



TORTURE VICTIMS: FROM DETECTION TO PROTECTION

HISTORICAL CONTEXT, PRACTICE AND
SUGGESTIONS FOR IMPROVING THE
PROTECTION OF TORTURE VICTIMS IN GREECE

DECEMBER 2021



This advocacy essay is the product of research and experience that emerged from the work of METAdrasi's team for the Certification of Torture Victims

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Issue date: December 2021

ISBN: 978-960-9771-04-7

The original Greek text was published in Athens in December 2021 within the framework of the project "Hope and Memory: Identification and Certification of Victims of Torture", implemented under the Active Citizens Fund in Greece, by METAdrasi- Action for Migration and Migration. The translated essay was published in Athens in March 2022.

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Introduction

In Western parliamentary democracies, abuse in the form of torture or inhuman or degrading treatment has significantly decreased, but has not been eliminated. In recent decades, waves of people have left their country of origin, either as migrants or refugees, due to serious political and human rights violations, including torture. As a host country for hundreds of thousands of people over the past decade, Greece has been compelled to respond to the huge humanitarian crisis that many developing countries across the globe are currently experiencing.

In 2011, intending to continue the work of the Rehabilitation Centre for Torture Victims, METAdrasi initiated its ongoing programme for the Certification of Torture Victims, in an effort to meet the needs of members of the refugee population, who have been tortured, either in their country of origin, or during their journey towards Greece.

The purpose of this essay, is to highlight the problematic legislative provisions for the certification of torture victims through Greek public and military hospitals. In all of the countries studied, certification is not implemented by the State, but by independent specialist teams. Having received training in the identification of sequelae from torture and by closely following the Istanbul Protocol, such teams have the capability to investigate cases of people claiming to have been tortured, long after the events have taken place. A survey, carried out during and after the enforcement of the contested legislation, shows that the State is still unable to implement the procedure provided for in the law, or ensure adequate reception conditions for the vulnerable group of torture victims. On the contrary, torture victims live in inhuman and degrading conditions, which, compounded by the limited access to medical and psychological support, have a negative impact and lead to their further, secondary victimisation.¹

¹The “Reference Report on the Refugee and Migrant Issue” of the Greek National Commission for Human Rights highlights the shortcomings mentioned later in this report, see *GNCHR Reference Report on the Refugee and Migrant Issue (Part B)*, September 2020 (last accessed on the 3rd of October, 2021).



The path towards International and European regulation and protection

The practice of torture is ancient and has existed throughout human history. A well-known example is drawn from Greek mythology, in which Zeus himself tortured Prometheus for having dared to help humans, by holding him captive and having a vulture eat his liver every day. Various torture practices have been used, either as punishment (criminal treatment) or as a means of extracting information (interrogation). It was not until the Age of Enlightenment, centuries later, that philosophers developed new approaches, eschewing the use of physical violence for the above-mentioned purposes.

In his famous work *“On Crimes and Punishments”*, written in 1764, the father of modern criminal law, Cesare Beccaria, considered the practice of torture inhuman and abolishable (nowadays, it is also considered ineffective, as the tortured person is willing to admit anything, in order to stop their agony). Unfortunately, however, it took another two centuries before the generalised condemnation of torture by lawyers and philosophers was expressed in a concrete, legally usable way. Having experienced the horrors that millions of people suffered in World War II, humanity began to adopt and introduce binding legal texts at an international level, which were progressively ratified into the domestic laws of most States. More specifically, the Universal Declaration of Human Rights was the first such international legal instrument, signed in 1949, followed by the International Covenant on Civil and Political Rights (ICCPR), signed in 1966, and finally the International Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, signed in 1984. At the level of the Council of Europe, the European Convention on Human Rights signed in Rome in 1950 was followed by the European Convention for the Prevention of Torture, which came into force in 1989 and provides that any place or institution where one is detained and their liberty is deprived, is subject to monitoring by a special experts committee, namely the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT). The CPT builds on Article 3 of the European Convention on Human Rights, which provides that “No one shall be subjected to torture or to inhuman or degrading treatment or



punishment”. The CPT is not an investigative body, it is a non-judicial preventive mechanism that protects persons deprived of their liberty from torture and other forms of ill-treatment; thus, complementing the judicial work of the European Court of Human Rights. The CPT organises visits to places of detention, to assess the treatment of persons deprived of their liberty. CPT delegations have unrestricted access to sites of detention and the right to move around these sites without restriction. After each visit, the CPT sends a detailed report to the relevant Member State. To date, the CPT has published seventeen reports, and has carried out ten *ad hoc* visits, seven regular visits and two high-level meetings.²

The European Convention on Human Rights provides for inter-State application and the possibility of expulsion of a Member State from the Council of Europe in the event of non-compliance with the decisions of the European Court of Human Rights by the Committee of Ministers, as happened in the well-known “Greek case”. Greece’s withdrawal during the dictatorship was due to the violation of a number of articles of the Convention, most notably the one concerning the prohibition of torture.

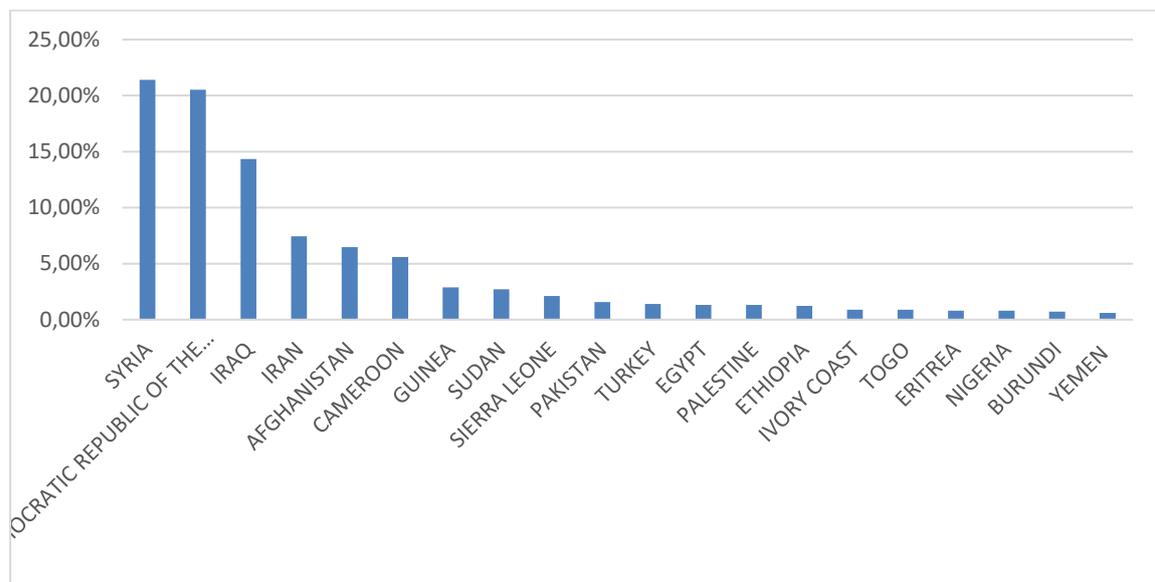
In recent decades, European countries have adopted a series of reform measures and practices stemming from the recommendations of the CPT. Such measures concern not only criminal legislation, penitentiary codes, disciplinary law for the government officials concerned, and training systems, but also administrative and organisational reforms, to favour all preventive measures. By way of example, countries, such as France and Italy, as far as medical staff serving in prisons, detention centres for aliens etc. is concerned, have stopped recruiting physicians through a Ministry of Justice procedure and have introduced the use of physicians from their National Health System instead³. Thus, the physician’s actions within his medical practice are not subject to interventions or orders of a prison or detention centre director.

²European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT), <https://www.coe.int/el/web/cpt/about-the-cpt> (last accessed on the 3rd of October, 2021).

³Crétenot M., Liaras B. (2013) *Prison Conditions In France*, pp 36-38, Rome. European Prison Observatory, available here: <http://www.prisonobservatory.org/upload/PrisonconditionsinFrance.pdf> (last accessed on the 3rd of October, 2021).

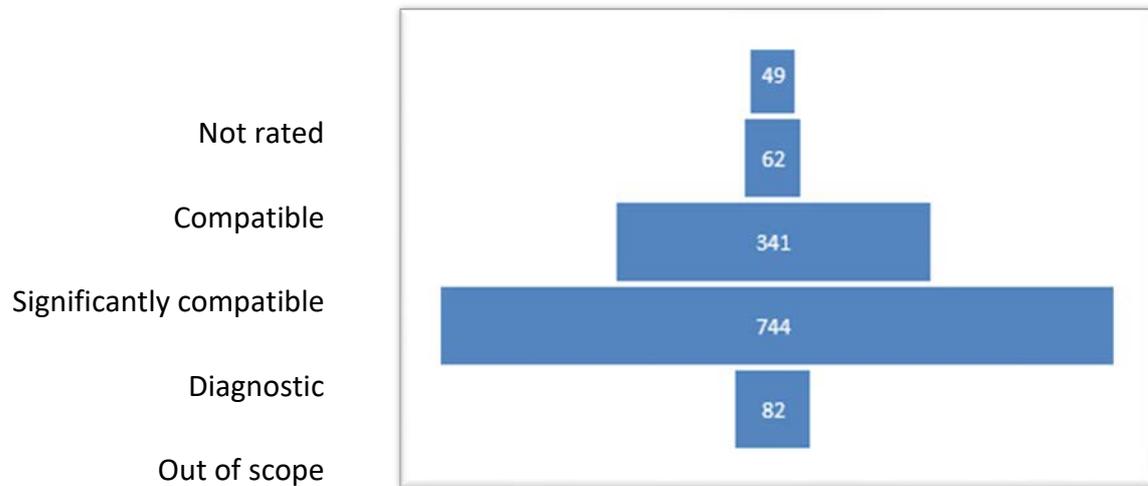
Torture victims are a particularly vulnerable group that unfortunately remains largely invisible. The reason is that the reception systems for asylum seekers are not yet organised in a proper manner whereby torture victims can be identified at an early stage amongst the general population residing in reception centres. While vulnerable groups that can be readily distinguished exist (disabled individuals, pregnant women, single-parent families, minors), torture victims go unnoticed for a number of reasons. Standard practices, such as a thorough clinical examination by the facility’s physician, a detailed interview of adequate length by the facility’s social worker and psychologist, could otherwise eliminate the expected mistrust of a torture victim towards any authority figure whilst protecting them from the cumbersome procedures of the various services. These shortcomings of the reception and asylum system lead to the rejection of applications for international protection at the first and second instance; such rejections do not take into account the fact that these applicants have been subjected to torture.

Important statistics from the Programme for Certification of Torture Victims

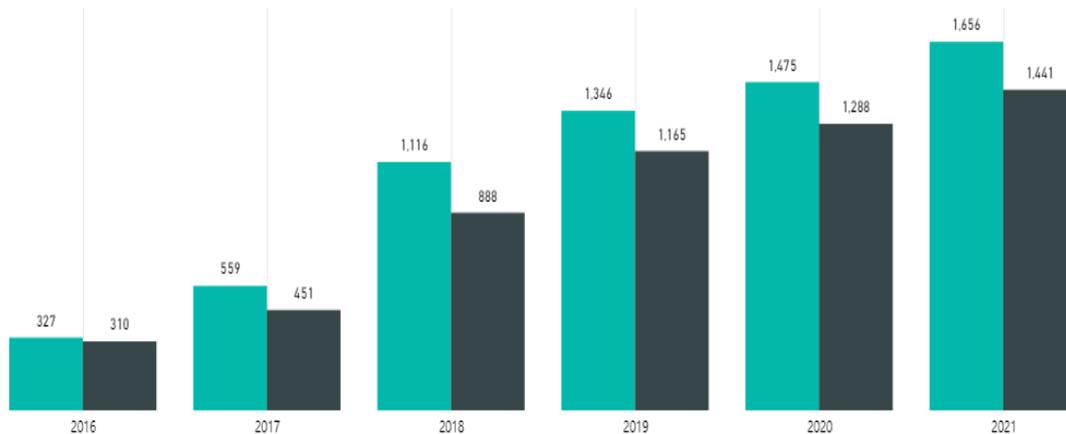


Percentage of nationals from different countries of origin that have received certification between January 2016 and September 2021.

Certification decision according to the Istanbul Protocol

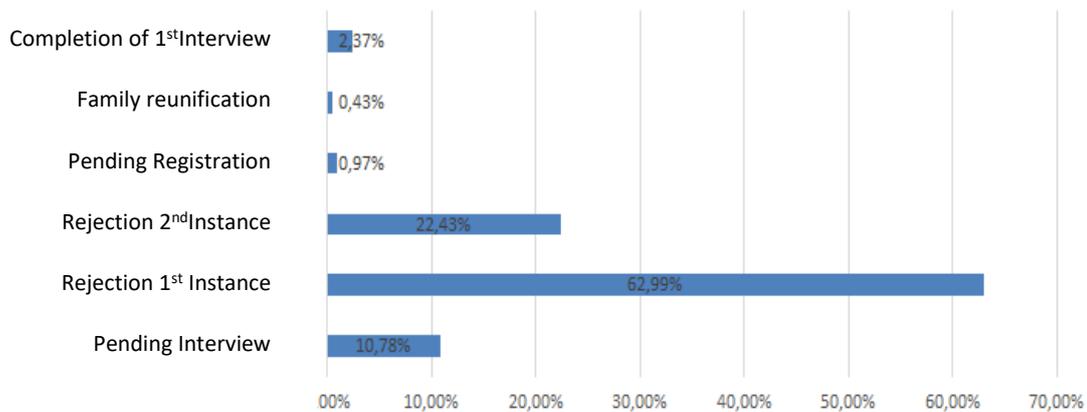


Number of cases differentiated by rating provided in the final expert report.



Per year cumulative number of cases inducted into the programme from January 2016 to September 2021 and number of cases that were finally certified. Any deviation in the numbers is due to the fact that a proportion of those who joined stopped the process, as they have the right to do at any stage, and never received any document.

% of Cases



Stage of legal process, which the persons served were upon joining the programme.

The statistics above have been drawn from METAdrasi’s Torture Victim Certification Programme over the past five years. The majority of cases examined and certified as torture victims were admitted into the process after receiving a first rejection decision, without their vulnerability having been acknowledged by the staff of the public services examining their cases. Therefore, it is evident that there are gaps and oversights in the Greek asylum system and in public services that support torture survivors; often, they are even subjected to administrative detention under inhuman and degrading conditions, contrary to the rights that the country has committed to providing them.⁴

⁴As these commitments are set out in the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, available here: <https://www.ohchr.org/EN/ProfessionalInterest/Pages/CAT.aspx>, (last accessed on the 3rd of October, 2021). See in this regard in Greek Council for Refugees, Administrative Detention in Greece: Findings from the Field (2018), available here: https://www.gcr.gr/media/k2/attachments/GCR_Ekthesi_Dioikitik_Kratisi_2019.pdf (last accessed on the 3rd of October, 2021)

Greece: Institutions and Practices

In terms of international law, Greece is one of the countries that has ratified almost all International and European Conventions related to the protection of human rights; nevertheless, problems have been observed with regard to implementation. A specific article prohibiting torture has been historically included in multiple Greek Constitutions, starting with the constitutions adopted after the Greek Revolution in accordance with the principles of the Age of Enlightenment and the values of the French Revolution. However, this constitutional imperative was only implemented by the 1975 national

constitution, after the seven-year dictatorship, with the addition of the phrase “as the law provides” in the relevant article. This was accomplished in 1984 by the serving Minister of Justice, Georgios-Alexandros Mangakis, who drafted and passed Law 1500/1984, which amended the Penal Code by adding Articles 137^A et seq.⁵ regarding the penal treatment of perpetrators responsible for torture. It should be noted that these provisions were not incorporated into the chapter of the penal code dealing with crimes against life and/or physical integrity, but into the chapter on crimes

⁵137^A P.C. (Law 4619/2019 – Government Gazette 95/A/11-6-2019), “1. A civil or military servant, whose duties involve prosecution or interrogation or investigation of criminal or disciplinary offenses or punishment implementation or custody and care of detainees, is punishable by imprisonment, if he, in the exercise of those duties, submits a person under his authority to torture for the purpose of: a) extracting a confession, testimony, information or statement, especially of denouncement or acceptance of a political or other ideology, from that person or a third person; b) punishment; c) intimidation of that person or a third person. The same punishment applies to civil or military servants who, under orders of a superior or on their own will, appropriate such duties and commit the acts described above. 2. Torture, in accordance with the previous paragraph, means any systematic infliction of intense pain or health endangering physical exhaustion or psychological pain capable of inflicting severe psychological damage, as well as any illegal use of chemicals, drugs or other natural or artificial means, aiming to bend the will of the victim. 3. Physical harm, health damage, illegal use of physical or psychological violence and any other violation of human dignity, committed by the persons and under the circumstances provided by par. 1, unless within the meaning of par. 2, is punishable by imprisonment of at least 3 years, if not punishable more severely by another provision. The following are particularly considered as violations of human dignity: a) the use of a truth detector; b) prolonged isolation; c) severe infringements of sexual dignity. 4. Acts or consequences inherent in the lawful enforcement of punishment, other legal restrictions of freedom or legal enforcement measures, do not fall under the meaning provided by this Article.”, <https://www.lawspot.gr/nomikes-plitirofories/nomothesia/n-4619-2019/arthro-137a-poinikos-kodikas-nomos-4619-2019-vasanistiria>, (last accessed on the 3rd of October, 2021).

against democracy (such as high treason and the threat against the integrity of national territory). As Mangakis states in the law's explanatory report, he wanted to highlight the importance of this crime, which is not only directed against individuals, but also of democracy and the rule of law. Similarly, at the level of international law, this crime is inalienable, is not open to any exception whatsoever (e.g., war, state of siege, etc.) and has been established as one of the few international crimes that fall within the jurisdiction of the permanent International Criminal Court at the Hague.

What has been outlined above also applies to the field of legislative provisions –in international and national law– concerning the handling (prevention and repression) of torture. Greece ratified the 1984 International Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment with the Law 1782 of 1988, and the Council of Europe Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment with the adoption of Law 1949 in 1991.⁶

Dictatorship in Greece, 1967-1974

During the dictatorship of 1967-1974 there was extensive use of torture by the police authorities and the army;⁷ as a consequence, procedures for the expulsion of Greece from the Council of Europe were initiated before the European Commission of Human Rights, on the recommendation of four council members: Denmark, the Netherlands, Norway and Sweden.⁸ Eventually this expulsion did not take place, as Greece withdrew voluntarily, so as to avoid the consequences of these violations.

⁶Ratification of the Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment, Law 1949/1991, Government Gazette 83/A/31-5-1991, available at <https://www.e-nomothesia.gr/kat-anthropina-dikaiomata/nomos-1949-1991-phek-83-a-31-5-1991.html>, (last accessed on the 3rd of October, 2021).

⁷See in this respect: Alivizatos, N. (1983). *Political institutions in crisis (1922-1974). Aspects of the Greek experience*. Themelio Publications, Athens, Greece; Arseni, K. (1975). *18, Bouboulinas St.*, Themelio Publications, Athens, Greece; Kouloglou, S. (2017). *Testimonies from the dictatorship and resistance*. Hestia Publishers & Booksellers, Athens, Greece; Mangakis, G.-A. (1974). *Letter from prison for the Europeans*. Ikaros Publishing, Athens, Greece; Haritou-Fatourou, M. (2012). *The torturer as an instrument of state power. Psychological origins*. University Studio Press, Thessaloniki, Greece.

⁸The Greek case: application no. 3321/67 – Denmark v. Greece, application no. 3322/67 – Norway v. Greece, application no. 3323/67 – Sweden v. Greece, application no. 3344/67 – Netherlands v. Greece



Towards the end of the 1970s, two trials of torture perpetrators were held⁹ (in Athens and Chalkida) and military and police officers were convicted. In the cases of a number of civilian victims of the junta, international documentation studies were carried out by Danish scientists, who established the first rehabilitation centre in Copenhagen¹⁰. These studies constituted the first in-depth scientific investigation of torture and its effects worldwide. The research conducted to link the sequelae of torture with the torture methods used was followed by a large volume of literature, that eventually led to the establishment and operation of rehabilitation centres for torture victims around the world, with the aim of detecting and documenting cases of people who have been tortured and rehabilitating victims to the extent possible. The International Rehabilitation Council for Victims of Torture, based in Copenhagen, which coordinates the work of the other rehabilitation centres and has the status of official adviser on related issues to all international organisations (UN, Council of Europe, European Union), intervenes and provides its opinion at international meetings, whenever issues relating to torture are raised.

In 1988-1989, an interdisciplinary group of experts in, founded the Medical Centre for the Rehabilitation of Torture Victims in Athens, Greece which operated for the following twenty years before being suspended due to lack of funding in 2008. One of its many activities was the coordination of a network of all the rehabilitation centres in the Balkan countries.

Report of the sub-commission, available at:

https://www.echr.coe.int/Documents/Denmark_v_Greece_I.pdf, (last accessed on the 3rd of October, 2021).

⁹Amnesty International (1977), Torture in Greece, The First Torturers' Trial 1975, available here: <https://www.amnesty.org/en/wp-content/uploads/2021/06/eur250071977eng.pdf>, (last accessed on the 3rd of October, 2021).

¹⁰Amnesty International (1977), Evidence of Torture: Studies by the Amnesty International Danish Medical Group, available here: <https://www.amnesty.org/en/wp-content/uploads/2021/06/act400041977en.pdf>, (last accessed on the 3rd of October, 2021).

The European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment: Greece

As mentioned previously, the Committee's access to any facility where persons are deprived of their liberty (prisons, detention centres, pre-removal detention centres for third party nationals and police stations) is unrestricted, so that it may carry out its work unhindered. As a result, it is the most authoritative international mechanism for monitoring the activities of Council of Europe member states aiming at the universal and absolute prohibition of torture (Article 3 of the European Convention on Human Rights¹¹). It is notable therefore, that after its monitoring visits, it concluded that Greece fails to implement the recommendations of successive reports published by the committee, and that there is serious ill-treatment of vulnerable groups of third-country nationals, including torture victims, due to inadequate and inappropriate living conditions. As a consequence, torture victims often remain invisible to the Reception and Identification services and to the Greek Asylum Service, despite the fact that the latter state service possesses specially trained officials. The CPT reports issued after two *ad-hoc* and one regular visit to Greece, highlight a number of violations in the country, as well as the respective Committee's recommendations for compliance:

→ **2018 Report:** With regard to the incidents of ill-treatment of third-country nationals observed during the 2018 visit of the CPT delegation,¹² the Committee denounces allegations of physical and psychological violence, usually originating from the police, against citizens **under detention awaiting deportation**. In one example, where the CPT was informed of an abuse case of a third-country citizen detained in the pre-removal centre in Moria (1/4/2018), the victim claimed that four police officers entered his cell and beat him, along with another detainee, because he was shouting, due to a headache. The

¹¹European Convention for the Protection of Human Rights and Fundamental Freedoms Rome, 4 November 1950, Article 3 "Prohibition of Torture", available at https://www.echr.coe.int/documents/convention_ell.pdf, (last accessed on the 3rd of October, 2021).

¹²Committee for the Prevention of Torture, Report to the Greek Government on the visit to Greece carried out by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) from 10 to 19 April 2018, Strasbourg, 19 February 2019, available here: <https://rm.coe.int/1680930c9a>, (last accessed on the 3rd of October, 2021).



examination showed that the victim had suffered abrasions and bruises during the attack against him and his cellmate, witnesses who were present at the incident described it in the same way. Another reported incident concerns an unaccompanied minor at the Orestiada Reception and Identification Centre (Fylakio), who claimed that during the evening before the delegation arrived, he was attacked by police officers who, according to his testimony, punched and kicked him allegedly in retaliation, for escaping on 9/4/2018. He was caught and sent back to prison on 10/4/2018. The investigation confirmed the facts based on eyewitness accounts.

Specific issues:

→ ***Ill-treatment of foreign nationals by the Greek authorities:*** The CPT received numerous testimonies of ill-treatment of third-country nationals in **detention centres**. It recommended that the Greek authorities be more organised, conduct investigations into such incidents and provide systematic information and training for police officers, on appropriate behaviour. It also stressed that, in order to avoid such incidents, third-country nationals in detention should be guaranteed three rights: 1) information on the legitimacy of their detention 2) access to a physician and 3) access to a lawyer. Despite the CPT's recommendation, no steps have been taken to improve detention conditions, and many detained asylum seekers claimed that they did not have access to a physician or lawyer, despite the fact that they made a relevant request, as they could not afford to pay for these services. Finally, a more lenient or alternative form of detention was proposed, in cases where there is overcrowding of third-country nationals; and it was recommended that all those in detention, especially vulnerable groups such as pregnant women and children, should have access to basic sanitary conditions and that their physical safety should be ensured.

→ **2020 Report:** the ill-treatment of migrants and refugees in detention centres was observed again in 2020¹³, noting that no significant progress was made since 2018. Many detainees claimed that they were not given the opportunity to notify a close relative regarding their detention, and several claimed that they were unable to access a lawyer or a physician. Furthermore, the fact that there are no qualified interpreters in the detention centres, makes it impossible for officials to inform and communicate with third-country detainees, and has other adverse consequences for their rights, such as consenting to documents whose contents they do not understand, or receiving incomplete information regarding their rights.

Specific issues:

- **Record-keeping:** the CPT stressed that every police station should keep the records of third-country nationals in custody, as this will facilitate police work; and proposed the use of electronic records of detainees.
- **Living conditions and protection of vulnerable groups:** the CPT emphasizes that families should be transferred to open reception centres and that their specific needs should be taken into account. Also, if women and children are to be detained, they should not be kept in the same cell with men who are not their relatives as there are numerous cases of women and children being raped or abused by third country nationals detained in the same cell. Finally, with regard to unaccompanied minors, the CPT recommended that they be transferred to special centres for their protection, so that they receive proper care and treatment.
- **Health care:** the Committee recommended increasing medical staff, in order to respond to cases of people who are either sick, or have other vulnerabilities. In addition, it advised that detention centres should provide medical staff and

¹³Committee for the Prevention of Torture, Report to the Greek Government on the visit to Greece carried out by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) from 13 to 17 March 2020, Strasbourg, 19 November 2020, available here: <https://rm.coe.int/1680a06a86> (last accessed on the 3rd of October, 2021).



third-country nationals with specially qualified interpreters, in order to facilitate a more accurate diagnosis, as well as information regarding their health status. Finally, it reiterated the need for regular visits to detention centres by both external physicians and nursing personnel, as well as for full reporting to the medical officer in charge of the centres.

Key findings of the Committee for the Prevention of Torture and the UN Subcommittee on Prevention of Torture (SPT) and the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT).

A common feature of the observations and reports of both International Organizations¹⁴ is that legislative and institutional action in Greece is not followed by serious efforts to implement the rules. Such efforts would, for example, include investigation of the many incidents of police violence; disciplinary and penal treatment thereof; specialized training of all state officials who are found to violate the law; specialized training of judges and prosecutors, etc...

It is disappointing that over a number of years and after a series of visits and reports by the CPT, the above characteristics remain unchanged; the Committee therefore strongly criticised the lack of cooperation by the Greek authorities. To date, the Committee made a public statement regarding Greece once, highlighting the problems that were repeatedly encountered and the difficulty in cooperation with the Greek government. It is worth noting that the CPT has made a total of eight public statements so far, in order to express its discomfort due to poor cooperation and non-compliance with its recommendations. These included three cases for Russia on the Chechnya issue, two for Turkey, one for Belgium, one for Bulgaria and one for Greece.¹⁵

¹⁴For the Committee's reports and the periodic review of Greece, see https://tbinternet.ohchr.org/_layouts/15/TreatyBodyExternal/Countries.aspx?CountryCode=GRC&Lang=EN, (last accessed on the 3rd of October, 2021).

¹⁵<https://rm.coe.int/1680697a52>; Public statement concerning the Chechen Republic of the Russian Federation (made on 13 March 2007), available here: <https://rm.coe.int/1680697bd0>; Public



Istanbul Protocol: legal nature and reason for adoption

The protocol entitled ***“Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment”***, internationally known as the Istanbul Protocol, was adopted in 1999 by an assembly of experts from all over the world, as well as representatives of international organisations, who collaborated in drafting it. In essence, it is the approved manual of the United Nations, the Council of Europe, and the European Union, for the detection and documentation of torture by a trained interdisciplinary team. According to the protocol, the certificate issued by the expert team describes the history of the torture; the medical opinion ascribing the physical sequelae (scars and other marks) as the result of specific methods of torture used; the written assessment of a psychologist on the psychological consequences of the torture; and, finally, the legal opinion concluding the findings of the medico-legal report. The latter -based on the history and the medical and psychological expert opinion = concludes whether the case in question falls within the definition of torture.

The Istanbul Protocol was originally intended to be used by International Courts, such as the Council of Europe’s Human Rights Court in Strasbourg. The need first arose in Turkey, where Turkish Courts systematically failed to recognise that many applicants had been tortured, despite the information provided by the Turkish Torture Victim Rehabilitation Centres, under the independent non-governmental organisation “Human Rights Foundation”.¹⁶ The physicians who established the rehabilitation

statement on Turkey (adopted on 15 December 1992), available here:

<https://rm.coe.int/16806981a6>; Public statement on Turkey (issued on 6 December 1996), available here: <https://rm.coe.int/16806981d8>; Public statement concerning Belgium, 13 July 2017, available here: <https://rm.coe.int/pdf%20/1680731786>; Public statement on Bulgaria, 26 March 2015, available here:

<https://rm.coe.int/CoERMPublicCommonSearchServices/DisplayDCTMContent?documentId=09000016806940ef>; Public statement concerning Greece, 15 March 2011, available here: <https://rm.coe.int/CoERMPublicCommonSearchServices/DisplayDCTMContent?documentId=0900001680696608>, (last accessed on the 3rd of October, 2021).

¹⁶Human Rights Foundation of Turkey (HRFT), see <https://www.hhri.org/organisation/human-rights-foundation-of-turkey-hrft/> (last accessed on the 3rd of October, 2021).



centres collaborated with international experts, so that the method of documentation could stand up before International Courts.¹⁷

It is remarkable that the European Court of Human Rights has issued some 400 convictions against Turkey for the use of torture. In recent years, Turkey has been eager to seek settlements by paying compensation to the victims, in order to prevent the trials from proceeding and avoid the increase in convictions.

It was only later that the use of the Istanbul Protocol in asylum cases began, especially where documentation of torture was particularly problematic, or where asylum authorities and first reception mechanisms were ill-equipped to handle the issues of these less-visible, *prima facie* vulnerable individuals.

The interaction of three different disciplines –medicine, law, and psychology– and the understanding of the vernacular and methods used by each discipline, is new to the field of human rights protection, introducing new ways of approaching and properly understanding these rights.

Principles of the Protocol

The Istanbul Protocol is governed by a number of key principles. The first principle is that the experts who comprise the specialised certification team belong to different disciplines (a lawyer, a medical doctor and a psychologist or psychiatrist, with input from a social worker) and are specifically trained to work together towards the common goal of documenting the cases they are investigating as alleged torture victims. The second key principle is the independence of the certification team from state mechanisms, aimed at achieving an impartial judgement and remaining committed to the duty of scientific accuracy and truth. The interdisciplinary team should obviously not be influenced by either state agencies or other organisations aimed at identifying the status of torture victims. These two principles are fundamental to the implementation of the Istanbul Protocol, which explains why no

¹⁷It should be noted that, through the mediation of the International Council for the Rehabilitation of Victims of Torture, services with a similar scientific composition from other countries were used by the *ad hoc* International Tribunals (in The Hague) for former Yugoslavia and Rwanda.



state worldwide has appointed state-dependent scientific teams for the certification of torture victims.

Why victims remain silent

Although research shows that a very large proportion of the population fleeing their country and seeking protection are torture victims, only a fraction is “visible” and supported by state services upon arrival. According to international surveys by the International Council for the Rehabilitation of Victims of Torture, victims find it difficult to speak out regarding their experiences for a number of reasons:

1. Shame or guilt at having “spoken out” when being subjected to torture and having revealed information about people who were subsequently arrested, tortured or even killed. Victims are not in a position to understand that their tormentors will succeed in extracting the confession they want, using any possible means.
2. In many cases, victims are convinced by their own torturers that no-one will believe or trust them, even if they reveal the truth to the authorities, so they never feel safe, no matter how far away they are from the site of torture.
3. The pervasive terror and distrust towards their own community, leads them to hide the truth about what happened to them.
4. They usually leave family members behind; they fear the consequences these family members may suffer, if they reveal the truth about what happened to them.
5. Sequelae of torture include nerve damage, which also affects the victims’ cognitive abilities. This leads to difficulty in making decisions and



communicating; therefore, the beneficiary's ability to comprehend the advantage of being able to share these experiences is reduced¹⁸.

The abovementioned reasons are indicative of why many torture victims may never reveal their experiences to reception authorities; or, they may possibly do so several years later, when they feel safe in the country that provided them with international protection. This also answers the question asked by members of various state services: *"Why did they speak out now, so many years later?"*. Indicative examples can be found in Greece too where torture victims of the military junta were never willing to participate in later investigative and restorative procedures which occurred decades later in the 1990s demonstrating that they never wanted to talk about their experience.

The difference between certification and identification

An additional issue is the identification and recognition of torture victims as a particularly vulnerable group, in the context of the Common European Asylum System in accordance with Directive 2013/33/EU on the reception conditions for applicants of international protection (Reception Conditions Directive) and the Asylum Procedures Directive 2013/32/EU.

The vulnerability assessment provided for by the Reception Conditions Directive need not take the form of an administrative procedure. This is explicitly stated in article 22, paragraph 2, of Directive 2013/33/EU. Regardless of the Greek rendering of the term "assessment", the English text has the status of an original and prevails over any dispute (article 22, paragraph 3 of Directive 2013/33/EU).

Article 25 of Directive 2013/33/EU, which concerns victims of torture and violence, does not mention anything in relation to how "detection" of such cases in the asylum seeker population is achieved. It only mentions the obligation of the reception authorities to provide the necessary health services, including mental health services. This, of course, requires that an initial identification-recognition of this vulnerable

¹⁸These observations come from our scientific team's many years of experience working with refugees who are survivors of torture.



group has taken place. The second paragraph of article 25 concerns specialised initial and ongoing training on the detection of torture victims, rape and other serious acts of violence within the reception services, so that they can carry out the identification referred to in the Directive. Nowhere in the Directive is the term “certification” mentioned.

As a general principle, EU law provides that the transposition of any Directive into national law may include further provisions, but only if these provisions do not impose restrictions and obstacles to the application of the basic Directive rules. In the case of the wording of Article 61 of Law 4636/2019, the use of the term “certification”, in the manner it has been used, constitutes a substantial bureaucratic restriction on the freedom of assessment provided for in article 22 of Directive 2013/33/EU, i.e., it is a breach of European Union law.

Certification is a subsequent procedure, that may be required in borderline or controversial cases. Worldwide, this process is carried out by specialised scientific teams that have the requisite expertise and the relevant knowledge of scientific investigative methods. The only method accepted by the United Nations, the Council of Europe, the International Courts of Justice and any other relevant international organisation is defined by the Istanbul Protocol. This is the United Nations’ training standard in the following order: assessment of individuals allegedly submitted to torture and ill-treatment; investigation of cases of alleged torture; and transmission of the findings to the judiciary or any other body investigating allegations of torture. The Istanbul Protocol dictates a very specific methodology for torture and ill-treatment certification, by an independent interdisciplinary investigation and certification team. Therefore, what is found to be especially problematic is how such a procedure can possibly be conducted under the present conditions in Greek reception centres, hospitals and other state institutions mentioned in the Greek law, and in the absence of the fundamental element of independence and impartiality, required by international courts of justice when judging such cases.

It is worth noting that an extensive survey conducted by METAdrasi’s team found the unfortunately foreseeable conclusion that no hospital across Greece is able to conduct

the research required by article 61 of Law 4636/2019¹⁹ because the requirements set by the Istanbul Protocol are not met. This is due to the fact that teams of specialists who have received specialized training are not available in hospitals; and the vital element of providing an independent and impartial scientific opinion is also absent. Meanwhile, the inclusion of military hospitals in this law reveals complete ignorance of the fact that the victim may have been subjected to torture in an environment of uniformed perpetrators. It is highly probable that re-exposing a victim to a similar environment both retraumatize victims but also significantly impacts the reliability of any administrative procedure conducted by the military hospital.

The survey was conducted in 89 hospitals across Greece, both by telephone and by e-mail, to investigate whether hospitals are implementing the law on the certification of torture in the refugee population.

In May 2021 a question was sent to public hospitals in Greece, via e-mail, on whether in application of the law (article 25 of Directive 2013/33/EU) they certify torture victims, rape or other serious acts of violence; such victims are certified by a medical opinion issued by a public hospital, military hospital, or appropriately trained physicians of the public sector providing healthcare services, and receive the necessary treatment and rehabilitation for the consequences of torture. The question was sent to 89 hospitals in Greece, of which 7 provided an official response.

Four of these hospitals replied that they apply the law in force, but that there are no interdisciplinary personnel members to implement it and provide certification to the beneficiaries. Three hospitals replied that no such provision exists.

In conclusion, public hospitals in the country do not provide certification to torture victims, rape or other serious acts of violence, either due to the lack of appropriate structures, or to the lack of a certified interdisciplinary team to provide such services.

¹⁹Victims of torture and violence: “1. *Victims of torture, rape or other serious acts of violence shall be certified by a medical opinion issued by a public hospital, military hospital, or appropriately trained physicians of the public sector providing healthcare services, including forensic pathologists; they shall receive the necessary treatment for the damage caused, in particular access to appropriate medical and psychological treatment or care.* 2. *Staff of bodies dealing with cases of victims of torture, rape or other serious acts of violence shall have and continue to receive appropriate training on the victims’ needs; they shall have an obligation of confidentiality with regards to the personal data of which they become aware in the course of or in connection with the performance of their duties.*”, see <https://www.lawspot.gr/nomikes-plirofories/nomothesia/n-4636-2019/arthro-61-nomos-4636-2019-arthro-25-odigias-2013-33-ee> (last accessed on the 3rd of October, 2021).



A brief overview of the situation in other European countries

A reference to the practices of several European countries reveals their attitudes and legislative framework on supporting torture victims:

United Kingdom

In the in-depth study of the UK asylum system operation, carried out by the Asylum Information Database (AIDA), reference is made to cases of identification and treatment of vulnerable groups, torture victims in particular, highlighting the all-important issue of their detention and security. Although there is no legal provision stipulating that it is mandatory for asylum seekers to submit a medical report to the UK Asylum Service, some non-governmental organisations such as “The Helen Bamber Foundation”²⁰ and “Freedom from Torture”²¹ produce medico-legal reports using the Istanbul Protocol, which can influence the process in favour of the applicant, as they are considered to be respectable and credible. Their work contributes so significantly to the credibility of the applicant, that the courts themselves, having evaluated the expertise of those who prepare the reports, warn judges to take into account the evidence resulting from such investigations. Cases are often heard in *Migration Tribunals*²² by judges with specialised knowledge, who invite expert physicians and psychologists from these NGOs to testify as expert witnesses, citing all the scientific evidence in favour of identifying the applicants as torture victims. There are, however, some exceptions to this practice, as sometimes no weight is given to the medico-legal reports, but rather to the credibility of the applicant’s claims according to the judges’ ruling. It is important to emphasize the value of these scientific documents and the experts who prepare them; if a medico-legal report is pending, then the issuance of

²⁰Helen Bamber Foundation, see <https://www.helenbamber.org/> (last accessed on the 3rd of October, 2021).

²¹Freedom From Torture, see <https://www.freedomfromtorture.org/> (last accessed on the 3rd of October, 2021).

²²Courts specialised in dealing with immigration and refugee law cases.



the decision is postponed, until the case workers receive this document, in order to help them recognise the vulnerability of the cases they are handling.²³

France

Torture victims are included in the vulnerable group categories, and their specific reception and protection needs are legally recognised. The French Service for Refugees and Integration, which is responsible for identifying vulnerable groups, has introduced a specific procedure for their identification.²⁴ For torture victims, there are specific procedural safeguards that recognise the sequelae of an applicant who has been subjected to torture. Furthermore, support for torture victims is provided during the interview procedure itself. In particular, a security officer may be present during the interview and the applicant may request a trained official to conduct the interview; also, a qualified psychologist may be present, particularly in cases when the applicant has serious mental conditions. There is also a legal requirement for medical reports proving the severity of the torture, which are sometimes used to assess the applicant. The cost of such medical reports is covered by the state and medical certification is granted, which is of great importance in the asylum procedure. In France, a number of civil society organisations, such as “Osiris” in Marseille,²⁵ undertake counselling support for torture victims; however, they are not adequate in meeting the victims’ needs.²⁶

The Netherlands

In the Netherlands, a comprehensive system for identifying different categories of vulnerable or traumatised persons exists, including several stages for their identification. The process starts with a medical examination by the independent

²³Asylum Information Database (AIDA) Country Report: United Kingdom, 2019 Update, available here: https://asylumineurope.org/wp-content/uploads/2020/03/report-download_aida_uk_2019update.pdf (last accessed on the 3rd of October, 2021).

²⁴Asylum Information Database (AIDA) Country Report: France, 2019 Update, available here: https://asylumineurope.org/wp-content/uploads/2020/04/report-download_aida_fr_2019update.pdf, (last accessed on the 3rd of October, 2021).

²⁵See <https://www.centreosiris.org/accueil> (last accessed on the 3rd of October, 2021).

²⁶ibid



Forensisch Medische Maatschappij Utrecht, which first examines whether asylum seekers have the physical and psychological capacity to take part in the interview. As the first phase does not examine the applicant's general vulnerability, there is a second phase carried out by the Immigration and Naturalisation Service (IND) to assess this aspect. The Immigration and Naturalisation Service possesses specialised personnel, who identify the type of vulnerability (hence torture) based on a list, which categorises vulnerability into physical and psychological vulnerability.²⁷

Based on broader research, the following findings emerge:

1. There is still no state mechanism in any country for certifying torture victims in accordance with the principles and methods indicated by the international Istanbul Protocol, i.e., the international manual adopted by the United Nations Human Rights Committee, which follows the two basic principles elaborated upon above.
2. In countries where the need to identify vulnerable groups as part of the asylum process (or even earlier, during the first reception) has been recognised, some state officials incompletely and ineffectively attempt to identify torture victims, admittedly the most difficult to distinguish among vulnerable asylum seeker groups. Even in cases where physicians or other health professionals participate in the identification process, it is evident that neither their training is specialised and adequate, nor the methodology used corresponds to the way the specialised team should operate, as required in order to implement the Istanbul Protocol. It is observed on an international scale that specialized non-governmental organizations such as the rehabilitation centres for victims of torture (which are independent entities) continue to play a decisive role in the identification of torture victims and the certificates they issue have a particularly strong influence on the process of granting international protection. In many cases they accelerate this process considerably, because

²⁷Asylum Information Database (AIDA) Country Report: Netherlands, 2019 Update, available here: https://asylumineurope.org/wp-content/uploads/2020/04/report-download_aida_nl_2019update.pdf, (last accessed on the 3rd of October, 2021).



the proof of torture is a very important element that proves persecution of the applicant. In some countries, the intervention of a rehabilitation centre for victims of torture, which issues a torture certificate, may decelerate or accelerate the asylum process, so that the applicant is ready to face the resulting mental strain. An example is given by the legislation of the USA, which includes a provision to this effect.²⁸

Concluding remarks and recommendations

- A clear distinction emerges between the role of State authorities in the identification-recognition process of asylum seeker vulnerability and the role of independent interdisciplinary teams, which are called upon to investigate and certify possible torture victim cases by applying the Istanbul Protocol principles. In this context, **impartiality** is a key feature and objective of the Protocol. It therefore follows that **independence** is the core characteristic of the specialized scientific teams that carry out this work reliably. It should be emphasised that the Istanbul Protocol's certificate is not a document of advocacy in favour of the applicant, but a report subject to the duty of scientific accuracy, truthfulness and impartiality.²⁹ In addition, given that state mechanisms are inadequate, resorting to the assistance of specialised NGOs, capable of composing medico-legal reports on the basis of the Istanbul Protocol is an absolute necessity. Therefore, it is obvious that arguments in

²⁸The 1994 specialized law is called the "Torture Victims Relief Act" and was adopted in an inter-party way by Congress through the actions of Edward Kennedy, who adopted the request of 60 institutions (amongst them rehabilitation centres and other non-governmental organizations).

²⁹Understandably, lawyers and organisations helping asylum seekers may lobby the independent panel to issue the certificate. Nevertheless, this cannot and should not be done for charitable reasons, because the validity of the procedure is at stake; all experts in Greece and abroad are very careful on this matter.



favour of the independence of the competent bodies from any state structure, as required by the Istanbul Protocol, are so far the only sufficient condition to ensure independence, impartiality and scientific accuracy in the torture certification mechanism. The contribution of such panels is an indispensable component of the asylum process as a whole, in order to achieve compliance with the provisions of international and EU law, which require appropriate treatment of this particularly vulnerable group of asylum seekers.

- The abovementioned observations lead to the conclusion that the wording of Law 4636/2019 does not meet the requirements of the two EU Directives, and constitutes an erroneous transposition of them into Greek law. Therefore, the law should be amended in the following ways:
 - a) The term “certification” should be replaced by the term “identification-recognition”
 - b) Military hospitals must cease to operate as the competent authority to recognise/certify torture victims. Instead, independent committees which implement the requirements and conditions set by the Istanbul Protocol in an appropriate manner, should operate to this end and be adequately supported in order to achieve their objectives

References

International Literature

- Babassika, I. (2010). Identifying survivors of torture: A guide for training asylum authorities' staff and health professionals working with asylum seekers and refugees. European Union Civil Protection and Humanitarian Aid.
- Cohen, J. (2001). Questions of Credibility: Omissions, Discrepancies and Errors of Recall in the Testimony of Asylum Seekers. *International Journal of Refugee Law*, 13(3), 293–309 (doi:10.1093/ijrl/13.3.293).
- Crétenot M., Liaras B. (2013). Prison Conditions in France. Rome: European Prison Observatory. Online access: <http://www.prisonobservatory.org/upload/PrisonconditionsinFrance.pdf>
- Delbos, L. (2019). Country Report: France. In ECRE (Ed.). The Asylum Information Database (AIDA). Online access: https://asylumineurope.org/wp-content/uploads/2020/04/report-download_aida_fr_2019update.pdf
- Dennis, J. (2019). Country Report: United Kingdom. In ECRE (Ed.). The Asylum Information Database (AIDA). Online access: https://asylumineurope.org/wp-content/uploads/2020/03/report-download_aida_uk_2019update.pdf
- Kampen, A., Pinxter, A., Weijmans, E., Zantvoort, M., Bothof, M., Hooijmans, L., Pijnenburg, S., & Klaassen, W. (2019). Country Report: Netherlands. In ECRE (Ed.). The Asylum Information Database (AIDA). Online access: https://asylumineurope.org/wp-content/uploads/2020/04/report-download_aida_nl_2019update.pdf

Greek Literature

- Alivizatos, N. (1983). Political institutions in crisis (1922-1974). Aspects of the Greek experience. Themelio Publications, Athens, Greece.
- Arseni, K. (1975). 18, Bouboulinas St., Themelio Publications, Athens, Greece.
- Greek National Commission for Human Rights (September 2020). Reference Report on the Refugee and Migrant Issue (Part B). Online access: https://www.nchr.gr/images/pdf/apofaseis/prosfuges_metanastes/Ekthesi_Anaforas_Prosfugiko_el_compressed.pdf
- Greek Council for Refugees (2018). Administrative detention in Greece: Findings from the field (2018). Online Access: https://www.gcr.gr/media/k2/attachments/GCR_Ekthesi_Dioikitik_Kratisi_2019.pdf
- Kouloglou, S. (2017). Testimonies from the dictatorship and resistance. Hestia Publishers & Booksellers, Athens, Greece.
- Mangakis, G.-A. (1974). Letter from prison for the Europeans. Ikaros Publishing, Athens, Greece
- Haritou-Fatourou, M. (2012). The torturer as an instrument of state power. Psychological origins. University Studio Press, Thessaloniki, Greece. University Studio Press, Thessaloniki, Greece.

Legislative Texts - Prevention Mechanisms - Legal acts and related documents

- United Nations Human Rights, Office of The High Commissioner (1984). Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment. Online access: <https://www.ohchr.org/EN/ProfessionalInterest/Pages/CAT.aspx>



- Law 1949/1991, Government Gazette 83/A/31-5-199, Ratification of the Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment. Online access: <https://www.e-nomothesia.gr/kat-anthropina-dikaiomata/nomos-1949-1991-phek-83-a-31-5-1991.html>
- United Nations Human Rights, Office of The High Commissioner (2002). *Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment*. Online access: <https://www.ohchr.org/EN/ProfessionalInterest/Pages/OPCAT.aspx>
- United Nations Human Rights, Office of The High Commissioner, Subcommittee on Prevention of Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (“SPT”). Online access: <https://www.ohchr.org/EN/HRBodies/OPCAT/Pages/OPCATIntro.aspx>
- Istanbul Protocol, (2004). Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, United Nations New York and Geneva. Online access: <https://www.ohchr.org/documents/publications/training8rev1en.pdf>
- Council of Europe (2002). European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment. Online access: <https://rm.coe.int/16806dbaa3>
- Council Of Europe, European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT). Online access: <https://www.coe.int/en/web/cpt>
- Council of Europe: Committee for the Prevention of Torture (1 June 2018). Preliminary observations made by the delegation of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) which visited Greece from 10 to 19 April 2018, CPT/Inf (2018) 20. Online access: <https://rm.coe.int/1680930c9a>
- Council of Europe: Committee for the Prevention of Torture (10 July 2011). Public statement concerning the Chechen Republic of the Russian Federation: European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT), (made on 10 July 2001), CPT/Inf (2001) 15. Online access: <https://rm.coe.int/1680697a50>
- Council of Europe: Committee for the Prevention of Torture (10 July 2003). Public statement concerning the Chechen Republic of the Russian Federation: European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT), (made on 10 July 2003), CPT/Inf (2003) 33. Online access: <https://rm.coe.int/1680697a52>
- Council of Europe: Committee for the Prevention of Torture (13 July 2017). Public statement concerning Belgium: European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT), (made on 13 July 2017), CPT/Inf (2017) 18. Online access: <https://rm.coe.int/pdf%20/1680731786>
- Council of Europe: Committee for the Prevention of Torture (13 March 2007). Public statement concerning the Chechen Republic of the Russian Federation: European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT), (made on 13 March 2007), CPT/Inf (2007) 17. Online access: <https://rm.coe.int/1680697bd0>
- Council of Europe: Committee for the Prevention of Torture (15 December 1992). Public statement on Turkey: European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) - adopted on 15 December 1992, CPT/Inf (93) 1. Online access: <https://rm.coe.int/16806981a6>
- Council of Europe: Committee for the Prevention of Torture (15 March 2011), Public statement concerning Greece: European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT), (made on 15 March 2011), CPT/Inf (2011) 10. Online access: <https://rm.coe.int/CoERMPublicCommonSearchServices/DisplayDCTMContent?documentId=0900001680696608>



- Council of Europe: Committee for the Prevention of Torture (19 November 2020). Preliminary observations made by the delegation of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) which visited Greece from 13 to 17 March 2020, CPT/Inf (2020) 35. Online access: <https://rm.coe.int/1680a06a86>
- Council of Europe: Committee for the Prevention of Torture (26 March 2015), Public statement concerning Bulgaria: European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT), (made on 26 March 2015), CPT/Inf (2015) 17. Online access: <https://rm.coe.int/CoERMPublicCommonSearchServices/DisplayDCTMContent?documentId=09000016806940ef>
- Council of Europe: Committee for the Prevention of Torture (6 December 1996). Public statement on Turkey: European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) (issued on 6 December 1996), CPT/Inf (96) 34. Online access: <https://rm.coe.int/16806981d8>
- Council of Europe (1950). European Convention for the Protection of Human Rights and Fundamental Freedoms. Online access: https://www.echr.coe.int/documents/convention_ell.pdf
- Amnesty International (1977), Torture in Greece, The First Torturers' Trial 1975, available here: <https://www.amnesty.org/en/wp-content/uploads/2021/06/eur250071977eng.pdf> (last accessed on the 3rd of October, 2021).
- Amnesty International (1977), Evidence of Torture: Studies by the Amnesty International Danish Medical Group, available here: <https://www.amnesty.org/en/wp-content/uploads/2021/06/act400041977en.pdf> (last accessed on the 3rd of October, 2021).

Case law

- The Greek case: application no. 3321/67-Denmark v. Greece, application no. 3322/67-Norway v. Greece, application no. 3323/67-Sweden v. Greece, application no. 3344/67-Netherlands v. Greece: report of the commission. Online access: [Denmark v. Greece \(I\) \(coe.int\)](#)

Websites

- European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT). Online access: <https://www.coe.int/el/web/cpt/about-the-cpt>
- United Nations Human Rights Treaty Bodies: UN Treaty body database: Online access: https://tbinternet.ohchr.org/_layouts/15/TreatyBodyExternal/Countries.aspx?CountryCode=GRC&Lang=EN

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The project "Hope and Memory: Identification and Certification of Victims of Torture" is being implemented under the Active citizens fund in Greece by METAdrasi – Action for Migration and Development

The Active citizens fund in Greece is supported through a € 13.5 m grant from Iceland, Liechtenstein and Norway as part of the EEA Grants 2014 – 2021. The programme aims to develop the sustainability and capacity of the civil society sector in Greece, and to strengthen its role in promoting and safeguarding democratic procedures, active citizenship and human rights. The Fund Operator for the Active citizens fund in Greece is Bodossaki Foundation in consortium with SolidarityNow.

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The activity was formerly supported by the UNHCR, the Directorate-General's Civil Protection & Humanitarian Aid Operations Department (DG-ECHO), the United Nations Voluntary Fund for Victims of Torture, and Fondation ProVictimis.