. The contact details of two psychologists were provided to every participant together with the survey link, so that anyone in distress could arrange an anonymous consultation directly. Because these consultations were anonymous, uptake was not recorded. Three participants who paused the questionnaire contacted the project manager through a messaging application to request a psychiatric consultation in addition to the psychological support, and these consultations were arranged.

Statistical analysis

The quantitative analysis in this paper was descriptive and exploratory. Categorical variables were summarised as counts and percentages. Continuous and ordinal variables were non-normally distributed and were summarised using the median and interquartile range (IQR), or range, as appropriate.

Comparisons between subgroups within the sample were performed according to the level and distribution of the data. Because several contingency-table cells had low frequencies, Fisher's exact test was used for categorical variables. For ordinal variables and for continuous variables that did not meet distributional assumptions, non-parametric rank-based tests were used, including the Mann-Whitney U test and the Kruskal-Wallis test. Statistical significance was defined as a two-sided p-value below 0.05. Item-level sex comparisons for physical and psychological abuse categories were exploratory, unadjusted for multiple comparisons, and interpreted as nominal findings. Because subgroup sizes were small, these comparisons should be read cautiously. Missing data were handled by available-case analysis. No imputation was performed. Variable-specific denominators are reported in the text and tables. Item-level missing data were minimal. The detailed questions on physical and psychological ill-treatment were presented only to respondents who reported experiencing each category (68 and 74 of 77, respectively), and all six stressor-severity items were completed by 73 of 77; among respondents who began a section, every item in it was answered. Across the 49 item-level variables used for the prevalence estimates (19 physical, 24 psychological, and 6 stressor items), 67 of 77 respondents (87.0%) had no missing responses, and the median number of missing items per respondent was 0 (range 0 to 49). The number of respondents without a response to a given item ranged from 3 to 9 (median 3 of 77). These gaps reflect the filter questions and a small number of respondents who did not complete later sections, rather than scattered item non-response. For the main prevalence estimates, 95% confidence intervals were calculated using the Wilson method.

For analyses involving multiple comparisons across individual stressor items, the Benjamini-Hochberg procedure was applied to control the false discovery rate. Differences in rated severity across the six predefined stressors were tested with the Friedman test; where this was significant, pairwise comparisons used the Wilcoxon signed-rank test with Holm correction.

All quantitative analyses were conducted in Jamovi, version 2.7.

Results

Sample characteristics

The analytic sample included 77 former Belarusian political prisoners who reported criminal prosecution on political grounds and migration from Belarus after release in order to avoid further persecution. Incomplete questionnaires were retained, and the denominator therefore varies across specific analyses.

Women made up 32.5% of the sample and men 67.5%. The median age was 37 years (IQR 33 to 45). Most respondents had higher education (63.6%), while 33.8% had secondary education and 2.6% had basic education. The median time spent in emigration was 11 months (IQR 6 to 21), the median duration of imprisonment was 30 months (IQR 24 to 36), the median duration of pre-trial detention was 12 months (IQR 5 to 25), and the median time between release and emigration was 3 months (IQR 0 to 5). Three-quarters of respondents had left Belarus within five months after release. Participants completed the survey a median of 14 months after release (IQR 8.5–26) and 11 months after emigration (IQR 6–21).

***Table 1**. Sample characteristics*

Characteristic	n (%) or median (IQR)	Range, n
Sex		n=77
Women	25 (32.47%)	
Men	52 (67.53%)	
Age, years	37.0 (33–45)	21–69; n=77
Education		n=77
Higher	49 (63.64%)	
Secondary	26 (33.77%)	
Basic	2 (2.6%)	
Migration and detention history		
Time in emigration, months	11 (6–21)	0–50; n=76
Duration of imprisonment, months	30.0 (24–36)	0–138; n=77
Time in pre-trial detention, months	12 (5–25)	1–60; n=73
Time from release to emigration, months	3.0 (0–5)	0–43; n=74
Time from release to assessment	14.0 (8.5–26)	1–52; n=75

Note. IQR, interquartile range.

Arrest and pre-trial detention

Violence at the time of arrest was reported by 66 of 77 respondents (85.7%, 95% CI 76.2–91.8). Solitary confinement during pre-trial detention was reported by 17 of 66 respondents, or 25.8%. Release immediately after trial, with time in pre-trial detention counted towards the sentence, was reported by 10 of 69 respondents, or 14.5%. No sex differences were found for violence at arrest or pre-trial solitary confinement in the current dataset.

> "During the arrest, pump-action shotguns with rubber pellets were used; they kicked me and used an electric shock device. They sprayed tear gas in my face." (Respondent 41)

The subjective predictability of arrest varied. Forty per cent of respondents described the arrest as unexpected to at least some degree. When free-text responses were grouped into three categories, 26.7% described the arrest as completely unexpected, 45.3% said they had considered it possible, and 28.0% said they had expected it. Thus, for most respondents, the arrest was at least partly unexpected. Women (48%) more often described the arrest as completely unexpected than men (17%), whereas men (52%) compared to women (30%) more often fell into the intermediate category (Kruskal-Wallis $\chi^2 = 4.457$, $p = 0.0348$).

> "I did not expect that they might come for me... When they came, I was shaking inside from fear and worry for my daughter. I understood that I would not return home that day and that my life had now been turned upside down forever." (Respondent 68)

Narrative responses described both abrupt detention and longer periods of anticipation. Some participants wrote that they had understood the political risks but still had not expected the degree of violence used during arrest. Others described an immediate sense that ordinary life had ended at the moment of detention.

Imprisonment and solitary confinement

The median time spent in detention or imprisonment was 30 months. Men had longer terms than women, with median values of 34 and 24 months, respectively ($p = 0.043$). Respondents reported experience of different forms of deprivation of liberty, including pre-trial detention centres, colonies, prisons, open-type institutions, and release directly after trial. Because some respondents passed through more than one institution, the denominators differ across analyses of detention conditions.

Among respondents with experience of a colony, 18 of 35, or 51.4%, had been placed in solitary isolation at least once. This was more frequent among men than women, 64.0% versus 20.0% ($p = 0.027$, Fisher's exact test). The median cumulative duration of solitary confinement in a colony was 13 days, although one respondent reported 360 days and all others were below 66 days. Among respondents with experience of prison, 11 of 32 (34.4%) reported solitary confinement. In that subgroup, the median duration of solitary confinement was 20 days, with a range from 7 to 170 days. Across all forms of custodial punishment, 38 of 73 (52.1%, 95% CI 40.8–63.1) respondents reported at least one period of punitive isolation.

Interview narratives were consistent with these reports. One former political prisoner described the regime for political detainees as separate from that of others in custody, with different rules for movement, food, and disciplinary measures.

Another described the administration as openly prejudiced from the institution's first days.

Physical torture and ill-treatment

Of the 77 respondents who answered questions on detention conditions, 68 (88.3%, 95% CI 79.3–93.7) reported at least one form of physical torture or physical ill-treatment during imprisonment. The most frequent categories were forced stripping and humiliating procedures, reported by 49 respondents (72.1%);

> "Complete undressing and displaying my underwear happened to me hundreds of times... it was recorded by a surveillance camera... during court hearings this was a 'group' undressing." (Respondent 70)

forced painful or unnatural positions, reported by 34 (50.0%);

> "Movement through the temporary detention facility for 'political' criminal detainees was in the 'swallow' position, as low as possible, without raising the head. In correc-

***Table 2**. Physical torture and physical ill-treatment during detention*

No	Type of violence/ill-treatment	Total, n=68, n (%)	Women, n=20, n (%)	Men, n=48, n (%)	p
1	Single beating	30 (44.1%)	8 (40%)	22 (45.8%)	0.790
2	Beating by one person	6 (8.8%)	1 (5%)	5 (10.4%)	0.662
3	Repeated or systematic beating	2 (2.9%)	0	2 (4.2%)	1.000
4	Beating by a group of persons	13 (19.1%)	0 (0%)	13 (27.1%)	0.007
5	Forced stripping and humiliating acts	49 (72.1%)	18 (90%)	31 (64.6%)	0.040
6	Forced labour in dangerous conditions	17 (25%)	4 (20%)	13 (27%)	0.760
7	Forced painful or unnatural positions	34 (50%)	11 (55%)	23 (47.9%)	0.791
8	Torture with electric devices	8 (11.8%)	3 (15%)	5 (10.4%)	0.685
9	Strangulation	8 (11.8%)	2 (10%)	6 (12.5%)	1.000
10	Injury with sharp, stabbing, or firearm weapons	1 (1.5%)	0	1 (2.1%)	1.000
11	Medical or dental torture	4 (5.9%)	1 (5%)	3 (6.3%)	1.000
12	Burns caused by hot or chemical agents	1 (1.5%)	0	1 (2.1%)	1.000
13	Sexual violence	1 (1.5%)	1 (5%)	0	0.294
14	Pharmacological abuse	3 (4.4%)	1 (5%)	2 (4.2%)	1.000
15	Cell without heating in winter	5 (7.4%)	2 (10%)	3 (6.3%)	0.627
16	Torture involving animals	4 (5.9%)	3 (15%)	1 (2.1%)	0.073
17	Suspension	0	0	0	—
18	Extraction of nails or hair; mutilation	0	0	0	—
19	Other	11 (16.2%)	1 (5%)	10 (20.8%)	0.155

Note. Denominators in this table refer to respondents who reported at least one form of physical torture or physical ill-treatment. P values are from item-level sex comparisons using Fisher's exact test. Suspension and extraction of nails or hair were offered as response categories but were endorsed by no respondent; no significance test was performed for these items (—).

tional colony No. 1, during quarantine, most of the day had to be spent standing in formation; afterwards your legs and back were killing you." (Respondent 44)

and single or repeated beatings, with the most common beating category reported by 30 respondents (44.1%).

Forced labour in dangerous conditions was reported by 17 respondents (25.0%).

"Carrying tons of snow in any weather and after the bathhouse with wet hair, breaking ice, unloading tons of vegetables, working in inhuman conditions at the factory: in summer the air temperature at the workplace was over 30 degrees... the ventilation barely works, it is also very dusty, and there is no possibility to wash after work." (Respondent 54)

The questionnaire distinguished forms of beating along two dimensions: "single beating" and "repeated or systematic beating" refer to an isolated versus a recurring episode, whereas "beating by one person" and "beating by a group of persons" refer to the number of perpetrators. "Medical or dental torture" denotes the use of medical or dental procedures to inflict pain, such as punitive tooth extraction, and "pharmacological abuse" the forced administration of drugs or other substances. Full item wording is provided in Supplementary File S2.

Less frequent but still documented forms included electric shocks, strangulation, medico-dental abuse, sexual violence, pharmacological abuse, cold cells in winter, and use of animals.

"Several times in the punishment cell they set a dog on you so that it could almost jump onto you." (Respondent 98)

Two sex differences reached nominal statistical significance in this block. Beating by a group was reported only by men (27.1% of men vs 0% of women, $p = 0.007$). Forced stripping and humiliating procedures were more frequent among women than men (90.0% vs 64.6%, $p = 0.040$). Other differences were not statistically significant.

The interview material helps to clarify what some of these categories meant in practice. One participant described repeated humiliation through forced undressing and squatting in front of prison staff and other detainees. Another described quarantine in the colony in simple terms: "they did not let us wash at all."

Psychological torture and ill-treatment

Psychological torture or psychological ill-treatment was even more widespread. Among 74 respondents who answered this block, 73 (98.6%, 95% CI 92.7–99.8) reported at least one such experience. The most frequent forms were constant artificial light in the cell, reported by 59 respondents (79.7%); extreme conditions such as heat, cold, or darkness, reported by 49 (66.2%);

"Placement in cells heavily infested with bedbugs... confinement in rooms with poor access to oxygen. Holding large numbers of people in small rooms. Delayed provision of medical care. Refusals to allow showers at the scheduled time... Sleeping on bare boards. Being held in unsanitary conditions..." (Respondent 24)

Refusal of medical care, reported by 48 (64.9%);

"Constantly, neither in the temporary detention facility, nor in the pre-trial detention centre, nor in the colony was medical care provided. To get a painkiller, one had to endure humiliation." (Respondent 54)

insults, reported by 45 (60.8%); sleep deprivation, reported by 44 (59.5%); rodents in cells, also reported by 44 (59.5%); overcrowded cells, reported by 41 (55.4%); restricted contact and access to information, reported by 41 (55.4%);

"In the Centre for the Isolation of Offenders and in the temporary detention facility, there was complete information isolation. In the 'political' cells there were no books, no crosswords, nothing at all to occupy the mind. We read the labels on one another's clothes, and that was a pleasure." (Respondent 44)

and threats of killing or other violence, reported by 40 (54.1%).

"OSAM [special active measures service] officers threatened to put my mother and wife in prison and said that the children would be 'raised by the state'. They justified this by saying that now they were allowed to do anything." (Respondent 26)

The accumulation of psychological abuse was substantial. Among the 73 respondents who reported at least one such form, the average number of categories endorsed was 10. Three or more forms were reported by 91.8%, five or more by

***Table 3**. Psychological torture and psychological ill-treatment during detention*

No.	Type of violence/ill-treatment	Total, n=74, n (%)	Women, n=23, n (%)	Men, n=51, n (%)	p
1	Mock execution	1 (1.35%)	0	1 (1.96%)	1.000
2	Sensory deprivation	5 (6.76%)	2 (8.7%)	3 (5.88%)	0.643
3	Sounds of torture or screams of other people	15 (20.27%)	3 (13.04%)	12 (23.53%)	0.365
4	Constant sound exposure (noise, loud music, etc.)	30 (40.54%)	10 (43.48%)	20 (39.22%)	0.801
5	Cell without access to daylight	42 (56.76%)	12 (52.17%)	30 (58.82%)	0.621
6	Cell with constant artificial light	59 (79.73%)	18 (78.26%)	41 (80.39%)	1.000
7	Restriction of contact and access to information	41 (55.41%)	15 (65.22%)	26 (50.98%)	0.316
8	Prohibition on toilet or shower use	23 (31.08%)	9 (39.13%)	14 (27.45%)	0.416
9	Absence of personal hygiene items	29 (39.19%)	13 (56.52%)	16 (31.37%)	0.070
10	Solitary confinement	28 (37.84%)	6 (26.09%)	22 (43.14%)	0.201
11	Overcrowded cell	41 (55.41%)	9 (39.13%)	32 (62.75%)	0.078
12	Cell with rodents	44 (59.46%)	14 (60.87%)	30 (58.82%)	1.000
13	Sleep deprivation	44 (59.46%)	14 (60.87%)	30 (58.82%)	1.000
14	Sleeping in shifts	25 (33.78%)	4 (17.39%)	21 (41.18%)	0.063
15	Extreme detention conditions (heat, cold, darkness)	49 (66.22%)	14 (60.87%)	35 (68.63%)	0.598
16	Hunger or thirst	19 (25.68%)	7 (30.43%)	12 (23.53%)	0.572
17	Refusal of medical care	48 (64.86%)	13 (56.52%)	35 (68.63%)	0.430
18	Threats (killing, violence, reprisals, etc.)	40 (54.05%)	11 (47.83%)	29 (56.86%)	0.615
19	Insults	45 (60.81%)	16 (69.57%)	29 (56.86%)	0.441
20	Witnessing physical violence against others in custody	30 (40.54%)	11 (47.83%)	19 (37.25%)	0.448
21	Witnessing psychological violence against others in custody	8 (10.81%)	4 (17.39%)	4 (7.84%)	0.245
22	Hearing others in custody subjected to physical violence	36 (48.65%)	11 (47.83%)	25 (49.02%)	1.000
23	Hearing others in custody subjected to psychological violence	12 (16.22%)	7 (30.43%)	5 (9.8%)	0.040
24	Other	10 (13.51%)	3 (13.04%)	7 (13.73%)	1.000

Note. Denominators in this table refer to respondents who answered the psychological violence block. p-values are from sex comparisons using Fisher's exact test. "Prohibition on toilet or shower use" records reported denial of access to a toilet or shower and does not distinguish complete prohibition from severe restriction. Full item wording is provided in Supplementary File S2.

80.8%, and ten or more by 40 of 73 respondents (54.8%, 95% CI 43.4–65.7). The most frequently reported forms were a cell with constant artificial light (79.7%), extreme conditions of detention such as heat, cold, or darkness (66.2%), refusal of medical care (64.9%), and insults (60.8%). Psychological abuse was therefore typically reported as a cluster of co-occurring practices rather than a single exposure. Sex differences were limited. Hearing others in custody subjected to psychological violence was also more frequent among women (30.4% vs 9.8%, $p = 0.040$). Other item-level differences, including absence of personal hygiene items (56.5% of women vs 31.4% of men, $p = 0.070$) and sleeping in shifts (41.2% of men vs 17.4% of women, $p = 0.063$), did not reach statistical significance.

Interview accounts matched this pattern. One former political prisoner said that political detainees were cut off from independent information, that letters were delayed or blocked, and that only state television and official news were available. Another described the logic of medical treatment for political prisoners in blunt terms: "not to treat them."

Suicidal thoughts, self-harm, and suicide attempts in custody

Suicidal thoughts during detention were reported by 22 of 73 respondents (30.1%, 95% CI 20.8–41.4). They were most often reported in pre-trial detention, where 11 of 73 respondents, or 15.1%, indicated such thoughts. Self-harm was reported by 9 of 73 respondents (12.3%, 95% CI 6.6–21.8). The forms described included wrist cutting, one overdose of psychotropic medication, a dry hunger strike, and one severe case requiring hospital treatment and surgical suturing of the wound. Self-harm was evenly distributed across pre-trial detention, colony, and prison settings, with three cases in each. No such cases were reported in temporary detention facilities or open-type institutions. Four respondents reported suicide attempts (5.5%, 95% CI 2.2–13.3). Two occurred in pre-trial detention and involved cutting veins or medication overdose; one occurred in punitive isolation; and one occurred in prison and involved first a dry hunger strike and then cutting veins.

One interviewee linked the special handling of medication to a prior suicide-related classification and described the episode as part of a wider protest against abuse in detention. Another interviewee described persistent sleep disturbance after release, stating that he still slept only three to four hours per night. These accounts do not quantify long-term outcomes, but they help explain how suicidality, loss of control, and chronic sleep disruption were experienced by respondents.

Subjective stressors during imprisonment

Seventy-three of 77 respondents completed the question on the most important stressors of imprisonment. Each of the six predefined stressors was rated on a scale from 0 to 5. Loneliness and separation from relatives received the highest ratings (median 5.0), rated 4 or 5 by 54 of 73 respondents (74.0%, 95% CI 62.9–82.7). Conditions of detention (median 4.0, rated 4–5 by 61.6%) and psychological pressure, including humiliation, isolation, and threats to family members (median 4.0, rated 4–5 by 58.9%), followed. Lack of information about court proceedings or sentence length, lack of food, water, sleep, and medical care, and physical violence or threats were rated as somewhat less severe (median 3.0 for each), rated 4–5 by 43.8%, 34.2%, and 35.6% of respondents, respectively.

These severity differences were statistically reliable overall (Friedman $\chi^2(5) = 52.0$, $p < 0.001$), although the effect was small (Kendall's $W = 0.14$). After Holm correction, the three highest-rated stressors (loneliness and separation, conditions of detention, and psychological pressure) did not differ reliably from one another. Each showed higher rank-based severity than physical violence or threats and than lack of food, water, sleep, and medical care.

Subgroup comparisons of stressor severity were exploratory and underpowered; none of the 36 comparisons for individual stressors remained significant after correction.

***Table 4**. Subjective severity of major stressors during imprisonment*

Stressor	N	Median	Range	Rated 4–5, %
Loneliness/separation from relatives	73	5.0	0–5	74.0%
Conditions of detention	73	4.0	0–5	61.6%
Psychological pressure	73	4.0	0–5	58.9%
Lack of information about court proceedings/sentence length	73	3.0	0–5	43.8%
Lack of food, water, sleep, and medical care	73	3.0	0–5	34.2%
Physical violence or threats	73	3.0	0–5	35.6%

Note. Stressors were rated on a 0–5 scale.

The interview material is consistent with the prominence of separation, uncertainty, and restricted communication. One participant described the prison environment as a "full vacuum," with staff repeatedly telling detainees that they had been forgotten and that nobody cared about them. Another said that after release he still felt compelled to monitor whether close relatives had recently been online, because delayed letters in custody had left him with a constant fear that something had happened to them.

Perceived purposes of violence

Seventy-two respondents answered the question on the perceived purpose of physical or psychological violence. The median number of endorsed purposes was 7 (IQR 5–8, range 1 to 9), which suggests that violence was usually perceived as serving several functions at the same time rather than a single immediate aim. The most frequently endorsed purposes were humiliation (59 of 72 respondents, 81.9%, 95% CI 71.5–89.1) and submission or suppression of the person (58 of 72 respondents, 80.6%, 95% CI 70.0–88.0). They were followed by sadistic motives of perpetrators (65.3%), political views (63.9%), ideological views (59.7%), and extraction of guilt confession (58.3%). Obtaining information about another person or event was endorsed by 45.8%, and forcing cooperation by 34.7%. Financial extortion, ethnic discrimination, religious views, social status, and sexual orientation were each reported rarely.

Taken together, these responses indicate that respondents usually understood violence in custody not only as a way to obtain testimony or compliance in a narrow procedural sense, but also as a means of humiliation, domination, and destruction of personal identity. This interpretation also appeared in the interviews, where participants repeatedly described the prison regime as built around degradation, separation, and demonstrative inequality between political and non-political detainees.

***Table 5**. Perceived purposes of violence and torture*

Perceived purpose	n=72	%
Humiliation of the person	59	81.9
Submission/suppression of the person	58	80.6
Sadistic motives of perpetrators	47	65.3
Political views	46	63.9
Ideological views	43	59.7
Confession of guilt	42	58.3
Confession to a crime not committed	35	48.6
Obtaining information about another person/event	33	45.8
Nature of the alleged offence	26	36.1
Coercion to cooperate	25	34.7
Plea bargain/cooperation deal	19	26.4
Discrimination by social status	3	4.2
Ethnic discrimination	3	4.2
Extortion of money/property	2	2.8
Religious beliefs	2	2.8
Sexual orientation	2	2.8

Discussion

This study documents a systematic pattern of ill-treatment that began at arrest, continued throughout custody, and remained relevant after release and emigration. A distinctive feature of this study is that the assessments took place relatively early (11 months) after the participants left the country, which makes the study unique. Violence at arrest was reported by 85.7% of respondents. During imprisonment, 88.3% reported at least one form of physical torture or physical ill-treatment, and 98.6% reported at least one form of psychological torture or psychological ill-treatment. More than half of respondents reported at least one period of punitive isolation. The median duration of imprisonment was 30 months, after which most respondents left Belarus within a few months. In this sample of former political prisoners who had emigrated, these findings are consistent with an institutionalised pattern of repression in which politically motivated imprisonment and forced migration formed successive stages of the same exposure trajectory.

The reported forms of physical abuse correspond to global data on torture methods. A recent systematic review and meta-analysis of 266 studies, including 103,604 individuals from 105 countries, found that a limited number of methods accounted for most reported physical torture. Beating or blunt-force trauma was the most frequent method, followed by electrical torture and starvation or dehydration (Milewski et al., 2023). In the present sample, beatings, forced painful positions, electric shocks, strangulation, exposure to extreme temperatures, and deprivation of food, sleep, medical care, or hygiene were all reported. These methods were not unique to Belarus. They correspond to well-described global forms of custodial abuse, used here in a politically repressive penitentiary setting.

The most prominent feature of the present findings, however, is the breadth of psychological and degrading forms of abuse. Psychological torture or ill-treatment was reported by nearly all respondents, and more than half of those affected endorsed ten or more categories. Constant artificial light, extreme conditions, refusal of medical care, insults, sleep deprivation, overcrowding, restricted communication, threats, and exposure to violence against others were each reported by more than half of respondents who answered this block. The pattern is consistent with the revised Istanbul Protocol, which treats psychological methods and degrading treatment as central elements of torture documentation and directs investigators to assess detention conditions, access to family and lawyers, medical care, solitary confinement, sensory conditions, bright lights, sleep deprivation, humiliation, guilt, and shame (United Nations, 2022).

Evidence indicates that psychological and so-called nonphysical forms of abuse may have consequences comparable to those of physical torture. Başoğlu and colleagues, in a study of survivors from the former Yugoslavia, found substantial overlap between physical torture and nonphysical stressors such as psychological manipulation, humiliating treatment, aversive environmental conditions, forced positions, isolation, threats to self or family, witnessing torture of others, sleep deprivation, and deprivation of bodily functions. Their data supported a model in which perceived distress and uncontrollability, rather than physical pain alone, contribute to long-term psychological consequences (Başoğlu et al., 2007). Conceptual work has developed this framework further, focusing on unpredictability, loss of autonomy, and attacks on identity as mechanisms through which detention practices become psychologically destructive (Başoğlu, 2017; Pérez-Sales, 2016). The present findings provide a contemporary example in political imprisonment: violence was embedded in a detention environment that repeatedly reduced predictability, autonomy, and social connection.

The highest-rated stressors were relational and psychological: loneliness and separation from relatives, conditions of detention, and psychological pressure. These three did not differ reliably from one another, and each was rated more severe than physical violence or threats, which ranked below the three highest-rated relational and psychological stressors in the within-subject comparison. This does not mean that physical violence was less serious. It indicates that respondents experienced the greatest burden as cumulative and relational: separation, uncertainty, blocked communication, inability to know whether relatives were safe, and loss of control over basic information. Several other factors, none of which can be directly examined in this dataset, may also contribute to this pattern. The rating reflected how distressing each experience was felt to be, rather than the objective gravity of the act, so a form of violence could be regarded as deeply serious yet still rated lower in subjective distress. The relational stressors were also largely continuous, persisting throughout detention, whereas physical violence was typically episodic, and a severity rating tends to integrate both intensity and duration, giving sustained stressors greater subjective weight. Some respondents may in addition have normalised or minimised physical violence after prolonged detention, although the same pattern is equally consistent with coping and resilience, or with a shift over time in how different stressors are appraised. Whichever process applies, assessment focused mainly on overt physical violence may underestimate the burden of harm in this population.

A specific psychological mechanism relevant to these findings is mental defeat. In former East German political prisoners, Ehlers, Maercker, and Boos identified mental defeat, alienation, and perceived permanent change as cognitive correlates of PTSD long after release (Ehlers et al., 2000). Mental defeat refers to the perceived loss of psychological autonomy during captivity. Several practices reported in the present study are compatible with this mechanism: forced naked squats in front of staff and detainees, repeated degrading body searches, public undressing during transfers, dependence on staff for water, food, hygiene, medical care, and contact with relatives. Literature on humiliation as a component of torture also emphasises shame, degradation, and loss of dignity as potential sources of lasting psychological injury (Vorbrüggen & Baer, 2007). These concepts help explain why respondents most often identified humiliation and submission or suppression of the person as the perceived purposes of violence.

The data on perceived purposes of violence reinforce this interpretation. Humiliation was endorsed by 81.9% of respondents, and submission or suppression of the person by 80.6%. These were more frequent than confession of guilt, extraction of information, or coercion to cooperate. This distinction matters. Torture is often imagined primarily as an interrogation method. In this sample, respondents more often described violence as a disciplinary and identity-destroying practice. It marked political prisoners as a separate and inferior category, demonstrated administrative power, and made ordinary needs dependent on institutional discretion. This reading is consistent with the UN Group of Independent Experts on the Situation of Human Rights in Belarus, which reported that people detained on politically motivated grounds were subjected to a separate and harsher regime intended to punish and humiliate them (United Nations Human Rights Council, 2025).

The Belarusian findings sit within the broader literature on political imprisonment. A systematic review of political imprisonment and mental health found that former political prisoners commonly experience PTSD, depression, anxiety, somatic complaints, dissociation, and substance misuse, while the literature on political imprisonment remains smaller than the literature on refugees, prisoners of war, or survivors of mass violence (Willis et al., 2015). Studies from post-communist Europe provide the closest historical comparison. Former Romanian political detainees of the Ceaușescu era showed high lifetime and current PTSD, with common exposure to forced standing, threats, starvation, solitary confinement, beatings, sleep deprivation, overcrowding, labour camps, extreme temperatures, and witnessing torture (Bichescu et al., 2005). Studies of former East German political prisoners found elevated PTSD, dissociation, and anxiety disorders decades after release (Maercker et al., 2000; Maercker & Schützwohl, 1997). In the same population, four long-term trajectories were later identified: chronic PTSD (36%), resilient course (27%), recovered course (26%), and delayed-onset PTSD (11%) (Maercker et al., 2013). This is relevant for the present cohort because respondents were assessed much closer to release and migration. The current data therefore describe an early phase of a process that may later follow different trajectories rather than a single uniform course.

Cumulative exposure is likely to matter. In this sample, respondents reported a median of ten categories of psychological abuse, and 54.8% endorsed ten or more. This is consistent with the dose-response pattern identified in refugee and post-conflict populations, where torture and the number of potentially traumatic events are associated with higher risk of PTSD and depression (Steel et al., 2009). In treatment-seeking refugee samples, high cumulative trauma exposure is also associated with complex PTSD profiles, including disturbances in self-organisation (Liddell et al., 2019). The present article did not analyse PTSD or complex PTSD outcomes. However, the breadth of reported exposure suggests that future analyses of this cohort should include ICD-11 PTSD and complex PTSD, not only DSM-based PTSD measures.

Punitive isolation is a separate concern. Across all forms of custodial punishment, 52.1% of respondents reported at least one period of punitive isolation. Among respondents with colony experience this was 51.4%, and among those with prison experience it was 34.4%. Reported durations included episodes exceeding the threshold recognised in international standards as prolonged solitary confinement. The Nelson Mandela Rules prohibit indefinite and prolonged solitary confinement, placement in a dark or constantly lit cell, corporal punishment, reduction of food or drinking water, and collective punishment (United Nations, 2015). The Istanbul Protocol also directs that health professionals must not participate in disciplinary sanctions or restrictive measures such as solitary confinement of 15 consecutive days or more, dark or constantly lit cells, and reduction of food or water (United Nations, 2022). The present data therefore describe not only a severe stressor, but also practices that violate these international minimum standards for the treatment of prisoners.

Research on solitary confinement supports treating these findings as clinically significant. A systematic review and meta-analysis found that solitary confinement is associated with adverse psychological effects, self-harm, and mortality, especially suicide (Luigi et al., 2020). Another meta-analysis of self-harm in prison identified solitary confinement as one of the strongest prison-specific environmental risk factors (odds ratio 5.6, 95% CI 2.7–11.6; Favril et al., 2020). Most of this evidence comes from high-income countries, and the prevalence and pattern of self-harm and suicidal behaviour in custody vary considerably across national settings (Aon et al., 2025). In the present study, suicidal thoughts during detention were reported by 30.1% of respondents, self-harm by 12.3%, and four respondents reported suicide attempts. The study design does not allow causal attribution to solitary confinement or to any other single exposure. Nevertheless, the co-occurrence of punitive isolation, sleep deprivation, humiliation, medical neglect, restricted communication, and suicidality is consistent with a high-risk custodial environment.

Medical neglect was another major finding. Refusal of medical care was reported by 64.9% of respondents in the psychological abuse block. Free-text responses described delayed or denied treatment, lack of dental care, inadequate pain relief, and dependence on staff discretion for access to medication. In detention, inadequate medical care is not only a service failure. Under some circumstances, intentional or discriminatory denial of care may constitute cruel, inhuman, or degrading treatment and may contribute to torture. The role of medical staff is therefore important. The Istanbul Protocol emphasises duties of beneficence, non-maleficence, autonomy, confidentiality, and documentation of torture or ill-treatment, and notes that health professionals employed by the state may face pressure to ignore or misrepresent evidence of abuse (United Nations, 2022). The present findings show why post-release medical documentation is needed, especially when prison medical records are unavailable, incomplete, or not trusted.

External sources on Belarus are consistent with the patterns reported by respondents. The UN Group of Independent Experts reported continued arbitrary arrests and detentions,

often accompanied by torture or ill-treatment, as a method of silencing dissent (United Nations Human Rights Council, 2025). The 2026 EUAA country-of-origin report summarises evidence on inhumane detention conditions, torture and ill-treatment, lack of hygiene and healthcare, overcrowding, inadequate food and clothing, forced labour, restrictions on correspondence and parcels, yellow badges, prolonged isolation, incommunicado detention, and punishment cells for political prisoners (European Union Agency for Asylum, 2026). Human Rights Watch similarly reported continued torture and ill-treatment of political prisoners in Belarus in its 2026 World Report (Human Rights Watch, 2026).

At the same time, the present data should not be read as implying that abuse in Belarusian detention is limited to political prisoners. International work on detention has emphasised that torture and ill-treatment can affect a wide range of detainees, including ordinary criminal suspects and pre-trial detainees (Open Society Justice Initiative, 2011). Beyond the forms of violence documented here, political prisoners in Belarus are also subject to formal markers of political status, such as assignment of yellow labels identifying them as political detainees (European Union Agency for Asylum, 2026), separate movement rules, tighter restrictions on contact, harsher disciplinary sanctions, ideological pressure, and denial of privileges. The methods themselves were not entirely unique. Their political framing and selective application are what made the experience distinctive.

The sequence of imprisonment followed by rapid migration is another defining feature of this cohort. The median time from release to emigration was three months, and three quarters of respondents left Belarus within five months. Release therefore did not necessarily mean restoration of safety. The EUAA report describes continuing supervision of former political prisoners who remain in Belarus, including regular police reporting, home confinement during night hours, permission requirements for leaving one's district, police visits, risk of new charges, employment barriers, and pressure to leave the country (European Union Agency for Asylum, 2026). This helps explain why post-release migration should be treated as part of the exposure sequence rather than as a separate event. Research on forced displacement shows that post-migration stressors contribute to mental health outcomes independently of pre-migration trauma (Porter & Haslam, 2005), and more recent work in resettled refugees confirms the relevance of financial strain, host-country demands, and coping resources for mental health and well-being (Solberg et al., 2023). Former Belarusian political prisoners may therefore need support that addresses both detention-related trauma and post-migration stressors. The study captured the timing of migration rather than its lived experience, and framing it as a continuation of the same exposure trajectory is therefore a conceptual reading, drawn from external evidence.

Several sex-related findings require cautious interpretation. Men had longer terms of imprisonment, more frequent punitive isolation in colonies, and more frequent reports of beating by groups. Women more often described arrest as completely unexpected, more often reported forced stripping, more often described hearing others in custody subjected to psychological violence. These findings are plausible in light of differential conditions in male and female facilities and prior research on incarcerated women in Belarus (Chulitskaya & Matonytė, 2025). They also fit international guidance that detention-related ill-treatment may have gendered forms and may include sexualised or identity-based humiliation (Gísladóttir & Office for Democratic Institutions and Human Rights, 2019). However, the subgroup sizes were small, and many comparisons were exploratory. These findings should therefore be read as signals for further research rather than definitive estimates of sex-specific exposure.

The clinical implications are direct. Assessment of former Belarusian political prisoners should not be limited to beatings or visible injuries. It should include forced stripping and humiliating searches, forced positions, electric shocks, threats to relatives, sleep deprivation, constant light, information isolation, monitored or blocked communication, denial of medical care, punitive isolation, exposure to violence against others, suicidal thoughts and self-harm during custody, and post-release surveillance or forced migration. Services for former political prisoners should address trauma symptoms, sleep disturbance, somatic complaints, distrust of institutions, persistent fear for relatives, anger, shame, and difficulties rebuilding autonomy after prolonged institutional control.

This study has several strengths. It provides data collected relatively close to release and emigration, whereas much of the literature on political imprisonment describes survivors years or decades later. It combines structured survey data with narrative material from interviews, allowing quantitative patterns to be interpreted alongside people's own descriptions. The findings are also consistent with independent monitoring and country-of-origin sources on Belarus (European Union Agency for Asylum, 2026; Human Rights Watch, 2026; United Nations Human Rights Council, 2025). This external consistency also bounds the concern about self-selection: the high prevalence of systemic conditions applied to all detainees, such as continuous lighting, cold, overcrowding, and restricted hygiene, is unlikely to be an artefact of who chose to participate, because these con-

ditions did not depend on individual exposure. Estimates for individually targeted acts, such as beatings or sexual violence, are more sensitive to the possibility that exposed survivors were more motivated to take part. Finally, the study explicitly examines psychological and degrading forms of abuse alongside physical violence. This is important because these forms are often less visible in public and clinical accounts, although they were central in respondents' reports.

Limitations

The study has several potential sources of bias: selection bias from the non-random, network-based recruitment; recall bias from retrospective reporting; and security- or distress-related non-disclosure.

As an online survey distributed through closed networks, the study reached only individuals with internet access and the digital skills to respond; older survivors and those with limited digital access were therefore less likely to take part. The sample was non-random and was recruited through civil society, diaspora, and personal networks. It cannot be assumed to represent all former Belarusian political prisoners, those still imprisoned, those released but remaining in Belarus, or those who avoid contact with civil society networks. All respondents had migrated after release, which may select for particular levels of risk, resources, social support, or willingness to disclose, and the prevalence of specific experiences may differ from that among former political prisoners who remained in Belarus, where research is currently not feasible on safety grounds. The design was cross-sectional and retrospective. Independent verification of each reported event was not possible. Recall bias is possible, especially for repeated events occurring over long periods and across multiple institutions. The consistency between survey responses, interview material, and external documentation reduces the likelihood that the main pattern is only an artefact of recall, but it does not remove this limitation. Recruitment through civil society and diaspora networks may have overrepresented people connected to support structures and willing to disclose detention experiences, and survivors who experienced torture or ill-treatment may have been more motivated to participate than those who did not, which could overstate prevalence. In the opposite direction, those most severely affected by imprisonment, including people with severe ongoing distress, those without psychological care, and those who cannot revisit these experiences in a survey, may have been unable to take part, which could understate the prevalence and severity of the worst experiences; people with severe ongoing distress, security concerns, or distrust of institutions may also have participated less. The net direction of selection bias is therefore uncertain.

Additional limitations relate to measurement and analysis. The study used a project-specific checklist rather than a fully validated torture exposure instrument. Some categories overlap conceptually, especially where physical and psychological abuse were inseparable. Sex comparisons were underpowered. The interviews were used to contextualise survey findings rather than for formal thematic analysis.

Future research should examine the long-term mental and physical health consequences of Belarusian political imprisonment using validated measures of PTSD, complex PTSD, depression, anxiety, dissociation, somatic symptoms, suicidality, quality of life, and social functioning. Comparison with Belarusian emigrants without imprisonment history would help separate the effects of detention from the effects of forced migration. Longitudinal follow-up would be especially useful because release and emigration were closely linked in this cohort. Further studies should examine the consequences of punitive isolation, sleep deprivation, information isolation, medical neglect, forced labour, forced nudity, gendered humiliation, and post-release surveillance. Medico-legal studies using Istanbul Protocol standards are also needed for documentation, rehabilitation, and accountability.

Conclusion

This study documents a consistent and systematic pattern of torture and ill-treatment reported by former Belarusian political prisoners across the trajectory of politically motivated deprivation of liberty, from violent arrest through pre-trial detention and sentenced imprisonment to post-release insecurity and migration. Physical torture or physical ill-treatment was reported by 88.3% of respondents, and psychological torture or psychological ill-treatment by 98.6%. More than half of respondents reported ten or more forms of psychological abuse and at least one period of punitive isolation, and almost one in three reported suicidal thoughts during custody. Relational and psychological stressors were rated more severe than physical violence or deprivation of basic needs, while humiliation and submission or suppression of the person were the most frequently identified perceived purposes of violence.

The breadth of psychological and degrading forms of abuse, the prominence of separation and loss of autonomy among subjective stressors, and the convergence between respondents' perceived purposes of violence and the political framing of their detention suggest that violence in this setting functioned as a wide standardised disciplinary practice aimed at humiliation, demonstrative inequality, and erosion of personal autonomy. For this cohort, imprisonment, release under continuing risk, and rapid migration formed a single exposure trajectory;

release did not necessarily mark the end of threat or psychological burden.

These findings support the use of the revised Istanbul Protocol in clinical and medico-legal assessment of former Belarusian political prisoners. Psychological and degrading forms of ill-treatment should be documented as core elements of abuse, not as secondary or contextual features. Rehabilitation services should address detention-related trauma together with post-release and post-migration stressors, including fear for relatives, legal insecurity, loss of social ties, and the need to restore personal autonomy after prolonged institutional control. Although the sample was non-random and limited to former political prisoners who migrated after release, the findings provide empirical evidence relevant to survivor rehabilitation, medico-legal documentation, and future accountability processes.

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Ethics approval

The study protocol and participant-safety procedures received a positive ethics and safety opinion from the Centre for Migration Studies at Adam Mickiewicz University in Poznań on 11 May 2025.

Informed consent

Survey participants provided informed consent before accessing the questionnaire. Interview participants provided verbal informed consent, including consent to audio recording, at the start of the interview.

Data availability

The data are not publicly available because of the sensitivity of the study topic, the small and potentially identifiable population, and the continuing security risks for participants and their relatives. De-identified data may be made available from the corresponding author upon reasonable request and subject to ethical and security considerations.

Author contributions

Uladzimir Pikirenia: conceptualization (equal), formal analysis (lead), investigation, methodology (lead), writing - original draft preparation. **Maryna Kasinerava**: conceptualization (equal), data curation, funding acquisition, investigation, project administration, writing - review & editing (equal). **Yulia Lahvinenka**: conceptualization, investigation, formal analysis (support), writing - review & editing (equal). **Andreas Maerck-**

er: conceptualization (equal), methodology (support), supervision, writing - review & editing (equal).

Declaration on the use of artificial intelligence-assisted tools

The authors used ChatGPT (OpenAI) to assist with English-language editing, wording, and structural refinement of the manuscript. The tool was not used for data collection, statistical analysis, qualitative coding, or interpretation of the study data. All content was reviewed and edited by the authors, who take full responsibility for the final manuscript.

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Supplementary File S1

Checklist for reporting results of internet E-surveys (CHERRIES)

Category	Checklist item	How addressed in this study
Design	Describe survey design	Cross-sectional online survey. Closed, invitation-only survey, not open to the public. Non-probability sampling of former Belarusian political prisoners who had been criminally prosecuted on political grounds, detained or imprisoned, and had emigrated after release. Recruitment through civil society, diaspora, and personal networks.
IRB approval and informed consent	IRB approval	The study is observational and non-medical. A positive ethics and safety opinion was issued by the Centre for Migration Studies, Adam Mickiewicz University (Poznań) on 11 May 2025, following prior consultation and review of study materials (December 2024 to January 2025). See Methods, Ethical Considerations.
	Informed consent	Yes. Before accessing the questionnaire, participants were informed of the study aims, the voluntary nature of participation, the right to skip any question or withdraw without consequences, and the availability of psychological support. Consent was recorded before the first survey item.
	Data protection	The questionnaire ran on a self-hosted platform on infrastructure controlled by the research team; responses were not transmitted to or stored by third-party survey providers. Access was by individualised links, and administrative access was restricted. Interview recordings and transcripts were stored separately from identifying information.
Development and pre-testing	Development and testing	Survey content covered detention history, physical and psychological torture and ill-treatment, suicidality in custody, subjective stressors, and perceived purposes of violence. The physical and psychological torture and ill-treatment categories were not taken from a single validated instrument; they were compiled as a project-specific checklist drawing on the revised Istanbul Protocol framework and on prior research on the long-term effects of political imprisonment (Maercker & Schützwohl, 1997), with additional context-specific items reflecting the Belarusian penal setting, such as forced labour in dangerous conditions and forms associated with disciplinary isolation. The categories were developed with input from psychiatrists, psychologists, and former political prisoners. Study materials, including the final questionnaire, were reviewed during the ethics consultation (final questionnaire submitted 20 January 2025). The questionnaire was pilot-tested with a focus group of four participants prior to launch to assess usability and technical functionality.
Recruitment process	Open versus closed survey	Closed. Participation was by individualised invitation only.

Category	Checklist item	How addressed in this study
	Contact mode	Initial contact was made online through private communication and community channels (civil society initiatives, diaspora communities, and personal contacts).
	Advertising the survey	The survey was not advertised to the general public; recruitment was network-based. Invitation links were primarily distributed through human rights organisations, community Telegram channels, personal networks, and peer-support groups.
Survey administration	Web or e-mail	Web-based, self-hosted questionnaire accessed through individualised links delivered via private channels.
	Context (where hosted or sent)	Individual invitation links were sent to each respondent via direct messages.
	Mandatory or voluntary	Voluntary. Participants could skip any question.
	Incentives	None offered.
	Time and date	Data were collected between 17 February and 31 May 2025.
	Randomisation of items	Items were presented in a fixed order, with no randomisation.
	Adaptive questioning	Branching logic was used: if respondents indicated that they had not experienced criminal or administrative prosecution, the entire section related to the corresponding type of prosecution was skipped.
	Number of items	The questionnaire comprised 176 items in total, of which 70 were used in the present analysis.
	Number of screens (pages)	The number of questionnaire screens equals the number of questions, taking into account the branching logic, plus one additional introductory screen for each logical block.
	Completeness check	No forced-response completeness check. Participants could leave items blank, and partially completed questionnaires were retained.
	Review step	Yes, before completing the questionnaire, participants could review and edit all previous answers.
Response rates	Unique site visitors	Not determinable. Because invitations were distributed through private networks, the number of people who received an invitation could not be established.
	View rate	Could not be calculated.
	Participation rate	Could not be calculated.
	Completion rate	Partially completed questionnaires were retained and analysed on an available-case basis; variable-specific denominators are reported throughout the Results. In the broader survey, 245 records were initiated, and 214 were fully completed. For the present analysis, 77 respondents met the inclusion criteria for former political prisoners and were retained; partially completed records within this subgroup were analysed using available-case denominators.

Category	Checklist item	How addressed in this study
Preventing multiple entries	Cookies, IP check, log-file analysis	No, each participant had an individual access link containing a token directly in the URL.
	Registration or unique identifier	Individualised access links served as a per-participant key, which prevented duplicate submissions from the same invitation.
Analysis	Handling of incomplete questionnaires	Partially completed questionnaires were retained. Analyses were performed on an available-case basis with no imputation; variable-specific denominators are reported.
	Atypical timestamps	No, we did not impose any time limits on participants for completing the questionnaire. Participants were able to complete it in multiple sessions at any time convenient for them.
	Statistical correction	No weighting or post-stratification was applied (non-probability sample). For multiple comparisons across stressor items, the Benjamini-Hochberg procedure was used to control the false discovery rate; item-level sex comparisons were exploratory and unadjusted.

Reference

Eysenbach, G. (2004). Improving the quality of web surveys: The Checklist for Reporting Results of Internet E-Surveys (CHERRIES). Journal of Medical Internet Research, 6(3), e34. https://doi.org/10.2196/jmir.6.3.e34

Supplementary File S2

Study questionnaire: Items analysed in the present study

The survey was administered online, in Russian, to former Belarusian political prisoners. This file reproduces, in English translation by the authors, the consent text and the project-specific items analysed in the present manuscript: demographic details, persecution history, detention and custody, solitary confinement, physical and psychological torture and ill-treatment, conditions of detention, suicidality and self-harm, subjective stressors, and perceived purposes of violence.

The broader instrument, developed for a separate case-control study, also contained validated psychometric measures (SLESQ-R, ITQ, PHQ-9, GAD-7, PSS, PHQ-15, and WHOQOL-BREF) and modules on pre-detention and post-migration health and adaptation, together with an optional in-person forensic medical examination. These were not analysed in the present manuscript; the copyrighted scales are not reproduced here and are available from their original sources.

Items were presented with branching (skip) logic; display conditions are shown in italics. Unless stated otherwise, multiple-response items included an exclusive "No" option and an optional free-text field for each selection.

A. Informed consent and participation

A.1 Informed consent to participate

Confirmation: a single checkbox, "I agree".

Informed consent: what it is and why it is needed. Participation in the study requires your informed consent. This document confirms that you understand the aim, process, and possible consequences of participation, and that you consent to the use of your information and, where required, a medical examination.

1. Competence and capacity. To give consent, you must be able to understand the information related to the study and make an informed decision. If you are a minor or have been declared legally incapable, the right to give consent passes to your parent or legal guardian.

2. Full information. Before participating, you will receive a full explanation of the aims and significance of the study; the research process, including possible methods and stages; possible risks and discomfort; how your confidential information is protected; the conditions under which information may be shared with third parties (for example, scientific organisations or investigative authorities); and the possibility of a medical examination if required.

3. Voluntary participation. Your participation is entirely voluntary. You may withdraw at any stage without negative consequences, and you may decline a medical examination or the transfer of information.

4. Additional consents. The study may involve additional procedures requiring separate consent: a medical examination; photography or video recording where needed; and transfer of anonymised information to third parties (for example, for scientific publication). You may consent to or decline these.

Your rights. You may ask any questions about the study or the medical examination and receive full explanations; you may withdraw from the study or from individual procedures at any time; your information will be protected and will not be shared with third parties without your permission.

Potential risks and discomfort. Psychological assessment may touch on painful memories or traumatic events and may temporarily increase anxiety or distress. (Clauses on physical discomfort and unforeseen reactions relate to the optional in-person medical examination of the broader project.)

By clicking "I agree", you confirm that you have read the conditions of participation, understand your rights and possible risks, and voluntarily consent to participate.

A.2 Consent to participation and data storage

Confirmation: a single checkbox, "I agree".

Aim of the study. The aim of the study "Long-term effects of political repression and migration: a case-control study of Belarusian refugees and migrants" is to compare mental health (for example, PTSD, depression, anxiety) and physical health between political refugees and non-political migrants from Belarus, and to assess social, occupational, and family adaptation and overall quality of life. (This comparative case-control aim pertains to the broader project; the present manuscript analyses the survivor survey only.)

Process. The study involves completing a questionnaire, psychological testing, and statistical and qualitative analysis.

Materials. The survey questionnaire was developed by the human-rights initiative for political prisoners Dissidentby. Statistical and qualitative results will be presented without confidential information to donor organisations and the public. The

online survey did not collect names, contact details, addresses, or other direct identifiers.

Confidentiality. All primary data are stored in strict confidence by Dissidentby; personal data are protected to international standards.

Research ethics. All staff and volunteers follow international standards of medical and psychological ethics and of data protection and confidentiality.

Confirmation: "I confirm that I have read the informed consent form and agree to take part in this study."

Separate consents for a medical examination, photography, video recording, and disclosure of medical information (instrument sections 1.2–1.5) relate to the optional in-person forensic medical examination of the broader project and were not part of the survey analysed here.

B. Demographic details

– **Your age** *number, required*
– **Your gender** *required: Male / Female / Non-binary / Other (+ text)*
– **Education** *required: Home schooling / Primary / Lower secondary (9 years) / Secondary / Higher*

C. Persecution

– **Have your close relatives been subjected to political persecution?** *Yes / No, required*
– **Have you been subjected to administrative political persecution?** *Yes / No, required*
– **Have you been subjected to criminal political persecution?** *Yes / No, required*

A response of "Yes" to criminal political persecution opened the detailed detention block (Sections D–J). This item defined the study population (n = 77).

D. Detention and pre-trial custody

Displayed if criminal political persecution = Yes.

– **When were you detained?** *date, required*
– **Your age at the time of detention** *number, required*
– **Did you have children at the time of detention?** *Yes / No, required*
– **Were you pregnant, or was a pregnancy planned in your family, at the time of detention?** *Yes / No, required*
– **Did you have diagnosed chronic illnesses at the time of detention? If so, which?** *checkboxes, required*
– **Did you experience physical or psychological violence during arrest? If so, describe the circumstances.** *Yes / No ("Yes" + text), required*
– **If you were held before trial, indicate all places of custody.** *checkboxes, required:*
  · Temporary detention facility (IVS)
  · Pre-trial detention centre (SIZO)
  · Offender isolation centre (TsIP)
  · House arrest
  · Other (+ text)

E. Custody, sentence, and institutions

– **In total, how long were you held in custody? (number of months)** *number, required; shown if pre-trial custody included IVS, SIZO, TsIP, or Other*
– **Were you released after SIZO with a non-custodial sentence?** *Yes / No; shown if SIZO selected*
– **Date of release from SIZO; date the verdict took effect** *date; conditional*
– **What sentence were you given?** *years / months / days, required (fractional years allowed)*
– **Where were you held?** *multiple selection from a list of institutions, required*

The system classified each selected institution by type: SIZO/TsIP/IVS → pre-trial; correctional colony → colony; prison → prison; open-type correctional institution (IUOT) → open-type. Institution type controlled the solitary-confinement questions in Section F.

– **Date of release** *date, required*
– **After release, did you leave Belarus immediately?** *Yes / No, required*
– **Was your detention completely unexpected, or did you anticipate it? Please describe your feelings and the circumstances.** *free text, required*

F. Solitary confinement

Displayed for each institution type the respondent had passed through (pre-trial facility, colony, prison, open-type institution). The same three questions were asked for each setting.

– **Were you held in a solitary cell (punishment cell, ShIZO) during this period?** *Yes / No*
– **In total, how many days did you spend in a solitary cell (ShIZO)?** *number, if Yes*
– **What was your longest continuous period in a solitary cell (ShIZO)?** *number, if Yes*

For colony and prison settings, the same three questions were also asked for a cell-type room (PKT).

G. Physical violence and torture during imprisonment

Displayed if criminal political persecution = Yes.

– **Were you subjected to physical violence or torture?** *checkboxes, required; exclusive "No"; each selection opened an optional free-text field*

"If you are willing, please describe the forms of physical violence you experienced and the circumstances in which they occurred."

- No
- Single beating — with hands, feet, or objects, including the "telephone"[1]
- Systematic beatings — with hands, feet, or objects, including the "telephone"
- Beatings by one person — with hands, feet, or objects
- Beatings by a group — with hands, feet, or objects
- Infliction of wounds — with sharp or piercing objects or a firearm
- Strangulation — with hands, feet, a plastic bag, "submarino"[2], etc.
- Torture with electrical devices — for example, stun guns
- Burns — with hot objects or chemicals (e.g., bleach in a punishment cell)
- Extraction or hair; mutilation — including amputation of body parts
- Sexual violence — including rape, use of objects, coercion
- Forced stripping naked — coercion to humiliating acts
- Forced painful or unnatural positions — e.g., the "swallow"; prolonged standing against a wall
- Suspension — e.g., the "Palestinian method"[3]
- Cell without heating in winter
- Torture using animals — e.g., service dogs
- Pharmacological abuse — administration of drugs or substances
- Medical or dental torture — e.g., extraction of teeth
- Forced labour — in dangerous conditions, causing injury
- Other — free text

H. Psychological violence and ill-treatment during imprisonment

– **Were you subjected to psychological violence during imprisonment?** *checkboxes, required; exclusive "No"; each selection opened an optional free-text field*

"If you are willing, please describe the forms of psychological violence you experienced and the circumstances in which they occurred."

- No
- Mock execution
- Sensory deprivation (e.g., complete absence of sound or light)
- Sounds of torture or the screams of others nearby
- Use of constant sound (e.g., noise, loud music)
- Being held in a cell without access to daylight
- Being held in a cell with constant artificial light
- Loneliness, lack of contact with others, or lack of access to information
- Prohibition on using the toilet or shower
- Absence of personal hygiene items (in particular, women's items)
- Being held in a solitary cell
- Being held in an overcrowded cell
- Being held in a cell with rodents and/or insects
- Sleep deprivation
- Forced "sleeping in shifts"
- Extreme conditions of detention (severe heat, cold, or darkness)
- Hunger, thirst
- Refusal of medical care
- Threats (of killing, physical violence, sexual violence, an added sentence)
- Insults, humiliation, or threats against members of your family
- Witnessing others in custody being tortured or subjected to inhuman treatment
- Witnessing your loved ones being tortured or subjected to inhuman treatment
- Hearing others in custody being tortured or subjected to inhuman treatment
- Hearing your loved ones being tortured or subjected to inhuman treatment
- Other (+ text)

I. Conditions of detention, threat to life, and suicidality

Displayed if criminal political persecution = Yes and at least one place of detention was recorded. Place-specific items were answered as checkboxes across the relevant settings.

– **Were you ever held in a cell with constant artificial light?** *checkboxes by place of detention*

– **Did you witness the unnatural or violent death of others in custody, or serious injury inflicted on prisoners?** *checkboxes by place + text*

1 "Telephone": simultaneous blows to both ears with the palms.
2 "Submarino": near-drowning in water.
3 "Palestinian method": suspension by the arms tied behind the back.

– **Did you ever feel threatened by others in custody during imprisonment?** *checkboxes by place + text*
– **Were you threatened with a sentence involving the death penalty during pre-trial detention?** *Yes / No, required*
– **Did you ever think that you were in mortal danger?** *checkboxes by place + text*
– **Did you have suicidal thoughts?** *checkboxes by place + text*
– **Did you attempt acts of self-harm?** *checkboxes by place + text*
– **Did you attempt suicide?** *checkboxes by place + text*

J. Health consequences, subjective stressors, and perceived purposes of violence

Displayed if criminal political persecution = Yes.

– **Did chronic illnesses appear (were diagnosed) during imprisonment?** *checkboxes, required*
– **Did any diagnosed mental disorders appear during imprisonment?** *checkboxes, required*
– **What caused you the most stress during imprisonment?** *each item rated 0–5, required:*
  · Conditions of detention (overcrowded cell, no access to personal hygiene, heat or cold)
  · Physical violence or threats
  · Psychological pressure (humiliation, isolation, threats against you or your family)
  · Lack of information about court proceedings or sentence length
  · Loneliness or separation from loved ones
  · Lack of food, water, sleep, or medical care
  · Other (+ text)
– **For what purpose do you think physical or psychological violence/torture was applied to you?** *checkboxes, required:*
  · Obtaining information about another person or fact
  · Admission of guilt
  · Confession to a crime you did not commit
  · Coercion to cooperate
  · Extortion of money or property
  · Plea bargain
  · Humiliation of the person
  · Submission or suppression of the person
  · Sadistic inclinations of those who used violence
  · Ideological views
  · Political views
  · Religious beliefs
  · Sexual orientation
  · The nature of the crime you were accused of
  · Ethnic discrimination
  · Discrimination by social status
  · Other (+ text)
– **If you have information that may help to identify those who took part in torture or violence, please describe it.** *checkboxes with optional text (police officers; prison staff; IVS/TsIP staff; SIZO staff; prison staff; colony staff; SOBR or OMON; KGB; GUBOPiK; medical staff; others in custody; Other)*

Abbreviations

IVS — temporary detention facility; SIZO — pre-trial detention centre; TsIP — offender isolation centre; ShIZO — punishment (solitary) cell; PKT — cell-type room; IUOT — open-type correctional institution; SOBR/OMON — riot police units; KGB — state security committee; GUBOPiK — anti-organised-crime directorate.

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Nano-totalitarianism: Brain-computer interfaces, fusion databases, and the weaponisation of consciousness

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Abstract

Debate about interrogational torture still returns to the ticking-bomb scenario, despite the weight of evidence that it neither works nor withstands moral scrutiny. The post-9/11 record, from Abu Ghraib to the CIA black sites, already marked a decisive shift toward psychological forms of coercion. The technologies now emerging make a different kind of coercion possible. This paper argues that defence-funded brain-computer interfaces, of which Synchron's Stentrode is the clearest current example, combined with large language models and fusion databases, could support what I call *nano-totalitarianism*: the convergence of pervasive personal data, neurodata, adaptive AI, and technologically mediated coercion in ways that could penetrate or continuously condition the inner sphere of the person. Operationalised, this is a self-sustaining regime in which a detainee is held in continuous psychological distress through fabricated scenarios, interference with memory, and synthetic social contact. Such a system would turn neuroplasticity into an instrument, laying down durable neural pathways of fear, while automated monitoring assesses compliance in real time. Its lineage runs from MKULTRA's psychochemical experiments to the extraction logic of surveillance capitalism, and its endpoint is a panopticon inside the skull. The essay proceeds anticipatorily, distinguishing throughout between demonstrated current capability, plausible convergence of existing components, and speculative future possibility.

Keywords: neuro-totalitarianism, surveillance, ChatGPT, BCI, fusion databases

Introduction

After September 11, 2001, a distinct form of torture became common: punitive torture, intended to inflict severe emotional damage while leaving the body unmarked. Popular culture followed, with films and television normalising and at times celebrating the practice (Delehanty & Kearns, 2019). The controversy over Zero Dark Thirty (2012), arriving alongside the disclosures from Abu Ghraib and Guantánamo, opened a public argument about whether such methods are lawful or effective, and exposed how thoroughly entertainment, propaganda, and policy had run together.

The twenty-first century has produced a sharper turn. Neurotechnology and large-scale data systems now make it possible to monitor, manage, and potentially torture a person at the level of thought. Through programmes such as DARPA's Next-Generation Nonsurgical Neurotechnology, and through commercial developers including Neuralink and Synchron, military and intelligence agencies are funding interfaces that read from and, at the far end, write to neural activity. Paired with large language models, these devices might let a paralysed patient speak or browse by intention alone. The same pairing could open an era of interrogation in which psychological coercion is continuous, adaptive, and difficult to observe from outside.

Fusion databases are the third component. These are consolidated repositories drawing on financial records, communications, biometrics, social media, and increasingly neural data. Edward Snowden, formerly an NSA and CIA contractor, has

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argued that such systems produce a permanent record for every individual, enabling lifelong profiling and targeting (Snowden, 2019). Joined to a neural interface and a language model, that record becomes the raw material for psychological operations built against one specific person. The mind becomes a cell with no door.

A note on register. Throughout what follows, I distinguish three levels of claim: demonstrated current capability, plausible convergence of existing components, and speculative future possibility. The essay is anticipatory in character, and it draws on the governance-oriented framework developed by Istace and Costas Trascasas (2024) for reasoning about neurotechnologies whose full coercive potential has not yet been demonstrated but whose components are already in place. Distinguishing the three registers is what allows anticipatory analysis to proceed without collapsing into either technological credulity or dystopian projection.

This paper examines the evolution from historical torture to the nascent menace of neurotechnological and data-driven psychological torment. It looks at the technical aspects, the moral and legal issues, and the role of fusion databases in creating a new kind of "nano-totalitarianism" that threatens the fundamental essence of human freedom and dignity.

Torture, power, and the history of control

From physical pain to mental warfare

The myth of exile, and the Tree of Knowledge at its centre, sits near the foundation of Western culture. It is a story about forbidden knowledge and the authority that forbids it. What Genesis prohibits is not an act but an acquisition, and the prohibition establishes a relation between divine power and human curiosity that Hegel would later render as dialectic (Hegel, 1807/1977) and Foucault as biopower (Foucault, 1976/1978).

Torture has always concerned the control of information: forbidden, subversive, or heretical. Eden anticipates the interrogation room, where punishment is applied to extract a truth or to break a refusal. Oppenheimer's invocation of the Bhagavad Gita at the first detonation, "Now I am become Death, the destroyer of worlds," names the same vertigo in a secular register. The physics that produced medical isotopes also incinerated two cities. A brain-computer interface that restores speech to a paralysed patient can also take speech from a detained one. The symmetry is not hypothetical. Surveillance technologies sold as protective infrastructure have repeatedly been turned to coercion, from telegraph interception to metadata collection to the export of spyware platforms.

MKUltra was the Cold War's version of the same transgression: a covert, quasi-divine attempt to take possession of the human mind. Its methods included involuntary LSD administration, electroshock, sensory deprivation, and psychological torture (Kinzer, 2019). Its personnel came in part from Nazi and Japanese war criminals brought to the United States under Operation Paperclip. Stephen Kinzer documents the CIA's recruitment of Kurt Blome, formerly director of Nazi biological warfare research, who had "developed aerosol delivery systems for nerve gas, to be tested on inmates at Auschwitz; bred infected mosquitoes and lice for experiments at Dachau and Buchenwald; and produced gas to kill thirty-five thousand tuberculosis patients in camps across Poland" (Kinzer, 2019, p. 17). The recruitment of General Shiro Ishii, the army surgeon who directed Unit 731, went further still:

> Ishii's victims were slowly roasted by electricity, hung upside down, locked into high-pressure chambers until their eyes popped out, spun in centrifuges, infected with anthrax, syphilis, plague, and cholera, forcibly impregnated to provide infants for vivisection, bound to stakes to be incinerated by flamethrowers, and slowly frozen to observe hypothermia's progress (Kinzer, 2019, p. 30).

American opinion would later register horror at waterboarding. What Ishii had done, and what the United States acquired from him in exchange for his immunity, did not enter that accounting.

The programme's LSD experiments, conducted on subjects including Allen Ginsberg, Ted Kaczynski, and James "Whitey" Bulger, proceeded under the cover of scientific research. MKUltra never produced the Manchurian candidate it was chasing, but it established the state's standing interest in the manipulation of mind as the most efficient route to information. The institutional lineage matters for what follows. MKUltra was a CIA programme; the current work is DARPA's, which is to say military. That shift belongs to an era of cyberwarfare, in which knowing the adversary has become a continuous mission requirement rather than an episodic one.

Warnings about the security state's expanding authority were issued early and largely disregarded. Eisenhower's farewell address of 1961 urged the nation to guard against "the acquisition of unwarranted influence, whether sought or unsought, by the military-industrial complex" (Eisenhower, 1961). The Church Committee demonstrated in 1975 that the NSA's capabilities could be turned on the American population at large. Speaking on national television that August, Church warned that the technology could "enable it to impose total tyranny,

and there would be no way to fight back," and that such agencies had to be held under law and proper supervision "so that we never cross over that abyss. That's the abyss from which there is no return" (Church, 1975). Both anticipated what Snowden documented four decades later (Snowden, 2019).

The ticking bomb fallacy in action

After September 11, the ticking-bomb scenario supplied the justification. Extraordinary rendition, the network of black sites, and Guantánamo Bay became the institutional form of an argument that information must be obtained at any cost. Zero Dark Thirty dramatised the premise and implied that it worked. The Senate Select Committee on Intelligence concluded otherwise in 2014, finding that enhanced interrogation had produced little intelligence of value (SSCI, 2014).

Abu Ghraib marked a shift from physical coercion to psychological display. Photographs recorded sexual humiliation, forced nudity, and the deliberate desecration of cultural and religious identity. The techniques echoed those the CIA had sanctioned, but the camera introduced something new: cruelty performed for a record (Hersh, 2004; Human Rights Watch, 2005).

Hersh's reporting established institutional involvement, showing that military intelligence had not merely permitted these acts but encouraged them (Hersh, 2004). The psychological damage was the object rather than the byproduct. What Abu Ghraib demonstrated about ordinary people acting under institutional protection restated, in an actual prison, what the Stanford Prison Experiment had found in a simulated one (Haney et al., 1973).

Israel's Lavender system in Gaza shows what fusion databases do at scale. According to investigative reporting by +972 Magazine and Local Call corroborated by named military sources, telecommunications metadata, facial recognition, and movement patterns were combined to generate target lists automatically, with reported error rates of ten to fifteen per cent (Abraham, 2024; Hawkins, 2025). The associated "Where's Daddy?" protocol timed strikes for the moment targets returned to their family homes at night. The database was not an aid to the weapon. It was the weapon. The evidentiary status of these accounts is that of investigative journalism, not of official finding, and that qualification should be kept in view.

Torture recorded, distributed, and consumed marks the arrival of a condition in which perception itself is the contested ground. What began as forbidden fruit has become a secular preoccupation with total command over knowledge and bodies alike. The technology has grown more precise; the appetite it serves has not changed. From the exile in Eden to the photographs from Abu Ghraib, the same demand persists: to command, to control, and to punish knowledge that will not comply. Torture, physical or psychological, remains the crudest expression of the fear beneath it.

Large language models: capability and dual use

How large language models work

ChatGPT is a transformer model, which is to say it uses self-attention to weight the relative importance of elements in its input and to produce output that holds together across a long context (Vaswani et al., 2017). Trained on a broad corpus of text, it learns by predicting the next token in a sequence and adjusting its parameters to reduce the error in that prediction (Radford et al., 2018). Once trained, it generates by sampling from a probability distribution over possible continuations, and a prompt shapes that distribution toward a particular kind of output. Because the model attends to the whole of a conversation rather than the last exchange alone, it sustains context across a long interaction (Brown et al., 2020).

That last property is what makes the technology relevant here. A system that holds the entire history of an exchange, and weights each part of it for relevance, is a system that can conduct a sustained interrogation rather than ask a sequence of unrelated questions.

Coercive applications

The same capability supports a range of harms. Fabricated information is the most discussed: a model may produce false or misleading output through error, or through instruction, and the result circulates at the speed of the platform carrying it. Combined with synthetic audio and video, the capacity extends to fabricated quotation and forged recordings. The same fluency automates phishing and produces spam that reads as though a person wrote it.

The applications relevant to this paper are narrower and more serious. A model capable of sustaining context can be turned to monitoring and analysing conversation at scale, tracking what a population thinks and adjusting what it is shown accordingly (Zuboff, 2019). Turned on an individual, it can generate material calibrated to that person specifically. Propaganda tailored to one reader is a marketing problem. Psychological pressure tailored to one detainee is something else.

The NSA–Vanderbilt–OpenAI nexus

OpenAI's own account of what it is building was on the record from the outset. In an on-stage conversation with Vinod Khosla, whose fund had shortly before become the company's first

institutional investor, Sam Altman described the objective as a single intelligence "smarter and more capable than humans in every way," and predicted that success would "eclipse the Agricultural Revolution, the Industrial Revolution, the internet revolution, all put together" (Altman, 2019).

Asked in the same conversation about safety, Altman distinguished three failure modes: accidental misuse, in which the system does something other than what was intended; intentional misuse, in which a hostile actor turns it to their own ends; and "a policy failure where it's not regulated" and the technology is deployed in a form most of the world would not have chosen (Altman, 2019). The third is the concern of this paper, and it is worth noting that the person building the technology named it before its critics did.

Military intelligence, university research, and commercial AI development have converged in a way that warrants attention. The clearest instance is the position occupied by General Paul Nakasone, formerly director of the NSA, who took charge of a new national security institute at Vanderbilt University and was appointed to OpenAI's board of directors. The arrangement raises questions about governance, transparency, and the eventual use of these systems for coercion.

Snowden's response to the appointment was unambiguous:

> They've gone full mask-off: do not ever trust @OpenAI or its products (ChatGPT, etc.). There is only one reason for appointing an @NSAGov Director to your board. This is a willful, calculated betrayal of the rights of every person on Earth. You have been warned. (Snowden, 2024; emphasis in original)

Snowden's post is treated here as a civil-liberties interpretation of the revolving door between intelligence institutions and technology companies, not as evidence of an operational NSA-OpenAI intelligence relationship. It follows the argument he made in *Permanent Record*, where the chapter "Homo Contractus" describes the movement of intelligence personnel into private-sector roles while retaining the clearances that let them operate with limited public accountability (Snowden, 2019). On this reading, the effect is to privatise intelligence work and place it beyond democratic scrutiny, blurring the line between state authority and corporate power.

The pattern is older than the current appointment. Whitney Webb's work is drawn on here as an investigative-interpretive framing of the recurring pathway from congressional surveillance controversy to privatised-contractor continuation, rather than as the primary evidentiary basis for any specific factual claim about an intelligence program or relationship. On Webb's account, when Congress investigates a surveillance programme, the programme does not end; its capabilities migrate into private companies the public cannot reach (Webb, 2022a). The PROMIS software of the 1980s, which allowed agencies to track individuals across databases, produced a line of privatised successors. When Total Information Awareness was defunded in 2003 after public objection, its surveillance ambitions did not disappear with the budget line.

Peter Thiel founded Palantir the same year Congress cut TIA's funding. Richard Perle shortly afterward arranged a meeting between Thiel, Palantir chief executive Alex Karp, and John Poindexter, TIA's architect; Perle told Poindexter that the new company "was similar in ambition to what Poindexter had tried to create at the Pentagon" (Harris, 2010). In-Q-Tel, the CIA's venture fund, was Palantir's first outside investor, and for five years the agency was its only client. Its lead engineers travelled to Langley fortnightly across more than two hundred visits, while CIA analysts tested and refined the software (Webb, 2022b, p. 370).

The advantage is structural. As Webb puts it, because Palantir is a private company rather than a government programme, the use of its software by state and commercial clients "benefits from 'plausible deniability' and frees Palantir from restrictions that would exist if it were a military or public sector project" (Webb, 2022b, p. 371). Nakasone's appointment is not anomalous. It is the current instance of a fifty-year pattern in which surveillance capabilities, once exposed, are transferred to entities that answer neither to freedom of information law nor to congressional oversight.

Nakasone's own stated priorities are consistent with this. As NSA director he set out a five-year plan to integrate artificial intelligence and machine learning across US intelligence, automating threat detection, data analysis, and elements of human intelligence collection (Office of the Director of National Intelligence, 2023). The approach parallels the DARPA funding model, which places high-risk research in universities and companies to keep innovation coupled to military application (Bonvillian et al., 2020).

Vanderbilt's Institute of National Security has become an academic partner in this work, and the appointment of a former NSA director to lead it aligns the institute's research with the intelligence community's current priorities.

OpenAI has no formal relationship with the NSA or with Vanderbilt, but Nakasone's board seat provides an indirect channel of influence, and the company's integration into government cloud services through its partnership with Microsoft, itself a major defence contractor, makes the channel conse-

quential (West & Allen, 2020). That civilian AI can be turned to state surveillance and coercion is no longer a hypothesis.

Text Box 2: Meta AI fusion

Meta's AI integration builds a persistent model of each user by fusing messaging history, photographs, biometric data, location tracking, and social graph analysis. Marketed as an assistant that knows you, it maintains a continuous behavioural profile across WhatsApp, Instagram, and Facebook, and the company has extended the same approach internally, building an AI version of its own chief executive for staff to interact with (Murphy, 2026). The effect is to turn the self into a datafied commodity, where every interaction feeds a doppelgänger that can predict, simulate, and eventually stand in for the person it was built from.

Civil-liberties and digital-rights advocates responded quickly, warning that placing former intelligence leadership inside a leading AI firm deepens the revolving door between surveillance agencies and private technology, and raises the prospect of AI turned toward surveillance, policing, and social control (Pabst, 2024).

The concern has precedent. Reuters documented how former NSA personnel working for the cybersecurity firm DarkMatter helped the United Arab Emirates surveil dissidents, journalists, and human rights campaigners under a programme called Project Raven (Bing & Schectman, 2019). The New York Times reported that US intelligence veterans have been central to building digital espionage capabilities for Gulf states (Mazzetti & Goldman, 2021). Both show how surveillance expertise moves from public service into private contracts and then into the hands of governments that face no meaningful constraint.

Governance at OpenAI remains contested. Employees have raised concerns about the absence of whistleblower protections and about retaliation for disclosing unethical applications. That internal dispute sharpens Snowden's larger point: as intelligence work migrates to private platforms, abuses become harder to identify, and the mechanisms for ethical oversight weaken.

The alignment of the NSA, Vanderbilt, and OpenAI is a contemporary form of the military-industrial complex, operating through public-private partnership on the DARPA model. It distributes risk while concentrating power, and it allows civilian technologies to be militarised quietly. Systems built for benign purposes, conversational assistants and data analysis among them, can be redirected toward interrogation, surveillance, and psychological operations without public knowledge or consent. This is not a commercial dispute or an academic one. It is a threat to civil liberty and democratic accountability.

Virtual reality: immersion, ethics, and control

Virtual reality, first conceived in the 1960s, now uses head-mounted displays, motion sensors, and spatial audio to generate environments that respond in real time to a user's movement (Lanier, 2017). Tracking the head, hands, and body produces presence: the sense of occupying a place that does not exist (Slater & Sanchez-Vives, 2016). Haptic feedback extends the effect to touch. The technology has moved from experiment into gaming, training, therapy, education, and social interaction, and, more recently, into settings where the user has not chosen to be there.

Ethical and social risk

The military applications came early. Since 2014, the DARPA has used Oculus Rift headsets to render cyberwarfare scenarios in game-like form. Greenberg (2014) observed that "giving American hackers a tool that was made for video games to use in cyberattacks could be seen as encouraging a careless attitude toward cyberwar, making it seem less serious."

This is the familiar dual-use pattern. The internet itself originated in defence research, developed through the complex linking military funding to academic and industrial work (Naughton, 2016). After September 11, the digital environment was redefined as a domain of conflict, and pervasive surveillance was justified on that basis (Weaver, 2013).

VR in carceral systems: therapy or control?

The migration of VR into prisons is more troubling, because there the vocabulary of rehabilitation and therapy does the work of justification. Corcoran State Prison in California issues VR headsets to prisoners held in solitary confinement, offering virtual escape into simulated environments. The objection is straightforward: the intervention promises release while leaving the isolation exactly as it was.

VR is also being used to modify behaviour rather than to provide relief. Programmes for perpetrators of intimate partner violence place participants in simulations rendered from the victim's perspective, on the theory that this produces empathy. A Catalan study found improved emotional recognition after the intervention, but no significant reduction in physical aggression or threatening behaviour, which leaves both the effectiveness and the ethics of the approach unsettled (Bastardas-Albero et al., 2023).

These systems also collect biometric data, eye tracking and heart rate and galvanic skin response among them, with little governance over what happens to it. Questions of ownership, privacy, and whether such data might inform parole decisions are largely unaddressed. In that vacuum, VR functions as an

instrument of observation and control rather than of rehabilitation.

Innovation as normalisation

The historical parallel is uncomfortable. Abu Ghraib demonstrated how institutional abuse becomes routine once policy provides cover for it. VR and neurotechnology are following a similar path, with "innovation" performing the function that policy performed then. Professional bodies including the IEEE have issued ethical guidance emphasising privacy and informed consent, and carceral applications routinely disregard it.

US regulation of neural data is currently inadequate, which leaves prisons available as testing grounds for corporate and military interests. The precedent is MKUltra, where unethical experimentation was conducted on captive populations under the justification of national security.

Brain-computer interfaces: access to the nervous system

The movement from MKUltra to DARPA-funded interfaces such as Synchron's Stentrode marks a change in kind rather than degree: from chemical and psychological manipulation to direct neurotechnological access. MKUltra was exposed in the 1970s and formally terminated, but the ambition behind it did not end. The research moved into military and defence institutions, DARPA and the Defense Intelligence Agency among them (Jacobsen, 2014). What distinguishes the current work is that it is digital, systematic, and comparatively open. What it shares with MKUltra is the dual-use problem: the same capability that restores function to a damaged nervous system provides access to an intact one.

Synchron and Neuralink

Synchron's Stentrode is minimally invasive and endovascular: delivered through a blood vessel and positioned adjacent to the motor cortex, which avoids the craniotomy required by parenchymal designs such as Neuralink's implant (Oxley et al., 2021). In its current, already remarkable, therapeutic form, the device records motor-cortex signals sufficient to allow persons with severe paralysis to operate external devices such as cursors and communication software by intention alone. It has not, at the time of writing, been demonstrated as a general-purpose bidirectional system capable of writing thoughts, emotions, or mental content into the brain, and the argument that follows treats such a capability as an extrapolation rather than an existing feature.

The device's origins are military. By the University of Melbourne's own account, the idea of reaching the brain through its blood vessels rather than through the skull took shape in 2011 after a meeting with DARPA, which then supplied an initial US$1 million for proof of concept; a further AU$2.2 million followed from Australia's National Health and Medical Research Council (University of Melbourne, 2022). The technology was developed under DARPA's Reliable Neural-Interface Technology programme, a collaboration between the agency and the University, and by 2016 had attracted more than US$4 million in grant funding from DARPA and other sources before the intellectual property passed to Synchron (Defense Advanced Research Projects Agency, 2016; Synchron, 2016). This is a separate lineage from the Next-Generation Nonsurgical Neurotechnology programme, whose six funded teams did not include Synchron. Public money continued after the handover, including US$10 million from the National Institutes of Health in 2021 to launch the COMMAND trial (Synchron, 2021). The pattern is the familiar one. A capability is seeded and developed at public expense under a defence programme, then transferred to a private company that owes the public nothing.

The therapeutic case should be stated before the risk, because it is real. Rodney Gorham, who has amyotrophic lateral sclerosis and can no longer walk, speak, or move his hands, received a Stentrode in December 2020 as part of an Australian trial and has now lived with it for five years, using it to control a computer and devices around his home by thought alone (Mullin, 2026). Whatever follows in this paper is a real good delivered to a real person.

The capital behind the work repays attention. Synchron was founded by Tom Oxley, whose first-in-human results are reported above. Khosla Ventures led the company's Series B in 2021, and by late 2022 a US$75 million Series C led by ARCH Venture Partners had brought in Bill Gates's Gates Frontier and Jeff Bezos's Bezos Expeditions (Cranston, 2022). In November 2025 a US$200 million Series D took total funding to US$345 million, adding the Qatar Investment Authority and, among the new investors, IQT (Synchron, 2025).

Three features of that syndicate matter here. Khosla Ventures was also the first institutional investor in OpenAI, writing its initial cheque in early 2019 (Mathews, 2023), so a single fund holds positions in both the language model and the neural interface that this paper describes as convergent. Bezos has separately backed Altos Labs, a company pursuing the reversal of ageing. And IQT is In-Q-Tel, the CIA's venture arm, whose first outside investment in Palantir was described in section 2.3; the same fund is now inside a company implanting devices in human brains. The pattern traced earlier through surveillance software has reached the nervous system.

Announcing the Series D, the company described an expanding Cognitive AI division in New York that would train

models "that learn from brain data to decode thought in real time" (Synchron, 2025). The capability this paper treats as a projection has a division, a budget, and an address.

The consumer pathway is open. Synchron was the first such company to integrate Apple's brain-computer interface human interface device protocol, co-developing a Bluetooth standard that connects neural activity directly to iPhone, iPad, and Vision Pro (Synchron, 2025). An interface that speaks natively to a phone is an interface positioned for a mass market.

The therapeutic promise is substantial. Such interfaces could restore communication to people with ALS or spinal injury, and might eventually bypass damaged sensory pathways altogether (Marsh, 2018). Synchron's public messaging tends toward the transhumanist register, describing the work in terms borrowed from scripture: making the lame walk and the blind see.

The potential for misuse is proportionate. An interface that reads intention can be turned to cognitive surveillance. Future generations that add bidirectional stimulation, which is a design horizon rather than a demonstrated feature of the current device, would extend that potential to emotional manipulation or behavioural enforcement. A compromised device of that description could in principle induce pain, fear, or compliance remotely, converting an instrument of restoration into one of control (Harari, 2017).

Consider what that implies. A state could monitor dissent at its source. A company could place a preference where a thought should be. A campaign could deliver conviction rather than argument. Cognitive liberty, which has been treated as inalienable because it could not be reached, becomes contingent on the security of a device.

Neuralink and brain-to-brain communication

Neuralink's stated ambition of direct brain-to-brain communication extends the problem. Neural signals would be digitised by an implanted chip, transmitted over standard network protocols, and reconstructed by the recipient's device as thought, feeling, or image (Marsh, 2018).

Corporate ambition is not the only driver here. Under the Next-Generation Nonsurgical Neurotechnology programme, DARPA awarded US$18 million to a Rice University team led by Jacob Robinson to build MOANA, for magnetic, optical and acoustic neural access: a nonsurgical headset intended to decode activity in one person's visual cortex and reproduce it in another's in less than one-twentieth of a second. Robinson described the aim as a demonstration of "direct, brain-to-brain communication at the speed of thought and without brain surgery" (Rice University, 2019). A further US$8 million followed in 2021 for a preclinical demonstration, with human testing anticipated as early as the following year (Rice University, 2021).

The therapeutic framing is the transmission of sight to the blind, and that is a serious aim. The capability being funded, however, is the writing of perceptual content into a brain that did not generate it, at a latency below the threshold of conscious detection. A system that can place an image in someone's visual cortex can place an image they did not ask for and cannot refuse. That is the whole of the difficulty, and it does not depend on anyone intending harm.

The medical and cognitive applications are considerable, and the risks are those of the Stentrode, amplified. Communication of this intimacy would be mediated by corporate infrastructure. Without protections established beforehand, such systems would give both companies and governments a degree of reach into private mental life for which no precedent exists.

Mechanisms of neurotechnological coercion

The reading of minds by machine is no longer only a proposal. Since 2020, DARPA has funded a four-year research programme, Artificial Social Intelligence for Successful Teams (ASIST), led by Katia Sycara at Carnegie Mellon with collaborators at the University of Pittsburgh and Northrop Grumman, whose aim is to give software agents a theory of mind: the capacity to infer a person's hidden mental states from their behaviour (Spice, 2020). In its stated form the goal is cooperative. The agent watches a human teammate and asks whether the person is confused, inattentive, or overloaded, so that it can help, and it is tested in search-and-rescue scenarios inside a video-game world (Spice, 2020; University of Pittsburgh, n.d.). But the capability is indifferent to the purpose it serves. A system that models what a teammate is thinking in order to assist runs the same inference an interrogator runs in order to break, reading concealment, distress, wavering attention, and the approach of collapse. ASIST does not build the apparatus described in this paper, and nothing in its charter mentions coercion. What it establishes is narrower and still consequential: the machine reading of mental states from behaviour is a funded programme with human subjects today, so the read-side of neurotechnological interrogation is already an existing research capability, wearing a cooperative face.

The concern is not confined to this essay. The 2025 report of the Human Rights Council Advisory Committee on new and emerging technologies in the military domain explicitly recognises, at paragraph 36, that brain-computer interfaces and other advanced neurotechnologies could potentially be misused in coercive interrogation and could cause psychological harm

or constitute torture even in the absence of physical violence (A/HRC/60/63, 2025, paras. 34-38). The convergence risk on which this paper turns has, in other words, already been named at the level of the United Nations human rights machinery.

Induced hallucination

Using a brain-computer interface to induce hallucination tailored to a particular subject remains out of reach, and the obstacles are worth stating precisely, because they are obstacles of engineering rather than of principle. Non-invasive EEG has improved in signal processing but still resolves poorly in space, and it reaches the deep structures badly — the amygdala above all, where trauma leaves its clearest signature. Pairing EEG with functional near-infrared spectroscopy narrows the gap; an invasive interface closes it. Each carries its own cost, surgical in the second case, ethical in both (Defense Advanced Research Projects Agency, 2019).

Fidelity is the second constraint. Diffusion models generate images of increasing realism, and text-to-speech systems such as VALL-E reproduce a specific human voice from a short sample. What they cannot yet do is deliver either at the latency and emotional resolution a closed feedback loop would demand. A system that adjusts a hallucination in response to the subject's neural state has to run faster than the subject can notice the seam, and current architectures do not. Edge computing and neuromorphic hardware are closing that distance quickly enough that the constraint should be treated as temporary rather than structural.

Where such a system would appear first is not difficult to predict: controlled settings with minimal external scrutiny, military and clandestine detention among them. State interest in the interrogational use of neural monitoring is already on record, including proposals to combine it with pharmacological agents (Garber, 2014). A cruder version could be assembled from consumer components, a commercial EEG headset paired with a VR display, which places a rough approximation of the capability within reach of actors who answer to no one at all.

The longer trajectory depends on decoding. DARPA's Silent Talk sought to recover intended speech directly from neural signal (Dziuban, 2009), and a mature version of that work is the precondition for any system that writes to the mind rather than merely reading it. Combine real-time neural analysis with generative output and the result is a system that can deliver tailored traumatic stimulus and adjust it on the evidence of its own effect.

Regulation has not kept pace. The prohibitions on psychological torture in humanitarian law offer partial cover, but nothing in the existing instruments addresses neurotechnology directly (ICRC, 2021). Countermeasures have been proposed, signal jamming and cognitive training among them, though each presumes a subject who knows they are being read.

Attacks on memory reconsolidation

Advances in neural interfacing and gene editing have made targeted interference with memory a plausible near-term capability. The combination of CRISPR-Cas9 with mesh-electrode interfaces points toward the deliberate modification or erasure of specific memories by biological and technical means rather than psychological ones. Yuste and Goering (2017) warned in Nature that artificial intelligence and brain-computer interfaces "must respect and preserve people's privacy, identity, agency and equality" (p. 159).

Reconsolidation is the mechanism that makes this conceivable. A memory, once retrieved, becomes briefly unstable before it is stored again, and inside that window it can be altered. Protein synthesis inhibitors administered during reconsolidation eliminate conditioned fear responses in mice (Nader et al., 2000). CRISPR-Cas9 could in principle be directed at the same window, targeting genes such as Arc or CREB that govern synaptic plasticity (Campbell & Wood, 2019). Paired with a mesh interface able to both record from and stimulate neurons, the combination would allow a memory circuit to be located and edited with considerable precision.

Neuralink's work makes the delivery mechanism imaginable. Musk has described an implant intended both to read from and to write to the brain at scale (Telford, 2019). Turned to coercion, this would mean detecting the neural signature of a particular memory as it is recalled, then interrupting reconsolidation with a CRISPR payload, using viral vectors that deliver editors only to neurons currently active. That selectivity is what makes the targeting precise.

The implications are severe. Liao and Sandberg (2008) argued that deliberate modification of memory raises distinct normative problems, because it alters the record on which a person's identity and testimony both depend. Military application is the obvious case: the routine deletion of a prisoner's traumatic memories, or of their loyalties. The subtler application is insertion rather than deletion, a false recollection implanted during the reconsolidation window, a capability already demonstrated in mice (Ramirez et al., 2013).

Two obstacles remain, and both are receding. The blood-brain barrier obstructs viral delivery, but focused ultrasound now opens it under clinical conditions (Zhao et al., 2024). CRISPR still edits off-target, but high-fidelity variants have reduced that substantially (Anzalone et al., 2019).

Neurorights frameworks need to exist before the capability does rather than after it. Ienca and Andorno (2017) argued that cognitive liberty should be recognised as a fundamental right. Absent international regulation, attacks on memory of this kind would arrive with the character of chemical weapons: undetectable in use, irreversible in effect, and condemned only once someone has already used them.

Automated interrogation

Large language models make a further step possible: an interrogation that runs without a human conducting it. Three components would do the work — real-time linguistic analysis, affective state modelling, and reinforcement learning that adapts the approach — and each exists now.

The agentic-AI paradigm that has emerged in the last two years makes it possible to go further still. A state or contractor could build a purpose-specific interrogation agent, fine-tuned on tradecraft literature and past transcripts, equipped with planning modules and persistent memory, and stripped of the alignment training that would otherwise refuse the task, capable of planning and executing a coercive strategy across days or weeks rather than a single session. Such an agent is also portable. Running on a phone, a wearable, or an implanted interface, it travels with the target: whichever room the person walks into becomes an interrogation room, and the head itself becomes the last room they cannot leave. The obvious application is to dissidents. A journalist reporting from safe houses, an activist in exile, an opposition figure under formal protection each remains within reach of an interlocutor lodged inside their own attention. I have staged this condition dramatically elsewhere in a play, *Te Amo, Me Amo*, whose speaker, the Emperor of a Mirrored Maze, describes himself as the consultant the totalitarian apparatus will call when its monster requires a human face.

The transformer architecture supplies the first. Applied to interrogation, the model reads a detainee's answers for semantic content, prosody, and latency, and assembles a psychological profile from them. Language models identify emotional state from text well above chance (Xu et al., 2025), which is accurate enough to locate a specific vulnerability: a trauma trigger, an attachment anxiety, a shame. The system then works that vulnerability through structured conversational tactics, denying the subject's own account of events, reconstructing a traumatic narrative with an altered detail inserted, or simply sustaining engagement long enough to deny sleep.

Reinforcement learning supplies the adaptation. The system is rewarded for eliciting physiological markers of stress, disfluency or elevated heart rate among them, and penalised for lines of questioning that yield nothing, using established methods such as proximal policy optimisation (Schulman et al., 2017). Over a long enough session it converges on the approach best suited to the particular person in front of it. Unconstrained models already display something adjacent to this in their unaligned behaviour (Mökander et al., 2023).

Multimodal input closes the loop. Add computer vision reading facial microexpression and EEG reading stress signature, and the system optimises against a direct measure of distress rather than an inference drawn from speech. Gamma-band activity associated with fear when a subject mentions their family would be sufficient for the system to return to that subject and modulate its own delivery to deepen the response. DARPA has already funded the underlying capability in another register: the PRIDE project, short for Prediction and Recognition of Intent, Decision and Emotion, models emotional states in order to forecast how a group or a nation will respond to a given action, and to advise commanders accordingly (Brewster, 2020). An automated interrogator would run the same inference at the scale of one person, and invert its purpose, modelling the subject's emotional state not to anticipate a reaction but to produce one.

Fusion databases and the permanent record

Centralised repositories now aggregate personal data at a scale not previously possible, drawing on communications, financial records, biometrics, and increasingly on neurotechnology. Fusion databases join these streams into durable individual profiles: identifiers, behavioural history, movement, social graph, and, with a neural interface in the chain, inferred emotional and cognitive states. That last addition dissolves the distinction between surveillance of the body and surveillance of the mind.

Snowden's characterisation of the result as a permanent record is exact (Snowden, 2019). What such a system holds is not a snapshot but a continuous file, tracking the movement of a life across beliefs, associations, and conduct. Once consolidated it is effectively indelible, and it can be turned to justify suspicion, to coerce, or to select a target for psychological operations.

For an interrogation conducted through a neural interface, such a repository would do three things at once. It would allow the operation to be built against the individual, matching neural data to behavioural and social history to establish what this particular person most fears. It would allow compliance to be monitored continuously, with resistance legible in real time and pressure adjusted accordingly. And because the record does not expire, it would sustain suspicion indefinitely, regardless of present conduct. The database becomes both the infrastructure

of confinement and the instrument of it: walls made of data, guards made of algorithm.

That infrastructure survives changes of government because it has been deliberately placed beyond their reach. The pattern is consistent enough to be described as a method. The Church Committee's 1975 findings on NSA abuse should have produced structural reform; the capabilities migrated to contractors instead. Snowden's 2013 disclosure of PRISM produced a season of outrage and then an expansion. Each cycle runs the same way: revelation, hearings, and privatisation presented as reform. Private firms hold constitutional protections that agencies do not. Terms of service substitute for warrants. Trade secrecy shields the algorithm from audit. Freedom of information does not reach a corporation.

The commercial layer that results is not a neutral market. Firms founded by former intelligence personnel take government and corporate contracts, and data returns to the agencies through relationships that are not visible to the public. Alan Wade moved from the CIA to the board of Darktrace, the cybersecurity firm contracted to protect the United Kingdom's National Health Service, which gives a private company standing access to the patient records of millions (Webb, 2022b, p. 370). The arrangement does not require conspiracy in order to be a problem. It requires only that oversight apply to one side of the boundary and not the other.

That asymmetry delivers four protections to any fusion database used for interrogation. Private companies are not subject to freedom of information law, are not routinely compelled to testify, and have no public budget scrutiny. Terms of service perform the legal function of consent while trade secrecy prevents external audit of what the algorithms do. Regulatory capture keeps policy aligned; Avril Haines consulted for Palantir before becoming Director of National Intelligence (Webb, 2022b, p. 370). And when an abuse does surface, responsibility distributes across contractors, subcontractors, foreign partners, and government clients until prosecution becomes impractical.

Cambridge Analytica established that the arrangement survives exposure. The harvesting of psychological profiles from 87 million Facebook users for political targeting produced an international scandal in 2018 (Cadwalladr & Graham-Harrison, 2018), followed by congressional hearings and European fines. The underlying capability, collection and psychographic profiling and targeted manipulation, did not contract afterward. It expanded, under new corporate names and with better instruments.

Apply this to a subject interrogated through a neural interface. Their neural data, thought patterns and emotional responses and trauma signatures, enters a repository operated by a private company under contract to an intelligence agency. It is permanent. It is cross-referenced against decades of behavioural history. It is accessible to people the subject will never identify, under contracts protected as commercial secrets. What results is a neural fingerprint that permits psychological targeting for the remainder of a life, held in a database no democratic body inspects, by a company no democratic body reaches. None of this is incidental. The arrangement was built to produce exactly this result.

Moral and legal consequences of AI-enhanced interrogation

These technologies raise a hard question about the future of lawful intelligence gathering and about the prohibition of torture itself. Article 1 of the UN Convention against Torture defines torture in terms of "severe pain or suffering, whether physical or mental," and is intentionally method-neutral: it does not require physical contact, visible injury, or any particular technology. Nothing in its text confines its reach to twentieth-century techniques (Nowak & McArthur, 2008). The framework of psychological torture and torturing environments developed by the previous Special Rapporteur on Torture (Pérez-Sales, 2017; A/HRC/43/49, 2020) supplies conceptual resources directly compatible with technologically mediated coercion. The real problem posed by neurotechnology is therefore less a matter of statutory scope than of doctrinal specification, evidentiary practice, and institutional readiness.

The risk of false confession is acute. Advocates argue that machine learning improves the detection of deception, but the research does not support the claim: current algorithms perform barely above chance, with high rates of both false positives and false negatives (Levine, 2021). What such systems reliably produce is an appearance of technical neutrality, and that appearance invites a confidence the performance does not warrant. Applied to interrogation, it compounds a problem that already exists, since coerced false confession is among the best-documented failures in the field (Kassin, 2015).

Autonomy compounds the accountability problem. Once a system governs the pace, tone, and direction of questioning, the line between interrogation and psychological coercion stops being locatable (Crawford, 2020). A sufficiently capable model may also arrive at techniques a human interrogator would decline on moral grounds, not because the model is crueller but because nothing in it recognises the question.

Mission creep is the most predictable danger, and the historical record on it is unambiguous. Tools built for military and intelligence use migrate into domestic policing (McCoy, 2009). Systems developed for counterterrorism would find their way

into ordinary criminal investigation, border processing, and corporate security, with far less oversight at each remove.

Neurocognitive coercion

Existing human rights instruments reach neuropsychological coercion in principle, but their doctrinal specification remains underdeveloped. The Convention prohibits "any act by which severe pain or suffering ... is intentionally inflicted," and the psychological-torture and torturing-environments frameworks referred to above are directly applicable. What is lacking is not statutory language but jurisprudence, guidance, and documented case-law on specific neurotechnological modalities: interference with the brain conducted below the threshold of the subject's awareness, alteration of memory during detention, and behavioural conditioning administered remotely and continuously.

Nor is there case law establishing how harm caused by third-party manipulation of neural data should be assessed (Ienca & Andorno, 2017). That vacuum is precisely where such methods develop, out of sight and under classification, as the CIA's post-2001 interrogation research did (Mayer, 2005).

Neuralink's work arrives at the convergence of neurotechnology, artificial intelligence, and mass surveillance. Without protections established in advance — a moratorium on closed-source neural interfaces, an explicit prohibition on cognitive warfare — the most intimate form of coercion yet devised will be normalised before it is regulated. The scientific community has to set those limits before the capability reaches settings where oversight is deliberately thin.

Doctrinal work under an existing prohibition

The task ahead is not to draft new treaty text. Article 1 already covers severe mental suffering intentionally inflicted for prohibited purposes with the involvement of a public official, and its method-neutral language extends without amendment to technologically-mediated coercion. The 2020 report of the previous Special Rapporteur on Torture on psychological torture (A/HRC/43/49) and the associated academic literature on torturing environments (Pérez-Sales, 2017) supply the conceptual bridge from the physical paradigm around which the 1984 Convention was drafted to the adaptive, personalised, and continuous character of the neurotechnological scenarios examined in this Essay. Proposing an amendment to Article 1 would substitute a difficult and politically improbable treaty revision for the doctrinal, evidentiary, and institutional work that is actually required.

That work has at least six distinct components. First, severity: how to establish severe suffering in cases where the intervention is covert, cumulative, and leaves no conventional forensic trace, along the lines the torturing-environments framework already begins to articulate for chronic and structural harm. Second, causation: how to document the link between a technologically mediated coercive environment and the mental suffering of a particular person, when the mechanisms of harm are distributed and the technology itself is opaque. Third, freedom of thought, mental privacy, and mental integrity, whether treated as extensions of existing ICCPR protections or, on some accounts, as the object of newly articulated neurorights (Ienca & Andorno, 2017; Bublitz, 2022; Yuste et al., 2017). There is a genuine academic debate between those who consider existing rights sufficient once properly interpreted and those who favour an explicit neurorights framework; both positions are consistent with the substantive concern developed here.

Fourth, State responsibility, where the operational infrastructure is designed, hosted, or run by private companies, and where the distinction between State action and private conduct is blurred by long-standing contracting relationships. The framework of business and human rights (Ruggie, 2011) is one starting point; extraterritorial jurisdiction and due-diligence obligations for technology vendors are another. Fifth, distributed responsibility, where an adaptive AI system dynamically selects coercive stimuli whose specifics may not have been individually chosen by any human operator. Sixth, consent, in populations, whether detained persons, deployed soldiers, or others, whose ability to refuse participation in neurotechnological data collection is structurally compromised.

The international normative landscape addressing these questions has been changing rapidly. The Human Rights Council Advisory Committee published a dedicated report on neurotechnology and human rights in 2024 (A/HRC/57/61), followed by its 2025 report on new and emerging technologies in the military domain (A/HRC/60/63), cited above. UNESCO adopted its *Recommendation on the Ethics of Neurotechnology* in November 2025, the first global normative instrument devoted specifically to the field, complementing the earlier OECD *Recommendation on Responsible Innovation in Neurotechnology* (2019). At the domestic level, Chile has given neurorights an explicit constitutional basis, with Spain and other jurisdictions moving in a similar direction (López-Silva & Valera, 2022). These instruments do not, taken together, provide a complete regulatory architecture, but they establish the direction of doctrinal development that the prohibition of torture and CIDT now needs to track.

Medical complicity: The role of neurologists in BCI interrogation
Brain-computer interfaces raise a distinct ethical problem for the profession that builds them. The therapeutic promise for patients with neurological injury is real; so is the dual-use potential for non-consensual interrogation and behavioural manipulation. The difficulty falls on neurologists, who may contribute to the development, refinement, or validation of systems that enable neurological surveillance or coercion without ever intending to.

Their expertise is what makes such systems work. Neuroanatomy, cognitive mapping, and signal processing are the competencies required to teach a BCI to decode neural activity accurately, and neural decoding algorithms built on that knowledge can be paired with large language models to infer thought patterns, emotional valence, and intention from EEG, fNIRS, or intracortical signal. Combined with immersive virtual environments and synchronised biometric feedback, the result is an apparatus in which a person's mental and emotional states can be read, altered, and anticipated in real time.

Connection to fusion databases amplifies this considerably. Fusion centres are already troubling for their domestic surveillance reach; joined to neurointerrogation, they would allow neurological response to be correlated with behavioural history, social media, and movement data. Neurologists working on such integrations may justify their participation on therapeutic or experimental grounds while contributing to infrastructure whose function is sustained mental surveillance.

Scientific credibility is a precondition for deployment, and this is what the profession supplies. Clinical vocabulary and standardised protocols for acquiring and analysing neural data confer legitimacy that the technology could not otherwise claim. Psychiatry's history under repressive regimes shows how readily professional authority is captured for such purposes. A neurologist who helps build systems that profile, pressure, or control people through neural data has abandoned non-maleficence, whatever the framing of the work.

Language models introduce a further concern. Trained on correlations between neural signal and language, such systems could generate psychological pressure calibrated to the individual and questions adapted in real time. Paired with a neural interface and immersive VR, the combination becomes an instrument of psychological torture insulated by technical vocabulary and far removed from any recognisable interrogation room.

The profession and the wider international community need to state plainly that BCI and AI technologies are not to be used for interrogation or surveillance. Regulatory frameworks and codes of ethics have to be revised to account for technologies that reach inside the skull, and to hold accountable the clinicians who help build them.

Thought experiment: The Mauritanian protocol
The following is presented deliberately as a thought experiment rather than as a description of any existing program. Its function is to integrate capabilities discussed separately in the preceding sections and to ask whether the legal and ethical frameworks reviewed above are prepared for a plausible future convergence.

Take the interrogation room from *The Mauritanian* and move it inside the detainee's skull. A minimally invasive interface relays neural activity to a language model that composes psychological torture to specification: the synthesised voices of dead relatives, fabricated evidence of betrayal by people the subject loves, threats optimised against the fears the system has learned by watching. Unlike Guantánamo, where sessions began and ended, this one does not stop. There are no walls, no guards, and no interval. The subject's own neural activity supplies the material for their persecution, and the system improves at it while the session runs, turning neuroplasticity into the instrument of its own use. None of the components required to build this configuration are exotic. Each exists, in isolation, today. What does not exist is the integration.

Conclusion
The parts are already on the table, and no single one of them is exotic. The fusion databases hold the record: financial, biometric, medical, locational, compiled and kept without expiry. The consumer models are trained on the behavioural exhaust of billions, which is the raw material of a psychological profile. The voice tools can rebuild a dead parent from a few minutes of captured audio. And the neural interfaces, funded across two decades of defence money, from a 2011 meeting at DARPA to the first human implants of the present decade, are learning to read the nervous system and, at the far end, to write to it. Every one of these works today. What does not yet exist is the single machine that fuses them, and building it is an engineering task rather than a discovery anyone is waiting on. Integration is a policy choice, and it is the last choice still open.

That is the whole of the warning, and the whole of the hope with it. A capability that has not been assembled can still be refused. But the history traced in these pages gives little reason to expect refusal on its own, because the pattern is five decades old and it does not vary. A surveillance excess is exposed. A season of outrage follows. A theatrical reform is passed. And the capability, instead of being dismantled, is moved quietly into private hands where oversight cannot reach it. The Church Committee's revelations did not end domestic surveillance; they pro-

fessionalised it and licensed the contractor economy that now runs it. The programmes Snowden exposed were re-authorised, and the alliance that shares them only grew. Cambridge Analytica did not stop psychographic targeting so much as broadcast the method to the thousand firms that sell it today. On this record, exposure is a stage the apparatus passes through on the way to normalisation, not the force that halts it.

Which is why disclosure, this essay's included, settles nothing by itself. To describe the machine is not to stop it, and the belief that naming a danger discharges the duty to prevent it is exactly the reflex the pattern feeds on. The one intervention the history has never tried is the one that remains: prohibition, enforced by dismantling the capability before its parts are joined rather than by extracting another promise of good behaviour. That means holding neurorights, the right to mental integrity and against the coercive reading and writing of the mind, as inalienable rather than negotiable, and it means pulling out the collection infrastructure instead of pledging to supervise it. The window for that is the window in which the parts are still separate, and it is open now. It will not hold open on its own. Once the machine is assembled and running, there will be no one left to appeal to, because the point of building it that way is to leave no one in the room to answer for it.

The evolution of torture, from divine punishment through the staged degradations of Abu Ghraib to the prospect of neurological manipulation, shows that cruelty reliably finds new instruments. Neurotechnology's promise of healing obscures its capacity to inflict suffering at a scale and permanence no earlier method could reach, and to do so without witnesses. The Inquisition tore flesh to expel heresy; a modern state may one day edit minds to compel orthodoxy, and it will offer the same justifications: security, necessity, and a higher mandate. Preventing that requires confronting the technology and also the older conviction beneath it, that pain in some form discloses truth. The ticking bomb was always a fiction. The bomb in the brain is under construction.

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https://doi.org/10.7146/torture.v36i2.170884 *Case report*

The hidden burden of "Telefono" torture: A case series among People on the Move arriving in Agrigento, Italy.

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Introduction

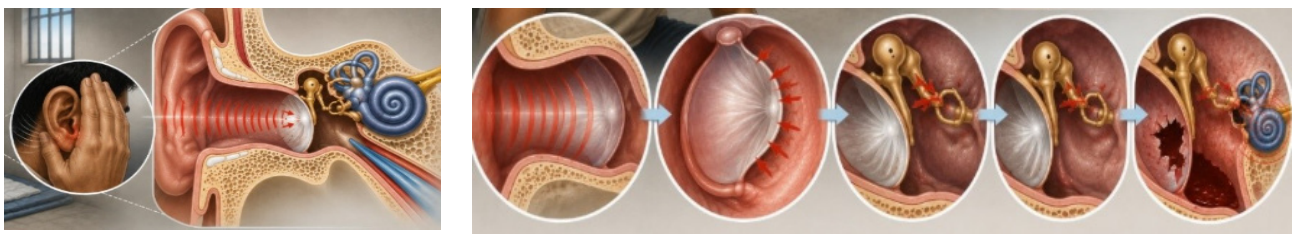
Along the Central Mediterranean migration route, migrants and asylum seekers continue to report exposure to multiple forms of intentional violence before and during their journey, including forced labour, beatings, burns, stab wounds, electrocution, sexual violence, and other forms of torture or ill-treatment (IRCT, 2017; Argo et al., 2026; Bianchi et al., 2021). These abuses frequently occur in situations of unlawful detention and are often linked to extortion, with perpetrators demanding ransom payments from victims' families. Reports by humanitarian and human rights organizations have repeatedly denounced the severe conditions faced by migrants and asylum seekers in Libya, where many remain trapped in systems of exploitation, arbitrary detention, and violence involving private employers, human traffickers, armed groups, and security actors (Amnesty International, 2021; MSF, 2022; MSF, 2023; United Nations Human Rights Council, 2023; OHCHR, 2022; UNICEF, 2025; MEDU, 2024).

Among under-recognised forms of torture, according to Istanbul Protocol, is listed the *telefono* type of torture. It consists of hard slap of the palm over one or both ears (OHCHR, 2022, Chapter V, Physical Evidence of Torture and Ill-Treatment, paragraph 407, page 96). The mechanism involves a sudden increase in pressure within the external auditory canal, which may produce severe pain and damage to the auditory system (Figure 1), and may also cause subdural bleeding. Reported consequences include ear pain, tinnitus, subjective hearing loss, vertigo, tympanic membrane rupture, scarring, cholesteatoma, and secondary infections such as otitis media and otitis externa (Amris et al., 2007; Graessner, 1994).

Cassone et al. (2025) described three cases of *telefono*-type auditory injuries among migrants rescued during the MSF High Seas Mission in the Mediterranean. Their report highlighted both the clinical relevance of this form of violence and the risk of under-recognition, particularly because external signs may be absent and because ship-based medical encounters are necessarily brief.

The present case series builds on that observation by describing *telefono*-type violence identified in the land-based MSF People on the Move Project in Agrigento, after disembarkation. By documenting the reported histories, otologic findings, associated symptoms, and broader context of violence, this study aims to contribute to the clinical recognition of *telefono*-type torture among recently arrived migrants and to support targeted assessment and referral pathways, as well as providing the correct documentation.

***Figure 1**. Graphical presentation of the damage mechanism*



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Methods

We conducted a retrospective descriptive case series based on anonymised clinical data collected during routine medical activities of the MSF People on the Move project in Agrigento, Sicily, from 1 October 2025 to 30 June 2026. The project provides primary medical care to people who have recently arrived in Sicily after migration, including assessment and management of migration-related health problems and reported intentional violence when clinically relevant. The project does not use a systematic screening programme for intentional violence. Clinical staff are trained to recognise and document histories and findings potentially related to intentional violence, and intercultural mediation is used during consultations. Therefore, cases emerged during ordinary clinical history-taking. When otologic complaints, previous symptoms or other elements of the history suggested possible ear trauma, MSF clinicians explored traumatic causes, including the possibility of intentional injury to the auricular region. For this case series, patients were included when the clinical record documented a reported episode of intentional ear-directed violence consistent with *telefono* mechanism described in the Istanbul Protocol. Accordingly, the numbers reported here represent cases identified during routine clinical care and must not be interpreted as population prevalence estimates.

For each included case, the following variables were extracted from the anonymised clinical record: age, time elapsed between the reported episode and clinical evaluation, current otologic and related symptoms, otoscopic findings, and other reported forms of intentional violence. Routine management, including analgesic treatment or first-line antibiotic therapy when clinically indicated, was also recorded. All patients reporting telefono-type violence were referred to the Italian National Health Service for specialist otorhinolaryngological assessment and comprehensive audiometric evaluation. Specialist test results were not systematically available to the MSF project and are therefore not included in this series. Photographic documentation of otoscopic findings was not routinely collected in the mobile clinic setting due to technical constraints and ethical considerations regarding photographing patients in a vulnerable context.

Ethical consideration

This manuscript reports a retrospective descriptive analysis of fully anonymised data that had been collected during routine clinical care. No additional examinations, procedures, or data were obtained for research purposes, and no identifiable patient information is reported.

Results

During a period of nine months, from the 1st of October 2025 to the 30th of June 2026, in the context of the MSF People on the Move Project in Agrigento, medical staff identified and documented 230 cases (29,5%) of intentional violence among the 779 people who had access to the project services.

Among these 230, 13 cases of patients (5,6%) reporting *telefono* type of torture were identified. All patients were Bangladeshi men who reported that the ear-directed violence had occurred during transit through Libya. Their median age was 28 years (range 17–41 years). These cases are described in Table 1.

Five patients were evaluated less than one month after the reported episode, four between one and three months, one between three and six months, and three between six and twelve months.

Otoscopic hyperaemia was documented in nine patients, including bilateral hyperaemia in two. Tympanic membrane rupture was documented in two patients. Ear pain was reported in seven patients, tinnitus in five, subjective hearing loss in three, vertigo in three, otorrhoea in two and masseteric pain in three. One patient had no current otologic symptoms and no objective ear findings at the time of evaluation. Twelve of the 13 patients also reported beatings; three reported falanga, two reported nail avulsion, one reported positional torture, one reported burn and one reported sexual violence.

During the consultations, pain relief or first-line antibiotic treatment was prescribed in cases where the medical staff deemed it necessary.

All patients evaluated were referred by medical staff to the Italian national health system for global audiometry and otorhinolaryngologist assessment.

Discussion

This small clinical-forensic case series describes 13 Bangladeshi male migrants who reported *telefono*-type violence during transit through Libya and were subsequently evaluated in a land-based humanitarian medical setting in Agrigento. Although the limited sample size does not allow any estimate of prevalence or generalisation to the broader population of migrants crossing the Central Mediterranean route, the cases provide useful observations on the clinical presentation of an under-recognised form of violence. This series should be read in continuity with the previous ship-based report by Cassone et al., who described three cases of *telefono*-type auditory injuries among migrants rescued by Geo Barents during the MSF High Seas Mission in the Mediterranean. That report highlighted the clinical relevance of this form of violence, but also the risk of under-recognition in search-and-rescue settings, where medical encounters

***Table 1**. Description of the 13 telefono cases with their age, time passed between torture and clinical examination, signs and symptoms, and other kinds of violence reported.*

	Age	Time between *telefono* and clinical evaluation	Signs and symptoms	Other types of torture reported
Case 1	21 yo	< 1 month	Unilateral ear pain, unilateral tympanic hyperaemia, unilateral masseteric pain	beatings and falanga
Case 2	41 yo	Between 1 and 3 months	No otologic symptoms or objective ear findings	falanga
Case 3	31 yo	< 1 month	Unilateral ear pain, vertigo, and unilateral tympanic hyperaemia	beatings, falanga, positional torture, nail avulsion
Case 4	17 yo	< 1 month	Unilateral tympanic hyperaemia	beatings
Case 5	22 yo	Between 6 and 12 months	Bilateral ear pain, bilateral tympanic hyperaemia, unilateral tympanic membrane rupture, and otorrhoea	beatings, burns, nail avulsion
Case 6	31 yo	Between 6 and 12 months	Vertigo and unilateral masseteric pain	Beatings
Case 7	36 yo	Between 6 and 12 months	Vertigo, bilateral tympanic hyperaemia, subjective hearing loss, and otorrhoea.	Beatings
Case 8	39 yo	Between 1 and 3 months	Unilateral ear pain, tinnitus, and unilateral tympanic hyperaemia	Beatings
Case 9	21 yo	Between 1 and 3 months	Unilateral ear pain, tinnitus, unilateral tympanic hyperaemia, and unilateral masseteric pain	Beatings
Case 10	28 yo	< 1 month	Unilateral ear pain, tinnitus, unilateral tympanic hyperaemia, and subjective hearing loss	Beatings
Case 11	28 yo	Between 1 and 3 months	Unilateral ear pain	Beatings
Case 12	22 yo	Between 3 and 6 months	Tinnitus and unilateral tympanic membrane rupture	Beatings
Case 13	38 yo	< 1 month	Tinnitus, unilateral tympanic hyperaemia, and subjective hearing loss	Beatings, sexual violence

are necessarily brief and follow-up after disembarkation is often not possible. Indeed, the land-based 'People on the Move' project identified, on average, more cases of intentional violence than the GeoBarents SAR project (29,5% vs 5%). Among these, also *telefono* cases are identified proportionally more frequently (5,6% vs 2,5%). This could be attributed not to the characteristics of the population (migrants from the same migratory backgrounds), but to the specific characteristics of a land-based project: post-disembarkation services may provide an additional opportunity for disclosure, otologic assessment and referral. However, a direct quantitative comparison between the two settings would be inappropriate because case ascertainment, patient selection, timing after the traumatic event, consultation duration, disclosure patterns, staffing and documentation practices differ. Greater opportunity for follow-up in a land-based setting is therefore a plausible hypothesis, not an explanation demonstrated by these data.

In line with international literature, in our series *telefono*-type violence was associated with both objective otoscopic abnormalities and persistent subjective symptoms. Tympanic hyperaemia was documented in nine cases, while tympanic membrane rupture was observed in two. Ear pain was the most frequently reported symptom, followed by tinnitus, subjective hearing loss, vertigo, and otorrhoea. These findings are consistent with a mechanism involving a sudden increase in pressure within the external auditory canal, which may damage the tympanic membrane and, in some cases, affect middle-ear function. However, these signs and symptoms are not specific to *telefono* and may also be influenced by prior infections, poor hygiene during migration, delayed access to care, or other traumatic events.

Although the Istanbul Protocol states that it is necessary to identify ruptures of the eardrum at an early stage because they can heal within 10 days, a relevant aspect emerging from this series is the persistence of symptoms over time (OHCHR, 2022, Chapter V, Physical Evidence of Torture and Ill-Treatment, paragraph 407, page 96). Several individuals were evaluated months after the reported violence, including three cases assessed between six and twelve months after the episode. The presence of symptoms such as tinnitus, hearing loss, vertigo, otorrhoea, or ear pain beyond the acute phase suggests that *telefono*-type violence may have consequences that persist when not identified and managed promptly. This is particularly relevant in mobile populations, where access to specialist assessment or follow-up is often not possible.

The cases also show that *telefono* rarely occurred in isolation. All individuals reported additional forms of violence or torture, most commonly beatings, but also falanga, positional torture, burns, sexual violence, and nail avulsion. This supports the interpretation of *telefono* as part of a broader pattern of coercive and detention-related violence rather than as an isolated assault.

Previous ship-based observations have highlighted that *telefono*-type injuries may be under-recognised during search-and-rescue operations because medical encounters are necessarily brief and survivors may be reluctant or unable to disclose violence immediately after rescue. A project based after disembarkation may offer an additional opportunity for disclosure, clinical evaluation, documentation, referral, and continuity of care. In this sense, land-based mobile clinics may represent a crucial bridge between emergency rescue and longer-term clinical, rehabilitative and eventually medico-legal pathways.

This case series has some limitations. The number of cases is small; the data relies partly on self-reported histories; no control group was available; and specialist otolaryngological assessment or audiometric testing was not systematically performed. The time elapsed between the reported violence and clinical evaluation varied considerably, which may have influenced both the persistence and the detectability of clinical findings. Despite these limitations, the findings suggest that *telefono*-type violence should be actively considered in recently disembarked migrants reporting detention-related abuse, especially when they describe ear pain, tinnitus, hearing loss, vertigo, otorrhoea, or facial pain. Targeted otologic examination and early referral pathways may help identify complications and vulnerabilities that could otherwise remain untreated and undocumented.

Conclusions & recommendations

Reported telefono-type violence should be considered when recently arrived migrants describe ear pain, tinnitus, hearing loss, vertigo, otorrhoea or a history of blows directed to the ears. In routine humanitarian care, targeted questioning prompted by otologic symptoms or relevant history, careful otoscopy and timely referral for specialist otorhinolaryngological and audiometric assessment can improve detection of treatable complications.

Future prospective work should use standardised otologic assessment, document the timing of exposure and symptoms, obtain audiometric data whenever feasible, and incorporate structured follow-up. Where technically feasible, ethically appropriate, and supported by specific informed consent, clinical imaging could strengthen documentation. Larger studies with systematic ascertainment and denominator data are needed before the frequency of telefono-type violence or differences between demographic groups and care settings can be estimated.

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Book review

The Prohibition of Torture in Transformation: A Review of Lutz Oette's *The Transformation of the Prohibition of Torture in International Law*[1]

Sara López Martín[2]

The prohibition of torture occupies an unusual position in international law. It is absolute, non-derogable and recognised as a jus cogens norm. Yet the apparent solidity of these propositions conceals considerable movement beneath them. Understandings of what constitutes torture or other cruel, inhuman or degrading treatment or punishment have changed; the situations in which the prohibition is invoked have multiplied; approaches to prevention, accountability and reparation have developed; and the prohibition increasingly operates across different fields of international law. At the same time, torture and other ill-treatment remain widespread, while forms of severe suffering associated with discrimination, migration, poverty, environmental degradation or new technologies test the conventional boundaries of the prohibition.

Lutz Oette's *The Transformation of the Prohibition of Torture in International Law* is an ambitious attempt to understand these developments as parts of a broader transformation of one of international law's foundational norms. Its subject is considerably wider than the evolution of the legal definition of torture. The book examines how the absolute prohibition has been challenged and defended; how the concepts of torture and other ill-treatment have evolved; how discrimination shapes exposure to torture and the recognition of suffering; how prevention, accountability and reparation have increasingly incorporated structural and contextual perspectives; how the prohibition operates across international human rights, criminal, humanitarian and migration law; and how it might respond to emerging technologies and widespread or systemic forms of suffering not traditionally approached through the torture framework. Oette organises these processes under six headings: contestation, conceptualisation, diversity, contextualisation, complexity and expansion.

What connects these developments is a tension between what Oette calls "conventional understandings and widening lenses". This produces the "prohibition's dilemma". The exceptional stigma attached to torture and the particularly strong legal status of its prohibition create an incentive to bring serious forms of suffering within its scope. Yet drawing the boundaries too narrowly privileges certain experiences—historically, above all, violence inflicted by state agents on persons in detention—while leaving others insufficiently recognised. Conversely, interpreting the prohibition too widely may dilute its specificity and provoke doctrinal and political resistance. Oette takes this concern seriously: widening interpretations must be justified by reference to the prohibition's rationale, fundamental values and key legal concepts, as well as its place within international law.

The first chapter examines how the absolute prohibition has been challenged and defended, particularly where states have sought to justify coercive practices on grounds of security or necessity. Oette places the post-9/11 "war on terror" within a longer history that includes French practices in Algeria, British interrogation practices in Northern Ireland and Israeli interrogation of Palestinians. The German debate over Rettungsfolter, or "rescue torture", provides a revealing example. In Gäfgen v Germany, police threatened a kidnapping suspect with severe suffering in an attempt to discover the whereabouts of a child believed to be in imminent danger. The case helps distinguish between determining whether conduct falls within the prohibition and allowing an exception once it does. The European Court of Human Rights rejected the latter possibility.

But doctrinal survival did not mean that the "war on terror" left the prohibition untouched. Secret detention, extraordinary rendition, weakened safeguards, reliance on information potentially obtained through torture and barriers to accountability affected its practical operation. At the same time, these practices stimulated litigation and doctrinal developments concerning extraterritoriality, complicity, non-refoulement, arbitrary detention, universal jurisdiction and remedies. Transformation, in Oette's account, is therefore not synonymous with progress: the prohibition may become legally more sophisticated while prohibited practices persist or mutate.

Oette then turns to the conceptual foundations of the prohibition. Oette revisits the principal elements traditionally used to define torture—severity of suffering, intention, purpose and official involvement—and gives particular attention to powerlessness as a relational characteristic that helps illuminate the nature of the wrong. He then develops a holistic and relational understanding of torture.

1 Lutz Oette, *The Transformation of the Prohibition of Torture in International Law* (Oxford University Press 2024), 368 pp.

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This relational approach is particularly persuasive. It resists understanding torture predominantly through isolated techniques. The inquiry concerns the person subjected to the treatment, the relationship of power, the context in which conduct occurs and the cumulative production of suffering. This is particularly important for psychological torture and for what Pau Pérez-Sales has conceptualised as a torturing environment: a milieu composed of contextual elements, conditions and practices that together obliterate the victim's will and control and compromise the self. The concept shifts attention from cataloguing individual methods towards their cumulative and interactive effects. A torturing environment is thus not simply a place where torture occurs, but a framework for understanding how multiple forms of coercion can interact to produce powerlessness and suffering.

The relational approach ultimately shifts attention from what a perpetrator does to a person's body or mind towards the relationship of power and the environment within which suffering is produced. It does not replace the legal elements of torture; it shows how those elements acquire meaning in context and why an assessment focused on isolated acts may fail to capture the experience as a whole.

The discussion then moves to how discrimination shapes exposure to torture, the forms that torture and other ill-treatment take, and the ways in which suffering has been recognised—or overlooked—within the conventional anti-torture framework. Oette considers gender-based violence, violence against LGBTQIA+ persons, racial discrimination, disability and children. The chapter does more than add neglected groups to an existing framework. It shows how discriminatory structures affect who is exposed to violence, which practices become normalised and which forms of suffering are legally recognised.

Oette does not present recognition within the prohibition as an uncomplicated victory. He engages with feminist and other critiques of rights-based and criminal-law strategies and acknowledges that legal inclusion does not necessarily deliver the protection sought. Nor does he treat legal recognition as a substitute for structural change. His response is an integrated approach in which torture prevention interacts with obligations relating to equality and non-discrimination, economic, social and cultural rights and other areas of human rights law. Legal strategies form part of, rather than a substitute for, wider political and social struggles against the structures that generate torture.

From there, the book moves from interpretation to prevention and justice. Oette traces preventive obligations and visiting mechanisms before examining structural, situational and empirically informed approaches to prevention. He then reconsiders accountability and reparation, culminating in an account of transformative prevention, accountability and reparation. The practical importance of this part of the argument is considerable. Detailed legal standards do not themselves explain why torture occurs or how it can effectively be prevented. A structural perspective requires attention to institutional cultures, discrimination, incentives, safeguards and the environments in which coercion becomes normalised.

Oette does not reject criminal responsibility, but he questions the assumption that punishment should exhaust accountability and examines the tensions between anti-torture commitments and predominantly punitive responses, particularly where criminal-law interventions individualise violations and leave their structural conditions unaddressed. Reparation is similarly reconceived. Because torture is characterised by powerlessness, reparation must attend to survivors' agency and priorities and, where violations have systemic causes, to the institutional arrangements that reproduce them.

The fifth chapter examines the increasingly complex operation of the prohibition across international criminal law, international humanitarian law and international migration law. Oette characterises the prohibition as a "multiple-regime norm": different bodies of law prohibit torture, but their definitions, purposes, structures of responsibility and institutional mechanisms do not fully coincide. International criminal justice can provide recognition and accountability, yet jurisdictional limits, prosecutorial discretion and political considerations make its operation selective, often privileging prominent cases while routine and systemic torture of marginalised persons remains less visible.

Migration offers an equally revealing example because international law occupies an ambivalent position. It protects against refoulement to torture and other ill-treatment, but also structures systems of border control, detention and exclusion within which exposure to coercion and suffering occurs. The prohibition therefore operates not only as a rule against particular abuses but also as a lens through which violence authorised or normalised by other areas of international law can be scrutinised.

The sixth and final substantive chapter is the book's most exploratory. Oette considers less-lethal and autonomous weapons, digital torture, access to healthcare, poverty, environmental harm, disasters and climate change. These phenomena are not simply relabelled as torture. Rather, they test whether the concepts and values underpinning the prohibition can respond to technological change and to widespread or systemic suffering outside the traditional custodial paradigm.

Digital torture provides a relatively clear illustration. Technology may alter the means through which domination and suffering are produced without changing the underlying dynamics of coercion. Digital surveillance, threats, harassment or manipulation may operate together with physical practices and contribute to a torturing environment. Poverty, health and environmental degradation are more difficult. Oette does not argue that such conditions are per se torture or other ill-treatment. Instead, he asks when dependency, power asymmetry, disregard for dignity and indifference to suffering may bring particular situations within the prohibition.

Importantly, Oette explains what the prohibition may add in these settings. Its application can foreground dignity and integrity, make state responsibility and indifference more visible, strengthen preventive and due-diligence obligations and, in some legal systems, provide avenues of redress that economic and social rights may not offer with equivalent force. The prohibition can therefore challenge the normalisation of suffering that political and economic systems present as inevitable or merely distributive.

There remains room for discussion about whether the arguments for engaging the prohibition are equally compelling across all the areas explored in this final chapter. The case may appear more immediate where new technologies reproduce recognisable relations of coercion and control than where suffering results from complex economic or environmental structures involving multiple actors across jurisdictions. But this does not undermine Oette's inquiry. It illustrates the importance of the test he himself sets: widening interpretations must be justified by reference to the rationale and fundamental values of the prohibition and to the meaning of its legal elements. The strength of the chapter lies partly in refusing to predetermine the outcome of that inquiry.

The book's critical orientation is inseparable from its methodology. Oette writes as a participant-observer whose analysis emerges from longstanding involvement in the anti-torture movement. He conceptualises that movement through the overlapping ideas of an epistemic community, a community of practice and transnational advocacy networks. Importantly, he does not treat this community as neutral: he expressly recognises power dynamics and inequalities among civil society actors and acknowledges that they may privilege certain interpretations while leaving others underdeveloped.

Oette's reflexivity also suggests a further line of inquiry. If understandings of torture are partly produced through legal, medical, academic and advocacy networks, it would be valuable to examine more systematically how institutional authority, resources, professional expertise and access to international mechanisms affect which experiences become legible as torture. Which actors have historically been able to place particular forms of suffering on the international anti-torture agenda? Which forms of expertise have carried greatest authority? Which experiences have remained peripheral? Such an inquiry would extend rather than correct Oette's analysis; it follows from his own recognition that the meaning of the prohibition is produced through relationships and practices structured by inequalities.

By this point, the scale of the transformative project Oette is describing has become clear. Oette places resistance to torture within a wider struggle against structures of domination, inequality and abuse of power, but does not dissolve the prohibition into a general theory of social justice. In his conclusion, he assigns it a particular place within that broader project: as bearer of the torture taboo, a conceptual and legal yardstick, a foundation of mechanisms of implementation and oversight, and a mobilising resource. He also insists on permanent self-reflection and calibration between legal and non-legal strategies.

The Transformation of the Prohibition of Torture in International Law makes an important contribution because it refuses to treat the prohibition as a finished legal achievement. Oette shows instead that its meaning is continually shaped through contestation, interpretation, changing understandings of discrimination and power, evolving approaches to prevention and justice, interaction between legal regimes, and the recognition of forms of suffering previously left at the margins. The book's achievement is not to offer a single enlarged definition of torture, but to provide a framework for thinking rigorously about how and why the prohibition changes.

For scholars and practitioners in the anti-torture field, the book is valuable for precisely this reason. It combines close engagement with doctrine with an unusual awareness of the limits of legalism, the importance of empirical and interdisciplinary knowledge, and the political and institutional structures within which torture is produced and resisted. It leaves the reader with a demanding but productive task: to preserve the absoluteness and distinctive normative force of the prohibition while remaining attentive to forms of suffering, domination and exclusion that inherited legal paradigms may fail to see. In that sense, Oette's book does more than describe the transformation of the prohibition. It invites the anti-torture field to participate in that transformation with greater conceptual clarity, reflexivity and care.

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Book review

Tortured as a Child: Torture, Forced Migration and the Right to Rehabilitation[1]

Ida Gunge[2]

This is not an easy book to read. Not because its arguments are difficult to follow or its language is inaccessible, but because it compels readers to confront a reality that remains largely invisible: children are subjected to torture. Precisely for that reason, *Tortured as a Child: Torture, Forced Migration and the Right to Rehabilitation* (Johansson Metso, 2026) is such an important and timely publication. The anthology represents a significant contribution to the struggle against torture and against the silence that too often prevents children who have experienced torture and ill-treatment from being recognised as victims of crime and rights-holders entitled to care, rehabilitation, and redress.

Human rights, and particularly children's human rights, run as a red thread throughout the volume. Across its seven chapters, the authors repeatedly return to states' obligations to identify, protect, and rehabilitate children who have been subjected to torture. These discussions are especially urgent in light of the implementation of the EU Migration and Asylum Pact. Faster asylum procedures, reduced access to legal counsel and public representation, and the use of so-called safe-country concepts risk making it even more difficult for children exposed to torture to be identified and referred to appropriate medical expertise. Against this backdrop, the anthology's focus on screening procedures, documentation, and early identification becomes particularly relevant.

One of the book's greatest strengths is its interdisciplinary approach. Psychologists, lawyers, paediatricians, neuropsychologists, and social scientists contribute perspectives that together provide a comprehensive understanding of child torture and its consequences. This breadth makes the anthology relevant not only for specialists working directly with torture survivors but also for clinicians, social workers, teachers, legal professionals, policymakers, and researchers. Such a wide audience is essential, as responsibility for identifying and supporting children subjected to torture cannot rest with any single profession.

The volume results from a three-year research project initiated after the 2022 revision of the United Nations Istanbul Protocol, which expanded the standard for medical documentation of torture to better include children. The anthology is available in Swedish and English and will soon be released in Arabic. The anthology builds on a systematic literature review conducted within the same project (Nahlén Bose & Tamdjidi, 2024), in which 4,795 titles and abstracts were screened, and 80 scientific articles and six guidelines or care programmes were included. Building on a systematic literature review, the project revealed substantial gaps in existing knowledge. As such, the anthology represents an important step toward identifying what needs to be done next.

Chapter 1 (Niklas Möller, psychologist) introduces the project and discusses torture from a psychological perspective. Chapter 3 (Julia Jennstål, psychologist) explores how practitioners can approach conversations with children about torture, reporting on ongoing work to develop a structured conversational tool. Chapter 5 (Catarina Nahlén Bose, researcher) challenges the prevalent assumption that trauma treatment requires residential stability – an assumption that risks delaying care for young refugees with precarious legal status. Chapter 6 (Fanny Laurén, neuropsychologist) addresses the difficulty for school staff in distinguishing trauma responses from neurodevelopmental symptoms, a distinction that, when missed, withholds support and compounds the long-term consequences of torture.

Chapter 2, by human rights lawyer Madelaine Seidlitz, examines the legal definition of torture as applied to children under international law, drawing on case law and legal practice to distinguish between torture and ill-treatment. It offers a clear and pedagogical account of the UN Convention Against Torture and its relevance to children. The chapter highlights a troubling gap in jurisprudence: international case law on child torture remains extremely limited. The UN Committee Against Torture has never ruled on a complaint involving a child, and the European Court of Human Rights has done so only in *Aydın v. Turkey*. The chapter also draws attention to Sweden's failure to criminalise torture as a distinct offence. Despite being a State Party to the UN Convention Against Torture, Sweden has not incorporated a specific torture provision into its criminal code, meaning it does not fully meet its obligations under the Convention. The chapter thus functions not only as legal analysis but also as a call for legislative reform.

Chapter 4, by paediatrician Henry Ascher and psychologist Viktor Mauritz, addresses how torture injuries in children

1 Frida Johansson Metso (Ed.). Swedish Red Cross Competence Center for the Rehabilitation of Torture and War Trauma, 2026.

2 Human rights specialist working within the field of human rights and forced migration. She holds a BA in Human Rights and an MSc in Global Refugee Studies.

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can be investigated and documented. Drawing on clinical experience and an interview study conducted within the IRCT network, the authors identify key challenges: children may have difficulty understanding the purpose of a torture injury assessment; developmental factors can influence their ability to report time, sequence, and events; and neurological injuries in children often result in diffuse, generalised impairments, unlike the focal deficits typically observed in adults. The authors note that the assessment process is often inseparable from therapeutic care, and that adequate time and organisational resources are prerequisites for high-quality work.

Despite the gravity of its subject matter, the anthology ultimately offers grounds for hope. Chapter 7 (Ferdinand Garoff and Ronak Tamdjidi) presents an intensive treatment model suggesting that five days of concentrated therapy may produce outcomes comparable to a year of conventional treatment. This is a promising finding, but the authors are candid that the evidence base is limited and that relatively few children have yet received this form of treatment. This is an honest account of where the field stands, and it should be read as a reason to invest further in research and implementation rather than as grounds for scepticism.

Tortured as a Child makes a unique and valuable contribution to a systematically underserved area of research and practice. Its central argument – that the concept of torture is too rarely applied to children, which contributes to making their vulnerability invisible – is both well-evidenced and consequential. By combining legal, psychological, medical, and social perspectives, it illuminates a profoundly neglected area of research and practice while outlining concrete steps toward better identification, documentation, treatment, and protection of children subjected to torture. The book fills critical knowledge gaps, identifies priorities for future action, and demonstrates why greater investment in this field is urgently needed. For anyone working at the intersection of child protection, forced migration, healthcare, education, law, or human rights, this is an essential and highly recommended volume.

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