

BILAG 10
CHRISTIAN HARLANG

Bilag 1D omfatter underbilagene 3, 12, 13, 17 og 18, som er oprindelige bilag til stævningen af 28. september 2012 i Østre Landsrets sagsnr. B-3534-12. De øvrige oprindelige bilag er fremlagt under bilag 1B, 1E og som bilag 81-83.



HÆRENS OPERATIVE KOMMANDO

O/IO
096.292

0302368 - 292 2004-07-19

(bedes anført ved henvendelser)

Til
Forsvarskommandoen

Emne:
Månedsrapport vedr. tilsyn med militære og civile "danske" fanger i DANBN AOR JUN 04.

Ref.:
DANBN skr. O.096.205-1506 af 2004-06-30

Bilag:
1. Månedsrapport JUN 04
2. Statusoversigt JUN 04

1. Hermed fremsender Hærens Operative Kommando (HOK) månedsrapport for JUN 2004 vedr. emnet.

2. Måneden for DANBN har været præget af et intensivt arbejde med at implementere nye tiltag til sikring af, at det udvidede tilsyn med fanger kan gennemføres hensigtsmæssigt. I denne forbindelse har DANBN indarbejdet nye afsnit i DANBN SOP. DANBN angiver endvidere, at arbejdet med fangetilsyn og lign. har været hæmmet af den operative situation i Irak, signalproblemer, besøg, pålagte begrænsninger i bevægelsesfriheden, utilstrækkelig adgang til pålidelig information fra civile lokale myndigheder, problemer med pålidelig oversættelse af skriftlig materiale og tidsmæssig sammenfald med flytning af UK BDE ENH. Herudover har påbegyndelsen af nedlæggelsen af CPA, der hidtil var ansvarlig myndighed for fængsler, bidraget til friktionerne.

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ELDOK

RUTINE

BILAG 3

TIL TJENESTEBRUG
Afklassificeret 2007-07-28

CHRISTIAN HARLANG



FORSVARSKOMMANDOEN

04-022/41-1		DCX Nr. 423	
8 KT	ERHOLDNING	BILAG	EKS.
AHO	27 JULI 2004		
ER	B	YMA	05/9-04

FKO ODO2

UM

102.0

0402413-87

2004-07-27

(Bedes anført ved henvendelser)

Til
Forsvarsministeriet

BILAG 10, underbilag 3

CHRISTIAN HARLANG

Emne:

Månedsrapport vedr. tilsyn med militære og civile fanger i DANBN AOR JUN 2004.

Ref.:

HOK skr.0302368-292 af 2004-07-19.

Bilag:

1. Månedsrapport JUN 04.
2. Statusoversigt JUN 04.

1. Hermed fremsender Forsvarskommandoen (FKO) månedsrapport for JUN 2004 vedr. emnet. FKO kan tilslutte sig det afrapporterede, idet de er i overensstemmelse med de løbende meldinger fra DANBN vedr. ændringer i status for tilbageholdte fanger i hhv. DTDF og Basra fængsel.

2. Sagsbehandler ved FKO er OK L. J. Jensen, lok. 3127.

E.b.

A. C. HOLMEN
major

Fg. chef for Den Internationale Operationssektion

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Forsvaret.dkTIL TJENESTEBRUG
Afklassificeret 2007-07-28

TIL TJENESTEBRUG
Afklassificeret 2007-06-29

Det er HOK vurdering at DANBN har arbejdet loyalt for at efterleve de meddelte bestemmelser vedr. tilsyn med indsatte.

3. Sagsbehandler ved HOK er MJ B. Andersen, lok. 7904.

E.b.

E. RÆESE-PETERSEN
major
Fg. chef for Den Internationale Operatonssektion

GENERELT

1. Der har i JUN 04 været foretaget 5 tilsyn/identifikationsbesøg med tilbageholdte i h.h.v. Basra fængsler og DTDF (UK). I JUN er der tilbageholdt 5 personer og frigivet 4. Under et tilsyn og på baggrund af informationer fra den medfølgende dommer, blev det d. 25 JUN klarlagt at der var yderligere 3 tilbageholdte, der skulle henregnes under "danske" fanger. Fanger der ikke forud var opført i danske journaler. Der er således en "tilgang" på 4 fanger i JUN.

TILSYN

2. Den 9. JUN aflagdes uanmeldt besøg i DTDF.

Deltagere var MJUR, OLG og 2 MPSG.

Formålet var at tilse de to fanger, som DANBN havde overbragt til DTDF lørdag, den 29 maj 2004. Delegationen blev vel modtaget af personalet. Der blev på opfordring fremskaffet lokal tolk.

Af hensyn til den igangværende efterforskning og afhøring af fangerne bad personalet om lov til at tre engelske afhøringsofficerer måtte overvære fangernes reaktion på vore spørgsmål. Der sås ikke umiddelbart nogen grund til at forhindre dette.

De to fanger blev bragt ind i besøgsrummet en af gangen. De var velsoignerede, iført rene klæder (dish-dash), de var ulænkede og havde ikke anlagt håndjern. Fangen tog plads på en stol overfor de 4 besøgende. Arrangementet besluttedes egenhændigt af delegationen. Der var herefter lejlighed til at interviewe fangerne.

MJUR forklarede, at årsagen til besøget var, at fangerne som hørende til det danske område skulle besøges for at sikre, at deres forhold var efter reglerne og at deres sager blev fremmet mest muligt. Det blev endvidere fremført, at sådanne besøg kunne blive gentaget senere.

Adspurgt af MJUR om fangerne var bekendt med, hvorfor de var anbragt i DTDF svarede begge benægtende. Efterfølgende foreholdtes englænderne disse svar, og det forklaredes, at samtlige fanger udtrykte denne holdning på trods af, at der efter reglerne blev gjort meget ud af at forklare fangerne, at disse var tilbageholdt af sikkerhedsgrunde med oplysning om konkrete anklager. Dette blev endvidere skriftligt overgivet til såvel fangerne selv som disses pårørende. Det var en almindelig attitude, idet fangerne ved at tilkendegive uvidenhed mente at fremme deres egen sag.

Adspurgt om fangerne var klar over, at de havde ret til at få besøg af pårørende forklarede fangerne, at de godt vidste dette og at besøg ville blive tilladt efter de første to ugers tilbageholdelse. Der bliver givet skriftlig information herom til fangerne samt disses pårørende.

Adspurgt af OLG om forholdene i fængslet, herunder om kost, hygiejne, behandling i øvrigt erklærede begge fanger, at de intet havde at klage over.

OLG modtog på opfordring fangernes lægejournaler, som ikke gav anledning til yderligere spørgsmål. Adspurgt om fangerne havde været udsat for hårdhændet behandling eller vold i forbindelse med anholdelse eller senere svarede de benægtende. Adspurgt om fangerne mente at lide af sygdomme, der ikke behandledes ordentligt erklærede begge, at dette ikke var tilfældet.

Afslutningsvis påpegede delegationen, at kontrolbesøg ville forekomme fremover såvel kollektivt som individuelt. Endvidere forberedtes personalet på, at der samme dag af DANBN var tilbageholdt personer, som efter udspørgen formodedes at blive oversendt til DTDF i løbet af natten.

Besøget varede sammenlagt ca. 40 minutter og gav ikke anledning til nogen bekymring.

2.1. Den 16 JUN aflagdes der besøg hos DTDF.

I besøget deltog MJUR, OLG samt ny OLG og MP. Der deltog fra engelsk side en observatør/fangeledsager samt DTDF tolk.

Formålet var at tilse [redacted] fra stammen [redacted]; fødselsår [redacted]; der var blevet overdraget den 9 JUN 2004. Den ønskede fange blev på opfordring bragt ind i besøgsværelset og delegationen anbragte sig på en stolerække med fangen frontalt siddende foran. Fangen var ikke lænket eller på anden måde hæmmet. Han var iført en blå bomuldskedeldragt med sandaler. Han virkede umiddelbart sund og rask uden synlige tegn på skader eller lignende.

MJUR forklarede, at delegationen var fra den danske hær og at formålet var at sikre sig, at fangens blev behandlet efter gældende forskrifter, konventioner m.v. Fangen spurgte, om det var tilladt at fremføre sine synspunkter om alt, hvilket MJUR bekræftede.

Adspurgt af MJUR hvorvidt han var klar over, hvorfor han var i varetægt svarede fangen, at han ikke var klar over, hvorfor han blev holdt indespærret. Han forklarede endvidere, at han havde siddet fredeligt på EI Sadr kontor i Al Qurnah da Danskerne havde angrebet (stormet) bygningen og fastholdt ham. Han var herefter blevet udspurgt og efterfølgende blevet overført til DTDF.

Han var meget fortømt over det skete og erklærede, at han var helt uskyldig i alt når talen var om fjendtlighed overfor danskerne eller CF. Han agtede at protestere og klage over, at han ikke var blevet sigtet eller anklaget inden 24 timer. Klagen agtede han senere at fremsætte overfor FN, CF og CPA. MJUR forklarede, at hans udsagn blev noteret og at han ikke ville blive forhindret i at klage.

MJUR spurgte herefter, om han var blevet foreholdt sine rettigheder, herunder, at hans sag ville blive taget op regelmæssigt og at han ville få mulighed for at få besøg efter de første to uger, hvis han ønskede dette. Fangen havde ingen kommentarer hertil ud over, at han var bekendt med, at besøgs mulighederne var begrænsede til et par gange om ugen.

Adspurgt af OLG om han havde følt sig forulempet fysisk under anholdelsen, under den første udspørgen, under transporten til DTDF svarede fangen benægtende. På eget initiativ fremførte fangen derimod, at han var blevet meget dårligt behandlet af "ham derinde", hvorefter han pegede ind mod modtagelsesværelset, hvor også DTDF administration har til huse. På OLG spørgsmål om, hvorvidt han mente at have lidt fysik overlast svarede fangen igen, at han ville klage over ikke at blive forelagt en sigtelse.

Adspurgt af OLG omkring mad og drikke, indlægeringsforhold, de sanitære forhold, blev der ikke anført noget at klage over. Adspurgt om fangen led af nogen sygdom, der ikke blev behandlet svarede benægtende.

Fangen blev herefter spurgt om der var mere han ville fremføre, hvorefter han igen ønskede at klage, hvilket igen blev besvaret med, at hans ønske var noteret. MJUR forsikrede, at han ville blive behandlet efter reglerne og såfremt han viste sig at være uskyldig, ville alt ordne sig. Viste det sig, at han var involveret i ulovligheder eller lignende,

ville han blive fortsat tilbageholdt og behandlet efter disse regler. MJUR afsluttede med at sige, at den danske delegation senere ville komme igen for at tilse fangen. Herefter blev fangen ført ud.

2.1.1. Efter besøget foreholdtes den engelske administration de klager, som fangen havde fremført og som observatøren selv havde overværet. Administrationen fremførte, at sådanne klager – herunder klage over at blive afhørt af englænderne var almindeligt forekomne. Han forsikrede at alt foregik "efter bogen" og henviste igen til f.eks. de i modtagelsesrummet mange opsatte plakater på arabisk og engelsk med forklaring af alle rettigheder etc. Herefter skønnede OLG og MJUR, at de fremførte klager ikke gav anledning til yderligere særlige tiltag.

2.1.2. MJUR informerede efterfølgende om, at nye uafhængige kilder havde oplyst, at netop tilfangetagelsen af den pågældende nu havde udløst trusler og planer om gengældelsesaktioner i form af morterbeskydning af Camp Edén. DANBN tog disse trusler alvorligt og havde indført skærpede foranstaltninger i den anledning. Englænderne bekræftede, at de allerede var bekendt med disse oplysninger. MJUR henviste til i givet fald at kontakte S2 for yderligere information. Mødet tog ca. 45 minutter.

2.2. Jf. ref. blev der d. 23 JUN gennemført fangetilsyn i Basra fængsel.

Den danske delegation bestod af MJUR, OLG og MP. Endvidere deltog den lokale dommer fra Al Quamah i besøget for at bistå med identifikation af 2 af 6 fanger, som ikke tidligere har kunnet identificeres. En britisk observatør overværede besøget.

2.2.1. Besøgets indledende formål var at tilse to fanger, som er DK ansvar, men som jf. tidligere meldinger ikke har kunnet identificeres med sikkerhed. Begge fanger blev tilset og identificeret. Den ene fange led af astma, men er under behandling.

Besøget ved disse to fanger giver ikke anledning til yderligere bemærkninger.

I forbindelse med besøget har DANBN fået oplysninger om yderligere fanger, der angives at være pågrebet i det område, der er omfattet af det danske militære ansvarsområde. Den lokale dommer har med DANBN gennemgået en liste over fanger, som han vurderede kunne have DANBN interesse. Listen indeholdt 48 navne over personer, som tilhørte hans område, men som var overført til andre fængsler eller retskredse m.h.p. dømfældelse, afsoning eller varetægt.

Ved nærmere gennemsyn af listen, blev denne opdelt efter, hvem der indledningsvis havde anholdt de pågældende. Det resulterede i, at listen kunne indsnævres til 13 personer, som muligvis kunne henhøre under dansk ansvar.

Ved ankomst til Al Makil fængslet blev det erkendt, at der tillige hensad 3 varetægtsfanger, som på listen var opført som siddende i Al Quamah og som muligvis kunne henhøre under dansk ansvar.

2.2.2. Efter gennemførelse af det planlagte tilsyn med de to fanger jf. pkt. 2.2., bad delegationen uvarslet om at måtte tilse ovennævnte 13 + 3 = 16 fanger. Dette ønske blev efterkommet. 15 fanger blev tilset, idet den 16. fange midlertidigt var indlagt på civilt sygehus med sygdom.

På grundlag af interview med de 15 fanger konstateres det, at 13 af fangerne enten var anholdt af UK- enheder eller af irakisk politi. De sidste 3 fanger var anholdt af DK enheder og efterfølgende overgivet til irakisk politi. Den ene af de tre, er den syge fange nævnt ovenfor, han er fængslet i samme sag som sin bror, som også er dansk fange. De to fanger giver ikke anledning til bemærkninger, den tredje fange (den syge) blev tilset d. 26 JUN (jf. pkt. 2.3.).

2.2.3. De resterende 13 fanger som blev tilset ved den uvarslede inspektion 23. juni 2004 kan henføres til engelsk eller irakisk ansvar f.s.v.a. tilsyn.

8 af de 13 fanger klagede over at være mishandlet af civilt politi under deres tilfangetagelse. Herudover led 3 af sygdomme. I pkt. 2.2.7. er de enkeltes klager og sygdomme listet.

Den britiske observatør spurgte, hvorledes han skulle forholde sig til disse klager, hvortil MJUR henviste ham til at melde via egen kommandovej, da samtlige klager vedrørte fanger under britisk eller irakisk ansvar.

2.2.4. Den irakiske fængselsinspektør hidsede sig ved slutningen af besøget op. Interviewet strakte sig langt ud over normal besøgstid. Han betvivlede vor ret til at være i fængslet. Den britiske repræsentant beroligede ham. Fængselsinspektøren anklagede Danmark for ikke at gøre noget for ham og hans fængsel. Han mangler medicin, en bil til at transportere affald på og tilstrækkelige forsyninger af drikkevand. Han beroligedes med, at samtlige udsagn fra interviews indtil nu ikke har noget at udsætte på "hans" fængsel, men er koncentreret om dårlig behandling under afhøring på de lokale politistationer. Det positive indtryk af Al Meena fængslet falder i tråd med tidligere besøg.

På fængselsinspektørens skrivebord bemærker MP og OLG et visitkort fra en journalist ved det danske dagblad Politiken.

2.2.5. Som afslutning på besøget blev den britiske observatør spurgt om, hvordan situationen vil være efter 1. juli 2004. Han oplyste, at UK pr. denne dato stadig beholder et forhold til det civile fængselssystem, men i en mere tilbagetrukket mentorrolle. Det aftaltes, at fornyet kontakt fortsat sker gennem UK.BDE.

Det samlede besøg varede 2½ time.

2.2.6. Det totale antal fanger i civile fængsler, som kan betegnes som dansk ansvar er nu således 9.

2.2.7. Nummerliste over fanger, som ved det uanmeldte tilsyn (jf. pkt. 2.2.3.), hævdede at være udsat for overlast eller at lide af sygdomme under deres tilfangetagelse.

1. UK ansvar.

Hævder at have lidt overlast (slået) ved anholdelsen og forhør hos Ad Dayr Politi. 6 måneder siden. Ingen objektive tegn på vold. Dommeren kender sagen, men bedømmer det som løgn.

2. UK ansvar.

Hævder for 6 mdr. siden at være slået i hovedet med våben, at være brændt med cigaretter på fødderne, at være udsat for elektriske stød. Har ingen synlige ar efter vold. Dommeren bedømmer det som løgn.

3. UK ansvar.

Tidligere politimand. Har ar efter slag i hovedet, ar i venstre knæ. Hævder at have fået elektriske stød for 6 måneder siden. Det er på nuværende tidspunkt vanskeligt at afgøre alderen eller naturen af disse ar.

4. UK ansvar.

Meget ophidset yngre fange. Hævder at være slået, bl.a. med en gasflaske, at have fået armene vredet om for 8 mdr. siden hos Al Harithal politi.

5. UK ansvar.
Brændt med cigaretter. Ødelagt højre langemand. Venstre fod beskadiget og dårlig behandlet. Arm har været brækket. Ad Dayr politi. Svarende til venstre underarm og venstre fod ses ældre ar, som kan skyldes brandsår eller infektion.
6. Irakisk ansvar.
Lider af hjerteanfald. Er i medicinsk behandling. Højre arms albue beskadiget. Hævder at være misbrugt på kønsdele. Nashwa Politistation under afhøring.
7. Irakisk ansvar.
Har de sidste 7 år faldet om med krampor. Har psykiske problemer. Hævder at fået flere kindtænder knust. Har "krasningsmærker" på ryggen. Nashwa Police Station. Dommeren bemærker: "Denne mand er en gammel kending. Han er idømt 100 års fængsel i Saddams tid. Han er fuld af løgn".
8. Irakisk ansvar.
Får beroligende indsprøjtninger, nervemedicin, er blevet slået med kabellignende genstand. Tydelige ar som efter slag på ryggen. Udsat for elektriske stød. Hævder at politiet har taget billeder af hans sår for ikke at få mistanke kastet på sig. Billederne må findes i journalen. Journalen er ikke i dette annex-fængsel. Hovedfængsel er nu lukket.
9. UK ansvar.
Lider af astma der behandles af fængslets læge.
10. Irakisk ansvar.
Lider af astma. Er i behandling
11. Irakisk ansvar.
Har ondt i hovedet. Får behandling.

2.3. Den 26 JUN gennemførtes tilsyn ved DTDF fange nr. [REDACTED]

I tilsynet deltog MJUR, MP og LG. Herudover medvirkede fængselstolken samt en fangevogter.

Fangen blev ført ind i besøgsværelset. Han var iført lange bukser, sandaler og T-shirt. Han virkede glad, sund og rask. Han var ikke iført håndjern eller lign. MJUR forklarede grunden til besøget, idet det var anden gang man tilså fangen. Direkte adspurgt, havde han intet at udsætte på behandlingen i fængslet, herunder hygiejne, besøgsmuligheder og forhørsomstændigheder.

Fangen var bekymret for om hans sag fremmes og bekymret for sin (store) familie. MJUR forklarede at hans sag løbende følges og at der er garanti for terminer, hvor sagen samlet evalueres.

Fangen beklager sig over svie i øjnene, som forværres af sved, der siver ind i øjnene. Fangens helbedsjournal forelægges. Fangen er sat i behandling for en øjeninfektion med kloramphenikol d. 23/6-04 efter at have klaget over sviende fornemmelse i øjnene. fangen angiver, at han får ondt i øjnene af behandlingen, hvorfor han ikke længere ønsker at behandles. fangen forklares, at dette er normalt og at han skal fortsætte behandlingen.

Direkte adspurgt benægter fangen at have andre symptomer på sygdom. Han angiver, at han ikke tidligere har været indlagt på hospital eller taget fast medicin.

Han angiver, at han får rigeligt at drikke og spise, samt at de sanitære forhold er tilfredsstillende. Han angiver, at han på intet tidspunkt siden overgivelsen til danskernes varetægt har lidt fysisk overlast.

Afslutningsvis kontaktes den britiske MEDIC, der er ansvarlig for udlevering af medicin til fangen. MEDIC forklare, at det er meget vigtigt, at fangen fortsætter sin behandling og at man skal blive ved med at opfordre fangen hertil. MEDIC og administrationen fastholder, at man har opfordret fangen til at tage medicinen "100 times", men at man ikke kan tvinge behandlingen igennem overfor fanger, som ikke selv ønsker at medvirke. delegationen opfordrede til fortsatte gentagne opfordringer.

2.3.1. På spørgsmålet til administrationen om status for DTDF efter 30 JUN svarede at DTDF fortsætter uændret. Hjemmelen angives at være den nye UN resolution. Antallet af hårde indsatte er dog for nærværende reduceret til ca. 60 indsatte., alle udgørende den "hårde kerne", idet alle "stone throwers" er løsladt.

2.3.2. Adspurgt om relationerne mellem familien og en fange forklares, at Røde Kors er i kontakt med de indsattes familie. Røde Kors arrangerer altid det første besøg hos en indsat og opretholder herefter kontakt på ugebasis med familien. Røde Kors inspicerer i øvrigt fængslet hver måned. Fængslet er af den overbevisning, at DK ikke bør tage yderligere kontakt til de indsattes familier.

MØDE- OG BESØGSOVERSIGT M.M.

3. Der har i perioden været flg. andre møder, besøg m.m.:

- 30 MAJ – 3 JUN: Koordinering med DIV og BDE omkring fanger i DTDF
- 12 JUN: Møde med dommer i A Qurna.
- 13 JUN: Afhentning af løsladt fange fra DTDF.
- 14 JUN: Møde med dommeren i Al Qurna.
- 17 JUN: Koordinering med BDE om kommende besøg ved DTDF.
- 18 JUN: Møde med dommeren i Al Qurna. Koordinering med BDE om tilladelse til besøg i DTDF.
- 19 JUN: Briefing af FM om status i fangesituationen. Drøftelse med rep. fra FMN om situationen, herunder om status på den lovede ressourceperson til koordinering med de lokale.
- 22 JUN: Koordinering med BDE om besøg i Basra fængsler.
- 23 JUN: Legal Conference hos DIV i Basra måtte aflyses. Inspektion af to fængsler i Basra med deltagelse af dommeren i Al Qurna.
- 24 JUN: Indsættelse af en fange i DTDF.
- 25 JUN: Af de 16 fanger der blev tilset d. 23, er tre jf. dommerens oplysninger identificeret som værende danske fanger, hvorfor de figurerer på statusrapporten (bilag 2). En af de 16 er omtalt efterfølgende vedr. hospitalbeh.
- 28 JUN: Planlægning og koordinering af løsladelse af fange fra DTDF. Planlægning af inspektion af 1 fange i DTDF til d. 1 JUL. Fortsat eftersøgning af fange, der er midlertidig er overført fra Basra fængsel til politiet m.h.p. hospitalsbehandling.

STATUS OVER ERKENDTE "DK" FANGER

4. Navne over fanger indsat i DTDF og Basra fængsler.

I DTDF, Al Shaibah:

A. 

B. [REDACTED]

C. [REDACTED]

I Basrah fængsel (Al Makil og Al Meena):

1. [REDACTED]

2. [REDACTED]

3. [REDACTED]

4. [REDACTED]

5. [REDACTED]

6. [REDACTED] – Midlertidig syg i varetægt ved Politi i Al-Huweir)

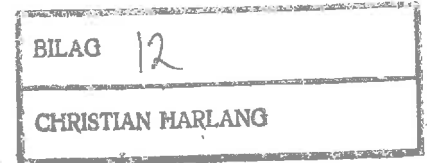
7. [REDACTED]

8. [REDACTED]

9. [REDACTED]

Status over tilbageholdte ved DANCON Irak

Lb nr	Dato	Tilsyn Ved:	Til og afgang	Politi			DTDF			Basra fængsel		p.t. indsatte	Meldt til FKO Samt evt. bem.
				Ind	ud	sum	Ind	ud	sum	Ind	ud		
1	01 JUN		Baseret på tal oplyst af FKO	114	114	0	45	43	2		6	8	FKO tal
2	09 JUN	DTDF i.a.b.	Tilsyn									8	FKO oplysning
3	10 JUN		4 pax. tilbageholdt	114	114	0	45	43	2		6	8	Ja
4	10 JUN		3 pax løstaget, 1 anholdt	114	114		46	43	3		6	9	Ja. Tvivl om antallet i Basra fængsel.
5	13 JUN		1 pax frigivet	114	114	0	46	44	2		4-6	6-8	Ja. Muligvis kun 4 i fængsel.
6	16 JUN	DTDF i.a.b.	Tilsyn	114	114	0	46	44	2		4-6	6-8	Muligvis kun 4 i fængsel. 2 fanger forsøges fundet d.d.
7	23 JUN	Basra	Tilsyn	114	114	0	46	44	2		6	8	Ja, 2 fanger ident. og tilset.
8	24 JUN	Ash Shirsh	1 anholdt	114	114	0	47	44	3		6	9	Derudover 16 yderligere tilset.
9	25 JUN	DTDF	Tilsyn/identifikation	114	114	0	47	44	3	"3"	9	12	Anholdt, bragt til CE og derefter overgivet til DTDF
10	26 JUN	DTDF		114	114	0	47	44	3	"3"	9	12	Af de 16 der blev tilset jf. lb.nr. 7, er 3 jf. dommerens oplysninger ident. som værende danske fanger. En er på sygehus og pt. endnu ikke tilset.
													Havde lidt øjenproblemer, var i behandling. Ellers i.a.b.

**MEDICAL REPORT****I. CASE INFORMATION****Date of exam:** 14 May 2012**Place of exam:** Restart Center for the Rehabilitation of Victims of Violence and Torture, Beirut, Lebanon**Exam requested by, reason for exam:** International Rehabilitation Council for Torture Victims (IRCT), alleged torture victim**Case or report No:** Beirut-6-2012**Duration of evaluation:**

Psychological: 2 hours 30 minutes

Physical: 1 hour 25 minutes

Subject's given name, birth date, birth place: , 2/8 1960, Iraq**Subject's family name, gender, ID:** , Male, Passport No:**Interpreter (yes/no) name:** Ms. Malak El-Hossam (during physical examination only)**Informed consent (yes/no):** Yes**Persons present during the exam (name and position):** -**II. CLINICIANS' QUALIFICATIONS**

A. Dr. Sana Hamze is currently a Doctorate in Counselling of Grief and Trauma in Breyer State University, USA. Holding a BS degree in clinical psychology and a Masters degree in Psychology from the Lebanese University, Dr. Hamze founded (along with other mental health professionals in Lebanon) *Restart Center for Rehabilitation of Victims of Violence and Torture* (1996). Accredited by IRCT in 2001, Restart was the first Lebanese center to address torture-related issues and target the survivors. The organization recently developed an international dimension through the election of its Executive Director, Ms Suzanne Jabbour, as Vice-President of the UN Sub-Committee on Prevention of Torture (UN SPT). The variety of projects implemented during the last 10 years aim at promoting and protecting the rights of torture victims, through the funds received by the main international donors including, the European Union and the UN Refugee Agency (UNHCR). Since its inauguration, the center has been providing comprehensive rehabilitation services to its beneficiaries, through a multidisciplinary team of qualified specialists applying a holistic approach.

Nominated Head of the Rehabilitation Unit at Restart center, Dr Hamze holds 17 years of experience as psychotherapist working with victims of torture and her mains include "clinical individual supervision" and "peer supervision", for which she is also certified to train. She can be considered as a pioneer in introducing the "care for caregivers" concept among mental health and

psycho-social associations in Lebanon. Her reputation is also well appreciated on the international level, being elected as member of the International Rehabilitation Council for Torture Victims (IRCT) during a three-year mandate and as one of the founders of the Eastern Mediterranean Association of Child and Adolescent Psychiatry and Allied Professions (EMACAPAP).

B. Prof. Jørgen Lange Thomsen, Physician, Doctor of Medical Science, Professor of Forensic Medicine, University of Southern Denmark. Many years of experience in the evaluation of alleged torture victims. Publications on medico-legal issues, including human rights and torture.

III. STATEMENT REGARDING VERACITY OF TESTIMONY

I, Sana Hamze, personally examined this individual and examined the facts recited in this written report. I believe all statements to be true. I would be prepared to testify to these statements based on my personal knowledge and belief.

I, Jørgen Lange Thomsen, personally examined this individual and examined the facts recited in this written report. I believe all statements to be true. I would be prepared to testify to these statements based on my personal knowledge and belief.

IV. BACKGROUND INFORMATION

General information

Mr. _____ is a 52-years-old Iraqi man, born in Al-Basra, Iraq. He grew up with five brothers and four sisters and went through public school after which he was studying at Basra University, Faculty of Management and Economy, and graduated as a bachelor in Economy. He was never able, however, to use his bachelor degree as shortly after his graduation he was taken for military service and was a soldier in Saddam's army for four years. He participated in the war against Iran, and after that he also participated in the first Gulf War. He was sent to Kuwait, and his unit was the last to leave Kuwait when the allied forces arrived. He was arrested as a war prisoner and spent one and a half month in Saudi Arabia. He was never wounded, and he did not feel that he had any mental problems due to his military service or the subsequent imprisonment in Saudi Arabia. He was a common soldier and had never advanced to become an officer.

During the 1990's, after his military service, he worked in a small shop that he rented from another man. He was once arrested, around 1994 and 1995, because there were complaints about his prices. They were too high, and he spent one night in prison and was given a fine, but was not beaten or tortured otherwise. He is a Sunni Muslim, married and has four girls and two boys.

Past medical history

He has generally enjoyed a good health and has only been hospitalized twice, once because of almost constant headache and once because of pains in his right kidney region. His headache was said to be due to his sinusitis in the upper jaw. He is still suffering a lot from headache, sometimes even when he is sleeping.

He still has kidney pains once in a while, especially if he eats some particular types of food (not described further).

Past psychiatric history

Mr. _____ has no past psychiatric history.

V. ALLEGATIONS OF TORTURE AND ILL-TREATMENT

1. Summary of detention and abuse

Mr. _____ was arrested on November 25th 2004 in Al-Zubayr region by the Danish, English and Iraqi forces. 10 of his relatives and friends were also arrested with him. During his arrest, he was subjected to different forms of ill-treatment. His arrest was allegedly not based on a particular charge but rather on a religious background. He remained detained for about 3 months.

2. Narrative account of ill-treatment and torture

In November 2004, he was praying one early morning around 5.30 in the mosque near to his home when seemingly without reason a number of Iraqi and Danish soldiers searched the house, and he was arrested. He was in the mosque when he was arrested by an Iraqi, and the Danes were present during the arrest. On the question of whether he was certain that there were Danish soldiers present, he said that these were the only foreign soldiers at the moment as the British had left at the time. He was body searched by the Iraqis, and they took photos. He was put together with the ten of a group of 11 and taken on a pickup to **Akka**. The Iraqis took him to Akka, but the Danes followed immediately after the pickups in tanks. He was not beaten during the transportation.

In Akka, he was put in a room together with the ten other arrested Iraqis. The guards asked their names and took photos of them. He was sitting there in Akka for four hours, handcuffed with his hands on his back, tied together by plastic strips, and he was further blindfolded. The 11 were sitting in a circle. He felt humiliated at the time because the Danish soldiers had dogs, and they moved around the prisoners with the dogs which is an insult to a Muslim.

After four hours they were taken to **Shaibah base** to a tent, one at a time, where again he had to tell his name, and they took his personal items. He was taken to a second tent where he was badly humiliated. On cautious interrogation he explained that the humiliation was in the form of a Danish soldier inserting a finger in his anal canal. He was not able to state this directly as during the questioning he became very embarrassed, but he confirmed to the question of whether the Danish soldier inserted the finger inside his body from behind.

He did not understand the body search and the insertion of the finger as they would not carry any weapons and those weapons that were in the mosque had been found in the form of four Kalashnikov rifles used by the guards. Later he had his personal items given back. In Shaibah base he was not exposed to other violence.

They were then taken to **Al Shu'oon (The Serious Crime Unit)** by the Iraqis. The Danish soldiers followed them to Al Shu'oon, but when they had arrived, the Danes left the place, and he never saw them again. In Al Shu'oon they were all kept in a room. Then one by one they were taken for investigation, again blindfolded, handcuffed behind their backs. The Iraqi forces wanted him to confess, but he did not have anything to confess. They started beating him and told him to confess that he was a terrorist. They kicked him, and they beat him with their hands. He was lying down, and after some time he lost consciousness. He woke up by them beating him again and pouring water upon him. He felt that he had been unconscious for about five minutes. They beat and kicked him all over his body, and during the abuse they kept asking him to confess that he was a terrorist. They also insulted him for being Sunnite and called him "wahhabiyyine" (this is an

insult). He felt very weak as he was fasting. He stayed in Al Shu'oon one week, but was only physically abused on the first day. In Al Shu'oon they had food and water.

After that they were transferred to Tasferat Prison where he was beaten at arrival, but not after that. He was still accused of being a terrorist and mocked because he was a Sunni Muslim. He was released after 70 days in captivity together with the other last three from the group of 11. He was only released after the payment of 50,000 \$ to the Iraqis. This sum of money had been collected by the family, including his brothers and uncles.

During his stay in Tasferat he was presented to a judge who did not see any proof of terror. He told the judge that he had been physically abused, and the judge did not react to this.

3. Review of abuse and ill-treatment

Physical forms

- Beating and kicking
- Sensory deprivation (blindfolding)
- Deprivation of food and water

Psychological forms

- Insulting
- Deprivation of food and water
- Sensory deprivation (blindfolding)
- Sexual assault during body search
- Humiliating

VI. PHYSICAL SYMPTOMS AND DISABILITIES

When he was beaten and kicked, he felt a pain in his body, and he lost consciousness one time. He never experienced blood in his urine. Presently he enjoys good health. He sleeps at night, but as mentioned above he suffers from headache, especially in his forehead. He has a good family life, including sex life. He does not suffer any diseases in the heart, lungs or gastrointestinal canal, but sometimes he feels pain in his right kidney.

VII. PHYSICAL EXAMINATION

A middle weight, healthy looking middle-aged man. He was active and eager, complying with the examination and tried to answer the questions as well as possible. He was collaborative during the entire examination. There were no obvious signs of disease. His expression was usually smiling and open, but when it came to the physical abuse, especially the insertion of a finger in

his anus, his looks changed into an embarrassed expression with redness of the face and no eye contact.

The eyes were normal with pupils reacting normally to light. The oral cavity was normal. There was a lot of caries on his teeth that were not well preserved. The neck was normal. At stethoscopic examination of the heart there was a slight systolic murmur with a maximum at the apex (probably without any significance). Blood pressure 150/95, pulse 96/min. Stethoscopic examination of his lungs revealed no sign of any disease. His abdomen was soft without any palpable tumors or tension. There was a scar in the right lower part of the abdomen due to appendectomy. Arms and legs were normal. On the inside of the right thigh and on the left knee there were small scars, and on the question of the cause of these scars he said they were unrelated to his imprisonment. The plantar reflexes were normal.

VIII. PSYCHOLOGICAL HISTORY/EXAMINATION

1. Methods of assessment and psychological testing

- Clinical interviews
- Beck Depression Inventory (BDI)
- Hamilton Anxiety Scale (HAM-A)
- Harvard Trauma Questionnaire

2. Current psychological complaints

In what follows, we will divide the symptoms into 2 categories: the 1st set of symptoms is based on Mr. [redacted]'s narrations and the 2nd one is identified through testing.

a- Symptoms identified based on speech:

Avoidance ("I don't like to talk about this issue. I don't dare going to the places where I was arrested. I take another road. When I remember that they accused me of being a terrorist, I try to escape")

Physiological and emotional reactions when recalling the traumatic event ("I feel that my head is so heavy when I recall this issue. I also have headaches and fast heartbeats. I feel that I'm suffocating. I also feel as if my head and body are numb")

Fear that the incident might happen again ("I'm always worried about the possibility of being arrested again. This is still happening in Iraq. Some time ago, they arrested 2 men who had no charges against them. They could arrest me anytime")

Anxiousness ("My anxiousness increases whenever I know that they will arrest someone. I feel they may arrest me too")

Irritability

Feelings of persecution and humiliation

Sleep disturbances

b- Symptoms detected through testing:

PTSD symptoms rated as "very distressing" by Mr

(Harvard Trauma Questionnaire)

- Recurrent and intrusive distressing recollections of the event, including images and thoughts
- Feeling as if the traumatic event is recurring
- Cautiousness
- Avoidance of activities that recall the event.
- Lack of interest in daily activities
- Feeling of foreshortened future
- Blaming self for things that happened
- Hopelessness
- Avoidance of thoughts and feelings related to the traumatic event
- Physiological and emotional reactions when recalling the traumatic event
- Feeling that you have no one to rely on

Anxiety symptoms rated as "averagely intense" by Mr.

(Hamilton Anxiety Scale)

- Anxious mood
- Insomnia
- Cardio-vascular symptoms
- Gastro-intestinal symptoms
- Respiratory symptoms

Depression symptoms confirmed by Mr

(Beck Depression Inventory)

- I feel the future is hopeless and that things cannot improve.
- As I look back on my life, all I can see is a lot of failures.
- I feel quite guilty most of the time.
- I am disgusted with myself.
- I have lost all of my interest in other people.
- I have to push myself very hard to do anything.
- I feel there are permanent changes in my appearance that make me look unattractive
- I have no appetite at all anymore.

3. Assessment of social functioning

Mr. _____'s social life has been enormously affected by the incident. Noting that he describes himself as someone who used to be very calm, Mr. _____ states that he has become very irritable, which is certainly affecting his relationships even with his family members. Moreover, Mr. _____ is currently not working. In fact, being at an age during which people are usually active while he's not, worsens Mr. _____'s psychological state making him feel guiltier and causing him further problems on the economical and social levels.

IX. DIAGNOSTIC TEST RESULTS

Based on the above, Mr. _____ is diagnosed with Anxiety, Depression and PTSD (Post-Traumatic Stress Disorder).

X. INTERPRETATION OF FINDINGS

Physical evidence

There is no present physical evidence, but the type of abuse in the form of blunt violence that the examinee sustained does not necessarily lead to scar formation.

Psychological evidence

- Mr. . has undergone physical abuse and significant psychological trauma
- He is in need of psychotherapy and psychiatric management
- His claims of ill-treatment are fully consistent with his psychological signs and symptoms
- Diagnosis: PTSD (Post-Traumatic Stress Disorder), Depression and Anxiety

XI. CONCLUSIONS AND RECOMMENDATIONS

1. There is full consistency between the psychological findings and Mr. . 's alleged report of ill-treatment because symptoms of PTSD, Depression and Anxiety can be detected even today seven years after the ill-treatment
2. Mr. . should undergo psychotherapy and psychiatric management
3. The described humiliations and physical abuse amount to serious maltreatment, and torture may well be the most appropriate term for the abuse.

XII. CLINICIAN'S SIGNATURE, DATE, PLACE

EXPERT PSYCHOTHERAPIST

Psychotherapist, Dr. Sana Hamze

Signature:

Mona Hamed

FORENSIC DOCTOR

Professor, Dr. Jørgen Lange Thomsen

Signature:

Jørgen L. Thomsen

MEDICAL REPORT

I. CASE INFORMATION

Date of exam: 14 May 2012 (psychological assessment) and 15 May 2012 (physical examination)

Place of exam: Restart Center for the Rehabilitation of Victims of Violence and Torture, Beirut, Lebanon

Exam requested by, reason for exam: International Rehabilitation Council for Torture Victims (IRCT), alleged torture victim

Case or report No: Beirut-4-2012

Duration of evaluation:

Psychological: 90 minutes

Physical: 95 minutes (1.40 pm – 3.15 pm)

Subject's given name, birth date, birth place:
Iraq

, 1/7 1952, Thi-Qar,

Subject's family name, gender, ID: Male, Passport No:

Interpreter's (yes/no) name: Ms. Malak El-Hossam

Informed consent (yes/no): Yes

Subject accompanied by: -

II. CLINICIANS' QUALIFICATIONS

A. Dr. Sana Hamze is currently a Doctorate in Counselling of Grief and Trauma in Breyer State University, USA. Holding a BS degree in clinical psychology and a Masters degree in Psychology from the Lebanese University, Dr. Hamze founded (along with other mental health professionals in Lebanon) *Restart Center for Rehabilitation of Victims of Violence and Torture* (1996). Accredited by IRCT in 2001, Restart was the first Lebanese center to address torture-related issues and target the survivors. The organization recently developed an international dimension through the election of its Executive Director, Ms Suzanne Jabbour, as Vice-President of the UN Sub-Committee on Prevention of Torture (UN SPT). The variety of projects implemented during the last 10 years aim at promoting and protecting the rights of torture victims, through the funds received by the main international donors including, the European Union and the UN Refugee Agency (UNHCR). Since its inauguration, the center has been providing comprehensive rehabilitation services to its beneficiaries, through a multidisciplinary team of qualified specialists applying a holistic approach.

Nominated Head of the Rehabilitation Unit at Restart center, Dr Hamze holds 17 years of experience as psychotherapist working with victims of torture and her mains include "clinical individual supervision" and "peer supervision", for which she is also certified to train. She can be

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I, Jørgen Lange Thomsen, personally examined this individual and examined the facts recited in this written report. I believe all statements to be true. I would be prepared to testify to these statements based on my personal knowledge and belief.

IV. BACKGROUND INFORMATION

General information

Mr. _____ is a Sunni Muslim 60 year old Iraqi man. He was born in the Zubayr region in Basra and grew up with six brothers and five sisters. He went to school for ten years, and after school he joined military service from 1971 and stayed in the army until 1989. He was "just a soldier" and was never promoted to officer. He spent several years in the army during the war against Iran, but he was never wounded, and he did not feel that he had any mental problems due to his many years in a state of war.

He is married and has 10 children (eight daughters and two sons). He currently lives with his family in Bahrain seeing that he had to flee his country of origin after being arrested in 2004 and subjected to ill-treatment. From 1989 he rented a shop selling spare parts for cars, but had been out of work since 2005 (Mr. _____ was diagnosed with cancer in 2008, thus, his medical condition is hampering him from working). He is now financially supported by one of his children.

Past medical history

He used to enjoy good health up until 2008 when he was diagnosed with cancer in the bladder. He applied for treatment in Saudi Arabia and received a grant from the Saudi Arabian Queen to have surgery. Now he is urinating into a bag on his abdominal wall. Apart from that he has never been to hospital. He is taking drugs for a high blood pressure in the form of Tenormin and Coboltine.

Past psychiatric history

_____ has no past psychiatric history.

V. ALLEGATIONS OF TORTURE AND ILL-TREATMENT

1. Summary of detention and abuse

Mr. [redacted] was arrested on November 25th 2004 in Al-Zubayr region in Iraq by the Danish, English and Iraqi forces. His brother and 9 of his friends were also arrested with him. During his arrest, he was subjected to different forms of ill-treatment. His arrest was allegedly not based on a particular charge but rather on a religious background.

2. Narrative account of ill-treatment and torture

The story as it was told by Mr. [redacted] :

"On November 25th 2004, the Danish forces arrested me and my brother [redacted] and they took us to **Akka camp**. They attacked us in the house early morning when I was performing ablution. They took me and they took [redacted] from Al-Diwan (sitting room). When they arrested me I was wearing the Dashdasha (Arabic costume). They forced our family outside the house and searched the house and we stayed outside for about 30 minutes. We were in the house at the time me, my brother, my father, my sister, my mother-in-law, my nieces, my wife and 7 of my children. They stole about 200\$ from my father's money. They turned a closet over, but apart from that they didn't destroy anything. I assume they were looking for weapons but they did not find anything. They said that we were terrorists. Then they took me and my brother in a car with the group from the mosque. We were eleven who know each other and stayed together. They took us to **Akka camp** (for Iraqis) where we stayed for about 2 to 3 hours. Afterwards, they took us to one of the Danish forces' camp named **Shaibah**. We were blindfolded and hands tied on the back with plastic strips. We were sitting outside in the sun and they took us, one by one, to a tent at about 3:30 pm. We didn't get any food or drink. In the tent, they body-searched us despicably. There were only Danes in the tent. They touched us all over the body and one of them entered his fingers into our buttocks. I could feel his finger. I didn't wear under pants and he penetrated my body from behind. It was very humiliating. They didn't beat us. Afterwards, they took us to another tent for about 15 minutes and then they handed us over to the Iraqi forces. These blindfolded us and handcuffed us with strips again and took us by car to the **Shu'oon**. Then they took us to the investigation separately. Then they took us to Al-Shuun by the Iraqi forces. The Danes were also going. I was in a pickup and was only beaten a little. In Al-Shu'oon we were all placed in the same room and taken one by one for interrogation. I was interrogated for only about ten minutes. I was asked religious questions and they were not beating me or abusing me in any way. Maybe because I was too old. Then they placed us in the jail. We remained without food until 10:00 p.m. I remained in jail for 7 days. Then, they took us to the Court and released us there."

3. Review of abuse and ill-treatment

- Deprivation of food and water
- Sensory deprivation (blindfolding)
- Sexual assault during body search
- Beatings

VI. PHYSICAL SYMPTOMS AND DISABILITIES

Mr. [redacted] found the penetration of his body extremely degrading. He didn't sustain any significant violence. He feels that he still suffers from his captivity and the degrading treatment.

He is more anxious than before, and his threshold level for anger is lower. He does not suffer from sleep disturbances, but he easily gets tired and gets tachycardia (fast heart beating) at efforts. He relates this symptom to his cancer operation. He sometimes suffers a feeling of pressure in his chest. He does not have any breathing problems. His stomach functions well if he is not eating too much fat because then he has pain in the upper mid part of his abdomen.

VII. PHYSICAL EXAMINATION

Mr. _____ was wearing a suit. He was serious and somewhat on the guard. He cooperated willingly in the examination. His state of nutrition was perhaps a little below mean.

The pupils of the eyes reacted normally. The oral cavity and teeth were normal. Blood pressure was 120/95 and pulse 64/min, a little irregular. By stethoscopic examination the heart was found normal and so were the lungs. The abdomen was soft with a urine bag on the right side. The urine looked normal without visible blood. The arms and legs were normal. There were no signs of physical abuse. The plantar reflexes (soles of the feet) were normal.

VIII. PSYCHOLOGICAL HISTORY/EXAMINATION

1. Methods of assessment and psychological testing

- Clinical interview
- Beck Depression Inventory (BDI)
- Hamilton Anxiety Scale (HAM-A)
- Harvard Trauma Questionnaire

2. Current psychological complaints

In what follows, we will divide the symptoms into 2 categories: the 1st set of symptoms is based on Mr. _____'s narrations and the 2nd one is identified through testing.

a) Symptoms identified based on speech:

Fears and feelings of persecution ("I worry about my male children a lot. We are always accused. Whenever an explosion takes place they accuse us, mainly the young ones of our family. As for me, they don't accuse me seeing my age – After I was released, I developed a fear of being persecuted.")

Intrusive thoughts ("until now I always recall the immoral body search. By doing so, they killed me")

Irritability ("prior to the arrest I didn't use to get angry. Now I do")

Avoidance ("until now I never pass near the place where I have been arrested")

N.B: Mr. _____ also avoids raising this incident's issue. I had the impression that he had a desire not to complete the interview. He wanted to avoid talking about what happened.

Sad mood ("I lost parts of my body due to the cancer. I feel that my body is incomplete")

b) Symptoms detected through testing:

PTSD symptoms rated as "very distressing" by Mr. (Harvard Trauma Questionnaire)

- Irritability and outbursts of anger
- Avoidance of activities that arouse recollections of the traumatic event
- Sense of foreshortened future
- Avoidance of thoughts and feelings associated with the trauma
- Feeling that the people around you do not understand what happened to you
- Difficulty in accomplishing the daily tasks and duties
- Blaming self for things that happened
- Hopelessness
- Feelings of shame because of the traumatic events
- Feeling that you have no one to count on
- Feeling that others are hostile towards you

Anxiety symptoms rated as "average" by Mr. (Hamilton Anxiety Scale)

- Anxious mood
- General somatic symptoms: Muscular
- Cardiovascular symptoms
- Respiratory symptoms
- Gastrointestinal symptoms

Depression symptoms confirmed by Mr (Beck Depression Inventory)

- I feel sad much of the time
- I am more discouraged about my future than I used to be
- As I look back, I see a lot of failures
- I feel quite guilty most of the time
- I have lost confidence in myself
- I am less interested in other people or things than before
- I have much greater difficulty in making decisions than I used to
- I am too tired or fatigued to do most of the things I used to do
- My appetite is much less than before

3. Assessment of social functioning

Mr. 's social functioning has been affected by 2 major factors: the arrest and ill-treatment as a first factor and his medical condition (cancer) as a second one. Due to these factors, Mr. is currently not working as he feels unable to. Moreover, he expresses being less interested in other people or things than before.

IX. DIAGNOSTIC TEST RESULTS

Based on the above, Mr. is diagnosed with Depression and PTSD (Post-Traumatic Stress Disorder).

X. INTERPRETATION OF FINDINGS

Psychological evidence

- Mr. . has undergone significant psychological trauma.
- He is in need of pharmacotherapy (seeing that he avoids talking about the incident, the psychotherapy may not be the best intervention at this point) and psychotherapy at a later stage.
- His claims of ill treatment are consistent with his psychological signs and symptoms.
- Diagnosis: PTSD (Post-Traumatic Stress Disorder) and Depression

XI. CONCLUSIONS AND RECOMMENDATIONS

1. There is full consistency between the psychological findings and Mr. 's alleged report of ill-treatment because symptoms of PTSD and depression can be detected even today seven years after the ill-treatment.
2. Mr. should undergo psychiatric management and psychotherapy (at a later stage).
3. Mr was only subjected to little direct physical violence. He was however allegedly subjected to rectal exploration which he found very humiliating and may be seen as a combination of physical and psychological human and degrading treatment amounting to torture.

XII. CLINICIAN'S SIGNATURE, DATE, PLACE

EXPERT PSYCHOTHERAPIST

Psychotherapist, Dr. Sana Hamze

Signature:



FORENSIC DOCTOR

Professor, Dr. Jørgen Lange Thomsen

Signature:





ADVOKATFIRMA
CHRISTIAN HARLANG

KOPI (17)

BILAG 17
CHRISTIAN HARLANG

BILAG 10, underbilag F
CHRISTIAN HARLANG

POWER OF ATTORNEY

I, the undersigned, _____
 hereby authorize lawyer Christian Harlang, or any qualified colleague that
 Christian Harlang would entrust, to file a lawsuit on my behalf against any part of
 the Danish state or other legally acknowledged persons or individuals regarding
 recognition of and/or compensation for torture, mistreatment, unlawful
 detention, etc., done towards me as a result of the action or inaction of Danish
 military forces or other Danish entities, and take any steps that could favour my
 possibilities of obtaining compensation etc. for torture, mistreatment, etc.
 against me, including but not limited to gathering information, filing applications
 for legal aid, etc., etc.

This power of attorney also authorize my above mentioned lawyer to negotiate,
 accept, and receive settlement under the best possible conditions.

BEIRVT
 _____ 14 of 5 2012

Name:

Address:

Country: IRAK

Citizen identity number:

Trans letter by Hanna Zwack
 Beirut 4.5.2012



ADVOKATFIRMA
CHRISTIAN HARLANG

K O P I

BILAG 18
CHRISTIAN HARLANG

BILAG 10, underbilag 18
CHRISTIAN HARLANG

POWER OF ATTORNEY

I, the undersigned, _____
 hereby authorize lawyer Christian Harlang, or any qualified colleague that
 Christian Harlang would entrust, to file a lawsuit on my behalf against any part of
 the Danish state or other legally acknowledged persons or individuals regarding
 recognition of and/or compensation for torture, mistreatment, unlawful
 detention, etc., done towards me as a result of the action or inaction of Danish
 military forces or other Danish entities, and take any steps that could favour my
 possibilities of obtaining compensation etc. for torture, mistreatment, etc.
 against me, including but not limited to gathering information, filing applications
 for legal aid, etc., etc.

This power of attorney also authorize my above mentioned lawyer to negotiate,
 accept, and receive settlement under the best possible conditions.

BEIRUT
 _____, 14 of 5 2012

Name:

Address:

Country: IRAK

Citizen identity number:

Translated by
 Hans Rasmussen
 14. 5. 2012

[Handwritten signature]

