

What are the objectives of thematic session N°8?

- To identify the variety of individuals, institutions and authorities that could make more of a sustained contribution to the prevention of torture and other ill-treatment
- To consider ways to encourage those individuals, institutions and authorities to be more involved in actions to prevent torture and other ill-treatment

Why is thematic session N°8 relevant to the OPCAT Global Forum?

Although the OPCAT has proposed for the first time a novel system of regular actions by complimentary **international and national bodies of experts** to prevent torture, it is clear that they cannot achieve prolonged progress in prevention on their own.

The prevention of torture involves a **holistic and multidisciplinary approach**, which seeks to reduce the risk of torture and ill-treatment occurring. Detecting risk factors, analysing suitable solutions, making constructive recommendations and taking actions that will reform current practice and policy usually requires the **active involvement, at different stages, of a broad variety of individuals, institutions and authorities** with different backgrounds, experiences and areas of responsibility.

These “**other actors**” can include: judges, prosecutors, lawyers, bar associations, parliamentarians, doctors, psychiatrists, forensic scientists, medical associations, interrogators, police trainers, detained persons, torture survivors, ombudsmen, national human rights institutions, government officials, regional human rights bodies, OHCHR, UNDP, ICRC, NGOs, academics and the media.

What are the main issues to be discussed?

1. Good practice

- The **OPCAT** has contributed to increased awareness of the holistic and multidisciplinary nature of torture prevention. This has translated into a **wider variety of actors being involved** in actions to prevent torture through the campaign, preparations and implementation stages of the OPCAT.
- In some countries there have been **broad national consultations** on the OPCAT prior to ratification, for example in Paraguay and Togo. **National dialogues** on OPCAT implementation after ratification have taken place in countries such as Chile and Georgia. **Inclusive models of NPMs** have been designated in some countries to involve existing oversight institutions, such as in New Zealand and the UK.
- The **SPT** now comprises a wide range of expertise, including medical doctors, forensic doctors, psychologists, professionals with national detention monitoring experience, lawyers, judges and magistrates, experts in administration of justice and management of detention centres and former police officers.
- **Inter-governmental organisations and regional bodies** have shown a strong interest in the OPCAT and have promoted its ratification and implementation, for example OHCHR, UNDP, OSCE, Council of Europe, Inter-American Commission on Human Rights and African Commission on Human and Peoples’ Rights.

- **National Human Rights Institutions** have become more interested in their role in preventing torture, such as in monitoring places of detention, proposing anti-torture laws and promoting OPCAT ratification.
- **Existing detention monitoring mechanisms**, including the ICRC, are increasingly willing to cooperate to better prevent ill-treatment.
- **Judges and prosecutors** have been encouraged to better appreciate their preventive role, including in custodial visits, through multi-lingual guides and seminars by a variety of actors in all regions.
- **Parliamentarians** have been actively involved in the drafting and adoption of anti-torture laws, for example in the Philippines, Benin, Uganda and Australia.

2. Gaps?

- Despite progress, many actors remain **unaware of their potential role** in preventing torture. Sometimes they are **insufficiently utilised or coordinated** by those already working for the protection of persons deprived of their liberty.
- In some cases, relevant actors **do not feel compelled** to take action because they do not fully appreciate the real nature and effects of torture and other ill-treatment (on victims, families, communities and the society).
- **Public opinion** regarding torture is still mixed in many countries – without an overwhelming climate of opinion against torture, relevant actors may not be propelled into action.
- Where actors of different disciplines are involved in work to prevent torture, there tends to be limited **information sharing and cross-fertilisation of ideas**.
- As more actors get involved in torture prevention, there is a need for **coordination and coherence**. However, it is not always clear who is best placed to coordinate synergies.

3. Ways forward?

A more inclusive approach to preventing torture could involve:

- Improved **public acknowledgement** that the holistic preventive approach **requires the inclusion of many** to achieve more in reforming the opaque world of detention.
- **Commitment to outreach** to proactively persuade a broad variety of actors of their part in preventing torture, including in “non-OPCAT” States Parties. Torture prevention strategies could systematically include the **mapping of relevant actors** and consideration of how they can be encouraged to act.
- Public acknowledgement by torture prevention bodies of their **need for allies**.

Five questions for debate

1. **Which actors** have a potential to contribute to the prevention of torture but are not currently doing so? Why are these actors not fulfilling their potential role?
2. How can these actors be **encouraged** to make a more sustained contribution to the prevention of torture?
3. What **actions can the SPT take** to encourage more inclusive approaches to prevention?
4. Is there a risk of incoherence of initiatives by too broad a variety of actors? Who is best placed to coordinate the synergies of actions to prevent?
5. Does the inclusive approach assume too much that there is a **general interest and commitment** to the prevention of torture? How to address this?