

WHAT IS TORTURE BY ASPHYXIATION?

There are three types of asphyxiation: 1. Dry asphyxiation (submarino, “the elephant”, bagging, hooding), 2. Wet asphyxiation (wet submarino, waterboarding), and 3. Positional asphyxiation (1). Please see separate Factsheet for waterboarding and positional torture. Torture by dry asphyxiation is the prevention of normal respiration by obstruction of the airways, pressure or ligature around the neck or by forced aspiration of dust, gas, cement etc. (2). Torture through asphyxiation by suffocation is increasingly used as a torture method (2). Torture by dry asphyxiation fits the definition of torture as per the UN Convention against Torture and should be considered an unacceptable form of treatment under any circumstance (3).

The UN Special Rapporteur on Torture, the European Court of Human Rights and the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) all deem dry asphyxiation as constituting torture (4–8).

IN PRACTICE

In dry asphyxiation different methods are used to prevent normal respiration. This includes covering the head with a bag or mask, closure of the mouth and nose, pressure or ligature around the neck or forced inhalation of dust, cement, hot pepper, etc. (2). The material used to cover the airways may be contaminated with bodily fluids such as blood or feces, chilies or volatile liquids such as petrol (1).

In a study from 2016 examining 45 ex-detainees in Spain, the authors found that of those who had been subjected to asphyxiation (47%), the majority had suffered dry asphyxiation (hood, bag) (9). Another study from 2016 found that 7.5% of 67 female ex-political prisoners in Lebanon had been victims of dry asphyxiation (plastic bag) (10).

Dry asphyxiation has been documented as a common method of torture in many places around the world, including Spain, USA, the former Yugoslavia, Cambodia, the former Soviet Union, Lebanon and other countries in the Middle East and in Sub-Saharan Africa. Dry asphyxiation is often used in combination with other torture methods (10–13).

HEALTH CONSEQUENCES

Dry asphyxiation is categorized as a ‘clean’ torture technique because it leaves no or few visible marks on the body (11) rendering it difficult to detect and to study.

Consequences of dry asphyxiation may include petechiae (pin-point sized skin bleedings caused by broken capillary blood vessels) on the skin and conjunctivae (eyes), bleeding from the ears or nose, mouth infections, acute or chronic respiratory problems, cerebral hypoxia (brain oxygen deprivation) leading to loss of consciousness, chronic cognitive impairment, brain damage, and even death (2,12,14,15).

Experiments of temporary hypoxia in healthy adults have shown that hypoxia causes severe cognitive deficits across all measured domains of cognitive function with effects on memory, processing speed, executive function, reaction time and cognitive flexibility. In addition, the participants reported feeling tired, and displayed loss of coordination, blurred vision, weakness, dizziness, irritability and restlessness (16).

Psychological consequences:

Only a few studies with small study populations have investigated the specific psychological long-term consequences of dry asphyxiation. The studies found an association with panic disorder (10,17). The consequences of dry asphyxiation may be linked to the consequences of wet asphyxiation which consist of a range of long-term psychological effects including panic attacks, depression, post-traumatic stress disorder (PTSD) and personality

CONCLUSION

Dry asphyxiation causes serious physical and psychological suffering with documented medical sequela. There is a need for comprehensive training of medical and legal professionals to understand the complexity of this kind of torture in terms of both health consequences and detection.

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