2016 Annual Report
INTERNATIONAL REHABILITATION COUNCIL FOR TORTURE VICTIMS
The past year was one of consolidation and renewal for the IRCT. We held our first Scientific Symposium in a decade, which saw more than 370 participants come together to learn from each other and to create a space for sharing knowledge that can contribute to strengthening the global rehabilitation movement. For a number of years, creating such a space has been a key strategy of the IRCT in the belief that knowledge makes us stronger. Thus, we have placed significant resources in ensuring this great process of stock taking in relation to the knowledge that is available to the sector.

The Symposium was held in connection with the IRCT General Assembly, where the membership elected a new Council and Executive Committee. This event gave us a chance to look back at the past four years’ work and achievements of the outgoing Council and Committee. We are incredibly grateful to each and every one of the Council and Committee members and in particular to President Suzanne Jabbour, for her commitment and hard work throughout the years – to ensure that even the most serious challenges and obstacles did not stop us from carrying out our work.

The outgoing Executive Committee oversaw a number of key processes such as the issuance of the Strategic Plan 2015-2020, the transformation of the membership strategy of the organisation and the creation of a new model to manage the relationship with the membership. Throughout this work there has been no process at the IRCT that has remained static. In 2016, we revitalised the Torture Journal’s Editorial Advisory Board, we continued our active support of the Independent Forensic Expert Group, and we continued to advance the activities of Advocacy, Research Development and to the extent possible, Capacity Building.

Looking ahead, we will build on the Mexico Consensus, which was adopted at the General Assembly, and through which the members have reiterated their commitment to victims of torture and their understanding that every step of the rehabilitation path is to be informed by the victims’ entitlement to reparation. Some of these steps are already recognised as best practice in relation to advocacy, communications and research, but we must also acknowledge the work related to the gathering and use of data in rehabilitation processes as well as our programmes that promote exchanges between IRCT members and strengthen our pioneering and impactful work before the United Nations.

The task now is to continue these processes while at the same time ensuring their impact at local level and their impact, when applicable, at regional levels. The task of the incoming Executive Committee, with the support of the Secretariat, also extends to the significant protection needs of our members. In 2016 alone, we recorded acts of harassment and threats to several of our members, while others were at risk of closing.
We will continue to do everything in our power to support members in need, but it is also important that we stand together in challenging times like these as a strong united movement.

We would like to take this opportunity to thank our members, partners and supporters for their trust and cooperation throughout 2016. We look forward to continuing to work together to further torture victims’ right to rehabilitation, and to strengthen the global rehabilitation movement.

As a network of more than 150 torture rehabilitation centres in over 70 countries, the IRCT is the world’s largest membership-based civil society organisation specialised in the field of torture rehabilitation. The work of the IRCT provides context to health-based rehabilitation within all pillars of the global fight against torture: prevention, accountability and reparation.

Together our 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.

Our key distinctive feature lies in a holistic health-based approach to torture rehabilitation. In addition, we define ourselves as private, non-partisan, and not-for-profit, as well as being governed by democratic structures.

Our diverse membership shares three common characteristics; each member is a legally independent organisation that is rooted in civil society and each provides rehabilitation services to at least 50 torture victims annually. All of our members are committed to the global movement, the mission of which is to further the right to rehabilitation of every torture victim.
THE IRCT Membership
151 Members in 72 Countries
2016 In Brief: Key Events And Achievements

Tenth Scientific Symposium attracts hundreds of participants and leading experts

In December 2016, the IRCT held its 10th international Scientific Symposium in Mexico City. The three-day event brought together more than 370 participants who shared their knowledge and experience. Leading up to the Symposium, authors from 63 countries submitted a total of 248 abstracts. Out of these, 101 were presented throughout 36 sessions, providing participants with a unique opportunity for direct access to global research on key issues in relation to care and rehabilitation of torture survivors. This is a key component in the development of a global research agenda.

Better and bigger data to support torture victims and their rights

2016 saw the existing DFI database improve exponentially based on feedback from users across 33 centres. The database is now faster, has greater functionality, and is translated into five languages. The volumes of data continue to grow, which is critical in the fight against impunity and in promoting the rehabilitation of torture survivors.

Strong and visionary policy statements from a united membership

In 2016, the IRCT conducted both a written and a physical General Assembly. The written General Assembly took place in March 2016 for the purpose of electing a new Council. The physical General Assembly took place in December 2016, uniting representatives of 114 IRCT member centres in Mexico City. Among the key achievements in Mexico was the adoption of the Mexico Consensus, which includes an ambitious agenda for the torture rehabilitation movement to collaborate on making States take up their responsibility to deliver on torture victims right to rehabilitation.
The global movement comes together to support Life after Torture on 26 June

The 26 June campaign continues to be the world’s largest anti-torture campaign by number of participating organisations and people reached. This year the campaign, which introduced a new visual line and slogan, saw close to 100 rehabilitation centres and organisations around the world come together to commemorate torture victims and support torture survivors.

Taking a strong stand against anal examinations

The Independent Forensic Expert Group (IFEG) published an expert statement, strongly condemning the practice of anal examinations in cases of alleged homosexual activity. The practice, which is a flagrant violation of international human rights, is still widely used in many countries that criminalise or ban consensual homosexual relations. The statement was widely cited by both Kenyan and international media and helped provide a scientific and medical framework to discuss the worthlessness and cruelty of such exams. Following its publications, the UN Committee against Torture in its review of Tunisia condemned the practice with similar reasoning.
Governance And Policy

It was a momentous year for the IRCT, which saw the successful execution of the 5th General Assembly in Mexico City and the adoption of the Mexico Consensus. Bringing together the membership for the first time in 10 years, the General Assembly provided a unique platform for members across the globe to come face to face with their peers, discuss policy positions and exchange ideas, elect a new Executive Committee and decide on the strategic direction that the IRCT must take in the coming years. Strengthening the movement through solidarity and unity is vital to address the challenges that continue to face the organisation and its members. Sadly, throughout the year, some members experienced financial and/or political threats. The IRCT did its best to counteract these developments by providing as much support as possible to its members. Once again, the organisation had the pleasure of distributing sub-grants to 41 rehabilitation centres around the world, ensuring that many torture victims can continue to get the treatment and support they need.

Bringing together the membership: First physical General Assembly in 10 years

For the first time in a decade, the IRCT held a physical General Assembly, allowing members to meet each other in person and fully participate in setting key policy positions that will guide the future direction of the organisation. The event, which took place in Mexico City in December 2016, was co-hosted by Colectivo Contra la Tortura y la Impunidad (CCTI), the IRCT’s member in Mexico, and followed the IRCT’s 10th International Scientific Symposium.

The overall objective of the General Assembly was to strengthen global efforts to provide effective health-based holistic rehabilitation to torture victims. Such efforts include fostering the global exchange of knowledge and expertise; developing guidance for the IRCT’s policies and strategies; and nurturing the global IRCT network, using a democratic structure.

Representing nearly 80 percent of the IRCT membership, 114 member centre delegates engaged in one and a half day of policy debate, which concluded with the unanimous adoption of a resolution, the Mexico Consensus. It was also during these debates that the General Assembly registered its deep concern about
the decline in funding and lack of public policy and legislative measures necessary to provide torture victims with adequate rehabilitation. As was pointed out by many participants, this happens at a time when there are millions of torture victims across the world with a completely unfulfilled right to rehabilitation.

The General Assembly in Mexico City followed a written assembly in March, where the members elected the new Council that will govern the organisation over the next three years. A total of 108 centres voted to elect the 29 Council members that represent the membership in all regions of the world as well as independent experts from among 58 nominees. You can see an overview of the new Council members on page 43.

A new IRCT Council and Executive Committee

Following the written Council election in March 2016, the 29 new IRCT Council members met for the first time at the physical General Assembly in December 2016, where they were tasked with electing a new Executive Committee. The Executive Committee consists of eight members, seven of whom represent each IRCT region while the eighth member is an independent expert.

Mexico Consensus in brief

The Mexico Consensus includes a series of conditions, under which states must provide victims with access to a choice of rehabilitation services. Among these conditions are the inclusive and multidisciplinary nature of services and the participation of the victim in decisions concerning the rehabilitation process. In the consensus, the members of the IRCT further establish their contributions and claims to ensure right to rehabilitation.

The Consensus also includes an ambitious agenda for the torture rehabilitation movement, including concerted action to advocate for increased funding to the movement, the support to research, documentation of torture, awareness actions and campaigns, and an agenda for international cooperation through sharing good practices, capacity building and the promotion of ratification of the United Nations Convention Against Torture and Other Cruel, Inhuman and Degrading Treatment or Punishment and its Optional Protocol.
Jorge Aroche, Chief Executive Officer of Australian IRCT member Centre, Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS) was elected new President of the IRCT. Ms Sana Hamzeh, Psychotherapist at Restart Center for Rehabilitation of Victims of Violence and Torture in Lebanon, was elected Vice-President. The other members of the Executive Committee represent the remaining five regions, in which the IRCT membership is divided: Mr Pradeep Agrawal from Asia, Ms Lela Tsiskarishvili from Europe, Ms Mariana Lagos from Latin America, Ms Kathi Anderson from North America, Mr Samuel Herbert Nsubuga from Sub-Saharan Africa and Mr Michael Brune as Independent Expert.

Just like the Council, the IRCT Executive Committee will govern the organisation over the next three years.

MEMBERS IN FOCUS

Assisting members at risk

Throughout the years, a number of IRCT member centres have operated in difficult or at times hostile environments due to the nature of their work. Sadly 2016 was no different, with some members being subjected to continuous risks and threats.

In 2016, the IRCT took action in support of its members in Turkey and Egypt as both of them faced reprisals from their governments. In Egypt, after the authorities threatened IRCT member El Nadeem with administrative closure, the IRCT continuously raised the judicial harassment of El Nadeem with the UN, the EU and several individual governments. As a result of this, combined with the action of many other organisations, the issue of El Nadeem remained on the agenda of these actors just as the case received a great deal of attention from the international media. As of 31 December 2016, the centre was still operational despite ongoing pressure and threats of closure.

In Turkey, 2016 proved a very challenging year for IRCT member Human Rights Foundation of Turkey (HRFT), which was subjected to reprisals from the Turkish state. Staff were fired from public duties, arrested and prosecuted in connection with their work to defend human rights, one of its founders, Tahir Elçi, was killed with no effective investigation being undertaken and HRFT was questioned by the General Directorate of Foundations in connection with its human rights work. To address this and to support its member, the IRCT sent public letters to all relevant ministries in the Turkish Government and raised the issue with the UN, the EU and national governments. In addition, to ensure a fair trial against a HRFT board member and former IRCT Council member, Dr Şebnem Korur Financi, the IRCT Secretary-General participated in a trial observation mission in November 2016.

The IRCT’s action has contributed to highlighting the situation of torture in Turkey and putting harassment of HRFT high on the agenda of States, the EU and UN human rights monitoring mechanisms. As of 31 December 2016, no new sanctions have been effected against HRFT and prosecutions have not moved forward.

A growing membership

In 2016, the IRCT welcomed six new members from the Democratic Republic of the Congo (DRC), Spain, South Korea and Sweden. The six centres are all not-for-profit rehabilitation centres that provide as a minimum rehabilitation services to 50 torture survivors per year.

Three of the centres are from the DRC. Created in May 2005, Amis des victimes des violations des droits humains (AVVDH) is a human rights organisation based in Uvira, South Kivu. Its mission is to promote the application of human rights law through advocacy and awareness
raising activities, prison visits and the provision of holistic rehabilitation services to victims of torture and sexual and gender-based violence.

Fédération des Femmes pour le Développement Intégral au Congo (FEDICONGO) is an independent and non-governmental organisation created by a group of women and with the aim of supporting women in rural areas. Founded in Uvira in November 1999, FEDICONGO provides medical, legal, psychological and socio-economic support to victims of torture, including sexual torture, while promoting female leadership and local women initiatives. The centre carries out activities in the territories of Uvira, Fizi and Walungu in South Kivu.

Solidarité avec les Victimes et pour la Paix (SOVIP) was created in 2004 by a group of teachers, lawyers, sociologists, human rights defenders, doctors and nurses. The centre was registered by the Ministry of Justice in 2006 and has since been treating between 400 and 600 primary and secondary victims each year. Health care services are one of the centre’s main activities, but it also runs literacy programmes for female victims of sexual violence.

Spanish Commission for Refugees Aid, CEAR is the first Spanish rehabilitation centre to join the IRCT network. CEAR is a non-governmental organisation founded in 1979 and based on voluntary, humanitarian and independent action. Since then it has provided a wide range of support and services to thousands of refugees and asylum seekers, including psychological, medical and legal and social support to victims of torture.

In South Korea, The Kim Keun-Tae Memorial Healing Center is named after pro-democracy and human rights activist Kim Keun-Tae, who was tortured by the military dictatorship in the 1980s. His death at the age of 62 reminded Korean society of the civil duty to support torture victims. This led to the founding of the centre, which offers several services including individual counselling, group therapy and various medical services.

The fifth Swedish Red Cross centre to join the IRCT, the treatment centre in Skellefteå is the northernmost of the centres run by the Swedish Red Cross. The centre opened in 2006 and is organised under the care unit common to all centres in Sweden. It provides multidisciplinary treatment for refugees and asylum seekers in order to alleviate the suffering caused by torture and war. Other fields of work include trainings, awareness raising, lobbying and advocacy.

### Six new IRCT member centres

**Democratic Republic of the Congo:**
- Amis des victimes des violations des droits humains (AVVDH)
- Fédération des Femmes pour le Développement Intégral au Congo (FEDICONGO)
- Solidarité avec les Victimes et pour la Paix (SOVIP)

**Spain:**
- Spanish Commission for Refugees Aid, CEAR

**South Korea:**
- The Kim Keun-Tae Memorial Healing Center

**Sweden:**
- Swedish Red Cross Treatment Center for persons affected by war and torture, Skellefteå
During 2016, the following three members were found to have ceased activities: Rehabilitation Centre for Victims of Torture in Ethiopia (RCVTE), Ethiopia, People’s Education Assistance and Counselling for Empowerment (PEACE), Namibia and TIHV/Human Rights Foundation of Turkey, Adana.

**Promoting interaction and knowledge sharing between members**

Interaction and instant information sharing between IRCT members is key to understanding the diversity of the movement’s challenges and strengths. The IRCT developed its Members Site with this in mind and to also provide a shared space for members to exchange knowledge and experiences and find news and updates from the Secretariat relevant to them and their work. By the end of 2016, over 80 percent of the members had had some form of interaction and information sharing via the Members site.

**Providing financial support to members through sub-grants**

The IRCT sub-grants continue to play a vital role for many rehabilitation centres around the world as rehabilitation centres are facing increasing financial constraints. In 2016, 41 centres received grants totalling EUR 351,000. Of the 41 centres, 37 are IRCT members operating in Asia, Europe, MENA, Latin America and Sub Saharan Africa. The region where the most grants were distributed was Sub Saharan Africa, where 15 centres received a total of EUR 127,000. In Asia, 10 centres received a total of EUR 92,225, while eight centres in Europe and five in Latin America received a total of EUR 72,500 and EUR 35,000 respectively. Finally, grants totalling EUR 25,000 were distributed to three centres in MENA.

With many rehabilitation centres continuing to face serious financial challenges, the amount requested by centres far exceeded the amount available, stressing the need for more funding to the sector. Reports on the use of the 2016 grant highlighted how important and vital these grants are for many of the recipients. For some centres, they are the only income available for treatment and allow them to continue to operate. Just as importantly, the grants contributed to the rehabilitation of over 10,000 victims of torture through the provision of medical and psychological care, as well as vocational training, income generating activities, social support and legal aid.

**India: torture victims receive treatment and find employment as result of sub-grant**

“The grant helped our centre provide comprehensive and holistic rehabilitation services to 237 victims.” Not only did the IRCT sub-grant enable Indian rehabilitation centre SOSRAC to treat nearly 240 torture victims, but it also gave the centre an opportunity to provide efficient and successful vocational training to many of these victims. Following this training, 120 victims found employment in various sectors and industries. This helped them improve their financial situation and allow them to support their family.

“We were able to train 38 victims in tailoring and 10 in computer training. Forty-two learned the local language, Hindi and 60 learned English to integrate in the local community and get better jobs.”
Distribution of IRCT subgrants to rehabilitation centres

Total number of Grants - 2016
37

- Asia: 10
- Europe: 8
- SSA: 15
- Mena: 3
- Lac: 5

Amount Granted in Euros - 2016
351,725 €

- Asia: 92,225 €
- Europe: 72,500 €
- SSA: 127,000 €
- Mena: 35,000 €
- Lac: 25,000 €
**From the blog: Triumphant over adversity to deliver rehabilitation to those in need in Iraq**

When Salah Ahmad founded a rehabilitation centre in the city of Kirkuk in the Kurdistan Region in northern Iraq in 2005, it was the beginning of a journey that would lead to the establishment of a network of nine branches throughout Kurdistan-Iraq.

Since 2005, these centres have provided services to more than 20,000 men, women and children. It is a remarkable success, but has not been an easy journey for the organisation, which is now called the Jiyan Foundation for Human Rights.

Salah recalls that when the Kirkuk centre was founded, after the fall of Saddam Hussein's regime, people were still living in fear. “I had a patient who came to me and told me he needed my help, but said I had to promise not to write down anything. I asked why and he said, ‘Because I am afraid if they come back, they will know everything about me.'”

Yet the Kirkuk centre went from strength to strength and funders recognised the need for more centres like it. All the centres have the same system in place and provide psychological, medical, legal and social support. Some have specific programmes to respond to the needs of torture victims in the area, including an inpatient clinic for women victims of the so-called Islamic State (ISIS).

The programme came about through the work the Jiyan Foundation is doing in the Khanke refugee camp near Dohuk in Northern Iraq, which is home to over 18,000 internally displaced persons. Many of the women in the camp have been liberated from ISIS and have had horrific experiences.

“They are in a very bad state. They lost everything, their life, their city, their health. These women have been sold, raped, every awful thing you can imagine. ISIS destroyed them as human beings,” says Salah.

The Jiyan Foundation started a centre 300 km away from the camp where the women could go for different periods of time and could bring their children with them.

“This clinic is now more than a year old and we have helped more than 100 women this way.”

Yet just finding the money for transport to get the women to and from the camp is an ongoing challenge for the Jiyan Foundation. Despite all of this Salah says the Jiyan Foundation is going in the right direction, “In these 11 years, we have succeeded in doing a good job in many ways and we support thousands of people.”
From the blog: Delivering rehabilitation in Honduras

Honduras is one of the poorest countries in Latin America and ongoing human rights violations have forced thousands of people to flee the country. Based in the capital, Tegucigalpa, IRCT member CPTRT offers relief and support to those affected by violence and torture.

Founded in 1995 by doctor, politician and human rights activist Juan Almendarez, CPTRT has become a leader within its field and a strong voice in the fight against torture. The centre employs a team of doctors, psychologists and social workers, as well as a group of volunteers.

Over the years, this team has successfully treated thousands of victims of torture and violence, but it is often a case of too much demand and not enough supply. CPTRT is one of just a few torture rehabilitation centres in Honduras, and as the national health system does not recognise torture as a health problem, there is little specialised treatment or rehabilitation available.

A paradox perhaps, given the many accounts of torture that CPTRT encounters. Gustavo N. Peña, Psychologist and Project Coordinator at CPTRT says the centre deals with many different types of victims, “from those who speak out against human rights abuses to the families of those in prison, students and those deprived of liberty”.

According to the WHO, there is an extreme shortage of physicians, psychologists and psychiatrists in the country with as little as 20.8 physicians per 10,000 population. And to make matters worse for the many Hondurans exposed to torture, most of the physicians do not have the knowledge to recognise torture or carry out rehabilitation of torture victims.

Juan Almendarez, Director of CPTRT has previously spoken about how, “The number of human rights violations by the military is rising, and the threat is greater and growing because military police operate with their faces covered and without visible identification, which fans impunity.” Gustavo N. Peña agrees that this culture of impunity is a challenge to eradicating torture in Honduras saying he believes that, “Torture is seen as a mechanism of investigation, as well as punishment”.

Today, CPTRT is a key player within the Honduran human rights movement and despite the daily challenges they face, centre staff continue to dedicate their lives to making a difference; as Alba Mejia, Assistant Director at CPTRT says, “Wherever there is injustice, we need to fight it and turn it into a positive change”.
The IRCT finished the past year on a high note by holding its 10th International Scientific Symposium, which was the successful outcome of many years’ hard work and planning. Demonstrating how important it is for the sector to develop its research and evidence base and to share the knowledge and expertise that exists within it, the Symposium provided a unique forum for presenters and participants to inspire and learn from each other. Adding to that, it was clear that the more than 100 presentations will bring much added value to the global research on torture survivors’ need for rehabilitation and will serve to inform the IRCT’s work for years to come. That research development is key to the work of the global rehabilitation movement was also evident through other IRCT activities and achievements such as the Data in the Fight against Impunity project and the revitalisation of the Torture Journal. Both of which expect to yield further results in the 2017.

Evidencing the work of the movement through the DFI project

The Data in the Fight Against Impunity (DFI) project is at the heart of the research development strategy of the IRCT. The overall aim of the project is to contribute to the fight against impunity and to evidence the need for delivery of the right to rehabilitation using data gathered from survivors of torture to support accountability, prevention and rehabilitation of victims of torture and other cruel, inhuman or degrading treatment or punishment.

The past year showed the versatility of the DFI project and how its data can support centres in their advocacy efforts. The remaining two out of five regional workshops took place in Uganda and Denmark in the first months of 2016, training participants in how to use the data for advocacy and communications outputs. Later in the year, IRCT members from the Philippines, Turkey and Occupied Palestinian Territories presented reports that included DFI data to the UN Committee against Torture (CAT). When CAT issued its concluding observations in May, it drew on the data and information provided by IRCT members and called on Turkey and the Philippines to end impunity. Other DFI members used DFI data in their advocacy towards the Human Rights Council’s Universal Periodic Review (UPR) of their respective countries.
In November 2016, a delegation from the IRCT visited the CAT session at the UN headquarters in Geneva to present the DFI project during a closed working session. The meeting included representatives of the Subcommittee on Prevention of Torture (SPT) and the UN Voluntary Fund for Victims of Torture (UNVFVT). The DFI team presented an overview of the DFI project as well as a live demonstration of the database to the Committee and were able to discuss with Committee members how to best collect and use data on torture and ill-treatment.

A new and upgraded version of the DFI database was developed and was initially tested by four DFI centre and two IRCT members before it was sent to all remaining members for further feedback. Based on this feedback, the official version 1.1 will be launched in January 2017. The major features of the upgraded version include a new and improved interface, improved security features, a client profile summary page, a data dictionary containing pop-up definitions of all fields, tabulated static reports, and a treatment outcome page among other things.

During the year, an external consultant carried out a mid-term evaluation of the project, which included site visits to DFI partner centres in Kenya, Serbia, and Nepal, interviews with workshop participants and DFI Project management team and questionnaires. In brief, the evaluation concluded that the DFI is contributing positively to IRCT members’ capacity, particularly in relation to data management, the documentation of torture cases, and making use of said documentation. The report also unequivocally re-affirmed the project’s relevance and made a strong recommendation for its continuation beyond the initial three-year period. In addition to this, at the close of 2016 in light of the findings from a results oriented mission (ROM) review, the IRCT made a formal application to the EU for a three-month extension, which would extend the end of the project until the end of June 2017.
The IRCT’s 10th International Scientific Symposium: Delivering on the promise of the right to rehabilitation

The IRCT’s 10th International Scientific Symposium: Delivering on the promise of the right to rehabilitation

2016 marked the first time in a decade that the torture rehabilitation sector came together under the auspices of the IRCT General Assembly. As part of this, the IRCT held its 10th International Scientific Symposium called Delivering on the promise of the right to rehabilitation over three days in Mexico City.

A primary objective of the IRCT is to develop its research and evidence base and to share the knowledge and expertise that resides in the torture rehabilitation sector and related mental and public health fields. The Symposium delivered on this objective and also underlined the need for further focus on developing the data collection and evidence base as a path towards informing and delivering on the right to rehabilitation.

The planning phase was guided by an eminent scientific committee of leading researchers and experts in the field of torture rehabilitation and public health and human rights. A key task for the committee was to review the impressive 248 abstracts received from 63 countries in response to the competitive call for abstracts launched in the second half of 2015, against three themes:


2. What are the challenges in implementing the Right to Rehabilitation? - Getting the needed political, financial, legal and public support.

3. What can we learn from others? - Sharing knowledge with other human rights and health sectors.

More than 370 participants, including General Assembly delegates attended a packed three-day programme, which included 36 sessions of presentations and discussions containing 101 presentations, one workshop and one side panel. Cross cutting issues were discussed in six plenary sessions on evidencing the work of the movement, resourcing for survivors needs, responses in a context of widespread or systemic torture, survivor participation in research and treatment and challenges of mass influx of torture survivors.

In order to encourage a cross section of participation, the IRCT had organised a poster exhibit area, featuring 60 posters, a focused poster session and information...
booths that provided participants with detailed information on the DFI clinical database, the Torture Journal, the IRCT Members Site, the IRCT 26 June global campaign as well as IRCT member centre DIGNITY’s library and documentation center DOCU.

The participants appreciated the breadth of content available and their evaluations affirm new learning on efficacy of treatments, new knowledge and tools being developed in the field and the possibility to apply or pilot useful new learning. Particularly appreciated topics included research on clinical therapies, monitoring and evaluation, data collection, forensic evidence, support to victims in justice processes and the focus on survivor perspectives.

Another major output of the Symposium is the Book of Abstracts that is in both English and Spanish, the posters which are available online and most importantly the report of the Symposium Rapporteur. This content will serve to inform the IRCT’s work for years to come and will be shared extensively. An archive of the Symposium will be built in early 2017 and all content, including video recordings of sessions and presentations will be shared widely and on the IRCT website to ensure that as many as possible can benefit from the knowledge presented at the event.

As expected, the Symposium was a great springboard for the reinvigoration of the IRCT research development programmes and to reach its objective of evidencing the movement’s health-based approach to rehabilitation. The contents and the organisation of the Symposium show existing and potential partners the commitment and quality of the work of the IRCT membership and the added value of the unique contributions it can bring to research on torture survivors’ need for rehabilitation and to broader areas of health and human rights.
Revitalising the Torture Journal

2016 was a year of change for the Torture Journal that saw the recruitment of a new editor-in-chief as well as an Editorial Advisory Board. Pau Pérez Sales, MD, PhD took over from Lilla Hardi, MD, as Editor in Chief in August after a competitive and open recruitment process. A similar process was undertaken for the Editorial Advisory Board, which resulted in eight new board members being invited to join, while three existing members continued on the board.

The Editorial Advisory Board is now made up of the following members: S. Meghan Berthold Ph.d, LCSW; Hans Draminsky Petersen, MD; Jim Jaranson MD, MA, MPH; Marianne C. Kastrup, MD, PhD; Jens Modvig MD, PhD; Duarte Nuno Vieira, PhD, MSc, MD; Önder Özkalipci, MD; June C. Pagaduan-Lopez, MD; José Quiroga, MD; Nora Sveaass, PhD; Morris V. Tidball-Binz, MD.

A vital and collaborative inaugural Editorial Advisory Board meeting was held in October where short- and long-term goals were discussed under the energetic leadership of Dr Perez-Sales. Importantly, the group set out what they saw as their key research priorities for the sector, which is likely to guide the future focus of the journal and be published in 2017. In September, the Editorial Assistant post became permanent on a four-day-per-week basis, allowing the consolidation of the editorial team.

During the year, three issues of the Torture Journal were published in March, June and December. Each issue was circulated to approximately 1,200 online subscribers and the first two issues of the year were also distributed physically to around 1,300 recipients in over 110 countries.

All three issues covered a wide range of research topics including the efficacy of various treatments, the importance of a sense of community amongst torture survivors, the use of the Istanbul Protocol in low income countries and incommunicado detention in Spain.

Finally, in 2016 the journal reintroduced editorials and expert statements and included a debate sections. A statement written by the Independent Forensic Expert Group regarding anal examinations in cases of alleged homosexuality was jointly published by the Torture Journal and the Journal of Forensic Legal Medicine, greatly enhancing the reach of this important subject. The journal also aims to be a forum for debate and this year two different debate sections were published.
From the blog: Using art and learning to treat trauma in France

In France, IRCT member centre Parcours d’Exil uses a vast range of methods to treat their clients. Among these approaches are art therapy, language classes and cultural events, which can help accelerate torture survivors’ recovery. For one torture survivor art therapy proved the key to easing his fears and allowed him to deal with the horrific trauma of his past.

In August 2015, Parcours d’Exil was contacted by a volunteer of Iranian descent working for the Red Cross, who had benefitted from one of the centre’s training programmes. She asked the centre to make an emergency appointment for an Iranian asylum seeker who had arrived in France two days before.

On the day of the consultation, asylum seeker N appeared to be in a state of fear, incapable of uttering a word, watchful of everything and everyone and crying all the time. He made it clear that he was afraid of the therapist and he showed signs of being afraid he was being watched and threatened.

Like many other patients, N did not want any medication, having been exposed to "harmful" treatments in the past.

In order to familiarise him with Parcours d’Exil, he was invited to attend French courses and music workshops that the centre organises. It soon became clear that participating in these classes, within the reassuring frame of the centre, had become a “necessity” for him, and his social behaviour changed dramatically. He never missed any of the cultural visits organised by the centre, and he was gradually able to socialise again and regain some confidence.

N’s story confirms the idea that Parcours d’Exil promotes: That the inclusion of artistic and creative activities is a powerful catalyst to accelerate self-reconstruction.
Advocacy

Throughout the year, the IRCT continued to work closely with member centres to generate change at the national level. Together with individual members, the IRCT executed advocacy interventions pushing for national implementation of the Right to Rehabilitation and other key aspects of torture eradication. The IRCT also continued to drive the development and effective implementation of international and regional standards on this issue. Supporting victims of torture through health-based knowledge on investigation and documentation remains at the heart of the organisation and during the year, the IRCT successfully intervened in a number of cases and through the IFEG ensured that torture victims’ trauma is taken seriously in court.

STRENGTHENING NATIONAL ADVOCACY

A key objective of the IRCT’s advocacy activities is to support its members and bring about positive change at the national level. In 2016, the organisation did so in a number of ways including intervening in national law and policy processes and providing technical assistance to its members.

Building members’ advocacy capacity

In 2016, the IRCT continued to build the advocacy capacity of its members and partners through training and other forms of knowledge sharing. Among such activities was a training in Baku, Azerbaijan for 23 professionals, aiming to raise their awareness of the existing international standards for the investigation and documentation of torture following the Istanbul Protocol.

Another training on torture documentation took place in Manila in the Philippines. The three-day training, which was organised by the IRCT and local member, Medical Action Group (MAG), generated a strategy for future implementation of the anti-torture law and deepened the IRCT and its members’ work with frontline health professionals from across the Philippines in relation to documentation of torture. The training was followed by a one-day multi-agency workshop on the implementation of the United Nations Committee against Torture’s recommendations on rehabilitation and documentation.
Throughout the year, the IRCT also improved the capacity of staff from 12 member centres in Latin America, MENA and Sub-Saharan Africa to do evidence based advocacy.

**Analysing the state of rehabilitation in seven countries**

In 2016, the IRCT produced national reports on seven different countries together with 10 of its member centres. The reports analyse the situation of torture and ill-treatment in these countries, highlight major obstacles to ensuring the right to rehabilitation and provide concrete implementation targets for states to take practical steps toward guaranteeing the right to rehabilitation for victims of torture.

The reports were actively used by members in all seven countries for their national and international advocacy activities and disseminated via print and social media to external stakeholders including relevant government agencies, donors, the media, UN or regional human rights mechanisms, national human rights institutions and the general public in their respective countries.

Supporting its members in Kenya with their national lobbying, the IRCT provided input to the draft Kenyan Anti-Torture law in order to ensure that the legislation adequately addresses torture victims’ need for rehabilitation and adequate forensic documentation of torture.

**Leveraging international human rights monitoring mechanisms for domestic change**

The IRCT supports its members to advocate UN mechanisms to generate pressure on

**Highlighting the experiences and needs of torture victims in Sweden**

In 2016, the IRCT participated in the historical Swedish political summer meeting in Almedalen where more than 3000 political events and discussions took place over five days. Together with the Right Livelihood Foundation and the Swedish Red Cross, the IRCT co-hosted a seminar about the experience of torture victims arriving in Sweden seen from the perspective of the victim and the rehabilitation service provider – in the context of the global situation of torture victims fleeing their countries of origin. The event, which was combined with a number of bilateral meetings with Swedish politicians and development specialists, helped bring attention to the need for enhanced action by the Swedish Government to support rehabilitation at home and abroad.
their governments to eradicate torture. In 2016, the IRCT assisted members in Moldova, the Philippines, South Africa and Uganda in their advocacy towards the Human Rights Council’s UPR of their respective countries. By supporting these members, the IRCT helped ensure that their countries received strong recommendations on priority issues including the implementation of the right to rehabilitation. In particular, Uganda received and accepted strong recommendations on redress and rehabilitation for torture victims.

The IRCT also supported member centres in Ecuador, France, Israel/Palestine, Honduras, the Philippines and Turkey with their advocacy activities in relation to CAT reviews of their specific countries.

Finally, together with one of its Lebanese members, Restart Centre, the IRCT held a workshop with Lebanese Government officials on engagement with the UN CAT to support their preparation for the state review taking place in the spring of 2017.

**PROMOTING IMPROVED REGIONAL STANDARDS FOR REHABILITATION**

**Europe**

The EU is in the process of reforming its Common European Asylum System, which is of great importance to torture victims as it determines their reception conditions and the processes in which their claims are considered. Based on an analysis of the implementation of the existing system, the IRCT advocated towards the European Commission and Parliament to make sure that key protection and support measures for torture victims are included in the reform. The IRCT produced three position papers and intervened directly with decision makers to ensure that the needs of torture victims are taken into account from the beginning of the reform.

**Falling through the cracks**

In 2016, the IRCT produced a regional report together with nine of its member centres based in eight different EU countries. The report, titled “Falling Through the Cracks: Asylum Procedures and Reception Conditions for Torture Victims in the European Union”, looks at the lack of support for torture victims in asylum procedures and reception facilities in Austria, Finland, France, Germany, Hungary, Italy, the Netherlands and Sweden. It examines implementation of the EU Asylum Procedures Directive and the EU Reception Conditions Directive and details the experience of the nine torture rehabilitation centres in how their countries receive, process and support torture victims.

Based on this, the report finds that despite clear legal obligations in the EU, torture victims are not identified among the broader refugee population, leading to a series of negative consequences such as lack of access to rehabilitation services, flawed consideration of their asylum claims, the use of fast-track procedures and placement in immigration detention.
The IRCT also advocated for a human rights based approach in all EU foreign affairs policies and for stronger action in the fight against torture worldwide. It took part in consultations as well as joint civil society initiatives to promote the inclusion of human rights as a key priority of the Global Strategy for the EU’s Foreign and Security Policy that was presented in 2016 by the European External Action Service.

**Latin America and North America**

The IRCT intervened in collaboration with other civil society organisations to encourage the Organisation of American States (OAS) to adopt references to the right to rehabilitation in its General Assembly Resolution on the Promotion and Protection of Human Rights. At its regular session in June 2016, the OAS General Assembly adopted the resolution urging state parties to make adequate rehabilitation services available without discrimination.

This outcome is a clear acknowledgment of the importance of ensuring the right to rehabilitation for all and thus creates a platform for national advocacy across the Americas.

**Sub Saharan Africa**

The IRCT participated actively in a number of consultations on the development of a General Comment on victims’ right to redress, initiated by the Committee for the Prevention of Torture in Africa over the course of 2015 and 2016. The IRCT coordinated input with its members in Africa to ensure that the draft General Comment reflects the right to rehabilitation in the context of the African region and the IRCT’s priorities in relation to the right to rehabilitation and the significance of the Istanbul Protocol for documenting and investigating torture. It is expected that the General Comment will be adopted by the ACHPR in 2017.

**Working to ensure sustainable funding for IRCT members**

Throughout 2016, the IRCT continued to monitor the funding situation for the rehabilitation sector and was in continuous dialogue with the United Nations Voluntary Fund for Victims of Torture (UNVFVT). Several meetings were held in relation to the collaboration between the IRCT and the UNVFVT on lobbying States and others for funds for torture rehabilitation and the IRCT Secretary-General participated in the annual UNVFVT meeting. Lobbying also continued in relation to the 10-year cap on eligibility, which took effect in relation to the 2015 grants, and the impact that this has had on rehabilitation centres and IRCT members in particular.

**Supporting victims of torture through documentation and investigation**

From carrying out trainings to supporting victims in court, the IRCT – together with the Independent Forensic Expert Group (IFEG) - continued to successfully leverage its health-based knowledge on investigation and documentation of torture to support victims across the world.

As part of its support to the further development of the IFEG, the IRCT held a Steering Committee meeting in Copenhagen in February 2016. Over the two-day meeting, the IFEG took stock of its progress and set out a new strategy for consolidation and growth. One of the key decisions made among the membership was to create a framework to mentor less experienced or younger forensic experts and to facilitate the development and strengthening of national forensic networks.

Also in 2016, the IRCT jointly organised a training in Malaysia for national human rights institutions across Asia on working in partnership with doctors and psychologists to
From the blog: The dangers facing human rights defenders amid decades of torture and ill treatment

It was the oppressive regime of former Kenyan President Daniel arap Moi that led to the establishment of Mwatikho Torture Survivors’ Organization (MATESO) in 1995. As president, Moi was responsible for the torture, death and disappearance of thousands of people who were considered supporters of the opposition. One of the places affected by the violence was the town of Bungoma near the Ugandan border.

“The international community realised there was a problem in Kenya and they came to the country through Amnesty International to look for victims of torture. They identified Bungoma as an area with many victims and that’s why MATESO was founded there,” explains Taiga Job Wanyanja, centre coordinator of MATESO.

Taiga was one of the centre’s founders. He saw first-hand how people who had been subjected to unthinkable atrocities were in urgent need of help. At the time, torture victims in Kenya had nowhere to go to receive rehabilitation. There was a group of international doctors who came to the country to help rehabilitate the victims. This led to the foundation of MATESO.

Only a few years after Moi resigned in 2002, Bungoma saw the rise of a guerrilla militia group called Sabaot Land Defence Force (SLDF). The group was accused of killing more than 1,000 people, and of committing various atrocities including murder, torture and rape. In the course of 18 months, over 66,000 people were displaced because of SLDF.

Along with other human rights defenders in the country, Taiga suddenly found himself as a target of the militia and as the situation deteriorated, the less safe he was.

“I had to leave my family behind in Kenya. I had five children and my wife who I left behind. They were also being threatened and had to move to another place.

“After a year I came back to find that the military had crushed the militia group and their illegal activities. The military had caused a lot of damage to the entire community of the western region of Kenya. More than one million people had been affected and the entire community of that region was suffering from PTSD.”

Today, MATESO continues to treat victims of the former governments and SLDF with entire communities suffering from the effects of torture. Each year, MATESO staff provide services to 1,000 torture survivors. But while many of them are victims of past violations, MATESO also support victims of ongoing police brutality.

The high level of impunity is particularly evident to Taiga who continues to be a target for threats and acts of harassment. Yet, he continues to treat torture victims, who, had it not been for him and MATESO, would not be able to access rehabilitation services.

“We have many survivors who have told us we have made a difference in their life. Most people cannot afford the services they need so through our intervention, they feel they are at ease with life now, because they can get the care they need.”

Photos on page 27 taken at IRCT member centre Mateso in Bungoma, Kenya, November 2016. Photographer: Natalia Jidovanu
thoroughly investigate allegations of torture and ill-treatment. A key goal of the workshop was to foster greater understanding of the Istanbul Protocol’s role in supporting human rights investigators in their work to investigate and document allegations of torture.

To strengthen documentation of torture in Swedish asylum proceedings, the IRCT conducted a training for legal and health professionals together with its member centre Swedish Red Cross in Malmö and experts from the IFEG on how to improve the documentation of torture allegations in the Swedish asylum procedure.

In 2016, the IRCT together with two forensic experts from the IFEG, took part in a documentation mission to La Paz, Bolivia to conduct medico-legal evaluations of two victims in order to strengthen their complaints of torture in the domestic judicial proceedings. The mission also featured a seminar on the implementation of the Istanbul Protocol in Bolivia, which discussed key elements in effective torture documentation and highlighted the need for the obligations of health professionals to document and report cases of torture independently. During the mission, the IFEG experts were interviewed by three different news outlets in Bolivia to discuss the importance of torture documentation.

In February, the IRCT submitted an expert review of the second MLR of alleged torture victim Mr Ali Aarrass, concluding that Morocco’s medico-legal investigation still fails to comply with international standards. The review, which was conducted with the assistance of an expert from the IFEG, found that while the second MLR improved upon the first, it still fell short of the Istanbul Protocol standards in key areas.

Victory for the victims:
Court rules torture evidence wrongly excluded in US immigration case

Following an intervention from the IRCT, the US Court of Appeals for the Sixth Circuit ruled that evidence about torture and PTSD was wrongly excluded in the case against Rasmea Odeh, who is accused of providing false statements on her US immigration and naturalisation forms. The Court held that the State should not have excluded this evidence.

The court ruling followed an intervention from the IRCT and five other organisations, including one of the IRCT’s US members, Bellevue/NYU Program for Survivors of Torture, arguing that evidence of Ms Odeh’s torture traumatisation should be admissible.

In 1969, at the age of 21, Rasmea Odeh was arrested at night from her home in Ramallah. After 25 days of interrogation and alleged torture, including rape by the Israeli military, she confessed to two terrorist bombings in Jerusalem. In court, Ms Odeh renounced her confession, but was convicted and spent 10 years in prison.

In 1995, Ms Odeh immigrated to the United States and obtained her citizenship nine years later. But in 2013, she was charged with and convicted of providing false statements on her naturalisation forms because she had not disclosed her past conviction.

The court’s ruling is a victory for anti-torture groups. It affirms the seriousness of torture and its wide-reaching effects on victims and that those effects cannot be ignored. What is more, it is an important step forward for the rights of asylum seekers and refugees.

Ms Odeh’s case is set for retrial.
In 2011, the Rabat Court of Appeal ordered the first medico-legal evaluation of Mr Aarrass, who alleges that he was detained and tortured by the Moroccan police from 14 to 24 December 2010. This evaluation was conducted by doctors from the Ibn Sina Hospital. Upon the request of Mr Aarrass, in 2012, the IRCT then conducted an expert review of the MLR and found that it failed substantially to comply with international standards and principles on the investigation and documentation of torture and ill-treatment as set out in the Istanbul Protocol.

Relying on this review, in a decision on 24 June 2014, the UN Committee against Torture found that Morocco had not met its obligation to conduct a prompt and impartial investigation into Mr Aarrass’s allegations of torture. The Committee also expressed concern that confessions are commonly used in Morocco, particularly in cases of terrorism, and this creates conditions for torture and ill-treatment.

In response to the Committee’s decision, the Moroccan authorities ordered a second medico-legal evaluation of Mr Aarrass, which took place from 6 to 28 November 2014. It is this evaluation that the IRCT has reviewed.

In June 2016, the IRCT submitted an expert review of MLRs produced for 26 alleged torture victims to the Kuwait Court of Appeal in connection with the Al-Abdali Cell case in Kuwait. The case involves 26 men sentenced by a Kuwait Criminal Court in January 2016 for intending to “carry out aggressive acts against the State of Kuwait”. The men denied the charges and claim that their confessions were made as a result of torture. The Court ordered a medical committee in Kuwait to examine the detainees for marks of torture and the subsequent medical reports stated that there were none.

The expert review concluded that Kuwait’s medical evaluations failed to comply with the international principles and standards on the investigation and documentation of torture and ill-treatment, as set out in the Istanbul Protocol. A specialist from the IFEG conducted the review and found that the MLRs contained major deficiencies and omissions including superficial inquiries into allegations of torture, inadequate physical examinations, no psychological evaluations and incomplete forensic findings.

Despite allegations of torture by all 26 detainees, only four MLRs contained a history of alleged ill-treatment, which was restricted to two short sentences mentioning ‘falaka’ (beating the soles of the feet) and ‘electric burns’. However, none of the doctors carried out medical examinations necessary to determine whether the allegations of ‘falaka’ and ‘electric shocks’ were consistent with the injuries observed.

Following appeals, half of the defendants were acquitted, while nine others had their sentences changed to fines or commuted.

**Condemning anal examination**

In the spring of 2016, the IFEG published another expert statement, this time, strongly condemning the practice of anal examinations in cases of alleged homosexual activity, which occurs in countries around the world including Kenya, Uganda, Egypt, Tanzania, Tunisia, Turkmenistan, and Lebanon. The statement was produced to support a legal case in Kenya raised by two victims of forced anal examination.

The statement categorically asserts that forcibly conducted anal examinations are medically and scientifically worthless in establishing whether consensual anal intercourse has occurred and that the practice constitutes cruel, inhuman and degrading treatment and possibly torture.

Despite the fact that anal examinations are a flagrant violation of international human rights, the practice is still widely used in many countries that criminalise or ban consensual homosexual relations.

The IFEG statement was highly effective, being widely cited by both Kenyan and
international media, essentially providing a scientific and medical framework to discuss the worthlessness and cruelty of such exams. Following publication of the statement, the UN CAT in its review of Tunisia condemned the practice with similar reasoning.

**CAMPAIGNING**

**26 June Campaign**

The 26 June campaign continues to be the world’s largest anti-torture campaign by number of participating organisations and people reached. This year the campaign saw close to 100 rehabilitation centres and organisations around the world come together to commemorate torture victims and support torture survivors.

To build on the campaign’s unique and creative platform for promoting change and to ensure that global activities are responsive to the needs of the movement, the IRCT launched its new visual line and slogan ‘Support Life After Torture’ in 2016. This new visual line, shared messages and campaign materials contributed to strengthening the global visibility of the anti-torture movement’s voice and public awareness of its work, as well as offering more professional advocacy and campaigning tools that can be adapted to the specific local needs of the movement.

As part of this renewed approach, the IRCT encouraged the participating organisations and individuals to mark the day by using a campaign kit that could be downloaded from the IRCT website. This campaign kit included a logo-pack; posters in various languages; a range of social media tools for Facebook, Twitter, Mailchimp and Instagram; factsheets to help increase the understanding and visibility of the issue of torture; the annual ‘Global Reading’, which is an IRCT statement that can be read by organisations around the globe on the day; and a campaign guide. Following the event, the IRCT compiled the participants’ summaries of activities from around the world and shared them in its annual 26 June Global Report.

**26 June Global Report**

Last year’s 26 June Global Report also saw a series of developments that were streamlined with the new visual line and campaigning efforts. The new design and layout of the report allow for a more systematic summary of participants’ 26 June activities has made it easier to read and navigate.
The 26 June Global report, which serves as a 'collector item', was produced in eco-friendly printed copies, as well as in a digital version.

**ESTABLISHING NEW COLLABORATIONS AND PARTNERSHIPS**

In 2016, the IRCT re-established new collaborations and partnerships with two international foundations of which it is a laureate.

The IRCT is part of the Right Livelihood Foundation Laureate group, after having received the Right Livelihood Prize in 1988. In 2016, the IRCT and the Right Livelihood Foundation initiated a collaboration around a number of public relations activities in Sweden related to the fight against torture and securing the right to rehabilitation for torture victims. The activities included the IRCT's participation in the Swedish annual public political forum, Almedalen and the Swedish Human Rights Forum. Through the Right Livelihood Foundation, the IRCT was also able to establish relationships with other Laureates including Swedish NGO Kvinna till Kvinna, and Dennis Mukwege and the Panzi Foundation.

In 2003 the IRCT was the recipient of the Hilton Humanitarian Prize. In 2016 the IRCT was part of a working group with other Laureates to help develop a funding mechanism through the Hilton Prize Foundation for laureates. This resulted in the creation of the Hilton Prize Coalition Fellowship programme, which the IRCT benefitted from in the form of funds for two Fellowships and a small collaborative models programme with US-based NGO Covenant House.

**COMMUNICATING THE WORK OF THE ORGANISATION**

In 2016, the IRCT maintained a strong online presence through its website, the World Without Torture blog and various social media channels. During the year, the organisation produced and published more than 80 news stories and statements on the IRCT website, supporting the work of its members, promoting the right to rehabilitation for torture victims and calling on states and governments to protect their citizens against torture and other human rights abuses. The majority of these stories were shared and promoted through the IRCT's social media channels.

The World Without Torture blog has played a key role in raising awareness of the torture rehabilitation sector and the fight against torture. The blog enabled the IRCT to cast a much needed light on some of the most serious human rights crises across the globe and also share with its readers the incredible work of its members. The blog continues to attract a high number of readers. In 2016, the IRCT published 38 blogs which reached a total of 42,500 views.

Acknowledging the importance of transparency and encouraging openness and interaction,
The IRCT 10th Scientific Symposium and General Assembly: Ensuring great visibility

In the year prior to the Symposium and GA, the IRCT used all of its channels to promote the events both within the membership and to external audiences.

Websites

Fifteen news stories related to the event were published on irct.org, while 20 stories were published on the event specific website, irctsymposium2016.irct.org. These stories included interviews with members of the Scientific Committee and IRCT members, as well as information about the programme, accreditation, the co-host etc. During the event itself, a news story with a strong focus on images from the event was published on each site. Following the event, two stories were also published, one to share the Mexico Consensus, a resolution which was passed by the IRCT membership.
and another to look back at the highlights of the Symposium.

Five blogs with a connection to the Symposium were also published on World Without Torture and shared on the World Without Torture social media platforms. The IRCT Members Site was also used extensively to share information with members, in particular around the GA and its processes.

Social media

Both in the run up to and during the event, social media was a key tool in reaching out to both members and external audiences. All news stories and updates were shared on both Twitter and Facebook, and the key visual was added to both accounts to create recognition at an early stage. During the event itself, the IRCT posted on Facebook 19 times. These posts were a combination of images of the events, as a photographer was employed to deliver images in real time to the communications taskforce and quotes from speakers, donors etc.

Twitter was the perfect platform to share real time reactions to presentations, feedback on the event and highlights from participants. During the event the IRCT tweeted almost 80 times and gained almost three times as many followers as a result.

Media and PR

In the lead up to the event, the IRCT employed the services of an external PR Consultant, who helped the Communications team achieve some great media coverage during and after the event. Among the highlights was a feature story in the New York Times about the global impact of torture.

the IRCT has been active on social media throughout the year. The organisation believes that an open dialogue with its social media users has impacted the sector positively and raised awareness of important issues.

Launch of new IRCT website

In 2016, the IRCT launched its new website, which not only offers a better and more visual platform for the organisation to promote the work of the global rehabilitation movement, but it also provides more opportunities for members to showcase their work.

The website proved a valuable tool during the IRCT Scientific Symposium and the General Assembly to publish a number of stories and summaries of the different event activities, complete with several high resolution images.
Operations And Change Management

In 2016, the IRCT continued to ensure full operational alignment with the Strategic Plan, including the further development of operational manuals for a wide range of work processes such as financial management, administration, human resources, sub-granting, communications and membership services.

As of 31 December 2016 there were 29 persons working at the Secretariat in Copenhagen and two staff in Brussels, and one in Mexico City.
Research Development

Leanne MacMillan
Director of Research Development

Lars Døssing Rosenmeier
Research Development Officer

Ailish O’Donoghue
Communications Associate

Nicola Anne Witcombe
Editorial Assistant - Torture Journal

Lisa Haagensen
Project Coordinator - DFI Project

Harry Shepherd
Student Assistant - DFI Project

Advocacy

Asger Kjærum
Acting Director of Advocacy

James Lin
Istanbul Protocol Programme Coordinator

Rachel Towers
Advocacy Advisor

Dastan Salehi
Advocacy Associate

Lorena Torres
Communications Associate

Operations

Miriam Reventlow
Director of Operations

Inge Frandsen
Finance and Administration Officer

Marianne Hansen
Human Resources Officer

Berit Jensen
Finance Consultant

Malene Nielsen
Payroll and Administration Associate

Rudolf Podkrivacky
IT Student Assistant
Our Donors

Thank you for your support

The IRCT gratefully acknowledges the support of the following:

€1,000,000 +
Ministry of Foreign Affairs Denmark
Swedish International Development Cooperation Agency

€400,000 - €999,999
OAK Foundation
European Commission

€100,000 - €399,999
Ministry of Foreign Affairs Norway
Ministry of Foreign Affairs Switzerland

€10,000 - €99,999
Federal Foreign Office of Germany
USAID
Victoria Gómez-Trenor Vergés
Lauritzen Fonden
Hilton Prize Coalition
ATSF
STARTTS
FINANCIAL REPORT
Summary Of 2016 Results

Expenditure
The overall expenditure for 2016 was 3,943,468 Euro. During 2016, the IRCT implemented a rigorous policy of fiscal responsibility, and areas of the expenditure of the IRCT underwent analysis during 2016 in order to reduce cost with maximum impact, while not affecting the operations. Additional investments where made in key priority projects for the membership, in particular the conduct of 10th IRCT Symposium and General Assembly and the sub-granting facility. While holding a General Assembly and Symposium every three years is an obligation under the IRCT Statute, the Organization had not held such an event since 2006. Under the administration of the current Secretary-General, the holding of a Symposium and General Assembly in 2016, became an institutional priority.

Due to the high interest, the IRCT Executive Committee decided in May 2016 to increase the size of the event from 300 to up to 400 participants (the final number of persons present was 380). For this, the organisation made the investment to sponsor participation in the event for all members and representation of all region. This was expected to increase expenditure for 2016 and the Executive Committee authorised the investment of a maximum of 90,000 EUR from the IRCT reserves.

Income
For 2016, IRCT had a result of -76,743 EUR, which remained within the 90,000 EUR investment margin from the IRCT reserves, that as authorized by the Executive Committee. The IRCT had a total equity of 313,089 EUR. Generous support was provided by key donors for the conduct of the Symposium and General Assembly in addition to the ongoing activities of the IRCT.

The IRCT has two main lines of income: Donor states and private philanthropy dedicated to contributing to the world fight against torture. The major situational change that has affected and will continue to affect the rehabilitation movement relates to the shift in the development aid policies of donors. The world refugee crisis has already motivated significant reallocations. To address this, the IRCT will continue its policies of integral fundraising and donor diversification, which has already yielded the positive results.

Beyond 2016
In the IRCT Strategic Plan for 2015-2020 there is a specific focus on multi-year unrestricted funding agreements with new governments, as a very important way to secure the basis for the future. While the main financial objective for future years will be to continue to enter into long-term donor agreements with governmental agencies, multinational organisations and private national and international foundations, new funding streams and financial models will be explored. During 2017, the IRCT Strategic Plan will undergo a mid-term review process, which is expected to further refine the strategic approach of the IRCT towards its mission, and to guide the business model of the organisation and its fundraising efforts.
# FINANCIAL STATEMENTS

## Income Statement

1 January - 31 December 2016

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<tr>
<th>Description</th>
<th>2016 Euro</th>
<th>2015 Euro</th>
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<tbody>
<tr>
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<td><strong>Total Expenses</strong></td>
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**Profit/loss for the year**

-76,743 378,424

**Proposed distribution of profit/loss**

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<tr>
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<td>Retained earnings</td>
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**Total**

-76,743 378,424
### Assets

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### Equity

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### Current liabilities

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<td>Project payables</td>
<td></td>
<td>10,676</td>
</tr>
<tr>
<td>Trade payables</td>
<td></td>
<td>59,050</td>
</tr>
<tr>
<td>Other payables</td>
<td>12</td>
<td>250,706</td>
</tr>
<tr>
<td><strong>Total current liabilities</strong></td>
<td>13</td>
<td><strong>685,471</strong></td>
</tr>
<tr>
<td><strong>Total equity and liabilities</strong></td>
<td>13</td>
<td><strong>998,560</strong></td>
</tr>
</tbody>
</table>

Contingencies etc.
**Income 2016**
3,943,468 €

- **Unrestricted grants**
  2,943,340 €

- **Restricted grants**
  520,603 €

- **Other income**
  1,013 €

- **Scientific Symposium**
  478,512 €

**Expenses 2016**
-4,020,211 €

- **Research Development**
  -1,537,859 €

- **Capacity Building**
  -161,627 €

- **Operations**
  -908,666 €

- **Governance & Policy**
  -1,006,097 €

- **Advocacy**
  -405,962 €

**Equity 2016**
313,089 €

- **Restricted reserves**
  300,000 €

- **Retained earnings**
  13,089 €
How the IRCT Is Governed

The democratic structure of the IRCT is and has always been paramount. The structure, with four distinct tiers, manages to be diverse yet cohesive, appreciating and representing the diversity of the movement.

A four-tiered governance structure

**GENERAL ASSEMBLY:** The democratic base of the IRCT is the General Assembly, which comprises a representative for each member across the globe. Through the General Assembly, members elect regional representatives and independent experts to participate on the Council and provide input into the policies and strategies of the IRCT in order to advance the global mission of the organisation. The General Assembly meets every three years.

**COUNCIL:** The Council is the main policy-making body of the IRCT. It comprises 26 members representing the entire membership, and includes three independent experts who provide an external perspective (29 people sit on the Council in total). The Council holds annual meetings in order to discuss and decide policies and key organisational issues, and to monitor the progress of IRCT’s work at the global level and in the regions. The next Council meeting will be held in November 2017.

**EXECUTIVE COMMITTEE:** The Executive Committee (ExCom) is a deliberative body made up of eight members: one from each of the regions plus one independent expert, including the President and Vice President. The Executive Committee decides the means and measures necessary to adopt and implement the decisions of the Council and its purpose is to ensure the overall direction, supervision and accountability of the IRCT between Council meetings. It is elected by and is accountable to the Council. The Executive Committee appoints the Secretary-General of the IRCT.

**SECRETARIAT:** Based in Copenhagen, Denmark, with a liaison office in Brussels, Belgium, the Secretariat is well placed to guide, advise and implement the work shaped and determined by the membership of the IRCT, the Council, and the ExCom.
The Democratic Structure

Executive Committee

Mr Jorge Aroche
IRCT President, Chief Executive Officer, STARTTS, Australia; Elected Council Member representing the Pacific Region

Ms Sana Hamzeh
IRCT Vice-President, Psychologist and Head of the Rehabilitation Department, Restart Centre, Lebanon; Elected Council Member representing the MENA region

Mr Pradeep Agrawal
MD Consultant, Psychiatrist; President and Director, SOSRAC, India; Elected Council Member representing the Asia Region

Ms Kathi Anderson
Executive Director, Survivors Of Torture, International, United States; Elected Council Member representing the North America region

Ms Mariana Lagos
Project Coordinator, EATIP, Argentina; Elected Council Member representing the Latin American Region

Mr Samuel Herbert Nsubuga
Chief Executive Officer, ACTV, Uganda; Elected Council Member representing the Sub-Saharan Africa region

Ms Lela Tsiskarishvili
Executive Director, GCRT, Georgia; Elected Council Member representing the European Region

Independent Expert:
Mr Michael Brune
Haveno – Psychotherapie Und Interkulturelle Kommunikation – Germany

The following Council Members were elected in 2016 for the period from 2016-2019.

Council

Elected by the Asia Region:

Mr Pradeep Agrawal
(See Executive Committee)

Mr Shailendra Guragain
President, Centre For Victims Of Torture, Nepal

Ms Edeliza Hernandez RN; Executive Director, Medical Action Group, Philippines

Mr Debabrata Roy Laifungbam
President, CORE, India

Elected by the Europe Region:

Ms Aida Alayarian
Clinical Director/Chief Executive, Refugee Therapy Centre, United Kingdom

Ms Lela Tsiskarishvili
Executive Director, GCRT, Georgia; Elected Council Member representing the European Region

Mr Metin Bakkalci
Secretary-General, TIHV/HRFT, Turkey

Ms Sara Fridlund
Senior Advisor, Swedish Red Cross, Sweden

Ms Kristina Gevorkyan
Administrative Director, FAVL, Armenia

Ms Lilla Hárdi
Medical Director, Cordelia, Hungary

Ms Bianca Schmolze
Human Rights Expert, Medical Care Service For Refugees Bochum, Germany

Ms Lela Tsiskarishvili
(See Executive Committee)

Elected by the Latin America and the Caribbean Region

Mr Andrés Gautier
Social Therapy Director, ITEI, Bolivia

Ms Mariana Lagos
(See Executive Committee)

Ms Dora Lancheros
Director, Corporación AVRE, Colombia

Ms Juana Lloret
Psychologist Therapist, CAPS, Peru
Elected by the Middle East and North Africa Region

Ms Sana Hamzeh  
(see Executive Committee)

Khader Rasras  
Executive Director, TRC, Occupied Palestinian Territory

Mr Mohamad Safa  
Secretary-General, Khiam Centre, Lebanon

Elected by the North America Region

Mulugeta Abai  
Executive Director, CCVT, Canada

Ms Kathi Anderson  
(see Executive Committee)

Elected by the Pacific Region

Mr Jorge Aroche  
(See Executive Committee)

Ms Bernadette McGrath  
(CEO, OSSTT, Australia)

Elected by the Sub Saharan Africa Region

Mr Jarwlee Tweh Geegbe  
Executive Director, RAL, Liberia

Mr Peter Kum Che Mebeng  
Executive Director, TCC, Cameroon

Mr Charbonnel Nodjigoto  
National President, AJPNV, Chad

Mr Samuel Nsubuga  
(See Executive Committee)

Representatives in their Capacity of Independent Experts

Mr Michael Brune  
(see Executive Committee)

Mr Peter Edigbo  
University Of Nigeria Enugu Campus, Nigeria

Ms Mihiri Ferdinando  
The Asia Foundation, Sri Lanka
Members

151 Members
In 72 Countries

Albania (1)
ARCT - Albanian Rehabilitation Centre for Trauma and Torture Victims

Argentina (1)
EATIP – Equipo Argentino de Trabajo e Investigación Psicosocial

Armenia (1)
FAVL - Foundation against Violation of Law

Australia (9)
ASeTTS - Association for Services to Torture and Trauma Survivors
Companion House Assisting Survivors of Torture and Trauma
VFST - The Victorian Foundation for Survivors of Torture Inc. - Foundation House
Melaleuca Refugee Centre, Torture and Trauma Survivor Service NT
OSSTT - Overseas Services to Survivors of Torture and Trauma Ltd
Phoenix Centre - Support Service for Survivors of Torture and Trauma
QPASTT - Queensland Program of Assistance to Survivors of Torture and Trauma

STARTTS - Service for the Treatment and Rehabilitation of Torture and Trauma Survivors
STTARS - Survivors of Torture and Trauma Assistance and Rehabilitation Service Inc.

Austria (3)
HEMAYAT - Organisation for Support of Survivors of Torture and War
OMEGA Health Centre - Society for Victims of Organised Violence and Human Rights Violations
ZEBRA - Intercultural Centre for Counselling and Psychotherapy

Bangladesh (1)
CRTS - Centre for Rehabilitation of Torture Survivors

Bolivia (1)
ITEI – Instituto de Terapia e Investigación sobre las Secuelas de Tortura y la Violencia Estatal

Bosnia and Herzegovina (3)
CTV Sarajevo - Association for Rehabilitation of Torture Victims - Centre for Torture Victims, Sarajevo
SLUBIH - The Association of Concentration Camp - Detainees in Bosnia and Herzegovina
Vive Žene Centre for Therapy and Rehabilitation

Burundi (1)
SAP/GL - Solidarité d’Action pour la Paix/Grand Lacs

Cambodia (1)
TPO Cambodia - Transcultural Psychosocial Organization

Cameroon (1)
TCC - Trauma Centre Cameroon

Canada (4)
CCVT - Canadian Centre for Victims of Torture
ECSTT - Program for Survivors of Torture and Trauma at the Edmonton Mennonite Centre for Newcomers
VAST - Vancouver Association for Survivors of Torture
RIVO – Réseau d’intervention auprès des personnes ayant subi la violence organisée

Chad (1)
AJPNV - Association Jeunesse pour la paix et la Non Violence/ Centre de Rehabilitation des Victimes de la Torture

Chile (1)
CINTRAS – Centro de Salud Mental y Derechos Humanos
Colombia (2)  
Corporación AVRE – Acompañamiento Psicosocial y Atención en Salud Mental a Víctimas de Violencia Política  
CAPS – Centro de Atención Psicosocial  

Congo, The Democratic Republic of (6)  
AVVDH - Amis des victimes des violations des droits humains  
CMM - Centre Mater Misericordiae  
FEDICONGO - Fédération des Femmes pour le Développement Intégral au Congo  
REMAK - Regroupement Des Mamans De Kamituga  
Save Congo  
SOVIP - Solidarité avec les Victimes et pour la Paix  

Croatia (1)  
RCT Zagreb - Rehabilitation Centre for Stress and Trauma  

Denmark (3)  
OASIS - Treatment and Counselling for Refugees  
DIGNITY - The Danish Institute Against Torture  
RCT-Jylland - Rehabilitation Centre for Torture Victims - Jutland  

Ecuador (1)  
PRIVA – Fundación para la Rehabilitación Integral de Víctimas de Violencia  

Egypt (1)  
El Nadeem Center for Psychological Management and Rehabilitation of Victims of Violence  

Finland (1)  
CTSF - Centre for Torture Survivors in Finland at Helsinki Deaconess Institute  

France (1)  
Parcours d'Exil – Accompagnement Thérapeutique des Victimes de Torture  

Georgia (2)  
EMPATHY, Psycho-Rehabilitation Centre for Victims of Torture, Violence and Pronounced Stress Impact  
GCRT - Georgian Center for Psychosocial and Medical Rehabilitation of Torture Victims  

Germany (3)  
Exil Hof für Migranten, Flüchtlinge und Folterüberlebende e.V.  
bzfo - Berlin Center for the Treatment of Torture Victims  
MFH - Medical Care Service for Refugees Bochum  

Guatemala (1)  
ODHAG – O cina de Derechos Humanos del Arzobispado de Guatemala  

Honduras (1)  
CPTRT - Prevention, Treatment and Rehabilitation Center for Survivors of Torture and Relatives  

Hungary (1)  
Cordelia Foundation for the Rehabilitation of Torture Victims  

India (6)  
CORE - Centre for Organisation Research & Education - Human to Humane Transcultural Centre for Trauma & Torture (H2H)  
CCTV - Centre for Care of Torture Victims  
PVCHR - People's Vigilance Committee on Human Rights  
SOSRAC - Shubhodaya Center for Rehabilitation of Victims of Torture and Violence - Society for Social Research, Art and Culture  
TTSP - Tibetan Torture Survivors Program  

Indonesia (2)  
ALDP - Alliance of Democracy for Papua  
RATA - Rehabilitation Action for Torture Victims in Aceh  

Iran, Islamic Republic of (1)  
ODVV - Organization for Defending Victims of Violence  

Iraq (3)  
BFRCT - Bahjat Al-Fuad Rehabilitation of Medical & Psychological Centre for Torture Victims  
Jiyan Foundation for Human Rights (formerly Kirkuk Center for Rehabilitation of Torture Victims)  
Wchan - Wchan Organization for Victims Human Rights Violations - Trauma Rehabilitation and Training Center  

Ireland (1)  
SPIRASI - The Centre for the Care of Survivors of Torture  

Israel (1)  
ASSAF - Aid Organization for Refugees and Asylum Seekers  

Italy (3)  
VI.TO/CIR - Hospitality and Care for Victims of Torture, Italian Council for Refugees  
NAGA-HAR - Centre for Asylum Seekers, Refugees, Torture Victims  
Doctors Against Torture Humanitarian Organization  

Jordan (1)  
IFH/NHF - Institute for Family Health/ Noor Al Hussein Foundation  

Kenya (3)  
CAT Kenya - Centre Against Torture  
IMLU - Independent Medico-Legal Unit  
MATESO - Mwatikho Torture Survivors Organization
Kosovo (1)
KRCT - Kosova Rehabilitation Centre for Torture Victims

Kyrgyzstan (1)
GOLOS SVOD 3Y Public Foundation

Lebanon (3)
KRC - Khiam Rehabilitation Center for Victims of Torture
CLDH - Centre Nassim at the Lebanese Center for Human Rights
Restart Center for Rehabilitation of Victims of Violence and Torture

Liberia (2)
RAL - Rescue Alternatives Liberia
LAPS - Liberia Association of Psychosocial services

Mexico (1)
CCTI – Colectivo Contra la Tortura y la Impunidad

Moldova (1)
RCTV Memoria - Medical Rehabilitation Center for Torture Victims

Morocco (1)
AMRVT – Association Medicale de Rehabilitation des Victimes de la Torture

Nepal (2)
CVICT - Centre for Victims of Torture
TPO Nepal - Transcultural Psychosocial Organization

Netherlands (4)
Centrum ‘45
De Evenaar - Centrum voor Transculturele Psychiatrie Noord Nederland
Phoenix - Centre for Clinical Psychiatric Care for Asylum Seekers and Refugees
RvA NL - Psychotrauma Centrum Zuid Nederland

New Zealand (2)
RASNZ - Refugees As Survivors New Zealand
Refugee Trauma Recovery

Nigeria (1)
PRAWA - Prisoners Rehabilitation And Welfare Action

Pakistan (2)
HDO - Human Development Organization
SACH - Struggle for Change

Palestinian Territory, Occupied (3)
GCMHP - Gaza Community Mental Health Programme
Jesoor - Transcultural Right to Health
TRC - Treatment and Rehabilitation Center for Victims of Torture

Peru (1)
CAPS -Centro de Atención Psicosocial

Philippines (2)
Balay Rehabilitation Center, Inc.
MAG - Medical Action Group

Poland (1)
CVPP - The Centre for Victims of Political Persecution

Romania (2)
MRCT Craiova - ICAR Foundation, Medical Rehabilitation Center for Torture Victims
MRCTV Bucharest - ICAR Foundation, Medical Rehabilitation Center for Torture Victims Bucharest

Russian Federation (1)
CPT - Interregional Public Organization «Committee for prevention of torture»

Senegal (1)
VIVRE/CAPREC - Victimes de Violences Rehabilitées, le Centre de Soins du CAPREC

Serbia (1)
IAN CRTV - International Aid Network Center for Rehabilitation of Torture Victims

Sierra Leone (1)
CAPS - Community Association for Psychosocial Services

South Africa (2)
CSV R - Centre for the Study of Violence and Reconciliation/Trauma and Transition Programme
TCSVT - The Trauma Centre for Survivors of Violence and Torture

South Korea (2)
GTC - Gwangju Trauma Center
The Kim Keun-Tae Memorial Healing Center

Spain (1)
CEAR - Spanish Commission for Refugees Aid

Sri Lanka (2)
FRC - Family Rehabilitation Centre
SA - Survivors Associated (Guarantee) Ltd

Sudan (1)
ACTRVT - Amel Center for Treatment and Rehabilitation of Victims of Torture

Sweden (5)
Red Cross Malmö - Swedish Red Cross Centre for Victims of Torture and War
Red Cross Skövde - Swedish Red Cross Centre for Victims of Torture
Red Cross Stockholm - The Swedish Red Cross Centre for Tortured Refugees

UYISENGA N’MANZI
Red Cross Uppsala - Swedish Red Cross Centre for Victims of Torture

Sweden Red Cross Treatment Center for persons affected by war and torture, Skellefteå

**Switzerland (2)**

SRC - Centre for Migration and Health/ Clinic for Victims of Torture and War

Consultation pour Victimes de Torture et de Guerre at the Hôpitaux Universitaires de Genève

**Turkey (6)**

SOHRAM-CASRA - Centre of Social Action, Rehabilitation and Readjustment

TIHV/HRFT Ankara - Human Rights Foundation of Turkey - Ankara Treatment and Rehabilitation Center

TIHV/HRFT Diyarbakır - Human Rights Foundation of Turkey - Diyarbakır Treatment and Rehabilitation Center

TIHV/HRFT Istanbul - Human Rights Foundation of Turkey - Istanbul Treatment and Rehabilitation Center

TIHV/HRFT Izmir - Human Rights Foundation of Turkey - Izmir Treatment and Rehabilitation Center

TOHAV - Foundation for Social and Legal Studies

**Uganda (1)**

ACTV - African Centre for Treatment and Rehabilitation of Torture Victims

**Ukraine (1)**

IRC - International Medical Rehabilitation Center for the Victims of Wars and Totalitarian Regimes

**United Kingdom (2)**

RTC - Refugee Therapy Centre

Freedom from Torture

**United States (15)**

APRCVT - ACCESS - Psychosocial Rehabilitation Center for Victims of Torture

Bellevue - NYU Program for Survivors of Torture

BCRHR - Boston Centre for Refugee Health and Human Rights

Community Legal Services and Counseling Center

CST - Center for Survivors of Torture, Dallas

CST - Center for Survivors of Torture, San Jose

CVT - Center for Victims of Torture

FCST - Florida Center for Survivors of Torture - A Program of Gulf Coast Jewish Family Services, Inc.

Heartland Alliance - Marjorie Kovler Center

PSTT/CMHS - Program for Survivors of Torture and Severe Trauma at the Center for Multicultural Human Services (a program of NVFS)

PTV - Program for Torture Victims of Los Angeles

Survivors International

Survivors of Torture, International

TTCO - Torture Treatment Center of Oregon

**Venezuela (1)**

Red de Apoyo por la Justicia y la Paz

**Zimbabwe (1)**

CSU - Counselling Services Unit
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.

By credit card

Please visit 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

**U.S. Dollars (USD) Account**
Registration No. 4183
Account No. 4310-005029
IBAN DK18 3000 4310 0050 29