

# People on the Move: Torture and Migration

DATA IN THE FIGHT AGAINST IMPUNITY



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## DATA IN THE FIGHT AGAINST IMPUNITY THEMATIC REPORT 2017

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The International Rehabilitation Council for Torture Victims (IRCT) is an independent, international health-based human rights organisation which promotes and supports the rehabilitation of torture victims, promotes access to justice and works for the prevention of torture worldwide.

**The vision of the IRCT is a world without torture.**

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## The work of the IRCT

As a network of some 150 torture rehabilitation centres in more than 70 countries, the IRCT is the world's largest membership-based civil society organisation working in the field of torture rehabilitation and prevention. Its key distinctive feature lies in a holistic health-based approach to torture rehabilitation. In addition, the organisation defines itself as private, non-partisan and not-for-profit, as well as being governed by democratic structures.

The IRCT's diverse membership shares three common characteristics: **each member is a legally independent organisation that is rooted in civil society; each provides services to at least 50 torture victims annually; and each is committed to sharing its experiences throughout the IRCT and beyond.** IRCT member centres stem from all regions of the world. Given the very nature of the organisation, some of these centres may be newly established, small or fragile from an organisational perspective, while others have long trajectories of public service, appropriate budgets and solid funding structures. Together the movement is effective in fighting torture across the globe. The core strength of the movement stems from a triad of values: Solidarity, Equality and Democracy.

IRCT's network:

151

organizations

73

countries

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## Acknowledgments

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Cover photo:  
**Belgrade, Serbia - January 12, 2017:  
Refugees by the fire on a cold winter day.**  
by Nikola Barbutov / Shutterstock

# SUMMARY

By examining the data of 371 clients of five torture rehabilitation centres participating in the DFI Project, this report aims to explore the intersection between torture and displacement or migration as well as to highlight the ongoing adversity that victims of torture face in their host countries. Torture trauma often leads to severe physical and mental injuries; in cases of displacement, this trauma can be aggravated by more suffering during flight. When people seek protection in foreign countries they often live without the support of family and community, with precarious legal status and with little recourse to financial security, rights or services.

The clients sampled in this report demonstrate some noteworthy trends for further research into challenges faced by victims of torture and people on the move. Most of the clients were tortured in a context of armed conflict or widespread violence, usually by armed non-State actors such as guerrilla or paramilitary forces or State actors including police and military forces. Torture rehabilitation centres participating in this report have noted that many of their clients also suffered abuse and violence at the hands of police and border agents while in transit to their host countries.

Two-fifths of the clients reported some form of psychological problems as a result of their experience of torture and flight, while nearly one-third reported having a physical problem. Mental health disorders, such as post-traumatic stress disorder (PTSD), depression and anxiety disorders have a very practical impact on day-to-day life, with survivors often reporting severe headaches, insomnia, suicidal ideation, feeling frightened and suspicious, thus making it extremely difficult to maintain family and social relations, to work and function in society.

Torture trauma does not disappear by itself, and often worsens over time if left unaddressed. Social problems are often passed on to family members, children and even communities. Holistic rehabilitation is therefore crucial as it aims to provide socio-economic, legal, psychological and physical support to torture survivors and their families. This is an essential element in supporting victims to live fulfilling lives in their new home.

The report shows that the vast majority of the clients, well over two-thirds, are living in or near poverty, which is also corroborated by the very large numbers of people that are facing unemployment in their host communities. Research has consistently shown that these conditions of insecurity can lead to severe stressors than can aggravate existing mental health problems.<sup>1</sup> It is vital for governments to not only facilitate access to rehabilitation providers, but also to provide access to decent livelihoods, including socio-economic and legal support.

However, in many countries, there is simply no specialised support for victims of torture who have been displaced. In other contexts, even where laws and regulations do exist that stipulate rights for victims of torture who have fled, these are poorly implemented - or in some cases not implemented at all - often

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**“Torture survivors suffered from torture in their countries of origin. They suffered at the hands of traffickers and border guards while they were on their journeys to safety. And they continue to suffer from undignified living conditions when they arrive in the country of destination”**

**Bojana Trivuncic**

International Aid Network (IAN), Serbia

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due to a lack of awareness of the impact of torture trauma and of the rights of torture victims who have been forced to flee their homes. Governments must begin addressing these problems by ensuring that they meet their obligations to provide holistic rehabilitation to all victims of torture, regardless of their legal status in country.

Overall, the data indicates that torture victims who have been displaced or have migrated, experience a multitude of challenges that are likely to compound the physical and psychological trauma caused by the torture. This report suggests that it will be important to collect more data and conduct further research on how these multiple challenges connect and impact the lives of individual torture victims when they migrate or flee persecution.

**Photo**  
by AnnaKate Auten on Unsplash



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## About the DFI Project

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Central to the development of the torture rehabilitation sector's ability to evidence its work, is the collection of appropriate, consistent and comparable clinical information. The Data in the Fight Against Impunity (DFI) Project is a system-wide response to creating this ability.

Across the globe, hundreds of rehabilitation centres are providing services to thousands of survivors of torture on a daily basis, yet not all are systematically capturing the data of their clients in a way that can be used to create long-term change. Without hard facts and the ability to identify trends locally, nationally and globally, the impunity of perpetrators is likely to continue.

In June 2014, 12 rehabilitation centres from around the world were brought together to develop and test a data collection system to enable them to collect clinical data and integrate the documentation of torture at all stages of the rehabilitation process. This data can then be used to create powerful evidence-based approaches with the potential to mobilise the public and to target governments to act and to disseminate evidence-based outputs to support anti-impunity work.

These centres started to use the database in February 2015 and to adapt it to their practices, share reports about the identify of survivors, the places they were tortured, how they were tortured and by who. They have since been joined by 20 additional rehabilitation centres for phase two of the project.

Data is now being collected by 33 rehabilitation centres in 28 countries. Obtaining concrete information is key, it needs to be used effectively. Communications and advocacy are key elements of the project and throughout the first two years of the project partners received training on how to identify the most useful and powerful tools that will enable them to make progress to achieve whatever change they want to make in their context.

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33 rehabilitation centres  
in 28 countries.**

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# METHODOLOGY

**The IRCT member centres participating in the DFI Project identified the topics of sexual and gender-based violence, redress and reparations and migration as the thematic issues they wanted to examine through the prism of their newly established client databases.**

Based on feedback from the IRCT member centres involved in DFI and the relevance of the data they have collected, centres from five countries were identified to be part of the report on migration. The information in this report is based on anonymised client data that the torture rehabilitation centres recorded in their DFI database, an interview to further explore the context and meaning of the data as well as other related background information.

The data included in this report has been collected over a short period of around 2 years. As the data set used in the report is in its infancy, it is necessary to note a number of limitations which impact on the degree of certainty reached by the conclusions in this report. Firstly, the numbers of total clients or of clients with a full dataset that were analysed is low for all five IRCT members in the report. This is in part due to the short period of the project as well as technical

issues that members may have experienced when updating new versions of the database. However, it is also due to the nature of the data entry process, whereby a client's data may be recorded over a number of different interactions with the rehabilitation centre, and it may take some clients longer than others to disclose sensitive information in the course of their treatment. Secondly, there is a degree of discrepancy in the way some of the data categories have been interpreted by the IRCT members. However, where this may have been the case, the IRCT members have either clarified the specific context relevant to the data category, or the data category has not been relied on in the report.

The conclusions drawn from the data highlight various issues relating to the experiences and difficulties faced by the 371 individuals whose data has been collected and should not be seen as a claim to being a representative sample of the situation of all victims of torture who have been displaced or have migrated. These experiences merit further examination through research and data analysis in order to better understand the detailed and root causes of the challenges and their geographical applicability and relevance.

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**The information in this report is based on anonymised client data that the torture rehabilitation centres recorded in their DFI database, an interview to further explore the context and meaning of the data as well as other related background information.**

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## The following IRCT member centres participated in this report

Country	IRCT Member Centre
Bosnia and Herzegovina	Centre for Torture Victims, Sarajevo (CTV)
Cameroon	Trauma Centre Cameroon (TCC)
Mexico	Colectivo Contra la Tortura y la Impunidad (CCTI)
Serbia	International Aid Network (IAN)
Uganda	African Centre for Treatment and Rehabilitation of Torture Victims (ACTV)



**Secondary students at refugee settlement in Uganda**

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# LEGAL OBLIGATIONS

Torture is universally and absolutely prohibited and is considered a non-derogable principle of international law. The prohibition applies in all territories and at all times, allowing for no exceptions. This is enshrined in a number of international instruments, including the Universal Declaration of Human Rights, the International Covenant on Civil and Political Rights and, most notably, the United Nations Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment. The right to freedom from torture is further established in a number of regional legal documents relevant to this report, including Article 5 of the African Charter on Human and People's Rights, Article 5 of the American Convention on Human Rights and Article 3 of the European Convention for the Protection of Human Rights and Fundamental Freedoms.

The Convention against Torture also carries with it an explicit non-refoulement provision in Article 3, which prohibits States from returning a person to another country where "there are substantial grounds for believing that he would be in danger of being subjected to torture". It provides a human rights component to the non-refoulement provision in Article 33 of the Convention relating to the Status of

Refugees (Refugee Convention). All of the countries that are examined in this report - Bosnia and Herzegovina, Cameroon, Mexico, Serbia and Uganda - have ratified the Convention against Torture and are signatories to the 1951 Refugee Convention.

Article 14 of the Convention against Torture establishes a right to redress for victims of torture and ill-treatment. This right is composed of effective remedy and reparation, which includes compensation and the right to "as full rehabilitation as possible". In its General Comment Number 3, the UN Committee against Torture makes clear that the right to redress includes restitution, compensation, rehabilitation, satisfaction, and guarantees of non-repetition. It further specifies that rehabilitation must be holistic and "include medical and psychological care as well as legal and social services". The Committee has made it clear that States have an obligation to ensure that all victims of torture have access to rehabilitation, including those who are outside of their own State's territory, regardless of the "identity or status" of the victim of torture including refugees and asylum seekers.

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**All the countries that are covered  
in this report are parties to the  
Convention against Torture and  
the Refugee Convention.**

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# POPULATION GROUP

# 371

clients studied  
in this report

There are a total of 371 client records that were analysed across the five torture rehabilitation centres in this report. All clients allege that they have experienced torture and they are currently receiving treatment in one of the five torture rehabilitation centres. They also share similar experiences in that they have either been forcibly displaced through armed conflict or persecution, or they have migrated for another reason and are now living in a different country or context.

There is a fairly even gender spread in the population group, with 52 percent of the clients being male and 48 percent being female.

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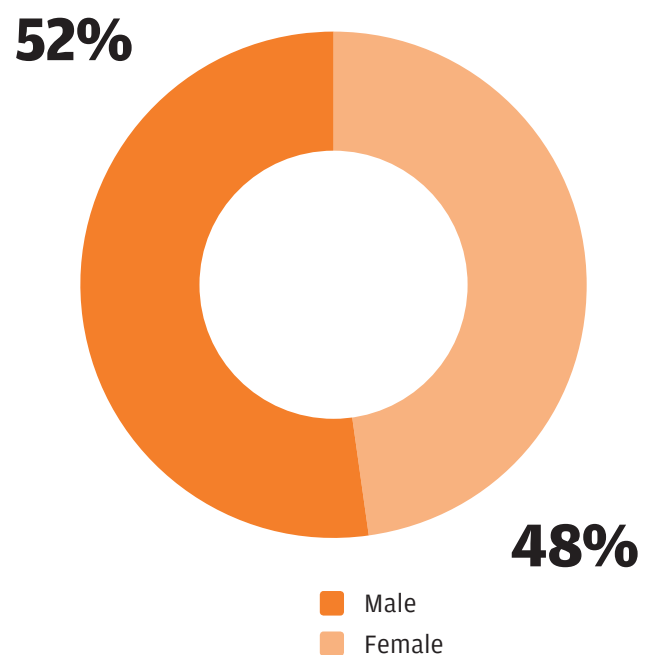
**There are variations  
between the five focus  
countries.**

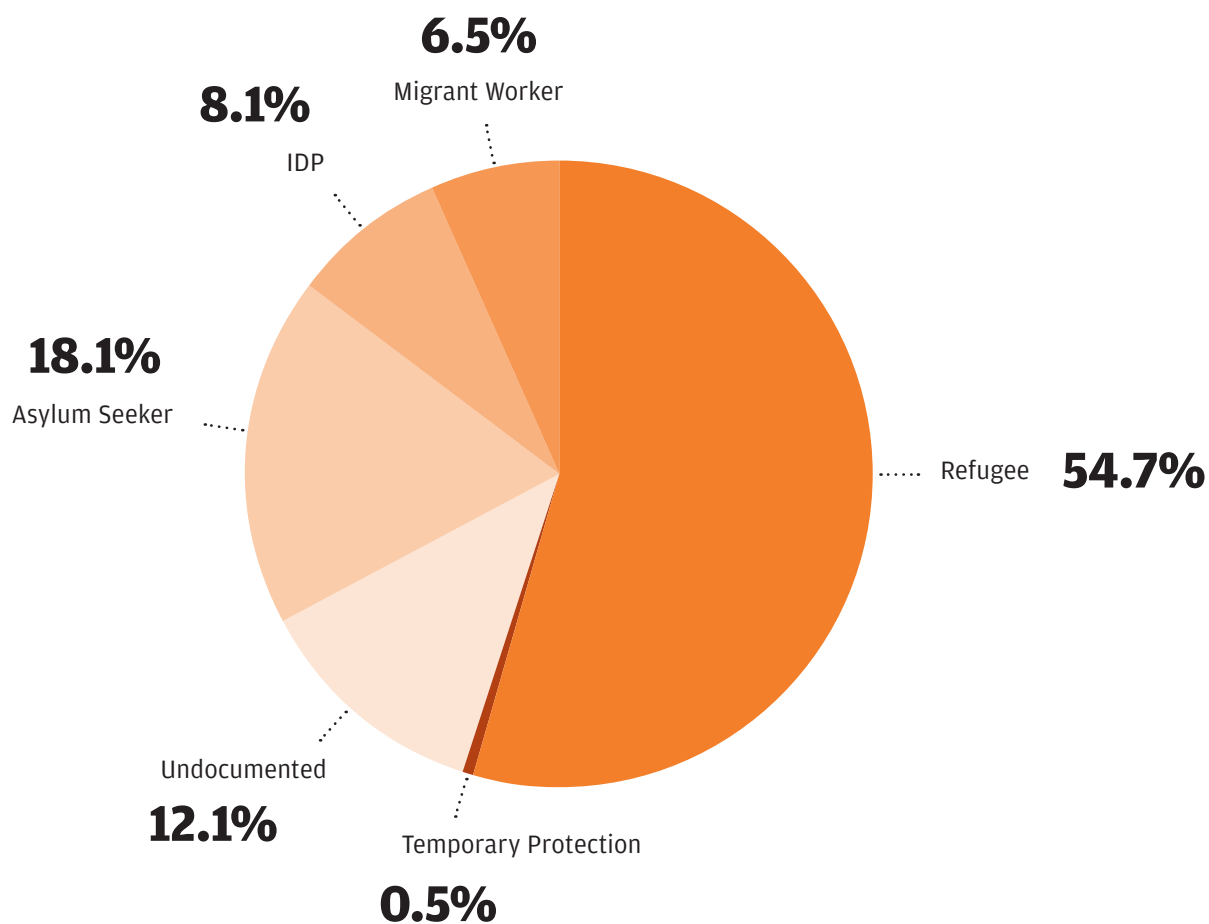
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**Figure 1. Gender**

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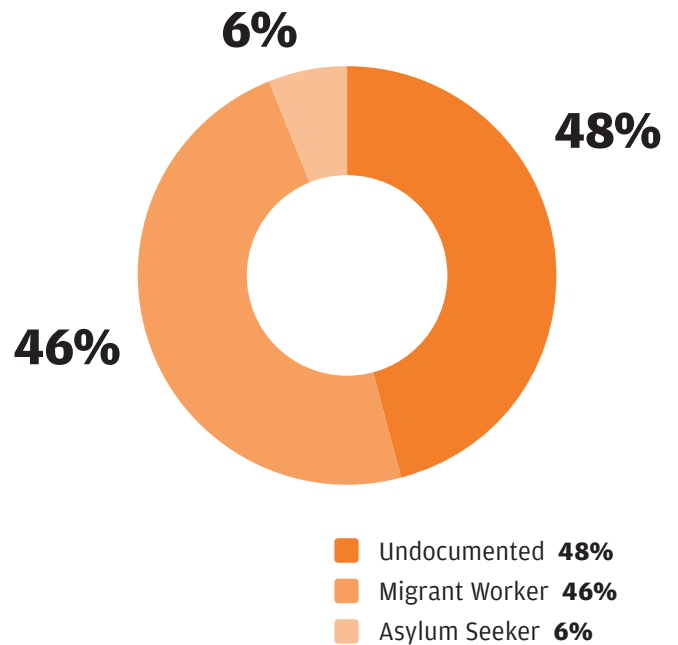
**Figure 2. Legal Residence Status**

The majority of the clients - 54.7 percent - that are in the sample population have received refugee status or the equivalent of that in national legislation. Asylum seekers comprise the second largest group, with 18.1 percent of the clients in this sample seeking asylum in that country. The remaining 27.2 percent clients were either internally displaced persons (IDPs), undocumented migrants or migrant workers. A very small minority have received temporary protection status. As will be demonstrated below, there are significant variations between the five focus countries.

Mental health can be aggravated by factors in the host country or community, including living under legally uncertain residence categories, such as living as undocumented migrants or when refugee status has to be reviewed. This typically leads to further problems as the uncertainty leads to further instability and anxiety and also because it often means that people do not have recourse to rights.

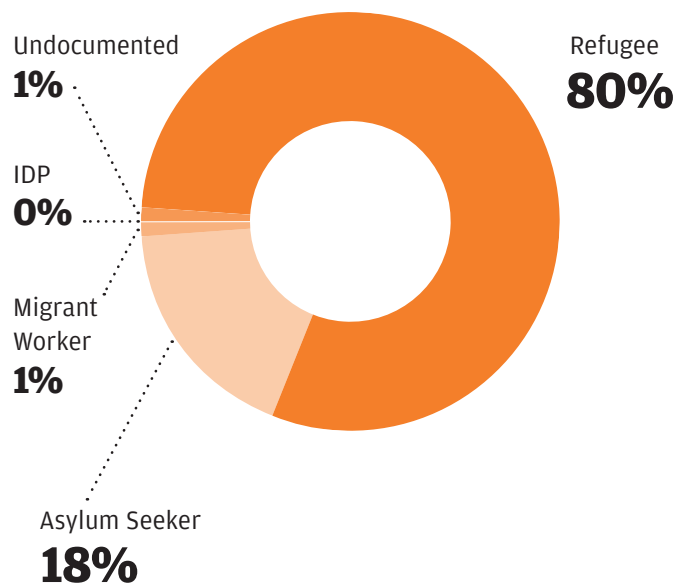
In **Mexico**, only a small minority of the clients sought asylum in the country. According to IRCT member centre CCTI, this is because most of their clients are migrant workers or undocumented migrants on their way to find work or join family in the United States.

**Figure 3. Legal Residence Status**  
**Mexico**



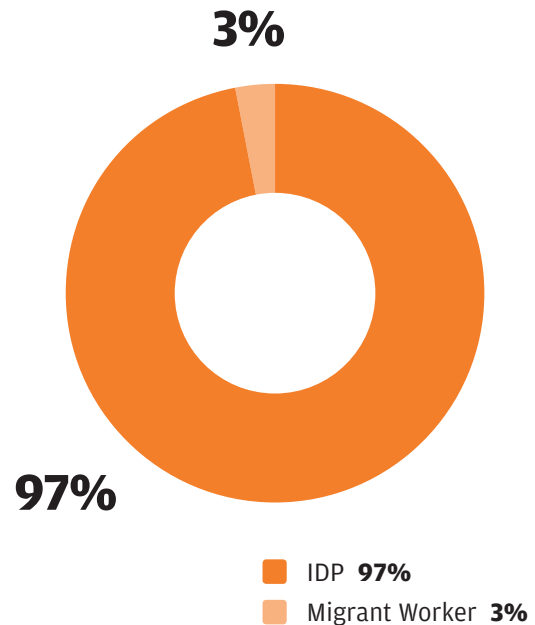
In **Uganda**, the vast majority of ACTV's (98 percent) migrant clients are refugees and asylum seekers, coming from the Central African Republic, Burundi and Rwanda.

**Figure 4. Legal Residence Status**  
**Uganda**



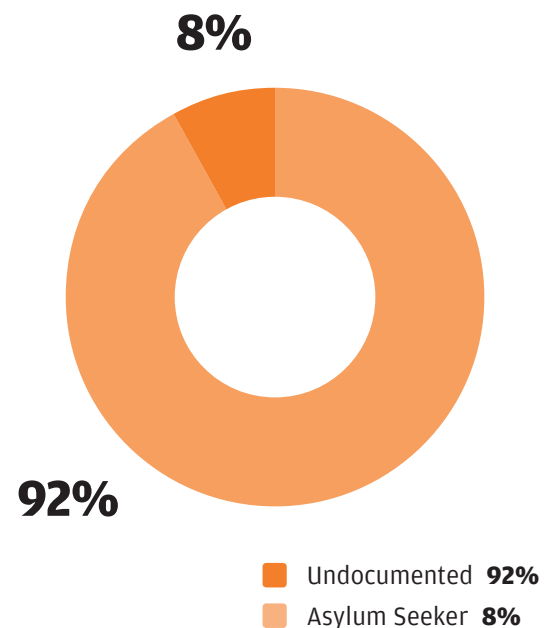
In **Bosnia and Herzegovina**, CTV Sarajevo's clients are mostly internally displaced persons (IDPs) who were displaced during the breakup of Yugoslavia in the 1990s. One person was classified as a migrant worker.

**Figure 5. Legal Residence Status: Bosnia and Herzegovina**



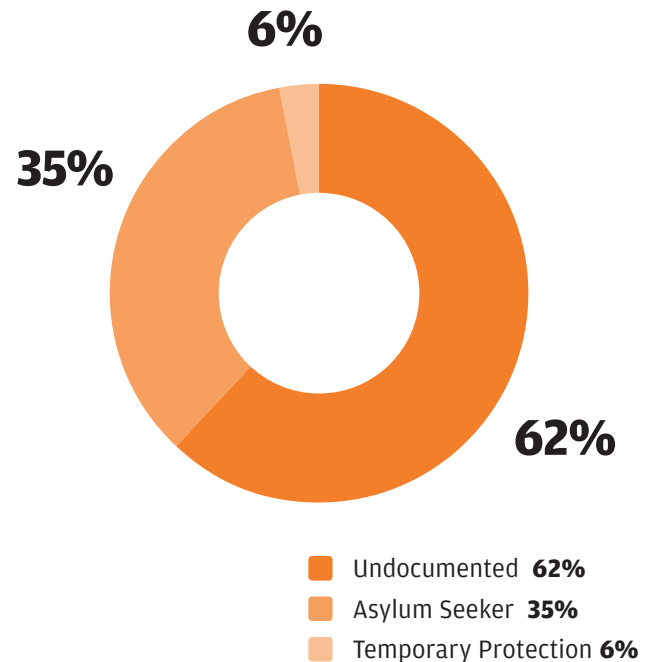
IAN's clients in **Serbia** are asylum seekers and undocumented migrants who have arrived in recent years, largely due to conflict in the Middle East. Only a minority, 8 percent, have claimed asylum in Serbia, while 92 percent are in transit, seeking to join family or apply for protection in the European Union. Most of them come from Syria, Iraq and Afghanistan and have experienced torture and ill-treatment in their home countries and in some instances at the hands of border guards too.

**Figure 6. Legal Residence Status: Serbia**



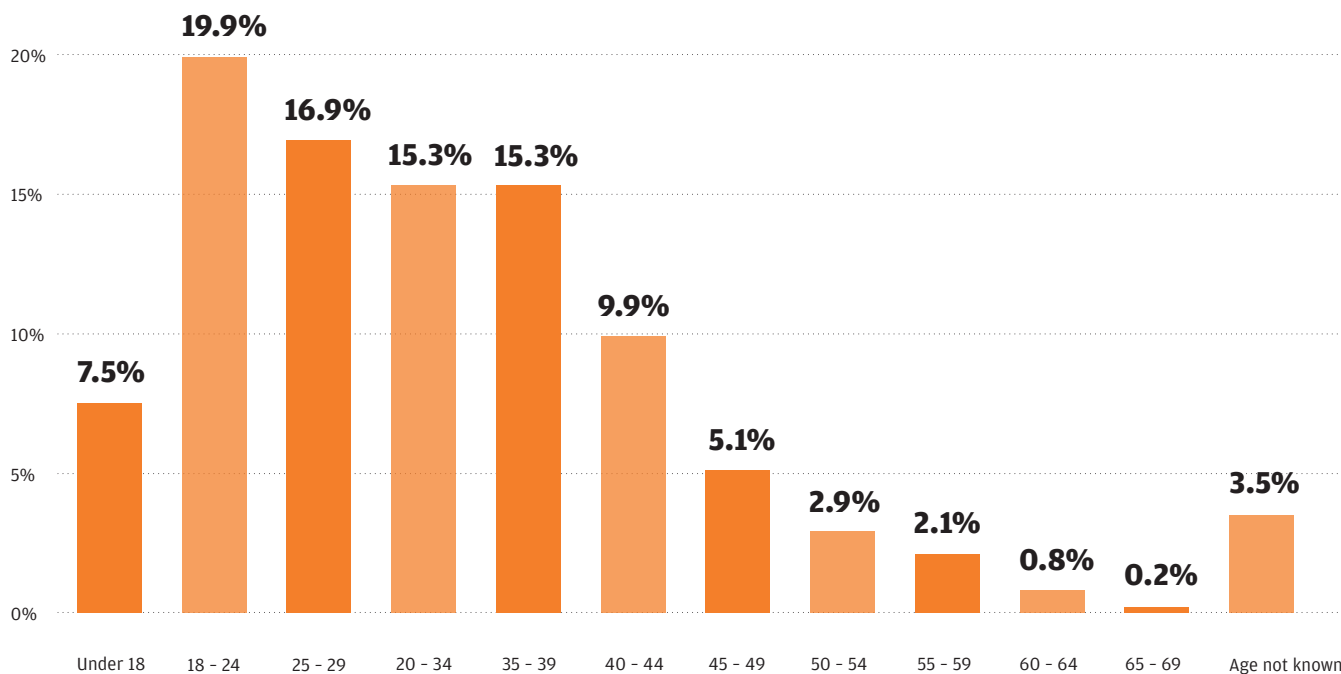
Most of the clients in **Cameroon** are undocumented migrants or asylum seekers. An estimated 500,000 people have fled armed conflict with Boko Haram to Cameroon.

**Figure 7. Legal Residence Status: Cameroon**



This population group contains clients from all ages at the time they experienced torture. In line with what many IRCT member centres report, torture is ubiquitous and can impact people of all ages. The clients in this population group tended to be younger. Most of them - 59.6 percent - were under the age of 35 at the time torture occurred. Over one fourth of this population group - 27.4 percent - were aged 24 and under, the United Nations definition of “youth”. 7.5 percent of the clients in this sample were children at the time they experienced torture, with some as young as 9 years of age. (see Figure 8, following page)

**7.5% of the clients in this sample were children at the time they experienced torture.**

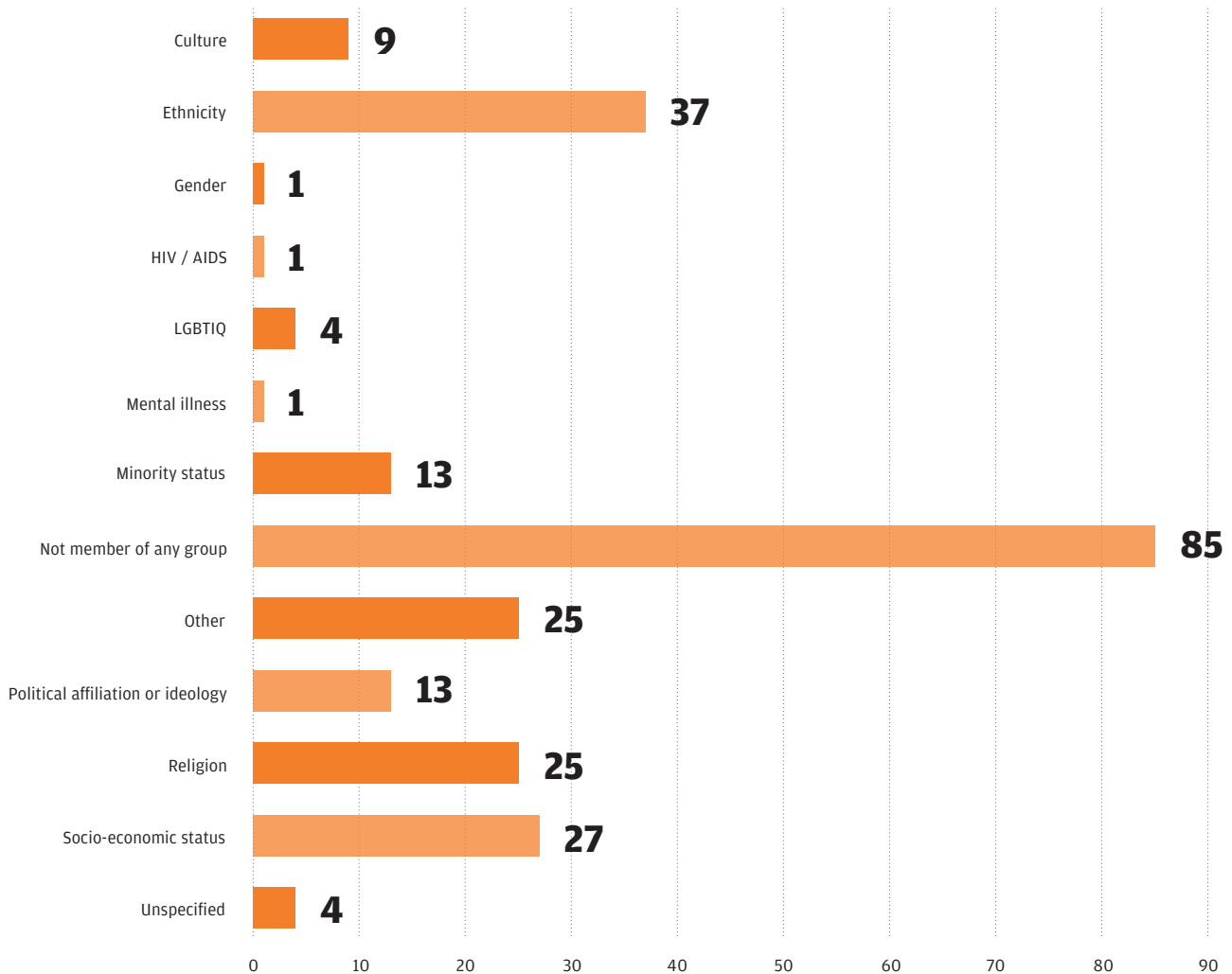
**Figure 8. Age at the Time of Torture Incident**

**“Some of the children have seen their parents being violently killed before their own eyes. Witnessing such horror naturally leads to intense psychological suffering. Many children feel guilt or shame of having survived while their family members have not. This is a real tragedy. The upheaval of being uprooted and the continuous insecurity in the host country, coupled with the separation from family is detrimental to the physical, psychological and social development of the child.”**

**Joel Manfo**  
Trauma Centre Cameroon



## Figure 9. Member of a group historically subjected to discrimination



Many of the clients in this population group belong to one or several groups historically subjected to discrimination, whereas 85 (23 percent) of the clients did not express any such affiliation. The most frequently cited basis for discrimination were ethnicity, socio-economic status and religion. Many of the clients fell under multiple categories of discriminated groups. It is important to note, however, that data was not available for 34 percent in this sample size.

**The most frequently cited basis for discrimination were ethnicity, socio-economic status and religion.**

# CONTEXT AND EXPERIENCE OF TORTURE



This section will focus on the clients' experiences of torture and the context in which it takes place. The data will illustrate the main trends in terms of torture methods used, perpetrator groups, locations of the torture incidents and the purpose for which the clients were tortured. Understanding the specific torture experiences and the context is an important element in providing adequate rehabilitation support and ensuring an effective evaluation of claims for protection against refoulement.

The general country contexts vary greatly between the focus countries. In Mexico, the State itself is the main perpetrator of torture against migrants while in Cameroon and Uganda, the States are struggling to deal with recent refugee influxes due to political instability and armed conflict in their neighbouring regions. In Cameroon, there are over half a

million refugees, asylum seekers and internally displaced persons fleeing largely from conflict with Boko Haram in the Lake Chad basin and conflict in the Central African Republic. In Uganda, refugees are fleeing from political instability, persecution and conflict in Burundi, Rwanda and the Democratic Republic of Congo.

Clients in Bosnia & Herzegovina are IDPs who were displaced during the wars in the former Yugoslavia in the 1990s, who are still heavily traumatised and are struggling to gain recourse to rights and compensation for the horrors they witnessed during the war. Finally, Serbia is largely a country of transit for refugees en route to the European Union, with many of IAN's clients travelling towards the border with Hungary.

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**Understanding the specific torture experiences and the context is an important element in providing adequate rehabilitation support and ensuring an effective evaluation of claims for protection.**

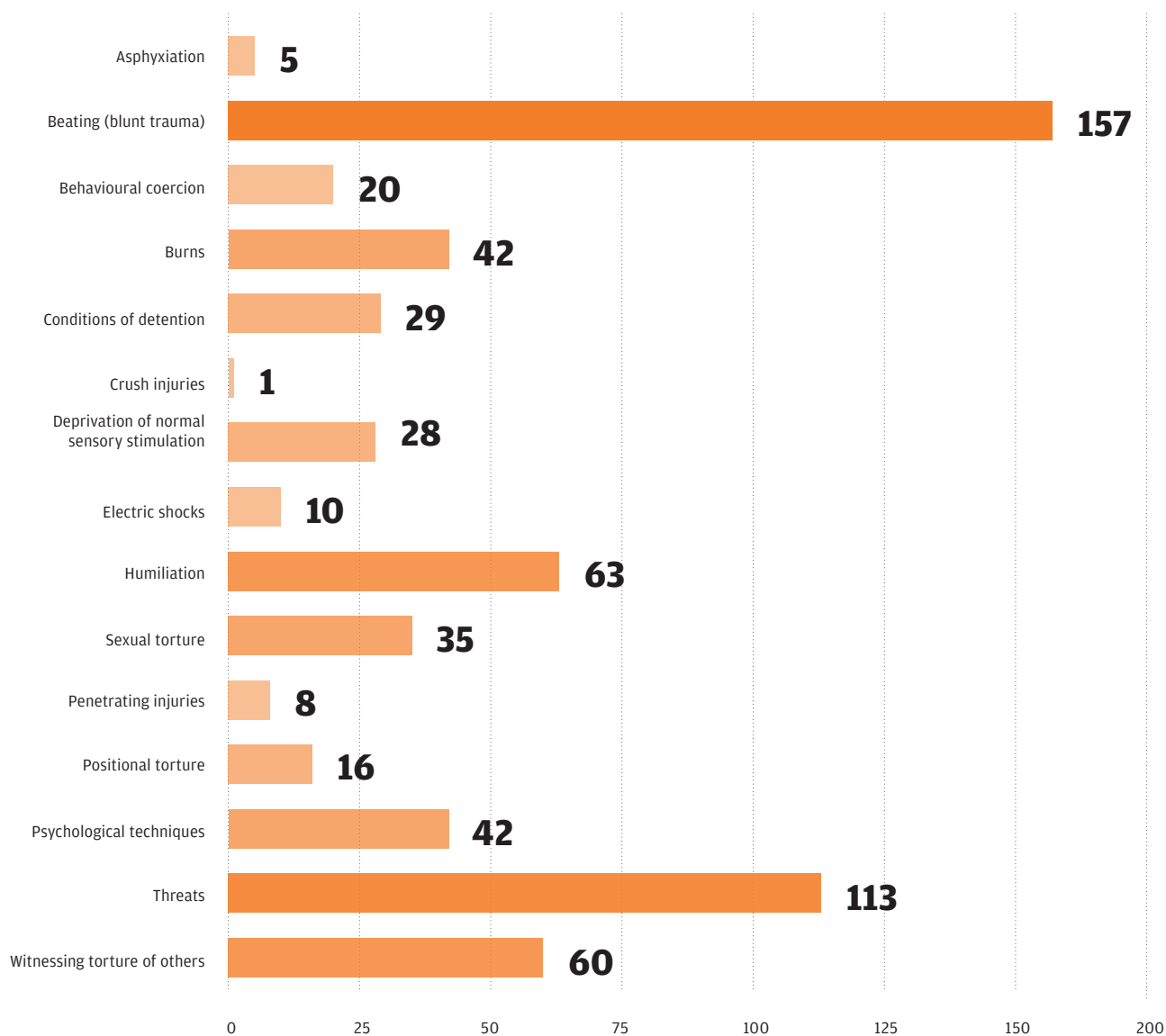
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**Silhouette of Nigerian woman in refugee camp, northern Cameroon**

by UK Mission to the UN/Lorey Campese via Creative Commons license <https://creativecommons.org/licenses/by/2.0/legalcode>

**Figure 10. Methods of Torture**

The data indicates that victims are often tortured using a combination of torture techniques. Beatings through blunt trauma was by far the most common method of torture reported by the clients, with 42 percent in this population sample noting that they had been tortured with this method. Blunt trauma typically includes punching, kicking, slapping, *falaka* (being beaten on the soles of the feet) and being assaulted with truncheons and wires. 31 percent of them alleged that they were threatened by their perpetrators,

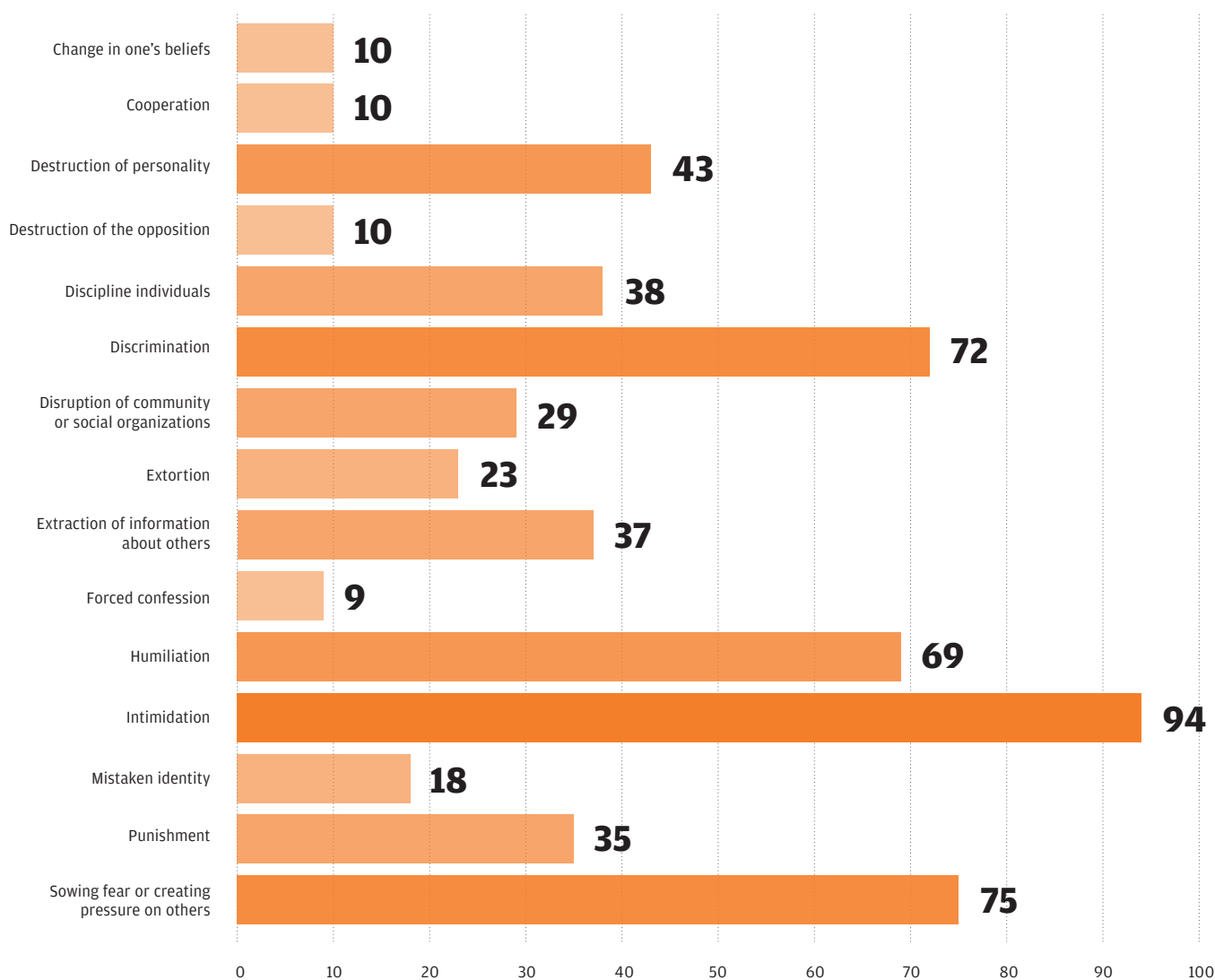
which includes threatening victims with rape, further torture, harming or raping family members and mock executions. 17 percent of the clients alleged that they were humiliated during their experiences of torture, including verbal abuse, being forced to perform humiliating acts or acts contrary to religious or cultural beliefs. 16 percent reported that they witnessed torture of others. 11 percent of the clients reported psychological techniques having been used on them, which includes forcing them to betray others,

and another 11 percent reported being burnt as a method of torture including being burnt by cigarettes and having scalding hot liquids poured on their bodies. 9 percent of the clients in this sample group reported experiencing sexual torture, including rape, sexual molestation and instrumentation.

When the clients were asked by their clinicians whether they had any indication as to the purpose of their torture, 25 percent reported that the purpose was to intimidate

them. 20 percent alleged that they were tortured in order to foster a climate of fear that would out pressure or sow fear in others. 19 percent noted that they were tortured because they belonged to a group historically subjected to discrimination, while 18 percent reported that the purpose of their torture was to humiliate them. It is notable that very few clients were tortured for the purpose of obtaining a confession.

**Figure 11. Purpose of Torture**



10 percent of the clients (36) noted that they were tortured by occupying forces. Member centres participating in this report observe that occupying armies or guerrilla forces will often use torture to induce fear and submission in the local population.

The most frequently cited State-level perpetrators were national-level government officials, with 12 percent of the clients reporting that they were tortured by this perpetrator group. The police, armed forces and prison officials were the next most frequently cited State-level perpetrators, with around 3 percent to 4 percent of clients having noted this group as their perpetrators. The reason national-level government officials rank so highly is because it is often very difficult for victims to identify their perpetrators. In many countries, torture victims are apprehended by State officials in civilian clothes or do not wear visible signs of identification, making it impossible to know for certain which organ of the State they belong to. Many perpetrators in this category are subsequently identified as members of the armed or security forces or as police officers. (See Figure 12)

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**10 percent of the clients (36) noted that they were tortured by occupying forces.**

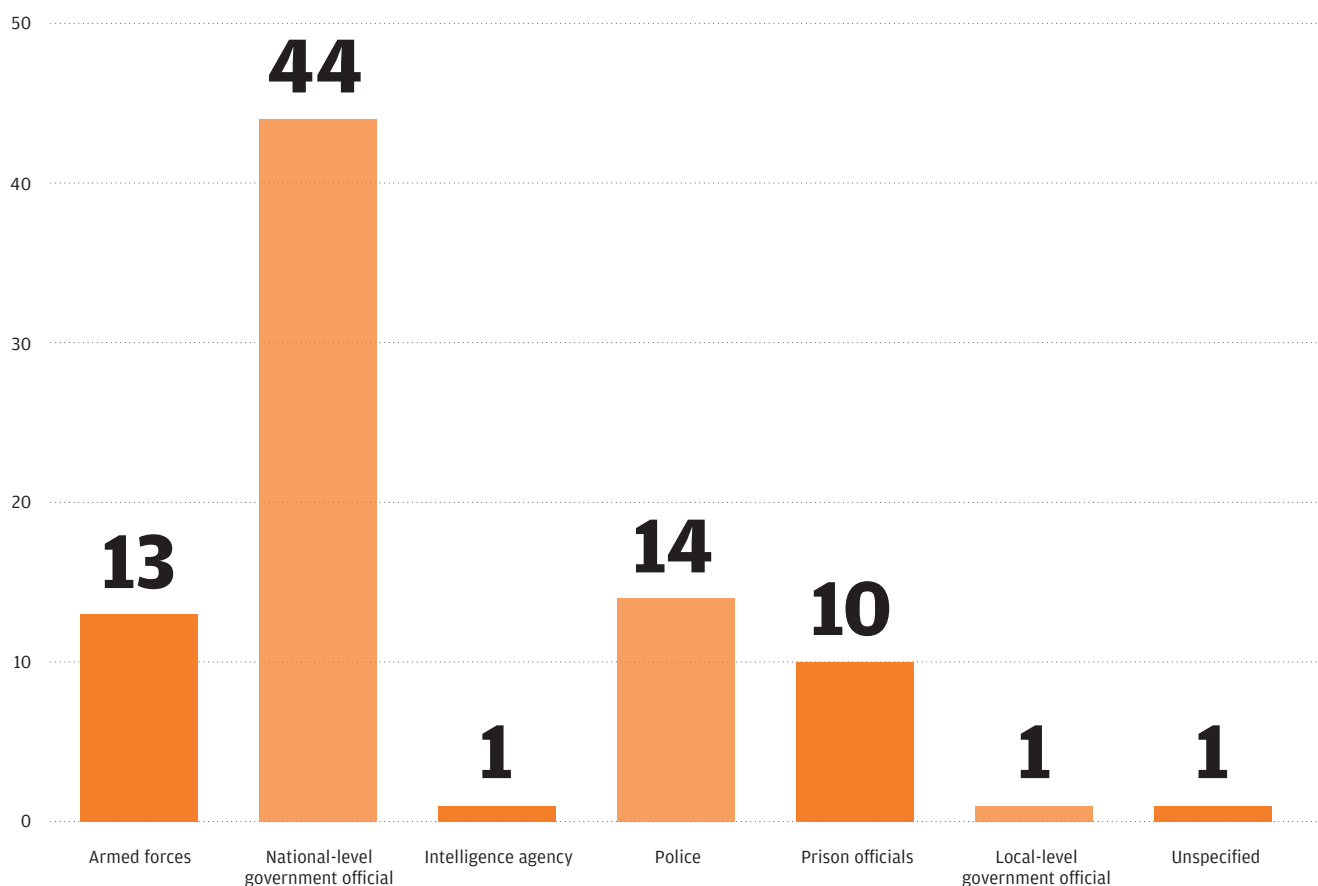
**Occupying armies or guerrilla forces will often use torture to induce fear and submission in the local population.**

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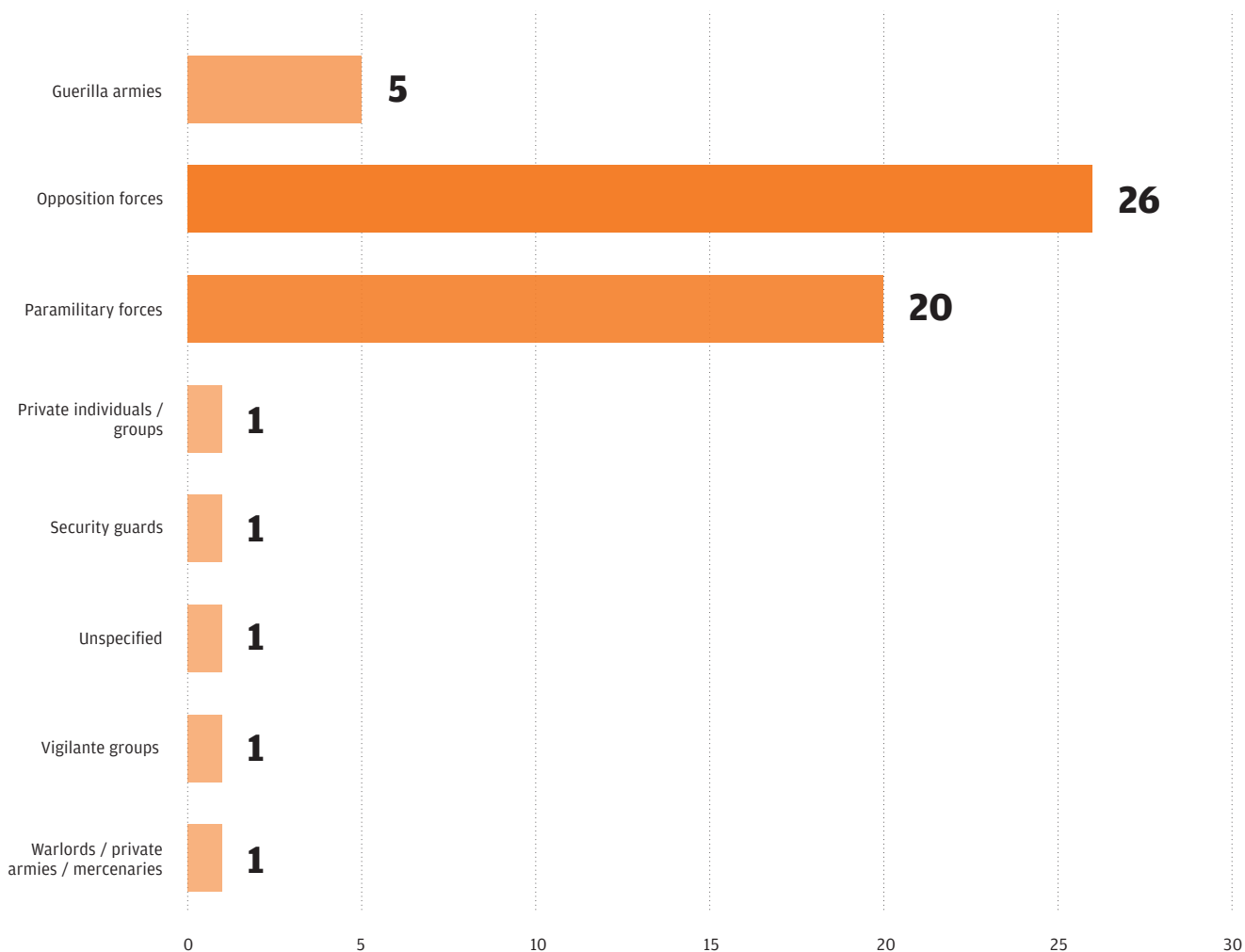
**Crushed buses and the debris of war line a street of blown up buildings in Sarajevo.**  
by Northfoto / Shutterstock

**Figure 12. Perpetrator Affiliation:  
State Actor**



**The reason national-level government officials rank so highly is because it is often very difficult for victims to identify their perpetrators.**

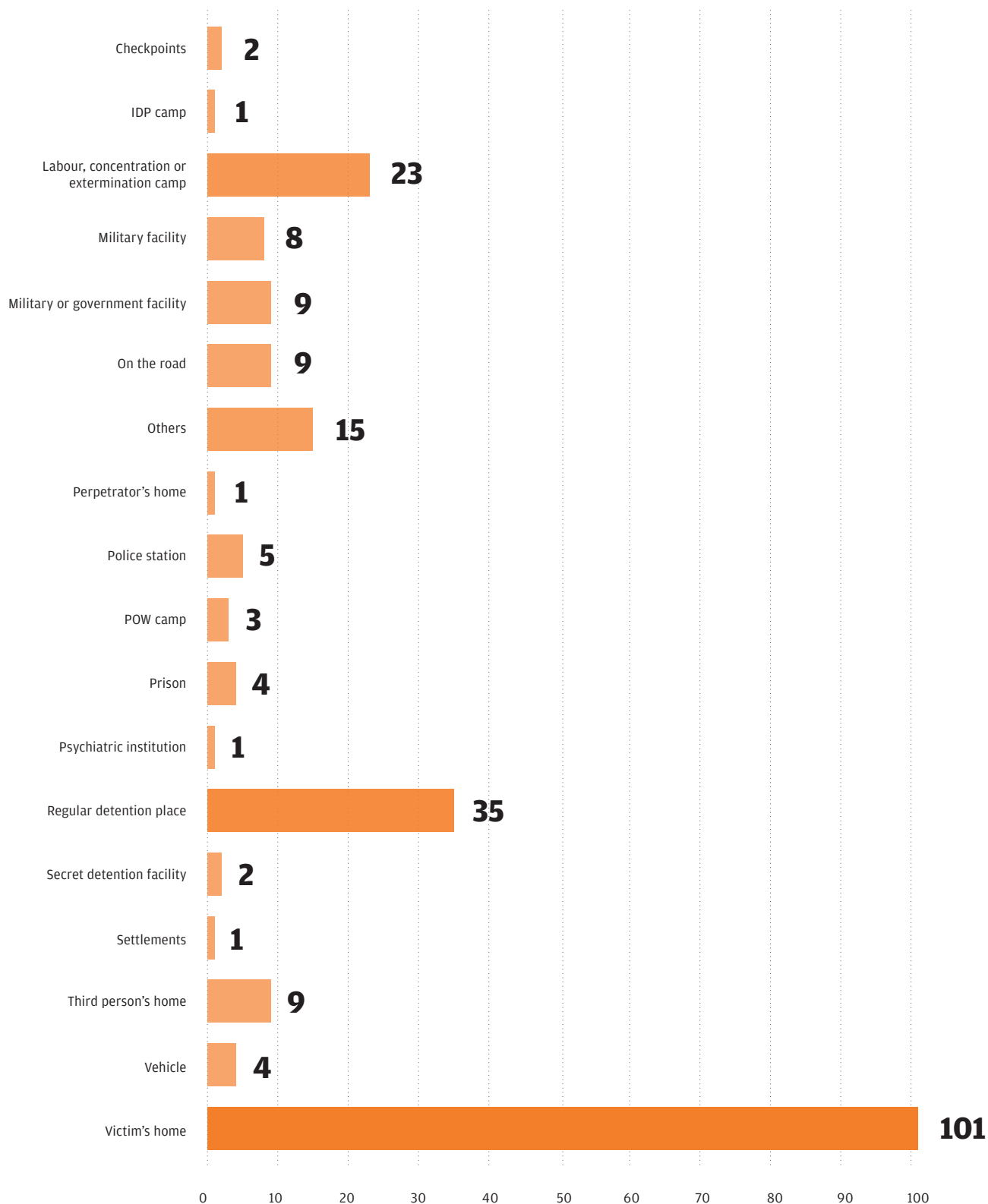
### Figure 13. Perpetrator Affiliation: Non-State Actor



The most frequently cited non-State actors were opposition forces with 7 percent of the clients noting that they were tortured by opposition forces. 5 percent of the clients noted that they were tortured by paramilitary forces. Most of the opposition forces perpetrated torture in the context of the ongoing civil wars in the Central African Republic and Syria.

27 percent of the clients reported that they were tortured in their homes, by far the most frequently reported location of torture. 9 percent of the clients alleged that they were tortured in a regular detention facility (meaning not in a secret detention facility), while 6 percent claimed that they were tortured in a labour, concentration, or extermination camp. (See Figure 14)



**Figure 14. Reported Locations of Torture**

# IMPACT OF TORTURE IN THE CONTEXT OF MIGRATION

The experience of displacement and migration can lead to severely negative and complex mental health problems. Being uprooted from one's home due to war, conflict, persecution or torture is traumatising, and often compounded by perilous journeys to safety. People often lack basic necessities such as food, water, shelter and access to medical attention. The process of flight is also

frequently undertaken in dangerous circumstances, with many of the clients in this report having fled not only from state sponsored violence, but also from non-state actors as they were fleeing across borders. Many clients from the Middle East, have been forced to make dangerous voyages on unseaworthy boats in the Mediterranean Sea.

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#### **Central American migrants find quarter in southern Mexico**

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## Physical and Psychological Problems

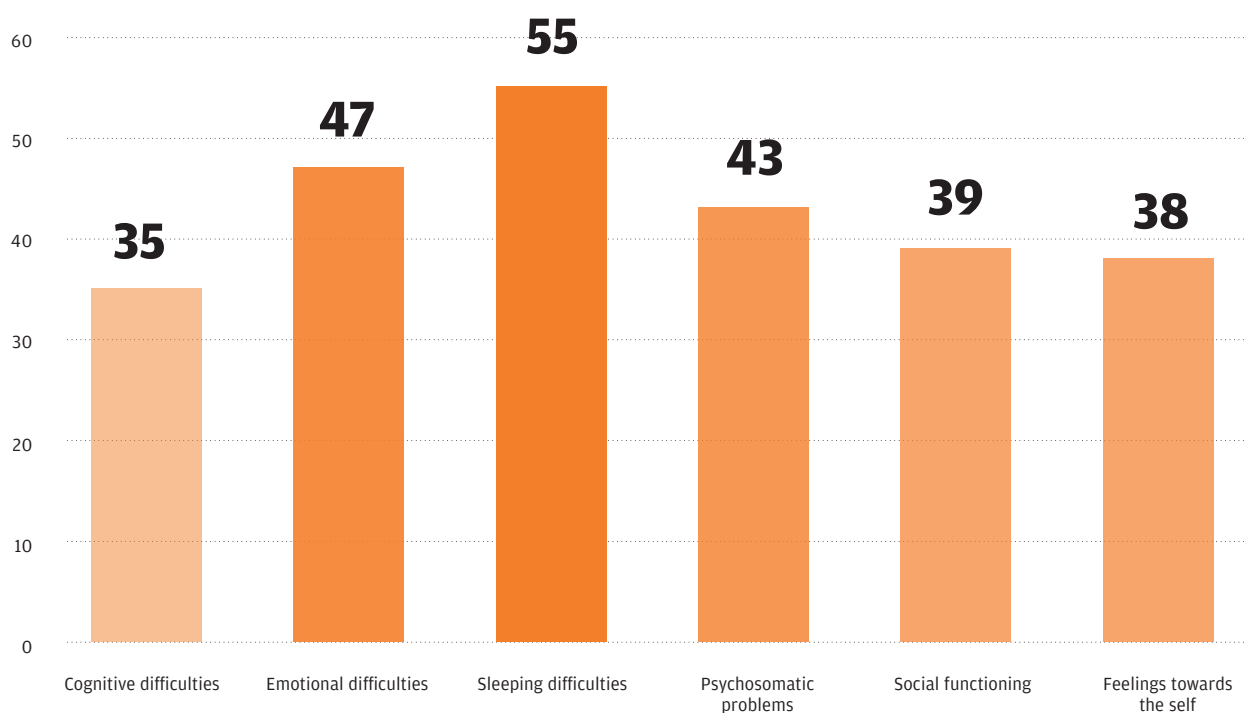
40 percent of the clients are reporting some form of psychological problems as a result of their torture. This often comes in the form of post-traumatic stress disorder and deep depression. Victims of torture often report having severe headaches, not being able to sleep, feeling suicidal, easily frightened and suspicious, making it extremely difficult to maintain social relations, to work and function in society. Many of the torture rehabilitation centres participating in this report note that their clients describe a general feeling of emptiness, living with no meaning in life. These problems have a very direct and practical impact on all aspects of a person's life, including their families, communities and societies.

In **Cameroon**, 90 percent of their clients reported experiencing some kind of psychological problem. The most frequently cited problems were emotional and sleeping difficulties as well as psychosomatic problems. IRCT member centre TCC report they are perceived by the local population to be competing for scarce resources and public services, which can lead to greater marginalisation and compound existing mental health disorders.

**“We have seen significant numbers of people who have been uprooted in extremely violent circumstances; having suffered from torture themselves and having witnessed family members being tortured or killed”**

**Joel Manfo**  
Trauma Centre Cameroon

**Figure 15. Psychological Problems Reported by Clients: Cameroon**

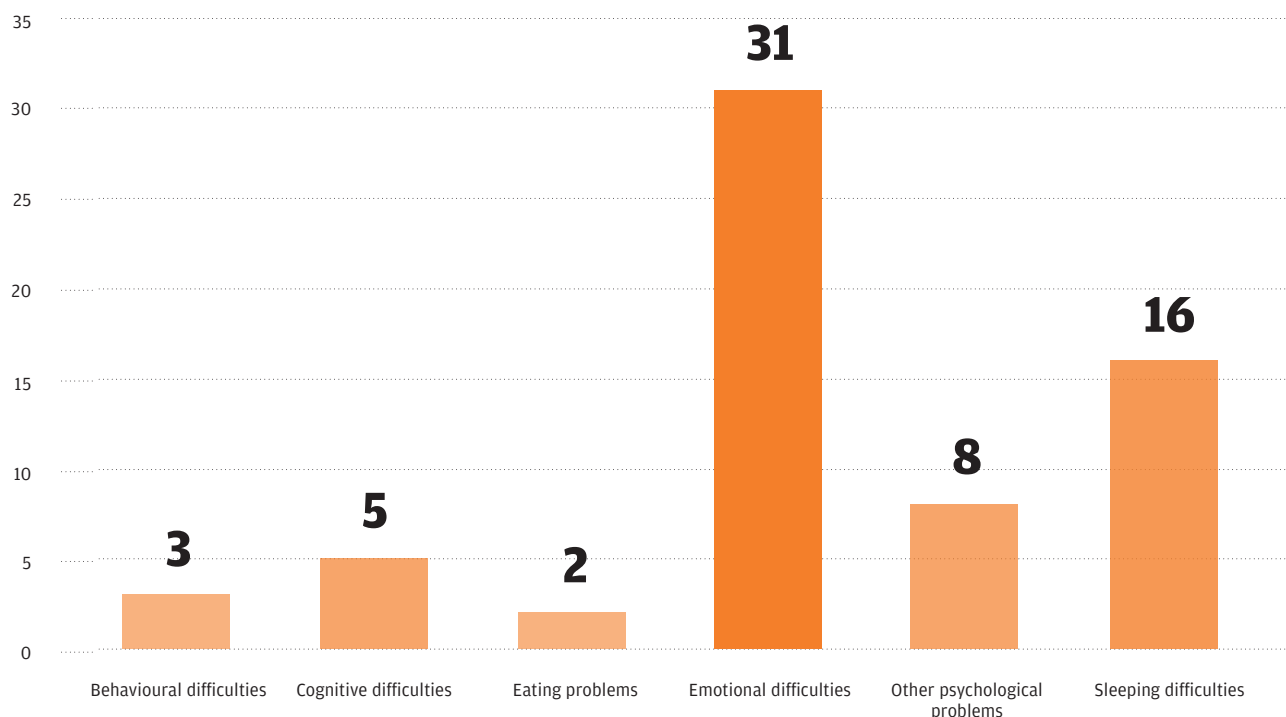


In **Mexico**, 87 percent of their clients reported that they were having some form of psychological problems, with 67 percent specifically mentioned emotional difficulties, while 35 percent mentioned sleeping difficulties.



**Central American migrants find quarter in southern Mexico**  
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**Figure 16. Psychological Problems Reported by Clients: Mexico**



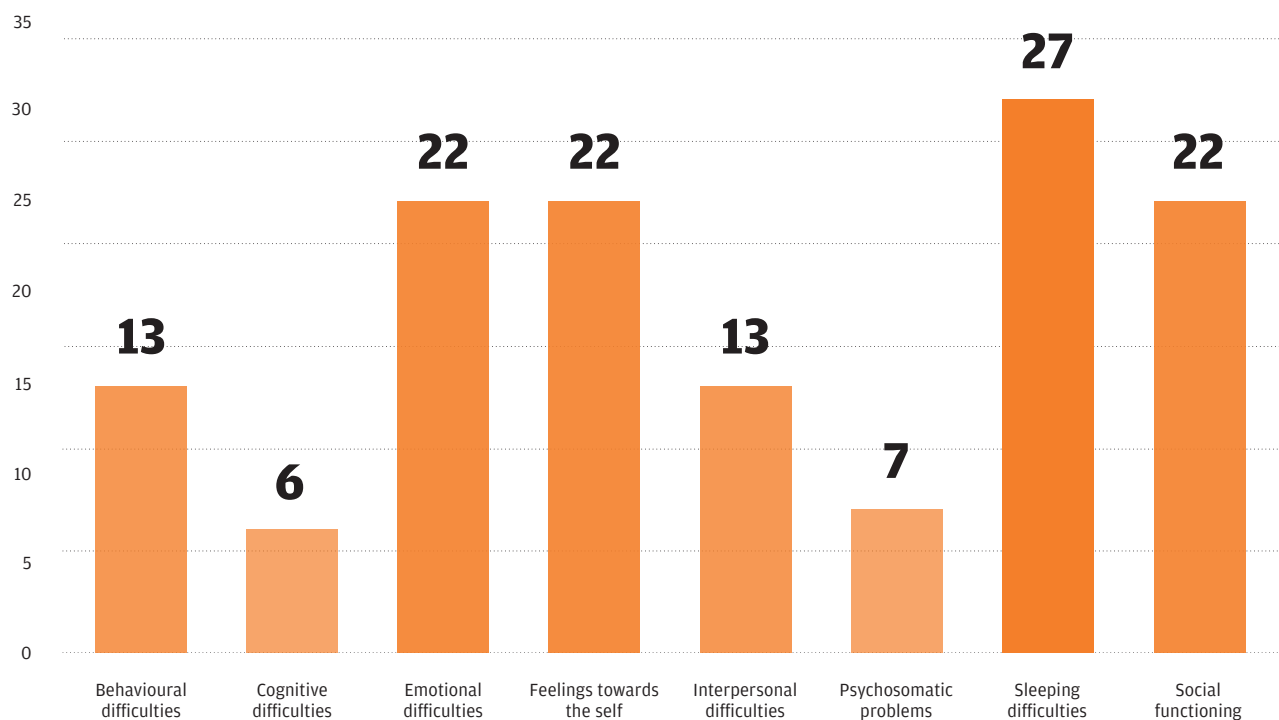
In **Bosnia and Herzegovina**, 93 percent of their clients experienced some form of psychological problems, with 90 percent noting that they were struggling with sleeping or experiencing insomnia. Emotional difficulties, problems in social functioning and having negative thoughts and feelings about themselves also ranked very highly among the psychological problems reported by their clients.

**“Many of our clients have severe mental health problems because of the torture they suffered in their home countries. And in many cases, the act of fleeing is, in itself, also traumatising”**

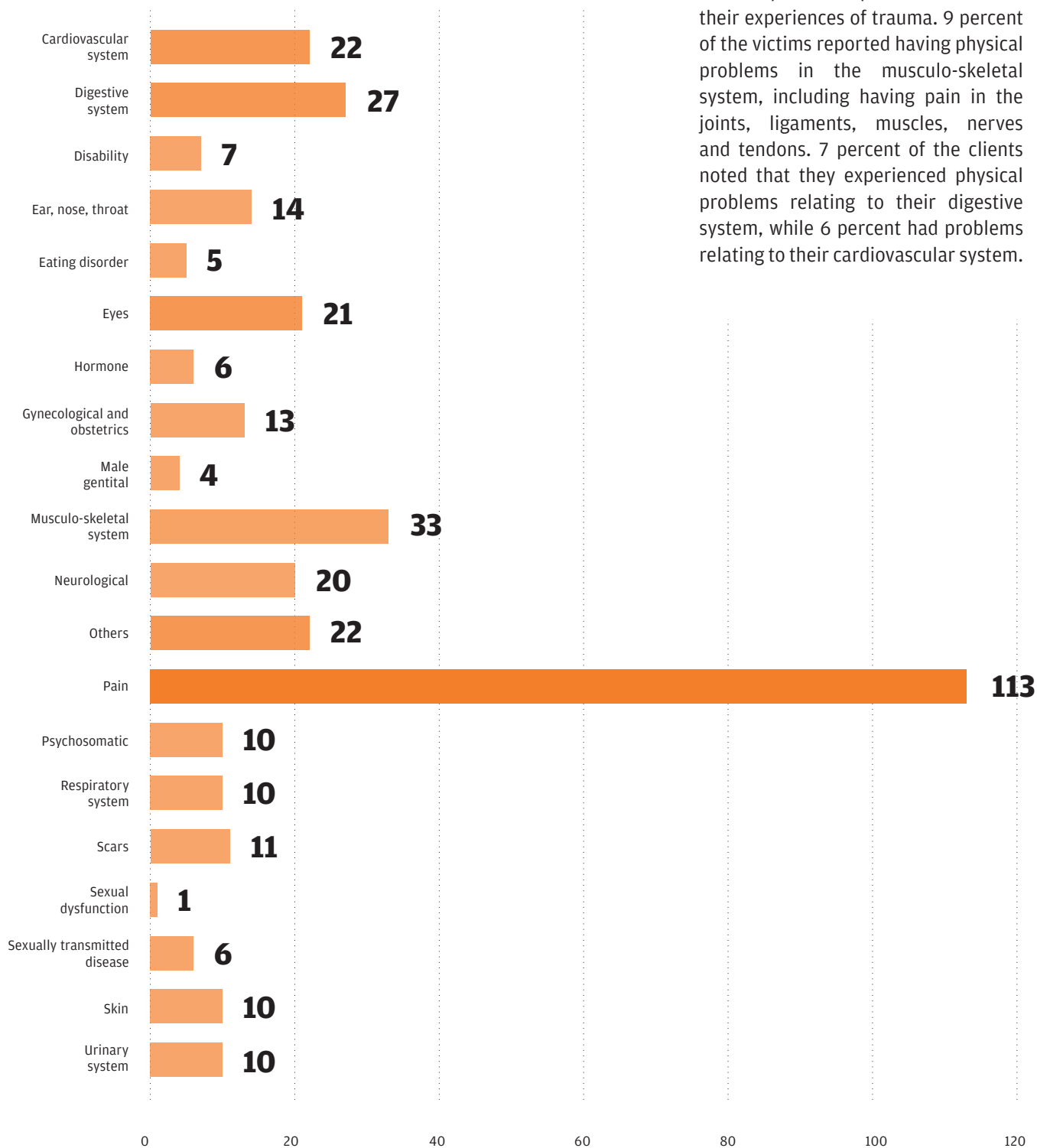
**Bojana Trivuncic**

International Aid Network (IAN), Serbia

**Figure 17. Psychological Problems Reported by Clients  
Bosnia & Herzegovina**



**Figure 18.**  
**Physical Problems Reported by Clients**



The data also illustrate the multifaceted physical problems that victims of torture experience: 31 percent of the clients in this sample size, reported that they were in pain as a result of their experiences of trauma. 9 percent of the victims reported having physical problems in the musculo-skeletal system, including having pain in the joints, ligaments, muscles, nerves and tendons. 7 percent of the clients noted that they experienced physical problems relating to their digestive system, while 6 percent had problems relating to their cardiovascular system.

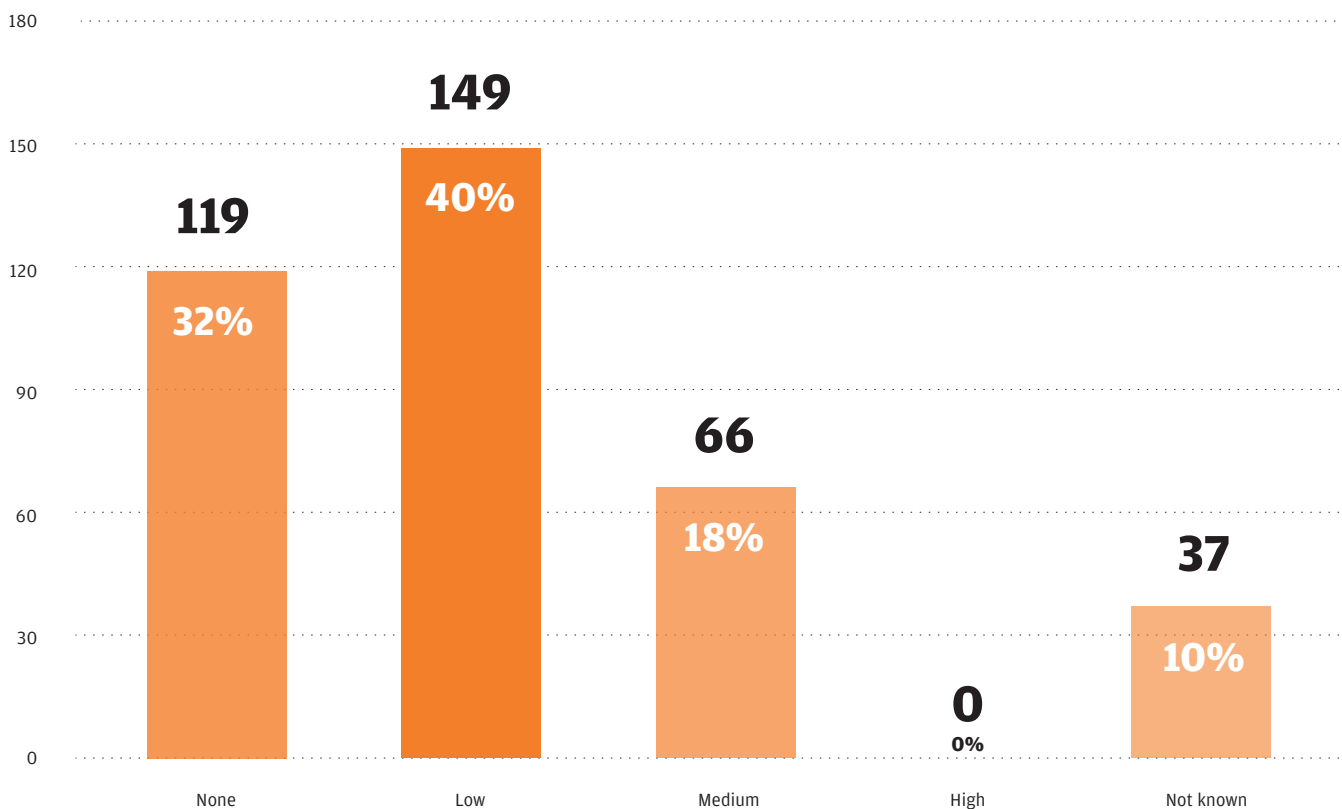
## Livelihoods

In contexts of migration, people are often alienated and disoriented as they have often had to leave behind most of their resources (material and immaterial). They often do not have support networks such as families or communities and might not even speak the language of the country they are in. Due to their torture trauma, they may be extremely distrustful of persons of authority and might therefore struggle to access basic services.

This combination of living in a foreign or new environment with the burden of torture trauma can lead to intense feelings of anxiety and isolation. A person who struggles to sleep and who has emotional difficulties, will not have an easy time integrating in society. These issues do not go away by themselves, and if left unaddressed are often exacerbated.

As is shown in Figure 20, most of the clients in this report either survive on low incomes (40 percent) or no incomes (32 percent). This also means that 72 percent of the clients in this report are, in effect, living in or near poverty. Research has consistently shown that financial insecurity severely exacerbates existing mental health conditions. Not having appropriate or sufficient financial resources is also detrimental to the rehabilitation process as it adds considerable instability and anxiety.<sup>2</sup> All of the centres that participated in this report noted that poverty and employment were one of the chief concerns of their clients.

**Figure 19. Income Levels**



In **Bosnia and Herzegovina**, all of their clients are either on low incomes or have no incomes.

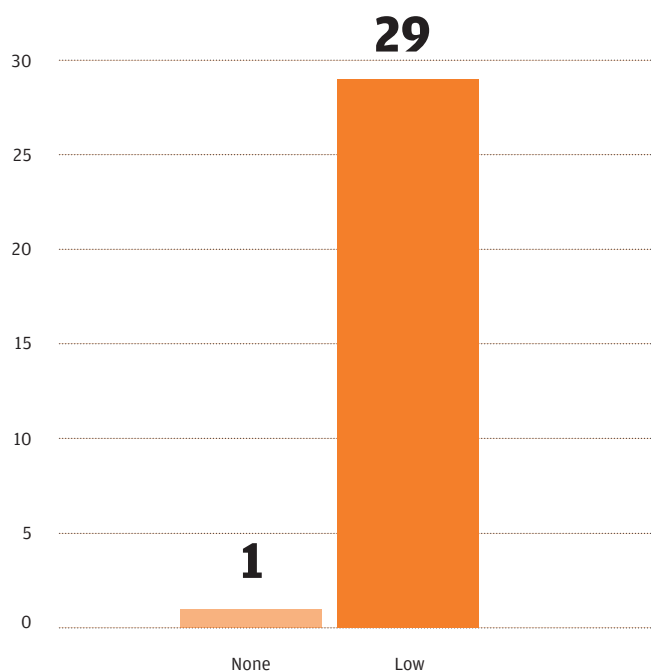
In **Cameroon**, all of their clients are either on no incomes or low incomes.

**“Poverty not only exacerbates mental health conditions; it also has a wider impact. We are seeing the cross-generational impact of poverty and financial instability. Due to the very modest pensions or compensation survivors receive from the State, many of our clients are barely managing a subsistence. They can only provide their children with the most basic necessities and often have to forego certain types of medications that are prohibitively expensive.”**

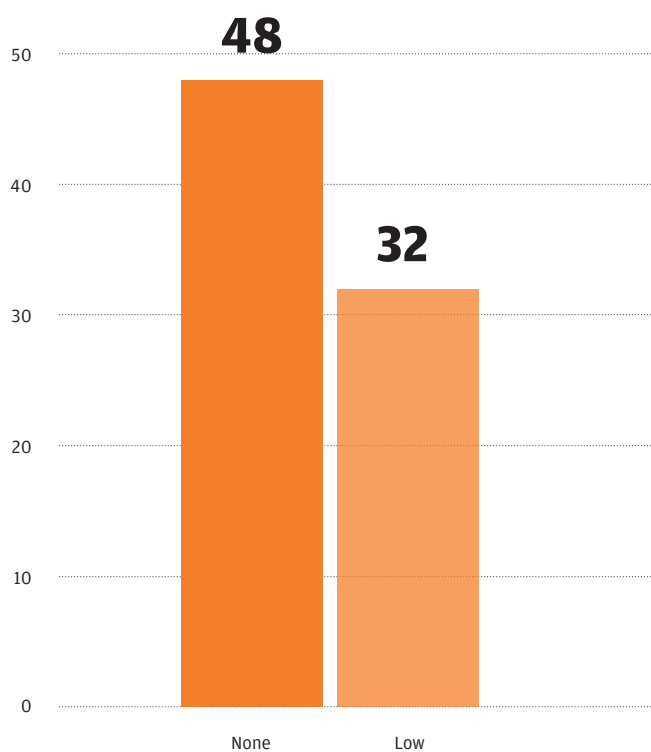
**Dunja Hadzimirtezić**

Centre for Torture Victims - Sarajevo,  
Bosnia & Herzegovina

**Figure 20. Income Level: Bosnia & Herzegovina**



**Figure 21. Income Level: Cameroon**





In **Mexico**, despite the fact that many of their clients work, the vast majority of their clients are low income earners.

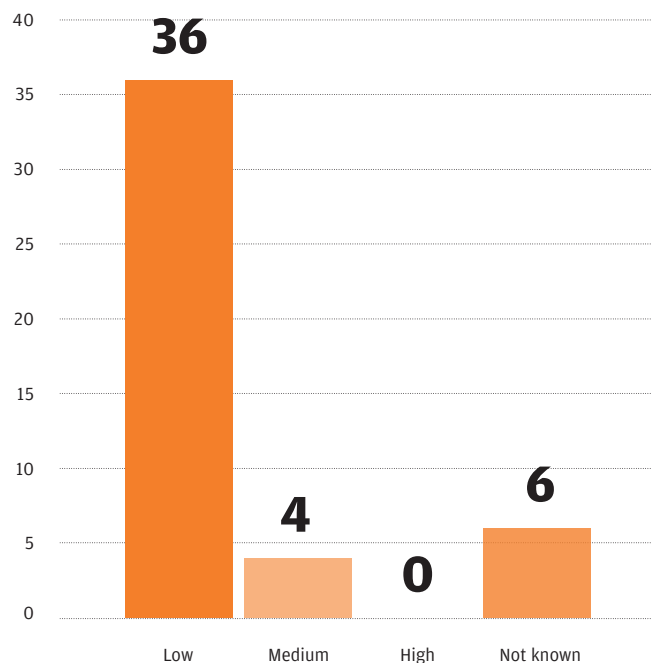
As most refugees and asylum seekers are not legally entitled to work in **Serbia**, most of IAN's clients survive on what little money they arrived with.

**“Some of our clients live in total destitution and are forced to do any kind of job just to survive. This can push people to do extremely dangerous jobs or in to the hands of organised crime, which increases their vulnerability.”**

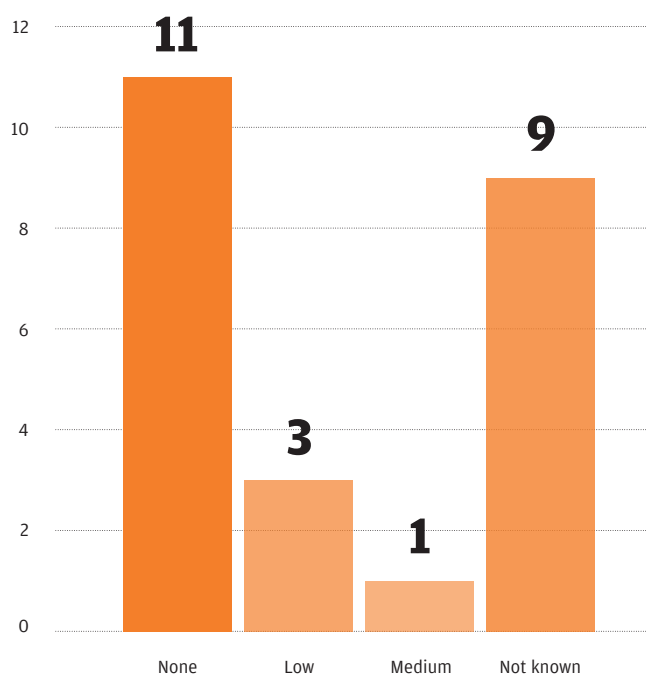
**Fernando Valadez**

Colectivo Contra la Tortura y la Impunidad  
Mexico

**Figure 22. Income Level: Mexico**



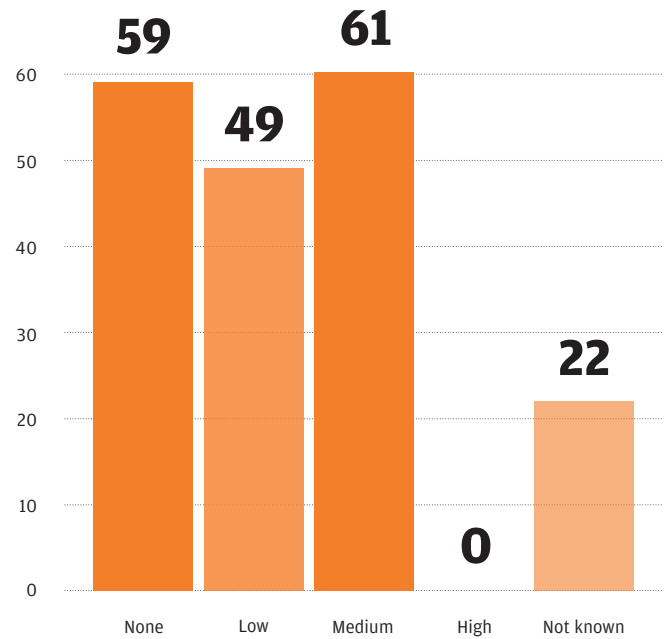
**Figure 23. Income Level: Serbia**



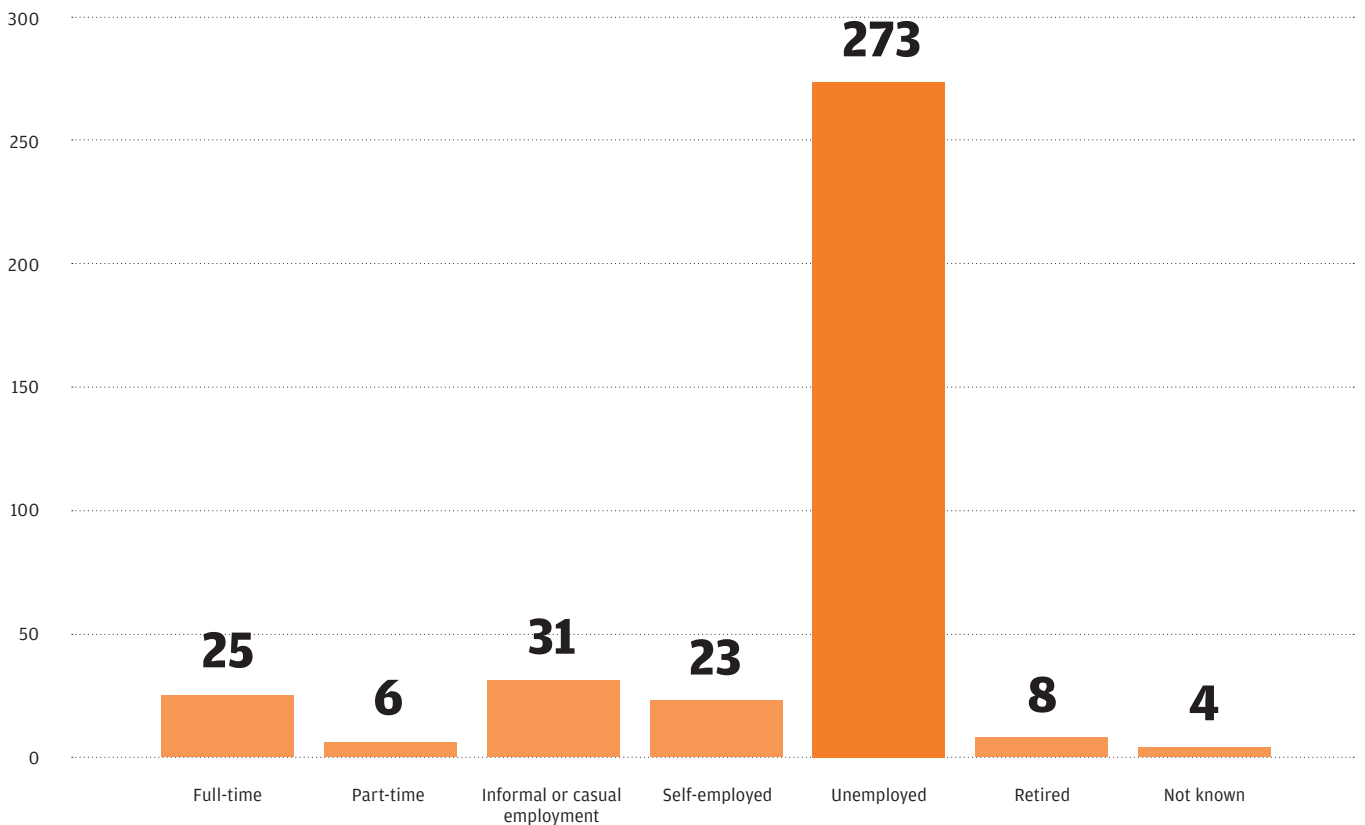
The picture is somewhat more mixed in **Uganda**, where 32 percent of their clients are on medium incomes. However, over half of their clients (57 percent) are either living on low incomes or no incomes.

The majority of the clients, 74 percent, in this sample size are unemployed, while only 23 percent are in some form of employment. Only 7 percent of the torture victims in this report hold full-time employment.

**Figure 24. Income Level: Uganda**



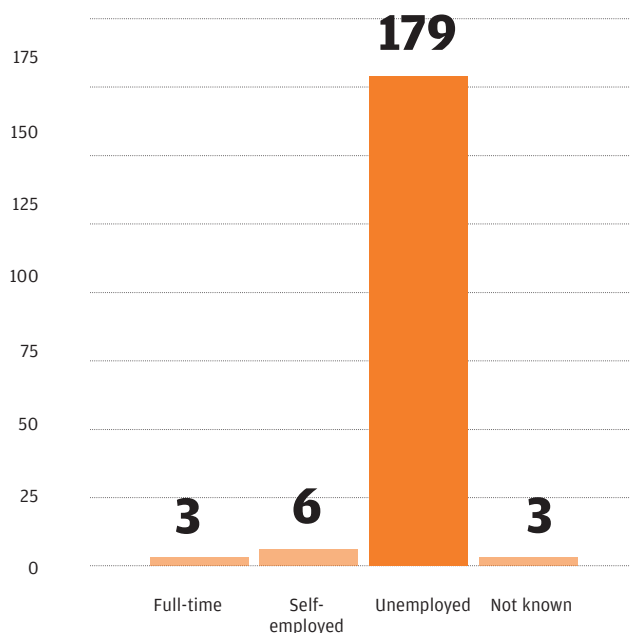
**Figure 25. Employment Status**



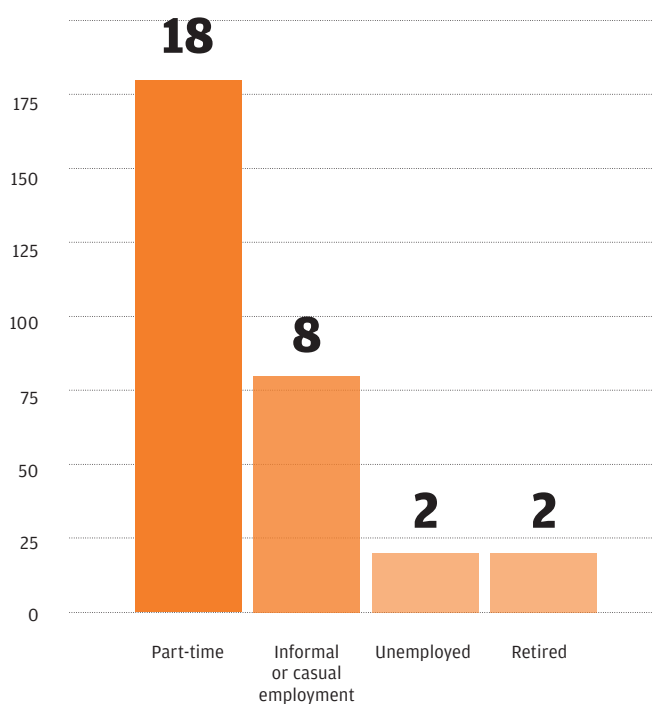
In Cameroon, Serbia, Uganda and Bosnia and Herzegovina, the majority of the clients are unemployed. In Serbia, the figure is 100 percent, while in Uganda it is 94 percent. In Bosnia and Herzegovina and Cameroon it is 60 percent and 59 percent respectively.

**The majority of the clients are unemployed. In Serbia, the figure is 100 percent, while in Uganda it is 94 percent.**

**Figure 26. Employment Status: Uganda**



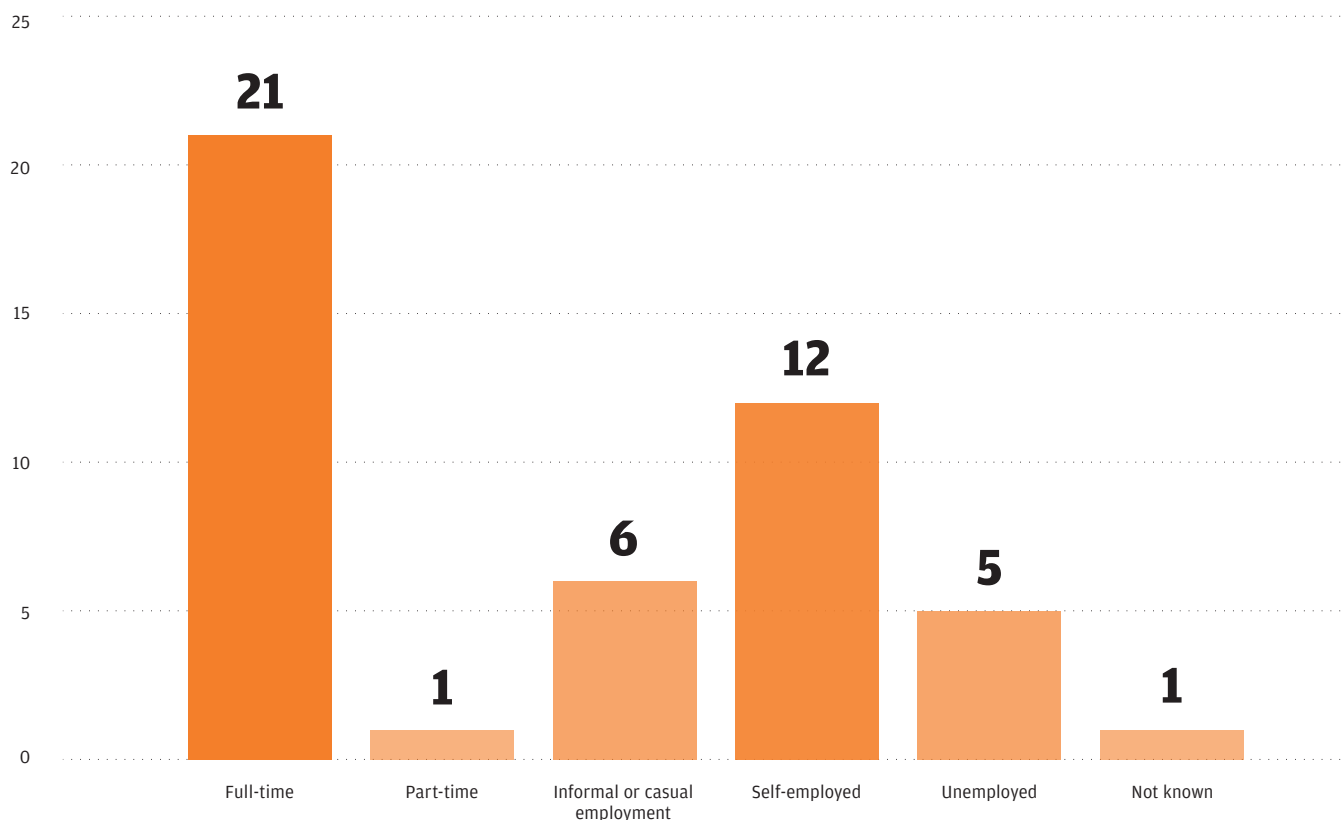
**Figure 27. Employment Status: Bosnia & Herzegovina**



As the data demonstrates, Mexico is the only country in this report in which the majority of their clients are employed - only 11 percent of their clients are unemployed. It is, however, noteworthy, that most of the clients (78 percent) are on low incomes. According to the IRCT's member centre in Mexico, CCTI, this is owing to the nature of the immigration crisis in Mexico, where many clients from Central America use

Mexico as a transit country to seek employment in the United States. Many arrive in Mexico where existing networks and communities of migrants from their countries already serve as a source of cheap labour. These workers are, however, living in very vulnerable situations as they are subject to harassment and violence by the State, and at constant risk of deportation.

**Figure 28. Employment Status: Mexico**



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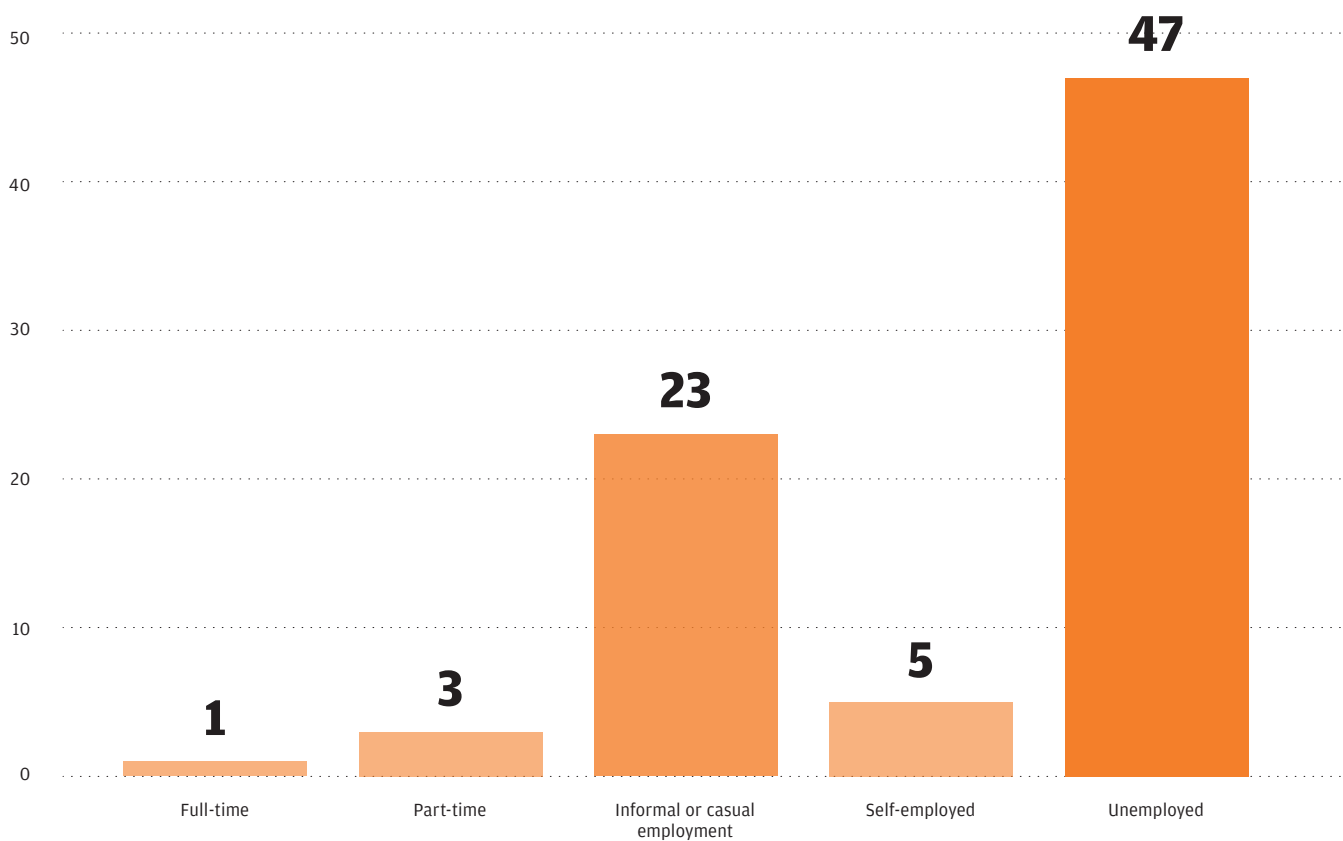
**Many arrive in Mexico where existing networks and communities of migrants from their countries already serve as a source of cheap labour. These workers are, however, living in very vulnerable situations as they are subject to harassment and violence by the State, and at constant risk of deportation.**

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**Figure 29. Employment status: Cameroon**

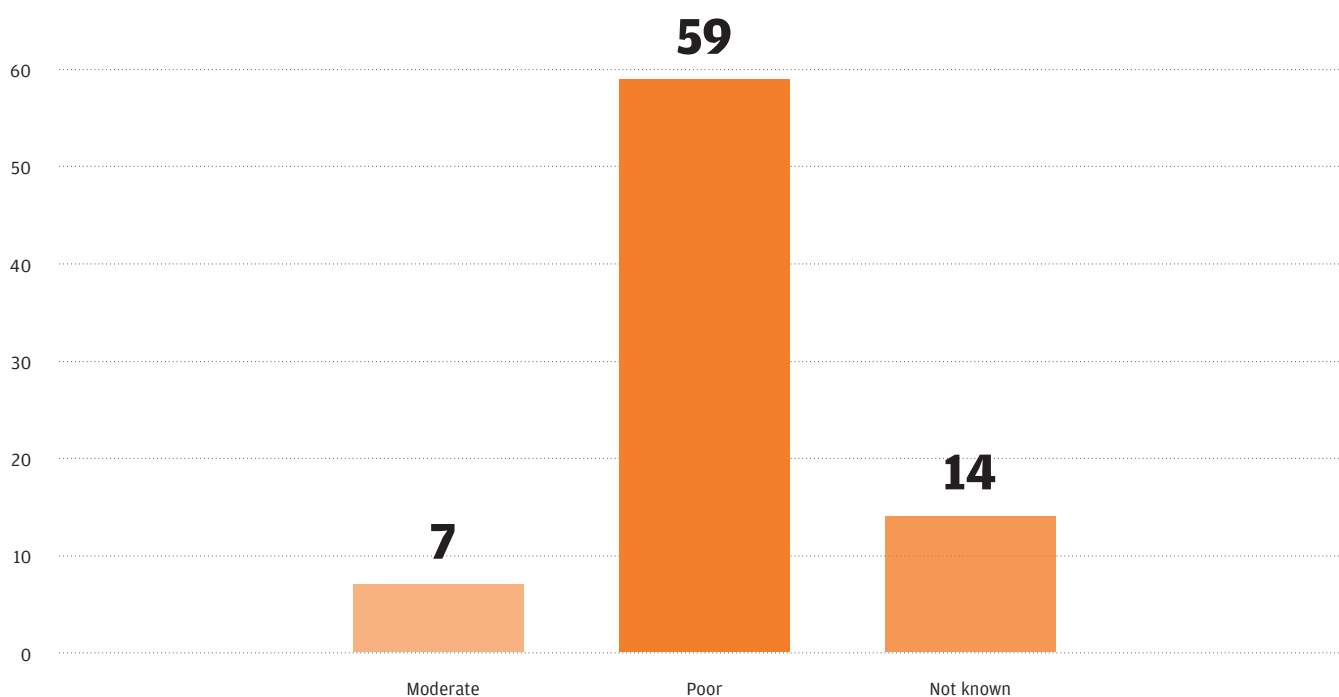
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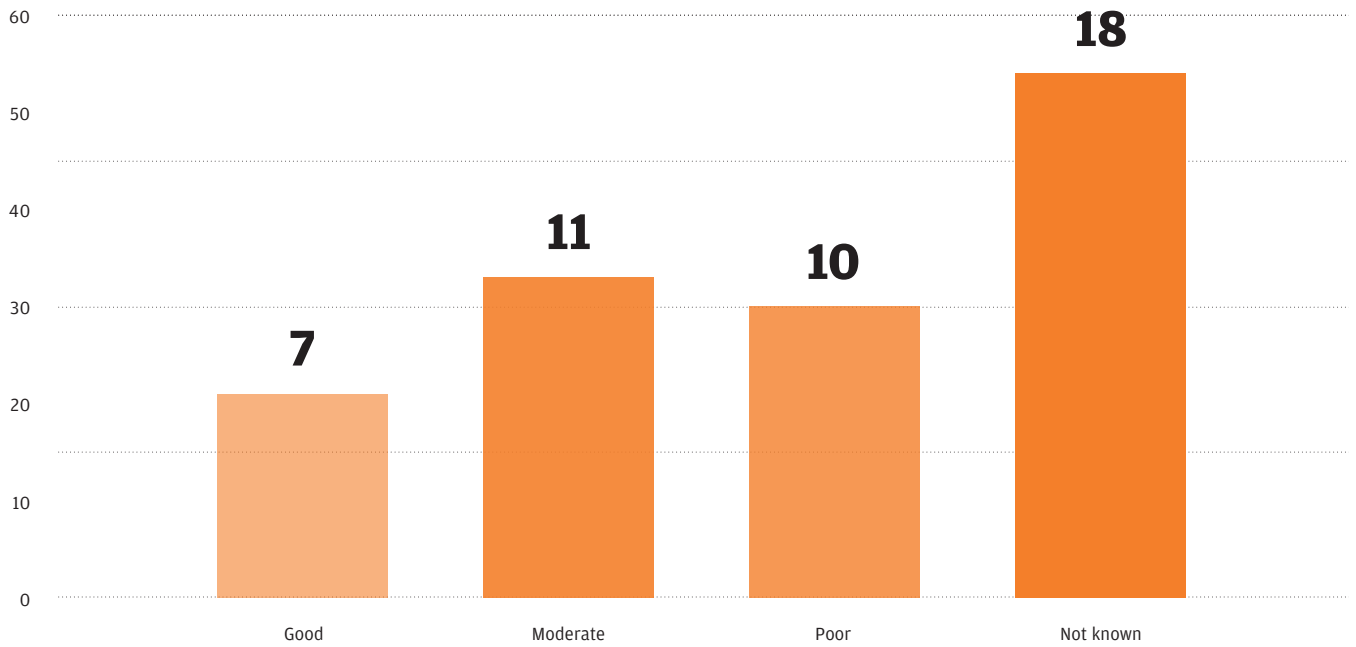
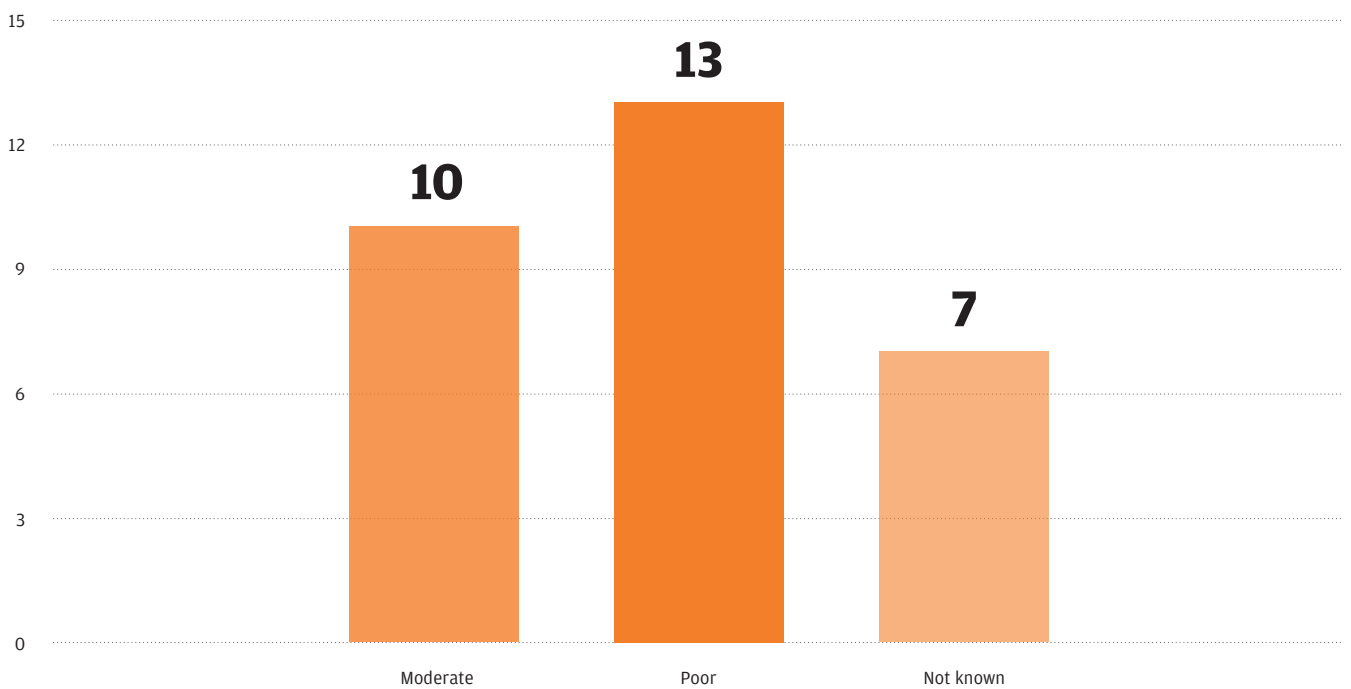


Furthermore, poor living conditions also undermine the rehabilitation process for victims of torture. Many of the clients studied in this report live in decrepit housing facilities that are ill-suited for a dignified life. In Cameroon, the data shows that most of their clients, 74 percent, live in poor and unsuitable housing circumstances. In Bosnia and Herzegovina, that figure is close to half, whereas in Mexico it is nearly one-fourth of their clients, although the data was unavailable for many clients.

In Serbia, refugees who are housed in reception facilities often suffer because the housing is overcrowded, unhygienic and lacks any sense of privacy. There have also been numerous allegations of physical and sexual abuse at these reception facilities, meaning that clients do not feel safe even when they have fled from their countries of origin.

**Figure 30. Housing Conditions: Cameroon**



**Figure 31. Housing Conditions: Mexico****Figure 32. Housing Conditions: Bosnia and Herzegovina**

## Redress

Redress is a crucial component in the rehabilitation process. The torture rehabilitation centres participating in this report have noted that many of their clients see justice as an important part of their process of rebuilding a life after torture. Beyond the importance to the healing process, bringing perpetrators to justice has an important deterrent effect in the societies where the torture took place.

States have an obligation to provide redress to victims of torture - including restitution, compensation, rehabilitation, guarantees of non-repetition, and satisfaction - and also a procedural guarantee to ensure that the victim of torture has access to an effective remedy. This includes ensuring that there is a legislative framework and mechanisms that can investigate the allegations of torture in a prompt, fair and effective manner, and ultimately, prosecute and adequately punish perpetrators of torture. The UN Committee against Torture has clarified that this right continues to apply when victims leave the perpetrator countries to seek refuge. In its General Comment on the implementation of Article 14 of the Convention against Torture, the Committee specifies that the “application of article 14 is not limited to victims who were

harmed in the territory of the State party or by or against nationals of the State party” and that States are required to “ensure that all victims of torture and ill-treatment are able to access remedy and obtain redress”<sup>3</sup> regardless of their status in that country, including “asylum-seekers, refugees or others under international protection.”<sup>4</sup>

It is clear from the data, however, that redress is a distant hope for the majority of the clients in this data set: only 3 percent of the clients in this sample group filed a complaint against torture, while 37 percent have not. Data was not available for 60 percent of the clients, due to non-disclosure. Of the 3 percent that did file complaints against torture, rehabilitation was awarded in one case, while in another case the client acted as a witness in a regional court, and in a third case the client gave testimony to an international criminal tribunal. The rest are pending.

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**Photo**  
by Remi Walle on Unsplash





# CONCLUSION

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**It is crucial for States to begin collecting data on the population size, background and needs of victims of torture among their migrant population so that they can begin to fulfil their obligations under international human rights law.**

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States have clear obligations toward migrants, refugees, asylum seekers, internally displaced people and other people on the move under international law. Collecting data on their needs and on their experiences, is a crucial way to ensuring those human rights obligations are met. Recognising the importance of data collection, the UN Committee against Torture has recommended that states collect data on the nationality, country of origin, ethnicity, gender, age, employment sector and on the provision of redress of torture victims. Collecting data on these points would allow the State to get an overview of the size and scale of the challenges they face, and would allow them to allocate an appropriate budget and seek help from civil society in accordance with the scale of those problems. In most countries, however, this does not take place.

The data from this very small sample size supports the growing body of literature that highlights the complex realities that victims of torture who have left their homes are living in. Torture trauma coupled with potential other trauma suffered en route, as well as the continued instability coming from living in or near poverty means that holistic interventions are necessary to help victims overcome these challenges. The data shows that many of the clients experience some form of mental and physical anguish and that they live in or near economic deprivation. Even in cases where the clients are able to work, they often do not have access to the labour market.

It is crucial for States to begin collecting data on the population size, background and needs of victims of torture among their migrant population so that they can begin to fulfil their obligations under international human rights law and to begin to address the many challenges facing this population group. This must include immediately assuring that victims of torture and ill-treatment have access to holistic rehabilitation services, so that they can begin rebuilding their lives after torture. It is also essential to ensure that immigration officials are aware of the impact of trauma so that procedures can be adapted according to their needs and to ensure that they are referred to appropriate rehabilitation services. Furthermore, the data also highlights that decent livelihoods are essential to ensuring a dignified life. People who cannot afford to eat, will not be able to address their trauma, even where they do have access to holistic rehabilitation services. Only when people have access to these holistic interventions will they be able to begin re-integrating into society and building a life after torture.

## Notes and references

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<sup>1</sup> Silove D, Steel Z, Watters C., Policies of deterrence and the mental health of asylum seekers. *JAMA*. 2000 Aug 2;284(5):604-11.

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<sup>2</sup> Miller KE, Rasmussen A. War exposure, daily stressors, and mental health in conflict and post-conflict settings: bridging the divide between trauma-focused and psychosocial frameworks. *Soc Sci Med*. 2010 Jan;70(1):7-16. doi: 10.1016/j.socscimed.2009.09.029. Epub 2009 Oct 23.

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<sup>3</sup> Paragraph 22 of General Comment Number 3 of the Committee against Torture on the Implementation of Article 14 by States parties

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<sup>4</sup> Paragraph 32 of General Comment Number 3 of the Committee against Torture on the Implementation of Article 14 by States parties

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## How to support the IRCT

We need your support to fight torture and to help torture survivors rebuild their lives. By donating even a small sum, you can assist us to put an end to torture and to ensure that torture survivors and their families receive much-needed treatment and other services

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Please visit [www.irct.org](http://www.irct.org) to make a donation using a credit card. All transactions are guaranteed safe and secure using the latest encryption to protect your personal information.

### By cheque

Cheques made payable to the International Rehabilitation Council for Torture Victims (IRCT) should be sent to:

International Rehabilitation Council for Torture Victims  
Vesterbrogade 149, building 4, 3rd floor  
1620 Copenhagen V, Denmark

### By bank transfer

Danske Bank  
Holmens Kanal Branch  
Holmens Kanal 2  
1090 Copenhagen K  
Denmark  
SWIFT code: DABADKKK

#### Danish Kroner (DKK) Account

Registration No. 4183  
Account No. 4310-821152  
IBAN DK90 3000 4310 8211 52

#### Euro (EUR) Account

Registration No. 4183  
Account No. 3001-957171  
IBAN DK69 3000 3001 9571 71

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Registration No. 4183  
Account No. 4310-005029  
IBAN DK18 3000 4310 0050 29





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