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A 20	bully or intimidate them	40.1 2047
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Bahrain Defence Force Royal Medical Services

NAME: ARRAS JAMEEL ALSAMA

HOSP, NO.: 867348

CPR NO.: 890800405

DISCHARGE SUMMARY

ADMISSION DATE:

06-03-3014

DISCHARGE DATE:

Manager for Authorisis :

-24 y/o/mak ,Policul prisoner , x/c of 6670 , pt referred from the MCE to the ER ,with fi/o generalized body weakness ,dark urine, left trigh pain & swelling for few days but he is waking , no fi/o trauma neither fiel, no fever ,the investigations was done showing high cox proymes (2000km) , so waintited as acase of matidomyolysis .

-CVE: pt compous priented, box 110/68: prid&/vim temp=36.9 p2 sat=190% on SA.

schedil char

cut stad normal, no acted sounds

obdomen: soft , not destanded , not render, \$5495.

CMS: DITACT

- it thigh : there was swelling lateral aspect of the thigh

_Congression is

lod Code / Description

Status.

M63.9 Deproter of muscle, unspecified

Confirmed

N63.7 Harmstorns of broad ligament

Confirmed

Respiral Course & Honogoreest :

ot admitted to the word

- u/s t thigh was done showing harmstoma about 72x20x18 mm in diameter, so the

ot with reviewd by surgical doctor regarding it thigh harmatoria who advice for ulls guided againstion & to send for cits jour not done because the radiologist informed that the harmatoria was sold & advice to repeat the ulls it thigh but the harmatoria found to be

all sold.

initial investigations:

- initial cpik was 2600 & the last one was 170-

4.8 E + AFT WAS NOTHING

wter-11.6 HB+7.6 p8-202 miss-1.66 % VCT 812 242 3 POLATE +16 mm +5.2

- bood c/s was -ve

- pc was started on:

le hydration

in Rocaphin 2gm (od & is clindamycin 600 mg/8Ny (b4t); for 4/7

- VTT 8121000mcg/ IM

herotoid orean teprosy-

- Pt had less the 7.5 , so he planned for transfusion but he refused because he want he eleting beginning

- PT B/C ON STABLE CONDITION WITH HIS LAST CP45 UM+ RFT ARE NORMAL

Procedure :

Advisor

-tardyleron 80 microshod

-ve bit2 s000mg/ EM /once /week for 4/52 then once /merch for 4/12

augmentin 1 gm/po/5d for 14 days

- herotoid crean /ocaytris

sub it thigh to be repeated as out outlent.

the with Dr. Yalleys after repeat ups

wit bill to be repeated after 6/12 as right

- good feeligitor & to avoid exerten

Declarge Hedication:

Percent by 1 EME on 12 Mar-2004, 15 MS

EXPROPOSIONES

MINNESS SET

2001 Laf 2



Bahrain Defence Force Rayal Medical Services

DISCHARGE SUMMARY

NAME: ABBAS SAMEEL ALSAMIA

HOSP. NO. 1 367348

CPR NO.: 890800405

ADMISSION DATE:

96-03-2014

DISCHARGEDATE:

cardyferon 80 mg/ps/od

v8 b12 1000mcg/ I.M /urce /week for 4/52 thes republish 1 tab/pc/ed for 3/12

augmentin s gm/ps/bd for 76 kgs - herodod chewn /local/nds

Outcome.

DESCHARGED HOME

12/43/2004

Ensured by

Mary now Dr. Juyer Gebrin Lapes

Verified by I

Dr. Joyes Deliron Laper

Compluse:

Dr. Yadyu Siddig Al Zuman

Signature :

Signature :

Kingdom of Bahrain
PUBLIC PROSECUTION
General Directorate of
Forensic Science Evidence



3/17/2014 16 Jumadi Al-Awal 1435AH

Forensic Report In Case No. 14/2014 Investigations Regarding Defendant Abbas Jamil Al-Sameea (890800405) Mr. Hussein Al-Boaly, Chairman of the Prosecution

I, Dr. Hatem Mahmoud Nabil Abbas, Forensic Doctor for the Prosecution, acknowledge that I, in our office at the General Physical Evidence Department on 3/12/2014 reviewed the memorandum from the General Prosecutor and, based on this memorandum, signed the forensic medical examination for the Defendant Abbas Jamil Al-Sameea. This was to demonstrate the injuries, their causes, their dates, how they occurred, the instruments used to cause them, and whether the injuries would result in permanent disability or not.

And I acknowledge

First: The Prosecution's Memorandum:

The incident can be summarized as contained in the deduction collection report where the investigations concluded that the aforementioned Defendant participated, along with others, in placing a bomb on Monday corresponding to 3/3/2014 in the middle of A'm Al-Badeea Street close to the Hashemite Commercial Complex. The bomb exploded and led to the death of three policemen, injuring approximately 10 policemen with miscellaneous injuries.

Upon asking the Defendant during the Prosecution's investigations, he confessed to the charges attributed to him except for the charge of resisting arrest.

The arrest report for the Defendant noted that while being arrested, the Defendant strongly resisted.

Through a general examination of his body, we did not find any visible wounds, and upon asking him whether he had injuries that were not visible, he said that he did not.

Second: The Forensic Medical Report:

The Defendant Abbas Jamil Al-Sameea appeared before a representative of the Prosecution Mohamed Aly 7715 and he was photographed for identification. Upon looking at him, it was apparent that he was a young man appearing to be about 24 years of age in good, normal health. He was conscious of the time, place, and people present. He walked with a slight limp on his left leg and talked normally and naturally without impairment.

Upon conducting a general examination of his body and the locations of his alleged injuries, the following became apparent:

- -Traces of excoriations with dried skin on the front and back of the right and left wrists measuring between 1x2cm to 3x4 cm, similar to what would be the result of friction with handcuffs.
- -Excoriations measuring 1x1 on the front and lateral angle of the left shoulder and a brown coloration measuring approximately 1x3cm on the front of the left shoulder. It was noted that the shoulders and arms operated within their normal range of motion without impairment.
- -Brown coloration measuring approximately 3x4cm at the top medial portion of the left thigh with no distinctive appearance.
- -Trace of a brown coloration measuring 2x3cm on the lowest medial portion of the left thigh with no distinctive appearance.
- -Trace of an excoriation covered with brown dried skin measuring approximately 0.5x1cm at the highest and lowest points on the front of the right knee measuring 5 cm, and a similar excoriation with caduceus skin measuring 1x1cm with no distinctive appearance.
- -The aforementioned complained of swelling and pain on the left knee, and the knee operated within the normal range of motion but accompanied by claims of pain.
- -Aside from the above no other traces of injuries were apparent, and the Defendant's joints operated within the normal range of motion without impairment.

Opinion:

In light of the above and in implementation of our signature on the forensic report for the Defendant Abbas Jamil Al-Sameea, and after reviewing the Prosecutor's memorandum, we believe the following:

- -The traces described on the wrists are the results of friction against a solid object or objects with a rough surface, similar to what would result from friction against handcuffs on the date of the incident.
- -With respect to the traces described on the Defendant's limbs as per a superficial examination, the original characteristics may have changed with the passage of time and the healing process, and may have occurred due to a clash with or friction against a rough, solid object or objects of any variety on the date of the incident. There is nothing to contradict the explanation for how these traces occurred in the Prosecution's memorandum.
- -The traces will heal in less than 21 days with no resulting permanent disabilities.

Forensic Doctor
Dr. Hatem Mahmoud Nabil
[Signature]

Psychological Medico-Legal Opinion

on the report of
Dr. Hatem Mahmoud Nabil on
Abbas Jamil Al-Sameea (890800405)

Report prepared by Dr Brock Chisholm Consultant Clinical Psychologist

Prepared 7th February 2017

Specialist Field: Psychological injury arising from traumatic events

Report prepared by:

Dr. Brock Chisholm, BSc (hons), MSc, DClinpsych CPsychol Chartered Clinical Psychologist Criterion A Psychology Services CriterionA.com

brock@criteriona.com



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My Expertise

- I have worked as a psychologist since 1994. I hold a BSc (Hons) in Psychology; an MSc in Psychological Research Methods; and a Doctorate of Clinical Psychology. I am an Associate Fellow of the British Psychological Society. I am registered with the Health Professionals Council as a practitioner psychologist.
- 2. I am expert in the diagnosis and treatment of complex presentations of traumatic stress. I have psychologically assessed several hundred survivors of traumas that include torture, persecution, war and rendition using the Istanbul Protocol. I hold a certificate in diagnosis of mental health disorders from the World Health Organisation. I train psychiatrists and other mental health professionals in diagnostic practice and in working with trauma and psychosis. (For example the Institute of Psychiatry, Glasgow, Belfast and the Berkshire NHS Trusts). I am an elected board member of the UK Psychological Trauma Society (UKPTS), the UK authority in the psychological consequences following traumatic events.
- 3. I am Director of *Criterion A Psychology Services*. I was previously employed with the Forced Migration Trauma Service, an NHS service that provides assistance and psychological treatment for PTSD to forced migrants as well as undertaking research. Our patients were predominately torture survivors from The Middle East. I previously worked for several years at The Traumatic Stress Clinic, a National Centre for PTSD, treating British veterans, refugees and UK trauma victims.
- 4. I have been instructed as expert witness by a variety of organisations including The UK Ministry of Defence, The Royal Military Police, The Ministry of Defence Police, The Serious Fraud Office, The UK Home Office, several specialist Police Departments including The Metropolitan Police Counter Terrorism Command, War Crimes Division and The UK Crown Prosecution Service on behalf of the National Crime Agency (The UK equivalent of the FBI). I have also been instructed by a variety of independent legal firms. I am the lead psychologist on the Iraqi Historical Allegations Team, which is a UK Ministry of Defence funded international war crimes investigation.
- 5. I have provided expert witness and medico-legal reports for criminal and civil matters in immigration, Court of Appeal, Supreme Court, the European Court of Human Rights, the Baha Mousa Public Inquiry, the African Court of Justice and The United Nations and cases involving security services. I have provided evidence under the Universal Jurisdiction (Section 134 of the Criminal Justice Act) as applied to torture. To my knowledge I have never attracted criticism and my opinion has been accepted by the court. In HS (Uganda), R (on the application of) v Secretary of State for the Home Department [2012] EWCA Civ 94 Lady Justice Rafferty says 'it seems to me that the authority and depth of Dr Chisholm's report arguably changes the landscape of the appellant's claim.'
- 6. I have publications in peer-reviewed journals, which are listed in the appendix. I sit on the Childhood Adversity and Psychosis steering and advisory group at the Institute of Psychiatry; a research project into causations of psychosis.
- 7. I am a visiting lecturer at the Royal Hospital for Tropical Medicine, and previously Queen Mary University of London and Clinical Research Fellow and Honorary Lecturer at St. Georges Hospital Medical School, University of London. I am a trainer for the Metropolitan Police in The Sexual Offences, Child Abuse and Exploitation Command.
- 8. I have run workshops for the British Association of Behavioural and Cognitive Therapists and The British Psychological Society and several other health service and academic institutions. I provided the content on PTSD and psychosis for www.mentalhealthcare.org.uk which receive 35 000 hits per month. I have also run workshops for members of the legal profession in working with victims of trauma within a legal framework.
- I am on The UK team of experts on the Preventing Sexual Violence Initiative. This is a UK Foreign and Commonwealth Office managed scheme comprising of 73 doctors, lawyers, police officers, psychologists and forensic scientists.



Introduction

- 1. The report below reviews the quality of the medical report provided into the possible medical evidence of torture. My comments below relate specifically to the documents provided to me. I acknowledge that there may have been a further examination or other documents of which I have no knowledge.
- 2. I make no assumption and express no opinion on the court's ruling on the guilt of Mr Abbas Jamil Al-Sameea. My comments are made solely and specifically in respect of the instructions below.
- 3. I have referred to Mr Abbas Jamil Al-Sameea as Mr Abbas, reather than Mr Al-Sameea as that is custom in Bahrian.

Instructions

4. I was asked by Reprieve to review and comment on the quality of the Forensic Doctor's report dated 17th March 2014 by Dr. Hatem Mahmoud Nabil on their client, Abbas Jamil Al-Sameea. In addition, I was asked to identify whether the report was compliant with the Istanbul Protocol (IP) standards¹. The Istanbul Protocol is an internationally recognised set of guidelines to employ when investigating allegations of torture.

Materials Considered

- 5. Forensic report dated 17th March 2014 by Dr. Hatem Mahmoud Nabil
- 6. Hospital discharge- admission date 06-03-2014 (no discharge date is recorded).
- 7. Bahrain Defence Force Royal Medical Services discharge card. Admission date 06-03-14. Discharge date 12.03.14.
- 8. Prescription for Augmentin 6.3.14.
- 9. Prescription for haemorrhoid cream and Tardyferon.

Background

- 10. Mr Abbas Jamil Al-Sameea was charged and executed for planting a bomb that detonated 3/3/14, killing three policemen and injuring ten. According to Dr Hatem's report, Mr Abbas confessed to planting the bomb and killing the policemen, but denied the charge of resisting arrest. The report states that an arrest report records that he 'strongly resisted arrest.'
- 11. Additionally I was given the following information from Reprieve:
- 12. Mr Abbas was tortured for three days after his arrest. 'He was stripped, beaten and kicked all over his body, including genitals. He was electrocuted, subjected to falaqa and held in stress positions.' After three days, he lost consciousness and could not be woken up. His torturers brought him to a military hospital on March 6 or 7, 2014. He remained in the hospital for a week. 'We have been told that medical tests at the time confirmed he suffered from extensive internal bleeding, fractured vertebrae, a broken pelvis, and dangerously low blood pressure, though the hospital records we have do not say this. We have been further told that the hospital transferred Abbas to intensive care where he underwent an operation to treat his internal bleeding.'
- 13. On March 12, the police forces checked him back out of the hospital. Reprieve were told this was against the wishes of the doctor treating him. At any rate, with a prescription for Augmentin, Abbas was discharged and then subjected to torture for several more days, at which time he was made to offer a false confession.
- 14. On March 17, Abbas was examined by a forensic medical examiner affiliated with Bahrain's public prosecution (Dr Hatem).



- 15. Dr Hatem's medical report states that there were no visible injuries and that Mr Abbas did not report any.
- 16. The report then documents the following injuries:
 - Traces of excoriations with dried skin on the front and back of the right and left wrists measuring between 1x2cm to 3x4 cm, similar to what would be the result of friction with handcuffs.
 - Excoriations measuring 1x1cm on the front and lateral angle of the left shoulder and a brown coloration measuring approximately 1x3cm on the front of the left shoulder. It was noted that the shoulders and arms operated within their normal range of motion without impairment.
 - Brown coloration measuring approximately 3x4cm at the top medial portion of the left thigh with no distinctive appearance.
 - Trace of a brown coloration measuring 2x3cm on the lowest medial portion of the left thigh with no distinctive appearance.
 - Trace of an excoriation covered with brown dried skin measuring approximately 0.5x1cm at the highest and lowest points on the front of the right knee measuring 5 cm, and a similar excoriation with caduceus skin measuring 1x1cm with no distinctive appearance.
 - Mr Abass complained of swelling and pain on the left knee, and the knee operated within the normal range of motion but accompanied by claims of pain.

17. The report concludes that

- Damage to the wrists are the result of friction against a solid object or objects with a rough surface, similar to what would result from friction against handcuffs on the date of the incident.
- Damage to the Defendant's limbs as per a superficial examination, and may have
 occurred due to a clash with or friction against a rough, solid object or objects of
 any variety on the date of the incident. There is nothing to contradict the
 explanation for how these traces occurred in the Prosecution's memorandum
 (which was that he was injured resisting arrest).
- All injuries will heal within 21 days.

Review of additional documents

- 18. Hospital discharge summary records rhabdomyolysis, which is a breakdown in muscle following extreme physical exercise, and bruising 'of broad ligament'.
- 19. Bahrain Defence Force Royal Medical Services discharge card. Admission date 06-03-14. Discharge date 12.03.14. diagnosis ICD10 Disorder of muscle, unspecified and haematoma of broad ligament.
- 20. Augmentin is an antibiotic for bacterial infection.
- 21. Tardyferon is used to treat iron deficiency.

Quality of the Forensic Science Evidence Report

22. The report does not include a section specifying the qualifications or independence of the author. This runs contrary to paragraph 162 of the Istanbul Protocol, which states that reports should be conducted with 'objectivity and impartiality' and be based on the medical professional's 'expertise and professional experience'.



- 23. There is no 'Statement of Truth' within the report as is required within a legal context when providing evidence for the Court and as an indicator of veracity.
- 24. It is unclear who requested the report and how the request was made. Paragraph 123 of the IP states:

"Requests for medical evaluations by law enforcement officials are to be considered invalid unless they are requested by written orders of a public prosecutor."

- 25. The report states "The Defendant Abbas Jamil Al-Sameea appeared before a representative of the Prosecution Mohamed Aly 7715 and he was photographed for identification. Upon looking at him, it was apparent that he was a young man appearing to be about 24 years of age in good, normal health. He was conscious of the time, place, and people present. He walked with a slight limp on his left leg and talked normally and naturally without impairment.'
- 26. If photographs were taken, they should have been included in the report accompanied by a scarring document. There were no accompanying photos or scarring/injury documents. The left knee is documented as having swelling, but there is little description of this and no photos. This is contrary to good practice.
- 27. Of most concern is the fact that Mr Abbas was in hospital for a week, five days prior to this report being written, and he was assessed on the day of his discharge from hospital. There is no acknowledgement of this and no examination or explanation of the medical records that document his admission. This is a striking omission. Since the medical notes document that at least two medications were prescribed, there should be reference to this in Dr Hatem's medical report.
- 28. This is particularly true since the amount of time spent in hospital is apparently discrepant.
- 29. The Istanbul Protocol highlights that it is common for prisoners to be frightened to report injuries sustained under torture. For this reason, it makes a number of recommendations to increase the likelihood of accurate reporting. It is not clear if these have been followed and whether or not there was police presence during the examination, or if the examiner was sufficiently independent.: "Their presence during the examination may be grounds for disregarding a negative medical report" (para 125). Paragraph 124 of the IP that states:

"Each detainee must be examined in private. Police or other law enforcement officials should never be present in the examination room. This procedural safe- guard may be precluded only when, in the opinion of the examining doctor, there is compelling evidence that the detainee poses a serious safety risk to health personnel. Under such circumstances, security personnel of the health facility, not the police or other law enforcement officials, should be available upon the medical examiner's request. In such cases, security personnel should still remain out of earshot (i.e. be only within visual contact) of the patient. Medical evaluation of detainees should be conducted at a location that the physician deems most suitable."

- 30. To ensure independence the lawyers of the defendants "should be present during the request for examination and post-examination transport of the detainee. (para 123)" Additionally, "Detainees have the right to obtain a second or alternative medical evaluation by a qualified physician during and after the period of detention (para 123)." However, it is acknowledged that doctors themselves may face the threat of persecution, particularly if they are subject to the same regime as the defendants.
- 31. Virtually no history of any sort is included in the report. The forensic report provided a very brief summary of the incident for which the accused has been found guilty; the



- explosion in the middle of A'm Al-Badeea Street close to the Hashemite Commercial Complex. Only a very limited attempt has been made by the author to document the account of the event and what happened subsequently from the individual concerned. This is a very basic and very serious omission. The omission or any attempt to take a history from the patient of what happened between arrest and the examination for the report, including no mention whatsoever of the one week one week hospital inpatient stay, is a serious enough omission to disregard any opinion provided.
- 32. Additionally, but of less importance, a complete medical history was not provided within the report. This runs contrary to the IP guidelines, given that it is not possible to qualify what occurred as a result of the incident/s in question without accounting for the presence of any pre-existing conditions or health issues.
- 33. Chapter VI of the Istanbul Protocol provides guidelines on the documenting and forensic exanimation of psychological evidence arising from torture. It is particularly important to follow if there is no or limited physical evidence. Psychological evidence considers and documents a range of factors, including the background of the individual, a description of the allegations of abuse, evidence of psychological damage, consistency of the psychological damage with the alleged abuse, whether findings are expected or typical reactions to extreme stress, co-existing stressors or physical conditions that could have impacted, and evidence of malingering or falsehood (See Appendix B).
- 34. The Forensic Doctor's report does not mention or acknowledge the possibility of psychological damage, nor does it explore the origins of such. I would consider this to be a significant breach of the protocol.
- 35. In my opinion the report from the Bahrain Public Prosecution forensic medical examiner fails in almost all aspects of what is required in a forensic investigation of possible torture. The report provided to me is in complete violation of the internationally recognised Istanbul Protocol and should therefore be completely disregarded.

Dr Brock Chisholm, BSc (Hons), MSc, Dclinpsych, CPsychol Consultant Clinical Psychologist



Statement of Truth

- 1. I confirm that insofar as the facts stated in my report are within my own knowledge. I have made clear which they are and I believe them to be true, and the opinions I have expressed represent my true and complete professional opinion.
- 2. I understand that my duty to the court is to provide an impartial professional opinion and to assist the court in reaching a decision. I have complied with that duty.
- 3. I have endeavoured to be accurate and have covered all the relevant issues.
- 4. I have included all matters which I have knowledge of or which I have been made aware of that might affect the validity of my report.
- 5. I have indicated the sources of the information I have used.
- 6. I have not included or excluded anything that has been suggested by me to others.
- 7. I believe that the facts that I have stated in this report are true and that opinions expressed are a true and complete reflection of my professional opinion.
- 8. I will notify those instructing me immediately if for any reason my existing report requires correction or clarification.
- 9. I understand that:
 - i. My report will form evidence to be given under oath or affirmation.
 - ii. I may be cross examined on my report by a cross examiner assisted by an expert witness.
 - iii. I am likely to be subject to adverse criticism by if I have not taken reasonable care in trying to meet the standards set out above.

Dr Brock Chisholm, BSc (Hons), MSc, Dclinpsych, CPsychol Chartered Clinical Psychologist



Appendix A: My Publications

- Chisholm, Brock (submitted) Stress, Trauma and Wellbeing in the Legal System book review. Journal of Critical Psychology.
- Chisholm (in press) Psychological Evaluation for Personal Injury Claims book review. Journal of Critical Psychology.
- 3. Chisholm (in press) Healing War Trauma book review. Journal of Critical Psychology
- 4. Tapfumaney, Johnson Chisholm *et al* (2014) Predictors of vocational activity over the first year in inner city early intervention in psychosis services. *Early Intervention In Psychiatry Available online, not yet printed.*
- 5. Stone, Fisher, Major, Chisholm et al (2013) cannabis use and symptoms in first episode psychosis. Psychological Medicine
- Ghali, Fisher, Chisholm et al (2013) Ethnic variations in the pathways into Early Intervention Services for psychosis British Journal of Psychiatry vol 202 277-283
- 7. Dominguez, Fisher, Major, Chisholm, et al (2013) Duration of Untreated Psychosis in Adolescents: Ethnic differences and clinical profiles *Schizophrenia Bulletin*
- 8. Jancovic, Chisholm & Swan (Submitted) How to Mix and Match combining medication and psychological treatment for Posttraumatic Stress Disorder *British Journal of Psychiatry* MS ID#: BJP/2011/094599
- Fisher, H, Chisholm et al (2008) Routine Evaluation in First Episode Psychosis Services: feasibility and results from the Midata project Social Psychiatry and Psychiatric Epidemiology Volume 43, Number 12 (2008), 960-967
- 10. Singh, Chisholm *et al* (2007) One-year outcome of an early Intervention psychosis service: a naturalistic evaluation. *Early Intervention in Psychiatry*; Vol 1: 282-287.
- 11. Chisholm, B, Freeman, D, Cooke, A. (2006). Identifying potential predictors of traumatic reactions to psychotic episodes *British Journal of Clinical Psychology*, 45, 545-559.
- 12. Chisholm, B, Freeman, D, Cooke, A. (2006). Identifying potential predictors of traumatic reactions to psychotic episodes. Poster at British Psychological Society Annual Conference. Cardiff 320th March-April 1st.
- 13. Hudnall Stamm, B., Chisholm, B, Larsen, D, Davis, KS (2006). Stressful Life Experience Exposure: Comparisons Across Three Samples. *International Study for Traumatic Stress Studies 23rd annual meeting*. Nov 4-7 Hollywood, California, USA.
- Hudnall Stamm, B., Chisholm, B., Larsen, D., Davis, KS (2007). Stressful Life Experience Exposure: Comparisons Across Three Samples. 2007 American Psychological Association 115th Annual Convention August 17-20th. San Fransico, USA.
- 15. Davis, H, Dusoir, T, Papadopoulou, K, Dimitrakaki, C, Chisholm, B, et al (2005) Child and Family Outcomes of the Early Promotion Project. *International Journal of Mental Health Promotion* Vol. 7. Issue 1, Feb. p. 63-81
- 16. Papadopoulou, K, Chisholm, B *et al* (2005). The Effects of the European Early Promotion Project Training on Primary Health Care Professionals *International Journal of Mental Health Promotion* Vol. 7. Issue 1, Feb. p. 54-62.
- 17. Burns, Millar, Garland Kendrick Chisholm and Ross (1998). Randomized controlled trial of teaching practice nurses to carry out structured assessments of patients receiving depot antipsychotic injections. *British Journal of General Practice*. 48(437): 1845–1848.
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Appendix B: Extract from the Istanbul Protocol

286. In formulating a clinical impression for the purposes of reporting psychological evidence of torture, the following important questions should be asked:

- (i) Are the psychological findings consistent with the alleged report of torture?
- (ii) Are the psychological findings expected or typical reactions to extreme stress within the cultural and social context of the individual?
- (iii) Given the fluctuating course of trauma-related mental disorders over time, what is the time frame in relation to the torture events? Where is the individual in the course of recovery?
- (iv) What are the coexisting stressors impinging on the individual (e.g. ongoing persecution, forced migration, exile, loss of family and social role)? What impact do these issues have on the individual?
- (v) Which physical conditions contribute to the clinical picture? Pay special attention to head injury sustained during torture or detention;
- (vi) Does the clinical picture suggest a false allegation of torture?

287. Clinicians should comment on the consistency of psychological findings and the extent to which these findings correlate with the alleged abuse. The emotional state and expression of the person during the interview, his or her symptoms, the history of detention and torture and the personal history prior to torture should be described. Factors such as the onset of specific symptoms related to the trauma, the specificity of any particular psychological findings and patterns of psychological functioning should be noted. Additional factors, such as forced migration, resettlement, difficulty of acculturation, language problems, unemployment, loss of home, family and social status should be considered. The relationship and consistency between events and symptoms should be evaluated and described. Physical conditions, such



as head trauma or brain injury, may require further evaluation. Neurological or neuropsychological assessment may be recommended.

288. If the survivor has symptom levels consistent with a DSM-IV or ICD-10 psychiatric diagnosis, the diagnosis should be stated. More than one diagnosis may be applicable. Again, it must be stressed that even though a diagnosis of a trauma-related mental disorder supports the claim of torture, not meeting criteria for a psychiatric diagnosis does not mean the person was not tortured. A survivor of torture may not have the level of symptoms required to meet diagnostic criteria for a DSM-IV or ICD-10 diagnosis fully. In these cases, as with all others, the symptoms that the survivor has and the torture story that he or she claims to have experienced should be considered as a whole. The degree of consistency between the torture story and the symptoms that the individual reports should be evaluated and described in the report.

289. It is important to recognize that some people falsely allege torture for a range of reasons and that others may exaggerate a relatively minor experience for personal or political reasons. The investigator must always be aware of these possibilities and try to identify potential reasons for exaggeration or fabrication. The clinician should keep in mind, however, that such fabrication requires detailed knowledge about trauma-related symptoms that individuals rarely possess. Inconsistencies in testimony can occur for a number of valid reasons, such as memory impairment due to brain injury, confusion, dissociation, cultural differences in perception of time or fragmentation and repression of traumatic memories. Effective documentation of psychological evidence of torture requires clinicians with a capacity to evaluate consistencies and inconsistencies in the report. If the interviewer suspects fabrication, additional interviews should be scheduled to clarify inconsistencies in the report. Family or friends may be able to corroborate details of the history. If the clinician conducts additional examinations and still suspects fabrication, the clinician should refer the individual to another clinician and ask for the colleague's opinion. The suspicion of fabrications should be documented with the opinion of two clinicians.





¹ Istanbul Protocol, Manual on the Effective Investigation and Documentation of Torture and other Cruel, Inhuman and Degrading Treatment or Punishment, United Nations New York & Geneva, 2004.

ADVOCATE MOHAMED AL-TAJER

Date: 4/17/2014

Your Excellency, Chairman of the Venerable Special Investigations Unit Greetings,

Subject: Opening a criminal complaint of torture and physical and moral coercion during arrest, investigation, and beyond

Complainant: Samy Merza Ahmed Mushaima Personal Number: 741101548

- -In reference to the above subject and in our capacity as the complainant's official representation (copy attached), and as the complainant was arrested on the charge of terrorist bombing in the area of Al-Daih on 3 March 2014 and a decision was issued to detain him for 60 days pending the indicated case.
- -And in light of the aforementioned case, the complainant was subjected to the cruelest and most vicious torture and physical coercion in order to obtain a confession by force to the charges attributed to both of them despite his stating to us as his attorneys that he was innocent of all of the charges against him in full.
- -On 3/5/2014, the complainant Samy Mushaima was arrested by policemen who did not hesitate for a moment to use the cruelest forms of beatings, insults, and humiliation against him.
- -The complainant Samy Mushaima was stripped completely of his clothing and beat in all parts of his body with a particular focus on his head and sensitive areas (the genitals). He was subjected to electrical shocks on his body and genitals and forced to confess to making explosive materials to target the policemen who were killed on 3/3/2014.
- -The complainant did not confess to those charges due to his certainty of and belief in his innocence but the torturers, for some reason, asserted that he had a relation to the incident and sexually assaulted him by penetrating his anus with foreign objects, pushing him into a state of collapse and severe seizures. But the torturers did not stop there, threatening that if he failed to confess, they would bring in his sisters and assault them in front of him, which brought him into a state of hysteria and pushed him to confess under duress to what the torturers wanted including the underlined statements and give his signature.
- -The kicking, punching, swearing, rape, and threats to rape his sisters were not the only means of torture they utilized against his body. Interrogators whipped him and forced him to stand for long hours against the wall without moving, accompanied by slaps, kicks, and beatings on the mouth until he lost five of his teeth. They entered foreign, sharp objects into his ears which punctured his ear drum, and all of the hair on his body was removed by a device which the Defendant could not identify.

He was hung upside down by his legs and a manner of torture known as Al-Felqa was practiced on him, which involves placing a pole between the victim's bent knees with his hands restrained in front of him. The victim is then raised and hung from the wall and whipped on the soles of his feet with a rubber hose. This was accompanied by whipping, continuous standing and beatings on the genitals, and sleep deprivation. The Defendant, in fear of both his life and seeing his sisters, was forced to confess to the

charges attributed to him in order to escape the torture he was subjected to in order to confess that he participated in the explosion.

Despite the confession, the Defendant has remained in solitary confinement in the Criminal Investigations building for 25 days deprived of sleep, using the bathroom, bathing, and even eating regularly, and due to the vicious nature of the torture, the complainant has suffered hallucinations, fainting, and vomiting.

Thus this forms a crime in accordance with the text of Article 208: "A prison sentence shall be the penalty for every civil servant or officer entrusted with a public service who uses torture, force or threat, either personally or through a third party, against an accused person, witness or expert to force him to admit having committed a crime or give statements or information in respect thereof. The penalty shall be life imprisonment should the use of torture or force lead to death."

As contained in Article 232 of the Penal Code and in crimes which breach the course of justice and the judiciary: "A prison sentence shall be the penalty for any person who uses torture, force or threatens to use them, either personally or through a third party, against an accused person, witness or expert to make him admit the commission of a crime or to give statements or information in respect thereof. The punishment shall be imprisonment for at least six months if the torture or use of force results in harming the safety of the body."

-As contained in Article 4 of the Convention Against Torture and Other Cruel, Inhuman, and Degrading Treatment or Punishment that "1. Each State Party shall ensure that all acts of torture are offences under its criminal law. The same shall apply to an attempt to commit torture and to an act by any person which constitutes complicity or participation in torture.

- 2. Each State Party shall make these offences punishable by appropriate penalties which take into account their grave nature."
- -Article 13 of the same Convention states that "Each State Party shall ensure that any individual who alleges he has been subjected to torture in any territory under its jurisdiction has the right to complain to, and to have his case promptly and impartially examined by, its competent authorities. Steps shall be taken to ensure that the complainant and witnesses are protected against all ill-treatment or intimidation as a consequence of his complaint or any evidence given."
- -This is in addition to the fact that the statements will be considered in the future as evidence of guilt against the complainant in the aforementioned case and charges that lack any basis in the truth were attributed to and ripped from him under torture, coercion, and defamation from the local media.

For this reason we seek the following from Your Excellency:

First: To open a criminal case, listen to the complainant's statements in the presence of his attorney, and conduct a judicial investigation of the incident through the question of the complainant or his attorney.

Second: To bring the complainant before an objective trilateral medical committee as quickly as possible.

Respectfully,

The Complainant's Attorney Mohamed Eissa Al-Tajer [Signature]





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Summary of Events Concerning Abbas al-Samia

1. Abbas al-Samia (*alternatively* Abbas al-Samea) is a Bahraini citizen born in August 1989. On 3 March 2013, at approximately 11:00 PM, Bahraini security officers from the Criminal Investigative Directorate (CID) surrounded his home with approximately 15 special forces vehicles. The security officers forcibly entered the home in search of Abbas. Upon locating Abbas, the security officers violently arrested him. They beat him throughout the abduction. They forced Abbas onto a bus and departed. Abbas' family did not hear from him until 23 March. Security officers first took Abbas to the CID building in Adliya. Throughout his abduction and his detention, Bahraini security officers severely tortured Abbas. As a result of this torture, Abbas suffered serious injuries that required medical attention. During Abbas' interrogation, security officers presented Abbas with a document. They did not allow him to read it but told Abbas that they would continue to torture him if he did not sign it. They also video-taped Abbas' false confession, made under torture. After Abbas provided the false confession, Bahraini forces moved him to Riffa police station. They then moved him to Jaw Prison. In June 2014, Bahraini authorities finally allowed Abbas' lawyer to contact him. Abbas' trial had already begun and he had missed at least three hearings.

Abbas' Arrest and Torture by Bahraini Security Forces

- 2. On 3 March 2013, at approximately 11:00 PM, Bahraini security officers associated with the Criminal Investigative Directorate (CID) surrounded Abbas' home with approximately 15 special forces vehicles. The security officers forcibly entered the home in search of Abbas. At no point did the security officers present a warrant. Upon locating Abbas, the security officers violently shoved him to the ground. They kicked him all over his body and struck his left thigh with a weapon. The security officers handcuffed Abbas and led him outside. Throughout the abduction they continued to beat him, causing his face to swell. The officers forced Abbas into a bus and departed. Abbas' family would not hear from Abbas until 23 March, when they received a phone call lasting several seconds. During the phone call Abbas communicated that he was alive.
- 3. After his abduction, the security officers first took Abbas to the CID building in Adliya. During Abbas' initial detention in the CID building, Bahraini security forces tortured Abbas. The security officers blindfolded Abbas and stripped him of his clothes. They insulted him and his religion. They beat Abbas and kicked him all over his body. Abbas fainted multiple times. At one point, the security officers told Abbas to confess to murdering three police officers. When Abbas refused, they resumed beating him. At one point, a security officer punched Abbas across the jaw, causing Abbas extensive injury. Abbas still feels pain from that injury today.
- 4. Over the course of the next three days, CID security officers subjected Abbas to increasingly painful acts of torture. They security officers began beating Abbas on his genitals. They subjected Abbas to electric shock. They used the *falaqa* torture technique on Abbas, which involved restraining Abbas and caning his feat. They forced Abbas into stress positions in which he could not breathe.
- 5. As a result of his torture and abusive treatment, Abbas suffered serious injuries that required medical attention. Three days after his arrest, Abbas fainted and could not be woken. CID officers transported Abbas to the Bahrain Defense Force (BDF) al-Qurain hospital. Medical tests confirmed that Abbas suffered from extensive internal bleeding, a fractured vertebrate, a broken pelvis, and dangerously low blood pressure. The hospital transferred Abbas to intensive care, where he underwent an operation to treat his internal bleeding. As a result of this operation, Abbas' condition eventually stabilized.

- 6. One week after Abbas was admitted to the BDF hospital, CID security personnel forcibly discharged Abbas in order to resume his interrogation. The doctor assigned to Abbas' case objected to the discharge on the grounds that Abbas had not recovered enough to resume interrogation.
- 7. Upon resuming Abbas' interrogation, Bahraini security forces continued torturing Abbas. They proceeded to subject him to intense beatings and insults. At some point, the security officers presented Abbas with a document. They did not allow him to read it. The security officers told Abbas that they would continue to torture him if he did not sign it. Abbas did not want the security officers to continue to torture him, so he signed the document. The next day, the security officers took Abbas and several other defendants to the scene of the alleged crime. Under threat of torture, the Bahraini security officers forced Abbas to confess to murdering three police officers. They video-taped his false confession.
- 8. After Abbas provided the false confession, Bahraini security forces moved him to Riffa police station. They placed him in solitary confinement for an unknown length of time. Afterwards, they moved him to Jaw Prison. In June 2014, three months after his initial detention, Bahraini authorities finally allowed Abbas' lawyer to contact him. At this point, Abbas' trial had already begun, and he had already missed at least three hearings. His next hearing is scheduled to take place on 24 July 2014. Based on previous practice, it is feared that the Court will admit Abbas' false confession into evidence.
- 9. Abbas is currently detained in Jaw Prison, while he awaits his next hearing. As a result of the torture he sustained while in detention, Abbas requires additional medical care. The Bahraini government has refused to provide him with continued medical care.

Information Concerning the Preparer of this Document

10. This statement was prepared and submitted by R. James Suzano, J.D., the legal officer for Americans for Democracy and Human Rights in Bahrain (ADHRB), and Morgan Fiander, the legal intern for ADHRB. The preparer of this document may be reached at 1001 Connecticut Ave NW Suite 205, Washington, DC, 20036, or by phone at +1 (202) 621-6141 x106.



James Suzano <jsuzano@adhrb.org>

Complaint re Young Men in Prison #4

Fahad A. Al Binali <f.albinali@ombudsman.bh>

Mon, Dec 22, 2014 at 6:33 AM

To: James Suzano <jsuzano@adhrb.org>

Cc: Nabeel Rajab <nabeel.rajab7@gmail.com>, Complaints <complaints@ombudsman.bh>, Habdulla <habdulla@adhrb.org>, inter <inter@ombudsman.bh>

Dear Mr. Suzano,

Thank you for contacting the Independent Ombudsman Office. We confirm our willingness to provide information to ADHRB on matters of mutual concern.

With regards to your email of 17 July 2014 followed by your email of 8 December 2014, I am sure you appreciate that the Ombudsman Office has a duty and responsibility of confidentiality of all the complainants particularly where complaints relate to their healthcare records. However, please find updates below for the cases accompanied by attached consent forms of the individuals concerned to release the requested information.

Abbas Jameel Al Sameea:

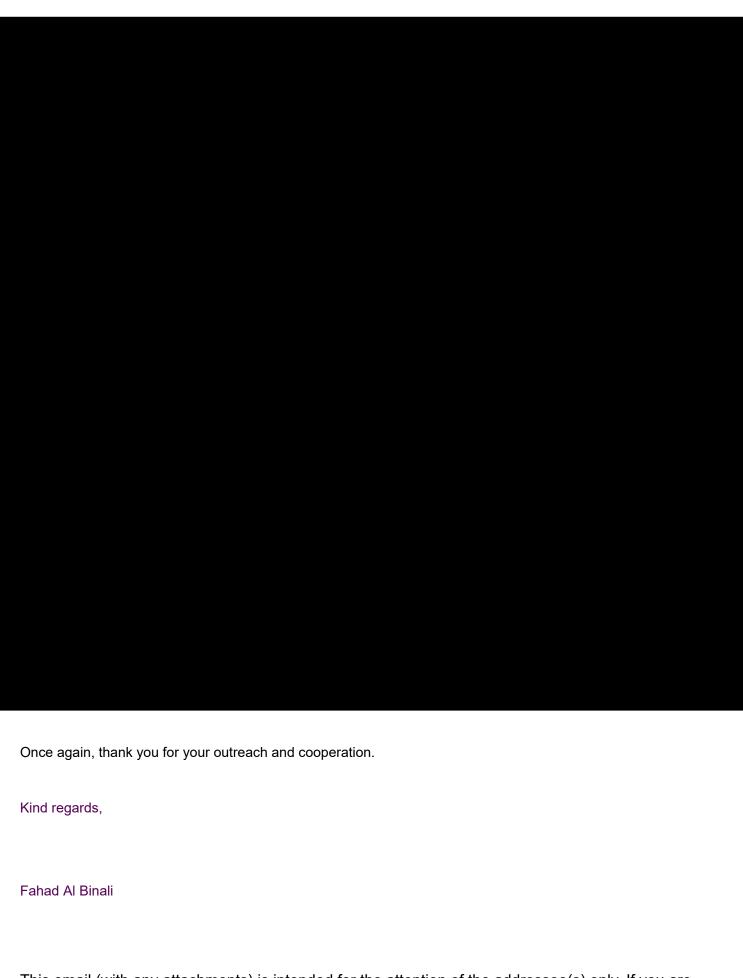
Two complaints were received regarding Mr Al Sameea filed by his mother, which the Ombudsman Office acted upon. Niether of those complaints mention some of the allegations listed in the Americans for Democracy and Human Rights in Bahrain (ADHRB), not at the time of complaint nor on any occasion where Mr Al Sameea or Mrs Ahmed, his mother, were interviewed. In the first complaint related to mistreatment and healthcare. The complainant (Al Sameea's mother) was interviewed by an Ombudsman investigator. A site visit to Mr. Al Sameea at Jaw Prison was made by Ombudsman Investigators to interview him and take his testimony regarding his mother's complaint and open an investigation.

The Ombudsman Office asked for the records of all information from the point of arrest to detention, imprisonment, a copy of the legal basis on which Mr. Al Sameea was placed in prison. In addition, a medical report of Mr. Al Sameea backed with documentation and records of his medical appointments and doctor visits.

- Our investigations led to criminal allegations so the case was referred to the Special Investigation Unit (SIU) – specifically the Allegations of mistreatment at the time of arrest.
- With regards to the status of the investigation of allegation of mistreatment, the investigation is still ongoing. As the ombudsman last follow up was on 14 Dec. 2014.
- On the issue of healthcare, we would inform you that he had an access to medical treatment and healthcare to meet their needs.
- The complainant, Mrs. Ahmed, was informed about the outcome of the investigation.

Another complaint was received by (Al Sameea's mother) to the office of the Ombudsman on behalf of her son as she alleged that her son was not allowed to attend his court hearings with the exception of the first hearing. A complain was opened; Ombudsman investigators interviewed her and made a site visit to Mr. Al Sameea at Jau Prison to interview him and take his testimony and asked for a copy of the exit logs.

This case was resolved as a recommendation was issued by the Ombudsman to inform the inmate of his court dates, and any dates relevant to his trial, in writing at a reasonable period before the hearing takes place. At the time, his upcoming court date was on 24 July 2014. A telephone call was made to his mother and she had confirmed that her son as attended his court hearing.



This email (with any attachments) is intended for the attention of the addressee(s) only. If you are not the intended recipient, please inform the sender straight away before deleting the message





	sonal Details	Re	ference Number
Name	Sami Mashaina	CPR	7411101548
Nationality	Sami Mashaina Bahraini	Mobile/Home Phone	
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COMPLAINT TO THE OMBUDSMAN OF BAHRAIN

REGARDING SAMI MUSHAIMA

- 1. Sami Musheima (CPR #7411101548) (*alternately* Sami Mushaima) is a 39-year old Bahraini citizen (DOB: 01 November 1974). He is a member of the Musheima clan and is related to Hassan Musheima (*alternately* Hasan Mushaima), a prominent Bahraini politician currently serving a life sentence in Jaw Prison. Prior to this most recent incident, security forces raided Sami's family home at least 23 times.
- 2. On 3 March 2014 at around 1:00 PM, Bahraini domestic security officers raided Sami's family home. They broke down the front door, and approximately 15 officers entered the building. Some were dressed as civilians, while others were in uniform. They immediately located Sami, threw him on the floor, handcuffed him, and placed him under arrest. They did not present a warrant, and were verbally abusive during the entire encounter.
- 3. The security officers took Sami from his home and transported him to Riffa police station, where he would stay for the majority of the following several weeks. During his time at Riffa police station, security officers would also periodically transport Sami to the Criminal Investigative Directorate (CID) building. Bahraini security officers tortured Sami at both of these locations. They severely beat him, focusing substantially on his face. They used a device to electrocute private and sensitive areas of Sami's body, including parts of his upper body and his genitals. They pulled the hair out of sensitive areas of his body, placed sharp objects in his ear, and stapled his wrists. They mutilated his mouth by intentionally breaking and forcibly removing his teeth. Additionally, Bahraini security officers subjected Sami to sexual abuse by stripping him naked, forcefully grabbing his genitals, and inserting an object into his anus. At some point, Sami was subjected to so much abuse that the security forces were forced to take him to a hospital. During the entire period of his detention at Riffa police station, the security officers kept Sami in extended solitary confinement.
- 4. His family was first allowed to visit Sami at the CID building on 23 March 2014. Sami's family noticed visible signs of torture on Sami's body. His face was swollen. Many of his teeth were broken or missing. He had burn marks on his hands. Additionally, Sami was forced to wear winter clothing in order to conceal additional marks of physical abuse on his body. Following this visit, Sami's lawyer requested that the government allow Sami to be examined by a forensic doctor. The government has yet to respond to this request. Since that first visit, Sami's family has been allowed to visit him again. During this visit, Sami was unable to walk normally, and complained of loss of hearing in his left ear. Other prisoners have mentioned that Sami suffers from periodic emotional distress and has been seen vomiting blood.
- **5.** Sami's family has since learned that the government is charging Sami with assembling a remote-controlled bomb that detonated on 3 March 2014, killing three officers in the area where Sami lives. Sami is illiterate, and does not possess the skills necessary to create such a weapon. Further, Sami states that he was at a friend's house at the time of the detonation.
- **6.** Sami is currently incarcerated at Dry Dock detention center. It is feared that he was tortured in order to obtain a false confession for use in his pending criminal trial.

INFORMATION CONCERNING THE PREPARER OF THIS DOCUMENT

7. This statement was prepared and submitted by R. James Suzano, J.D., the legal officer for Americans for Democracy and Human Rights in Bahrain (ADHRB). The preparer of this document may be reached at 1001 Connecticut Ave. NW Suite 205, Washington, DC 20036, or by phone at +1 (202) 621-6141 x106.



	Complaint Form
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	What are the results and the actions taken? se attack copies of letters submitted and any responses received)
(111)	Documents supporting the complaint:
+ h	Copy of Identity Card of the complainant, (If the complaint on behalf of someone else, slease attach also a copy of his/her ID card). In the case of a complaint on behalf of someone else, please provide a copy of the athorization or power of attorney, or proof of your relationship to the complainant. It copy of courts judgments and any letters or decisions of any governmental body on the subject of the complaint. It copy of letters submitted to other human rights organizations or associations on the object of the complaint, and any responses received. It copy of any documents or evidence supporting the facts of the complaint or any lescription supporting the allegation regarding the violation of human rights. Introduces, videos, sound clips supporting of the complaint.
	Follows to attack these documents or failure to complete the requested information will lead to delays in the consideration of the complaint and tiden the appropriate actions

(IV) Please read and sign this declaration

I would like the National Institution for Horner Rights (NIHR) to consider one complaint. I confirm all the information I have given in true and accurate to the best of my knowledge. I understand that:

- You will need to handle personal details about me which could include sensitive information – to deal with my complaint effectively.
- Yes may need to share information about my complaint unity the authority/authorities I have complained about and any other relevant organization.
- You may contact me to update me about the complaint or to ask for more information.
- You hardle complaints according to the Royal Order no. (46/2009) amended by Royal Order no. (28/2012) with regard to the establishment of the NIHR, and the main proposes and objectives that mention thereof.
- You may publish examples of the complaint, but you tail allows respect my privacy and keep my personal information confidential.

Name of the complainant:	Husain Abdulla
Dute:	14/00/2014
Signature of complaine	

PO Box 20808 | Manama | Kingdom of Bahtsin eMail: complaintfinite.org bis | notice of earty bis

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Bertista
- Semana

On Dec 11, 2015, at 21:37, James Suzano <jsuzano@adhrb.org> wrote:

Dear Ms. Khoury,

First, I want to thank you for the information that you recently sent us regarding Mr. Ali Faisal Abdul Wahab and Mr. Fadhel Abbas. We appreciate you investigating the allegations that we submit.

Second, I wanted to inquire about the status of several other complaints that we sent to your office. In 2014, we filed a number of complaints with your office, and we haven't heard anything on the status of any investigations that may have been opened. We fear that the complaints may have been lost, and we write to confirm that you received them; in the event that you did not, please let us know, and we will re-submit.

We submitted complaints regarding the following persons to the NIHR.

- 1. Abbas al-Samia, CPR # Submitted on 17 September 2014
- 2.
- 3.

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	Mohamed Ramadan, CPR #	Submitted on 17 September 2014
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19. 20. 21. 22. 23. 24. 25. 26. 27.		
19. 20. 21. 22. 23. 24. 25. 26. 27.		
19. 20. 21. 22. 23. 24. 25. 26. 27.		

We would appreciate if you could confirm that you have received these complaints, and if you could provide us with an update regarding their status. In the event that you lost or otherwise did not receive the complaints, please let us know so that we can re-submit.

Best regards,

James Suzano

R. James Suzano, JD | Acting Director of Advocacy and Legal Affairs

Americans for Democracy & Human Rights in Bahrain 1001 Connecticut Avenue NW, Suite 205 Washington, D.C. 20036

Tel: (202) 621-6141, x106 | Cell: (310) 591-0872 | Fax: (202) 758-0332

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On Sun, Feb 21, 2016 at 5:16 AM, Maria Khoury < mak@nihr.org.bh > wrote:

Dear James

Here's an update as at COB 18 February, 2016:

Abbas al Sameera

His complaint was followed up at the time in 2014 in coordination with the Ombudmen office in Bahrain and the Ministry of interior and the result was that mistreatment allegations were not evident .

- 2. As for the remaining names listed , they have not come forward or anyone on their behalf to NIHR to submit a complaint.
- 3. It is also our understanding from follow up with Ombudmen office that some have submitted complaints to the said office.

We suggest that you follow up directly with the Ombudmen office and if a member of the families of anyone listed below wishes to file a direct complaint with NIHR, they may do so and we'd process it accordingly.

However, other than the two mentioned above we haven't received anything from anyone else on the list.

Please let me know if I may assist you in this specific matter any further.

Kind regards

Maria Khoury

Kingdom of Bahrain PUBLIC PROSECUTION General Directorate of Forensic Science Evidence



T/693 E A A M/T SH/2014/227

FORENSIC DOCTOR'S REPORT

IN COMPLAINT NUMBER 31/2014 OF THE GENERAL INVESTIGATION DEPARTMENT

WITH REGARD TO THE FORENSIC MEDICAL EXAMINATION OF THE ACCUSED / MOHAMMAD RAMADAN ALI HUSSEIN (821100696)

MR / Khalid al-Tamimi – deputy prosecutor

I state that I, Doctor Mohammad Nour al-Din Ahmad Ans Fowda, — forensic doctor with the Public Prosecution — based on a decision by the Public Prosecution in the aforementioned case, conducted on 2/3/2014 a medical examination, which was a forensic medical examination, on the accused / Hussain Ali Moussa Mohammad. This was to determine any injuries, their causes, how they were sustained, the date of occurrence, the methods used, and if his injuries feasibly concur with what was provided by the Public Prosecution's memorandum or not.

And based on this, I state the following

1. Public Prosecution's memorandum

It thus summarised that we were provided with a notification of procedure submitted by First Lieutenant Yousef Ahmad, which provides that on 14/2/2014 at around 7 pm, an explosive device was placed in an industrial area in the Al-Deir area on Street 25, which caused injury to 5 police officers. Additionally this transcript provides that when questioning law enforcement forces, they stated that in the course of the usual patrol at the entrance of Al-Deir, and accompanied by a number of police officers, a group of men exited, perhaps around 40, who threw firebombs at them. They initiated the normal procedure and surrounded them from the front. The group compelled them to move toward Street 25 and then they returned inside the village. The aforementioned followed them from a rear position and threw Molotovs and stones until the police officers halted at the corner of Al-Kheif Mosque, more precisely under a lamppost. When they approached the entrance,

suddenly the explosive device was detonated in the industrial area, and several officers were injured, included the aforementioned who died as a result.

When questioning the accused/ Mohammad Ramadan Issa, he confessed to his participation in gatherings only and he denied the rest of the charges laid against him. Upon speaking to him it was gathered that he is 40 years of age, tall, with brown skin. No injuries were apparent from here and when asked if he had sustained injuries, he replied in the positive.

2. Medical examination:

Today, the accused Mohammad Ramadan Issa was present, accompanied by Police Officer Faisal Qader (military number 107000). I took an overview of him by way of personal questions and upon examination it appeared that he was in general good health and in possession of his faculties. Upon examination of his body, there was the presence of bruising that was in the form of double strips, measuring 13 cm in length and 1 cm in width, light purple in colour, and located on the left leg. When asked about their cause, he said he did not know.

OPINION

Based on what was presented, I state the following:

Upon examination of the accused/Mohammad Ramadan Isa's body, it appeared that the bruising witnessed and described are contusions that occurred with collision to the body with an object. This type of injury usually heals without causing disability in a minimum period of 20 days and does not cause any impairment.

Forensic Doctor

Dr Mohammad Nour el-Din Ahmad Ans Fawda

Signed

Stamped

Psychological Medico-Legal Opinion

on the report of Dr. Mohammed Nour al Din Ahmad Ans Fowda on Mohammed Ramadan

Report prepared by Dr Brock Chisholm Clinical Psychologist

Prepared in March 2016¹

Specialist Field: mental health difficulties arising from traumatic events

Report prepared by:

Dr. Brock Chisholm, BSc (hons), MSc, DClinpsych CPsychol Chartered Clinical Psychologist Criterion A Psychology Services CriterionA.com

Tel: 07971 407 324 brock@criteriona.com

¹ Small amendment made January 16th 2017 to paragraph 19 as there was a comment based on a translation error.



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My Expertise

- I have worked as a psychologist since 1994. I hold a BSc (Hons) in Psychology; an MSc in Psychological Research Methods; and a Doctorate of Clinical Psychology. I am an Associate Fellow of the British Psychological Society. I am registered with the Health Professionals Council as a practitioner psychologist.
- 2. I am expert in the diagnosis and treatment of complex presentations of traumatic stress. I have psychologically assessed several hundred survivors of traumas that include torture, persecution, war and rendition using the Istanbul Protocol. I hold a certificate in diagnosis of mental health disorders from the World Health Organisation. I train psychiatrists and other mental health professionals in diagnostic practice and in working with trauma and psychosis. (For example the Institute of Psychiatry, Glasgow, Belfast and the Berkshire NHS Trusts). I am an elected board member of the UK Psychological Trauma Society (UKPTS), the UK authority in the psychological consequences following traumatic events.
- 3. I am Director of *Criterion A Psychology Services*. I was previously employed with the Forced Migration Trauma Service, an NHS service that provides assistance and psychological treatment for PTSD to forced migrants as well as undertaking research. Our patients were predominately torture survivors from The Middle East. I previously worked for several years at The Traumatic Stress Clinic, a National Centre for PTSD, treating British veterans, refugees and UK trauma victims.
- 4. I have been instructed as expert witness by a variety of organisations including The UK Ministry of Defence, The Royal Military Police, The Ministry of Defence Police, The Serious Fraud Office, The UK Home Office, several specialist Police Departments including The Metropolitan Police Counter Terrorism Command, War Crimes Division and The UK Crown Prosecution Service on behalf of the National Crime Agency (The UK equivalent of the FBI). I have also been instructed by a variety of independent legal firms. I am the lead psychologist on the Iraqi Historical Allegations Team, which is a UK Ministry of Defence funded international war crimes investigation.
- 5. I have provided expert witness and medico-legal reports for criminal and civil matters in immigration, Court of Appeal, Supreme Court, the European Court of Human Rights, the Baha Mousa Public Inquiry, the African Court of Justice and The United Nations and cases involving security services. I have provided evidence under the Universal Jurisdiction (Section 134 of the Criminal Justice Act) as applied to torture. To my knowledge I have never attracted criticism and my opinion has been accepted by the court. In HS (Uganda), R (on the application of) v Secretary of State for the Home Department [2012] EWCA Civ 94 Lady Justice Rafferty says 'it seems to me that the authority and depth of Dr Chisholm's report arguably changes the landscape of the appellant's claim.'
- 6. I have publications in peer-reviewed journals, which are listed in the appendix. I sit on the Childhood Adversity and Psychosis steering and advisory group at the Institute of Psychiatry; a research project into causations of psychosis.
- 7. I am a visiting lecturer at the Royal Hospital for Tropical Medicine, and previously Queen Mary University of London and Clinical Research Fellow and Honorary Lecturer at St. Georges Hospital Medical School, University of London. I am a trainer for the Metropolitan Police in The Sexual Offences, Child Abuse and Exploitation Command.
- 8. I have run workshops for the British Association of Behavioural and Cognitive Therapists and The British Psychological Society and several other health service and academic institutions. I provided the content on PTSD and psychosis for www.mentalhealthcare.org.uk which receive 35 000 hits per month. I have also run workshops for members of the legal profession in working with victims of trauma within a legal framework.
- I am on The UK team of experts on the Preventing Sexual Violence Initiative. This is a UK Foreign and Commonwealth Office managed scheme comprising of 73 doctors, lawyers, police officers, psychologists and forensic scientists.



Introduction

- 1. The report below reviews the quality of the medical report provided into the possible medical evidence of torture. My comments below relate specifically to the documents provided to me. I acknowledge that there may have been a further examination or other documents of which I have no knowledge.
- 2. I make no assumption and express no opinion on the court's ruling on the guilt of Mr Mohammed Ramadan. My comments are made solely and specifically in respect of the instructions below.

Instructions

- 3. I was asked by Reprieve on 2 March 2016 to review and comment on the quality of the Forensic Doctor's report dated 2 March 2014 by Dr Mohammed Nour al Din Ahmad Ans Fowda on their client, Mohammed Ramadan. In addition, I was asked to identify whether the report was compliant with the Istanbul Protocol (IP) standards¹. The Istanbul Protocol is an internationally recognised set of guidelines to employ when investigating allegations of torture.
- 4. I was also provided with a copy of a General Complaint to the National Institute of Human Rights in relation to the death sentences of Mohammed Ramadan and Husain Mousa (undated).

Quality of the Forensic Science Evidence Report

- 5. In the General Complaint to the National Institute of Human Rights (undated) it was noted that Mr Ramadan alleges that after he was arrested on 20 February 2014, he was transported to a CID building where himself, his family and religion were insulted. He was taken to a cold room and blindfolded. He was told that if he did not confess to being a traitor he would be hurt. He was taken to another room where he was beaten, slapped and kicked about his body but in particular his head and ears. This treatment was alleged to have lasted for four days. Following this, he agreed to confess as he wanted the treatment to end. Mohammed Ramadan identified to a Judge that he had signed a false confession. Following this he spent 13 days at Riffa prison where he was kept in solitary confinement. His treatment there was documented as being blindfolded, tied with belts, handcuffed and forced to listen to the sound of others being tortured. Also, it was noted that the Coroner asked about the bruising on his legs to which he responded with a lie that he had fallen out of bed.
- 6. As with the co-defendant, the date of the forensic examination occurred on the 2nd of March 2014. It is unclear where this falls within the chronology of arrest and alleged torture.
- 7. The report appears to be using a template that has led to an error. This may have occurred during the translation stage rather than the original document. The report incorrectly uses the name of the co-accused (Hussein Moussa) in line 4 of paragraph 1 rather than Mohammed Ramadan.
- 8. The report does not include a section specifying the qualifications or independence of the author. This runs contrary to paragraph 162 of the Istanbul Protocol, which states that reports should be conducted with 'objectivity and impartiality' and be based on the medical professional's 'expertise and professional experience'.



- 9. There is no 'Statement of Truth' within the report as is required within a legal context when providing evidence for the Court and as an indicator of veracity.
- 10. It is unclear who requested the report and how the request was made. Paragraph 123 of the IP states:

"Requests for medical evaluations by law enforcement officials are to be considered invalid unless they are requested by written orders of a public prosecutor."

- 11. The report documents bruising on his left leg. It states that the defendant did not know how the unusual bruising on his left leg, that was comprised of two strips 13cm long and 1 cm wide, occurred. Apparently not knowing how bruising occurred is an indication of being afraid to speak honestly. In the general complaint to the *National Institute of Human Rights* it states that he informed the doctor that it occurred falling out of bed. If this was reported to the doctor, then a statement on the relative consistency of the mark with the alleged injury should have been stated. This point is expanded upon later in my report.
- 12. The Istanbul Protocol highlights that it is common for prisoners to be frightened to report injuries sustained under torture. For this reason it makes a number of recommendations to increase the likelihood of accurate reporting. None of these appear to have been followed. As with the co-defendant, the report states that Mohammed Ramadan was interviewed in the presence of police officer. In this case it reports it was Faisal Qader, a different police officer to the one that accompanied Hussein Mousa. Being accompanied by a police officer is a direct violation of the IP guidelines since it has the potential to impact on his presentation, openness and transparency. The IP states: "Their presence during the examination may be grounds for disregarding a negative medical report" (para 125).
- 13. To ensure independence the lawyers of the defendants "should be present during the request for examination and post-examination transport of the detainee. (para 123)" Additionally, "Detainees have the right to obtain a second or alternative medical evaluation by a qualified physician during and after the period of detention (para 123)." However, it is acknowledged that doctors themselves may face the threat of persecution, particularly if they are subject to the same régime as the defendants.
- 14. It is also important for the examining medical professional to ensure that the individual feels comfortable when recounting traumatic experiences and this does not appear to have been done in this case. This is contrary to Paragraph 124 of the IP that states:

"Each detainee must be examined in private. Police or other law enforcement officials should never be present in the examination room. This procedural safe- guard may be precluded only when, in the opinion of the examining doctor, there is compelling evidence that the detainee poses a serious safety risk to health personnel. Under such circumstances, security personnel of the health facility, not the police or other law enforcement officials, should be available upon the medical examiner's request. In such cases, security personnel should still remain out of earshot (i.e. be only within visual contact) of the patient. Medical evaluation of detainees should be conducted at a location that the physician deems most suitable."

15. There are therefore compelling reasons to disregard the forensic report and seek a further, independent investigation. However, it is noted that two years have now passed since the report, well past the 20 days the report estimated that the documented bruises would heal.



- 16. The full details of any injury should have been documented. It is usual for a body or scar diagram, along with photographs, to be utilised and particularly where there is bruising that might fade. It appears that this was not provided within the report. The report only gave a brief and vague description of the process undertaken.
- 17. The report initially provided a brief summary of the incident for which the accused has been found guilty, namely the explosion in the Al-Deir area based on the Public Prosecution's Memorandum. Only a very limited attempt has been made by the author to document the account of the event and what happened subsequently from the individual concerned. A more thorough history should have been sought and it is not clear what was reported.
- 18. For example, Mohammed Ramadan '...confessed to his participation in gatherings only and he denied the rest of the charges laid against him...No injuries were apparent from here, and when asked if he had sustained injuries, he replied in the positive.' Due to the fact that there is limited explanation given it is impossible to glean fully what was meant by this statement.
- 19. As stated above, it was identified in the report that 'there was the presence of bruising that was in the form of double strips, measuring 13cm in length and 1cm in width, light purple in colour, and located on the left leg. When asked about the cause he said he did not know'. Furthermore, the report concludes in the Opinion section that '...it appeared that the bruising witnessed and described are contusions, that occurred with collision to the body with an object. No causation is explored or rationale given for the injuries within the report and no attempt was made to obtain any elaboration from the individual concerned.
- 20. Paragraph 187 of the IP clearly lays out a template for reporting consistency between a person's history of the injury and that observed by the forensic examiner. These are as follows:
 - Not consistent: the lesion could not have been caused by the trauma described;
 - Consistent with: the lesion could have been caused by the trauma described, but it is non-specific and there are many other possible causes;
 - Highly consistent: the lesion could have been caused by the trauma described, and there are few other possible causes;
 - **Typical of:** this is an appearance that is usually found with this type of trauma, but there are other possible causes;
 - Diagnostic of: this appearance could not have been caused in any way other than that described.
- 21. The report makes no comment upon consistency of the documented bruising with any possible cause.
- 22. A complete medical history was not provided within the report. This runs contrary to the IP guidelines, given that it is not possible to qualify what occurred as a result of the incident/s in question without accounting for the presence of any pre-existing conditions or health issues.
- 23. Chapter VI of the Istanbul Protocol provides guidelines on the documenting and forensic examination of psychological evidence arising from torture. It is particularly important to follow if there is no or limited physical evidence. Psychological evidence considers and documents a range of factors, including the background of the individual, a description of the allegations of abuse, evidence of psychological damage,



- consistency of the psychological damage with the alleged abuse, whether findings are expected or typical reactions to extreme stress, co-existing stressors or physical conditions that could have impacted, and evidence of malingering or falsehood (See Appendix B).
- 24. The Forensic Doctor's report does not mention or acknowledge the possibility of psychological damage, nor does it explore the origins of such. I would consider this to be a significant breach of the protocol.
- 25. In my opinion the report from the General Directorate of the Forensic Science Evidence of the Kingdom of Bahrain Public Prosecution report fails in almost all aspects of what is required in a forensic investigation of possible torture. The report provided to me is in complete violation of the internationally recognised Istanbul Protocol and should therefore be completely disregarded.
- 26. The opportunity to investigate the veracity of the account provided has have diminished as a consequence of the shortcomings of the original examination and report provided.

Dr Brock Chisholm, BSc (Hons), MSc, Dclinpsych, CPsychol

Chartered Clinical Psychologist



Statement of Truth

- 1. I confirm that insofar as the facts stated in my report are within my own knowledge. I have made clear which they are and I believe them to be true, and the opinions I have expressed represent my true and complete professional opinion.
- 2. I understand that my duty to the court is to provide an impartial professional opinion and to assist the court in reaching a decision. I have complied with that duty.
- 3. I have endeavoured to be accurate and have covered all the relevant issues.
- 4. I have included all matters which I have knowledge of or which I have been made aware of that might affect the validity of my report.
- 5. I have indicated the sources of the information I have used.
- 6. I have not included or excluded anything that has been suggested by me to others.
- 7. I believe that the facts that I have stated in this report are true and that opinions expressed are a true and complete reflection of my professional opinion.
- 8. I will notify those instructing me immediately if for any reason my existing report requires correction or clarification.
- 9. I understand that:
 - i. My report will form evidence to be given under oath or affirmation.
 - ii. I may be cross examined on my report by a cross examiner assisted by an expert witness.
 - iii. I am likely to be subject to adverse criticism by if I have not taken reasonable care in trying to meet the standards set out above.

Dr Brock Chisholm, BSc (Hons), MSc, Dclinpsych, CPsychol Chartered Clinical Psychologist



Appendix A: My Publications

- 1. Chisholm, Brock (submitted) Stress, Trauma and Wellbeing in the Legal System book review. *Journal of Critical Psychology*.
- Chisholm (in press) Psychological Evaluation for Personal Injury Claims book review. Journal of Critical Psychology.
- 3. Chisholm (in press) Healing War Trauma book review. Journal of Critical Psychology
- 4. Tapfumaney, Johnson Chisholm *et al* (2014) Predictors of vocational activity over the first year in inner city early intervention in psychosis services. *Early Intervention In Psychiatry Available online, not yet printed.*
- 5. Stone, Fisher, Major, Chisholm et al (2013) cannabis use and symptoms in first episode psychosis. Psychological Medicine
- Ghali, Fisher, Chisholm et al (2013) Ethnic variations in the pathways into Early Intervention Services for psychosis British Journal of Psychiatry vol 202 277-283
- 7. Dominguez, Fisher, Major, Chisholm, et al (2013) Duration of Untreated Psychosis in Adolescents: Ethnic differences and clinical profiles *Schizophrenia Bulletin*
- 8. Jancovic, Chisholm & Swan (Submitted) How to Mix and Match combining medication and psychological treatment for Posttraumatic Stress Disorder *British Journal of Psychiatry* MS ID#: BJP/2011/094599
- Fisher, H, Chisholm et al (2008) Routine Evaluation in First Episode Psychosis Services: feasibility and results from the Midata project Social Psychiatry and Psychiatric Epidemiology Volume 43, Number 12 (2008), 960-967
- 10. Singh, Chisholm *et al* (2007) One-year outcome of an early Intervention psychosis service: a naturalistic evaluation. *Early Intervention in Psychiatry*; Vol 1: 282-287.
- 11. Chisholm, B, Freeman, D, Cooke, A. (2006). Identifying potential predictors of traumatic reactions to psychotic episodes *British Journal of Clinical Psychology*, 45, 545-559.
- 12. Chisholm, B, Freeman, D, Cooke, A. (2006). Identifying potential predictors of traumatic reactions to psychotic episodes. Poster at British Psychological Society Annual Conference. Cardiff 320th March-April 1st.
- 13. Hudnall Stamm, B., Chisholm, B, Larsen, D, Davis, KS (2006). Stressful Life Experience Exposure: Comparisons Across Three Samples. *International Study for Traumatic Stress Studies 23rd annual meeting.* Nov 4-7 Hollywood, California, USA.
- Hudnall Stamm, B., Chisholm, B., Larsen, D., Davis, KS (2007). Stressful Life Experience Exposure: Comparisons Across Three Samples. 2007 American Psychological Association 115th Annual Convention August 17-20th. San Fransico, USA.
- 15. Davis, H, Dusoir, T, Papadopoulou, K, Dimitrakaki, C, Chisholm, B, et al (2005) Child and Family Outcomes of the Early Promotion Project. *International Journal of Mental Health Promotion* Vol. 7. Issue 1, Feb. p. 63-81
- 16. Papadopoulou, K, Chisholm, B *et al* (2005). The Effects of the European Early Promotion Project Training on Primary Health Care Professionals *International Journal of Mental Health Promotion* Vol. 7. Issue 1, Feb. p. 54-62.
- 17. Burns, Millar, Garland Kendrick Chisholm and Ross (1998). Randomized controlled trial of teaching practice nurses to carry out structured assessments of patients receiving depot antipsychotic injections. *British Journal of General Practice*. 48(437): 1845–1848.
- 18. Greenwood, Chisholm, Burns and Harvey (2000) Community mental health team case-loads and diagnostic case-mix *Psychiatric Bulletin* 24:290-293.
- 19. Mild traumatic brain injury--the Fife perspective (1997) Skelton, Walley, Chisholm and Sloan The Scottish Medical Journal 42(2):40-3]



Appendix B: Extract from the Istanbul Protocol

286. In formulating a clinical impression for the purposes of reporting psychological evidence of torture, the following important questions should be asked:

- (i) Are the psychological findings consistent with the alleged report of torture?
- (ii) Are the psychological findings expected or typical reactions to extreme stress within the cultural and social context of the individual?
- (iii) Given the fluctuating course of trauma-related mental disorders over time, what is the time frame in relation to the torture events? Where is the individual in the course of recovery?
- (iv) What are the coexisting stressors impinging on the individual (e.g. ongoing persecution, forced migration, exile, loss of family and social role)? What impact do these issues have on the individual?
- (v) Which physical conditions contribute to the clinical picture? Pay special attention to head injury sustained during torture or detention;
- (vi) Does the clinical picture suggest a false allegation of torture?

287. Clinicians should comment on the consistency of psychological findings and the extent to which these findings correlate with the alleged abuse. The emotional state and expression of the person during the interview, his or her symptoms, the history of detention and torture and the personal history prior to torture should be described. Factors such as the onset of specific symptoms related to the trauma, the specificity of any particular psychological findings and patterns of psychological functioning should be noted. Additional factors, such as forced migration, resettlement, difficulty of acculturation, language problems, unemployment, loss of home, family and social status should be considered. The relationship and consistency between events and symptoms should be evaluated and described. Physical conditions, such



as head trauma or brain injury, may require further evaluation. Neurological or neuropsychological assessment may be recommended.

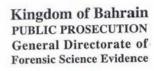
288. If the survivor has symptom levels consistent with a DSM-IV or ICD-10 psychiatric diagnosis, the diagnosis should be stated. More than one diagnosis may be applicable. Again, it must be stressed that even though a diagnosis of a trauma-related mental disorder supports the claim of torture, not meeting criteria for a psychiatric diagnosis does not mean the person was not tortured. A survivor of torture may not have the level of symptoms required to meet diagnostic criteria for a DSM-IV or ICD-10 diagnosis fully. In these cases, as with all others, the symptoms that the survivor has and the torture story that he or she claims to have experienced should be considered as a whole. The degree of consistency between the torture story and the symptoms that the individual reports should be evaluated and described in the report.

289. It is important to recognize that some people falsely allege torture for a range of reasons and that others may exaggerate a relatively minor experience for personal or political reasons. The investigator must always be aware of these possibilities and try to identify potential reasons for exaggeration or fabrication. The clinician should keep in mind, however, that such fabrication requires detailed knowledge about trauma-related symptoms that individuals rarely possess. Inconsistencies in testimony can occur for a number of valid reasons, such as memory impairment due to brain injury, confusion, dissociation, cultural differences in perception of time or fragmentation and repression of traumatic memories. Effective documentation of psychological evidence of torture requires clinicians with a capacity to evaluate consistencies and inconsistencies in the report. If the interviewer suspects fabrication, additional interviews should be scheduled to clarify inconsistencies in the report. Family or friends may be able to corroborate details of the history. If the clinician conducts additional examinations and still suspects fabrication, the clinician should refer the individual to another clinician and ask for the colleague's opinion. The suspicion of fabrications should be documented with the opinion of two clinicians.





¹ Istanbul Protocol, Manual on the Effective Investigation and Documentation of Torture and other Cruel, Inhuman and Degrading Treatment or Punishment, United Nations New York & Geneva, 2004.





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Forensic Medical Report

With regard to the medical examination conducted on the accused/ Hussain Ali Mousa Mohammad (860601471)

Mr/ Hammad Albuayoun, deputy prosecutor

I state that I, Doctor Mohammad Nour al-Din Ahmad Ans Fowda, — forensic doctor with the Public Prosecution — based on a decision by the Public Prosecution in the aforementioned case, conducted on 2/3/2014 a medical examination, which was a forensic medical examination, on the accused / Hussain Ali Moussa Mohammad. This was to determine any injuries, their causes, how they were sustained, the date of occurrence, the methods used, and if his injuries feasibly concur with what was provided by the Public Prosecution's memorandum or not.

Based on the above, I state the following:

1. The Public Prosecution's memorandum

The facts are summarised as follows: on 14/02/2014 at around 7 pm in the Deir area, there was an explosion in the industrial area that was carried out by a group of people. They lured police into the area of the bomb and detonated it, which led to the death of one of the police officers and the injury of others. The accused was one of the persons who carried out this operation and he was arrested with other accused on 21/3/2014. The police transcripts provide that the accused attacked the police with extreme force which led to the occurrence of their injuries.

It was apparent in the investigation that the accused had visible injuries on both hands, and when asked about the injuries, he stated that during the course of the raid by police officers he attempted to flee to out of the window on the second floor of an apartment where he was hiding. He went down the stairs and fell to the floor, which caused injury to his back and hands, as well as wounds to his hands from the handcuffs.

[SIGNATURE]

[STAMP: General Directorate of Forensic Evidence]

2. Forensic medical examination:

Today, the accused/ Hussain Ali Moosa Mohammad was present, accompanied by Police Officer / Yasser Mohammad Nezar (26136). I gathered information about the accused by way of getting to know him. He appeared to be in general good health and in possession of his faculties. On examining his body, the following was apparent:

- The presence of a number of linear abrasions covered in brown scabs, measuring approximately 1 by 5 centimetre in height and approximately ½ a centimetre in width, and located on the wrist and on the back of the left hand.
- The aforementioned complained of the presence of pain in the lower back, and on examining the area, no trace of apparent injury.

Opinion

From the above, I present and state the following:

On examination of the body of the accused / Hussain Ali Mousa Mohammad, it appears that the injuries seen and described around the wrist are friction injuries, caused by friction against the skin with a solid object with a rough surface against the skin. The appearance and nature of these injuries indicate that they were the result of handcuffs, as described in the Prosecution's memorandum. Other than this, no other trace of injury was apparent from any other occurrence across the whole body in the course of the examination.

Forensic Doctor

Dr/ Mohammad Nour el-Din Ahmad Ans Fowda

[SIGNATURE]

[STAMP: General Directorate of Forensic Evidence]

Psychological Medico-Legal Opinion

on the report of Dr. Mohammed Nour al Din Ahmad Ans Fowda on Hussein Moussa

Report prepared by Dr Brock Chisholm Clinical Psychologist

Prepared in March 2016

Specialist Field: mental health difficulties arising from traumatic events

Report prepared by:

Dr. Brock Chisholm, Bsc (Hons), Msc, DClinpsych CPsychol AFBPsS Chartered Clinical Psychologist Criterion A Psychology Services

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My Expertise

- 1. I have worked as a psychologist since 1994. I hold a BSc (Hons) in Psychology; an MSc in Psychological Research Methods; and a Doctorate of Clinical Psychology. I am an Associate Fellow of the British Psychological Society. I am registered with the Health Professionals Council as a practitioner psychologist.
- 2. I am expert in the diagnosis and treatment of complex presentations of traumatic stress. I have psychologically assessed several hundred survivors of traumas that include torture, persecution, war and rendition using the Istanbul Protocol. I hold a certificate in diagnosis of mental health disorders from the World Health Organisation. I train psychiatrists and other mental health professionals in diagnostic practice and in working with trauma and psychosis. (For example the Institute of Psychiatry, Glasgow, Belfast and the Berkshire NHS Trusts). I am an elected board member of the UK Psychological Trauma Society (UKPTS), the UK authority in the psychological consequences following traumatic events.
- 3. I am Director of *Criterion A Psychology Services*. I was previously employed with the Forced Migration Trauma Service, an NHS service that provides assistance and psychological treatment for PTSD to forced migrants as well as undertaking research. Our patients were predominately torture survivors from The Middle East. I previously worked for several years at The Traumatic Stress Clinic, a National Centre for PTSD, treating British veterans, refugees and UK trauma victims.
- 4. I have been instructed as expert witness by a variety of organisations including The UK Ministry of Defence, The Royal Military Police, The Ministry of Defence Police, The Serious Fraud Office, The UK Home Office, several specialist Police Departments including The Metropolitan Police Counter Terrorism Command, War Crimes Division and The UK Crown Prosecution Service on behalf of the National Crime Agency (The UK equivalent of the FBI). I have also been instructed by a variety of independent legal firms. I am the lead psychologist on the Iraqi Historical Allegations Team, which is a UK Ministry of Defence funded international war crimes investigation.
- 5. I have provided expert witness and medico-legal reports for criminal and civil matters in immigration, Court of Appeal, Supreme Court, the European Court of Human Rights, the Baha Mousa Public Inquiry, the African Court of Justice and The United Nations and cases involving security services. I have provided evidence under the Universal Jurisdiction (Section 134 of the Criminal Justice Act) as applied to torture. To my knowledge I have never attracted criticism and my opinion has been accepted by the court. In HS (Uganda), R (on the application of) v Secretary of State for the Home Department [2012] EWCA Civ 94 Lady Justice Rafferty says 'it seems to me that the authority and depth of Dr Chisholm's report arguably changes the landscape of the appellant's claim.'
- 6. I have publications in peer-reviewed journals, which are listed in the appendix. I sit on the Childhood Adversity and Psychosis steering and advisory group at the Institute of Psychiatry; a research project into causations of psychosis.
- 7. I am a visiting lecturer at the Royal Hospital for Tropical Medicine, and previously Queen Mary University of London and Clinical Research Fellow and Honorary Lecturer at St. Georges Hospital Medical School, University of London. I am a trainer for the Metropolitan Police in The Sexual Offences, Child Abuse and Exploitation Command.
- 8. I have run workshops for the British Association of Behavioural and Cognitive Therapists and The British Psychological Society and several other health service and academic institutions. I provided the content on PTSD and psychosis for www.mentalhealthcare.org.uk which receive 35 000 hits per month. I have also run workshops for members of the legal profession in working with victims of trauma within a legal framework.
- 9. I am on The UK team of experts on the Preventing Sexual Violence Initiative. This is a UK Foreign and Commonwealth Office managed scheme comprising of 73 doctors, lawyers, police officers, psychologists and forensic scientists.



Introduction

- 1. The report below reviews the quality of the medical report provided into the possible medical evidence of torture. My comments below relate specifically to the documents provided to me. I acknowledge that there may have been a further examination or other documents of which I have no knowledge.
- 2. I make no assumption and express no opinion on the court's ruling on the guilt of Mr Hussein Moussa. My comments are made solely and specifically in respect of the instructions below.

Instructions

- 3. I was asked by Reprieve on 2 March 2016 to review and comment on the quality of the Forensic Doctor's report dated 2 March 2014 by Dr Mohammed Nour al Din Ahmad Ans Fowda on their client, Hussein Moussa. In addition, I was asked to identify whether the report was compliant with internationally recognised Istanbul Protocol (IP) standards¹. The Istanbul Protocol is an internationally recognised set of guidelines to employ when investigating allegations of torture.
- 4. I was also provided with a copy of a General Complaint to the National Institute of Human Rights in relation to the death sentences of Mohammed Ramadan and Husain Mousa (undated).

Quality of the Forensic Science Evidence Report

- 5. Based upon the dates provided in the report, the date of the examination (2 March 2014) by the Forensic Doctor occurred before the arrest, which the report states as occurring on 21.3.14 (Section 1, line 6 of the report). I understand the arrest occurred in February, it is therefore unclear exactly how long after arrest the examination occurred in relation to the torture that is later alleged. This may have been a translation error.
- 6. The report does not include a section specifying the qualifications or independence of the author. This runs contrary to paragraph 162 of the Istanbul Protocol, which states that reports should be conducted with 'objectivity and impartiality' and be based on the medical professional's 'expertise and professional experience'.
- 7. There is no 'Statement of Truth' within the report as is required within a UK legal context when providing evidence for the Court and as an indicator of veracity.
- 8. It is unclear who requested the report and how the request was made. Paragraph 123 of the IP states:

"Requests for medical evaluations by law enforcement officials are to be considered invalid unless they are requested by written orders of a public prosecutor."

9. To ensure independence the lawyers of the defendants "should be present during the request for examination and post-examination transport of the detainee. (para 123)". Additionally, "Detainees have the right to obtain a second or alternative medical evaluation by a qualified physician during and after the period of detention (para 123)." However, it is acknowledged that doctors themselves may face the threat of persecution, particularly if they are subject to the same régime as the



- defendants. There appears to be multiple reasons that the required levels of independence have not been met.
- 10. It is also important for the examining medical professional to ensure that the individual feels comfortable when recounting traumatic experiences and this does not appear to have been the case. This is contrary to Paragraph 124 of the IP that states:

"Each detainee must be examined in private. Police or other law enforcement officials should never be present in the examination room. This procedural safeguard may be precluded only when, in the opinion of the examining doctor, there is compelling evidence that the detainee poses a serious safety risk to health personnel. Under such circumstances, security personnel of the health facility, not the police or other law enforcement officials, should be available upon the medical examiner's request. In such cases, security personnel should still remain out of earshot (i.e. be only within visual contact) of the patient. Medical evaluation of detainees should be conducted at a location that the physician deems most suitable."

- 11. The report states that Hussein Mousa was interviewed in the presence of police officer Mohammad Nezar (26136). This is in direct contradiction to IP guidelines since it has the potential to impact on his presentation, openness and transparency. It is for this reason that the IP states: "Their presence during the examination may be grounds for disregarding a negative medical report" (para 125). Based upon this alone, the report should be disregarded.
- 12. The report has not provided sufficient history. Only a brief summary of the incident for which the accused has been found guilty was provided; the explosion in the AlDeir area based on the Public Prosecution's Memorandum. Only a very limited attempt appears to have been made by the author to document the account of the event and what happened subsequently from the individual concerned. Instead, he appears to rely solely on a secondary source of information that is liable to be prone to bias and or error.
- 13. The report concludes that 'injuries seen and described around the wrist are friction injuries, caused by friction against the skin of a solid object with a rough surface against the skin. The appearance and nature of these injuries indicate that they were the result of handcuffs as described in the Prosecution's memorandum'.
- 14. The defendant has made specific allegations of torture. In the General Complaint to the National Institute of Human Rights (undated) it was noted that he alleges that he was hung from the ceiling by government agents who took turns beating him with batons. It is also alleged that threats were made to harm his relatives, including raping his sisters. It was specified that Hussein Moussa identified during his trial that torture had occurred, but this was not taken into account. It was also highlighted within his appeal, which was finally refused by the Court of Cassation on the 20 November 2015. According to reports, he subsequently falsely confessed but then recanted the confession and was allegedly tortured further by security forces.
- 15. The Forensic Doctor's report appears cursory and of limited value towards investigating the above allegations. There is an absence of any acknowledgement of alleged abuse or torture. This may be because the allegations were not made to the doctor at the time. Whatever the reason, the assessment should address the allegations of torture. If none were made at the time, then another assessment should be conducted after they were made. If they were made at the time, then they should be documented in the report. In either case the report is rendered invalid.



- 16. Since the alleged torture occurred over two years ago the opportunity to investigate the veracity of the account will have diminished as a consequence of the shortcomings of the original examination and report provided.
- 17. The Istanbul Protocol makes it clear that any medical or psychological report should contain 'a detailed account of events, illicit summary information, including dates frequency and duration of torture sessions' (para 137). Paragraphs 140 and 141 outline how the methods of torture should be documented. The Forensic Doctor's report fails to provide any description of the alleged torture or ill treatment from the individual concerned and does not highlight any other potential reasons for the injuries other than those described in the Prosecution's Memorandum.
- 18. A complete medical history was not provided within the report. This runs contrary to best practice, given that it is not possible to qualify what occurred as a result of the incident/s in question without accounting for the presence of any pre-existing conditions or health issues.
- 19. The full details of the physical examination that took place should have been documented. Specifically, how the examination took place and what was investigated. It is usual for a body or scar diagram, along with photographs, to be utilised and particularly where there is bruising that might fade. It appears that this was not provided within the report. The report only gave a brief and vague description of the process undertaken.
- 20. The report does not attempt to sufficiently explore Hussein Moussa's claim of pain in his lower back and the origin of this condition. It is stated within the report that 'The aforementioned complained of the presence of pain in the lower back, and on examining the area, no trace of apparent injury'. No further investigation, such as MRI (Magnetic Resonance Imaging) was suggested and no history was taken relating to the injury. It appears that only a cursory glance at the area was deemed sufficient. While I am unable to comment on the specifics of the individual's musculo-skeletal condition and the impacts upon him, suffice to say the level of information provided within the report appears to be inadequate.
- 21. The report should have specified the degree of consistency between specific allegations of torture and injuries or otherwise, as stated in paragraphs 187 of the Istanbul Protocol and expanded in detail afterwards. Even if there was no injury then the report should have specified whether an injury would have been expected under the circumstances. As already noted, there does not appear to have been any attempt to procure an account of what happened from the person concerned and given that a police officer was present this may have limited what he felt he was able to say.
- 22. Chapter VI of the Istanbul Protocol is reserved for psychological evidence of torture. It is particularly important to follow if there is no or limited physical evidence. Psychological evidence considers and documents a range of factors, including the background of the individual, a description of the allegations of abuse, evidence of psychological damage, consistency of the psychological damage with the alleged abuse, whether findings are expected or typical reactions to extreme stress, coexisting stressors or physical conditions, such as head injury, that could have impacted, and evidence of malingering or falsehood. The Forensic Doctor's report in this case does not mention or acknowledge the possibility of psychological damage, or explore the origins of such. I consider this to be a significant breach of the protocol.



23. In conclusion, there are clear violations of the Istanbul Protocol and compelling reasons to suspect that sufficient independence was lacking. It is my professional opinion that the report provided to me for scrutiny failed to meet the minimum standards expected from an Istanbul Protocol report following allegations of torture or ill treatment.

Dr Brock Chisholm, BSc (Hons), MSc, Dclinpsych, CPsychol Chartered Clinical Psychologist

Statement of Truth

- 1. I confirm that insofar as the facts stated in my report are within my own knowledge. I have made clear which they are and I believe them to be true, and the opinions I have expressed represent my true and complete professional opinion.
- 2. I understand that my duty to the court is to provide an impartial professional opinion and to assist the court in reaching a decision. I have complied with that duty.
- 3. I have endeavoured to be accurate and have covered all the relevant issues.
- 4. I have included all matters which I have knowledge of or which I have been made aware of that might affect the validity of my report.
- 5. I have indicated the sources of the information I have used.
- 6. I have not included or excluded anything that has been suggested by me to others.
- 7. I believe that the facts that I have stated in this report are true and that opinions expressed are a true and complete reflection of my professional opinion.
- 8. I will notify those instructing me immediately if for any reason my existing report requires correction or clarification.
- 9. I understand that:
 - i. My report will form evidence to be given under oath or affirmation.
 - ii. I may be cross examined on my report by a cross examiner assisted by an expert witness.
 - iii. I am likely to be subject to adverse criticism by if I have not taken reasonable care in trying to meet the standards set out above.

Dr Brock Chisholm, BSc (Hons), MSc, Dclinpsych, CPsychol Chartered Clinical Psychologist



Appendix A: My Publications

- Chisholm, Brock (submitted) Stress, Trauma and Wellbeing in the Legal System book review. Journal of Critical Psychology.
- Chisholm (in press) Psychological Evaluation for Personal Injury Claims book review. Journal of Critical Psychology.
- 3. Chisholm (in press) Healing War Trauma book review. Journal of Critical Psychology
- 4. Tapfumaney, Johnson Chisholm *et al* (2014) Predictors of vocational activity over the first year in inner city early intervention in psychosis services. *Early Intervention In Psychiatry Available online, not yet printed.*
- 5. Stone, Fisher, Major, Chisholm et al (2013) cannabis use and symptoms in first episode psychosis. Psychological Medicine
- 6. Ghali, Fisher, Chisholm et al (2013) Ethnic variations in the pathways into Early Intervention Services for psychosis *British Journal of Psychiatry* vol 202 277-283
- 7. Dominguez, Fisher, Major, Chisholm, et al (2013) Duration of Untreated Psychosis in Adolescents: Ethnic differences and clinical profiles *Schizophrenia Bulletin*
- 8. Jancovic, Chisholm & Swan (Submitted) How to Mix and Match combining medication and psychological treatment for Posttraumatic Stress Disorder *British Journal of Psychiatry* MS ID#: BJP/2011/094599
- 9. Fisher, H, Chisholm *et al* (2008) Routine Evaluation in First Episode Psychosis Services: feasibility and results from the Midata project *Social Psychiatry and Psychiatric Epidemiology* Volume 43, Number 12 (2008), 960-967
- 10. Singh, Chisholm *et al* (2007) One-year outcome of an early Intervention psychosis service: a naturalistic evaluation. *Early Intervention in Psychiatry*; Vol 1: 282-287.
- 11. Chisholm, B, Freeman, D, Cooke, A. (2006). Identifying potential predictors of traumatic reactions to psychotic episodes *British Journal of Clinical Psychology*, 45, 545-559.
- 12. Chisholm, B, Freeman, D, Cooke, A. (2006). Identifying potential predictors of traumatic reactions to psychotic episodes. Poster at British Psychological Society Annual Conference. Cardiff 320th March-April 1st.
- 13. Hudnall Stamm, B., Chisholm, B, Larsen, D, Davis, KS (2006). Stressful Life Experience Exposure: Comparisons Across Three Samples. *International Study for Traumatic Stress Studies 23rd annual meeting.* Nov 4-7 Hollywood, California, USA.
- 14. Hudnall Stamm, B., Chisholm, B, Larsen, D, Davis, KS (2007). Stressful Life Experience Exposure: Comparisons Across Three Samples. 2007 American Psychological Association 115th Annual Convention August 17-20th. San Fransico, USA.
- 15. Davis, H, Dusoir, T, Papadopoulou, K, Dimitrakaki, C, Chisholm, B, et al (2005) Child and Family Outcomes of the Early Promotion Project. *International Journal of Mental Health Promotion* Vol. 7. Issue 1, Feb. p. 63-81
- 16. Papadopoulou, K, Chisholm, B *et al* (2005). The Effects of the European Early Promotion Project Training on Primary Health Care Professionals *International Journal of Mental Health Promotion* Vol. 7. Issue 1, Feb. p. 54-62.
- 17. Burns, Millar, Garland Kendrick Chisholm and Ross (1998). Randomized controlled trial of teaching practice nurses to carry out structured assessments of patients receiving depot antipsychotic injections. *British Journal of General Practice*. 48(437): 1845–1848.
- 18. Greenwood, Chisholm, Burns and Harvey (2000) Community mental health team case-loads and diagnostic case-mix *Psychiatric Bulletin* 24:290-293.
- 19. Mild traumatic brain injury—the Fife perspective (1997) Skelton, Walley, Chisholm and Sloan The Scottish Medical Journal 42(2):40-3]



Appendix B: Extract from the Istanbul Protocol

286. In formulating a clinical impression for the purposes of reporting psychological evidence of torture, the following important questions should be asked:

- (i) Are the psychological findings consistent with the alleged report of torture?
- (ii) Are the psychological findings expected or typical reactions to extreme stress within the cultural and social context of the individual?
- (iii) Given the fluctuating course of trauma-related mental disorders over time, what is the time frame in relation to the torture events? Where is the individual in the course of recovery?
- (iv) What are the coexisting stressors impinging on the individual (e.g. ongoing persecution, forced migration, exile, loss of family and social role)? What impact do these issues have on the individual?
- (v) Which physical conditions contribute to the clinical picture? Pay special attention to head injury sustained during torture or detention;
- (vi) Does the clinical picture suggest a false allegation of torture?

287. Clinicians should comment on the consistency of psychological findings and the extent to which these findings correlate with the alleged abuse. The emotional state and expression of the person during the interview, his or her symptoms, the history of detention and torture and the personal history prior to torture should be described. Factors such as the onset of specific symptoms related to the trauma, the specificity of any particular psychological findings and patterns of psychological functioning should be noted. Additional factors, such as forced migration, resettlement, difficulty of acculturation, language problems, unemployment, loss of home, family and social status should be considered. The relationship and consistency between events and symptoms should be evaluated and described. Physical



conditions, such as head trauma or brain injury, may require further evaluation. Neurological or neuropsychological assessment may be recommended.

288. If the survivor has symptom levels consistent with a DSM-IV or ICD-10 psychiatric diagnosis, the diagnosis should be stated. More than one diagnosis may be applicable. Again, it must be stressed that even though a diagnosis of a trauma-related mental disorder supports the claim of torture, not meeting criteria for a psychiatric diagnosis does not mean the person was not tortured. A survivor of torture may not have the level of symptoms required to meet diagnostic criteria for a DSM-IV or ICD-10 diagnosis fully. In these cases, as with all others, the symptoms that the survivor has and the torture story that he or she claims to have experienced should be considered as a whole. The degree of consistency between the torture story and the symptoms that the individual reports should be evaluated and described in the report.

289. It is important to recognize that some people falsely allege torture for a range of reasons and that others may exaggerate a relatively minor experience for personal or political reasons. The investigator must always be aware of these possibilities and try to identify potential reasons for exaggeration or fabrication. The clinician should keep in mind, however, that such fabrication requires detailed knowledge about trauma-related symptoms that individuals rarely possess. Inconsistencies in testimony can occur for a number of valid reasons, such as memory impairment due to brain injury, confusion, dissociation, cultural differences in perception of time or fragmentation and repression of traumatic memories. Effective documentation of psychological evidence of torture requires clinicians with a capacity to evaluate consistencies and inconsistencies in the report. If the interviewer suspects fabrication, additional interviews should be scheduled to clarify inconsistencies in the report. Family or friends may be able to corroborate details of the history. If the clinician conducts additional examinations and still suspects fabrication, the clinician should refer the individual to another clinician and ask for the colleague's opinion. The suspicion of fabrications should be documented with the opinion of two clinicians.





¹ Istanbul Protocol, Manual on the Effective Investigation and Documentation of Torture and other Cruel, Inhuman and Degrading Treatment or Punishment, United Nations New York & Geneva, 2004.

ANNEX 15



	reconal Denaits	A	eference Number
Name	Mohamed Karmookan	CPR	821100696
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Summary of Events Concerning Mohamed Ramadan

1. Mohamed Ramadan is a 32-year old Bahraini citizen. In March 2013, Bahraini security officers approached Mohamed at the airport where he works and instructed him to go with him. They arrested Mohamed and took him to the Criminal Investigative Directorate. Security forces disappeared Mohamed for four days. During his arrest and detention, security officers severely tortured Mohamed. The public prosecutor charged Mohamed with attempted murder and the so-called "Al-Dair Explosion." Mohamed is currently serving a 15-year sentence in the Airport Prison.

Mohamed's Arrest, Detention, and Torture by Bahraini Security Forces

- 2. On 20 March 2013, at approximately 1:30 AM, two Bahraini security officers approached Mohamed at the airport where he works. The officers informed Mohamed that they were from preventative security and instructed him to go with them. They handcuffed Mohamed and took him to the Criminal Investigate Directorate (CID) building. When Mohamed did not return home, his family began searching for him. Airport officials and CID officers denied knowing Mohamed's whereabouts. After four days, Mohamed's parents filed complaints with the NHRI and Ombudsman. That day, they received a call from Mohamed saying that he was at the CID building.
- 3. Security officers immediately began insulting Mohamed upon transport to the CID. They insulted Mohamed, his family, and his religion. They blindfolded him and took him to a cold room. They handed Mohamed a phone and he spoke to someone who threatened him to confess. The officers took Mohamed to another room and began torturing him. They beat, slapped, and kicked him all over his body, focusing on his head and ears. They called him a traitor and accused him of killing an officer. When Mohamed denied these accusations, they beat him more violently. This torture continued for four days.
- 4. Mohamed finally agreed to confess because he wanted the torture to end. He said that he would sign or confess to anything but the officers refused to tell him what to say. Instead, they continued to torture him until he correctly fabricated the confession they wanted. After four days, Mohamed received another phone call from the same person he had spoken to before. This person admitted that the government knew that Mohamed was innocent but that his participation in marches and other activities made him a traitor. The government wanted to create a serious case and charge Mohamed as punishment.
- 5. Security officers took Mohamed to the public prosecutor's office. The public prosecutor asked Mohamed to tell the judge his story. Mohamed responded by asking if the judge wanted the real story or the fake one. The judge became very angry and removed Mohamed to a different courtroom with a different judge. Mohamed told this judge the truth and told him that he had been forced to sign a false confession.
- 6. After his investigation, security forces took Mohamed to Asri Prison then to Riffa Prison. They detained him at Riffa Prison for 13 days. The security officers held Mohamed in solitary confinement. Security officers with Syrian and Jordanian accents blindfolded and tortured him. They tied Mohamed's body with double belts, handcuffed him, and forced him to listen to the sound of other prisoners being tortured. They also brought him to a government march where protesters demanded revenge and execution of political opposition.
- 7. After ten days, the officers began treating Mohamed differently and gave him chocolate and food. They took him to see a coroner. The coroner asked Mohamed about the marks of torture on his legs but Mohamed lied and said the marks were from falling out of bed.

8. The public prosecutor charged Mohamed with attempted murder and the so-called "Al-Dair Explosion." It is unclear where these charges originated. The court sentenced Mohamed to 15 years and he is currently detained in the Airport Prison.

Information Concerning the Preparer of this Document

9. This statement was prepared and submitted by R. James Suzano, J.D., the legal officer for Americans for Democracy and Human Rights in Bahrain (ADHRB), and Morgan Fiander, the legal intern for ADHRB. The preparer of this document may be reached at 1001 Connecticut Ave NW Suite 205, Washington, DC, 20036, or by phone at +1 (202) 621-6141 x106.



Additional Complaints from ADHRB

Ghada H. Habib Ahmed Hasan <g.hasan@ombudsman.bh>

Tue, Jan 19, 2016 at 5:20 AM

To: James Suzano <isuzano@adhrb.org>

Cc: Habdulla habdulla@adhrb.org, Frej Fenniche <ffenniche@ohchr.org, Mohamed Hojeij mhojeij@ohchr.org, Mohammad Ali Alnsour mainsour@ohchr.org, "Nawaf M. Al Mouada" <Nawaf@ombudsman.bh, inter <inter@ombudsman.bh, Office <office@ombudsman.bh, Maryam Ahmed Abdulnoor maryamabdulnoor@ombudsman.bh

Dear James

I hope that this email finds you well.

Thank you for your email of 12 January 2016. It would appear there has been some confusion and misunderstanding between our organisations in connection with complaints raised at various times. This being the case, I hope that the full record of complaints received from ADHRB since 2014, will be helpful.

First: Complaints and investigations' requests:

1. Notifications Received in 2014 - Table A

no	Name	Date Received	Action	Response to ADHRB
1				
2				
3	Mohamed Ramadan	17 July 2014 + 9 Dec 2015	Investigation opened (consent Form attached)	Responded with the results of the investigation to ADHRB on 22 Dec 2014+15 Dec 2015
4				

Investigation of the complaints submitted to the Office of the Ombudsman on behalf of Mr. Mohamed Ramadan

Relating to Mr. Ramadan, the Ombudsman received four complaints as follows:

- On 19 February 2014, Mr. Ramadan's father made a complaint to the Ombudsman stating that proper legal procedures were not followed in connection with the arrest of his son. The Ombudsman Office commenced an investigation immediately. The outcomes of the investigation was that the arrest procedures were legal.
- On 24 February 2014, Mr. Ramadan's wife filed a complaint with the Ombudsman expressing concerns that she did not know the whereabouts of her husband and saying that she wanted to visit him. The Ombudsman's Office carried out an investigation, established Mr. Ramadan's location and arranged a visit for his family on 28 February 2014.
- Letters were sent to the father and Mr. Ramadan's wife informing them that the cases of their complaints were closed.
- Mrs. Ramadan subsequently submitted a further complaint on 14 April 2014 regarding her husband's medical treatment. The Ombudsman's Office carried out an investigation and asked for the records of all information. In addition the Ombudsman's Office checked that he went on regular visits to the doctor. On 12 August, Mrs. Ramadan was contacted and informed about all the medical procedures and results.
- Finally, on 8 January 2015, Mrs. Ramadan submitted a complaint stating that she and her husband's solicitor Mohamed Al Tajer wished to appeal his sentence. The Ombudsman's Office contacted Mrs. Ramadan and an investigation was carried out. The Ombudsman's Office received from the detention center a formal appeal request submitted by Mr. Ramadan. As such the complaint was considered resolved and the case was closed

Catherine Higham

From: Ben Pitler

Sent: 10 February 2016 13:11
To: Soraya Bauwens

Subject: FW: BAHRAIN - Strasbourg Plenary: Case of Mohammed Ramadan

Attachments: Brief - Case of Mohammed Ramadan.pdf; Ombudsman Report - Mohammed

Ramadan.pdf

The email the Bahrainis sent to MEPs

From: Sayed Alwadaei [mailto:sayed@birdbh.org]

Sent: 10 February 2016 12:29

To: Ben Pitler

Subject: Fwd: BAHRAIN - Strasbourg Plenary: Case of Mohammed Ramadan

------Forwarded message ------From: Brussels Mission < <u>Brussels.mission@mofa.gov.bh</u>>

To: undisclosed-recipients:;

Cc:

Date: Fri, 29 Jan 2016 10:26:32 +0000

Subject: BAHRAIN - Strasbourg Plenary: Case of Mohammed Ramadan

Dear All,

With regards to the upcoming debate on Bahrain under the cases of breaches of human rights, democracy and the rule of law during the plenary session in Strasbourg, specifically the case of Mohammed Ramadan; the Embassy of the Kingdom of Bahrain would like to attach for your information a brief on the case of the aforementioned individual.

Additionally, a report from the Office of the Ministry of Interior's Ombudsman concerning Mohammed Ramadan is attached that details the complaints submitted on behalf of Mohammed Ramadan to the Ombudsman by his family. Please note that these complaints, submitted during the period spanning from after his initial arrest until the days after his sentencing by the Higher Criminal Court, do not include any claims of ill-treatment and torture to extract a confession, as is now being falsely claimed by the defendant, his family and legal representative.

Please do not hesitate to contact the Embassy for further information/clarification.

Embassy of the Kingdom of Bahrain

Tel: +32 (0)26/27.00.30

Fax: +32 (0)26/47.22.74

Brussels.mission@mofa.gov.bh

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Best,

Sayed AlWadaei | Director of Advocacy Bahrain Institute for Rights and Democracy (**BIRD**)

Phone: +44 7445382565

Twitter: @salwadaei | www.birdbh.org

ANNEX 19

120 May 2016

Our reference: MIN/97074/2016

Maye For Director, Reprieve PO Box 72054 London EC3P 3BZ

Dear Taya-Toa.



King Charles Street Lundon WITA 2844

11 MAY 1970

Thank you for your letter of 28 April about the Annual Human Rights Report. I am pleased that you welcome the report's coverage of the death penalty and its references to individual cases.

Foreign and Commonwealth Office Parliamentary Under-Secretary of State, Tobias Ellwood's reply to a House of Commons Question for Written Answer was also correct. On receipt of your letter we have reconfirmed with the Ombudsman's office in Bahrain that no allegations of mistreatment or torture have been made by or on behalf of Mr Mohamed Ramadan. Stating this does not imply that we discount any allegations of torture that are made against the Bahraini authorities. We would urge the Bahraini authorities, as we would urge judicial authorities globally, to investigate all allegations of torture, to bring those responsible to justice and to establish effective mechanisms for preventing torture.

Our Embassy in Bahrain has been working closely with you to give you access to the Ombudsman's office. If you have allegations that you wish to make on behalf of Mr Ramadan, I suggest that you put them to the Ombudsman using the contacts and introductions we have provided. Melanie Scarlett, your Embassy contact in Bahrain, is ready to be copied into anything you send.

The Annual Human Rights Report is one of the Government's key tools for assessing and promoting human rights compliance globally. Everything in the report has been carefully checked for accuracy. It would not be helpful in the report to ignore the

reasons why other states act as they do; nor does factual reporting of the overseas context undermine our determination to promote human rights.

RT HON BARONESS ANELAY OF ST JOHNS DBE MINISTER OF STATE

ANNEX 20

His Highness Sheikh Khalifa bin Salman Al Khalifa Prime Minister's Office P.O. Box 1000 Government Road Manama Kingdom of Bahrain

Copy sent by email to amo@mofa.gov.bh

20 June 2016

Your Excellency,

1. INTRODUCTION

- 1.1 We the undersigned human rights organisations write to you regarding the torture of Mohamed Ramadan and the resulting investigation by the Office of the Ombudsman for the Ministry of Interior ("**the Ombudsman**").
- 1.2 We are writing to you in order to:
 - (a) raise serious concerns regarding the flawed investigation conducted by the Ombudsman into allegations of torture and mistreatment raised by Mr Ramadan following his arrest and detention on 18 February 2014; and
 - (b) request that your government conduct a new investigation into Mr Ramadan's allegations of torture in a manner that complies with the UN ("UN") Convention Against Torture ("CAT") and the United Nations Manual on the Effective Investigation and Documentation of Torture and other Cruel, Inhumane or Degrading Treatment or Punishment (the "Istanbul Protocol").

2. **IDENTITY OF THE PERSON SUBJECTED TO TORTURE**

- 2.1 This allegation of torture concerns the above named Bahraini national, Mohamed Ramadan, whom Reprieve and Americans for Democracy and Human Rights in Bahrain (ADHRB) are assisting with his case. Mr Ramadan is a lifelong Bahrain resident with a wife and three children. Mr Ramadan worked as a police officer at the Bahrain International Airport. He had, in the past, attended nonviolent marches calling for greater transparency and democracy in Bahrain.
- 2.2 Mr Ramadan was arrested at the Bahrain International Airport on 18 February 2014. He was held without charge and without access to legal representation until December 2014, when his first trial commenced.
- 2.3 While detained, Mr Ramadan was tortured into falsely confessing to involvement in a 14 February 2014 bombing that killed a police officer. He informed both the investigating Public Prosecutor and at least two judges of his torture. He later recanted

his confession fully before Fourth Superior Criminal Court Judge Ali Khalifa al-Zahrani during the course of his trial.

2.4 Nevertheless, and in spite of strong indications of his innocence, the Fourth Superior Criminal Court ignored his recantation and convicted Mr Ramadan of premeditated murder in a trial that relied almost solely on his coerced confession. On 27 May 2015 an appeals court upheld the initial death sentence and on 16 November 2015, Bahrain's Court of Cassation rejected Mr Ramadan's final appeal and finalized his death sentence. He now awaits imminent execution.

3. **CIRCUMSTANCES SURROUNDING THE TORTURE**

3.1 At approximately 1:30 AM on 18 February 2014, two Bahraini security officers approached Mr Ramadan at the airport where he worked. The officers informed him that they were from preventative security and instructed him to go with them. They handcuffed Mr Ramadan and took him to the Criminal Investigations Directorate (CID) building. When he did not return home, Mr Ramadan's family began searching for him. Airport officials and CID officers denied knowing his whereabouts. After four days, Mr Ramadan's parents filed complaints with Bahrain's National Institution for Human Rights and the Ombudsman's Office. That day, they received a call from Mr Ramadan, at which time he informed them that he was detained in the CID building.

4. TORTURE OF MOHAMED RAMADAN

- 4.1 Upon his arrival at the CID Building on 18 February, security officers blindfolded Mr Ramadan and took him to a freezing cold room. They handed him a phone and he spoke to someone who threatened him and ordered him to confess. The officers then began punching and kicking Mr Ramadan, focusing especially on his head, ears, and genitals, as he was suffering from a prior injury that had left his genitals especially sensitive. Between beatings, the officers repeatedly called Mr Ramadan a traitor and accused him of killing a fellow police officer. When Mr Ramadan denied these accusations, they beat him more violently.
- 4.2 Mr Ramadan finally agreed to confess because he could not endure any further beatings. He said that he would sign or confess to anything but the officers refused to tell him what to say. Instead, they continued to torture him until he correctly fabricated the confession they wanted. This continued for four consecutive days. After four days, Mr Ramadan received another phone call from the same person he had spoken to before. This person admitted that the government knew that Mr Ramadan was innocent but that his participation in marches and other activities made him a traitor. The man told Mr Ramadan that he would be charged with the killing of a police officer as punishment for his "treasonous" activities.
- 4.3 Once Mr Ramadan had finally produced a confession that suited the officers who were torturing him, they took him to the Public Prosecutor on 22 February 2014 to repeat his confession. The Public Prosecutor then brought Mr Ramadan before a judge and asked him to tell the judge his story. Mr Ramadan responded by asking the judge if he wished to hear the real story or the fake one. This greatly angered the judge, who removed Mr Ramadan to a different courtroom with a different judge. Mr Ramadan told this judge the truth about his torture and recanted his confession.

- 4.4 Thereafter, security officers moved Mr Ramadan from the CID Building first to Asri Prison briefly, and then to Riffa Prison for 13 days. During this period, Mr Ramadan was again tortured. Security officers held him in solitary confinement, blindfolded, handcuffed, and tied up with belts. They again beat him about the head and genitals, threatened to rape his wife and other family members in front of him, and forced him to listen to the screams of other prisoners being tortured. During his detention at Riffa Prison, Mr Ramadan's jailers also brought him to a pro-government demonstration and presented him to protesters, who demanded revenge and the execution of members of the political opposition.
- 4.5 At first opportunity, Mr Ramadan informed both the investigating Public Prosecutor and two judges of his torture. He then recanted his confession before Fourth Superior Criminal Court Judge Ali Khalifa al-Zahrani as soon as his trial began. Nevertheless, and in spite of strong indications of his innocence, the Fourth Superior Criminal Court ignored his recantation and admitted the confession into evidence without investigation. Relying almost solely on this coerced confession, the court convicted Mr Ramadan of premeditated murder. On 27 May 2015, an appeal court upheld the initial death sentence. On 16 November 2015, Bahrain's Court of Cassation rejected Mr Ramadan's final appeal. He now awaits imminent execution.
- 4.6 More details of the mistreatment suffered by Mr Ramadan at the hands of Interior Ministry figures are included in a separate complaint filed by Reprieve via the Ombudsman's Office official complaints mechanism. A copy of this complaint is enclosed with this letter as Annexure A.

5. ENGAGEMENT WITH THE OMBUDSMAN ON BEHALF OF MR RAMADAN

- On 19 February 2014, Mr Ramadan's father made a complaint to the Ombudsman alleging that his son's arrest and detention had not followed legal procedure. The Ombudsman's investigation found that "the arrest procedures were legal," despite the fact that Mr Ramadan was arrested without a warrant and was refused access to legal counsel for several months in violation of both Bahraini national law and international legal standards.
- 5.2 On 14 April 2014, Mr Ramadan's wife filed a complaint with the Ombudsman alleging that her husband had been mistreated and denied medical care during detention.
- On 16 July 2014, ADHRB filed a complaint with the Ombudsman alleging that Mr Ramadan had been tortured in detention and requesting a thorough investigation. A copy of the complaint is enclosed with this letter as Annexure B.
- As above, concomitantly with this letter, Reprieve is submitting a thorough complaint to the Ombudsman's Office. Again, this complaint is enclosed with this letter as Annexure A.

6. THE OMBUDSMAN'S INVESTIGATION BREACHED ISTANBUL PROTOCOL

6.1 The Istanbul Protocol is a set of international guidelines, developed by the UN, for the documentation of torture by human rights investigatory bodies such as the Ombudsman. As noted by the United Nations Special Rapporteur on Torture and other

Cruel, Inhuman, or Degrading Treatment or Punishment Juan Mendez, "states have an obligation to investigate in full compliance with the Istanbul Protocol as a procedural obligation." Accordingly, the Ombudsman's investigation into all complaints in Mr Ramadan's case should have complied with all Istanbul Protocol principles. However, the Ombudsman's flawed investigation into the complaint lodged by Mr Ramadan's wife and its refusal to investigate complaints lodged by ADHRB—both of which made specific, detailed reference to Mr Ramadan's torture—represent failures to comply with the Istanbul Protocol:

(a) Failure to make public its findings

6.2 Paragraph 79 of the Istanbul Protocol provides:

"The methods used to carry out...investigations [into reports of torture and ill treatment] must meet the highest professional standards, and the findings must be made public."

6.3 Paragraphs 82 and 118 set out the level of detail expected to be made public, requiring disclosure of:

"The scope of the inquiry, procedures and methods used to evaluate evidence as well as conclusions and recommendations based on findings of fact and on applicable law."

The Ombudsman failed to meet its requirements under paragraphs 79, 82 and 118 of the Istanbul Protocol in relation to Mr Ramadan's case. The only public disclosure of its findings came in February 2015, when, in the context of the European Parliament considering an urgency resolution on Mr Ramadan's case, the Ministry of Foreign Affairs of Bahrain circulated a one-page document to Members of the European Parliament summarising the Ombudsman's investigations into the complaints lodged by Mr Ramadan's father and wife (a copy of this document is enclosed with this letter as **Annexure C**). This very short document in no way complies with the detailed, public, written report required by the Istanbul Protocol.

(b) Failure to inform Mr Ramadan and his counsel of investigatory procedure

6.5 Paragraph 81 of the Istanbul Protocol stipulates:

"[a]lleged victims of torture or ill-treatment and their legal representatives must be informed of, and have access to, any hearing as well as to all information relevant to the investigation and must be entitled to present other evidence."

6.6 Further, paragraph 89 stipulates:

"The alleged victim should be informed, wherever possible, of the nature of the proceedings, why his or her evidence is being sought, if and how evidence

¹ Juan Mendez (Special Rapporteur on Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment), *Interim Report*, U.N. Doc. A/69/387 (2014).

offered by the alleged victim may be used...The alleged torture victim should be regularly informed of the progress of the investigation."

6.7 The Ombudsman at no time consulted Mr Ramadan or his legal counsel about any aspect of this investigation in contravention of these requirements.

(c) Misuse of medical assessments

- 6.8 The Istanbul Protocol sets out clearly the minimum requirements for any forensic medical assessment of an alleged torture victim.
- 6.9 Paragraph 84 of the Istanbul Protocol stipulates:

"The medical expert should promptly prepare an accurate written report. The report should include at least the following: ... c) a physical and psychological examination. A record of all physical and psychological findings upon clinical examination including appropriate diagnostic tests and, where possible, colour photographs of all injuries[.]"

6.10 Additionally, paragraph 124 stipulates:

"Each detainee must be examined in private. Police or other law enforcement officials should never be present in the examination room. This procedural safeguard may be precluded only when, in the opinion of the examining doctor, there is compelling evidence that the detainee poses a serious safety risk to health personnel. Under such circumstances, security personnel of the health facility, not the police or other law enforcement officials, should be available upon the medical examiner's request. In such cases, security personnel should still remain out of earshot (i.e. be only within visual contact) of the patient. Medical evaluation of detainees should be conducted at a location that the physician deems most suitable."

6.11 Further, paragraph 126 stipulates:

"Access to a lawyer should be provided at the time of the medical examination."

6.12 The Istanbul Protocol provides that health professionals with dual obligations arising out of employment with these agencies owe a fundamental duty to care for the people they are asked to examine or treat, and they should not compromise their professional independence by contractual or other considerations but should provide impartial evidence. In addition, such health professionals should "not falsify their reports but should provide impartial evidence, including making clear in their reports any evidence of maltreatment." With particular regard to the need to ensure no state interference,

² UN Office of the High Commissioner for Human Rights (OHCHR), Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment ("Istanbul Protocol") HR/P/PT/8/Rev.1, para 66 (2014).

³ Ibid, para 71.

the Istanbul Protocol makes clear that the presence of police officers "during the examination may be grounds for disregarding a negative medical report."⁴

- 6.13 Forensic medical assessments "not performed in accordance with the minimum international standards for clinical forensic assessment of victims [are] unacceptable as forensic evidence."
- 6.14 On 2 March 2014, Mr Ramadan was examined by the Bahrain Public Prosecution's forensic medical examiner, Dr Mohammed Nour al-din Ahmad Ans Fowda. We understand that this visit was a direct response to Mr Ramadan's allegations of torture. After the examination, Dr Fowda produced a medical report on Mr Ramadan's condition, a copy of which was obtained by Reprieve. This report is enclosed with this letter as Annexure D.
- Analysis of the report indicates that the report violated the Istanbul Protocol. In the report, Dr Fowda describes that he conducted the examination in the presence of officer Faisal Qader. Dr Fowda additionally describes that Mr Ramadan suffered from bruising "that was in the form of double strips, measuring 13 cm in length and 1 cm in width, light purple in colour, and located on the left leg." Dr Fowda states that Mr Ramadan said that he did not know how he received the bruises. Based on this information and without providing any further explanation, Dr Fowda concludes that Mr Ramadan consented to his injuries. Dr Fowda did not provide photographs in the report. At no point does the report indicate that Mr Ramadan was provided with access to his attorney during the medical examination; his attorney has indicated to ADHRB that he was not provided with permission to attend the examination.
- 6.16 Accordingly, the forensic medical report that the Ombudsman relied upon violated the Istanbul Protocol. Although paragraph 84 stipulates that a medical expert should provide an accurate report with colour photographs where possible, Dr Fowda's report did not provide any photographs. Further, Dr Fowda came to a conclusion unsupported by any stated evidence that Mr Ramadan suffered his injuries consensually.
- Additionally, although paragraph 124 stipulates that law enforcement officers should never be present in an examination room unless the physician has reason to fear for his safety, Dr Fowda conducted his medical investigation in the presence of a police officer. His report provided no justification for the presence of the officer. Paragraph 125 of the Istanbul Protocol stipulates that the presence of a policeman during a medical investigation may provide grounds for disregarding the resulting medical report; the Ombudsman relied substantially upon this medical report in conducting its own investigation. In this particular instance, it is possible that the presence of the police officer coerced Mr Ramadan into stating that he did not remember what caused his injuries, allowing Dr Fowda to draw the unsubstantiated conclusion that his injuries were consensual. As a result, there appear to be grounds for disregarding the results of this medical report, creating an obligation for the Ombudsman to independently verify the information. The Ombudsman does not appear to have sought independent verification.

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⁴ Ibid, para 125.

- 6.18 Additionally, although paragraph 126 stipulates that Mr Ramadan should have been provided access to his attorney, Mr Ramadan's attorney states that he was not given access to his client during the medical examination.
- An independent medical expert concurs that Dr Fowda conducted the report in a manner that violated the Istanbul Protocol. Reprieve provided a copy of the report to independent medical and human rights expert Dr Brock Chisholm, a psychiatrist with substantial expertise in evaluating expertise under the Istanbul Protocol. Dr Chisholm found that the report was non-compliant with the Istanbul Protocol. He stated that the medical examiner's report violated paragraphs 84, 124, 125, and 126 of the Istanbul Protocols, amongst many others. Dr Chisholm's report concluded that Dr Fowda's medical examination "fails in almost all aspects of what is required in a forensic investigation of possible torture" and "is in complete violation of the internationally recognised Istanbul Protocol and should therefore be completely disregarded" [emphasis added]. Dr Chisholm's complete report is enclosed with this letter as Annexure E.
- 6.20 Dr Fowda's medical report is therefore unacceptable as forensic evidence for lack of compliance with the procedural requirements of the Istanbul Protocol. It cannot be relied upon in the course of the investigation into Mr Ramadan's torture, nor relied upon at trial to suppress the application of the exclusionary rule.
- 6.21 Further, the Ombudsman failed in its duty to ensure its own impartiality as the investigating authority into Mr Ramadan's allegations by relying on unacceptable medical evidence to support a finding of no torture. The Bahraini authorities therefore failed to ensure the effective functioning of the system of medical examinations for the purpose of investigations into allegations of torture and ill-treatment, in violation of Article 12 of the CAT.
- 6.22 Accordingly, Mr Ramadan is entitled to receive an independent and impartial forensic medical assessment in full compliance with the Istanbul Protocol.
- 6.23 Paragraph 79 of the Istanbul Protocol requires the body investigating allegations of torture to have the power to instruct impartial medical experts. The flaws in the Public Prosecution's forensic medical assessment should have indicated to the Ombudsman that the report was flawed and the Ombudsman should have commissioned a new medical investigation by an impartial medical expert.

(d) Failure to ensure neutrality of inquiry

6.24 Paragraph 107 of the Istanbul Protocol stipulates:

"[Terms of reference] should be neutrally framed so that they do not suggest a predetermined outcome."

The Ombudsman's report deviates substantially from neutral terms of reference. The majority of the aforementioned forensic medical examination, upon which the Ombudsman apparently relied, reiterates the Public Prosecution's narrative of Mr Ramadan's alleged crime, describing him as a terrorist.

(e) Failure to investigate further complaints

- 6.26 Paragraphs 14, 20, 43, and 79 of the Istanbul Protocol make clear that <u>all</u> complaints of torture <u>must</u> be investigated by an independent body.
- In the case of Mr Ramadan, the Ombudsman conducted a flawed, cursory investigation into the initial complaint lodged by Mr Ramadan's wife and then refused to investigate any subsequent complaints, even those that included substantially more detail about Mr Ramadan's torture. Instead, the Ombudsman referred back to its initial investigation and declared the matter forever closed. In response to the aforementioned detailed complaint submitted by ADHRB, the Ombudsman reiterated that it had already investigated the complaint filed by Mr Ramadan's wife and took no further steps toward investigating ADHRB's complaint. As above, the Istanbul Protocol requires that investigations be conducted into all complaints of torture, and the Ombudsman's failure to do so constitutes a serious violation.

(f) Failure to consult with Mr Ramadan before disclosing his personal information

6.28 Paragraph 65 of the Istanbul Protocol stipulates that:

"the duty of confidentiality covering identifiable personal health information can be overridden <u>only with the informed permission of the patient</u>...the fundamental ethical obligations are to respect the autonomy and best interests of the patient."

6.29 Paragraph 89 stipulates:

"[i]nvestigators should explain to the [alleged victim] which portions of the investigation will be public information and which portions will be confidential. The [alleged victim] has the right to refuse to cooperate with all or part of the investigation."

- 6.30 The Ombudsman's investigation summary, circulated to 750 Members of the European Parliament by the Ministry of Foreign Affairs on behalf of the Kingdom of Bahrain, contained confidential details of Mr Ramadan's personal health as well as the confidential complaints made to the Ombudsman by Mr Ramadan's father and wife. This represents a clear breach of paragraphs 65 and 89 of the Istanbul Protocol.
- 7. INTERNATIONAL CONSENSUS ON THE TORTURE OF MOHAMED RAMADAN AND THE FLAWED NATURE OF THE OMBUDSMAN'S INVESTIGATION
- 7.1 We also point to a growing international consensus regarding the treatment of Mr Ramadan generally and the failure of the Ombudsman's Office to investigate that treatment specifically.
- 7.2 On 14 August 2014, the UN Working Group on Arbitrary Detention; the UN Special Rapporteur on the rights to freedom of peaceful assembly and of association; the Special Rapporteur on the independence of judges and lawyers; the Special Rapporteur on the promotion and protection of human rights and fundamental freedoms while countering terrorism; and the Special Rapporteur on torture and other cruel, inhuman

or degrading treatment or punishment issued a joint urgent appeal on the case of Mr Ramadan, referring to his torture in detention.⁵

- 7.3 On 20 November 2015, the UN Special Rapporteur on the independence of Judges and lawyers; the Special Rapporteur on extrajudicial, summary or arbitrary executions; and the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment issued a second joint urgent appeal on the case of Mr Ramadan, again referring to his torture in detention and calling for his immediate pardon.⁶
- 7.4 On 24 February 2016, the UN Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment issued his annual report of Observations on communications transmitted to Governments and replies received. In this report, the Special Rapporteur "conclude[s] that there is substance in [Mr Ramadan's] allegations" of torture.⁷
- 7.5 On 4 February 2016, the European Parliament adopted an urgency resolution on Bahrain and the case of Mr Ramadan (2016/2557(RSP)).8 The European Parliament:

"Expresse[d] its concern and disappointment over Bahrain's return to the practice of capital punishment; call[ed] for the reintroduction of the moratorium on the death penalty as a first step towards its abolition; call[ed] on the Government of Bahrain, and in particular His Majesty Sheikh Hamad bin Isa Al Khalifa, to grant Mohammed Ramadan a royal pardon or to commute his sentence;

Condemn[ed] firmly the continuing use of torture and other cruel or degrading treatment or punishment against prisoners by the security forces; is extremely worried about the prisoners' physical and mental integrity".

7.6 We also draw your attention to specific concerns raised by parliamentarians within both the UK and European parliaments regarding the conduct of the Ombudsman. In March of this year, Member of European Parliament Alyn Smith tabled a parliamentary question stating:

In Bahrain, systematic torture and the role of coerced confessions in securing death sentences are hugely troubling. This dynamic casts serious doubt on the efficacy and independence of the bodies established by Bahrain to safeguard against torture and police abuses, including the Ombudsman of the Ministry of Interior...

Most recently, the Ombudsman disclosed the results of confidential investigations to Bahrain's Ministry of Foreign Affairs and released those records

Maina Kiai (Special Rapporteur on the Rights to Freedom of Peaceful Assembly and of Association) et. al, Mandates of the Working Group on Arbitrary Detention, BHR 11/2014, (14 August 2014).

⁶ Christof Heyns (Special Rapporteur on Extrajudicial, Summary or Arbitrary Executions), Letter dated 20 Nov. 2015 from the S.R. on Extrajudicial, Summary, or Arbitrary Executions to the United Nations addressed to the Secretary-General, BHR 7/2015 (20 Nov. 2015).

⁷ Ibid

⁸ European Parliament. European Parliament Resolution of 4 February 2016 on Bahrain: The Case of Mohammed Ramadan. 2016/2557(RSP).

to Members of the European Parliament as part of an attempt to head off Parliament's urgency resolution on the case of Bahraini prisoner, Mohammed Ramadan.

This is but one example of the Ombudsman's failure to comply with the minimum requirements for monitoring bodies set out in the Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment and the Istanbul Protocol."

- 7.7 Shortly thereafter, in April 2016, Member of UK Parliament Tom Brake tabled a parliamentary question asking the UK Secretary of State for Foreign and Commonwealth Affairs "what representations the Government made to the Ombudsman of the Bahraini (a) Ministry of Interior and (b) authorities on that Ombudsman's investigation into the alleged torture of Mohamed Ramadan."¹⁰
- 7.8 We also draw your attention to growing international media scrutiny of the Ombudsman's misconduct in the case of Mr Ramadan, including a February 2016 article in the Guardian newspaper declaring that the Ombudsman had "failed to investigate torture claims" in the case of Mr Ramadan. 11

8. REQUEST FOR NEW, INDEPENDENT INVESTIGATION

- As above, as a signatory to the CAT, your government is obligated by Article 12 of that convention to entrust "competent authorities" with conducting "a prompt and impartial investigation wherever there is reasonable ground to believe that an act of torture has been committed." Mr Ramadan is exactly such a case. The failures outlined above entail numerous indications that the Ombudsman's Office, at least in its current incarnation, does not constitute a "competent authority" and that it has not conducted an "impartial investigation."
- 8.2 Further, paragraphs 75 and 82 of the Istanbul Protocol specify how states should proceed when "investigative procedures are inadequate because of a lack of resources or expertise, the appearance of bias, the apparent existence of a pattern of abuse or other substantial reasons." In such circumstances, "States must ensure that investigations are undertaken through an independent commission of inquiry or similar procedure."
- 8.3 This is our request of Your Excellency's government: to establish a demonstrably independent commission of inquiry—whether by taking immediate and transparent steps to guarantee the independence of the Ombudsman's Office or by creating a new, independent investigatory body—to investigate Mr Ramadan's allegations of

⁹ Lack of Independence and Efficacy of UK-Funded Bodies Against Torture in Bahrain, PARL. EUR. DOC. (E-002200-16) (15 Mar. 2016).

Tom Brake (Carshalton and Wallington MP), to the UK Secretary of State of Foreign and Commonwealth Affairs, 11 April 2016, Question 33305. http://www.parliament.uk/business/publications/written-questions-answers-statements/written-question/Commons/2016-04-11/33305/

^{*}Bahrain's UK-funded police watchdog fails to investigate torture claims." The Guardian, accessed 9 June 2016, https://www.theguardian.com/world/2016/feb/09/bahrains-uk-funded-police-watchdog-fails-to-investigate-torture-claims-mohammed-ramadan.

torture in a manner that complies with the UN CAT and the Istanbul Protocol. Specifically, we ask that any investigation focus on Reprieve's recently submitted complaint to the Ombudsman's Office (again, enclosed with this letter as Annexure A

8.4 We look forward to hearing from you and stand ready to assist with any further information about this case. Based on the urgency of Mr Ramadan's circumstances, I would request that you respond confirming your intention to conduct a new investigation no later than July 20th, 2016. Please do not hesitate to get in touch via the contact information provided below.

Yours sincerely,

Maya Foa

REPRIEVE

maya.foa@reprieve.org.uk

Sayed Alwadaei

BAHRAIN INSTITUTE FOR RIGHTS AND DEMOCRACY (BIRD) sayed@birdbh.org

James Suzano

AMERICANS FOR DEMOCRACY AND HUMAN RIGHTS IN BAHRAIN (ADHRB) jsuzano@adhrb.org



ANNEX 21



1. Complainant's Perso	onal Details	Refe	rence Number
Name	Mohamed Ramadan	CPR	821100696
Nationality	Bahrain	Mobile/Home Phone	
Villa/House/ Building	House 163 Flat	Road	
Block	233	Area	
Governorate		Email	
Occupation	Worked in Airport	Employer	
In case the complain	t is filed by an agent on behalf of the comp	plainant, please provide the	ne following information:
Name of the Agent	Catherine Higham (Reprieve)	CPR	Not available
Status	Agent	Mobile	See attached complaint
2. Defendant's Person	al Details details or information that could assist in id	Contifuing the Ministry of L	ntarior amplayoo, such as nama
rank, number, uniforr	m, vehicle registration number		menor employee, such as name,
Vehicle No.	Unknown Police and MOI individuals	Military/rank number Division	
Any Specific Information			
3. Information about the	e complaint:		
Date	February 18, 2014 - March 2, 2014	Time	
Site of the incident	CID Building, Riffa Prison, Asri P	rison	
Are there witnesses?	Yes No X	If Yes, provide	information about the witnesses
Name of the first witness		Mobile Number	CPR
Name of the second witness		Mobile Number	CPR
Have you made this complaint to any other review body?	Yes No	If Yes, pro	vide the required information
Agency/Office		Date	Ref.





4. Detailed facts of the incident

• Diagon outling the ign			
the Interior employeeProvide sepecific detaMention any information	was inadequate. ails about what was said and don ion on evidence relevant to your o	ie.	feel the conduct of the Ministry of
 Mention the psycholo 	ogical and the physical damages.		
	See atta	ached full complaint	
I the undersigned hereby summoned for investiga	y certify that all the information I pation at any time.	provided or endorsed for investig	ation in correct. I am willing to be
Signature	Catherine Higham (signature page attached, as document will not allo		22 June, 2016
	digital signature)	w	22 Julie, 2010
Complaints should be se	digital signature) ent to the following email address	: (complaints@ombudsman.	
Complaints should be seFor information or enq	ent to the following email address		
For information or enq	ent to the following email address juiries please call	: (complaints@ombudsman.	
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• For information or enqual Documents to be included 1. A copy of the CPR 2. Any evidence relevant Office Use Person who received	ent to the following email address juries please call	: (complaints@ombudsman. : (00973-17563000)	
• For information or enqual Documents to be included 1. A copy of the CPR 2. Any evidence relevant Office Use Person who received the complaint Reference	ent to the following email address juries please call	: (complaints@ombudsman. : (00973-17563000) Date the complaint was received Form the complaint	
Person who received the complaint Person who received the complaint Person who checked	ent to the following email address juries please call	: (complaints@ombudsman. : (00973-17563000) Date the complaint was received Form the complaint was received Person who reviewed	
• For information or enq Documents to be included 1. A copy of the CPR 2. Any evidence relevant Office Use Person who received the complaint Reference Number Person who checked	ent to the following email address juries please call	: (complaints@ombudsman. : (00973-17563000) Date the complaint was received Form the complaint was received Person who reviewed	

Organisation / NGO Request for Investigation of Complaint / Matters of Concern

Article 1 of the Decree No (27) of 2012 concerning the Independent Ombudsman for the Ministry of Interior, as amended by Decree No (35) of 2013, provides for an individual or organisation acting on behalf of a person who claims misconduct of any kind has been committed by any member of the Ministry of Interior in the course of, or because of, or during the performance of, his duties, to bring a complaint to the Ombudsman.

Please help the Ombudsman to identify all potential lines of enquiry by providing as much information as possible in the areas listed below.

Details of Organisation / NGO Contacting the Ombudsman

Name of Organisation / NGO: Reprieve

Name of person contacting the Ombudsman: Catherine Higham

Phone: +44 (0)20 7553 8140 E-mail: catherine.higham@reprieve.org.uk

Details of Complaint / Information Request

1. Name; location of person(s) who are subject of concerns (and contact details if not in detention)

Mohamed Ramadan, detained in Asri Prison

2. Details of Concerns; evidence brought to the attention of the Organisation / NGO and the evidence sources

- 1. Mohamed Ramadan is a 32-year old Bahraini citizen. On 18 February 2014, Bahraini security officers approached Mohamed at the airport where he worked. The officers informed Mohamed that they were from preventative security and instructed him to go with them. They handcuffed Mohamed and took him to the Criminal Investigate Directorate (CID) building. When Mohamed did not return home, his family began searching for him. Airport officials and CID officers denied knowing Mohamed's whereabouts. After four days, Mohamed's parents filed complaints with the NIHR and Ombudsman. That day, they received a call from Mohamed saying that he was at the CID building.
- 2. Upon his arrival at the CID, security officers began insulting Mohamed, his family, and his religion. They blindfolded him and took him to a freezing cold room. They handed Mohamed a phone and he spoke to someone who threatened him to confess. The officers took Mohamed to another room and began torturing him. They beat, slapped, and kicked him all over his body, focusing on his head, ears, and genitals. They called him a traitor and accused him of killing a police officer. When Mohamed denied these accusations, they

this time he was not allowed to contact his family or legal counsel.

- 3. Mohamed finally agreed to confess because he wanted the torture to end. He said that he would sign or confess to anything but the officers refused to tell him what to say. Instead, they continued to torture him until he correctly fabricated the confession they wanted. After the initial four days, Mohamed received another phone call from the same person he had spoken to before. This person admitted that the government knew that Mohamed was innocent but that his participation in marches and other activities made him a traitor, and that the government planned to charge him with the murder of a police officer as punishment.
- 4. Once Mr. Ramadan finally produced a confession that suited the officers who were torturing him, they took him to the Public Prosecutor to repeat his confession. The Public Prosecutor then brought Mr. Ramadan before a judge and asked him to tell the judge his story. Mr. Ramadan responded by asking the judge if he wished to hear the real story or the fake one. This greatly angered the judge, who removed Mr. Ramadan to a different courtroom with a different judge. Mr. Ramadan told this judge the truth about his torture and recanted his confession.
- 5. Thereafter, security officers moved Mr. Ramadan from the CID Building first to Asri Prison briefly, and then to Riffa Prison for 13 days. During this period, Mr. Ramadan was again tortured. Security officers held him in solitary confinement, blindfolded, handcuffed, and tied up with belts. They again beat him about the head and genitals, threatened to rape his wife and other family members, and forced him to listen to the screams of other prisoners being tortured. During his detention at Riffa Prison, Mr. Ramadan's jailers also brought him to a progovernment demonstration and presented him to protesters, who demanded revenge and the execution of members of the political opposition.
- 6. Nine days into his detention at Riffa Prison, on 2 March 2014, security officers brought Mr. Ramadan to see the Public Prosecutor's forensic medical examiner, Dr. Mohammed Nour al-din Ahmad Ans Fowda. This examination, which was apparently brief and cursory, judging by the short length of the resulting report, reported no findings of torture. An independent medico-legal expert commissioned by Reprieve also examined this report and found it to be non-compliant with the Istanbul Protocol. A copy of his findings are available upon request.
- 7. In spite of his lawyer's many attempts to meet with his client, Mr. Ramadan was never allowed to meet with legal counsel, in contravention of both Bahraini domestic and binding international law.
- 8. During the trial itself, Mr. Ramadan's lawyer put forward a motion for his client's confession to be thrown out on the grounds that it had resulted from torture and coercion. The judge ignored this and proceeded with the trial, ultimately convicting Mr. Ramadan on the basis of little more than his "confession." The Court of Cassation denied his final appeal on Monday, 20 November 2015 and he now awaits imminent execution.

3. Details of person(s) with evidence known to be willing to be interviewed by the Ombudsman

Catherine Higham, investigator for Reprieve. She may be reached at PO Box 72054. London, UK. EC3P 3BZ, or by phone at +44 (0)20 7553 8140 x41.

Mr Ramadan's family have also consented to be interviewed, however all requests for interviews with them should be directed to Reprieve, who will then be happy to facilitate interviews as part of a full independent and impartial investigation.

4. Do you have a signed consent / Permission to Disclose Information form? Yes / No

If yes, please attach the signed consent. If the consent is signed by family member, please state their relationship to the person(s) who are the subject of the complaint.

Mr. Ramadan's family have provided Reprieve with verbal consent.

Catherine Higham

Chefur

ANNEX 22

15 June Ombudsman Statement - Mohammed Ramadan

A number of statements and reports have recently commented on the role of Bahrain's independent Ministry of Interior's Ombudsman's Office in investigating complaints regarding Mr. Mohammed Ramadan. I would like to take this opportunity to respond.

Between February 2014 and January 2015, the Ombudsman Office investigated four complaints raised by members of Mr. Ramadan's family. The complainants were given every opportunity to raise issues of concern and at no time were allegations of torture made.

It is the case that in July 2014, an NGO brought a large number of complaints to the Ombudsman Office and that one of these related to Mr. Ramadan. Whilst the Ombudsman Office complaint form completed by the NGO did not allege mistreatment or torture, an accompanying e-mailed statement did make such allegations. The NGO's complaint form included consent from Mr. Ramadan's wife. Ombudsman Office Investigators were aware of the e-mailed statement but because they were already in direct contact with Mr. Ramadan's wife, they focused on the family complaints. The NGO who had brought the complaints to the Ombudsman Office was kept informed and updated regarding the family complaints and the investigative action that was taken. It is a matter of regret that the information provided by my Office regarding the complaints received from Mr. Ramadan's family, did not include the separate allegation by an NGO.

Given ongoing concerns, I took a decision in May 2016 to initiate a full, independent investigation into the treatment both Mohamed Ramadan and Hussain al-Moosa from the point of their arrest to throughout their detention. This investigation is ongoing and the findings will be reported in due course. The Ombudsman's third Annual Report evidences the significant steps taken since the creation of the Office, including the development of capability and capacity to investigate serious allegations and forward credible evidence to criminal investigation bodies.

My Office continues to make every effort to operate to the highest standards of integrity and independence and we will continue to work tirelessly towards the achievement of this.

ANNEX 23

From: Ben Pitler
To: Catherine Higham

Subject: Fw: Allegations of Mistreatment and Torture by Mr. Mohamed Ramadan

Date: 27 January 2017 11:48:45

Attachments: <u>image001.png</u>

Ben Pitler Investigator

Reprieve PO Box 72054 London EC3P 3BZ Tel: + 44 (0)207 553 8140 ben.pitler@reprieve.org.uk www.reprieve.org.uk

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From: inter <inter@ombudsman.bh>

Sent: Monday, October 24, 2016 10:58 AM

To: Catherine Higham; Ben Pitler; Maya Foa; Soraya Bauwens

Subject: Allegations of Mistreatment and Torture by Mr. Mohamed Ramadan

Dear Sir / Madam,

Please find bellow the summary of investigation findings into the allegations of mistreatment and torture made by Mr. Mohamed Ramadan:

Allegations of Mistreatment and Torture by Mr. Mohamed Ramadan:

In May 2016, the Ombudsman opened an investigation into allegations made by a number of human rights organizations that Mr. Mohammed Ramadan was mistreated and tortured in detention in February and March 2014.

The Ombudsman examined the following: all police computerized prisoner activity and movement records; notes of all medical examinations attended by Mr. Ramadan; detention and custody records; statements made by Mr. Ramadan to the police and the Public Prosecution Service; the records of the forensic doctor who examined Mr. Ramadan; legal representative submissions to court hearings; court records for Mr. Ramadan's case hearing; appeal hearing and higher court hearing and the provisions of Bahrain Law 58 (2006) (Protecting the Community

from Terrorist Crime). Ombudsman investigators interviewed: Mr. Ramadan; Mr. Ramadan's legal representative; the doctors who examined Mr. Ramadan over the 11 days following his arrest; a number of police officers who had contact with Mr. Ramadan and members of Mr. Ramadan's family.

The alleged mistreatment and torture of Mr. Ramadan is now the subject of a criminal investigation by the Bahrain Special Investigation Unit (SIU) and, in line with the requirements of his Decree, the Ombudsman has suspended all further investigative activity that could prejudice the criminal investigation. The Ombudsman has provided the SIU with a detailed report of the findings of his investigation; the Ombudsman Office suspended forward investigation plan and a copy of all of the evidence gathered and examined.

The Ombudsman will, in due course, review the full findings of the Special Investigation Unit criminal investigation and will consider any disciplinary issues or administrative, policy or practice failings requiring recommendations.

Regards, International Cooperation & Development Directorate Ombudsman Office

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This email has been scanned by the Symantec Email Security.cloud service. For more information please visit http://www.symanteccloud.com

Annex 24

Ombudsman Office 10th Floor, Bronze Towers

Building No: 204, Road: 2803, Block: 428

Area: Seef District, P.O.Box: 23452, Kingdom Of Bahrain

By Post and Email:

Email: nawaf@ombudsman.bh

RE: New investigation into Mohamed Ramadan

5th August 2016

Dear Ombudsman Nawaf Mohammed Al-Ma'awda,

I write to you regarding the case of Mohamed Ramadan in my capacity as a clinical psychologist with more than two decades worth of experience in the field. In March 2016, I was asked to provide an opinion on the quality of the Forensic Doctor's report previously submitted to your office in Mr. Ramadan's case. In my report, I concluded that there were compelling reasons to disregard the forensic report and seek a further, independent investigation into allegations of torture in Mr. Ramadan's case. I am very pleased that you have made a decision to initiate a new investigation into the treatment of Mr. Ramadan and I thank you for taking these concerns seriously.

My report relied heavily on the standards required under the Istanbul Protocol - a set of international guidelines, developed by the UN, for the documentation of torture by human rights investigatory bodies such as the Ombudsman. As noted by the United Nations Special Rapporteur on Torture and other Cruel, Inhuman, or Degrading Treatment or Punishment Juan Mendez, "states have an obligation to investigate in full compliance with the Istanbul Protocol as a procedural obligation." Accordingly, I would hope that all medical assessments conducted as part of the new investigation will comply with the Istanbul Protocol. This is all the more important because the new investigation will occur over two years after the alleged torture took place which means that any physical injuries may have healed. The lapse of time makes psychological evidence under Chapter VI of the Protocol, which considers a range of factors, including evidence of psychological damage, and whether findings are expected or typical reactions to extreme stress, particularly important.

I have substantial expertise in conducting psychological evaluations under the Istanbul Protocol and have psychologically assessed several hundred survivors of trauma using the guidelines. In my report, I reviewed the quality of the Forensic Doctor's report dated 2 March 2014 by Dr. Mohammed Nour al Din Ahmad Ans Fowda on Mr. Ramadan. I found that the report was non-compliant with the Istanbul Protocol and violated paragraphs 84, 124, 125, and 126, amongst many others. I concluded that Dr. Fowda's medical examination failed in almost all aspects of what is required in a forensic investigation of possible torture and is in complete violation of the procedural requirements of the Istanbul Protocols. Therefore, it cannot be relied upon in the course of the investigation into Mr. Ramadan's torture and an entirely new medical assessment should be initiated.

¹ Juan Mendez (Special Rapporteur on Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment), Interim Report, U.N. Doc. A/69/387 (2014)

Given my extensive experience in the diagnosis and treatment of complex presentations of traumatic stress, I would like to offer my assistance in this investigation. I have psychologically assessed several hundred survivors of traumas that include torture, persecution, war and rendition using the Istanbul Protocols. I have also produced expert witness and medico-legal reports for criminal and civil matters for the UK Supreme Court, the European Court of Human Rights, the Baha Mousa Public Inquiry, the African Court of Justice and the United Nations. Paragraph 79 of the Istanbul Protocol requires the body investigating allegations of torture to have the power to instruct impartial medical experts. If you agree to my conducting the assessment, I would undertake to comply fully with all the requirements for an independent, impartial investigation set out in the Protocol. Additionally, if you agree, I could also assist in soliciting the help of a medical expert to aid me in this task by conducting the physical assessment.

I look forward to hearing from you and stand ready to assist with any further information. Based on the urgency of Mr. Ramadan's circumstances, I would request that you respond confirming your intention no later than August 19th, 2016. Please do not hesitate to get in touch via the contact information provided below.

Yours sincerely,

Dr. Brock Chisholm, BSc (hons), MSc, DClinpsyD CPsychol **Chartered Clinical Psychologist** Criterion A Psychology Services brock@criteriona.com



Nawaf al-Moawdah Ombudsman for the Ministry of Interior Manama Bahrain

Submitted by electronic copy to: inter@ombudsman.bh

1 November 2016

Dear Mr al-Moawdah,

I write to you today regarding your office's conclusion of its investigation into the torture of Mohammed Ramadan. I understand that the investigation found evidence to suggest Mr Ramadan's allegations were credible, as you have referred this case to the Special Investigations Unit (SIU) for criminal investigation and prosecution. Reprieve welcomes this development.

I was grateful for the email I received from your office confirming that this referral had taken place, which I received on 24 October. I was however, extremely disappointed that this email did not include full details of the investigation into Mr Ramadan's torture conducted by your office. As Reprieve has explained in the past, your office's continued refusal to communicate details of this investigation to Mr Ramadan and his legal counsel stands in breach of the standards required by the UN Manual on Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, commonly known as the Istanbul Protocol. Paragraphs 79, 81, 82, and 84 of the Istanbul Protocol require that a full report be "communicated to the subject or his or her nominated representative."

Despite having concluded its investigation, I understand that your office has made no report on its findings in Mr Ramadan's case to either Mr Ramadan or his lawyer. This failure to share details of your investigation into his case, coupled with your office's two-year delay in beginning the investigation at all, remains a matter of serious concern.

As you know, Mr Ramadan has been sentenced to death on the strength of evidence which your own investigation now suggests is tainted by the use of torture. Given the importance of the issues at stake here, I would ask that your office to respond to this letter as soon as possible confirming that you will immediately release these findings in full to Mr Ramadan and his lawyer.

Sincerely,

Reprieve, PO Box 72054 London UK, EC3P 3BZ T +44 (0)20 7553 8140 F +44 (0)20 7553 8189 info@reprieve.org.uk www.reprieve.org.uk

Chair: Ken Macdonald QC

Patrons: Alan Bennett, Julie Christie, Martha Lane Fox, Gordon Roddick, Richard Rogers, Ruth Rogers, Jon Snow, Marina Warner and Vivienne Westwood



Catherine Higham Regional Lead, Middle East & North Africa Death Penalty Team REPRIEVE

Reprieve, PO Box 72054 London UK, EC3P 3BZ T +44 (0)20 7553 8140 F +44 (0)20 7553 8189 info@reprieve.org.uk www.reprieve.org.uk

Chair: Ken Macdonald QC

Patrons: Alan Bennett, Julie Christie, Martha Lane Fox, Gordon Roddick, Richard Rogers, Ruth Rogers, Jon Snow, Marina Warner and Vivienne Westwood

From: Ben Pitler
To: Catherine Higham

Subject: Fw: Allegations of Mistreatment and Torture by Mr. Mohamed Ramadan

Date: 27 January 2017 11:49:33

ANNEX 26

Ben Pitler Investigator

Reprieve PO Box 72054 London EC3P 3BZ Tel: + 44 (0)207 553 8140 ben.pitler@reprieve.org.uk www.reprieve.org.uk

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From: inter <inter@ombudsman.bh>

Sent: Thursday, November 10, 2016 7:46 AM

To: Catherine Higham

Cc: Ben Pitler; Soraya Bauwens; Maya Foa; Office

Subject: RE: Allegations of Mistreatment and Torture by Mr. Mohamed Ramadan

Dear Ms. Higham,

As the Ombudsman investigation into the allegations concerning Mohammed Ramadan have now been referred to the SIU, it would not be appropriate for this Office to make any comments about its findings.

We would, however, wish to make the following general point. It is Ombudsman Office policy not to share reports into investigations of alleged mistreatment or torture that have been referred to the SIU. Unlike the SIU, the Ombudsman does not have the power to conduct criminal investigations. In the event that the Ombudsman was to share the findings of his serious allegation early investigations, the capacity for subsequent criminal investigations to deliver justice could be fatally compromised.

You refer to the Istanbul Protocol. I would draw your attention to the fact that the Istanbul Protocol Paragraph 77 clearly states that the "broad purpose" of any investigation into alleged incidents of torture is to establish the facts, "with a view to identifying those responsible for the incidents and facilitating their prosecution, or for use in the context of other procedures designed to obtain redress for victims." The policy of the Ombudsman Office is entirely consistent with this overarching purpose.

I hope this clarifies.

Regards, Nawaf AL Moawda The Ombudsman

From: Catherine Higham [mailto:catherine.higham@reprieve.org.uk]

م 20:52 2016, نوفمبر 01:52 sent: 01

To: inter <inter@ombudsman.bh>

Cc: Ben Pitler <Ben.Pitler@reprieve.org.uk>; Soraya Bauwens

<soraya.bauwens@reprieve.org.uk>; Maya Foa <maya.foa@reprieve.org.uk>
Subject: RE: Allegations of Mistreatment and Torture by Mr. Mohamed Ramadan

Dear Madam / Sir,

Thank you for your email below. Please find attached a letter for the attention of the Ombudsman regarding this matter. Please don't hesitate to contact me if you have any questions.

Sincerely, Catherine

Catherine Higham

+44 207 553 8141

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From: inter [mailto:inter@ombudsman.bh]

Sent: 24 October 2016 10:59

To: Catherine Higham < catherine.higham@reprieve.org.uk >; Ben Pitler

<Ben.Pitler@reprieve.org.uk>; Maya Foa <maya.foa@reprieve.org.uk>; Soraya Bauwens

<soraya.bauwens@reprieve.org.uk>

Subject: Allegations of Mistreatment and Torture by Mr. Mohamed Ramadan

Dear Sir / Madam,

Please find bellow the summary of investigation findings into the allegations of mistreatment and torture made by Mr. Mohamed Ramadan:

Allegations of Mistreatment and Torture by Mr. Mohamed Ramadan:

From: Ben Pitler
To: Catherine Higham

Subject: Fw: Allegations of Mistreatment and Torture by Mr. Mohamed Ramadan

Date: 27 January 2017 11:49:53

Ben Pitler Investigator

ANNEX 27

Reprieve PO Box 72054 London EC3P 3BZ Tel: + 44 (0)207 553 8140 ben.pitler@reprieve.org.uk www.reprieve.org.uk

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From: Catherine Higham

Sent: Friday, November 25, 2016 4:12 PM

To: 'inter'

Cc: Ben Pitler; Soraya Bauwens; Maya Foa; Office

Subject: RE: Allegations of Mistreatment and Torture by Mr. Mohamed Ramadan

Dear Mr Al Moawda,

Thank you for your email of 10 November. Reprieve welcomes the news that your office has now referred Mr Ramadan's torture allegations to the Special Investigations Unit for criminal investigation.

I agree that it is important for the SIU's criminal investigation into the case to progress as you note below. However, I do wish to remind you that the Istanbul Protocol makes clear that your office has a duty to release its findings to Mr Ramadan and his legal counsel immediately. Releasing this information to Mr Ramadan and his legal team would not amount to a public disclosure, and I urge you to share this information with them now.

I also welcome your reference to paragraph 77 of the Istanbul Protocol. As that paragraph notes, the broad purpose of a torture investigation is both to facilitate prosecution of offenders and to contribute to other procedures designed to obtain redress for victims. As I'm sure you will agree, if Mr Ramadan has been tortured, he is entitled not only to the criminal prosecution of his torturers but also to other domestic remedies and civil litigation. The fact that Mr Ramadan's torture is now the subject of a criminal investigation casts serious doubt on the validity of his confession, the fairness of his trial, and the legality of his death sentence. As such, it is crucial that your office release its findings to Mr Ramadan and his lawyer immediately, as is required by international law.

I am grateful for your continued engagement and I would ask you to respond to this email as soon as possible confirming your intent to provide Mr Ramadan's legal counsel with full details of your findings.

Best wishes,

Catherine

Catherine Higham

+44 207 553 8141

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From: inter [mailto:inter@ombudsman.bh]

Sent: 10 November 2016 07:47

To: Catherine Higham <catherine.higham@reprieve.org.uk>
Cc: Ben Pitler <Ben.Pitler@reprieve.org.uk>; Soraya Bauwens
<soraya.bauwens@reprieve.org.uk>; Maya Foa <maya.foa@reprieve.org.uk>; Office

<office@ombudsman.bh>

Subject: RE: Allegations of Mistreatment and Torture by Mr. Mohamed Ramadan

Dear Ms. Higham,

As the Ombudsman investigation into the allegations concerning Mohammed Ramadan have now been referred to the SIU, it would not be appropriate for this Office to make any comments about its findings.

We would, however, wish to make the following general point. It is Ombudsman Office policy not to share reports into investigations of alleged mistreatment or torture that have been referred to the SIU. Unlike the SIU, the Ombudsman does not have the power to conduct criminal investigations. In the event that the Ombudsman was to share the findings of his serious allegation early investigations, the capacity for subsequent criminal investigations to deliver justice could be fatally compromised.

You refer to the Istanbul Protocol. I would draw your attention to the fact that the Istanbul Protocol Paragraph 77 clearly states that the "broad purpose" of any investigation into alleged incidents of torture is to establish the facts, "with a view to identifying those responsible for the incidents and facilitating their prosecution, or for use in the context of other procedures designed to obtain redress for victims." The policy of the Ombudsman Office is entirely consistent with this overarching purpose.

I hope this clarifies.

Regards, Nawaf AL Moawda The Ombudsman From: Ben Pitler
To: Catherine Higham

Subject: Fw: Complaint regarding treatment of Mohammed Ramadan

Date: 27 January 2017 11:50:20

ANNEX 28

Ben Pitler Investigator

Reprieve PO Box 72054 London EC3P 3BZ Tel: + 44 (0)207 553 8140 ben.pitler@reprieve.org.uk www.reprieve.org.uk

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From: inter <inter@ombudsman.bh>

Sent: Tuesday, December 13, 2016 10:00 AM

To: Ben Pitler

Cc: Catherine Higham

Subject: RE: Complaint regarding treatment of Mohammed Ramadan

Dear Ben,

Hope this finds you well.

Thank you again for contacting the Ombudsman Office, raising your concerns about the mistreatment of Mr. Mohammed Ramadhan.

In relation to your email of 2 Dec, 2016, we would like to inform you that The Ombudsman Office had already received a complaint from Mr. Ramadhan and other two prisoners on 17 Nov, 2016 who raised the same allegations just as mentioned.

Accordingly, the Ombudsman Office took the concerns you raised about seriously and been subjected to its procedures. On the following day of receiving the complaints, an investigator went to Jau Prison to investigate those allegations, interview the complainants and examine all the related records.

Assuring the privacy and confidentiality of the detainee/prisoner is one of the Ombudsman's main commitments, therefore you will understand that the Ombudsman cannot share complaint investigations findings with third party complainants unless they are, with <u>written consent</u> to act on behalf of the detainee/prisoner.

I hope this is helpful and thank you for your understanding.

Yours sincerely, International Cooperation & Development Directorate Ombudsman

From: Ben Pitler [mailto:Ben.Pitler@reprieve.org.uk]

Sent: Friday, December 02, 2016 7:40 PM

To: inter; Complaints **Cc:** Catherine Higham

Subject: Complaint regarding treatment of Mohammed Ramadan

To whom it may concern,

Please find attached a complaint regarding the treatment of Mohammed Ramadan in Jau Prison. I would be grateful if you could respond at your earliest convenience, confirming receipt of this complaint.

Best wishes,

Ben Pitler Investigator

Reprieve PO Box 72054 London EC3P 3BZ Tel: + 44 (0)207 553 8140 ben.pitler@reprieve.org.uk www.reprieve.org.uk

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From: Ben Pitler
To: Catherine Higham

Subject: Fw: Complaint regarding treatment of Mohammed Ramadan

Date: 27 January 2017 11:51:01

Ben Pitler Investigator

Reprieve PO Box 72054 London EC3P 3BZ Tel: + 44 (0)207 553 8140 ben.pitler@reprieve.org.uk www.reprieve.org.uk

ANNEX 29

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From: Ben Pitler

Sent: Friday, December 16, 2016 4:33 PM

To: 'inter'

Cc: Catherine Higham

Subject: RE: Complaint regarding treatment of Mohammed Ramadan

To Whom It May Concern:

Thank you for your email. If I understand your message correctly, you are saying that you will not consider complaints from Reprieve without written consent to act on behalf of Mr Ramadan. We possess such written consent from Mr Ramadan's wife Zainab Ebrahim, acting as Mr Ramadan's next friend.

Unfortunately, we have some concerns about sharing these consent forms with your office. Earlier this year, in interviewing Mr Ramadan's wife, your interviewer produced a signed consent form from a different human rights organisation and interrogated Mr Ramadan's wife about why she is choosing to cooperate with international human rights groups. As we have communicated to your office clearly before, this is unacceptable conduct which represents a flagrant violation of the Istanbul Protocol.

As such, we would be happy to share with you our written consent to act on behalf of Mr Ramadan, if you will first provide us with a written guarantee that this document will not be used to in any way bully or intimidate Mr Ramadan or his family, and that they will not suffer any retributive action as a result of having signed this form. Can you please provide this guarantee ASAP? As soon as we receive confirmation of this point, we will sent you our written

consent form.

Best wishes,

Ben Pitler Investigator

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From: inter [mailto:inter@ombudsman.bh]

Sent: 13 December 2016 10:01

To: Ben Pitler <Ben.Pitler@reprieve.org.uk>

Cc: Catherine Higham <catherine.higham@reprieve.org.uk>

Subject: RE: Complaint regarding treatment of Mohammed Ramadan

Dear Ben.

Hope this finds you well.

Thank you again for contacting the Ombudsman Office, raising your concerns about the mistreatment of Mr. Mohammed Ramadhan.

In relation to your email of 2 Dec, 2016, we would like to inform you that The Ombudsman Office had already received a complaint from Mr. Ramadhan and other two prisoners on 17 Nov, 2016 who raised the same allegations just as mentioned.

Accordingly, the Ombudsman Office took the concerns you raised about seriously and been subjected to its procedures. On the following day of receiving the complaints, an investigator went to Jau Prison to investigate those allegations, interview the complainants and examine all the related records.

Assuring the privacy and confidentiality of the detainee/prisoner is one of the Ombudsman's main commitments, therefore you will understand that the Ombudsman cannot share complaint investigations findings with third party

ANNEX 30

Nawaf al-Moawda
Ombudsman for the Ministry of Interior
Manama
Bahrain

Submitted by electronic copy to: inter@ombudsman.bh

19 January 2017

Dear Mr al-Moawda,

As you know, I am appointed legal counsel for Mohammed Ramadan. I write to you following your office's decision to suspend further investigative activity into Mr Ramadan's case, and to refer his torture allegations to the Special Investigations Unit for criminal investigation and prosecution.

As you will be aware, paragraphs 81 and 116 of the Istanbul Protocol require that "Alleged victims of torture or ill-treatment and their legal representatives (...) be informed of, and have access to, any hearing as well as to all information relevant to the investigation." Accordingly, I request that you release to me the full details of your office's investigation into Mr Ramadan's torture allegations. Moreover, I request that you do so **immediately**, and not delay any further. Article 116 of the Istanbul Protocol emphasizes "the role of the survivor as a party to the proceedings" and notes "the especially important role his/her interests play in the conduct of the investigation." As such, it is clear that Mr Ramadan and his legal counsel were in fact entitled to this information months ago, during the conduct of your investigation, and are certainly entitled to it now. Making Mr Ramadan wait until a later date would be inconsistent with the Istanbul Protocol.

I understand that you do not wish to release this information publicly, as this may prejudice or compromise the SIU's ongoing criminal investigation. However, I emphasize here that releasing this information to Mr Ramadan and his legal team, as is required by international law, **does not amount to a public disclosure**. The details of your inquiry will be highly relevant to Mr Ramadan's conviction and sentence, and will not be used except in furtherance of my ongoing efforts to ensure that his human rights are upheld. They will not be shared with press outlets or otherwise made available publicly.

In view of the urgency of this matter, please respond as soon as possible confirming your intention to release the details of your investigation to my office.

Sincerely,

Mohamed al-Tajer

From: Ben Pitler

To: Catherine Higham

Subject: Fw: Uregent: Mohamed Ramadhan **Date:** 27 January 2017 11:52:00

Attachments: 2017 01 19 PRIV MRamadan - Mohammed al-Tajer letter to Ombudsman.pdf

ANNEX 31

Ben Pitler Investigator

Reprieve PO Box 72054 London EC3P 3BZ Tel: + 44 (0)207 553 8140 ben.pitler@reprieve.org.uk www.reprieve.org.uk

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From: Zainab Mohamed <zainabmohamed565@gmail.com>

Sent: Thursday, January 26, 2017 11:21 AM

To: inter@ombudsman.bh

Cc: sayed@birdbh.org; Ben Pitler; altajer.office@gmail.com; mhojeij@ohchr.org

Subject: Uregent: Mohamed Ramadhan

To Whom It May Concern:

I am Zainab Ebrahim, wife of Mohamed Ramadhan, who is a prisoner at Jau Prison. I am writing to request the immediate release of the findings of your office's investigations into my husband's torture allegations to Mohamed al-Tajer, our lawyer. I have been informed by Mr al-Tajer, as well as by BIRD and Reprieve (in CC), that international minimum standards for torture investigations, namely the Istanbul Protocol, require your office to release these details to my husband's lawyer. I have been informed that this release will not amount to a public disclosure, and thus will not influence or prejudice the ongoing criminal investigation of my husband's alleged torturers, which is being carried out by the Special Investigation Unit (SIU). I have attached a letter sent by Mr al-Tajer to your office on 19 January, and I ask that you urgently comply with the request made in this letter and release full findings of your investigation immediately.

I am copying Mohamed Hojeij from the OHCHR in this email thread.

Sincerely,
Zainab Ebrahim
This amail has been seened by the Symanton Email Security aloud service
This email has been scanned by the Symantec Email Security.cloud service.

For more information please visit http://www.symanteccloud.com

ANNEX 32

From: Ben Pitler
To: "inter"

Cc:

Subject: Release of Ombudsman's findings in investigation of Mohamed Ramadhan

Date: 03 February 2017 13:20:53

Attachments: 2016 11 30 PRIV MRamadan - Zainab signed next of friend authorisation form.pdf

Dear Ombudsman Nawaf al-Moawda,

I write to you today to again urge you to disclose the full findings of your office's investigation into the torture of Mohamed Ramadhan and Husain Moosa to Mr Ramadhan and Mr Moosa's lawyer, Mohamed al-Tajer (in CC). Both Reprieve and Mr al-Tajer have written to your office on numerous occasions, requesting such disclosure.

After you notified us on 24 October 2016 that your office had suspended its investigation into Mr Ramadhan's torture allegations and referred his case to the Special Investigation Unit (SIU) for criminal investigation, Reprieve wrote to you on 1 November, 25 November, and 16 December 2016. In each letter, we called on your office to immediately disclose the results of its investigation to Mr al-Tajer. We pointed out that the Istanbul Protocol makes clear that your office is required to disclose this information to Mr al-Tajer immediately. Paragraphs 81 and 116 of the Istanbul Protocol require that "Alleged victims of torture or ill-treatment and their legal representatives (...) be informed of, and have access to, any hearing as well as to all information relevant to the investigation." Article 116 of the Istanbul Protocol further emphasizes "the role of the survivor as a party to the proceedings" and notes "the especially important role his/her interests play in the conduct of the investigation." As such, it is clear that Mr Ramadan and his legal counsel were in fact entitled to this information months ago, during the conduct of your investigation, and are certainly entitled to it now.

Moreover, we also pointed out to your office that concerns about prejudicing the ongoing SIU investigation are not sufficient grounds for continuing to withhold this information from Mr al-Tajer. Disclosing this information to Mr al-Tajer does not amount to a public disclosure. I note that he wrote directly to your office on 19 January 2017 making the same point and stating that the disclosure "will not be used except in furtherance of my ongoing efforts to ensure that [Mr Ramadhan's] human rights are upheld." As such, Reprieve again calls you to immediately release the full details of your investigation into Mr Ramadhan's torture allegations to Mr al-Tajer.

Additionally, I wish to note that the (in CC) has informed me that you told them that NGOs can have direct access to the details of your investigations "if the interested party signed a letter agreeing to this." As I have told you before, Mr Ramadhan's wife Zainab Ebrahim (in CC) has signed a Reprieve authorisation form. On 16 December 2016, I wrote to you and told you that I have concerns about sharing this consent form with you because in the past, interviewers from your office used a consent form that Ms Ebrahim signed with a different NGO to intimidate and bully her. They interrogated her about her contact with foreign NGOs, and this came in the course of an interview that was purportedly related to her husband's torture allegations. In that same email, I told you that I would be happy to share Ms Ebrahim's written consent form with you if you would first "provide Reprieve with a written guarantee that this document will not be used to in any way bully or intimidate Mr Ramadhan or his family, and that they will not suffer any retributive action as a result of having

signed this form." I note that you have not responded or provided any such guarantee. Nevertheless, I am attaching Ms Ebrahim's consent form to this email, based on the fact that you have told the that this will entitle Reprieve to view your Office's full findings in its investigation into Mr Ramadhan's torture. Please disclose these findings both to Reprieve and to Mr al-Tajer immediately, and please also confirm that Ms Ebrahim will suffer no retaliation following the disclosure of this authorisation form. I would appreciate your response to this email confirming your intent to take both actions.

Best wishes,

Ben Pitler

Ben Pitler Investigator

Reprieve PO Box 72054 London EC3P 3BZ Tel: + 44 (0)207 553 8140 ben.pitler@reprieve.org.uk www.reprieve.org.uk

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ANNEX 33



	Complaint Form
Please fill clearly all required is	sformation;
Day booknesday	Date P1 09 2 014 Time 11 am/pm
I) Basic information about the	complainant;
Name (in full): Me hor Nationality:	mad Rayradan Emale I temale
Bahraini	821100696
Date of birth: day some	Place of birth
16.3 Flat	Road: 3.30g Block: 2-33 Area
PO Box:	
E-mail:	Mobile
Janzana adpl	
Phone: +1 2 0 2 6	2 16 19 1 Other Fax
How do you want to commun	sicate with you?by E-mail by SMS
Have you submitted this co	emplaint on behalf of someone else?
If yes please explain why: The subject of is correctly	this promplaint, Mohamad Ramadan,
Information about	+ the Preparer of this Dominglaint:
If Yes, please verify:	
 Type of work: 	Government Sector Private Sector
Vork place and address	Americans for Democracy and Human Right
iame of Administrator/employ	er Husain Abdulla Batra
Work tel: 202 6 2 1	61 4 1 Werk for:
Occupation Executive 1	Sirector Starting date:
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Who did it? Name of the entity or	person in charge Bahrain Gostinment!
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ase specify the reasons for complaining hts? Thave been discriminated against because I am: male female Thave been sexually harassed Thave been discriminated against because of my race (incl. alescent, national / ethnic origin, culture, immigrant status, racial hatrol) Thave been discriminated against because I have a disability finel. physical, intellectual.	I have been discriminated against because of my age I have been discriminated against because of my trade union activity I have been discriminated against because of my criminal record There been discriminated against
Thave been discriminated against because I am: male female I have been sexually harassed I have been discriminated against because of my race (incl. descent, national / erloric origin, colour, immigrant status, racial hatrol) I have been discriminated against because I have a disability	I have been discriminated against because of my age I have been discriminated against because of my trade union activity I have been discriminated against because of my criminal record There been discriminated against because of my religious belief I have been discriminated against because of my religious belief

Have you made a complaint about this to any government body or before the courts? If Yes, please verify: When did you fill the complaint? Date: 16 7-34 2-014
Name of the governmental body or court: Of the Onbudden
Any outcomes? If Yes, indicate what were the results, and why did you not accept it?
If the answer is No, indicate what are the reasons and constraints?
(Please attach ceptes of any letters you submitted, and any replies, decreases and judgments) • Did you submit the complaint to another
Human Rights Organization or Association? No Yes If Yes, please verify the name of the organization or association U:N Special Procedure.
When did you fill the complaint? Day: Date: What are the results and the actions taken?
(Please attach copies of letters submitted and any responses received)
 (III) Documents supporting the complaint: Copy of Identity Card of the complainant. (If the complaint on behalf of someone else, please attach also a copy of his/her ID card). In the case of a complaint on behalf of someone else, please provide a copy of the authorization or power of atterney, or proof of your relationship to the complainant. A copy of courts judgments and any letters or decisions of any governmental body on the subject of the complaint. A copy of letters submitted to other human rights organizations or associations on the subject of the complaint, and any responses received. A copy of any documents or evidence supporting the facts of the complaint or any description supporting the allegation regarding the violation of human rights. Any pictures, videos, sound clips supporting of the complaint. Any documents could be useful and supportive of the complaint.
Failure to attack these documents or follow to complete the requested information will lead to delays in the consideration of the completed and taken the appropriate actions

(IV) Please road and sign this declaration:

I would like the National Institution for Human Rights (NIHR) to consider my complaint. I confirm all the information I have given is true and account to the best of my knowledge. I understand that:

- You will need to handle personal details about me which would include sensitive information – to deal with my complaint effectively.
- You may need to share information about my complaint with the authority/subborities I have complained about and any other relevant organization.
- You may contact me to update me about the complaint or to ask for more information.
- You handle complaints according to the Royal Oder us. (46/2009) amended by Royal Order no. (28/2012) with regard to tise establishment of the NIHR, and the main preposes and objectives that mention thereof.
- You may publish examples of the complaint, but you will always respect my privacy and keep my personal information confidential.

Name of the complainant:	Husain	Abdulla
Date:	19 th Se	ptember 2014
Signature of the	# Hus	ain Abdulles

Tell +973 17 111 666 | Fac: +973 17 411 000 PO Box 10808 | Mantena | Kingdom of Bahrain eMail: complaint@mbr.org.bb | www.mbr.org.bb

Notes		
Time & Date		
Signature		
	Semirlo.	

General Complaint To The National Institute for Human Rights

Concerning Death Sentences gainst Mohamad Ramadan and Husain Moosa

1. Mohamed Ramadan is a 32-year old Bahraini citizen (ID Number 821100696) born on 4 November 1982. Husain Moosa is his co-defendant at trial.

Mohamed Ramadan

- 2. On 20 March 2013 around 1:30 A.M., two Bahraini security officers, accompanied by the vice manager, approached Mohamed at the airport where he worked. The officers informed Mohamed that they were from preventative security and that he needed to go with them. They handcuffed him and transported him to the Criminal Investigative (CID) building. When Mohamed did not return home, his family began searching for him. Airport officials and CID officers denied knowing Mohamed's whereabouts. After four days, Mohamed's parents filed complaints with the NIHR and Ombudsman. That day, they received a call from Mohamed saying that he was at the CID building.
- 3. Security officers immediately began insulting Mohamed upon transport to CID. They insulted Mohamed, his family and his religion. They blindfolded him and brought him to a cold room. They handed him a phone and Mohamed spoke to someone who threatened him saying, that if he did not confess to being a traitor he would be hurt.
- 4. The officers took Mohamed to another room and began torturing him. They beat, slapped and kicked him all over his body, focusing on his head and ears. They verbally insulted him, his family and his religion. They called him a traitor and accused him of killing an officer. When Mohamed denied these accusations, they beat him more violently. The torture continued for four days.
- 5. Mohamad finally agreed to confess because he wanted the torture to end. He said that he would sign or confess to anything but the officers refused to tell him what to say. Instead, they continued to torture him until he correctly fabricated the confession they wanted. After four days, Mohamed received another phone call from the same person to whom he had spoken to before. This person admitted that the government knew that Mohamed was innocent but that his participation in marches and other activities made him a traitor. The government wanted to create a serious case and charge Mohamed as punishment.
- 6. Security officers brought Mohamad to the public prosecutor's office. The public prosecutor asked Mohamad to tell the judge his story. Mohamed responded by asking if the judge wanted the real story or the fake one. The judge became very angry and removed Mohamed to a different courtroom with a different judge. Mohamed told this judge the truth and told him that he had been forced to sign a false confession.
- 7. After his investigation, security forces brought Mohamed to Asri Prison and then to Riffa Police Station. They detained him at Riffa Prison for 13 days. The security officers held Mohamed in solitary confinement. Security officers with Syrian and Jordanian accents blindfolded and tortured him. They tied his body with double belts, handcuffed him, and forced him to listen to the sound of other prisoners being tortured. They also brought him to a government march where protesters demanded revenge and execution of political opposition.

8. After 10 days, the officers began treating Mohamed differently and gave him chocolate and food. They took him to see a coroner. The coroner asked about the marks of torture on Mohamed's legs but Mohamed lied and said the marks were from falling out of bed. During Mohamed's detention in Riffa Prison, security officers refused to allow Mohamed to make phone calls or have visitors.

Husain Moosa

9. The government arrested Husain Ali Moosa in February 2014, where Moosa states that security officers subjected him to torture until he confessed to carrying out a bombing attack. According to Moosa, government agents hung him from the ceiling for three days and took turns beating him with police batons. He additionally states that they threatened to harm his relatives, on several occasions claiming that they would rape his sisters. Moosa confessed as a result of the torture, but later recanted his confession in front of the public prosecutor. After he recanted, security forces tortured him further.

Trial and Conviction

10. The public prosecution charged Mohamed and Moosa with attempted murder and the so-called "Al-Dair Explosion." It is unclear where these charges originated. Mohamed's family has asked the court about Mohamed's case but the court files are empty. Although Mohamed raised the issues of his torture at trial, the judge ignored his allegations. Upon conclusion of the trial, the court convicted Mohamed and Moosa of the charges against them and sentenced them to death. Mohamed and Husain both appealed the decision, but the Court of Cassation denied their final appeal on Monday, 20 November 2015 despite their credible allegations of torture.

INFORMATION CONCERNING THE PREPARER OF THIS COMPLAINT

11. This statement was prepared and submitted by R. James Suzano, J.D., the Acting Director of Advocacy and Legal Affairs for Americans for Democracy and Human Rights in Bahrain (ADHRB). We confirm that we have the victims' consent to file this complaint. The preparer of this document may be reached at 1001 Connecticut Ave NW Suite 205, Washington, DC, 20036, or by phone at +1 (202) 621-6141 x106.