WMA STATEMENT
ON
THE RIGHT TO REHABILITATION OF VICTIMS OF TORTURE

Adopted by the 64th WMA General Assembly, Fortaleza, Brazil, October 2013

PREAMBLE

The World Medical Association notes with grave concern the continued use of torture in many countries throughout the world.

The WMA reaffirms its total condemnation of all form of torture, and other cruel, inhuman or degrading treatment or punishment, as defined by the UN Convention Against Torture (CAT, 1984). Torture is one of the gravest violations of international human rights law and has devastating consequences for victims, their families and society as a whole. Torture causes severe physical and mental injuries and is a crime absolutely prohibited under international law.

The WMA reaffirms its policies adopted previously, namely:

• The Declaration of Tokyo laying down Guidelines for Physicians Concerning Torture and other Cruel, Inhuman or Degrading Treatment or Punishment in Relation to Detention and Imprisonment (1975)

• The Declaration of Hamburg concerning Support for Medical Doctors Refusing to Participate in, or to Condone, the Use of Torture or Other Forms of Cruel, Inhuman or Degrading Treatment (1997)

• The Resolution on the Responsibility of Physicians in the Documentation and Denunciation of Acts of Torture or Cruel or Inhuman or Degrading Treatment (2003).

The medical evaluation is an essential factor in pursuing the documentation of torture and the reparation of victims of torture. Physicians have a critical role to play in gathering information about torture, documenting evidence of torture for legal purposes, as well as supporting and rehabilitating victims.

The WMA recognizes the adoption, in December 2012, by the UN Committee Against Torture of the General Comment on the Implementation of article 14 of Convention against Torture relating to the right to reparation of victims of torture.

The General Comment outlines the right of rehabilitation as an obligation on States and specifies the scope of these services. The WMA welcomes in particular:

• The obligation of State parties to adopt a “long-term and integrated approach and ensure that specialized services for the victim of torture or ill treatment are available, appropriate and promptly accessible” (paragraph 13), without making access to these services dependent on the victim pursuing judicial remedies.
• The recognition of the right of victims to choose a rehabilitation service provider, be it a State institution, or a non-State service provider, which is funded by the State.

• The recognition that State parties should provide torture victims with access to rehabilitation programs as soon as possible following an assessment by qualified independent healthcare professionals.

• The references in paragraph 18 to measures aimed at protecting health and legal professionals who assist torture victims, developing specific training on the Istanbul Protocol for health professionals, and promoting the observance of international standards and codes of conduct by public servants, including medical, psychological and social service personnel.

RECOMMENDATIONS

The WMA emphasizes the vital function of reparation for victims of torture and their families in rebuilding their lives and achieve redress and the important role of physicians in rehabilitation.

The WMA encourages its member associations to work with relevant agencies – governmental and non-governmental - acting for the reparation of victims of torture, in particular in the areas of documentation and rehabilitation, as well as prevention.

The WMA encourages its members to support agencies that are under threat of - or subjected to - reprisals from state parties due to their involvement in the documentation of torture, rehabilitation and reparation of torture victims.

The WMA calls on its members to use their medical experience to support torture victims in accordance with article 14 of the UN Convention against Torture.

The WMA calls on its member associations to support and facilitate data collection at the national level in order to monitor the implementation of the State’s obligation to provide rehabilitation services.

★★★