

**FINAL NARRATIVE REPORT 2017**  
**RCT/EMPATHY**



**Enhancing Sustainability of Holistic Services for  
War affected and Ill – Treatment Victims in  
Georgia**

**Tbilisi 2018**

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## ***List of acronyms used in the report***

**RCT/EMPATHY – The Rehabilitation Centre for Victims of Torture “EMPATHY”**  
**FAVL – Foundation against Violation of Law (Armenia)**  
**CFFI – NGO – Citizen’s for Freedom International**  
**CIC – Crisis Centre of the Women’s Association (Abkhazia/Georgia)**  
**CVT – Centre for Victims of Torture**  
**PHR – Physicians for Human Rights**  
**PRI – Penal Reform International**  
**Tn – Total Number**  
**IDP – Internally Displaced Persons**  
**E – Average**  
**F – Frequency**  
**UN CAT – UN Convention against Torture and other Cruel Inhuman or Degrading Treatment or Punishment**  
**WMA – World Medical Association**  
**MoJ – Ministry of Justice**  
**MoH – Ministry of labor, Health and Social Welfare**  
**MoC – Ministry of Corrections**  
**IP – Istanbul Protocol – UN Manual on Effective Investigation and Documentation of Torture and other Cruel Inhuman or Degrading Treatment or Punishment**  
**PTSD – Post – traumatic Stress Disorder**  
**ICD – 10 – International Classification of Diseases (10<sup>th</sup> revision)**  
**CPC – Criminal Procedural Code**  
**CC – Criminal Code of Georgia**  
**BCT – Black Sea Trust for Regional Cooperation**  
**LTR – Long term rehabilitation**  
**ShTR – Short Term Rehabilitation**  
**CI – Crisis Intervention**  
**FD – Forensic Department**  
**TRD – Treatment and Rehabilitation Department**  
**LD – Legal Department**  
**AS – Art Studio**  
**ICC – International Criminal Court**  
**ECtHR – European Court of Human Rights**  
**HTQ – Harvard Trauma Questionnaire (corrected)**  
**HDRS – Hamilton Depression Rating Scale**  
**BDI – Beck Depression Inventory**  
**MMPI – Minnesota Multi - Profile Personality Inventory**  
**GBV-Gender Based Violation**

## 1. Description

- 1.1. Name of Coordinator of the grant contract: Mariam Jishkariani
- 1.2. Name and title of the contact Person: Mariam Jishkariani
- 1.3. Name of beneficiary(ies) and affiliated entity(ies) in the Action: The International Psycho – Rehabilitation Centre for Victims of Torture, Violence and Pronounced Stress Impact “EMPATHY” (RCT/EMPATHY, Georgia)
- 1.4. Title of the Action: Enhancing Sustainability of Holistic Services for War affected and Ill – Treatment Victims in Georgia
- 1.5. Contract number: **ENI/2016/382-374**
- 1.6. Start date and end date of the Action: **January 1, 2017 – December 31, 2017**
- 1.7. Target country(ies) or region(s): **Georgia, Tbilisi and surrounding areas, Gori and boarder areas of so called South Ossetia, Zugdidi and its regions, Kutaisi and Batumi, including penal institutions and collective living villages of IDPs**
- 1.8. **Final beneficiaries &/or target groups<sup>1</sup> (if different) (including numbers of women and men):**

Target groups for core activities were as follows: torture, ill treatment and violence victims, especially IDPs 2008 Russia – Georgia war victims and civilians still living on the occupied territories of Georgia/Abkhazia and para-military villages of South Ossetia; as well as former prisoners and prisoners with experience of torture or/and ill treatment, victims of political violence, etc. Special priority was given to the women and children having experienced any forms of violence;

Data collection and statistical analysis were provided according to SPSS Programme. Total number of target beneficiaries was n = 614, among them direct target group for an intervention made up n = 514, other n = 100 were consulted. Among t n: n = 340, on about 55 % were women, n = 257 men (about 42 %) and n = 17 children (about 3 %).

**Table 1:**

Count		Direct/Indirect * Client - Gender Cross tabulation				
		Client - Gender				Total
		male	female	Male child	Female child	
Direct/Indirect	Direct	240	257	7	10	514
	Indirect	17	83	0	0	100
Total		257	340	7	10	614

Another target group were health care professionals, legal experts, women leaders and administrative staff representatives from different kinds of NGOs, t n = 57 persons, among them n = 40 (70 %) women and n = 17

<sup>1</sup> “Target groups” are the groups/entities who will be directly positively affected by the project at the Project Purpose level, and “final beneficiaries” are those who will benefit from the project in the long term at the level of the society or sector at large.

(30 %) men. Among them n = 26 were health care professionals, n = 13 – legal experts, organizational development staff 11 persons, human rights activists and women leaders n = 7 persons.

Age categories for all target groups (t n = 614):

**Table 2:**

		Client-Age Group			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0-15	17	2.8	2.8	2.8
	16-25	7	1.1	1.1	3.9
	26-35	127	20.7	20.7	24.6
	36-45	94	15.3	15.3	39.9
	46-55	230	37.5	37.5	77.4
	56-65	81	13.2	13.2	90.6
	over 65	58	9.4	9.4	100.0
	Total	614	100.0	100.0	

Average age were E = 50 years old, with sd = 17.

**Table 3:**

		Ethnicity			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Georgian	584	95.1	95.1	95.1
	Chechen	16	2.6	2.6	97.7
	Ossetian	4	.7	.7	98.4
	Ukrainian	1	.2	.2	98.5
	Ingush	2	.3	.3	98.9
	Polish	1	.2	.2	99.0
	Armenian	5	.8	.8	99.8
	Greek	1	.2	.2	100.0
	Total	614	100.0	100.0	

**Table 4: Citizenship**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Georgian	601	97.9	97.9	97.9
	Russian	12	2.0	2.0	99.8
	polish	1	.2	.2	100.0
	Total	614	100.0	100.0	

**1.9. Country (ies) in which the activities take place (if different from 1.7):** Activities were provided in Georgia, including the occupied region of Abkhazia, as well as in North Caucasian Region (Russian Federation): Chechnya, Dagestan and Ingush Republic, where mainly was provided primary identification of victims and follow up interventions and capacity building of Women Leaders according to the Grant received from BST.

## **2. Assessment of Implementation of Action Activities**

### **2.1. Executive summary of the Action**

**Overall objectives** of this programme were as follows: to enhance sustainability of the NGO – The Rehabilitation Centre for Victims of Torture, Violence and Pronounced Stress Impact “Empathy” (RCT/EMPATHY, Georgia); to support capacity building of smaller CSOs and assist governmental agencies to implement EU/Georgia Associate Agreement. **Specific objectives** focused on following: (1) achieve sustainability of core activities of the RCT/EMPATHY. (2) Provide training/educational programme for smaller CSOs and professionals working in similar and cross related fields. (3) Increase public awareness and prevention activities for improvement of legislative frameworks in accordance with EU/Georgia Agreement on Human Rights.

**4. Direct target Groups that underwent interventions at the RCT/EMPATHY were:**

**Total n 614 clients applied to the RCT/EMPATHY and the partner organization located in Abkhazia – Crisis Intervention Centre during the project live period, in 2017.**

**Table 5:**

Target Group	Prisoners	Ex - Prisoners	Refugees from Chechnya	New IDP from South Ossetia and 2008 War Victims	Living in Abkhazia	Others (mainly were persons /women leaders from North Caucasian Region (Chechnya, Ingushetia and Dagestan)	Total
Direct Target Group	13	97	5	282	146	71	514
F	0.02	0.16	0.01	0.46	0.24	0.11	1
%	2	16	1	46	24	11	100

## 2.2. Results and Activities

### A. RESULTS

#### Results/Outcomes:

1. The sustainability of the services of the RCT/EMPATHY was achieved by financial support of donor organizations. Services include the following departments: Medical Treatment and Rehabilitation Department (TRD); Crisis Intervention and Forensic Unit (CID), Legal Department (LD), Art Studio (AS) and Administrative Department with Training/Educational and Research and Evaluation activities. At the same time, the RCT/EMPATHY, in the framework of the Referrals Programme, has partnership with about 24 health care diagnostic agencies in Georgia, with two pharmacology firms and with independent forensic centres (2) “Vector” and “Alternative”

See the organigramme below:



For the achievement of this outcome the following Activity /Clusters were implemented: Activity: (1) Relates to the core services of the RCT/EMPATHY, including the following: 1) Multi-disciplinary treatment and rehabilitation programme, including medical, psycho- social assistance with documentation and long-term rehabilitation (TRD), 2) Crisis Intervention and Forensic Assessment Programme with community interventions, as well as forensic evaluation and short-term interventions (CI and FD); 3) legal assistance programme, including direct support at all levels: National, Regional and International (LD); 4) Work in Art Studio (AS);

2. More about 514 direct beneficiaries' health and psycho – social, legal conditions improved; /Relates of to the Activity/Cluster 1. Services of the RCT/EMPATHY:

The RCT/EMPATHY is a health and legal professional organization that aims: to provide multi-disciplinary rehabilitation for victims of torture and members of their families, for victims with Life Stress Experience, as well as to fight impunity and any violation of fundamental Human Rights.

The Target groups are torture victims according to the UN CAT Article 1 and 16, European Convention of Fundamental Human Rights and Freedoms: Article 3 and 13, and victims of the violation of international humanitarian law, including family members and second generation. T n 514 persons.

The RCT/EMPATHY aims:

- to create a sound foundation for a non – governmental, independent services for survivors of torture and other stress – related victims
- through strengthening and developing links between comprehensive multi-disciplinary rehabilitation services,
- prevention and
- Accountability with strong advocacy and communication strategies.

Services Include:

Long-term rehabilitation that covers average 6 - 24 months medical and psycho – social assistance; as well as 3 months training and therapy in art – studio, long term assistance includes the legal services too.

Also services cover Crisis Intervention and short-term support that includes medical, psychological, social, forensic and legal interventions mainly in high risk settings such are collective living areas of IDPs and penal system as well. Services cover the Hot Line and on Call activities through communication tools.

**List of Services:**

- Medical
- Psychiatric
- Psychotherapy (Individual, Group and Family)
- Art Therapy and art work
- Public – educational group and individual, family therapy
- Physiotherapy, laser therapy and acupuncture
- Counselling
- Community visits
- Referrals
- Financial assistance (support for travel and accommodation for outpatient type treatment for VT)



- Social assistance
- Family – based treatment
- Psychological
- Legal assistance and client advocacy
- The centre is providing independent forensic expertise, medical and psychiatric/psychological, in accordance with Istanbul Protocol.
- “Hot Line” – for immediate response and crisis intervention.
- Training – educational and research programme

### Art Work Sale – Exhibition, Shardeni Str., Tbilisi 2017



**Table: 6: Outcomes/Indicators (Micro Client Centered Level):**

Full report 2017

	<i>Target Group</i>	Prisoners/affected from police	Ex-Prisoners and Probationers	Refuges from Chechnya	IDPs from South Ossetia and 2008 War Victims	Gali Region and Abkhazia including IDPs	Others	Total
A	Check in Direct Groups Total C	12	95	5	235	141	26	514
B	Total N of Assisted Persons (Direct Beneficiaries + Indirect – Members of Community = Family members, Lawyers etc) persons N = (C + N +O)	13	97	5	282	146	71	614
C	Direct Beneficiaries Torture and Inhuman, Degrading Treatment Victims and their family members (Treated in 2017) Total N = (I+M +R +W+BB+EE)	12	95	5	235	141	26	514
D	Torture and Inhuman, Degrading Treatment Victims (Clients from 2016) (D +G+J+P+U+Z +CC) ( among them -5 Strasbourg cases and 1 case from ICC - included in LTR)	6	81	4	119	20	9	239
E	Torture and Inhuman, Degrading Treatment Victims (new Clients in 2017) N =(F+H+K+L+Q+V+AA+DD)	6	14	1	116	121	17	275
F	Torture and Inhuman, Degrading Treatment Victims Long Term Rehab (New Clients in 2017) Total N =	0	9	1	30	34	5	79
G	Total number of long term rehabilitation From 2016 Victims of Torture	0	2	0	0	1	7	10
H	<i>Family Member of VT Long term new in 2017 Rehabilitation Total N =</i>	0	0	0	0	0	0	0
I	Total Number of long- term rehabilitation in 2017 N=(F +G+H)	0	11	1	30	35	12	89

J	Torture and Inhuman, Degrading Treatment Victims (Clients from 2016) short-term rehabilitation ( waiting list of former prisoners)	0	60	0	0	0	0	60
K	Short- Term Rehabilitation and Crisis Intervention in new in 2017 Victims of Torture Total N = (included: waiting list clients TN - 31 and CI clients TN 75)	0	4	0	4	87	11	106
L	Short- term Rehabilitation and Crisis Intervention in 2017 family members Total N = ( included: waiting list clients family members 2008 War victims - TN44 and CI family members TN 38 clients 2008 War victims and 1 forensic expertise client)	0	0	0	82	0	1	83
M	Total Number of Short- term Rehabilitation and Crisis Intervention in 2017 N +(J+K+L)	0	64	0	86	87	12	249
N	<i>Persons only Consulted Community members, Family members, Lawyers etc N = ( included family members consultation 24 persons, 6 only consultations and 4 community meetings in Shavshvebi, TN of consulted community members - 33 persons.</i>	0	0	0	33	0	30	63
O	<i>« Hot Line « Consultations Total N</i>	1	2	0	14	5	15	37
P	<i>Mono Art Therapy Clients from 2016</i>	0	15	4	3	9	2	33
Q	<i>Mono Art Therapy new Clients in 2017</i>	0	0	0	0	0	0	0
R	<i>Mono Art Therapy total Clients in 2017N = (P +Q)</i>	0	15	4	3	9	2	33
S	<i>MDT Art Therapy Clients in 2017 (new clients)</i>	0	0	0	2	0	6	8
T	<i>MDT + Mono Art Therapy Total Clients in 2017 N =(R +S)</i>	0	15	4	5	9	8	41
U	<i>Mono Therapy Psychotherapy Clients from 2016</i>	0	0	0	0	0	0	0
V	<i>Mono Therapy Psychotherapy New Clients in 2017</i>	0	0	0	0	0	0	0

W	<b>Mono Therapy Psychotherapy Total Clients in 2017N = (U +V)</b>	0	0	0	0	0	0	0
X	<b>MDT Therapy + Psychotherapy Clients in 2017</b>	0	3	1	16	26	4	50
Y	<b>Total Psychotherapy in 2017N =(W +X)</b>	0	3	1	16	26	4	50
Z	<b>Double Therapy Art Therapy + Psychotherapy transferred from 2016</b>	0	0	0	0	0	0	0
AA	<b>Double Therapy Art Therapy + Psychotherapy new clients in 2017</b>	0	0	0	0	0	0	0
BB	<b>Double Therapy Art Therapy + Psychotherapy Total clients in 2017 N (Z+AA)</b>	0	0	0	0	0	0	0
CC	<b>Legal Assistance Clients transferred from previous years 2016</b>	6	4	0	116	10	0	136
DD	<b>Legal Assistance new clients in 2017</b>	6	1	0	61	0	0	68
EE	<b>Total Legal Assistance in 2017N =(CC +DD)</b>	12	5	0	177	10	0	204
FF	<b>Domestic legal Cases in 2017</b>	12	5	0	0	1	0	18
GG	<b>ECtHR Cases in 2017</b>	0	0	0	23	9	1	33
HH	<b>ICC Cases in 2017</b>	0	0	0	154	0	0	154
II	<b>Forensic Expertise Reports in 2017</b>	9	9	1	5	29	7	60
JJ	<b>Expert's Consultations in 2017</b>	21	18	3	17	64	12	135
KK	<b>Referrals and Guidance to Sub -Contractor Centres for External Examination and consultations</b>	0	3	1	25	33	15	77
LL	<b>Hospital Treatment</b>	0	0	0	1	3	0	4
MM	<b>Surgery Operations</b>	0	0	0	0	0	0	0
NN	<b>Pharmacology treatment (Somatic Disorders)</b>	0	3	1	24	31	9	68
OO	<b>Psychopharmacology treatment</b>	0	3	1	8	15	6	33
PP	<b>Total Pharmacology treatment</b>	0	3	1	24	32	10	70
QQ	<b>N of Clients Received Travel Fee</b>	0	1	1	30	35	1	68
RR	<b>Lunch Service</b>	0	12	5	73	35	24	149

## Session in Art Studio of the RCT/EMPATHY, Tbilisi



### **Outcome: 3. Capacity of local smaller NGOs or community leaders to manage the actions improved:**

7 organizations located in Georgia, as well as Community Leaders from IDP collective living Centres – 3, and also the capacity of women leaders from North Caucasian Region- 6 persons and Central Asia (Tajikistan and Kirghizstan – 9 persons) that were linked to the action in the framework of networking and collaboration from the previous projects of the RCT/EMPATHY also increased: these were women coordinators from Chechnya, Ingushetia and Dagestan, as well as Torture Victims' Rehabilitation Programmes from Kirghizstan and Tajikistan;

In the framework of training/educational activities the total number of a direct target group that increased their professional and organizational capacity was n = 57 persons, among them 11 persons additionally trained in ToT on issue of the torture documentation, prevention and holistic rehabilitation, with mentoring of cases and legal procedures. These outcomes, concerning Cluster (2), relate to the Training/Educational programme that will be focused on professional and organizational capacity building of the volunteers, small-scale NGOs and community groups and leaders;

Thematic issues for the training sessions were those of Human Rights and Torture, including international and national standards, as well as International Principles of the Documentation and Expertise, investigation of torture and ill treatment cases, considerations for interview and improvement of standards of communication; Additionally, training sessions were focused on professional capacity building with the introduction of guidelines for experts working on multi – disciplinary client-centered approach, also principles of an organizational development, including modules of the evaluation and monitoring procedures, as well as technical issues related to drafting of operational manuals, etc. All programmes and presentations/materials are attached to this report.

**Outcome: 4.** the draft reforms/plan of actions and recommendations issued for state agencies to improve legal

framework and practice in the field of Human Rights, namely prevention and eradication of torture, ill – treatment, health reform in a penal system and other relevant sectors, like domestic violence, migration and IDP issues.

Indicator/ Published Annual report with recommendations, as well as different PR actions and participation in meetings, programme components of the RCT/EMPATHY and ideas copied by the several state agencies and different NGOs.

**This outcome relates to Activity /Cluster 3:**

Cluster (3) related to the prevention activities, including: (1) analysis of the legislation and practice (“Watch Dog” activities, including shadow reporting; (2) Elaboration of recommendations according to the EU/Georgia Agreement and international standards on Human Rights; (3) Public awareness and advocacy activities for the implementation of issued recommendations.

**The following main problems were revealed and recommendations were drafted and presented:**

**Problem analysis:**

**Criminal Justice Reform:**

Lack of Transparency of the Ministry of Corrections, especially on the issue of monitoring and identification of cases of torture and ill - treatment and inefficiency of existing monitoring mechanisms; namely NPM Georgia, creates problems of implementation of the international standards on prevention and documentation of cases of torture and ill treatment in penal system of Georgia and in other close facilities, namely - in police isolators.

Increased “criminal relations” and incidents among prisoners in penal system of Georgia, also creates constraints for prisoners to apply to the investigator bodies in case of torture and ill – treatment that creates environment of impunity as well.

Evaluation of MoC reports, and also NPM reports, revealed cross cutting problems on the issue of healthcare in penal system, as well as in documentation of cases of torture and ill treatment and, finally, on the issue of mental health in prison.

No static reports included in Progress report of the agency; for e.g., how many prisoners with mental/psychological or physical signs of torture or ill treatment were identified in penal system of Georgia in 2017, and how many cases were documented and what were the follow – up results.

At the same time, it should be mentioned that no mechanism for identification of prisoners with severe mental illness existed in penal system of Georgia; thus the category of persons with no ability of self – protection or/and self/advocacy is especially vulnerable.

Problems existed in the orders and regulations of MoC which are violating international standards of medical ethics, as well as those of healthcare in prisons. Unfortunately, all new regulations are directed towards increasing local services and are not following recommendations on transition of prison healthcare to the civilian healthcare system. Many regulations, for e.g. creation of Healthcare Quality Control Department at the MoC Monitoring Department, are not relevant to international standards and contain risks of violation of personal data protection related to the issue of medical care. At the same time, in the MoH Georgia there is quality control department and it is incomprehensible why the separate department at MoC s exists.

Problems exist in Penal Code of Georgia as well – especially, on the issue of using special restrictive equipment for physical restriction of prisoner; like special “Armchairs, Beds with fixation” etc., all this equipment is not relevant to MoH order on restrictive measures for involuntary treatment of persons with mental illness and to the Legal Code on Mental Healthcare. Also it is not clear how this special equipment relates to the issue of mental health services existing in penal system.

At the same time, it should be underlined that problems existed in the field of first time and secondary crime prevention in Georgia. No clear clarification for giving the recommendations for Pardon Commission or/and Early Release mechanisms creates good environment for repeat crimes, especially related to the violence offences and juvenile delinquency.

Finally, no relevant and multi – disciplinary rehabilitation and re – socialization national strategy creates proper environment for increasing criminal offences in Georgia that relates to the issue of security on the whole throughout the country.

### **General Problems on Community Healthcare Sector**

Problems revealed at MoH, especially in relation with the vulnerable categories of people such are IDPs, migrants or persons living in para-military and military regions of Georgia.

First of all, it should be mentioned that Community Healthcare Programme of Georgia does not include any specific programme, like the RCT/EMPATHY’s holistic programme for victims of torture, or violence or with any forms of ill treatment, including Gender Based Violence and Domestic Violence.

In general, community healthcare system in Georgia is not relevant to the Healthcare Code of Georgia and international standards on the issue of Right to choose a Health Care Professional or Services. At the same time, the free of charge services even for socially disadvantaged population do not cover essential needs of diagnostic and follow up treatment; free of charge services are not relevant to medical diagnostic guidelines and protocols existing in the country. All those circumstances create problems in getting access to healthcare services.

### **Problems revealed towards the Occupied and Para – Military Regions of Georgia, as well as Related to the Migration and Asylum Procedures**

#### **Russian – Georgian War 2008**



According to the dates of the RCT/EMPATHY, more than 178 persons from para-military region of South Ossetia were kidnapped and arbitrarily detained in the occupied region of South Ossetia. Unfortunately there was not any progress on investigation and follow up actions on this issue from the relevant state authority’s side.

At the same time, according to the dates by the RCT/EMPATHY, there are several kinds of human rights violations in the occupied regions of Georgia, but unfortunately the Strategy of Georgia towards occupied regions does not contain significant issues of cross – relation of security and human rights. No action from the state side was implemented towards increasing security and human rights protection inside and outside occupied regions of Georgia.

The RCT/EMPATHY also has several cases of torture and ill – treatment victims requesting the status from Georgian Ministry of Refugees, but even in appropriate cases it was not granted.

### **IDP Camps after War 2008**



### **10 years follow – up to War 2008 – Creeping occupation**





## **Situation on Torture Documentation, Investigation and Prevention:**

No independent mechanism for investigation of torture existed in the country. Unfortunately, the cases of torture and ill – treatment during several years have been under investigation without any progress. The problems existed in Forensic System of Georgia on the level of legislative regulations and also in practice, especially in documentation of cases of torture and ill – treatment. Human Rights Strategy of Georgia for years 2016 – 2020 includes creation of an independent mechanism, implementation of the Istanbul Protocol and also implementation of the CAT articles on rehabilitation, but no positive remarks could be underlined on the above-mentioned issues. Several programmes, related to the implementation of the international standards of torture as well as healthcare in penal system on mental health reform, were provided in the country with support of the donor agencies, but no relevant progress was observed.

Lack of effectiveness in investigation of cases of torture and insignificant results in persecution of perpetrators also creates unfavorable environment for fighting impunity.

Lack of knowledge of State Forensic Experts on documentation of cases of torture according to IP also creates problems in effective investigation of cases of torture and ill treatment.

## **Recommendations:**

- Taking into consideration these circumstances, the RCT/EMPATHY fully supported PRI's initiative on creation of an independent monitoring mechanism for prison monitoring. In addition, the RCT/EMPATHY recommends the package of immediate changes in the legislation, namely alterations related to forensic evaluation and procedures of investigation in the CPC of Georgia.
- Changes in Code of Imprisonment of Georgia related to special equipment that could be used in prison by Special Forces and also administrative punishment in cases of self – harm also considers revision.
- Changes should be made in State Community Healthcare Programme, which is not relevant to international standards of Medical Ethics, in connection with the freedom of choice of a health care professional, as well as confidentiality. No independent evaluation and monitoring system existed on this issue as well.
- Changes have to be made according to the CAT in the CC of Georgia, especially in relation to the Article 1, 10, 11, 12, 14, 16 which also have to be reflected in several cross cutting legal codes (bills) and regulations.
- Prison Health Care System, as well as rehabilitation and re – socialization programmes for offenders in Georgia should move to de – militarized and civilianized direction versus existing plan of reforms and implemented projects.
- The state has to develop a comprehensive security and human rights strategy towards occupied and para-occupied regions of Georgia.

## ***B. ACTIVITIES***

**The Activities focused on the following items:** Cluster (1) Relates to the Core services of the RCT/EMPATHY, including: 1) Multi-disciplinary treatment and rehabilitation programme, including medical, psycho- social assistance with documentation and long-term rehabilitation (TRD), 2) Crisis Intervention and Forensic Assessment Programme with community interventions, as well as forensic evaluation and short-term interventions (CI and FD); 3) legal assistance

programme, including direct support at all levels: National, Regional and International (LD); 4) Work in Art Studio (AS);

**Table 7 above clearly shows implementation of all activities related to the Cluster 1. In more detail:**

**Type of Intervention:**

**Table 7: T n = 514 direct beneficiaries:**

<b>Multi-Disciplinary Program activities</b>	<b>N of clients</b>	<b>Indicators</b>
<b>6.1.Long-Term Rehabilitation (includes medical and mental/psychological assistance)</b>	89	LT Medical Files
<b>6.2.Crisis Intervention</b>	249	CI files + ICC + Medical Consultation in Gali Crisis Centre
<b>6.3.Forensic evaluation, among them 4 cases in Kutaisi Prison, 3 cases identified in Batumi Police Station, 1 Prison Hospital Tbilisi</b>	60	Forensic Evaluation Reports and short reports according to the Form 100
<b>6.4.Art therapy /Occupational Therapy</b>	41	Art therapy Sessions Files and registration Journals
<b>6.5.Short-term legal assistance</b>	8	Legal Consultations included in Medical Files
<b>6.6.Long-term legal assistance</b>	196	Appeals to the Domestic Investigator Bodies, ICC Applications handed, ECtHR communications
<b>6.7.First Time intervention and Community Visits</b>	244	Firs Time identification Forms, Registration Journal
<b>7. Referrals program /Diagnostic measures provided</b>	77 (1906 type/sessions)	Referrals Forms
<b>7.1.Laboratory methods</b>	77	Documentation Received from Sub Contractor Clinics
<b>7.2.Instrumentary</b>	77	Documentation Received from Sub Contractor Clinics
<b>7.3.Paid clinical consultations</b>	77	Documentation Received from Sub Contractor Clinics
<b>7.1.1.Staff intervention</b>	614	Documentation Existed at the RCT/EMPATHY
<b>7.1.2.Medical consultation</b>	303	Medical Consultations included in the LT Medical Files, First identification Forms, Medical Records from Gali Crisis centre
<b>7.1.3.Psychological evaluation</b>	138	Psychological testing and re - evaluation reports
<b>7.1.4.Social worker support</b>	77	Social Workers Forms
<b>8.1. Outpatient type /Treatment and Rehabilitation</b>	338	RCT/EMPATHY

<b>8.2.Outpatient type medical somatic</b>	107	Included in Medical Files
<b>8.3.Outpatient type medical neurological</b>	108	Included in Medical Files
<b>8.4.Outpatient type medical psychiatry</b>	233	Included in Medical Files
<b>8.5.Other referred medical consultations</b>	135	Included in Medical Files
<b>8.6.Psychotherapy</b>	50	Filled Psychotherapy Forms
<b>8.7.Laser therapy and acupuncture</b>	15	Sessions completed
<b>8.8.Pharmacology treatment: somatic, neurological</b>	68	Registration Journals and Signed by the clients Prescription/Rehabilitation Forms
<b>8.9.Psycho – pharmacology treatment</b>	33	Registration Journals and Signed by the clients Prescription/Rehabilitation Forms
<b>8.10.In patient treatment/Surgery Operation</b>	5	Medical Forms N 100/a
<b>8.11. Lunch service and travel fees received, clients from the regions</b>	149	Special forms filled
<b>8.12. Travel outreaches</b>	68	Special forms filed

## Year 2017

**Table 8: Outdoor visits, relates mainly with experts' and lawyers' visits on ongoing cases:**

Places	Purpose of Visit	N of Clients	N of Days
Tbilisi City Court	Expert's Testimony	1	3
#8 prison institution	visit with client	4	4
Public service hall	Submit the letter	1	1
#5 prison institution	visit with client	1	1
#18 prison institution	visit with client	4	4
Psychiatry clinic	Patient appointment	2	2
Shavshvebi IDP Collective Camps	Monitoring Visit	17	4
Chief Prosecutor's Office	Expert's Testimony	4	4
Archives of Tbilisi City Court	Preparation of Response for ECtHR	2	2
Ombudsman's office	Request for Documentation	1	1
Shida Kartli MIA Department	Case under investigation	1	1
Todua Clinic	Request of Medical Documentation	2	2
<b>Total</b>		<b>39</b>	<b>32</b>

Cluster (2) relates to Training/Educational programme that focused on professional and organizational capacity building of the volunteers, small scale NGOs and community groups and leaders;

Hold training Sessions:

I Training session 28 persons from different agencies listed below were trained.

II Training session: n = 29

ToT n = 11

**Table 9: Framework of Trainings**

Training	Thematic Issues/Modules	Location	N of Health Care Professionals	N of Legal Experts and Human Rights Defenders	Duration/Dates
I Phase: 1 Session first Training	RCT/EMPATHY Workshops on Istanbul Protocol, Holistic Rehabilitation for Victims of Torture and Violence and Fight Impunity	Tbilisi, Georgia, venue: RCT/EMPATHY Office	13	7 Legal Experts and 3 Human Rights Defenders and 5 persons – organizational development/administrative staff	4 days June 26, Strategy of 2017 – 2020 June 27, International and National Experts/Partners workshop/meeting June 28, 29, 2-17: Workshop on Documentation of Torture and Prevention Mechanisms: Torture, Holistic Rehabilitation and the Istanbul Protocol For High Quality Professionals with experience of international training in Istanbul Protocol (Years 2013 – 2016 hold in Tbilisi)
I Phase: 2	Capacity Building of Partners Working in the Field of Human Rights, Health and Security For Doctors, social workers, Psychologists and Human Rights Activists from other NGO's, working in torture rehabilitation programs.	Tbilisi, Centre Empathy Office	13	6 Legal Experts and 6 Human Rights Defenders and 4 persons – organizational development/administrative staff	3 Days  September 19 - 21, 2017
II Phase ToT	The Istanbul	Tbilisi, Georgia,	9	2 Legal Experts	4 days

	Protocol – Instrument for Fight Impunity Programme The training of trainers	RCT/EMPATHY Office			December 4-7, 2017
Additional Workshops					
Master class – Workshop	On strategic litigation of torture cases and IP	RCT/EMPATHY Office		15 Legal experts from Armenia (8 men + 7 women)	June 26, 2017 (3 hours)
Follow Up developments					
Workshops in Chechnya	Capacity Building Women Leaders (On Human Rights, including problems of ill treatment and GBV)	Chechnya, Grozny		75 persons (23 men and 52 women)	14, 16, November, 2017 21, 27 November, 2017 7, 14, 22 December, 2017

#### The Regional Workshop at the RCT/EMPATHY, September 2017



### **Participant partner agencies:**

1. NGO “Citizens for Freedom International” (CFFI) – Established in Tbilisi in 2016, operates in South and North Caucasian regions and countries aiming mainly women and youth problem analysis and programmes for psycho – social rehabilitation and human rights protection. /Affiliated entity of the RCT/EMPATHY
2. Crisis intervention Centre of Women’s Association Abkhazia/Georgia, located and operating in the occupied region of Abkhazia in Gali Region, Village Nabakevi, based on Out – Patient Clinic/ Partner of the RCT/EMPATHY since 2003.
3. LTD “Your Clinic” – Sub Contractor Health Care Centre of the RCT/EMPATHY
4. NGO Institute of Democracy and Safe Development (IDSD), partner of the RCT/EMPATHY since its establishment, working in Tbilisi and regions of Georgia, established in 2014; its mission relates to the issue of Human Rights monitoring, especially to the monitoring of implementation of Human Rights plan of action in Georgia in connection with Criminal Justice Reform; a member organization of Criminal Justice Reform Coalition.
5. Medical College and newly established NGO located in Sokhumi
6. NGO “Atlantic Council of Georgia” member of Euro – Atlantic Coalition of NGOs, working in the field of Security and Human Rights.
7. NGO “Georgian Institute for State Modernization” (GISM) that is the Youth NGO working in the field of security and human rights, as well as youth problems.

### **Other NGOs participating in the training sessions from other Countries:**

1. Tajikistan – Anti – Torture Coalition – Torture Victims Rehabilitation Programme
2. Kirghizstan – Anti – Torture Coalition – Torture Victims Rehabilitation Programme
3. NGO “FAVL” (Armenia) – Partner of the RCT/EMPATHY in the framework of Caucasian Anti – Torture Network
4. NGO “Union of Chechen Women” – from Chechnya (Russian Federation)

International Trainer/Experts participated from RCT/EMPATHY and Forensic Doctor’s Association of Georgia and also experts of IRCT IFEG, WPA Torture Section, as well as NGO “Human Rights Priority” - all of them have been long-term partners of the RCT/EMPATHY.

## Experts meeting from Caucasian Region and Central Asia on June 26 – UN International Day in Support of Victims of Torture, Tbilisi, 2017



**Cluster (3) related to the prevention activities, including: (1) analysis of the legislation and practice (“Watch Dog” activities, including shadow reporting; (2) Elaboration of recommendations according to the EU/Georgia Agreement and international standards on Human Rights; (3) Public awareness and advocacy activities for the implementation of issued recommendations.**

Implemented activities: On June 26 – 27, 2017 the Regional Roundtable Meeting of Partner agencies and experts working in the field of documentation and rehabilitation of victims of torture and ill – treatment was held at RCT/EMPATHY Office; the strategy and action plan for the development of a new multi – profile coalition working in the fields of torture and ill – treatment and fight Impunity were elaborated. Experts were present from partner agencies of the RCT/EMPATHY from 11 NGOs, from Georgia and Armenia as well as experts from Kirghizstan and Tajikistan together with the ones from Russian Federation (Chechnya) participated in this meeting. Analysis of the following legal frameworks was presented: Code on Mental Healthcare, Community Healthcare Programme, CPC, CC On Torture and Forensic Evaluation, Code of Imprisonment; analysis was provided on Health Care Organizational Aspects in Penal System as well. Issued main recommendations were presented at Roundtable meetings organized by the partner NGOs and MoC. A master class workshop was held for Armenian lawyers (15 persons) visiting Empathy for exchange of experience on strategic case litigations with coordination of OSI Armenia.

### **2.3. Problems of Sustainability**

The problem of torture, ill treatment was not highlighted in the EU/Country based Human Rights Dialogue which creates difficulties for sustainability of the action and Centre that ongoing clients transferred in 2018 are n = 431, ICC Cases n = 154 and ECtHR cases – n = 32. Also the centre keeps the archive on more than 5 000 clients, among them different kinds of clients who from time to time have applied for copies of medical and legal documentation for medical, social and legal circumstances.

**Table: 10: Movement of Patients**

		status 1			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ongoing	431	70.2	70.2	70.2
	Discharged	183	29.8	29.8	100.0
	Total	614	100.0	100.0	

#### **2.4. Cross-cutting issues such as promotion of human rights, gender equality, democracy, good governance, children’s rights and indigenous peoples, environmental sustainability and combating HIV/AIDS**

Action was directly focused on the Issue of Human Rights: 1 case was won in European Court of Human Rights according to the Article 3 violation of the EU Convention on Human Rights; a beneficiary received from the Government of Georgia 28 000 EUR, 1 case under violation of article 8 of the EU Convention on Human Rights is under communication; In one local court case, according to Article 144<sup>1</sup> (Torture) of CC Georgia, the main evidence was the RCT/EMPATHY Medical Report decision, issued in 2017 and according to the Civil Court, the client received 80 000 GEL. In one case the Prosecutor’s office made re – investigation according to the ECHR Decision 2013 and 3 perpetrators were arrested. In one case of the RCT/EMPATHY Criminal Court of Georgia made decision according to the Article 144’ (Torture) of CC of Georgia. Total number of cases of IDPs and war affected population submitted and ongoing in European Court of Human Rights is n = 27 cases on 32 person and 124 applications are submitted to the ICC Prosecutor’s Office and to the Victims Representation Office.

Gender Equality and Gender Based Violence: The RCT/EMPATHY closely collaborates with the Network against Violence in Georgia and clients transferred from this network also underwent rehabilitation and diagnostic at the RCT/EMPATHY; the GBV stress related events are listed in the questionnaires of the RCT/EMPATHY, also specific medical services were offered to women victims. Gender specifications were also mentioned in reporting forms and statistical reports.

The RCT/EMPATHY participated in the actions related with Democracy; for e.g., Civil Movement against changes in Constitution, as well as NGO actions in support of Media Freedom, in relation with Rustavi 2 events – the RCT/EMPATHY, together with Georgian Bar Association, submitted additional pieces of evidence to ECHR in support of using of Rule 39 of the Court.

The RCT/EMPATHY works on specific issues of Children Delinquency, as well as with ethnic minorities in the occupied Region of Abkhazia and victims of ongoing occupation nearby the occupied region of South Ossetia.

The agency has signed several protest letters submitted through East European Georgian Platform on environment protection issues.

For prevention and timely identification of cases with HIV/AIDS in the standard laboratory examination of beneficiaries of the RCT/EMPATHY special testing is included.

#### **2.5. Monitored and Evaluation**

**Internal evaluation and monitoring** system had been established at the RCT/EMPATHY, which includes the following: Everyday Morning MDT meetings with the evaluation and coordination of a plan of actions; as well as monthly performance plans with reporting are in use at the RCT/EMPATHY, together with time sheets. Under



the programme, an evaluation officer had been dedicated as a special staff member, responsible for data collection and filling of data base, as well as for statistical analysis provided according to the SPSS and DFI /IRCT Data Base System.

At the centre several forms and rules for filling in documentation existed and all that was described in Professional Procedural Manual. On internal evaluation the Director, Supervisors, Financial Manager, Office Manager and Project Manager participated together with the evaluation officer.

Evaluation procedures for client-centered long-term rehabilitation project includes the following: Psychological testing and re – testing after discharge using similar test batteries, as well as client subjective evaluation questionnaires (feedback) are in use and are filled in during the discharge, re – evaluation is also provided by using of medical assessment and re – assessment methods, such as doctor’s consultations, clinical and para – clinical examinations.

### Results of Evaluation of Direct Target Group n = 514

According to the data analysis (Table 14), 31 % of 514 experienced physical torture which, in fact, contains psychological torture as well; 18 % of 514 declared only psychological torture and ill treatment experience; in addition n = 118 persons (23 % of 514) declared about inadequate medical care and documentation in penal institutions; 76 % of 514 were with the experience of war traumas followed by post war stressors, 30 % - with the experience of Post war traumas, 2 % - with the experience of rape during military conflicts, 17 % - with the experience of GBV. Frequency of facts per person was about f = 5 which means that on average 5 facts of traumas and stressful events were experienced per person, 3 types of traumatic events per person were also identified. All this data analysis clearly shows the highest vulnerability of target groups having applied to the RCT/EMPATHY for treatment and rehabilitation.

**Table 11: Traumatic Stress Events (t n = 514 – Direct Target Group)**

Traumatic events	Prisoners	Prisoners (t n = 12)	N of facts – Ex - prisoners	N of Persons – Ex - prisoners (t n = 95)	IDPs from SO and Living in PMZ	IDPs from SO and Living in PM (t n = 235)	MZV from Abkhazia	MZV from Abkhazia (t n = 141)	Others/ Ref. From Chechnya (t n = 29)	Total Facts	Total Persons	F of Fact per person	F of 514	
Physical and Psychological Torture	8	8	910	62	38	37	144	37	13	13	1113	157	0.14	0.31
Only Psychological Torture and Ill Treatment	1	1	40	33	26	26	80	28	24	3	171	91	0.53	0.18
Inadequate Medical Aid in Penal System	14	3	142	79	20	20	3	3	34	13	213	118	0.55	0.23

Problems of Re – socialization and Re – habilitation in Penal System	12	12	79	70	20	20	3	3	13	13	127	118	0.93	0.23
War Traumas	0	0	1	1	440	235	402	141	6	13	849	390	0.46	0.76
Post War Stressors	0	0	1	1	235	235	564	141	11	13	811	390	0.48	0.76
Post War Trauma	0	0	0	0	8	8	289	141	3	3	300	152	0.51	0.30
Experience of GBV	0	0	167	15	525	29	837	31	212	10	1741	85	0.05	0.17
Rape during War and Post War Trauma	0	0	1	1	2	2	3	3	2	2	8	8	1.00	0.02
Total	35	24	1341	262	1314	612	2325	528	318	83	5333	1509	4.65	2.94
Per fact per Person /Type of Trauma/Per Persons	3	2	14	3	6	3	16	4	11	3	10	3		

Consequently, after the effects of traumatic experience, mainly torture, ill treatment, crimes of war and related stressful events, were also multi – profile, including problems of somatic, mental and psychological health, social and legal problems related to rehabilitation and reparation.

According to the data analysis, the following Somatic Disorders ranked by systems were revealed:

**Table 12: Diagnoses by System from Total 514 Direct Target Group**

N	Diagnoses by Systems according to the ICD 10	Prisoners	Ex - Prisoners	Refugees from Chechnya	IDP and new 2008 war victims	Gali Region and Abkhazia including IDPs	Others	Total	F
	Target Groups N	12	20	1	164	131	23	351	0.68
1	Cardio – Vascular System	9	20	1	120	110	12	272	0.77
2	Respiratory System	7	3	0	27	9	3	49	0.14
3	Allergic Disorders	0	0	0	16	12	3	31	0.09
4	Infection Disorders TB Hepatitis C	10	1	0	3	1	1	16	0.05
5	Tumor	1	0	0	3	5	1	10	0.03
6	Abdominal System	12	20	1	116	129	21	299	0.85
7	Uro – Genital System	8	2	1	56	15	2	84	0.24
8	Ocular System	6	3	1	123	85	3	221	0.63

9	Otto - Laryngological	1	4	1	38	43	2	89	0.25
10	Endocrine System	2	1	1	138	84	2	228	0.65
11	Osteo – Muscular System	9	15	1	128	111	5	269	0.77
12	CNS Disorders (Organic (Epilepsy, etc) and functional)	5	12	0	3	2	3	25	0.07
13	Infected Injury	0	0	0	0	0	0	0	0.00
14	Dental System Problems	8	17	1	95	97	3	221	0.63
15	Dermato – Venerology Disorders	0	2	1	14	16	2	35	0.10
16	Colagenosis	0	1	0	1	0	0	2	0.01
17	Genetic Disorders	0	0	0	0	0	1	1	0.00
18	Blood System disorders	0	1	1	4	5	1	12	0.03
	Total n of Diagnosis	78	102	10	885	724	65	1864	5.31
	Diagnosis Per Person								5.31

According to table 12, on average 5 diagnoses per person were identified among total 351 persons with somatic disorders, which represents 68 % of t = 514. Diagnostics was done according to the ICD 10 Revision; also for revealing of consistency with traumatic events –mainly, torture and ill treatment experience - the Istanbul Protocol principles of documentation of cases of torture were used which shows Cause – Effect Relations. Direct relation with a traumatic event - mainly physical methods of torture - was revealed in 36 % of t = 351; Indirect after – effects were revealed in about 49 % of diagnoses; in 15 %, due to several circumstances related to the long period being passed from traumatic event – it was impossible to identify consistency between traumatic experience and outcome.

**Table 13: Consistency between trauma and outcome: Cause – Effect Relation among 351 p.**

N	Somatic Disorders and relations with torture	Total	Ex-prisoners and	Total Ref from	IDPs from	Total Gali	Others	Total	F
1	Direct physical outcomes of torture are	41	50	3	310	239	23	666	0.357
2	Exacerbation of chronic diseases	28	31	4	458	362	34	917	0.491
3	Is not related to torture or is difficult to define cause and effect relations	9	21	3	117	123	8	281	0.150
	Total	78	102	10	885	724	65	1864	1

Data analysis also revealed mental and psychological after – effects of torture, ill treatment, war crimes and other related stressful effects; high traumatization of victims has become the reason of dual diagnoses in 34 % of cases of t n = 514. In 6 % there were revealed additional drug addiction problems.

**Table 14: Mental and Psychological Problems among Total n = 514 Persons**

By main categories (according to the ICD - 10, chapters F and Z) Disorders	N	F
PTSD	26	0.0506
PTSD with other disorders	177	0.3444
Adjustment, stress related and neurotic disorders	127	0.2471
Personality Disorders	2	0.0138
Mood Disorders	23	0.0447
Psychosis	7	0.0136
Mental Retardation	5	0.0097
Dementia	2	0.0039
Psychological problems	145	0.2821
Total number of adults	514	1.0099
Drug Addiction problems	32	0.0623

According to the data analysis, psychological testing was provided in t n = 118 cases. The following test batteries were used: Harvard Trauma Questionnaire (Mollica et all) (HTQ), PTSD (Post Traumatic Stress Disorder) assessment scale (Watson et all), PTSD Mississippi Civilian, Bass Durkey Aggression Rating Scale, Hamilton Depression Rating Scale (HDRS), Back Depression Inventory (BDI), Sheehan Anxiety Rating Scale (ShARS), MMPI (Minnesota Multi- profile Inventory, Short (71) version).

In all target beneficiaries there were revealed after effects of traumatic stress, being identified on high level of PTSD symptoms followed by depression and anxiety in cases of victims of war crimes living in military regions and para-military conflict zones; The changes in personality profile were detected mostly among persons having experienced imprisonment and torture, inadequate medical care in penal system institutions.

**Table 15:**  
**Test Outcomes (In take)**  
 Total N118

Target Group	HTQ I	HTQ II	PTSD	BDI	Hamilton	Sheehan Anxiety Test	Test Mississippi PTSD	Buss-Darkee Aggression Index	Buss-Darkee Hostility Index
MCZ and PMCZ	76.8	84.1	82	20.42	14.3	67.6	110.9	23.62	10.2
IDP/SO	68.96	80.56	78.6	7.8	13.9	52.6	107.27	20.5	8.6
Other (mainly refugees)	49.8	77	77.5	11.5	14	40	99	21	9.5

and other Countries' Citizens									
Former Prisoner	59.2	75	63.5	47	16	30	87	32	10

**Table 16: Test Outcomes follow up:**

Total Retest N44 2017								
Target Group	HTQ II	PTSD	BDI	Hamilton	Sheehan Anxiety Test	Test Mississippi PTSD	Buss-Darkee Aggression Index	Buss-Darkee Hostility Index
MCZ	41.8	5.2	7.53	4.13	20.27	70.6	18.6	7.8
IDP/SO/Other	35.18	0	5.6	2.6	31.6	56.6	18.1	7.8

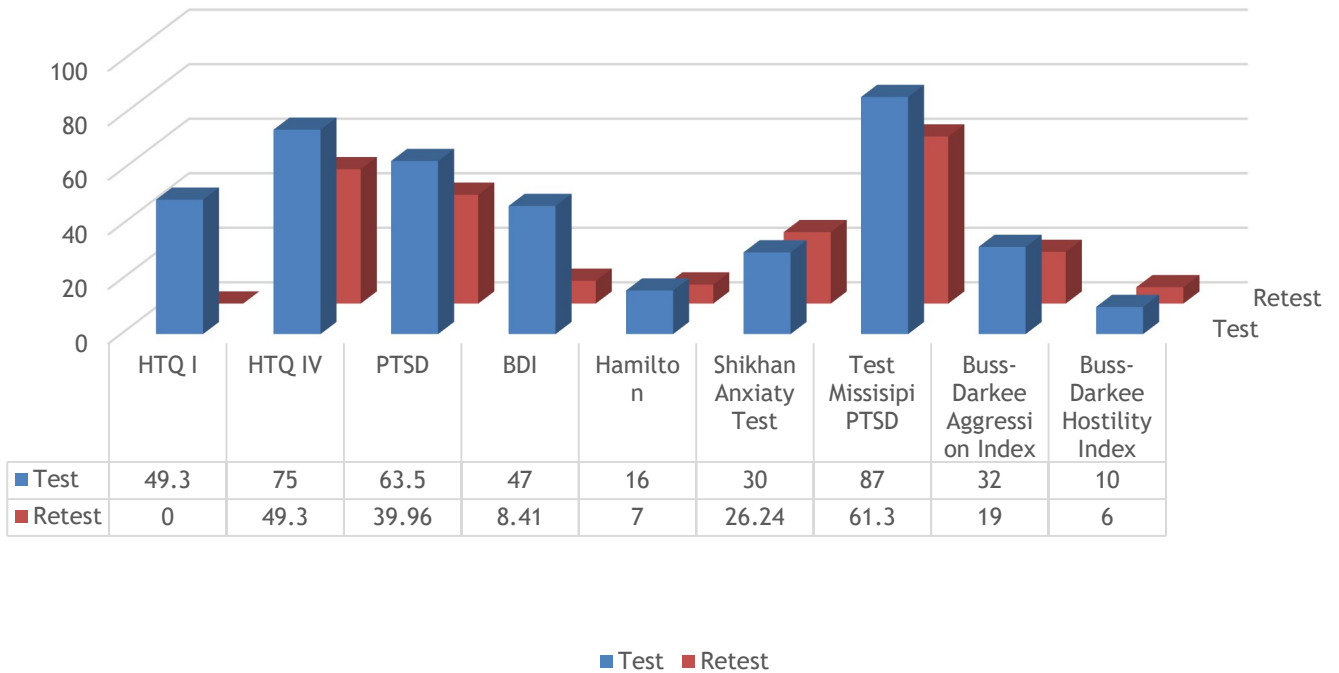
Comparative analysis of data for testing - retesting clearly shows the improvement in psychological health condition which will be followed by increased capability of re – adaptation and re – socialization of persons and families with the experience of traumatic stress.

The dates on testing and re – testing for former prisoners with the experience of ill – treatment in penal institutions were identified separately.

**Table 17: Former Prisoners, Data of Testing/Re – testing:**

Target Group	HTQ I	HTQ II	PTSD	BDI	Hamilton	Sheehan Anxiety Test	Test Mississippi PTSD	Buss-Darkee Aggression Index	Buss-Darkee Hostility Index
Former - Prisoner	59.2	75	63.5	47	16	30	87	32	10
Target Group	Re - test HTQ I	Re - test HTQ IV	Re - test PTSD	Re - test BDI	Re - test Hamilton	Re - test Sheehan Anxiety Test	Re - test Mississippi PTSD	Re - test Buss-Darkee Aggression Index	Re - test Buss-Darkee Hostility Index
Former - Prisoner	0	49.3	39.96	8.41	7	26.24	61.3	19	6

### Former-Prisoner



Assessment and re – assessment also were provided using clinical and para – clinical methods. According to the data analysis, improvement in health condition was observed in total n 89 cases of long-term rehabilitation. Table 18 below clearly shows data analysis results.

**Table 18: Re – assessment of health condition during the treatment and rehabilitation course:**

Achievements on Health Condition					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Recovery of somatic or/and neurological, or/and mental disorder	29	32.6	32.6	32.6
	Stable Improvement of Health Condition; client knows how to manage chronic disorder, requires time- to- time checkup of health condition in outpatient clinic or/and in mental outpatient service	59	66.3	66.3	98.9
	No improvement observed	1	1.1	1.1	100.0
	Total	89	100.0	100.0	

**Table 19: Duration of Course**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	<3 months or 3 months	241	46.9	46.9	46.9
	<6 months or 6 months	49	9.5	9.5	56.4
	<12 months or 12 months	224	43.6	43.6	100.0
	Total			100.0	
Total		514	100.0		

The data analysis on duration of the long-term rehabilitation clearly shows that the majority of war affected population, as well as trauma affected former prisoner or/and persons' living in para – military regions are in need of protection and holistic assistance due to ongoing social – stress circumstances and the lack of adaptation possibilities in the country, which also clearly shows the inefficiency of health and social rehabilitation systems and services in the country.

The similar data were observed during the evaluation of subjective Feedback Questionnaire which has been used by the RCT/EMPATHY for over 15 years.

According to this questionnaire, rating scores are relevant to the following answers:

**Please, evaluate by 4 point's scale the course of Medical and Psycho-Social Rehabilitation Provided by Centre "EMPATHY".**

<b>I am not satisfied</b>	<b>I am satisfied</b>	<b>I am quite satisfied</b>	<b>I am very satisfied</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>

Data analysis according table 20: Evaluation of Satisfaction after discharge n = 44 p., clearly shows a high level of satisfaction among the clients of the RCT/EMPATHY.

**Table 20. Statistic on Satisfaction of Services**

		Retest Type of Assistance /Medical Assistance (Investigations, Treatment)	Retest Type of Assistance /Psychological Assistance (Psychotherapy / Art therapy, Consultations)	Retest Type of Assistance /Social / Legal Assistance	Retest Are you satisfied in general by services and attitudes
N	Valid	44	44	44	44
	Missing	0	0	0	0
Mean		3,8947	3,8947	3,8421	3,8947
Std. Deviation		,31530	,45883	,37463	,31530

**Additional deep analysis reveals gaps and recommendations given by the clients that could be Summarized as following:**

- To offer dental services
- To offer permanent treatment and rehabilitation courses in cases of chronic diseases

**For external evaluation** the Project and Annual financial Audit has been provided by the Contracting Audit Firm. At the same time, statistical data analysis and conclusions/observations were reported and presented on several international professional meetings/conferences:

1. XXXVth International Congress on Law and Mental Health, Charles University, Prague, July 9th – 14th, 2017 (Published on <https://ialmh.org/congress/past-congresses/prague-2017/>)
2. FIRST WORLD CONGRESS OF THE WORLD ASSOCIATION ON DUAL DISORDERS (WADD)&FIFTH INTERNATIONAL CONGRESS OF THE SPANISH SOCIETY ON DUAL DISORDERS (SEPD), Hold, 23 - 26 March, 2017, MADRID – Spain, <http://www.icdd-congress.com/>
3. Participation at the EPA Congress, 1 -4 April, 2017, Florence, Italy
4. World Congress of Psychiatry, 8-12 October, 2017, Berlin, <http://www.wpaberlin2017.com/>
5. Participation at the European Network of Rehabilitation Centres for Survivors of Torture’, 16 th Annual Meeting, Hold in 12 – 14, November, 2017, Bucharest
6. Istanbul Protocol Supplement Workshop, 2-3 November 2017, Park Inn by Radisson Copenhagen Airport Engevej 171, Copenhagen, DK-2300, the workshop is organized by the HRFT, IRCT, PHR, Redress and the UN anti-torture bodies UNSRT, UN CAT, UN SPT and the UNVFVT. Furthermore, DIGNITY – Danish Institute against Torture



Evaluation separately has been provided on matching funds received from BST, before installments and follow up by the donor agency.

## 2.6. Lessons Learned

During the project period 3 workshops have been conducted, which improved professional and organizational capacity of the networking agencies and beneficiaries; in addition, new proposals were developed and a plan for the improvement of professional and organizational development and capacity of the RCT/EMPATHY was elaborated, as a new strategy of the agency; at the same time, “gaps” in the country and region, strength and weakness analyses were highlighted, which will also be incorporated in the future activities and programmes of the RCT/EMPATHY. Lessons learned: analyses of research products were published and presented on several international events/conferences:

1. MULTI DIAGNOSES AMONG WAR AFFECTED POPULATION IN GEORGIA, M.Jishkariani<sup>1,2</sup>, T.Bokuchava<sup>1</sup>, K. Mikadze<sup>1</sup>, G.Berulava<sup>1,2</sup>, E.Kikvadze<sup>1</sup>

1. Psycho – Rehabilitation Centre “EMPATHY” (RCT/EMPATHY), Tbilisi, Georgia

2. State Medical University, Tbilisi, Georgia, Presented and Published in Abstract Book: FIRST WORLD CONGRESS OF THE WORLD ASSOCIATION ON DUAL DISORDERS (WADD)

&FIFTH INTERNATIONAL CONGRESS OF THE SPANISH SOCIETY ON DUAL DISORDERS (SEPD), Hold, 23 - 26 March, 2017, MADRID – Spain, <http://www.icdd-congress.com/>

2. Presentation/Abstract: Author, “Stockholm Syndrome Phenomenon among War Affected Population in Georgia”, Presented at the XXXV th International Congress on Law and Mental Health, Charles University, Prague, July 9th – 14th, 2017 (Published on <https://ialmh.org/congress/past-congresses/prague-2017/>)

3. 24th European Congress of Psychiatry (EPA 2016), Madrid, Spain, 12-15 March 2016, Abstract Number: EPA16-1659, Abstract Title: Russian – Georgian War Crimes and its Outcomes, <http://2016.epa-congress.org/>

4. Abstract: Mental Health in Prison and Torture, Author, World Congress of Psychiatry, 8-12 October, Berlin, <http://www.wpaberlin2017.com/>

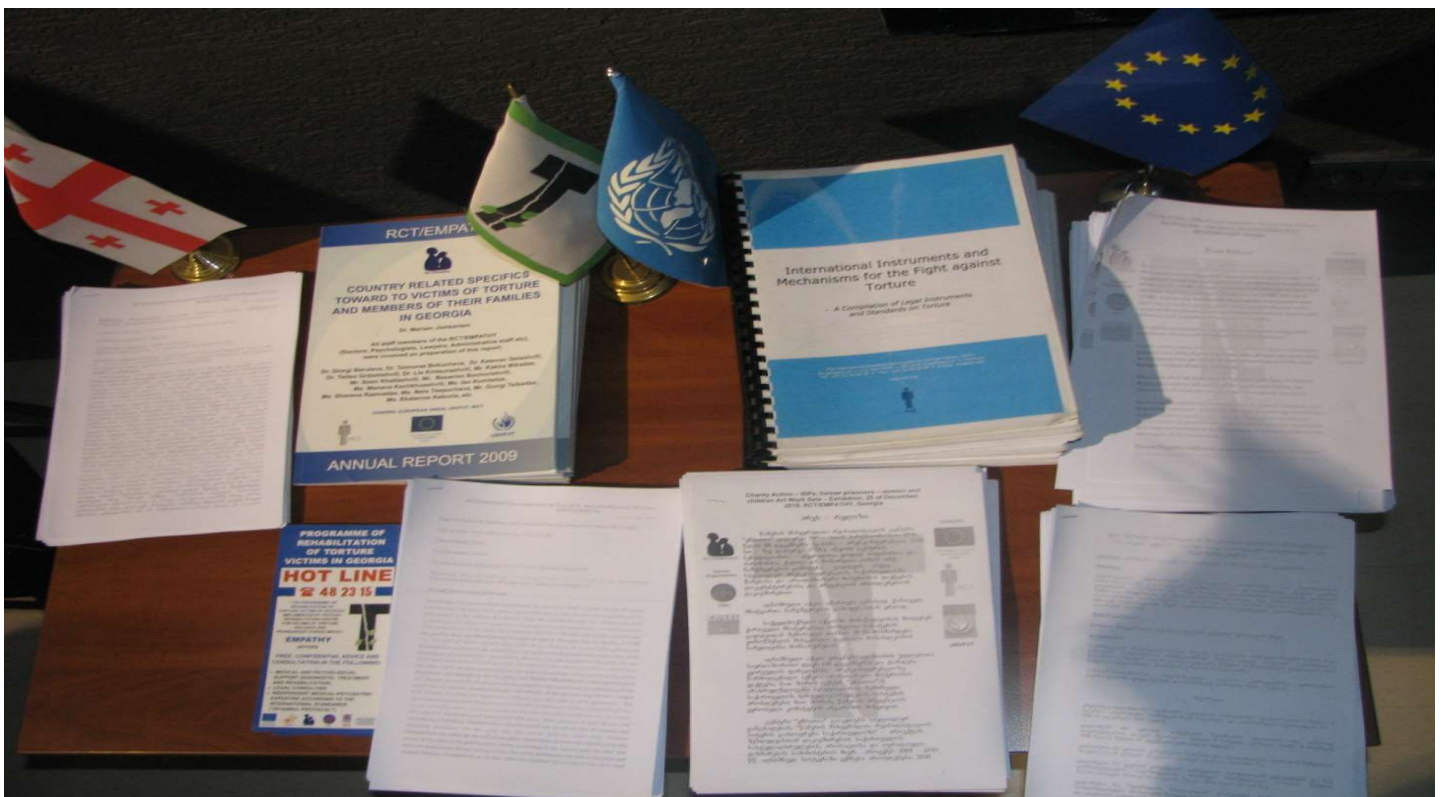
## 2.7. Publications and other outputs

**Table 21: Publications and other outputs:**

Title / # of copies in languages	Georgian	English	Total # of copies	# of pages A4
1. Training Manual for Health Professionals “Torture victims diagnostic, treatment, rehabilitation + Medical Ethics Codes” Power Point presentations; Educational Programme for CME/CPD accredited at the MoH	200	Materials translated from English	200	128
2. Guidelines for Rehabilitation Centres	All materials are electronic version	100	100	67
3. Practical manual for specialists (legal experts and human rights defenders)	100	Electronic Version	100	10
4. Handbook for clinicians (Istanbul Protocol) (Georgian – second edition, Russian – re – printed if required )	300	Electronic Version	300	147

5. Manual on International Instruments and Mechanisms for the Fight Against Torture (IRCT)	300		300	214
6. Annual Reports with recommendations for State officials	0	100	100	39
7.26 June Conference materials (3 Conferences); Per Year 1 Conference;	Power Point Presentations			
8. Information stickers and Posters on the Programme	1000	English/Georgian	1000	3
9. Articles in different specialized local and international journals				Published in Abstract Books (Listed Above)
10. Video and photo materials about the project				
11. Materials on the participation of the project staff in international events, like World Congress of Psychiatry, etc				Listed above
12. Updated Syllabus for Resident Courses and for Students of Medical Universities Updated				Electronic Versions
13 .Art Work Products	2006 Art Products			2 sale – exhibitions on June 26 –meeting in 2017 and during the training sessions of the Empathy conducted
TOTAL			2100	608

Materials were distributed among training beneficiaries during three training sessions conducted at the RCT/EMPATHY, as well as on additional experts' meeting, held on June 26, 2017.



## **2.8. the contractors**

The partnership contract was signed with the affiliated entity CFFI according to the Donor agency Black Sea Trust for Regional Cooperation request, which aimed capacity building of this NGO being established during previous EU funded project of the RCT/EMPATHY in 2016 for regional cooperation between South and North Caucasus Countries and Regions. *(Total amount was 97 673, 16 EUR), these funds were monitored by the Donor agency – BST for Regional Cooperation.*

## **3. Beneficiaries/affiliated entities and other Cooperation**

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### **3.1. the relationship between the beneficiaries/affiliated entities**

Affiliated entities in the project were a partner agency Gali Crisis Centre, located in a military conflict region of Abkhazia, which has been a partner of the RCT/EMPATHY since 2003 and provides pre – selection and follow – up interventions of the clients referred to the RCT/EMPATHY from Abkhazia.

Another Affiliated entity was NGO “Citizens for Freedom international” (CFFI), which provides collaborative activities in North Caucasian Region (Russian Federation) mainly related to the interventions focused on capacity building in women and girls – human rights defenders who are referred to the RCT/EMPATHY for rehabilitation and professional and organizational capacity building programme.

### **3.2. New Network of CSOs**

Grant signatory is only the RCT/EMPATHY, but in the framework of the Grant Contract, the network of NGOs has been established, planning to continue collaboration at National, Regional and International levels.

### **3.3. the relationship between the RCT/EMPATHY and State authorities in Georgia**

Relation with State Authorities are quite difficult due to the lack of professional knowledge and increased risk of corruption; special notice should be given to MoJ, MoC and MoH agencies, who also have no initiative to collaborate with professional experts in a positive way. At the same time, the RCT/EMPATHY is the first NGO whose Forensic Evaluation Reports represent significant pieces of evidence for investigation in cases of torture. Prosecutor’s office collaborates with the RCT/EMPATHY to present the RCT/EMPATHY experts for Court Testimony.

### 3.4. Agencies and Community Groups involved in an activities:

Table 22 below clearly shows the involvement of other organizations and target groups themselves in the implementation of this action:

**Table 22:**

How to apply				
	Frequency	Percent	Valid Percent	Cumulative Percent
Val Lawyers and family members id	6	1.0	1.0	1.0
identified during the monitoring visits of the RCT/EMPATHY	217	35.3	35.3	36.3
human rights NGO applications	13	2.1	2.1	38.4
Self-helping group activities (self- apply)	206	33.6	33.6	72.0
other organizations please indicate	1	.2	.2	72.1
Gali Crisis Centre (partner organization)	113	18.4	18.4	90.6
Administration Department of South Ossetia	58	9.4	9.4	100.0
Total	614	100.0	100.0	

**3.5. Contractor(s)** As mentioned above the RCT/EMPATHY has long-term contracts with about 24 medical diagnostic and treatment centres, as well as two Pharmacology companies and an Independent forensic centres.

### 3.6. Final Beneficiaries and Target Groups:

As mentioned above, final beneficiaries and main target groups in the action were t n = 514 persons from total n 614 having applied to the Centre. Main target groups were: IDPs 2008 war victims, as well as vulnerable population still living in the military region of Abkhazia/Georgia and para- military regions of Georgia, especially nearby South Ossetia that still are under the risk of aggression, kidnapping, forced disappearance and killing; also the Centre provides interventions with offenders with the experience of torture and ill – treatment; Other target groups are women and girls from region of Caucasus, as well as small-scale NGOs operating in the field of human rights; in all

those target beneficiaries the RCT/EMPATHY has close cooperation and new proposals are built in the needs assessment and analysis of results of previous work/interventions.

Count		Table 23:				
		Client - Gender				Total
		Male	Female	Male child	Female child	
Client - Status	Prisoners	12	1	0	0	13
	Former-Prisoners	70	27	0	0	97
	Refugees From Chechnya	0	1	1	3	5
	IDPs and new 2008 war victims	87	195	0	0	282
	Gali Region and Abkhazia including IDPs	72	67	3	4	146
	Others	16	49	3	3	71
Total		257	340	7	10	614

### 3.7. Other third parties involved (including other donors, other government agencies or local government units, NGOs, etc.)

The RCT/EMPATHY has had close cooperation with NGOs and experts involved in the capacity building activities not only from Georgia, but also from South and North Caucasian Region/Countries, as well as from Central Asia; at the same time, the RCT/EMPATHY had close cooperation with donor and other international agencies who have been long-term partners of the RCT/EMPATHY; during the activity the cooperation with European Network of Torture Victims Rehabilitation Centres was developed, as well as new research initiative in close collaboration with WPA Torture Section professionals and Vienna University Health care professionals was put forth.

In addition, table 13 above clearly shows static report on cooperation with target groups, NGOs etc.:

### 3.8. Synergies developed with other actions.

**Cooperative NGOs in the project of the RCT/EMPATHY were:**

1. Crisis Intervention Centre, Women's Association Georgia/Abkhazia – operates in Abkhazia – Occupied region of Georgia

2. Citizens for Freedom International (CFFI) – Operates in North Caucasus (Russian Federation) with leadership of the RCT/EMPATHY
3. LTD “Your Clinic” – Sub Contractor Health Care Centre of the RCT/EMPATHY
4. NGO Institute of Democracy and Safe Development (IDSD), partner of the RCT/EMPATHY since its establishment, working in Tbilisi and Regions of Georgia, established in 2014; its mission relates to the issue of Human Rights monitoring, especially - to the monitoring of implementation of Human Rights plan of action in Georgia in connection with Criminal Justice Reform. Member organization of Criminal Justice Reform Coalition.
5. Medical College and newly established NGO located in Sokhumi: NGO “Psychological Centre – HARMONY”.
6. NGO “Atlantic Council of Georgia” member of Euro – Atlantic Coalition of NGOs, working in the field of Security and Human Rights.
7. NGO “Georgian Institute for State Modernization” (GISM), which is the Youth NGO working in the field of security and human rights, as well as youth problems.

Other NGOs participating in the training sessions from other Countries:

1. Tajikistan – Anti – Torture Coalition – Torture Victims Rehabilitation Programme
2. Kirghizstan – Anti – Torture Coalition – Torture Victims Rehabilitation Programme
3. NGO “FAVL” (Armenia) – Partner of the RCT/EMPATHY in the framework of the Caucasian Anti – Torture Network
4. NGO “Union of Chechen Women” – from Chechnya (Russian Federation)

The RCT/EMPATHY, in case of financial support, plans to continue networking in the framework of the Caucasian Anti – Torture Network with Partners and also to establish Based on Georgia new coalition of NGOs working on general development of systemic democracy in the country, checking of main issues on security and human rights and initiating new reforms in line with EU/Georgia Associate Agreement.

### **3.9. Permanent and Continuous Character of the Work/Action**

It should be noted that this action was built in the previous regional programme of the RCT/EMPATHY funded by the EIDHR, being implemented in years 2013 – 2016 – Caucasian Anti – Torture Network and Fight Impunity.

### **3.10. Acknowledgment of EU and other Donors**

The RCT/EMPATHY and partner agencies acknowledge strong support from donor agencies that gave possibility to serve about 514 vulnerable persons from Georgia and other low income regions.

## **4. Visibility**

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The visibility was provided according to the EU general guidelines, on posters, stickers, banners, training materials and publications. We have not any objections for publication of this report.

## **5. Location of records, accounting and supporting documents**

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All documentation are located at the RCT/EMPATHY (Kandelaki Str.23, Tbilisi 0160, Georgia), materials also included in USB attached to this report.

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