

Le 10 février 2010

Chers collègues,

Vous allez bientôt participer à la troisième conférence franco-israélienne sur les neurosciences, la neurologie et la psychiatrie qui doit se tenir à Haïfa entre le 14 et le 18 février prochains.

A cette occasion, nous voulons attirer votre attention sur le fait que de nombreux témoignages attestent que les détenus palestiniens dans les prisons israéliennes sont soumis à des pressions psychologiques et physiques, qui relèvent de la qualification de torture et qui tombent ainsi sous le coup du droit international, à savoir :

- L'article 5 de la Déclaration Universelle des Droits de l'Homme (ONU, 1948) : "No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment."
- L'article 7 de la Convention Internationale sur les Droits civils et politiques (ONU, 1966) : "No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment..."
- La Convention de Genève relative à la protection des civils en temps de guerre (1949).
- La Déclaration contre la Torture (ONU, 1975).

La définition de ce que l'on entend par torture se trouve dans la Convention contre la torture et les autres traitements ou punitions cruels, inhumains et dégradants (ONU 1984), convention signée par Israël en octobre 1986.

À cela il faut ajouter la Déclaration de Tokyo de l'Association Médicale Mondiale (WMA), révisée et réitérée dans les conseils qui se sont tenus à Divonne les Bains (France) en 2005 et 2006. Le Préambule de cette Déclaration stipule :

- « Le médecin a le privilège d'exercer son art pour servir l'humanité. Il doit conserver et rétablir la santé physique et mentale pour tous, sans discrimination, consoler et soulager ses patients. Le médecin doit garder le respect absolu de la vie humaine dès la conception, même sous la menace et ne fera pas usage de ses connaissances médicales contre les lois de l'humanité. Dans cette déclaration, la torture est définie comme les souffrances physiques ou mentales infligées à un certain degré, délibérément, systématiquement ou sans motif apparent, par une ou plusieurs personnes agissant de leur propre chef ou sous l'ordre d'une autorité pour obtenir par la force des informations, une confession ou pour toute autre raison. »

Or la participation de médecins israéliens à la pratique de la torture est attestée par de nombreuses ONG, internationales et israéliennes, comme Amnesty International, Physicians for Human Rights (PHR), Public Committee Against Torture in Israel (PCATI), B'Tselem,

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HaMoked. Vous trouverez en annexe quelques éléments des dossiers que ces ONG ont rassemblés à partir de témoignages dûment avérés. Beaucoup d'autres sont accessibles sur leurs sites ou dans leurs publications :

<http://www.stoptorture.org.il/>

<http://www.btselem.org/English/>

[http://www.hamoked.org.il/index\\_en.asp](http://www.hamoked.org.il/index_en.asp)

Les médecins israéliens ne sont pas toujours conscients de ces faits qui sont une des conséquences de la politique d'occupation et de colonisation des territoires palestiniens conquis en 1967, ni même de la signification du comportement de certains d'entre eux. Ceux qui violent ainsi le droit international et l'éthique de leur profession doivent être sanctionnés, et nous espérons que la Conférence de Haïfa vous donnera l'occasion de le rappeler à vos collègues israéliens.

Veillez agréer, cher collègue, l'expression de nos sentiments distingués.

A handwritten signature in black ink, appearing to be 'IE' or similar initials, written in a cursive style.

Ivar Ekeland, Président de l'AURDIP

Sonia Dayan-Herzbrun et Joseph Oesterlé, Vice-présidents

## Annexe I

### **Torture and ill-treatment of Palestinian detainees**

#### **Torture et mauvais traitements envers des détenus palestiniens.**

Rapport de *Hamoked* (Center of Defense of the Individual) et *B'Tselem*

www.btselem.org/Download/200705\_Utterly\_Forbidden\_eng.doc

Extraits:

1. The findings of the report are based on the testimonies of 73 Palestinian residents of the West Bank arrested during the period July 2005 through March 2006 and interrogated by the GSS. Although this does not constitute a statistically representative sample, it provides a valid indication of the frequency of the phenomena described in the report.

2. The witnesses in the sample reported beatings, painful handcuffing, curses and humiliation, and the denial of basic needs at the hands of security personnel from the time of arrest and through their transfer to the General Security Service (GSS). Approximately two-thirds of the witnesses (49 out of 73) reported that they had suffered at least one of these types of violations, which are defined in international law as prohibited abuse and may even constitute torture. The research did not examine whether this abuse was intended to “soften up” the detainees ahead of their interrogation by the GSS; however, this is undoubtedly the practical outcome.

3. The GSS interrogation regime – routine abuse. The interrogation regime of the GSS includes seven key components that in varying degrees violate the dignity and integrity of the interrogees. This violation is exacerbated by the combined activation of these components during the interrogation period, which lasted for an average of 35 days in the sample:

1. Isolation from the outside world – prevention of a meeting between the interrogee and his attorney and Red Cross representatives;
2. Conditions of imprisonment as a means of applying psychological pressure – detention

- in stifling and stench- filled cells in conditions of solitary confinement;
- 3. Conditions of imprisonment as a means of physical enfeeblement – prevention of physical activity, disruption of sleep, and substandard food;
- 4. The “Shabah” position – painful and protracted shackling to the chair of the interrogees’ hands and legs;
- 5. Curses and humiliations – curses, full body searches, shouting, spitting, etc.
- 6. Threats – including threats of grave physical torture, arrest of family members, etc.
- 7. The extraction of information by informers (“asafir”) – this method is not injurious in itself, but its efficacy depends largely on the abuse of detainees immediately prior to its use.

These means were used against the vast majority of the witnesses included in the sample. The means are not the “inevitable” by- product of the needs of the detention and interrogation. Rather, they are intended to break the interrogees’ spirit. Accordingly, they are contrary to the Supreme Court ruling and, according to international law, constitute prohibited abuse. Moreover, in certain circumstances they may even constitute full-fledged torture.

4. “Special” interrogation methods are used by the GSS interrogators in some cases in addition to the routine means, probably in cases in which the interrogees are defined as “ticking bombs.” These “special” methods include direct physical violence. The witnesses in the sample described seven such methods:

- 1. Sleep deprivation for more than one day (15 cases);
- 2. “Dry” beating (17 cases);
- 3. Painful tightening of handcuffs, sometimes preventing blood circulation (5 cases);
- 4. Sudden pulling of the body to the rear causing pain to the wrists, which are shackled to the chair (6 cases);
- 5. Pushing the head to the front or the rear while holding the chin painfully or pushing it with the fist (8 cases);
- 6. The “frog” position (forcing the interrogee to crouch on the tips of his toes), accompanied by pushing (3 cases);
- 7. The “banana” position – the interrogee’s body is bent in an arch form while he is seated on a chair without a backrest (5 cases).

These means are clearly defined as torture in international law.

## Annexe II

### **Letter of complaint by PHR-Israel and the Public Committee Against Torture in Israel datée du 12 février 2009 :**

The case of Mr. Bahajat Yamen, ID 901725358

Date of arrest: 19 May 2004 at his home.

Interrogated in: The interrogation facility in Petah Tikva Detention Center.

Testimony concerning the course of interrogation: Mr. Yamen states that his interrogation began after he arrived at the facility and continued for four days, with the use of violence and torture including: Protracted use of the “Shabah” position and particularly tight handcuffing for protracted periods, stopping the circulation of blood to the hands and causing severe pain. Mr. Yamen describes instances of violence by the interrogators, including one case that left a wound and scratches on his chest and neck.

Encounter with the medical system: States that on 22 May 2004, at the end of the interrogation, he felt unwell, fell down, and was taken to the facility clinic. He was inspected in the clinic by a physician whom he described as “a ginger-colored physician with white hair, tall, and red-faced.” After this examination Mr. Yamen was taken back for interrogation, which continued without violence and/or torture.

Issue to be clarified: The identity of the physician who attended to Mr. Yamen can be clarified. It can then be examined whether the physician documented the signs of violence in the detainee’s medical file; whether he reported these to any body; and whether he took steps to halt the violence/torture.

The case of Mr. Hassan Ladadiya, IF 988373486

Date of arrest: 4 June 2006

Interrogated in: The interrogation facility in the Russian Compound, Jerusalem.

Testimony concerning the course of interrogation: He was examined at the facility clinic after

suffering a loss of sensation in his hands due to the cuffing. States that the examination was cursory and he was then returned to interrogation, which included torture. On the fifth day of his interrogation his hand swelled and he was again examined at the prison clinic. He was taken to Sha'arei Tzedek Hospital where he underwent an x-ray and a clinical examination that excluded the possibility of broken bones in his hands. On the seventh or eighth day of his interrogation he was again examined in the clinic and was referred to Hadassah Hospital. At Hadassah he was examined by a physician who told him that he was suffering from a laceration of a blood vessel and bruising on the left hand and that he should be referred to a particular physician at Hadassah Ein Kerem Hospital. The same day he was taken back to interrogation, that included torture. Two or three days later his hand was continuing to swell and he was transferred to Hadassah Ein Kerem and examined by a professor who told him that it was not a cut but an infection and that there was no medical or surgical treatment and he should massage his hand.

Attitude of the authorities: The Public Committee Against Torture in Israel contacted the attorney-general and the Chief Medical Officer of the Israel Police, Dr. Lankovsky, concerning this case. A copy of the letter was also forwarded to you. The Chief Medical Officer of the Israel Police replied: "Your correspondence alleges that your client was returned to interrogation after examination. In fact, the physician recommended complete rest and he was summoned for a check- up after two hours and was referred to the emergency room on the same day. In addition, on 6 June a report was forwarded by the physician to the commander of the detention center and to the deputy commander of the Jerusalem District [Police] concerning your client's complaints." In your own reply to the Public Committee Against Torture in Israel, you requested that the organization "forward for my review the attorney-general's reply; I shall then decide how to act on this complaint."

Issue for clarification: The identity of the physician who treated Mr. Ladadiya at the detention center should be clarified and it should be examined what actions he took to prevent the continuation of the torture. If the remarks by the Chief Medical Officer are correct and he indeed made an effort to prevent the continuation of the torture but was unsuccessful in this, we would ask what the IMA intends to do about this matter. It would also be worth clarifying who were the physicians who examined Mr. Ladadiya at the various hospitals in order to

examine whether his complaints and medical condition were properly documented and what steps – if any – were taken by these hospital physicians to prevent the continuation of the torture.

### **Annexe III**

#### **Un cas récent cité par le Docteur Ruchama Marton, présidente de PHR**

**Janvier 2010**

“M” was arrested April 2008. His affidavit states that he was:

- Interrogated for 20 days, most of the time seated on a chair fixed to the floor, hands tied behind his back.
- Beaten and shaken, while shackled to the chair.
- Threatened that his house would be demolished and mother would be arrested. Indeed she was.

Following severe beatings, he fainted and sustained cuts to his head and face. He suffered severe pains in his jaw to the extent he was unable to eat. In presence of ambulance paramedics and a doctor, interrogator instructs colleagues not to tell what happened, but to say “M” fell down the stairs. Hospital doctors treat him while still shackled. “M” receives stitches to head and face. Doctor is asked by interrogators not to order hospitalization. The doctor obeys.

“M” was brought back to prison. Interrogators ordered “M” to wait inside the ambulance 3 hours to avoid having “M” examined by the prison doctor (the one who asks too many questions). “M” was finally released to another doctor, (the doctor who doesn’t ask questions). When M complains to the prison doctor he is told to shut up, sent shackled to confinement cell without medicine. Medication administered only following Red Cross visit.

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