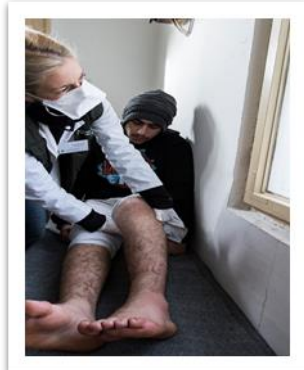
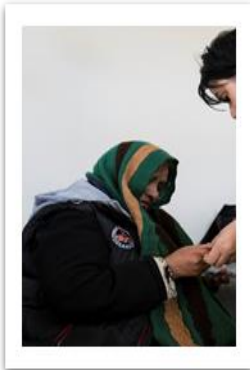


ANNUAL REPORT FOR 2016

Project Name:	Emergency assistance to torture victims among migrants and asylum seekers in Serbia
Donors:	United Nations Voluntary Fund for Victims of Torture UNVFVT
Contact person and email:	Jelena Lončarević jbakalic@ian.org.rs
<p>Short project description: Provision of medical assistance and psychological first aid to refugees and migrants in their transit through Serbia. Assistance was provided through medical mobile unit consisting of medical doctor, nurse, psychologist, interpreter and field coordinator. Special focus was given to identification and treatment of victims of torture and their family members among refugees. Project was implemented in Belgrade, Sid – Principovac, Adasevci, Berkasovo and Sid railway station in the period October 1st 2015 until 30 September 2016.</p>	
<p>Results in 2016: 610 torture victims and their family members received psychological and medical assistance. Project supported by International Medical Corps (IMC) enabled IAN mobile unit to provide assistance to all refugees in need and to do screening of those who were tortured and ill-treated in the country of origin, during the trip, or at the both places. In total, more than 5000 refugees were supported during the period of the project implementation.</p> <p>Thanks to the project supported by UNVFVT, IAN mobile unit provided psychological and medical support to 370 refugees – torture victims and their family members.</p> <p>Mobile unit that consists of a medical doctor, a nurse, a psychologist and an interpreter was providing medical and psychosocial first aid for refugees and migrants on transit through Serbia.</p> <p>Medical first aid (MFA) includes basic primary health care interventions including: screenings, curative care, first aid, reproductive health, psychosocial support, and emergency and other medical and mental health referrals.</p> <p>Medical doctor remediate current health problems that victims suffer from and provide them with medicines and advice for treatment and behaviour in future period. Since, the most probably, doctor meets victims only one time, being in transit, it is important to provide them with first aid and give recommendation for future. Mobile team doctor prescribes medicines, in majority of cases antibiotics, vitamins and pain killers. Those beneficiaries who are in need for further, specialised treatment in the health institutions, were referred and followed up during their treatment.</p> <p>Psychosocial first aid (PFA) includes assessing the needs and concerns, basic psychosocial support (emotional comfort/helped to feel calm, empathic listening, information about stress reactions, encouraging positive coping) and linking to services through provision of information or facilitating access services and assistance e.g., shelter, food, water, clothes.</p> <p>Psychological assistance alleviates psychological long-lasting consequences of torture and possibly prevents severe mental disorders within endangered population and their families, including second generation. Purpose of the assistance was to take care of physical consequences of torture, including prevention of further complication and pain relief, as well as providing psychological support and emotional comfort in moments that followed incident of torture. Psychologist talked with victims about his/her journey and torture experience, educated them about possible consequences of such trauma, so they could ask</p>	

for professional help if they experience such symptoms.

We had cases of torture that happened by Croatian, Serbian or Bulgarian Border police. Some of the victims were supported immediately after the incident of torture occurred which helped them feel calm and safe. After psychological intervention, their fears about future incidents of violence diminished and they got encouragement to continue the journey. Victims were informed about trauma effects on mental health and about consequences that they could feel because of traumatic experiences. They were informed about steps that they should take, once they settle down.



Project Name:	Refugee and Migrant Crisis in Europe
Donors:	International Medical Corps (IMC)
Contact person and email:	Bojana Trivunčić bzivanovic@ian.org.rs
Short project description: Provision of medical assistance and psychological first aid to refugees and migrants in their transit through Serbia. Assistance was provided through medical mobile unit (MMU) consisting of medical doctor, nurse, psychologist, interpreter and field coordinator. Project was implemented in Belgrade, Sid – Principovac, Adasevci, Berkasovo and Sid railway station in the period September 28th 2015 – 31st March 2016.	
Results in 2016: Medical first aid (MFA) was provided to 3183 persons. The most common health problems were related to long journey, poor hygiene, very cold weather, malnutrition, long bus rides, long walking, etc. There were also problems related to respiratory tract infections and painful conditions: toothache, headache, muscles and joints pain (information related to diagnosis can be found in the file diagnosis final). Chronical health problems like diabetes, asthma, hypertension, etc. were also diagnosed. During report period MMU examined many pregnant women. In the reporting period, there were many mothers with young children, up to 2 years old. Babies up to 6 months mothers are usually breastfeeding. Children older than 6 months mothers are usually breastfeeding and feeding with infant formula at the same time. MMU doctor advised mothers to continue with breastfeeding of their children, especially in this critical moment when the hygiene of the food and condition of living is on very low level. Psychosocial first aid (PFA) was provided to 2183 persons. Majority of beneficiaries that were provided with PFA needed assistance related to satisfaction of basic needs (food, clothes). They usually didn't have winter cloths and the weather was very cold. They were not used to such a cold weather. Lack of basic information, like why they were not allowed to cross the border, or when the train was leaving, etc. was also their concern. They were	

usually very concerned about their future but at the same time very pleased that they managed to leave the country of origin. Many of them were talking about trauma they experienced in the country of origin and during the transit. Majority of them were coming from Syria, Afghanistan and Iraq. Psychological consequences of traumatic experiences were often very obvious. Sometimes they were not aware that feelings that were present were reactions on trauma they survived. Information about stress reactions and education about importance of getting professional help if psychological problems/difficulties still persisted when they settle down was important part of psychological support.

Crossing the sea by the boat, from Turkey to Greece was the most traumatic experience for many of them. They were anxious about the future, frightened, but the emotional reactions were in correspondence with the traumatic situation in which they were.

People who came through Bulgaria were complaining on behavior of Bulgarian police. Based on refugee's stories, it can be said that there was systematic torture in Bulgaria. Almost all refugees, majority Afghans that came through Bulgaria said that police took their phones and money and that they used force and beat people. Some were imprisoned for certain period of time (usually around 10 days, some even up to 3 months). They were beaten in prisons, they didn't have enough food and water, and they were sleep deprived. Refugees were usually traveling in groups, with family members, siblings or with friends. Women were usually with their husbands or brothers or other relatives.

The usual psychological interventions while providing psychological support were listening and empathic understanding, as well where was appropriate "normalization" of emotions that were reactions to traumatic experiences, and education about trauma consequences, etc.



Project Name:	Global Holistic Approach to the Fight against Impunity for Torture
Donors:	European Union
Contact person and email:	Bojana Trivuncic, bzivanovic@ian.org.rs
Short project description: In 2014 International Aid Network, in partnership with the International Rehabilitation Council for Torture Victims (IRCT) and 10 other rehabilitation centres in different regions, started to implement project "Global Holistic Approach to the Fight against Impunity for Torture" (DFI). The DFI project started on 1 April 2014 and will last 36 months. The overall objective of this project is to contribute to the fight against impunity using data gathered from survivors of torture to support accountability, prevention, and rehabilitation for torture and other cruel, inhuman or degrading treatment or punishment.	

The specific objective of this project is to strengthen and harmonise the capacity of rehabilitation centres to collect clinical data of torture survivors in order to then integrate documentation of torture at all stages of the rehabilitation process and to disseminate evidence base outputs to support antiimpunity work.

Main Results in 2016:

- Collecting and entering data in to DFI data base and entering historical data on torture victims
- DFI data base was modified and made to be more functional and easier to use
- In February, 2016 evaluation on DFI project activities in IAN was done by Finn Hansen.
- ROM evaluation done by Mrs Britta Madsen was held in September, 13th till 15th.
- Letter to government bodies (Ministry of Interior and Prosecutor' Office) was sent in September, asking for data related to criminal act of torture and torture victims. Data from both sources are very imprecise and confusing, and it is impossible to know based on collected data who is the perpetrator in the criminal act of torture. Furthermore, there is no detailed information about victims too. Based on information we received, we realized that there is no uniform or unique data base of victims in government institutions.
- Country report related to torture victims in Serbia was written. The final version of this report will be very useful for advocating for necessary legislative changes, as well for creation of adequate data base among governmental stakeholders.
- In December two representatives from IAN, Bojana Trivuncic as a delegate and Executive Director of IAN Biljana Petrovic, were at the General Assembly and Scientific Symposium that were held in Mexico City. Bojana Trivuncic also had a presentation on refugee crisis and torture among refugees at the Symposium.

Project Name:	Effective identification and documentation of torture
Donors:	UNVFVT
Contact person and email:	Bojana Trivuncic, bzivanovic@ian.org.rs
Short project description: Objective of the project is to contribute to more adequate identification and documentation of consequences of torture among asylum seekers. This project is developed in order to assist health professionals and other relevant stakeholders in dealing with new, burning issue on increased number of asylum seekers in Serbia. Among asylum seekers, there is great number of those who have been subjected to torture, in the country of origin or during their trip to Serbia. Staff dealing with asylum seekers is in need for information and knowledge that would help them to adequately admit and assist torture victims among asylum seekers. They will be trained in identification and documentation of torture, as well as in issues concerning asylum. Benefits for victims of torture will be multiple. They will have more adequate treatment, better recognition of their needs, and adequate referral to needed assistance. In addition they will have proof of survived torture which can help them to receive asylum and find better life. Issues to be covered during the training: - Asylum system in Serbia and torture victims among asylum seekers - Definition of torture and introduction to international and national documents and bodies dealing with torture issues and prohibition of torture - Types of torture - Introduction to Istanbul Protocol - Psychological consequences of torture - Physical	

consequences of torture - Basic principles of interviewing victims of torture - Treatment and referrals for torture victims.

Main Results in 2016: Training on effective identification and documentation on torture provided participants enough knowledge firstly about what torture is, what is definition of torture and what are relevant international and national standards related to torture. They learnt what state obligations are, when we talk about rehabilitation of torture survivors, reparation and redress as well as non refoulement. Training gave participants enough knowledge while working with refugees to recognize the most vulnerable among refugees and migrants and to recognize psychological, behavioural and physical consequences of traumatic experiences such as torture. They gained basic knowledge how to document experience of torture when it is possible and provide adequate report, and finally to do a proper referral.

As a result of trainings, IAN established better cooperation with different stakeholders that are active in the field of provision of different type of assistance, in the field of protection, advocacy, and human rights of refugees and migrants. IAN is recognized as an organisation specialized for rehabilitation of a most traumatized refugees and migrants, torture survivors. Different civil society organizations as well as international that are provide direct assistance to refugees/migrants are referring victims of torture and other traumatized victims to our Center for psychotherapy and psychiatric consultations.

Participants in these trainings were professionals and other stakeholders who are in contact with refugees/asylum seekers and migrants, or who are working in institutions that provide services for them.

Training participants were from:

- International organisations: UNHCR, UNICEF, UNFPA, Danish Refugee Counsel, Save the children, Initiative for development and cooperation, Medecins du Monde
- Representatives of government: Ministry of Justice, Ministry of interior, Border police, Ministry of labour and social welfare.
- National organisations: Red Cross of Serbia, Center for social work, Commissariat for migration and refugees, Ombudsman office, Health centers.
- Civil society organisations: Balkan Center for Migration, Group 484, Belgrade center for Human rights, SOS Village, Ecumenical Humanitarian Organisation.

74 participants attended two trainings.



Project Name:	IRCT Centre Support Grants 2016
Donors:	IRCT Centre Support Grants 2016
Contact person and email:	Bojana Trivuncic, bzivanovic@ian.org.rs

Short project description: In 2016 IAN CRTV is planning to continue to provide holistic rehabilitation that includes psychological, medical and legal assistance to TVs and their family members. In 2015 IAN CRTV started with provision of psychological and medical assistance to TVs and their family members among refugees in Serbia through mobile team visits to refugee camps and shelters. IAN CRTV is planning to continue with those activities in 2016.

Main Results in 2016:

- 610 torture victims and family members received rehabilitation services, including psychological, medical and psychiatric assistance.
- Two trainings were conducted related to effective identification and documentation on torture for professionals and other relevant stake - holders that are working with refugees, migrants and asylum seekers in Serbia. 74 participants attended two trainings.
- Anti - burnout seminar for staff working in IAN and other care givers who are working in the field of refugee was conducted. 23 participants attended this seminar
- With regard to 26th of June, UN International Day in Support of Victims of Torture, IAN and UN Office of the High Commissioner in Serbia in cooperation with Ministry of Labour, Employment, Veterans and Social Affairs, organized seminar and round tables entitled Human rights of Migrants and Refugees.