



مركز علاج وتأهيل ضحايا التعذيب  
Treatment & Rehabilitation Center for Victims of Torture

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## **Annual Activities Report**

**January – December 2016**

**List of acronyms used in the report**

**CBT – Cognitive Behavioural Therapy**

**CSO – Civil Society Organization**

**EIDHR – European Instrument for Democracy and Human Rights**

**EJ – East Jerusalem**

**EMDR – Eye Movement Desensitization and Reprocessing Therapy**

**EU – European Union**

**HR – Human Rights**

**IDF – Israeli Defense Forces**

**IHL – International Humanitarian Law(s)**

**MoH – Ministry of Health**

**Mol – Ministry of Interior**

**MoL – Ministry of Labour**

**MoU – Memorandum of Understanding**

**MSF-S – Medics sans Frontieres - Spain**

**NGO – Non-Governmental Organization**

**OCHA – Office for the Coordination of Humanitarian Affairs**

**OPCAT – Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment**

**oPt – occupied Palestinian territories**

**PA – Palestinian Authority**

**PLC – Palestinian Legislative Council**

**PLO – Palestinian Liberation Organization**

**SHAMS – Human Rights and Democracy Media Center**

**SUD – Subjective Units of Distress**

**TIPH – Temporary International Presence in Hebron**

**TRC – Treatment and Rehabilitation Center for Victims of Torture**

**UDHR – Universal Declaration of Human Rights**

**UNCAT – United Nations Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment**

**VoT(s) – Victim(s) of Torture**

**WB – West Bank**

## **TRC Statement**

In the last year, TRC has seen a significant increase in the demand for its mental health services to victims of torture. This is due to increased violence which erupted in both Israel and Palestine, particularly in East Jerusalem, Hebron, Jenin, Nablus, and in villages that are in close proximity to the Israeli separation wall, settlements, and Israeli military posts. Furthermore, TRC is still working hard to address the influx of clients suffering from mental health traumas stemming from violence perpetrated during the 2014 war in Gaza and the Israeli military campaign which was waged in the West Bank, concentrated in East Jerusalem and Hebron, which included a significant increase in raids, arrests and detentions of Palestinian youth, including interrogation by Israeli Shin Bet which involved both physical and psychological torture, solitary confinement, and prolonged administrative detention of youth. Additionally, the Israeli security forces have consistently responded to civilian protests through disproportionate use of violent suppression involving life fire on unarmed civilians, extra-judicial executions, and widespread and systematic attacks on families and families and institutions. Furthermore, in Palestine the on-going conflict between rival Palestinian factions has continued leading to the arrest, detainment and torture of Palestinian civilians by PA security forces.

These attacks have also extended to university students and journalists in order to suppress freedoms of speech and assembly, and on illegal crackdowns on human rights organizations that criticize the PA government's policies and violations. Additionally, although the PA government has signed the UNCAT, it has yet to sign the Optional Protocol and while the PA President has issued a presidential decree banning the practices of torture, torture is still very much practiced by PA security forces with impunity creating a state of fear among Palestinian civilian populations. Additionally during this reporting period, the Palestinian Authority, in following up its upgrade at the UN General Assembly has begun to sign and ratify several important international treaties and conventions in order to align the Palestinian state with international standards and prepare the way for the state-building process. TRC recognized the importance of the PA's efforts and renewed memorandums of understanding with PA Ministries, particularly the PA Ministry of Interior and the PA Ministry of Health, in order to strengthen and leverage its advocacy on the national level to support efforts to fulfil obligations set forth by these international policies and to work in cooperation with the PA ministries to build their knowledge capacity and open channels for data sharing and information exchange.

Since those conflicts, TRC has been overwhelmed with calls for intervention and support for both primary and secondary victims. Furthermore in 2015, yet another wave of violence began between Israelis and Palestinians largely involving stabbing attacks in Jerusalem, Hebron and other areas where friction exists between Israeli and Palestinian communities, as well as violence perpetrated by Israeli security forces and settler communities against Palestinian unarmed civilian protesters. These actions have contributed towards the systematic traumatization of the Palestinian public and polarized the on-going conflict which continues today and has significantly contributed towards an increased in demand for TRC services. Families that were already suffering from repression, rights abuses, raids, detentions and home demolitions in East Jerusalem, Hebron, Ramallah, Jenin, and other areas at critical risk of politically motivated violence, are continually suffering from increasing fear for their lives and livelihoods due to irrational measures implemented by Israeli security forces. Such measures have included random frisking of Arab civilians, campaigns of raids and arrests sweeping through Palestinian villages in late night or very early hours, often conducted by several well armed military units, and border police and accompanied by attacks and destruction of homes and properties, and physical and psychological torture throughout the process from the moment of arrest until interrogation and detention. It is clear that these actions are not contributing towards

restoring calm but rather entrenching the cycle of violence and racism on social and political grounds.

TRC current strategic plan for 2015 to 2017 sees the organization continuing the transition towards a knowledge sharing institution and expanding its advocacy in human rights and international humanitarian laws in response to the political situation in Palestine. This transition comes at a time when the human rights situation in Palestine has progressively worsened since the increase in violence which began in 2014 and 2015. As part of this transition, TRC has been expanding the scope of its work to include advocating for policy reform in both Israel and Palestine in order to stimulate a more human rights oriented approach to resolving the on-going conflict. As part of this plan, TRC will present a shadow report in May 2016 with the support of the Human Rights and International Humanitarian Law Secretariat at the UN Committee on Torture in Geneva, Switzerland. This Shadow Report will focus on drawing attention to the on-going Israeli human rights violations and advocate for the international community's intervention to curb such violations.

TRC has signed a 3 year agreement with the European Union to conduct advocacy aimed at promoting the Palestinian National Authority's signing of the Optional Protocol and instituting reforms to ensure compatibility between HR/IHL and Palestinian National Laws. During 2015, the Palestinian Authority reshuffled its ministries in absence of a unity government with the de-facto authorities in Gaza. This move eliminated the Ministry of Prisoner's Affairs which handles the cases of Palestinian detainees in Israeli prisons. The PA government, after signing the UN Convention against Torture was expected to sign the Optional Protocol but has not done so yet. The PA has been working on preparing for its first report to the UN Committee on Torture. TRC has been advocating the PA's signing of the OPCAT and to strengthen compatibility between PA legislation and human rights and international humanitarian laws; in the absence of a unity government and negotiated peace with Israel, human rights violations in Palestine have been continuing.

TRC has also partnered with the UN Women to provide treatment and rehabilitation and recreational therapy to women held in 3 Palestinian Correctional and Rehabilitation Centers in Jericho, Ramallah, and Jenin. This project saw TRC sign an agreement with the Palestinian Civil Police which administers the prisons. Furthermore, TRC is approaching the final year of a 3 year EU-funded grant, under which we have been conducting trainings for Palestinian security forces in human rights, and capacity building and legal review for the Palestinian Authority's Ministry of Interior and its Human Rights Department.

However, our shift towards Advocacy and Awareness has not reduced the importance of our comprehensive holistic human rights-oriented Treatment and Rehabilitation which so many Palestinians rely on each year. In addition to conducting our core programs in T&R throughout the West Bank by deploying individual, group, family, and child therapy, TRC signed an agreement with Medicins San Frontieres – Spain in September to provide individual, group and family therapy for direct and indirect victims in East Jerusalem until April 2016.

The overall demand for our mental health services was at an all time high. This was attributed to an increase in extra-judicial killings of Palestinians, the majority of whom are youth. Additionally late night raids, arrests, and the continued use of administrative detention against children as young as 12 continued, and cases involving the use of both physical and psychological torture were widespread. Administrative detention, including solitary confinement and torture during interrogation of minors, was a regular occurrence. These policies have contributed towards physical

and psychological traumas among victims of torture, resulting in increasing demand for TRC's services. The increase in demand was further fuelled during the fall and winter of 2015 when waves of violence erupted throughout the West Bank and Israel; Palestinian youth frustrated with the status quo began protesting against Israeli forces which responded with violent dispersal methods. Additionally stabbing attacks have been occurring on a weekly basis against Israeli victims in the West Bank and Israel. This was in part caused by the apparent bias in the Israeli police's handling of cases in which settlers committed acts of murder against Palestinians and the perceived lack of appropriate consequences and punishment for these crimes.

## **Partners and Stakeholders in 2016**

### **Partners and Beneficiaries**

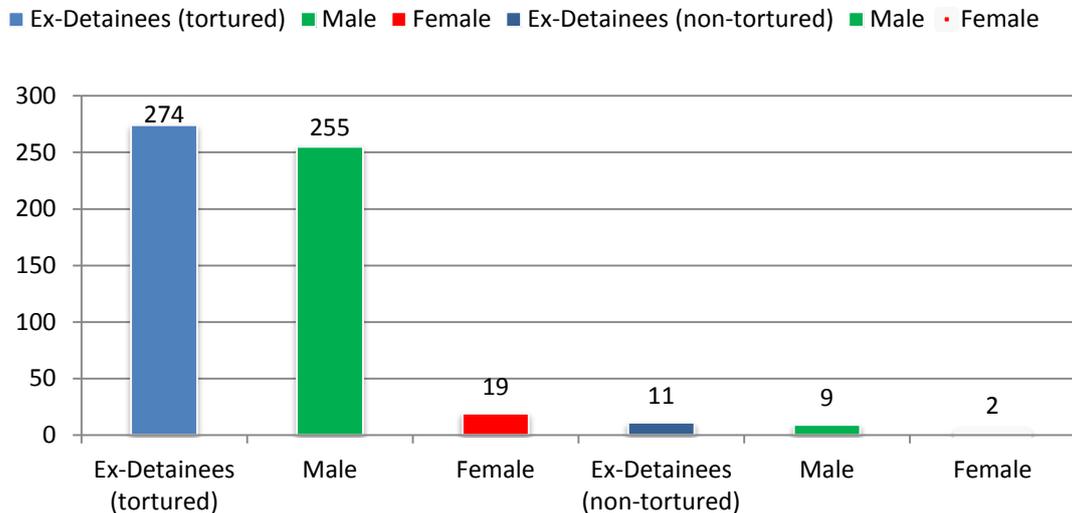
TRC's continues its strong relationship with victims of torture and their families and with Palestinian civil society organizations (CSOs) and non-governmental organizations (NGOs), as well as the Palestinian Authority, and other donors, partners and stakeholders on the national and international levels including the Office of the High Commissioner for Human Rights (OHCHR), the European Union, and others.

### **Relationship with other organizations in 2014:**

- IRCT (Denmark)
- Al Manar Academy (Palestine)
- The European Union (EU)
- The United Nations Voluntary Fund for Victims of Torture (Global)
- UN Women
- Human Rights & International Humanitarian Law Secretariat (Sweden, Switzerland, Denmark, The Netherlands)
- Warchild (EU)
- Temporary International Presence in Hebron (TIPH)

## Treatment and Rehabilitation

### Palestinian Ex-Detainees



In 2016, TRC treated 285 ex-detainees; these clients fell into one of the following categories:

- Ex-detainees (tortured) – these clients were physically and/or psychologically tortured during arrest, interrogation, and/or detention.
- Ex-detainees (non-tortured) – these clients were not physically or psychologically tortured during arrest, interrogation, and/or detention.

In the last year, the majority of treated ex-detainees were victims of torture; 255 VoTs were male and 19 VoTs were female. Furthermore, there were only 11 cases in which ex-detainees were not tortured. These clients consisted of 9 males and 2 females.

Out of the 285 ex-detainees:

- 244 were over the age of 18
- 41 were under the age of 18
- 212 were referred as cases
- 73 received consultation visits
- 193 were new clients
- 92 were on-going (continuing clients that have not been discharged yet)

Furthermore, these clients were treated through 1376 treatment sessions; 1333 sessions were for tortured ex-detainees and 43 were for non-tortured ex-detainees.

- Ex-detainees (torture): 209 Cases / 65 Visits – 1333 sessions
  - 182 new clients
  - 92 on-going clients
- Ex-detainees (non-tortured): 3 Cases / 8 Visits – 43 sessions

TRC also treated 137 Bereaved Families; these are families of persons that were killed by military

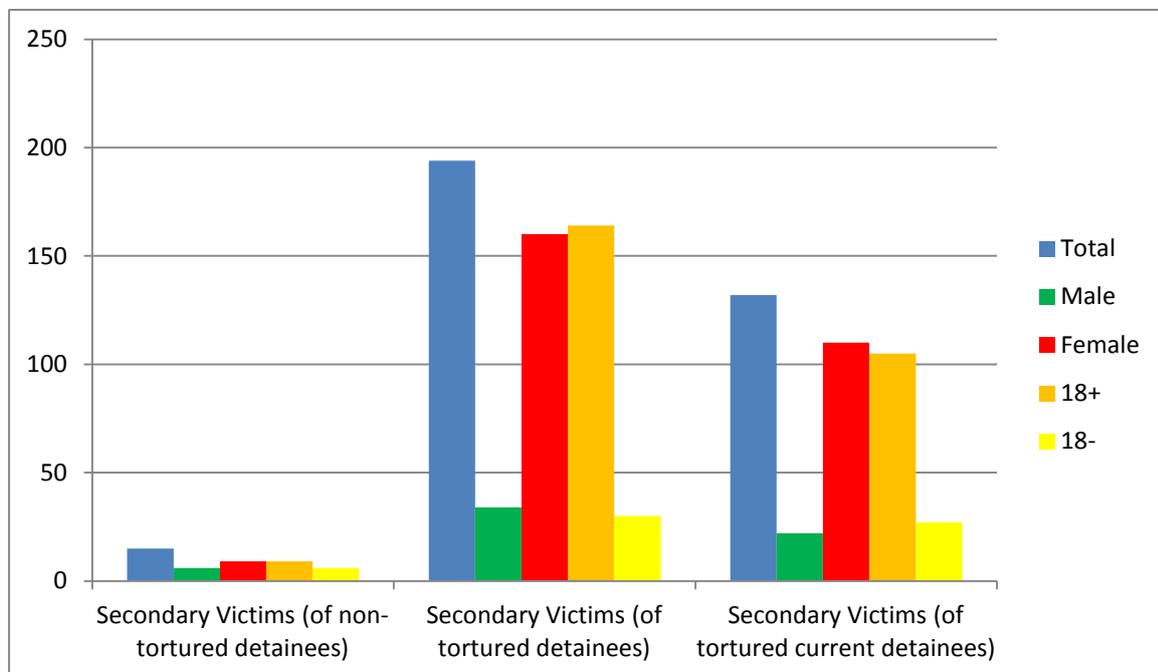
forces:

- 34 males / 103 females
- 120 above 18
- 17 under 18
- 99 were referred to cases
- 38 were only visited (consultations)
- 81 were new clients
- 56 were on-going clients

Other categories treated during 2015 included:

- 52 wounded persons (46 M / 6 F)
- 1 victim of organized violence (1 M)
- 8 victims of direct organized violence (1 M / 7 F)
- 9 victims of home demolitions (5 M / 4 F)
- 54 Social cases (17 M / 37F)
- 171 cases of war consequences/ collateral damage (56 M / 115 F)
- 41 cases of ill-treatment (16 M / 25 F)
- 2 cases of domestic violence (2 F)
- 83 clinical consultations (64 M / 19F)
- 2 cases of abandoned military munitions – for example mortars or land mines (1 M / 1 F)
- 23 other cases (9 M / 14 F)

### Secondary Victims



Newly released ex-detainees and ex-prisoners and their families comprise the majority of direct and indirect torture cases. These clients are held in detention centers by both Israeli and Palestinian authorities and undergo a gruelling process of physical and psychological cruelty and ill treatment

that begins from the moment of arrest until they are released. Arrests typically occur in the early morning hours by armed security forces and are calculated to maximize shock, insecurity and terror. Hooded, shackled and frequently beaten during arrest, individuals are placed into hostile environments to disorientation, and to break his/her will. The squalor or confinement, overcrowding, sleep deprivation and constant threats of physical violence stimulate panic, despair and hopelessness. The interrogation typically involves physical torture such as concentrated beatings, exposure to extreme hot or cold temperatures, and painful restraints. These methods supplement psychological torture to destroy the integrity of the prisoner to instil a deep sense of helplessness and induce a dependency upon, and identification with, the interrogator. The damaged sense of self that the primary victims often suffer is passed on to secondary victims, particularly children, spouses, and other family members whom are exposed to the effects of ill treatment in various ways such as domestic violence and abuse, as well as rage, depression, vulnerability, social avoidance and most often post traumatic stress disorder (PTSD).

A significant amount of torture victims who require support from TRC suffer from psychological as well as physical symptoms. It is for this reason that primary as well as secondary victims of torture will have access to medical and psychiatric services provided by certified psychiatrists to overcome their physical illnesses resulting from torture. Upon arrival at TRC, one of the psychiatrists will conduct extensive interviews and physical and psychological tests. The interview aims to not only document the torture but also to compile a complete case history. Afterwards a medical and mental examination are made for the client and if a mental illness is diagnosed, medications are prescribed and provided free of charge; these medications will supplement the client's treatment therapies at TRC. The medication is prescribed only after the client's file has been reviewed by a Psychiatrist and the client has been determined to suffer from a chronic trauma. TRC administered medication to supplement the treatment process for chronic cases in 2015. Although the treatment process deployed by TRC is holistic, sometimes medication is required and is provided directly from TRC.

#### **East Jerusalem Treatment and Rehabilitation – Medicins sans Frontieres**

In September 2015, TRC received funding from Medicins Sans Frontieres – Spain (MSF-S) to provide individual, group and family therapy to men, women and children affected by mental health disorders due to the on-going conflict, in East Jerusalem. A team of 8 experts were deployed; 4 working within East Jerusalem on the Israeli side, and 4 working in surrounding Jerusalem villages on the Palestinian side. The project ended in May 2016.

#### **Strengthening and Empowering Women in Correctional and Rehabilitation Centers (CRCs) through Capacity Building and Holistic Human Rights-oriented Psychological and Recreational Support**

In September 2015, TRC signed a grant with UNWOMEN under their joint programme with UNDP called “Sawasya”. The grant increased TRC access to 3 Palestinian Authority CRCs in coordination with the Palestinian Civil Police, to provide treatment, recreational and sports rehabilitation, and vocational therapy to women detainees in Jericho, Jenin, and Ramallah CRCs.

The 20 month program aims to address the most critical needs of women by reducing their psychological traumas and to contribute towards the enhancement of life skills and recreational and psychosocial support; to sensitize CRC staff on human rights and working with female inmates, and to increase public knowledge, awareness and support of women’s

rights in Palestine. This project continued through 2016 and concluded in May 2017.

### **Strengthening the Resiliency of Marginalized Communities affected by Settler Violence and/or Israeli Forces in Hebron**

In December 2015, TRC signed a grant with the Human Rights and International Humanitarian Law Secretariat (HR/IHL Secretariat) to implement a 10 month project aimed at providing crisis intervention and treatment to families with children in 4 areas of Hebron that are located in Area C and are under the constant threat of forced displacement; these target areas are the Hebron Old City (H2 District), Susya, a village that has been partially razed over 60 times by Israeli Security Forces, Tel Rumeida and al Ramadin. The project includes treatment and rehabilitation, crisis intervention, a psychosocial summer camp for child victims, as well as community based workshops on documentation and reporting of human rights abuses. As part of this project, TRC conducted data collection on human rights abuses which contributed towards a Shadow Report on Israeli Violations which were presented before the UN Committee on Torture in May 2016. Additionally, TRC produced 30 Medico-Legal Affidavits, of which 15 were delivered to the UN Rapporteur on Torture, Mr. Juan Mendez.

### **Data in the Fight against Torture - IRCT**

TRC continued to cooperate with the IRCT in its EU-funded multi-year project, Data in the Fight against Torture (DFI) which aimed to strengthen the data and collection processes of partner centers around the world in order to produce national, regional and global reports on torture and torture related issues through evidence-based documentation. In 2016, TRC successfully transitioned to the DFI Database, replacing its own internally developed database system, and now the system has been standardized at TRC and used by the Treatment and Rehabilitation department to monitor and document each and every case treated by TRC.

Also, in regard to the ongoing cooperation between TRC and the IRCT, the head of the IRCT office in Geneva, Switzerland, Mr. Asger Kjaerum, provided extensive support to TRC in the development of its Shadow/Alternative Report on Israeli Violations, as well as guidance on how to advocate at the UN and present the report. Furthermore, in the last year, Executive Director, Mr. Khader Rasras, was nominated to the general assembly of the IRCT.

### **Advocacy and Public Awareness**

#### **Workshops**

In 2016, TRC completed implementation of a 3 year EU-funded Grant, “Rights to Remedy and Reparations for Victims of Torture and other Ill-Treatments”.

Through this project, TRC and its partner in the action, Hurriyat, conducted a total of 6 trainings (2 per year for 3 years): the first in the Istanbul Protocol and its use in documenting and reporting on cases of torture through evidence and data collection led by TRC, and a second training on awareness of international human rights and humanitarian laws, particularly as they pertain to legal rights and the filing of legal action against perpetrators of torture in a court of law. Sixty eight representatives of CSOs received two annual trainings (an average of 20 CSO representatives per year).

TRC has provided human rights-based training to 75 high ranking Palestinian law enforcement officers whom are in positions of authority and are now more knowledgeable of human rights and international humanitarian laws and practices. During the project in 2014, TRC renewed an Memorandum of Understanding (MoU) with the PA Ministry of Interior (MoI) which enabled TRC to provide HR/IHL training to officers in various PA security forces (including Civil Police, Presidential Guard, Preventative Security, and Internal Police) as well to conduct a review of PA policies in joint coordination with the PA Ministry of Interior's Human Rights Department.

- 81% of officers felt the timing of the course was good but that it should have been longer
- 95% felt that interactions between trainers and trainees were excellent
- 68% felt that the trainers' teaching methods were excellent, while 22% felt it was good.
- 61% said that the course was very good and fulfilled their expectations
- 59% said that they felt that they benefitted from the course
- 81.8% said that the trainings were very good at addressing their learning needs
- 45% said that they would like to participate in similar courses

TRC conducted 22 public awareness workshops which coincide with international UN Days of recognition and 3 (annual) national conferences in recognition of the UN Day in Support of Victims of Torture on June 26<sup>th</sup>; these events raised awareness of 1033 people including 48 representatives of Palestinian CSOs and 85 human rights-based NGOs. Additionally, TRC and SHAMS published 2000 copies of a new awareness raising guidebook called "Know Your Rights" which were distributed through all events under and beyond the scope of the project.

TRC provided treatment to 2769 clients an increase of 1719 over the proposed 1050 clients, including 3,133 new cases taken on during the project by a team of 6 human rights-oriented treatment and rehabilitation experts including psychologists, psychiatrists and social workers. These cases were treated through a total of 15,348 treatment sessions the majority of which were conducted through outreach in conflict affected and marginalized communities throughout the West Bank and East Jerusalem.

Additionally, TRC provided vocational training to 60 rehabilitated men and women whom were victims of torture, violence or ill-treatment and range in age from 18-35 years old.

These clients were discharged after having completed their treatment and have shown significant reductions in their psychological traumas. TRC worked with the PA Ministry of Labour to provide in-demand job recommendations which would result in better opportunities for employment or business opportunities for self-starters. A 6 month vocational program was implemented each year for a minimum of 15-20 participants per year whom were trained through an external vocational training center based in Ramallah. At the end of each year's program, the participants graduated in an event held at the TRC training center and were provided with certificates demonstrating their completion of training courses, along with gifts of initial start-up equipment and tools that could be used for their respective jobs. All of the participants participated in their graduations except one person who was arrested and detained by Israeli security forces and thus was represented by his mother at the ceremony.

#### **Other Workshops:**

1. Media role in Documenting Human Rights Violations on 05/25/2016 (SHAMS) (20 students from Al Quds Open University)
2. Psychological & Social Effects on Israeli Violations against Palestinian Women on 07/27/2016 (37 women in Ezzariya)
3. Methods of Torture in Israeli Prisons and Their Effects on 08/28/2016 (53 students from Al Najah University in Abu Dis)
4. World Mental Health Day workshop on 10/10/2016 (40 students from Birzeit University)
5. Psychological Traumas & Their Implications on 11/19/2016 (45 students from Al Tireh College)
6. Human Rights Day Workshop on the Rights of Women on 12/21/2016 (32 women)

These workshops were conducted throughout the West Bank via outreach in villages and communities targeted by the project's Advocacy and Awareness team and held in the halls or classrooms of local municipalities, village councils or schools or at the TRC Training Center at its headquarters in Ramallah.

During the implementation process, TRC conducted outreach in communities at risk of violence and abuse under the on-going Israeli/Palestinian conflict and sought to conduct it's workshops in these areas, after conducting surveys and needs assessments, in order to increase access to knowledge among community members and promote their participation in human rights issues. Through these workshops, supplemented by radio spots, newspaper statements, and distribution of printed materials including "Know Your Rights" guidebooks, TRC increased overall awareness of the implications of human rights violations, particularly torture, violence and ill-treatment and their devastating consequences on mental health, social affairs, and political participation in Palestinian society. We intentionally targeted a significant number of students from area universities including Al Quds University, Al Najah University, Birzeit University, Al Tireh College as well as upper middle schools as these

students are the next generation of Palestine and will be the ones to ensure that the future Palestinian state is a peaceful tolerant human rights-oriented society.

While conducting follow-up with participants of the workshops, TRC noted that most of the participants expressed their gratitude for the contents and information provided. In discussions, the student participants felt that more and consistent engagement with their target group is necessary and that such workshops and trainings are an important component of informing their knowledge of real world cases of human rights issues pertaining to the conflict, which therein informs and contributes towards their opinions on resolving the conflict through a negotiated two-state solution.

### **National Conference: The Day in Support of Victims of Torture 2016**

The conference, held under the theme of “Together towards the Consecration and Dissemination of a Culture against Torture and the need to provide Reparations” was held at the conference hall of the Palestinian Red Crescent Society in Al Bireh, Palestine under the patronage of the Palestinian Authority Minister of Interior, Dr. Ali Abu Diak. Guests and participants alike were welcomed by Dr. Faisal Abdul Latif, Vice Chairman of the TRC Board of Directors, and Mr. Mohammed Abdullah, Assistant Undersecretary of the Legal Affairs Department of the Palestinian Authority Ministry of Justice, and Mr. Hassan Abed Rabbo, Media Spokesman of the Palestinian Authority Committee for Prisoners’ Affairs, and Dr. Ammar Dweir, Director General of the Independent Commission for Human Rights (ICHR).

Dr. Abdul Latif, during his remarks spoke of the important role of TRC in advocating and raising awareness of the United Nations Convention against Torture (UNCAT) and confirmed that the center places great importance on providing comprehensive and integrated services including psychological, social and drug treatments and vocational rehabilitation. He also pointed out TRC’s relentless work in torture prevention by holding training courses and workshops aimed at raising public awareness and knowledge of the UNCAT, and strengthening the devotion towards a culture of human rights respect.

Mr. Abdullah, in his speech, pointed out that the accession of the State of Palestine to the UNCAT entails a number of legislative and political obligations and regulations to reduce the practices of torture and to hold perpetrators accountable for their crimes. These obligations lead to the promotion of fundamental rights, enhance human dignity, and uphold the principle of the rule of law.

Mr. Abed Rabbo spoke of the psychological and physical torture, pointing out that such acts have never been spontaneous or incidental events within specialized interrogation and detention centers, but rather are part of a comprehensive institutional approach and are an integral part of the typical treatment of detainees in Israeli prisons and detention centers. Dr. Dweik, the Director General of the ICHR spoke about torture and ill-treatment from the perspective of international humanitarian law and international human rights law. He explained that the State of Palestine’s signing of the UNCAT prohibits the state practice of torture and puts pressure on the Palestinian Authority to

prioritize torture within Palestine, and to take necessary measures to compensate victims of the damage that they suffered due to psychological and physical torture.

Mr. Rasras, the Executive Director of TRC, spoke of TRC's important work in presenting quality mental health services to direct and indirect victims. He also discussed the outcomes of clients that participated in TRC's treatment and rehabilitation program, explaining that the right to remedy through the provision of such services is a component of the human rights of all persons. He explained that since 1997, TRC has been deploying such services from a human rights-based perspective in order to eliminate the cycle of violence and torture and to promote a culture of human rights in Palestine. The Chairman of the UN High Commissioner for human Rights (OHCHR) in the occupied Palestinian territories, Mr. James Heenan promoted the role of the OHCHR's Palestine office in working against torture in the West Bank, Gaza and Israel. He stressed the importance of compensating victims of psychological and physical torture, and in enhancing the human rights knowledge base of persons in positions of power that are at risk of becoming perpetrators of torture in order to prevent torture, and to rehabilitate former perpetrators.

The TRC Research and Documentation Expert, Mr. Wisam Sehwal, Coordinator of the Data Unit, explained the importance of comprehensive torture monitoring and reporting mechanisms particularly during times of increased violence due to the ongoing Israeli/Palestinian conflict. He explained that human rights violations, especially torture, must be thoroughly and meticulously documented using the internationally accepted and adopted Istanbul Protocol which is approved by the OHCHR. The Istanbul Protocol is the result of consolidated efforts of 40 international medical and health, legal and human rights organizations which developed a standardized methodology for investigating and documenting allegations of torture and other cruel, inhuman or degrading treatment through an evidence-based approach.

On the basis of statistical indicators at the center during the past two years, there is an upsurge in Israeli violations relating to torture. The rate of arrest increased 42% overall, as well as increased by 71% against children, and 100% against women; these statistics are based on the increase in demand for the services of TRC. Among women, there was a 35% increase among women and children according to TRC's database. Of 450 Palestinian detainees that were released from detention, 93% were subjected to torture in all its forms; 60% of children and 50% of women were subjected to torture and ill-treatment and are in need of medical intervention and psychological support. In terms of reported torture, 65 clients were released from Palestinian prisons and received treatment and rehabilitation for abuse and ill-treatment, and lack of access to a fair trial.

Finally, in speaking of the obligations of the State of Palestine following the signing of the UN Convention against Torture, Mr. Sadiq, Legal Advisor to the Palestinian Authority Ministry of Interior, explained that such an action requires that the government follow through with developing an integrated Palestinian legal system with the capability to address and criminalize torture.

The conference concluded with a presentation of TRC's activities under the EU-funded project for the

years 2014 and 2015, followed closing remarks and a presentation of the following recommendations:

1. The State of Palestine must fulfill international obligations following its accession to the UN Convention against Torture, and the signing of the Optional Protocol.
2. Palestinian laws must be reformed to comply with the UNCAT and a comprehensive regulatory mechanism for the elimination of practices of torture must be developed and activated.
3. TRC must continue to provide mental health-based services for direct and indirect victims, as well as to continue holding conferences that enhance awareness of the rights of victims of torture; these services and events must be held in remote and marginalized areas that are affected by torture, violence and ill-treatment.
4. Palestinian Civil Society must cooperate in working together to promote the UNCAT by developing a multi-disciplinary team of experts to ensure that all allegations of torture are addressed.

## Institutional Capacity Building

In January 2016, TRC was visited by a Results Oriented Monitoring (ROM) expert, Mr. Gianfranco D'Eramo who, at the request of the European Union, conducted a review of TRC's EU funded project. Overall the project was highly rated but required TRC to review its practices in terms of effectiveness and sustainability and the following recommendations were made to TRC:

- Within the framework of the current shadow reporting exercise, develop – in consultation with the Coalition against Torture – a proposal for establishing the National Preventive Mechanism.
- Facilitate policy discussions among line ministries and develop a proposal for establishing the multi-service rehabilitation system, following a thorough evaluation of the vocational education pilot and including a draft Memorandum of Understanding between relevant line ministries detailing short and long term policy objectives.
- Improve the quality of the indicators provided in the Logframe by establishing a clear link with the UNCAT framework on the basis of structural, process and outcome indicators. As this is the structure that the upcoming state report should follow, launch discussion within the Coalition against Torture to jointly develop human rights indicators.
- Improve the selection of the readership of "Know your Rights" and ensure strategic circulation of the publication as recommended by the previous evaluation

*Following this report, TRC conducted a thorough analysis of its practices, strategic plan, and mission in order to ensure that both the project and its overall mission in the State of Palestine in promoting Human Rights is effective, sustainable, and advances its plan. TRC reoriented its programs and activities to more closely identify and work from a human rights-oriented approach by highlighting the theory of change methods, as well as to identify human rights indicators and results for its actions. Furthermore, TRC began developing a more comprehensive monitoring and evaluation approach based on the Monitoring, Evaluation, Accountability and Learning (MEAL) approach, which was further developed in a later EU grant which is on-going.*

### Studies

*TRC conducted a comprehensive study on Palestinian women detained in Palestinian Authority Correctional and Reform Centers (Prisons) in Jenin, Ramallah, and Jericho. This study was funded by UNWomen as part of a 18 month project in which TRC provided treatment and vocational rehabilitation to women in the centers through the cooperation of the PA Civil Police, UN Women and UNDP.*

TRC developed a comprehensive **Needs Assessment Study** which informed the staff on the needs and constraints of the women and their cases in order to most affectively address each woman's particular traumas. Adjusting the project's activities to the results of studying the

outcomes reflects the female inmates' needs and aids in rehabilitating them and meeting their needs in harmony with the project objectives and budget, as well as the laws in place for their protection from unhealthy detention conditions, providing them with medical and psychological therapy at the proper time, in addition to the prevention and awareness programs. To achieve this goal a questionnaire was designed to reflect the desired goals. The working team was trained on data collection, data entry and analysis using SPSS.

The study<sup>1</sup> relied on a sample group of 28 women whom were reached out to between November and December 2015.

**Measurement tool:** the specialized questionnaire comprising of eight sections as follows (see appendix number 1):

- First section: Demographic characteristics and information
- Second section: Details related to detention and violence as part of the sources of psychological trauma and suffering (medical history)
- Third section: Physical medical needs
- Fourth section: Psychological medical needs
- Fifth section: Social environment and other needs
- Sixth section: Skills and needs related to rehabilitation
- Seventh section: Future vision and readiness for rehabilitation

### **Results of the study:**

#### **1. Demographic characteristics of the female inmates:**

- The female inmates are in three correction and rehabilitation centers; Jericho, Ramallah and Jenin with 10, 9 and 9 female inmates successively.
- The female inmates' ages range from 16 to 49 years as follows:
  - 12 female inmates under the age of 30 (46.4%)
  - 7 female inmates under the age of 40 (25%)
  - 8 female inmates under the age of 50 29%)
- 57% are from villages and the rest are from the cities
  - 6 from Ramallah
  - 4 from Jenin
  - 6 from Hebron
  - 5 from Nablus
  - 5 from Qalqilya
  - 2 from Jerusalem
- Marital Status:
  - 6 single female inmates
  - 9 married<sup>2</sup>
  - 7 divorced
  - 6 widows

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<sup>1</sup> Annex 1: Needs assessment report of female inmates in the Palestinian correction and rehabilitation centers - As part of the project "Supporting and empowering women in correction and rehabilitation centers"

<sup>2</sup> 90.5% of the women were previously married under the age of 15 (19 of 21 women)

- Education:
    - 82% of the female inmates had secondary education or less,
    - 16% with university education.
- 2. Detention and violence (psychological, social and medical history):**
- 35% (10) have been detained for more than 5 years
  - 18% (5) have been detained for more than 2 years and less than 4
  - 46.4% (13) have been detained for less than a year and only 3 were expected to be released.
  - Others were detained for undetermined time.
  - The reason of detention: Murders, spying for Israeli security forces, 3 were detained for writing checks with insufficient funds and were expected to be released at the time of the study.
  - 82.1% (23) believed their lives were not at risk.
  - 17.9% (5) feared being killed if they were released<sup>3</sup>
- 3. The violence women are exposed to and the psychosocial history:**
- The majority of female inmates were exposed to extreme violence from their families, especially spouses. Violence often took multiple forms including slapping the face, beating on the head, pulling hair, and strangulation.
  - Spouses were the primary perpetrators and most violence took place at home.
  - +50% of women reported have been exposed to extreme psychological violence via humiliation, limiting their freedoms, verbal insults, degradation, destruction of personal belongings, and exposure to sexual violence ranging from hazing in the streets and harassments to sexual assault perpetrated by spouses' relatives.
  - Women also reported fleeing their homes to escape violence, and seeking support or protection from police or relatives.
  - 89% see themselves as victims of social and environmental circumstances due to the violence perpetrated against them.
- 4. The physical medical needs according to the testimonies of the female inmates themselves:**
- 9 female inmates (34%) are suffering issues with their respiratory system
  - 10 female inmates (62.5%) are suffering from irregularities with their period
  - 4 female inmates (14%) are suffering issues with their Thyroid Gland
  - 9 female inmates (31.8%) are suffering vision problems and in need for a medical check-up or glasses
  - 7 female inmates (25%) expressed that what they suffer medically is severe and unbearable and the rest described the severity of their suffering as mild and bearable to moderate
- 5. The psychological medical needs:**

<sup>3</sup> Most threats were made by male siblings and/or family members of spouses or former spouses.

- 14 female inmates (50%) reported suffering from psychological disturbances, having history of diseases dating several years before their detention, and that half of them referred to treatment with only five of them whose psychological suffering has ended.
- 22 female inmates (78.5%) expressed the need for mental health services during detention due to suffering from psychological problems and symptoms including difficulties with sleeping, memory, concentration, in addition to desiring isolation and feeling of guilt. 15 female inmates (61%) expressed preferring individual (one on one) psychotherapy and 7 of them (29%) expressed preferring group psychotherapy.

**6. Financial needs:**

- 23 female inmates (82%) are suffering from difficult financial conditions that date back prior to their detention.<sup>4</sup>

**7. Vocational rehabilitation needs:**

- 21 female inmates showed interest in working, but they don't have the skills,
- 5 others expressed that currently they are incapable of working due to health problems
- 2 female inmates have the skills and the desire to work.
- When checking for which crafts the female inmates would like to acquire, they agreed on four options:
  - mosaic workshop – 13 female inmates
  - sewing and knitting – 8 female inmates
  - 4 chose handicrafts
  - 1 chose weaving
  - 2 didn't choose but they showed interest in learning and mastering a craft that could help them improve their living conditions.

**Recommendations for Planned Interventions in Treatment and Rehabilitation based on the results of the Study**

1. The indicators of symptoms and suffering reflect a high need for psychosocial intervention. Based on that, the project was developed in cooperation with UN Women and in partnership with the correction centres' administration and TRC to meet those needs.
2. It is important to ensure that the intervention involves the family, especially that many of the female inmates are in disagreement (have issues) with the family.
3. It is recommended to perform a regular medical check-up, especially for eyes and vision, as a number of the female inmates expressed a need for eyeglasses and a female Gynaecologist because many of them reported irregularities with their menstruation.
4. Participation in medical, psychological and legal awareness-raising of the female inmates through booklets leaflets and lectures.

<sup>4</sup> CRC administrations provide support via referrals to the Ministry of Social Affairs' financial assistance programme.

5. The majority of the female inmates expressed interest and readiness for vocational training, due to the expected positive impact in terms of dispersing the feeling of loneliness and emptiness, and the expected financial benefits, as well as participating in enabling them to provide for themselves after being released which will help reintegrate them in the society later on.
6. The importance of conducting sports, cultural and entertainment activities which motivate them to improve their relationships with one another, and provide a positive impact on improving self-esteem and a healthy life style creating a state of mental clarity and comfort.
7. The necessity for having a safe house for the female inmates whose lives are threatened after being released, which is a shared responsibility that should be coordinated with other institutions including the Ministry of Social Affairs, knowing that the CRCs are not responsible for this aspect.



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