

Reflections, Questions & Answers

1. Basil Fernando, AHRC: Dr Mitra, you gave the example of a serial killer having such a big emotional and behavioural impact on the entire city. Can a prison station where torture is practiced have the same effect?

Dr Rajat Mitra: Absolutely. Once, a group of children were asked to describe a police station. Many described it symbolically, as a fortress, because nothing that went in came out. None of their drawings showed tables or chairs. When asked why, the children replied that they simply did not think of it. Such impressions of the police station convey an ominous, unwelcoming and uncomfortable environment in which people suffer violence and normal daily life just doesn't happen. Such fear not only paralyses but causes ordinary people to become capable of all sorts of other monstrous acts. [Dr Mitra described in an earlier public talk at Hong Kong University (the first instalment in AHRC's anti-torture series) an encounter in which he witnessed two suspects detained by the police slapping each other. When asked why they were doing so, it was discovered that the boys had to prove their innocence by denouncing the other, and to demonstrate their innocence by physically abusing the other. Captors were therefore absolved from the responsibility of themselves injuring the suspects. Instead, the officers in charge simply caused such fear in the boys of being wrongly accused that they were turned against each other. Such methods are a patently unscientific way to investigate a crime – even if both suspects are innocent, they would keep abusing each other in order to assert their own innocence.]

2. Basil Fernando, AHRC: The Nazis had police stations in the centre of town. These "centres" proved to be most effective ways to physically control people. Individuals, families and communities were also immobilised through the constant export of fear from these centres. You say we black out when traumatised. Is there also an intellectual "black out" where people consciously avoid the topic altogether?

Dr Rajat Mitra: My professor asked me, "Don't you have anything better to talk about" when I wanted to give a talk on torture. He asked, "Will you talk about it objectively and scientifically?" I said yes, yet he was still reluctant. This is considered a taboo topic even in academic/mental health circles. I decided to respect his feelings and changed the topic, but I wasn't going to let that slide so easily. Torture is associated with evil and religion/superstition. It is therefore not usually considered within the realm of science. And torture is quite certainly, in my opinion, an illogical and inhuman practice. I was accused of using religious jargon to prove my point when I said torture is evil. But torture is not mysterious or esoteric. The effects are palpable. The study of torture and its effects are scientific.

John Joseph Clancey: We should also do a study of how much psychologists focus on/are aware of torture and its effects. We need to use important information like this when talking to parliamentarians.

3. Answer Styannes, AHRC: (1) Thank you for your interesting talk. I wanted to ask about the psychological effects of torture, which is a legal term, and the specific psychological effect of violence. (2) Recalling what you said about the memory of a traumatised person, I would like to ask whether it is possible to train individuals to guard against "black outs"? This is important for human rights defenders who are constantly under threat of violence, and who need to provide details for a case to be waged in court.

Dr Rajat Mitra: There are a couple of things we all need to know about memory. You never forget. Previously they thought that memory was localised but it's been proven now otherwise (we still do not know the precise way in which this fragmentation happens).

I was talking of torture as a subset of violence. The thing characterising torture is the intensity, close contact (it's always personal) and physicality of the experience. I have extreme difficulty obtaining data because such abuse is typically perpetrated by authority (usually authority you are supposed to trust/depend on). There are very few who are able to do long-term and practical work with torture survivors. This is because these workers threaten the very system in which they operate. They risk their livelihoods and attract threats to their person and family.

4. Nandana Manatunga, Sri Lanka: You say human beings freeze. When it comes to the legal arena, freezing, particularly in cases of rape, it is sometimes described as giving consent ("Why did not you protest or run away?").

Dr Rajat Mitra: Judges now examine reasons why victim didn't run. For instance, if the perpetrator(s) threatens to carry out further physical hurt (killing her or harming her family). Also, coming from patriarchal culture, I understand that some societies teach their women to submit and fear men. We now know that the "fight or flight syndrome" understanding of response to trauma is now outdated. Freezing can be a natural response under overwhelming stress to maximise our chances of survival.

5. Nandana Manatunga, Sri Lanka: Perpetrators do not accept culpability. I remember a police officer in Kandy who was known for torture. He came personally to me to ask for help for victims' families. I didn't know if this was out of guilt.

Dr Rajat Mitra: This is probably a deviation from what we have learnt to expect. "The Sunflower" by Simon Weisenthal is a book in which a Nazi person is asking for forgiveness from the person he traumatised. However, this is the exception; most Nazis didn't. In fact, at the time of the act, most perpetrators genuinely believed they were doing the right thing.

Stanley Milgram's experiment that revolutionised psychology: university graduates were chosen and told to give electric shocks to another group of subjects, told it was a scientific experiment. Of course shocks weren't real, but the experiment blasted myth – the ability to be cruel cuts across cultures. Perpetrators simply conferred responsibility of acts to those commanding them.

6. Eran Wickramaratne, Sri Lanka: Which is worse, mental or physical torture?

Dr Rajat Mitra: The two categories are not quite comparable, and my response would depend also on your definition of "worse". Does "worse" mean incapacitating/debilitating? Or does it mean less morally acceptable? Physical trauma also brings with it psychological anguish. Both physical and psychological injuries may be permanently damaging. I will take the stand that mental torture is "worse". The human body will surprise you. It has a high threshold of pain. Simply brutalising a terrorist often does not result in information. But begin to eat away at the mind and there are encouraging results. Mental trauma, because it isn't visible, is also neglected. Frequently, treating the mind is less straightforward, less easily resolved than a physical injury.

7. Samar, AHRC: What [can we do] when violence is so much a part of everyday life that people are either desensitised or begin to consume/give social sanction to such violence (e.g. Brahmin "enjoying" or approving the beating up of a Dalit)?

Dr Rajat Mitra: Bystanders get a "high" or excitement that is not quite enjoyment. It's an imprint on the brain, a lasting impression. You can't seem to stop watching, partly due to fear, partly due to shock, partly due to relief that you are not the victim. When the scene's over and you talk to them, you realise how seriously affected they are by the event. The fear sets in. The best control mechanisms for fear are subtle. You may not even realise it's there until much later, or at all. We shouldn't begin with the premise that the bystander or perpetrator "enjoys" the torment either— they do so out of training, habit, ignorance. They might require just as much help as the victim to escape the vicious cycle.

8. Hasina Kharbhih, India: I've worked in northeast India quite a bit, with law enforcement and non-state actors as well. Both groups adopt torture to accomplish their organisational or other selfish personal goals. Law enforcement "gear up" to alcoholism because they're asked to perform certain things they may not agree with. The violent actions spill over into their homes and their family becomes more vulnerable too, to attacks by these same individuals.

Dr Rajat Mitra: Officers themselves need medical-psychological support to address these anger and alcoholism issues. While an addiction or bad habit may not necessarily imply or cause a person to be capable of monstrous acts, these can fuel a vicious cycle. Feelings of disempowerment or general helplessness in your job may lead to escapist drinking, for instance, to viciously beating your child at home simply because it's an environment in which you can still assert your authority. The child suffers and the home is no longer a safe place to be. The parent, usually the father, might also feel guilty later on but this only fuels the bitter feeling of powerlessness, which will lead to further violent acts, momentary outlets through which the individual may be expressing his rage and frustration.

9. Kanyarat Wiphatawat, Thailand: Thank you Doctor for your presentation. I wanted to ask for your views concerning torture victims' right to remedy and redress (i.e. not just monetary compensation but opportunities and funds for rehabilitation).

Dr Rajat Mitra: It is important we look into these seriously. We have to first acknowledge that torture is just not worth it. Even without considering what is moral or ethical, the real cost of torture is very, very high. The ecological history of humanity tells us that certain diseases, practices or events affect all of humanity so badly it threatens our communities' and species' survival. In the past it may have been tuberculosis, bubonic plague, smallpox, AIDS, witch hunts or even war. Today I would say that in parts of the world, the social, political and economic consequences of torture has reached the same epic proportions. If we do not stem the practice, now so prevalent in parts of Asia, we may one day find that we are notable to. Granting remedy and redress to victims of state-sponsored torture is within our power. As parliamentarians, as professionals, as people with a conscience, I urge all to act today.

10. Baseer Naveed, AHRC: I want to know the exact effect on lives of torture victim. A male victim/perpetrator becomes aggressive, the female victim/perpetrator mostly become extremely submissive, withdrawn.

Dr Rajat Mitra: If effect occurs to entire family, it's less destructive (however perverse that sounds) because the experience is common to all the individuals and there is an emotional

understanding, however tacit, amongst them. If torture occurs only to one or a few individuals within the family, the "rate" of suicide, divorce and recurring acts of violence is high. Women are particularly susceptible to suicidal tendencies and the inability to parent or connect with her children (nurturing capacity is diminished) – this is controversial, but makes sense to me.

11. Poonsuk Poonsukcharoen, Thailand: What is the difference between Post-Traumatic Stress Disorder (PTSD) and traumatic memory?

Dr Rajat Mitra: Traumatic memory has not been linked to PTSD. Rather, it is disrupted normal memory.

12. Abbasi Nusrat Bano, Pakistan: Last night in a graveyard in Pakistan 45 women were raped, all victims of a single man. Families suspected they were tortured. The man responsible was asked why but he said he didn't know. Are these fetishes applicable to perpetrators of torture?

Dr Rajat Mitra: There are people addicted to sexual assaults – brain receives an adrenaline "high" from different stimuli (from committing rape on children, keeping bomb in crowded market place, killing people). We're still trying to discover who will get high on what. Most people experience a sense of extreme excitement or euphoria when going through what we would consider "normal things" such as having your children run toward you, or when you receive an award. Others have feet fetish, or may be addicted to alcohol or drugs. There are certain arguments that hurting someone else may or may not get you "high", but being able to exercise power and complete control does. You need to uncover the individual's personal history to discover what the man's response is to corpses, in the case you raised, or to torture. However, these studies are (i) retroactive and therefore not as helpful in preventing torture, (ii) are time, energy and human resource consuming, and often are not even conducted in developed countries where torture does not seem to be as prevalent. In a country where torture is prevalent, it appears justified. In countries where torture isn't prevalent, it is still a taboo topic, and politicians still do not prioritise the issue. It is difficult therefore to get funds for such research and rehabilitation.