

ANNUAL REPORT 2009



Međunarodna mreža pomoći
International Aid Network

Comprehensive rehabilitation was provided by IAN CRTV in this report period. It included psychotherapy and counselling, medical treatment, legal assistance and psychosocial rehabilitation.

Summary of the achieved results in the 2009:

- **140 beneficiaries** – torture victims and members of their families **received counselling and psychotherapy** in the Centre through 231 interventions
- **90 beneficiaries received psychological assistance** during visits of mobile team at the territory of Serbia, through 139 interventions. Of that number, 29 beneficiaries were medically assisted.
- **323 beneficiaries were medically assisted** during the visit of mobile team **at the territory of Bosnia and Herzegovina**, through 757 interventions. Of that number, 220 beneficiaries were psychologically assisted, through 295 interventions.
- **118 beneficiaries received medical examination and treatment** in the medical practice through 360 interventions
- **146 beneficiaries received legal assistance**
- **73 beneficiaries attended the psychosocial rehabilitation program** - education courses in computer skills, English language, social skills and entrepreneurship
- In addition, 39 beneficiaries who are not torture victims addressed the Centre and they received informational assistance, referral or counselling. 20 beneficiaries at the territory of Serbia and 64 beneficiaries at the territory of BiH addressed IAN mobile team for assistance during the field work. They received psychological counseling and medical assistance since they were socially vulnerable and with serious health problems.

a) Psychotherapeutic assistance

Potential beneficiaries have been approaching IAN CRTV mostly thanks to collaboration with the associations of ex-detainees and other NGOs dealing with similar issues (e.g. providing legal assistance to torture victims, dealing with refugee issues). Majority of the new clients who come to our Centre have been referred by other clients who already received some of our services, which provides a valuable information and the way of evaluation of our services.

Psychotherapist is the first who admits all clients referred to IAN. Through direct initial contact (in the Centre or at the field/through mobile team activities) or by SOS phone line, psychologists conduct brief needs assessment and inform clients about services that they can get in IAN CRTV as well as refer them to other colleagues in the CRTV due to further examination/assessment and/or treatment. Also, clients have been occasionally referred to other institutions/organizations (both governmental and NGOs) which can provide assistance beyond IAN expertise. Usual next step after the initial contact with a psychologist is thorough psychological assessment and referral to a psychiatrist for the first psychiatric interview.

Psychotherapy for torture survivors and members of their families is professional, easily accessible and trauma oriented. Every client receives detailed information about the psychotherapeutic process and principles, about his/her rights and also his/her obligations in the process in order for the psychotherapy to be successful.

First clinical/psychiatric interview includes psychiatric assessment, establishment of diagnosis, medical report and proposal for further treatment and referrals.

Psychiatric treatment including pharmacotherapy (basic anxiolytic, antidepressive, and antipsychotic therapy) has been provided to the beneficiaries. Psychiatric assistance has been supported with medicaments, which present a very important addition to the treatment.

Supportive counselling – By using emphatic listening, having non-judgmental, supportive and open attitude toward clients, counsellors try to establish positive relationship with them in order to help them explore and accept their traumatic experiences and hard emotions related to these events and to discover choices they have. Encouraging them, defining/clarifying their psychological disturbances as “normal reaction to an abnormal situation” and emphasizing clients’ achievements and strengths, the counsellors are trying to help victims to overcome traumatic experience, regain self-esteem and sense of control over their lives.

Individual psychotherapy:

- Psychoanalytically oriented psychotherapy (in a stable setting, by using empathic listening, analytical thinking and understanding and by providing emotional corrective experience, therapists are trying to help clients to get new insights about trauma and themselves and to continue living in spite of traumatic past). One of the aims of the psychotherapy is to assist clients to understand their problem through clarifying the direct relationship between the state they are in and the stressful events in their lives, which the clients usually do not perceive. Similarly, it is important to give them an opportunity to freely and openly say and demonstrate all they have experienced, so that they may be liberated from painful and apprehensive feelings. This way they have the potential to tackle the issues they find interesting, concerning or upsetting and to strengthen their own adaptive mechanisms. The most frequently used interventions are empathic listening, reflecting emotions and contents, encouraging to express feelings, reminding the client of his/her positive experiences and successes, giving supportive suggestions, and exploring alternatives in approaching and resolving the problem.
- REBT (Helping clients to learn how they make themselves miserable by keeping past alive and by insisting on irrational beliefs (MUST beliefs). Torture victims usually have irrational beliefs such as: *This had to be avoided/it shouldn't have happen to me; Other people/life are unfair; These feelings (pain) are unbearable; I must stop thinking about /must forget the past/trauma...* All these thoughts are irrational and REBT therapists are trying to help clients to realize that by using different techniques (disputing, Socratic method...) and to find new, rational, healthier way of thinking (to accept that trauma happened and that they cannot change it and to learn to live with it without trying to forget but with standing having memories of it and being sad or feeling remorse or being unsatisfied but not being overwhelmed with depression, guilt or anger).

After each psycho-therapeutic session, psychotherapists fill in a registration form about the client - Client's List, that consists of basic demographic data about the client, problems that made him address the Centre, therapist's assessment of the client's psychological status, psychological problems of the client observed by the psychotherapist and type of intervention used in psychotherapy. Clients List is entered into a computer beneficiary database. In addition to direct therapeutic work, therapists conduct psycho-diagnostic testing of all clients and prepare a report with diagnosed disorders and other findings and opinion for the psychiatrist,

who, based on testing as well as his own psychiatric assessment prepares a Report (which can be used at court proceedings). Psychotherapists attended group supervision (twice per month) and prepare case studies i.e. protocol of work with the clients for presenting the case. The purpose of this supervision is to improve services and knowledge, to exchange experiences and to monitor and evaluate psychotherapeutic process, as well as to prevent burnout of psychotherapists. Psychotherapists have opportunity to have individual supervision if they wish. When cases are difficult and unclear, part of the team meeting is used to discuss cases together with psychiatrist and lawyer. In majority of cases, lawyers have problems in making difference between actual victim of police torture and persons who suffer from paranoid schizophrenia. In some cases, they also need expert opinion on capacities of the clients to testify at court and to be persistent in yearlong trials.

Results:

- During the period covered by this report **140 clients – torture victims and members of their families received counselling and psychotherapy** in the Centre through 231 interventions. 55% of the beneficiaries were males and 45% were females.
- **90 beneficiaries** received psychological assistance during the visits of the mobile team in Serbia, through 139 interventions. 45% of the beneficiaries were males and 55 per cent were females.
- **220 beneficiaries** were psychologically assisted during the visit of the mobile team in Bosnia and Herzegovina, through 295 interventions. 44% of the beneficiaries were males and 56% were females.

Main problems of our beneficiaries are connected with the experience of torture, imprisonment and participation in war. In addition, since majority of them are refugees, they also report problems related to their refugee status, like problems of financial nature. The most common consequence of torture is Post Traumatic Stress Disorder (PTSD), and anxiety and depressive disorders. Common symptoms of the PTSD take the form of repeated flashback episodes, memories or nightmares of the ordeal, especially when exposed to events or objects reminiscent of the trauma. Clients who suffer from the PTSD also experience sleep disturbances, emotional numbness, depression, anxiety and irritability or outbursts of anger, all of which affect their day to day coping abilities in relation to work, family and social functioning. Due to alcohol abuse and increased aggressive behaviour, there is high family dysfunction.

Field work – psychological assistance

Field work presents a very important part of activities. Mobile team visits are essential for the proactive approach to beneficiaries and making our services easily available to them.

Clients are provided with the following on-the-spot assistance:

counselling and psychotherapy (in the form of individual, family or group psychotherapy) provided by a psychologist and psychiatrist; psychological and psychiatric diagnostics; general medical examination and treatment; internist's examination (EKG, blood tension control) and diagnostics; pharmacotherapy and psycho-pharmacotherapy.

Clients receive reports about their somatic and psychological health condition and recommendation for future treatment. Home visits, for the clients who are not able to come to the examinations, have been organised. For the most vulnerable cases with seriously

endangered health condition, we organize additional services like continuation of the therapy in adequate institution, specialist's medical examination, provision with special medicaments etc.

In the period covered by this report, IAN CRTV done significant amount of field work on the territory of Bosnia and Herzegovina with the aim to meet great needs of torture victims from this regions. Representatives of torture victims' organisations contacted our Centre frequently, asking for assistance from our mobile team and making inquiries and checking when we would be able to visit them.

In the period covered by this report, **90 clients** in Serbia were psychologically assisted through the programme within **13 visits** and **220 clients** in Bosnia and Herzegovina within **15 visits** to the targeted regions (13 of them were two-day visits).

In 2007, we started the activities in the region of Trebinje and because great need for assistance was identified among the clients. Association of ex-detainees Trebinje, which includes torture survivors from 7 east Herzegovina municipalities (Gacko, Nevesinje, Bileća, Berkovići, Ljubinje, Foča and Trebinje) have registered 773 ex-camp survivors and over 500 civil victims of war. Those territories were devastated, ruined during the war. In addition to human losses, they experienced great material damage, infrastructures were impaired, institutions were damaged and they had to be repaired. Problems are connected with poor material situation in general and insufficient qualified personnel. Besides this, the biggest numbers of civil victims of war were here, because of specific geographic site, near the country borders.

There is a considerable number of torture victims who are refugees, returnees or internally displaced person, and they were captured in variety of places of detention in the territory of BiH and Croatia. Many among those places of detention have the worst reputation, with regard to the grave breaches of the Geneva Convention and humanitarian law (like Lora, Split, Tarcin, Celebic, Viktor Bubanj etc.).

Clients from the Birač region (Bijeljina, Bratunac and Višegrad) are registered in the Regional association of ex-detainees from Birac. According to the data from the Association, there are 425 registered torture survivors. The Association registers torture survivors that are of Serb nationality, and that is the reason why there is no evidence in the Association about the number of torture survivors from Srebrenica, who are Bosniac nationality. For Srebrenica, data are maintained by the Association of Women of Srebrenica and Žepa. Their members are in the great number of cases family members of torture survivors, women whose family members were killed, and majority of them are registered as missing persons. These women were living in the encirclement, during that time they were maltreated, psychically, psychologically and sexually abused. Those women have been our beneficiaries since June 2006. We continued with our activities in the region of Srebrenica, since the clients from Srebrenica are in great need for our assistance.

There is a systematic lack of services for torture victims in this area. Majority of torture victims from the selected area do not have social and medical protection; medical services and medications are expensive, while they are very poor and barely surviving.

b) Medical assistance

During the period covered by the report, efficient medical examination and treatment was provided to **118 beneficiaries** in the Medical centre, through 360 interventions. **323 beneficiaries** were medically assisted during the visit of the mobile team at the territory of Bosnia and Herzegovina, through 757 interventions. **29 beneficiaries** received medical

assistance during the visits of mobile team on the territory of Serbia. In Table 1 data on type of assistance and numbers of clients who received medical assistance in the Medical centre are presented.

Month	No of visits to ambulance*	No of new clients	General internist exam.	Ultrasound examination of thyroidal glance	Ultrasound examination of abdomen	Ultrasound examination of heart	Holter	LAB	Colour doppler	EMNG (electromyography)	No of interventions
December 08	19	9	18	5	11		1				35
January 09	5		5		4	1					10
February 09	20	9	7	12	3	2	1				25
March 09	31	14	7	16	10	1					34
April 09	24	8	23	7	12	6	7				55
May 09	8	3	7	4	7		2				20
June 09	10	3	9	6	3	3	2	3			26
July 09	8	1	6	3	4	2		2			17
August 09	15	3	9	7	2	3		3			24
September 09	9	2	6	4	1	1	1	3			16
October 09	21	9	17	16	18	5	4	4	2		66
November 09	21	12	19	13	14	5	1	11	2	2	67
December 09											
	172	73	133	93	89	29	19	26	4	2	360

*Every visit to medical centre could include more than one medical intervention

Table 1 Medical assistance in Centre (data about medical services provided through mobile team' activities are not included)

Total of 118 clients received medical assistance in the medical practice that IAN engages. This assistance consisted of one or more examinations per person, including general internal examination, specialist cardiologic examination including electrocardiogram (ECG) and ultrasound examination of heart, ECG holter, ultrasound examination of abdomen as well as Colour doppler, EMNG (electromyoneurography) and laboratory analyses, medical services that IAN started to provide in this year as great need for these kind of assistances have been showed among significant number of our beneficiaries. As the majority of our clients have severe cardiological, neurological and endocrinological difficulties, we found inclusion of these diagnostic procedures valuable for our clients in order to check their health and monitor it through a prolonged period and react timely with adequate treatment when it is necessary. In accordance with the above mentioned, except from examinations and diagnostic, clients received treatment in the form of necessary medicaments, recommendations on using medicines and changes in life style and habits.

As it was found in the previous years, again the most frequent health problems of our clients are: cardiovascular diseases caused by stress (hypertension, coronary insufficiency and heart failure), rheumatic complains, gastrointestinal diseases (gastritis, ulcer, gastrialgies), and posttraumatic sleep disorders and consequently, the most frequent types of medications given to beneficiaries are: ACE inhibitors, beta blocators, Ca antagonists, Diuretics, Ibuprofen, Trental, Cefalosporines, Salbutamol spray, Aminophilines, Ranitidines, Monisol. For heavy, chronic patients we manage to organize extra medicaments.

Also, a significant increase of beneficiaries with severe endocrinological problems has been identified, thanks to the possibility to use additional diagnostic equipment and procedures (already mentioned Colour Doppler, laboratory analyses and EMNG), we were in position to discover. Among sample of torture victims that have been our clients both in the Centre and in the field, it is noticed that the problems of thyroid gland functioning as well as diabetes mellitus and their complications prevail in this population. Those are medical problems, at least partly, related to stress caused by traumatic experience of torture and which by their nature severely deteriorate overall health and quality of life of people facing them. That is why opportunity to act preventatively as well as curatively with providing improved medical assistance, enriched with mentioned sub-specialized examinations, makes our services and assistance to clients better and more valuable for them.

Field work – medical assistance

Medical doctor is important member of the mobile team. Medical doctor provides general medical examination and treatment, internist’s examination (EKG, blood tension control) and diagnostics, and pharmacotherapy. Medical assistance and delivery of free-of-charge medicaments proved to be useful as a way to approach to our target group and motivate them for psychological assistance, since they have resistance towards psychotherapy. It is much easier for the beneficiaries to go to medical examination than to a psychological treatment. Free-of-charge medicaments are efficient part of psychological and medical treatment. They also have important psychological meaning for our clients as a form of "concrete help".

Purchase of three vehicles for the fieldwork (two for BiH Centres and one for the CRTV in Serbia) is of crucial importance for reaching beneficiaries in isolated areas remote from the Centres as well as the torture survivors who cannot travel due to their mental and physical problems. This gives an opportunity to assist those beneficiaries on the spot, with high quality treatment.

Medical doctor brings medical instruments (portable ECG, sphygmomanometer, stethoscope, etc.) to the field.

Table 2 Medical assistance provided through mobile team activities (both in Bosnia and Herzegovina and Serbia)

Place (field	Dates of visits	Number of	Number of assistances (one
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work)		clients	regular assistance could include one or more interventions)**
Srebrenica (including surrounding villages)	23.12.08. * (flu vaccination) Srebrenica 22. - 23.05.09. Luke i Krusevdol 12. - 13.06.09. Crvica 03. - 04.07.09. Osat 11. - 12.09.09. Srebrenica 16. - 17.10.09. Srebrenica 14.11.09. Srebrenica	124	240 (197 regular assistances + 43 vaccinations)
Trebinje	27. -28.03.09. 29. – 30.05.09.	60	96
Visegrad	05.12.08. 28.02.09. * (flu vaccination) 24.04.09. 10. – 11.07.09. 18. – 19.09.09. 23. – 24.10.09.	41	207 (192 + 15 vaccinations)
Ugljevik	03.06.09. 13.09.09.	11	22
Bratunac	12.12.08. 23.12.08. * (flu vaccination for people from Bratunac) 08. – 09.05.09. 25. – 26.09.09.	39	144 (105 regular assistances + 39 vaccinations)
Milici	24.12.08. * (flu vaccination)	27	27 (vaccination)
Vlasenica	24.12.08. * (flu vaccination)	21	21 (vaccination)
TOTAL: Bosnia		323	757
Rasanac	03.10.09.	12	12
Adice	10.10.09.	17	17
TOTAL: Serbia		29	29

* Flu vaccination was organized for 145 clients/ victims of torture and their family members from Srebrenica, Bratunac, Milici, Vlasenica and Visegrad. The most severely health and socially vulnerable people, in the majority of cases elderly persons with chronic diseases, were included in this process. Their severely impaired health made this group of beneficiaries especially vulnerable for getting flu viruses and developing serious medical complications of viral infection. That was a reason why IAN decided to conduct flu vaccination.

** Regular medical assistance at terrain could include: General internist examination, ECG, Ultrasound examination of abdomen, Ultrasound examination of thyroid gland, Holter
In general, opportunity to provide medical assistance to our clients, including diagnostic and treatment with medicaments, is very important for their overall recovery process. Beneficiaries report that the possibility to receive high quality medical treatment and examination supported with medicaments, organised in a client-friendly way without long waiting time is very valuable for them. Some of the clients have not been examined by a general practitioners for years. Thanks to medical assistance they received in IAN CRTV, most of them changed their attitude toward own health, becoming more responsible, coming regularly to check-ups in the scheduled terms, taking medicaments and changing life style according to the agreement with their doctors. They are very satisfied with the improvements in their physical state and the changes as a result of the treatment. In addition, it seems that the beneficiaries very soon after start taking the prescribed therapy/medicaments experience positive effects of that. Response to the pharmacotherapy showed to be adequate without significant side effects.

Beside that and maybe even more important is the fact that a number of clients has been in a position to discover severe health problems (e.g. autoimmune diseases, tumours, etc.) in time, so that the possibilities for recovery or taking disease under control and prevent its severe consequences are higher.

c) Legal assistance

Legal assistance to victims of torture varies from legal counselling, to help with exercising different social rights and direct representation at the courts for obtaining damages compensation.

During the period covered by this report **146 clients** were **legally assisted**.

All clients were legally advised, attorney was present at 36 trials for 23 beneficiaries. 23 submissions were written, mostly appeals, answers to the appeals, statements on expert witnesses' reports and propositions. IAN attorney has been in regular phone contact with the clients whose court proceedings are in progress as well as with the witnesses, 31 of them. **Three cases** were successfully resolved at the District Court (Second Instance Court) - final decisions made and all three clients received non material compensation.

The clients report different violation of their human rights. There are still persons who ask for representation before the court for non material damages as a consequence of forcible mobilization. One client even called from Australia. People from Hrtkovci, who were our clients in previous years asked for advice for legal representation by the attorney for forcible mobilization.

Work with the clients includes telephone contacts with clients, meetings with clients in the Centre, legal advising and taking statements in cases of torture, gathering documentation, meetings with witnesses and taking statement from them, preparation of clients and the witnesses for trials and bringing of criminal charges and organizing psychological and psychiatric examinations for clients.

The specific group of forcibly mobilised refugees – torture victims, face legal problems because of the expired statute of limitation for filling claims against the Serbian police for the offence of unlawful deprivation of liberty and obtaining redress for torture and ill treatment suffered subsequent to arrest.

Legal advising now includes introduction of clients with their right to start a process for damages compensation for decrease of life activity to a client. Conducting these processes implies that the clients are willing to come to our centre for examination by a psychologist and then a psychiatrist. After this, if a client is diagnosed with PTSD, it allows the lawyer to start a procedure or to ask for expanding of the existing process for damages compensation due to new circumstances – mental disorder. Practically, the lawyer is trying to make causally consequent connection from the same factual status – situation when a person is forcibly mobilized and taken to the battlefield and to prove that the Republic of Serbia is responsible for psychological problems of the person. We would like to emphasize that in a situation when IAN client does not suffer from the PTSD and he/she has already started the process before the court, we explain to the client that the court considers requests for damages compensation outdated if it is based only on forcible mobilization. Only the clients who are diagnosed with some psychological disorder due to forcible mobilization have a chance to get financial compensation, or they can change the grounds while the trial is in process. Also, we inform the clients that there is no unanimous standpoint of the District Court in Belgrade on damages compensation issue. Also, clients are being informed about actual standpoint of Supreme Court of Serbia, and the fact that decision of the court may not be positive for them.

Activities of the legal service present an important addition to psychological and medical assistance. Beneficiaries benefit from legal assistance in a way that they receive additional support and encouragement to become more active in fighting for their rights. Asking for legal assistance is also one of the indicators of improvement in their psychological condition, showing their activation and leaving the passive position of the victim.

IAN CRTV has started to work with victims of police torture in January 2009. Most of the persons who address the Centre have no evidence that the torture has been committed, and have no independent witnesses who would confirm their story. This makes the chances for success in such cases very small. So far we have had 6 persons who addressed us regarding police torture. However, only criminal charge will be submitted, because only one person satisfies the criterion of “reasonable doubt” that such thing happened. There are a lot of clients from the NGO Veza who report to often have been victims of police torture, since they belong to vulnerable categories, often subjected to different types of discrimination – members of the LGBT population, drug users, Roma. Main difficulty with these clients who report to have been victims of police torture is lack of evidence about the event. Lawyer has difficulties while taking statement from those beneficiaries, especially with drug users since they have problems with memory and they can not remember some part of the events, sometimes they were under influence of narcotics, their stories are inconsistent, etc.

Legal assistance in labour, personal and property rights and Informational assistance

CRTV beneficiaries who addressed IAN were most interested in the following information:

- status issues (prolongation of the lost refugee status and citizenship of Serbia)
- access to social rights (especially health care in Serbia)
- regulation of property issues in Croatia
- reconstruction of the property in beneficiaries` country of origin
- pension related issues
- tenancy rights in Croatia
- integration issues (legalisation of real estates, labour rights, employment)
- housing programs for refugees available in Vojvodina and other parts of Serbia
- information about support through building material
- special Fund for compensation to the pensioners established within HZMO (Croatian Pension Agency).

Legal assistance was provided in the offices and in the field meaning that IAN lawyer in several cases went together with the beneficiary to the relevant institutions on the territory of Belgrade. Legal assistance referred to almost all issues in the domain of exercising basic human rights. It included oral assistance and written legal assistances (writing complaints, claims and acceleration requests, and other assistance with administrative procedures).

Legal assistance provided to the interested beneficiaries was primarily oriented towards property and ownership issues and labour rights. A significant number of beneficiaries asked for legal help and advice regarding labour rights such as convalidation of years of service in the Republic of Croatia, pension, the possibility for realisation of pension or continuance of receiving already acquired pension, establishment of labour-legal relationship in BiH, correction of data on insurance benefits in Croatia and BiH and implementation of the Agreement on Social Welfare between Serbia and Croatian and Serbia and BiH. Other fields of interest for the beneficiaries in Serbia were legal counselling regarding acquiring loans for houses and apartments and legal advice related to start-ups in Serbia.

A considerable number of beneficiaries also asked for legal assistance related to old foreign-currency savings, housing possibilities in Croatia and various problems related to status rights and integration in Serbia.

Legal counselling for witnesses of war crimes

In Trebinje, a group of 30 people who were tortured in the prison camp Lora in Split, Croatia, have been detected and assisted by IAN in the previous period. Nineteen of them are witnesses in the renewed process in the District Court in Split in “Lora” case. They have given statements before the Court, and another eleven have been invited to testify in this case. They have asked our team for

psychological preparation for witnessing because their rights were violated during the witnessing in different ways.

Meetings were organised in Split and Zagreb on 19th and 20th October with Mr Tonic Majic, president of the Dalmatian Committee for Human Rights from Split active in court proceedings related to Lora case, and with Ms Sanja Ormuz, a lawyer from the Lawyers` office *Nobilo* that leads the processes and represents these people before the court. The aim of the meetings was to establish cooperation with these organisations in order to assist our beneficiaries during the court processes and provide information and psychological preparation for testifying at war crimes trials. Marijana Djoric, IAN lawyer and Srdjan Jovanovic, field manager, were present at this meetings.

Representatives from the Dalmatian Committee for Human Rights and the Lawyers` office *Nobilo* did not show enough openness for cooperation. However, further discussions on this topic will be initiated.

d) Psycho-social rehabilitation through skills training (professional empowerment)

Information and Communication Technology Learning Modules

In the reporting period **48 participants have started attending IT courses**. In this reporting period they have completed between 2 and 4 courses. In total, 178 IT courses were provided. The beneficiaries had the opportunity to choose among the following courses: ECDL Module 2 - Using the computer and managing files, ECDL Module 3 – Word Processing, ECDL Module 4 – Spreadsheets, ECDL Module 5 – Using Databases and ECDL Module 6 – Presentation and ECDL Module – Web browsing and Communication. All ICT classes contained lectures and practical exercises harmonised with the ECDL Syllabus [5.0](#).

Lectures covered 20 classes during 2 weeks, and practical exercises cover 10 classes over 1 week. Within the lecturing part, teacher lectured using PowerPoint presentations. Within the exercises each course participant practiced various things with the assistance of teacher, and they also had a possibility to use additional learning resources from the library. All participants have been obliged to attend the courses regularly. They all received a book related to the ECDL learning modules.



**IT course in IAN for victims of torture and members of their families.
July 2009.**

Training in social skills

Life skills trainings in this reporting period included 3 modules: Module *Communication skills – written communication and CV writing*, Module *Self management* and Module 5 *Communication skills – presentation*. The courses were delivered by psychologists. Each Social skills learning module includes 14 lessons. All participants have received *Social Skills* book.

In total **37 beneficiaries attended the Life skills courses**.

Training in Entrepreneurship

During the reporting period the beneficiaries who expressed interest in developing skills and knowledge related to entrepreneurship with the perspective of setting up their own business and become entrepreneurs had the opportunity to attend education in modules: *Starting a business* and *Business skills* and a comprehensive course in gardening. The course included theoretic part with 60 classes delivered by an expert in this field, Dragana Milosevic-Brevinac, professor at the Forest School. Twelve persons attended the program. In addition the participants had practical training organised in three biggest Belgrade plant nurseries. In the future period entrepreneurship courses will be continued for the interested beneficiaries.

English language lectures were delivered using English File books by Oxford University Press. Teaching and learning resources are used, including teachers' manuals, students' books and workbooks, cassettes and multimedia CDs. Additional learning resources from the school library and Internet were also available to all beneficiaries. Each English language learning module includes 60 lessons over a 10-week period. **10 beneficiaries** have been admitted to English language courses. Before starting the courses beneficiaries were tested so as to determine their knowledge level. After the tests they were included in groups of appropriate level: Currently 2 persons are attending Elementary 1, 3 persons Elementary 2 and 3 persons Pre-Intermediate 1. One beneficiary has completed Pre-intermediate 1 and 1 person has completed Elementary 1.

Capacity Building

Two Centres for Rehabilitation of Torture Victims have been established in BiH within the partner organisations. The Centres have been equipped with adequate technical and human resources with the aim to provide highly professional, specialized assistance to torture victims and their family members, including psychotherapeutic, medical and legal interventions.

10 professionals engaged in the work of the Centres in BiH (2 psychologists, 2 psychiatrists, 2 medical specialists and 2 lawyers) have been trained for delivering professional psychological, medical and legal assistance to torture victims and for managing the Centre (2 coordinators).

21 health professionals in BiH, general practitioners, were trained in issues concerning torture, counselling and referral at the training seminar "Torture - How to recognize and document".

Setting up two specialised Centres for Rehabilitation of Torture Victims in BiH

The Centres have been set up within two partner organizations: one within the Health Center "Sveti Nikola" Milici - Center for Mental Health and the other within the General Hospital Trebinje. Activities planned and realized in order to help establishment of these centres and their further efficient functioning included equipping the premises, purchase of vehicles as well as medical instruments for field work and developing work procedures that will be applied within these Centres. Premises of the new Centres for Rehabilitation of Torture Victims in Trebinje and Milici have been equipped with office furniture, computers (PC and notebook), telephone and adapted for the implementation of planned activities.

Staff for CRTV Milici and Trebinje – project coordinator and bookkeeper has been selected in February 2009 and in August 2009 other staff members were selected.

Procedures for admission of the clients, work with clients, referral, communication and administration were established in the new CRTVs in Trebinje and Milici.

Mobile team diagnostic set, ECG and ECG holter were purchased. Vehicles for CRTVs were purchased. The vehicles equipped with medical instruments for the field work are of crucial importance for reaching and assisting beneficiaries in isolated areas remote from the Centres as well as the torture survivors cannot travel due to their mental and physical problems.

Trainings for counsellors, psychiatrists, medical doctors and legal advisers were conducted in form of two-days training, which was held in Belgrade on 26 and 27 October 2009.

Training for professionals in BiH working with torture victims

IAN, in collaboration with the Primary Health Center "Sveti Nikola" Milići organized a two-days training seminar "How to recognize and document torture" on 25 and 26 May 2009, in Milići (Bosnia and Herzegovina).

This was the first of six trainings of this kind planned to be conducted within the project period.

As general practitioners in BiH represent the main resource for assisting torture victims and members of their families in most of the places since there is insufficient number of specialists to whom torture victims could be referred, working on capacity building of these medical professionals is of crucial importance for torture victims and process of their rehabilitation.

The purpose of the training was to change/improve the knowledge, attitudes and behaviour of medical professionals from the Primary Health Care System in BiH towards better prevention and protection and substantial support to torture victims, as well as to build up their own professional capacities and capacities of their respective institutions.

All topics relevant for the medical professionals who have not been trained before for working with torture victims and useful for their contact with this kind of clients/patients, were covered by this training: definition of torture and trauma, main international legal standard in protection of human right and prohibition of torture, basic principles of interviewing torture victims, preventing victims' retraumatization, recognizing torture consequences and documenting them in a proper way, supporting victims and referring them in accordance to their needs as well as preventing helpers/medical professionals' burn-out.

Importance of assessing and documenting psychological sequels of torture are especially emphasized, as psychological evidences are often crucial in proving torture and preventing impunity thus helping survivors in process of reparation and rehabilitation.



Training for professionals in BiH, May 2009, Milići

There were 21 participants involved in the training, people who were coming from different places of region called Birač (Eastern Bosnia): Milići, Bratunac, Vlasenica, Srebrenica, Sekovici, Han Pijesak, Skelani.

Training was conducted by 3 trainers, IAN staff experienced in the field of victims' rehabilitation and torture prevention: Stanislava Vuković, Mina Mitic Lazarević and Sandrina Špeh Vujadinović.

Training was conducted as a combination of lectures, discussions and practical exercises in form of roll plays and group works. For the purpose of this training, a case study was written and distributed to participants for practicing achieved knowledge and skills necessary for recognizing, properly assessing and documenting torture consequences, especially psychological ones. (All materials – power point presentations, materials for practical exercises, case studies etc. are available on request).

Participants showed high interest in topics covered by the seminar and actively participated in training, contributing to its successful realization.

Training was generally evaluated as successful and useful by the participants, which was demonstrated by positive marks and comments in the evaluation questionnaire as well as by participants' achievement on the test which measured their knowledge about torture, its consequences and way of recognition.

Trainees received the handouts as well as Istanbul Protocol manual, as one of the main internationally recognized instrument for adequate and efficient investigation and documentation of torture cases, translated and published in Serbian language by IAN (within the project *Prevention through Documentation*, led by IRCT and coordinated in Serbia by IAN, financed by the EC).

General impression of training' organizers is that training was prosperous and that there is a hope and expectation that it will have positive effects on participants' everyday work and overall assistance to torture victims and their family members in Bosnia and Herzegovina.

Awareness Raising on Torture Related Issues in Serbia and BiH

Commemoration of the UN International Day in Support of Victims of Torture

Together with more than a hundred similar organizations from all over the world, each year IAN takes part in the global campaign for commemorating 26th June - United Nations International Day in Support of Victims of Torture.

The slogan of the 2009 campaign was TOGETHER AGAINST TORTURE. IAN and partners organised a series of interesting events in Serbia and BiH for the **26th of June**.

In Serbia, three events were organised. On Thursday, June 25th, an open debate was organised in the Cultural centre Rex entitled **Treatment of persons in closed institutions – therapy or (and) torture.** Examples of good and bad practice, problems and challenges in treatment of persons accommodated in different closed institutions such as detention, prisons, psychiatric hospitals, etc were presented by seven different professionals from the perspective of their field of expertise.

On Friday, June 26 the a press conference was held where the speakers talked about the presence of torture in Serbia and in the world in general, physical and mental consequences of torture and the comprehensive IAN programs for supporting rehabilitation of victims. The speakers were: **Jelena Bakalić**, Director of IAN Centre for Rehabilitation of Torture Victims, **Pierre Dybman**, Head of Operations I in the Delegation of the European Commission to Serbia and **Miloš Janković**, Deputy Ombudsman for persons deprived of their liberty.

On the same day in the evening a concert was held in the Cultural centre *The City* in Belgrade under the slogan ***Together Against Torture*** with the British band The Singing Loins, famous for their support to various humanitarian actions and 5 other local bands.

In Bosnia and Herzegovina two newly established Centre for Rehabilitation of Torture Victims also commemorated the International Day in Support of victims of torture.

The CRTV in Trebinje organized a basket tournament ***Together Against Torture*** on 26th June. Twelve teams of boys aged up to 16 participated in the tournament. The aim of this action was to draw public attention to the necessity of fighting against torture and the need to help the victims and support them. A large number of people from Herzegovina, the region of Trebinje, was detained in numerous camps throughout Croatia and Bosnia and Herzegovina during the war in the nineties, where they were tortured. Some of them came to the tournament and provided support to young basketball players.

Commemorating June 26th, the CRTV established within the Health Centre Milići organised a drawing competition for children of primary and secondary schools at the topic ***Together Against Torture***. The best three drawings were rewarded. A street performance with playing the acoustic guitar accompanied the competition. The event was organised in cooperation with another NGO -

the Youth Council Milici. During the action a stand was placed in the centre of the town where the activists distributed promotional materials to the citizens.

Articles about the campaign are published on IAN web site

<http://www.ian.org.rs/events/torture2009.htm>

Within the Commemoration of the UN International Day in Support of Victims of Torture, a seminar ***“Empowered for better health”*** was held on 22nd June 2009 in joint organisation of International Aid Network, Serbia and Azienda per i servizi sanitari No 1 – Triestina, Italy. The aim of the seminar was to share experience and knowledge on community based services and other ways of prevention of ill treatment of people in institutions. Persons in psychiatric institutions, especially those who are in closed type of institutions for the many years, are vulnerable and in the risks of torture and inhuman and degrading treatment.

The seminar started with presentations of Dr. Mezzina and Dr. Reali on Trieste experience. Data was presented and concepts of organisation of the services, integration of social and health care services, starting of the change were introduced to the participants. The participants were PhD. Vladimir Jović from IAN, Dr. Stanojković from special hospital Gornja Toponica, president of user group Dusa (Soul) Dragan Jugovic, Daniele Bombardini from Caritas and Dr. Mario Reali. A short movie was shown, produced by Caritas Italiana, that contains stories of the people in psychiatric institutions in Serbia.

Support to ratification of OPCAT in BiH

Bosnia and Herzegovina ratified the OPCAT on 24 October 2008. Following the ratification, a national roundtable was organised by the OSCE in October 2009 to discuss ways forward. Several existing bodies monitor places of detention in Bosnia and Herzegovina, including the Ombudsperson’s Office and the to-be-established parliamentary commissions. The participants did not agree on specific option as eventual National Preventive Mechanism but committed to follow-up the national discussions through an inclusive and open process. The establishment of an OPCAT working group to follow-up on the discussions is also being explored.

Originally planed activities related to support to ratification of OPCAT will be replaced with the activities in support to implementation of ratified OPCAT such is the establishment of National Preventive Mechanism.

The topic related to OPCAT is integrative part of training agenda for the health professionals in Bosnia and Herzegovina.

Promotion of OPCAT in Serbia among expert public

The OPCAT was one of the topics at the press conference held on the 26th of June as well as at the press conference organised by Vive Zene in Tuzla on 17th June 2009. IAN Programme Director emphasised the importance of fulfilling the obligation that were taken upon by Serbia when ratifying the Optional Protocol to the UN Convention which is to define the national mechanism for prevention of torture. Deadline for this obligation has already past more then two years ago.



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