

16 Rue Marion Garay
64500 Saint Jean de Luz
FRANCE

28 May 2018

Re: Submission in the matter of Iratxe Sorzabal Diaz before La Chambre de l'Instruction de la Cour d'appel de Paris

Dear Ms. Cachenaut:

In response to your request, the International Rehabilitation Council for Torture Victims (IRCT) provides its expert opinion on the relevance and reliability of the medico-legal report produced by Dr. Pierre Duterte following the standards and principles of the Istanbul Protocol¹ and submitted in the matter of Iratxe Sorzabal Diaz.

The IRCT is an independent, international health-based organisation that promotes and supports the rehabilitation of torture victims and their access to justice. We comprise of 164 independent rehabilitation centres in 74 countries, making the IRCT the world's largest membership-based organisation to work in the field of torture rehabilitation.

The IRCT was one of the original organisations involved in the creation of the Istanbul Protocol, which is the internationally accepted standard for the effective medico-legal (physical and psychological) investigation into allegations of torture and ill-treatment. We continue to be a key provider of technical assistance and expertise on medico-legal investigation and documentation of torture following the Istanbul Protocol to health and legal professionals and policy-makers worldwide, including to several state authorities and inter-governmental bodies of the European Union and the United Nations.

a. Background on impunity and the international obligation to investigate torture according to the Istanbul Protocol

The United Nations Special Rapporteur on torture has found that torture continues to be widely practised in the majority of states, with impunity being one of its root

¹ Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (the Istanbul Protocol). 2004. HR/P/PT/8/Rev.1.

causes.² The IRCT's experience corroborates this finding. Every year, the IRCT's global network of rehabilitation centres treats approximately 100,000 torture survivors worldwide, while only a few torture perpetrators are prosecuted. This gap between the high number of torture survivors and the low number of prosecutions is demonstrative of the worldwide breadth of impunity.

Impunity for torture exists despite the broad range of positive obligations placed on states to address torture. Under the United Nations Convention against Torture, states including Spain and France are obliged to criminalize torture, to establish broad jurisdictions, to investigate all allegations and suspicions of torture, to document torture, to bring perpetrators of torture to justice, and to provide redress to torture victims.³

Because of the gravity of the international crime of torture, states are obliged to undertake *ex officio* prompt, impartial, and effective investigations of torture whenever there are reasonable grounds to suspect that torture has occurred, even absent an allegation of torture or other ill-treatment or any formal complaint.⁴ A prompt, impartial, and effective investigation means that it must be undertaken in full compliance with the Istanbul Protocol.⁵ The European Court of Human Rights has held that state investigations that do not comply with the Istanbul Protocol do not fulfil the state obligation to investigate torture effectively, promptly, and impartially.⁶

The existence of impunity in a state suggests that the state is either unable or unwilling to fulfil their international obligations on torture. One of the factors fostering impunity is that perpetrators may undertake torture in a manner designed to evade detection or conviction. Moreover, torturers know of the difficulty of proving torture and, as state agents, are often in a position to find ways of avoiding accountability.⁷

This places torture victims at a substantial disadvantage, particularly when they have been held or remain in the custody of the state and may fear reprisals. In

² Interim report of the UN Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, 10 August 2010 (A/65/273), p.6.

³ United Nations Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (entered into force 26 June 1984), articles 12 and 13; Inter-American Convention to Prevent and Punish Torture, articles 1, 6 and 8; American Convention on Human Rights, articles 5 and 8.

⁴ UN Convention against Torture, article 12; Guidelines of the Committee of Ministers of the Council of Europe on eradicating impunity for serious human rights violations (adopted on 30 March 2011), Section V, §1 and 3.

⁵ Interim report of the UN Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, 10 August 2010 (A/65/273), pp.2 and 10.

⁶ European Court of Human Rights, *Bati v. Turkey* (3 June 2004, App. nos. 33097/96 and 57834/00) §§133-137; European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment, CPT standards, CPT/Inf/E (2002) 1-Rev. 2013, chap. VII.

⁷ Interim report of the UN Special Rapporteur on torture (A/65/273), pp.2 and 10.

addition, due to the physical and psychological trauma caused by torture, victims may be unable or unwilling to disclose their ill-treatment, to do so in a chronological and coherent manner, or to do so in a single interview.

Substantial stigma also attaches to torture victims, especially those who experience some form of sexual assault or humiliation, and may heighten the symptoms of post-traumatic stress disorder that they experience such as dissociation and avoidance. Stigma, shame, humiliation, anger and certain symptoms of post-traumatic stress disorder may psychologically prevent torture victims from disclosing or discussing their experience. The stigma of torture or other social or psychological consequences of torture further hinder the ability of torture victims to present testimony and adds to the challenge of fighting impunity for torture.

b. Spain's compliance with its international obligations

International and regional human rights bodies and regional human rights jurisprudence document a long-standing pattern of torture and impunity in Spain, particularly when an individual is held in incommunicado detention.⁸ These bodies have criticised Spain for its failure or unwillingness to conduct prompt, impartial, and effective investigations into torture or to prosecute the perpetrators of torture.⁹ The European Court of Human Rights has found on numerous occasions that Spain violated Article 3 of the European Convention on Human Rights on the prevention of torture due to its failure to conduct thorough, effective, and impartial investigations into allegations of torture and ill-treatment, most recently in May 2016.¹⁰

Because of the state's documented failure to investigate torture promptly, effectively, and impartially – i.e., in compliance with the Istanbul Protocol, the absence of legal or medico-legal (physical or psychological) investigation and documentation of torture acts in Spain should not be interpreted to suggest that torture has not occurred. In its May 2016 decision on Spain, the European Court of Human Rights held that as a result of the lack of an effective and prompt investigation by Spain into allegations of torture, though there was no clear

⁸ See for example: UN Committee against Torture Concluding observations on the sixth periodic report of Spain, CAT/C/ESP/CO/6 (2015) at §19; Conclusions and recommendations of the Committee against Torture (2002), CAT/C/CR/29/3, §10; Report of the Committee against Torture to the UN General Assembly (1998), A/53/44, §127-132.

⁹ UN Committee against Torture Concluding observations on the sixth periodic report of Spain, CAT/C/ESP/CO/6 (2015) §19. Amnesty International, Alternative report to the Committee against Torture at its 54th session, 20 April to 15 May 2015, p.9; Amnesty International Country Report on Spain, 2016/17. See: <https://www.amnesty.org/en/countries/europe-and-central-asia/spain/report-spain/>

¹⁰ *Beortegui Martinez v Spain* [2016] ECHR 476 (31 May 2016), §47. See also: *Beristain Ukar v Spain* (Application 40351/05) (2011), §34; *San Argimiro Isasa v Spain* (Application 2507/07) (2010), §44-45.

evidence, it must be concluded that torture had actually taken place.¹¹ Otherwise, the impunity of the state would be allowed to negate its other obligations on torture, violating the United Nations Convention Against Torture and the dignity of survivors.

Even if a state fails to investigate torture properly or bring perpetrators to justice, the state remains obliged to provide redress and rehabilitation to victims as well as to ensure that any statement extracted as a result of torture is not invoked as evidence in any proceedings, including administrative, asylum, criminal or extradition proceedings.¹² Following from the European Court of Human Rights' May 2016 decision on Spain, the failure of Spain to investigate allegations of torture or ill-treatment in a manner compliant with the Istanbul Protocol places considerable doubt on the reliability of convictions there in cases where torture is alleged to have been perpetrated prior to a confession being extracted.¹³ The principle that torture or other ill-treatment should never be used to extract information or confessions from detained persons has been the subject of judgments in recent years in Spain and, in some cases, the previous conviction has been overturned.¹⁴

c. The Istanbul Protocol as the internationally accepted standard for the investigation and documentation of torture and ill-treatment

1. Relevance of the Istanbul Protocol

To address the global prevalence of torture and the common denial of the existence of torture by those responsible, several organisations, including the IRCT, came

¹¹ *Beortegui Martinez v Spain* [2016] ECHR 476 (31 May 2016).

¹² UN Convention against Torture, article 15 as interpreted by the Committee against Torture in its General Comment no. 2, (CAT/C/GC/2), §6. The principle is also reflected in: 1975 Declaration on the Protection of All Persons from Being Subjected to Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, article 12; UN General Assembly resolution 13/19 dated 15 April 2010 (UN Doc. A/HRC/Res/13/19), §7; and the Human Rights Committee, General Comment no. 32, (CCPR/C/GC/32), §6 and §41. UN Committee against Torture: *P.E. v France* (Communication no. 193/2001), §6.3; *G.K. v Switzerland* (Communication no. 219/2002), §6.10.

¹³ See for example: European Committee for the Prevention of Torture (CPT) report on a visit to Spain in 2011, CPT/Inf (2013) 6, in the section on incommunicado detention states that: "From the information gathered, it appeared that the aim of the alleged ill-treatment was to get the detained person concerned to sign a declaration (i.e. a confession) before the end of the incommunicado detention and to have the declaration confirmed before the court hearing (§14).

¹⁴ Amnesty International's Country Report on Spain (2016/17) notes: "In July, the Supreme Court partially annulled the conviction by the High Court of Saïoa Sánchez for an act of terrorism in December 2015... Her appeal to the Supreme Court claimed that the High Court refused to investigate whether the statement of one of the defendants, Iñigo Zapirain, implicating her in the offence, had been made under duress. The Supreme Court ordered a new hearing, asking that the Istanbul Protocol be followed to assess the veracity of the statement of Iñigo Zapirain. The ruling took account of the concerns expressed by international human rights bodies about impunity and lack of thorough and effective investigations, as well as about shortcomings in the quality and accuracy of forensic investigations. See further examples: Sentence no. 45/2008 and Sentence no. 27/2010 of the Audiencia Nacional.

together in 1996 to develop standards on how to investigate and document torture effectively. This worldwide process took three years and involved more than seventy-five health, legal, and human rights experts.

The result of this process was the Istanbul Protocol, which is the first set of international standards and principles for the prompt, impartial, and effective investigation and documentation of torture and ill-treatment. The Istanbul Protocol's overarching *Principles on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (The Istanbul Principles)* were adopted by the United Nations General Assembly in 2000.

The Istanbul Protocol and its Principles have since been applied in international, regional and national courts, endorsed by the United Nations and its main political bodies, and implemented by states. For instance, the European Court of Human Rights has specifically referred to the standards provided by the Istanbul Protocol as setting the benchmark for assessing the credibility of documentary medical and mental health evidence and expert opinions.¹⁵ The European Court of Human Rights also has rejected medical reports that do not comply with the Istanbul Protocol as unreliable.¹⁶

The Istanbul Protocol provides the international standard for how a state should execute its obligation to investigate allegations of torture or other ill-treatment. It reflects both the existing obligations of states under international treaty and customary international law and sets out specific guidelines on how states should conduct effective legal and medico-legal physical and psychological investigations into allegations of torture or other ill-treatment.¹⁷ It provides a rigorous methodology for documenting physical and psychological signs of torture and therefore is used to assess whether the state has satisfied its obligation to investigate promptly, impartially, and effectively.¹⁸

The Istanbul Protocol enshrines and promotes the internationally accepted scientific, medical, and mental health forensic standards, methodology, and practices on the evaluation of torture or other ill-treatment. It guides medical and

¹⁵ European Court of Human Rights: *Salmanoğlu and Polatta v. Turkey* (Application no. 15828/03) §89; *Böke and Kandemir v. Turkey* (Application nos. 71912/01, 26968/02 and 36397/03) §48.

¹⁶ European Court of Human Rights: *Salmanoğlu and Polatta v. Turkey* (Application no. 15828/03) §§85-95.

¹⁷ Interim Report of the Special Rapporteur on Torture and other cruel, inhuman or degrading treatment or punishment, 23 September 2014, A/69/387, §23. Inter-American Court of Human Rights: *Vargas-Areco v. Paraguay* (Merits and Reparations), (26 September 2006, No. 155), §§91-94. Inter-American Commission for Human Rights: *Ana, Beatriz and Celia Gonzalez Perez v. Mexico* (Merits), (4 April 2001, Case 11.565), §§39-41.

¹⁸ European Court of Human Rights: *Salmanoğlu and Polattaş v. Turkey* (Application no. 15828/03), §79-80 and §89; *Muradova v. Azerbaijan* (Application no. 22684/05) §101. Inter-American Court for Human Rights: *Vargas-Areco v. Paraguay* (Merits and Reparations), (26 September 2006, No. 155), §§91-94.

mental health experts on how to gather relevant and reliable evidence of torture, reach accurate conclusions on the degree of consistency of allegations of torture with the medical and psychological findings, and produce high-quality medico-legal reports to inform the work of decision-making bodies. The Protocol guides trained health professionals on how to issue a relevant and reliable opinion as to the degree of consistency and inconsistency between the physical and psychological findings and an individual's claims of past torture as well as assess other relevant contributing factors.

2. Standards for psychological evaluation and findings

According to the Istanbul Protocol, "the overall goal of psychological evaluation is to assess the degree of consistency between an individual's account of torture and the psychological findings observed during the course of the evaluation."¹⁹ A mental health expert's findings on the degree of consistency of psychological evidence with an individual's allegations of torture should be based on a variety of factors. Mental health experts undertaking an Istanbul Protocol investigation not only take into account the statements made by an alleged victim of torture, but also the individual's personal biographical history, previous health records, narrative description of ill-treatment, consistency between verbal and non-verbal communication, coherence in the events described, consistency between the events described and the emotion and resonance with which they are expressed, acute symptoms, social life, and circumstances.²⁰

The Istanbul Protocol additionally directs mental health professionals to not only diagnose the mental health status of an individual alleging torture, but also to consider and discuss how each specific symptom may or may not originate from the alleged torture experience, drawing upon and explaining when certain symptoms may be content-specific to torture as well as scientifically determining the most likely origin of symptoms and disorders. For instance, in his report, Dr. Duterte discusses the individual symptoms that Ms. Sorzabal Diaz is experiencing and the likely origin of those symptoms as well as the likely cause of Ms. Sorzabal Diaz's post-traumatic stress disorder.

In order to diagnose post-traumatic stress disorder, an individual must have experienced a traumatic event that involved life-threatening experiences and produced intense fear or horror such as torture. Post-traumatic stress disorder is

¹⁹ Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (the Istanbul Protocol). 2004. HR/P/PT/8/Rev.1, §261.

²⁰ Interim Report of the Special Rapporteur on Torture and other cruel, inhuman or degrading treatment or punishment, 23 September 2014, A/69/387.

not caused by general insecurity or a general situation reflecting persecution.²¹ Moreover, contrary to the reasoning of the Court of Madrid in the matter of Ms. Sorzabal Diaz, a diagnosis of post-traumatic stress disorder does not require “that there has been a [previous] diagnosis, treatment and follow-up by a psychiatrist or clinical psychologist on an ongoing basis, as well as a psychiatric or state psychiatric report.” As discussed above, diagnosis is made based on clinical interview and observations and the clinical presentation of symptoms by an individual. The Court of Madrid’s reasoning is both circular and incorrect on this point.

In addition, it is a key principle of effective medico-legal investigation of torture and assessment of torture allegations – and an important precept – that not everyone who has been tortured develops a diagnosable mental illness.²² Not meeting the diagnostic criteria of post-traumatic stress disorder does not mean that torture was not inflicted. Moreover, as experienced by the IRCT’s rehabilitation centres across the globe, symptoms of post-traumatic stress disorder can be chronic or fluctuate over extended periods of time and be present even more than 16 years later.

3. Content of conclusions

In making a final conclusion from an Istanbul Protocol evaluation on the consistency of the physical and psychological findings with an individual’s allegations of torture, the Istanbul Protocol guides experts to assess every sequela – lesion or symptom – for consistency and inconsistency with the alleged torture event; assess the consistency and inconsistency of groups of sequela with the alleged torture event; provide an overall assessment on the consistency and inconsistency of all of findings with the alleged torture event; and then assess comprehensively findings together to conclude on their overall consistency or inconsistency with the individual’s allegations of torture.²³

While Istanbul Protocol provides that a comprehensive medico-legal report and its conclusions should include both complete physical and psychological evaluations, the absence of a comprehensive physical evaluation does not by itself undermine or suggest that a thorough psychological report and its conclusions is incorrect or invalid. A psychological report produced in accordance with the principles and standards of the Istanbul Protocol, as appears to be the case with Dr. Duterte’s

²¹ Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (the Istanbul Protocol). 2004. HR/P/PT/8/Rev.1, §253.

²² Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (the Istanbul Protocol). 2004. HR/P/PT/8/Rev.1, §236.

²³ Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (the Istanbul Protocol). 2004. HR/P/PT/8/Rev.1, §187.

report (which was conducted following the judicial request for only a psychological evaluation), should still be considered to be scientifically and medically valuable and provide legally significant evidence of the existence or lack of existence of torture and the concurrence or lack of concurrence between an individual's allegations of torture and the psychological signs of torture.

Moreover, in their evaluation process and in reaching a final conclusion, medical and mental health experts following the Istanbul Protocol also consider any signs of malingering or over-endorsement, the individual's affect and its consistency with the content of the evaluation, any contradictions, and the concordance between all of the physical and psychological findings separately and altogether. Where suspicions arise as to the veracity of allegations, experts may examine these through accepted medical and mental health methods. Where inconsistencies arise, experts are obliged to note these as well as determine whether these inconsistencies and the clinical picture suggest a false allegation of torture.²⁴

4. Reliability of medico-legal reports produced in compliance with the Istanbul Protocol

Medico-legal reports conducted in compliance with the standards and principles of the Istanbul Protocol present relevant and reliable findings on torture and therefore should be considered by decision-makers as compelling evidence on the issue of whether torture or other ill-treatment has or has not been perpetrated, including by asylum and extradition authorities in relevant proceedings.²⁵ As noted earlier, the European Court of Human Rights has specifically referred to the standards provided by the Istanbul Protocol as setting the benchmark for assessing the credibility of documentary medical and mental health evidence and expert opinions and rejected as unreliable state medical reports that do not comply with the Istanbul Protocol.²⁶

To assess the reliability of medico-legal reports produced in compliance with the Istanbul Protocol, decision-making bodies should establish whether the person providing the medico-legal report is in fact an expert.²⁷ The expert must possess certain qualifications ensuring the rendering of an informed and reasoned

²⁴ Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (the Istanbul Protocol). 2004. HR/P/PT/8/Rev.1, §105.

²⁵ Interim Report of the Special Rapporteur on Torture and other cruel, inhuman or degrading treatment or punishment, 23 September 2014, A/69/387, §52. European Court of Human Rights: *Salmanoğlu and Polatta v. Turkey* (Application no. 15828/03) §89; *Böke and Kandemir v. Turkey* (Application nos. 71912/01, 26968/02 and 36397/03) §48.

²⁶ European Court of Human Rights: *Salmanoğlu and Polatta v. Turkey* (Application no. 15828/03) §89-95; *Böke and Kandemir v. Turkey* (Application nos. 71912/01, 26968/02 and 36397/03) §48.

²⁷ Interim Report of the Special Rapporteur on Torture and other cruel, inhuman or degrading treatment or punishment, 23 September 2014, A/69/387, §49.

conclusion such as particular knowledge, skill, experience, training, or education.²⁸ Whereas Dr. Duterte is a former professor of victimology at University of Paris V Rene Descartes, conducts trainings in the field of refugee symptomology and medico-legal evaluation of torture allegations (including to the French Office of Refugees and Stateless Persons, the Refugees Appeals Commission, and the United Nations Office of the High Commissioner for Refugees), has published numerous articles and books on the psychological consequences of torture, and has personally examined more than six thousand individuals alleging torture and ill-treatment, and is generally considered a preeminent specialist in the field, he would qualify under this standard as an expert on medico-legal evaluations conducted in compliance with the Istanbul Protocol.

If the author of a medico-legal report produced following the Istanbul Protocol is accepted as an expert, the probative value of the medico-legal report should depend on the degree of certainty that the decision-making body attaches to the opinion in comparison to the existence of other reliable supporting or conflicting expert opinions.²⁹ In this case, however, we should consider that the European Court of Human Rights has found state medical reports that do not follow the Istanbul Protocol to be unreliable³⁰ and has specifically found Spain to have violated Article 3 on the prevention of torture of the European Convention on Human Rights on numerous occasions due to its failure and unwillingness to conduct thorough, effective, and impartial investigations into allegations of torture and ill-treatment.³¹

The European Asylum Support Office in its guidelines to case officers similarly instructs that, where there is a relevant medical or psychological expert report, it should be considered as “clear evidence confirming that the person concerned experienced something so traumatic, that his/her ability to remember, recall past events, keep track of the subject and give a structured account of it may be seriously hindered, even impossible.” Where Dr. Duterte is a preeminent expert in the Istanbul Protocol and the medico-legal evaluation of individuals alleging torture and his psychological medico-legal evaluation and report follows the Istanbul Protocol, absent allegations of prejudice or unprofessionalism, the French asylum and extradition authorities should consider the report of Dr. Duterte as relevant and reliable and therefore as compelling evidence on the issue of whether torture or other ill-treatment has or has not been perpetrated.

²⁸ European Court of Human Rights: Muradova v. Azerbaijan (Application no. 22684/05) §116-119.

²⁹ Interim Report of the Special Rapporteur on Torture and other cruel, inhuman or degrading treatment or punishment, 23 September 2014, A/69/387, §49.

³⁰ European Court of Human Rights: Salmanoğlu and Polatta v. Turkey (Application no. 15828/03) §85-95.

³¹ Beortegui Martinez v Spain [2016] ECHR 476 (31 May 2016), §47. See also: Beristain Ukar v Spain (Application 40351/05) (2011), §34; San Argimiro Isasa v Spain (Application 2507/07) (2010), §44-45.

5. Inconsistencies noted in testimonies and medico-legal reports

To conclude, the IRCT wishes to address the occurrence of inconsistencies and discrepancies that often arise in the testimony of victims of torture.

The European Asylum Support Office in its guidelines to case officers notes that traumatic experiences may also lead to fear and lack of trust, which could affect the amount and quality of information the applicant is willing to provide and that “the case officer should be cautious when making negative credibility findings on the basis of the applicant’s statements.”³² In addition, in the IRCT’s experience of working with torture victims, trauma resulting from torture frequently leads to mental health problems such as post-traumatic stress disorder, anxiety and depression disorders, which make it extremely difficult for the victim of torture to disclose their ill-treatment, to do so in a chronological and coherent manner, or to do so in a single interview – even in a clinical setting such as during rehabilitation counseling.

Torture victims who remain in the custody of the state, may distrust state officials and may fear reprisals, find it particularly difficult to disclose and discuss the torture events and other forms of ill-treatment inflicted upon them. In addition, because of the substantial stigma that attaches to torture victims – and especially victims of sexual assault and humiliation – they are often ashamed and further unwilling or fearful to disclose or discuss every aspect of the torture event and their experience even to the health professionals from IRCT’s member centres who are providing them counseling and other services.

Research on this specific issue in the context of asylum proceedings has found that discrepancies are common, especially (although not exclusively) when the person has post-traumatic stress disorder. One particular research study underlined the danger of concluding that asylum seekers are fabricating their histories, solely on the basis of discrepancies between interviews, and the risk that reaching such conclusions increases the number of incorrect judgments. It concluded that such inconsistencies should not be relied on as indicating a lack of credibility in an asylum claim involving a victim of past trauma.³³

In light of the scientific understanding, asylum authorities as well as international courts and regional bodies have acknowledged the need to adopt in their decision-making process this understanding of the way traumatic experiences, specifically torture and sexual assault and humiliation, and post-traumatic stress disorder may

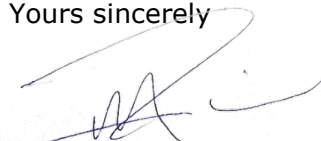
³² European Asylum Support Office (EASO), Practical Guide: Evidence Assessment (2015), §2.4.1.2.

³³ Herlihy J., Scragg P., & Turner S. (2002). Discrepancies in autobiographical memories: Implications for the assessment of asylum seekers: Repeated interviews study. *British Medical Journal*, 324 (7333): 324–327.

affect the ability or willingness of asylum applicants to disclose or discuss their torture experience, to do so in a chronological and coherent manner, or to do so in a single interview.³⁴

The IRCT remains at the disposition of the Court should there be any further questions.

Yours sincerely



James Lin
Istanbul Protocol Programme Coordinator
International Rehabilitation Council for Torture Victims

³⁴UN Committee against Torture: Ismail Alan v. Switzerland (CAT/C/16/D/21/1995); Tala v. Sweden (CAT/C/17/D/43/1996) §10.3; Kisoki v. Sweden (CAT/C/16/D/41/1996), §9.3; Falcon Rios v. Canada (CAT/C/33/D/133/1999, §8.5. Prosecutor v. Alfred Musema (Appeal Judgment), ICTR-96-13-A, §20; Prosecutor v. Kunarac, Kovac and Vukovic, IT-96-23-T and IT-96-23/1-T (Trial Judgment), §§564 and 679. Australian Government, Guidance on the Assessment of Credibility, Migration Review Tribunal, Refugee Review Tribunal, March 2012, §4.3.