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Mukamel, Maya and Cohen, Keren. 2019. Documenting torture and ill-treatment of children and adolescents: Current practices and challenges. *Torture Journal*, 29(1), pp. 141-142. ISSN 1018-8185 [Article]

## Persistent URL

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## Documenting torture and ill-treatment of children and adolescents: Current practices and challenges

Mukamel Maya\* and Cohen Keren\*

Dear editor,

In February 2018, the World Health Organisation (WHO) estimated that 1 billion children aged 2–17 years had experienced physical, sexual, or emotional violence or neglect in the previous year. They also highlighted their commitment to the Target 16.2 of the 2030 Agenda for Sustainable Development to “end abuse, exploitation, trafficking and all forms of violence against, and torture of, children”.

Evidently, torture and ill-treatment of children and young people is prevalent and presents a global issue. However, as den Otter, Smith, dela Cruz, Özkalıpci and Oral (2013) found in their systematic review of the literature on medical guidelines for the recording cases of child torture or cruel, inhuman or degrading treatment (CIDT), there does not seem to be a comprehensive guideline which incorporates all aspects of the documentation of child torture in the same way that the Istanbul Protocol (IP) does for adults. As a result of their review, they strongly recommend a “child-

specific, comprehensive guideline on the documentation of torture and CIDT in children”. This was discussed in a recent two-day expert meeting (14–15 April 2019, Tel Aviv), hosted by the Public Committee against Torture in Israel (PCATI) and the Minerva Center for Human Rights at Tel Aviv University.

Attendees came from various backgrounds and brought diverse professional experiences—from legal work relating to children in military detention, to medical assessment of children in conflict and war zones, working with refugee adolescents seeking asylum, and providing psychological therapies to refugee children. The two-day meeting identified a number of key issues.

It became clear that the lack of guidelines on how to document torture and ill-treatment in children and young people meant that practitioners often adjust the IP to be used with children and young people. However, this “adjustment” is not simple or even possible in some cases. When compared to similar work with adults, a plethora of areas were highlighted as distinctive for children and adolescents, such as: the legal and ethical frameworks within which such assessment takes place; prominence of the family within the interaction with children and young people, and the consent process; the consideration of the best interest of the child and young person within a family and community context; the communication (verbal and non-verbal) and its reliability and effectiveness; the assessment of short and long term psychological impact; and the timing of the documentation and its impact, safeguarding concerns and obligations, and more. Although practitioners and organisations have created some local practices, it was frequently noted that these

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<https://doi.org/10.7146/torture.v29i1.113917>

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were not always sufficient, especially when undertaking documentation in the context of legal proceedings.

If we are to work effectively towards achieving the WHO 2030 target to end torture and ill-treatment of children or to support litigation, advocacy, representation and care for children and young people who have survived such experiences, we must have the right tools to do so. Children and young people are fundamentally different from adults and the guidelines require a different framework to reflect this.

## Academic publishing can help in court cases.

Luis Maria de los Santos Castillo\*

Dear Editor,

I am writing to inform your readers of the outcome of a case, which was the focus of an article published in the *Torture Journal* when the case was in its preliminary stages.<sup>1</sup>

We must first revisit the events on the 30<sup>th</sup> November 2007. The Andalusian activist, Agustín Toranzo, together with another colleague, was forcibly extracted from an underground tunnel where he had chained himself to an object inside the tunnel during a protest. He was protesting against the eviction from a building that would be demolished to build luxury homes, located on Calle Antonia Sáenz in the city of Seville, called “Centro Social Ocupado y Autogestionado” or “Casas Viejas” (autonomous social centre).

On the following day, mounting public interest in the event led to a press conference taking place. In the presence of various media representatives, Toranzo detailed the torture techniques employed by the police to extract them from the tunnel. These techniques included the systematic

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<sup>1</sup> See Pérez-Sales, P., Fernández-Liria, A., Parras, M., & Engst, G. (2010). Transitory Ischemia as a form of white torture: a case description in Spain. *Torture Journal*, 20(2), 104–107. <https://doi.org/4.2010-05> [pii]