

Review Article

Special challenges related to persecution and imprisonment for Woman in Syria – aspects of neglected problems in the support of survivors

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Abstract

Women are at present experiencing unique challenges in the war in Syria and in neighbouring countries with autocratic regimes, especially in two areas so far at least partly neglected in research and humanitarian interventions. Prisons especially in Syria and Iran are not only a risk factor for the present spread of the present Covid-19 pandemic, but have exposed women to torture, sexual violence, forced disappearances, and other traumatic events, that are further aggravated by factors such as separation, and impact on the family. Perpetrators usually go unpunished. In our paper, we discuss problems and health implication, the context of international human rights and humanitarian standards, and measures to address redress and rehabilitation based on women survivors initiatives qualitative research we had conducted in several countries.

Keywords: human rights, gender, torture, war, forensic medicine, torture, rehabilitation

Imprisonment

Women who are imprisoned because of actual crimes, false allegations or as in Syria and Iran frequently due to political abuse of the legal or prison system, are in an especially vulnerable situation. This is in spite of the fact, that the international community, specifically the UN, has created a framework of special guidelines to protect women. These guidelines are safeguarding women's humanitarian and human rights during this critical times [1, 2], independent from the reason for their imprisonment. These special rules are in the latest version called the "Bangkok" rules (named after the place where they had been drafted during an international expert meeting). They should be seen as a framework for conditions in all places of detention of women and their accompanying children, in addition to the more general "Minimum Standard Rules for the Treatment of Prisoners" (in the latest, revised version called also the "Mandela rules"). The Bangkok rules include specific provisions for the psychological, physical and medical needs of women such as those related to menstruation, protection against sexual violence, and others, and do not replace but extend the provisions of important further standards such as the Mandela rules or the UN Convention against Torture. Compliance with these rules is supervised by international bodies and organizations, such as the International Committee of the Red Cross, the UN Committee against Torture and the UN Special Rapporteur on Torture. Local NGO networks [1] in Syria have reported seven thousand women detainees, including 435 children, that are detained after arrest or kidnapping. They give also an estimate of about 8 thousand prison survivors with children under 10 years.

Torture is of course the probably most serious human rights offense, and is unfortunately highly common in prisons in many countries such as Syria [3] and Iran [4–6], in spite of an absolute prohibition of all forms of torture in all international standards (7). Torture is permitted under no circumstances whatever, even in national emergencies (such as war, "war on terror" or pandemics like Corona) and as such, the absolute prohibition of torture is a non "non-derogable" human right. Still, the reports of prison visits by the UN parties mentioned above and present scientific research have demonstrated that torture is frequently used [1], specifically to oppress women activists [8]. It frequently includes or is associated also with sexual violence [8], that has been demonstrated to have the most serious long-term psychological impact, in addition to additional physical sequels such as infections [9] or unwanted pregnancies that in turn again themselves lead to severe psychological suffering including increased suicide rates [10, 11]. Besides torture, witnessing atrocities including sexual abuse and torture, or the killing of other inmates, lack of access to health care with resulting chronic health problems, must be expected to contribute to both immediate and long-term physical and psychological suffering [7].

Psychological suffering is not only caused by these factors, but also by the indirect results such as awareness of the impact on the family, the inability to take care of one's family members during imprisonment and the destruction of one's professional career,- that is already difficult in many countries for women to maintain [8]. Survivors are also frequently stigmatized in their society and even in their families and in close relationships [7].

Medical doctors and other health care personnel in prisons are by their professional ethical standards obliged to recognize, document, report on and try to stop human rights violations such as torture or inhuman and degrading treatment, but are frequently unwilling or unable to do so [12,13]. This process is explained for example in a joint medical and legal standard by the United Nations, the Istanbul Protocol [14,15]. This task is obviously dangerous for health care professionals and is reportedly frequently neglected in Iran and Syria. In these countries doctors who dare to act are frequently persecuted by the authorities [3, 12, 13, 16–19]. The present selective policy of releasing only non-political prisoners in a situation where the COVID 19 pandemic endangers especially prisoners under the adverse prison conditions in these countries must be seen as an aggravated form of persecution, especially as it affects especially political and women activists and imprisoned doctors as observed for example by Amnesty and by prominent Syrian human rights lawyer Anwar Al. Buni [1].

Survivors of human rights abuses but also their family members and communities and health care professionals who take care of them should keep in mind that psychological symptoms resulting from this long list of problems encountered by women in prison are in principal a normal reaction to an abnormal and abusive situation, and not a sign of weakness, stupidity or “madness” even if psychological symptoms in general are stigmatized in a society. The emotional and practical, unconditional support of survivors by their family members, partners and communities is therefore of crucial importance for the recovery of women prison survivors. Justice, redress and compensation, and the protection against future abuse are also important factors for psychological recovery (“therapeutic justice”), though in the face of the limited options of international bodies it might take a principal regime change to achieve this aims, that promoted by international organizations such as “Redress” in the UK.

In regard to psychological reactions, posttraumatic stress disorder (PTSD) related to specific events during imprisonment, such as torture, with intrusive memories, repeated nightmares, loss of normal sleep, anxiety, and avoidance of normal activities, is the most common specific reaction observed in many survivors [7, 11]. Depression [7] is also common, and both psychological reaction patterns can become illness with severe impact on the life of the survivor and indirectly also on other family members, which can mean that support might not be enough, but treatment by psychotherapy or for limited time by medication might be required. This would best be provided by specialized experts, in if possible multi-disciplinary treatment centers that have been set up in many countries. Chronic abuse of tranquilizers, pain medication, and, in some countries even alcohol or other drugs can be part of ill advised self help and are complications of the prison related reactive symptoms [7].

Further problems include chronic pain, especially in joints, as head-ache, or pain in the genital area, sexual problems especially after sexual violence or rape [6], and problems with blunt brain injuries after beatings, falls, or after having been pushed against walls and against objects [20–22].

Missing persons

The uncertain fate of those imprisoned and of other family members that frequently become “missing persons” forever, is an additional stress factor in this situation, also for those not imprisoned themselves that are “indirect victims”. Groups of persons listed as “missing” also of course include those abducted by both state actors as well as non-state actors, such as ISIS/DAESH, but also those killed in the war or (inter)national armed conflict.

Taking care of the surviving relatives of missing persons, mothers, wives, siblings and children, is a special challenge to be addressed especially in regions with a high number of missing persons such as Syria. Information on those who have been killed under torture, or died because of factors related to bad prison conditions, including COVID-19, by extra -legal executions, or also in war action, is frequently seen as an important supportive factor to provide psychological closure, and numerous forensic projects have been implemented to provide forensic evidence of persons killed, especially by the International Committee of the Red Cross. This is substantially supported by recent developments in DNA analysis [23] and new databases [24]. The special services of “naming the dead” of course also are a basis for accountability of perpetrators, and for the recovery of community history [25]. The identification of those killed and the circumstances of their deaths play an important role in transitional justice. This last process is often necessary to address and make public what has happened, and find a solution to offer justice to victims in the face of the often large numbers of perpetrators present in the aftermath of widespread human rights violations such as in Rwanda, Iran, or Syria.

In qualitative research we have conducted through focus groups with altogether 80 survivors in countries such as Peru and Uganda(26), three factors (categories) have been identified that surviving family members of those killed in prisons or massacres describe as helpful in psychological healing:

1. confirmation, that it actually happened (which is important, as responsible governments or parties frequently deny that abuses ever happened, and in turn blame family members for false allegations of the government being responsible for disappearances),
2. confirmation, that the action leading to the death was incorrect and not justified,
3. Confirmation, that all steps will be taken, that it doesn't happen again (which might include persecution of the perpetrators and an end to impunity).

International organizations such as the International Committee of the Red Cross (ICRC) have at least since the second world war developed strategies for the forensic identification of those missing persons killed, but also for those still alive, and recently have made use of the Internet and social networks to collect and distribute information on living survivors [1] bringing families and loved ones together again even in disorganised situations such as the war in Syria. While the identification of victims killed and discovered for example in mass the action leading to the death was incorrect and not justified in fact be an important factor in recovery and closure, psychological

support should always be offered in addition to notification of victims identified on their manner of death. It must take into consideration that the process of mourning is usually a longer and complex one and re-confrontation with this type of information is not helpful in all steps of this process.

In general, mutual support and solidarity between direct and indirect survivors, is probably the most efficient supportive tool to be provided, as exemplified in the historical movement of the “mothers” (“madres de la plaza mayo”) (now grandmothers) in Argentina [27]. Similar organizations have now been set up by women prison survivors in Syria [2] to provide information, testimony and other forms of support in a critical situation. This has the benefit of reconfirming an active identity that does not depend on help received from third parties, well intentioned as it that might be. Further, new strategies such as “Universal Jurisdiction” have been developed, that provide for the option that criminal charges against perpetrators will be brought to third countries courts, for example in Europe, in a situation where a fair process, investigation or an international court cannot yet be implemented in a country where atrocities happened, as presently in Syria or Iran [28]. This process is intended to address the issues of impunity, redress, and serve the prevention of further abuses [29–31].

Conclusions

Imprisonment of women, especially of political activists and human rights defenders, should be closely monitored by independent bodies.

In cases where it constitutes part of political persecution, it should be stopped immediately especially in countries like Syria and Iran, where violations of human rights standards are common or even extreme.

Consistent support and protection for individuals but also survivor NGOs are a task also for the international community, especially in a situation where those imprisoned are suffering from sexual abuse and torture, and further are in prison endangered by selective exposure to COVID-19 pandemic. A comprehensive understanding of the problems and solutions as outlined in this article should in our opinion guide this process.

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Online Resources

https://www.unodc.org/documents/justice-and-prison-reform/Bangkok_Rules_ENG_22032015.pdf

<https://www.ohchr.org/Documents/Publications/training8Rev1en.pdf>

<https://www.penalreform.org/issues/prison-conditions/standard-minimum-rules/>

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