

State Torture: Some General, Psychological and Particular Aspects

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State political torture has been practised in Latin American countries and is well-documented. What are the particular aspects of this practice? What are the elements which contribute to a person participating in torture? Who is the real torturer?

WE may describe torture as that extreme and deliberate form of violence inflicted upon a victim who experiences it consciously, and who has no control over its form or duration. It produces pain and mental or psychological stress and is intended to destroy the victim's will in an attempt to perpetrate a determined order of power relationships. When such practice is structured into the ways a state governs over the people of a nation, we may refer to it as state torture; but when the primary target is the citizens who oppose, or are believed to oppose, the order of relationships established by that state, we may talk of state political torture. In the American continent the use of torture as an identifiable administrative policy has been recognised in several countries [1-4], but the cases of Chile, Uruguay, Argentina, Paraguay, El Salvador, and Guatemala have become exemplary over the past ten years [1, 5-9]. In these countries thousands of citizens who oppose their governments have been (and are being) tortured in semi-clandestine torture centers, where similar methods and techniques of suffering are implemented. The subjects for torture are identified and selected by branches of the military and then kidnapped by "heavily armed men dressed in civilian clothes" who operate with impudent legal immunity. The victims are then taken to camouflaged jails where a minority of those who enter are able to come out alive to tell the story.

What is the purpose of such torture? On first hand it may seem that the answer is information. But if we review the methods and understand that in these countries torture has been made a stable semiclandestine institution of the state, its primary purpose can no longer be considered simply to secure information or a confession. How could we believe information is the aim when pregnant women are burned in the nipples and genitals and then receive electric shocks in the uterus producing either abortion or brain lesions in the fetus [3]? Or when splinters are inserted into the eardrums? And besides the cruelty *per se*, how valid could a confession be under those circumstances or under the effects of stupeficients? No, here the specific purpose served by such brutality seems to be primarily the destruction of the individual in his/her most basic humanity, while the general objective seems to be the attempt to preventing dissidence—a way of exercising and maintaining power by terror.

By definition, torture assumes the involvement of at least two subjects: the torturer, who applying torture strives for maximal submission of the victim under his physical control, and the victim, whose actual circumstance makes an immediate defensive counterviolence impossible. In the following sections, I will examine some aspect of the methods of torture, the torture and the effects of this practice.

Methods of Torture

When torture is part of the state policy, the methods for destroying the morale and physical integrity of the victims are ample. Breaking down the victim, whether by producing an organic impairment of the mental functions [10] or by the effects of stress [11, 12], is achieved by the use of both rustic and sophisticated methods and techniques. What, when and how to torture is something established by accumulated local and international experience. Not infrequently, it is assisted by modern medicine and research findings, even with direct participation of physicians [13-21]. There are testimonial reports of medical doctors supervising the process of torturing, or monitoring the procedures so that unconsciousness and death are avoided while maximum stress is applied [1].

The scientific approach to torture has been taken seriously by some. In a recent article published in the *Journal of Medical Ethics*, 'On the Permissibility of Torture', G. E. Jones argues in support of torture [22]. Justifying it on utilitarian grounds he states:

It (torture) cannot involve death, and must utilize the most advanced medical techniques available so as not cause needless psychological or physical harm. Only the minimal amount of pain necessary to obtain information would be inflicted (*italics added*).

And further, in a clearly marketing way, while discussing the cost-benefit ratio of torture (which he compares with solar energy: it pays in the long run) and under what he calls humane (*sic*) torture, he goes on saying that:

The state of technology is such that we can stimulate certain centers of the brain such that we can inflict pain without physical abuse or *physical side effects*. (*italics added*)

The mode of torture that Jones proposes, which apparently includes electro stimulation or microsurgery to affect brain centers, selectively ignores that torture is terrible as an experience and not only for its visible sequelae. What Jones seems to be concerned with is the public or

observable evidence that torture had taken place, rather than what it represents, or the damaged self and relationships the torture victims are rendered with. Torture is a devastating experience that accompanies the surviving victim the rest of his/her life, affecting, as I will explain later, more than the physical or physiological aspects. Jones' statement that, "Only the minimal amount of pain necessary to obtain information would be inflicted" is naive. Would't a torturer ever accept having inflicted pain in excess of that necessary to his victims?

The pain and the stress caused by different methods of torture need to be multiple, variable and unpredictable. This way the victim's attempts at behaving in consistent ways or developing personal behaviour patterns to better sustain the suffering are frustrated. The methods and techniques of torture are often the same in the six Latin and Central American countries (Table 1), even to the point that many types of torture receive the same name (Table 2)—a case of international cooperation.

The catastrophic existential event that torture represents for the victim will certainly leave a permanent stigma in the survivor and his/her basic social nucleus. How, and to what extent, the terror, humiliation, loss of dignity and physical suffering will mark the victim is something that cannot be generalised. The structural characteristics of the victim's personality are important: the victim's clarity and strength of morale, sense of purpose and comradeship and even hatred of the system that brings the suffering [21]. But the effects of torture on the victim will also depend upon the dose of experienced violence, that is, the duration and intensity of the stressor.

The extent of the injury should be measured not only by the bodily deformity or loss, or impairment, but by the emotional significance attached to the experience which often leads to a radical alteration of the person's whole life [23, 24]. Torture results in anxiety, difficulty in thinking, loss of self-esteem, social withdrawal, decrease in productivity and abandonment of goals [1, 14, 23]. For those who can no longer resist and who broke down, additional guilt and despair awaits.

From a psychiatric point of view, torture represents a situation of massive stress which unequivocally provokes anxiety, brought about not only by pain and mortifications, but also by uncertainty. Under torture, the threat of destruction is more than an imminent possibility—it has already started. Yet what the victim lacks is access to knowing how, when or if the destruction is going to be completed. In psychiatric language, the symptomatic post-effects of torture, together with other psychological traumatic events of inordinate nature and outside the usual human experience, fall in what are called post-traumatic stress disorders [25]. Briefly, these disorders constitute a condition that results in the contraction and disorganisation

of the ego [26], hence to a symptom complex, acute or chronic characterised by: 1) recurrent and intrusive recollections of the traumatic event and nightmares in which the event is re-experienced as it was or in a representational way; 2) dissociative states that last from minutes to days, in which the individual behaves as if the trauma were recurring, because of an association with an environmental or ideational stimulus that elicits them; 3) constriction of affect, reduced responsiveness to the surroundings, and feelings of estrangement from others; 4) hyperalertness, exaggerated startle response, sleep disturbances, memory impairment, etc. Yet, as has been observed, the symptoms brought forth by deliberate man-made disasters, such as torture, often exceed other stressors in severity and consequences and may even precipitate premature death [27].

Table 1: Methods of Torture^a

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1. Environmental Manipulation:
 - Social deprivation (isolation from family and friends)
 - Isolation (restriction of company, sex, work, relaxation, food)
 - Sensory deprivation or overload (solitary cells, noises, reflectors, etc.)
 - Sleep deprivation
 2. Pharmacological Manipulation:
 - Parenteral barbiturates and stupeficients
 - LSD and related drugs
 - Apomorphine
 - Corrosive chemicals
 - Cyclophosphamide
 - Muscle-paralyzing drugs (e.g., curare)
 3. Coercive Methods:
 - Forced seeing or hearing others being tortured (friends, relatives, spouse, children)
 - False accusations
 - Occasional indulgences
 4. Somatic Methods:
 - Forced standing: prolonged standing in a required position, usually undressed.
 - Cold water: irrigation or submersion in cold water
 - Beating: with iron rods, rubber truncheons, whips, batons, sticks, etc.
 - Starvation: deprivation of water or food
 - Mutilation: dismembering of various parts of the body
 - Breaking bones
 - Sexual molestation: stripping, touching, attempted rape
 - Rape: homosexual or heterosexual
 - Electricity: electric shocks applied specially to eyes, teeth, head, genitals, rectum; "electric bed"
 - Fire: e.g., welding torches applied to head, eyes, genitals, etc.
 5. Psychological Methods^b
 - Denigration with insults, false accusations, use of brutal and threatening language, threats of execution
 - Sham execution
 - Execution of family members or friends in front of the victim
 - Video or audiotapes of the torture of other victims, including torture of relatives, spouse and children
 - Witnessing homosexual or heterosexual rape performed on friends, relatives, etc.
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a See references 1, 3, 5, 6, 7, 49.

b The separation of psychological from somatic is only made for clarity sake. Any form of torture encompasses both psychological and somatic effects.

Although not all researchers agree [4], some studies have found that the psychological effects of torture are sufficiently characteristic to constitute a 'torture syndrome' [28, 29]. However, we still know little about what occurs to the human body and mind as the result of torture, notwithstanding the psychic and somatic changes observed. In general, the investigations of long-term psychological effects of torture are rare. However, a recent Danish study [4] sponsored by Amnesty International in which 135 victims of torture were examined medically and psychiatrically gives us an idea. The study showed that at the time of the examination, conducted between six months and a year after torture had taken place, 90 per cent of the victims complained of various symptoms which arose in conjunction with or following torture. Of those, 75 per cent presented psychiatric symptoms which included impaired memory, impaired concentration, mental changes and sleep and sexual disturbances. All the subjects had been healthy prior to their arrest. On the other hand, Allodi and Cowgil [28] investigated 41 cases of torture among the thousands of refugees from especially one Latin American country, who had migrated to Canada. The victims studied were 32 males and nine females, whose ages ranged from less than ten to 46 years of age (mean age 26.9). Twenty-five per cent of them had some university training, and except two females, they had experienced a total of 112 incarcerations ranging from weeks to a year (one victim had been imprisoned 11 times in five years). All were subjected to physical and psychological abuse. Allodi and Cowgil concluded that all suffered from a homogenous psychological disorder marked by severe anxiety, insomnia with nightmares about persecution, violence or their own torture experience, somatic symptoms, phobias, suspiciousness and fearfulness. In the case analysis they found that there seemed to exist a positive relationship between the individual ideological preparation, commitment and group support and psychological recovery from torture.

The sequelae at times could lead also to lesions in organs of functions not directly subjected to torture. For instance, Lunde, Rasmussow and collaborators (30) studied the sexual function of 17 men exposed to torture. They found that independently of cranial or genital trauma or severity of torture, 19 per cent of the studied victims presented sexual dysfunctions manifested as decrease in libido and/or erectile dysfunctions, in absence of abnormal pituitary or gonadal hormones. In another study, Jensen Genefke and collaborators reported cortical or central cerebral atrophy, as determined by computerised axial tomography, in five non-alcoholic, previously healthy men ages 24 to 39 [31]. These men had been exposed to severe and prolonged tortures (mean of four years), and all had symptoms consisting of inability to concentrate, headaches, anxiety, depression, asthenia, sleep distur-

bances, cerebral asthenopia and sexual dysfunctions for several years. A suggested possible mechanism, assuming that the atrophic changes cannot be attributed to head trauma, has been the possibility of high levels of cortisol secondary to the chronic severe stress of torture [32].

We did not dare to kill them all (the political prisoners) when we could have done so and one day we shall have to release them. We must take advantage of the available time in order to make them go mad.

Major Argumides Maciel
Director of Libertad Prison
Uruguay

When confronting human behaviour, especially if it is deemed highly negative in quality, psychiatrists and field-related professionals tend to seek the roots of such behaviours primarily in the individual, or, at best, in his/her immediate surroundings. In such a narrow view, the torturer's behaviour could be easily conceptualised as one of a sadistic sociopath, brought about by defective parental discipline resentment over emotional deprivation, or more reductionistic, by congenital deficits or neurochemical imbalances in the brain. The problem with this intrasystemic orientation is that it selectively assigns causality intensively to one or a few individual elements, while disregarding or simply enumerating socio-economic conditions as aggregate factors in a multidetermined causality. The socio-economic system and the culture that derives from it is a basic element that shapes (and is shaped by) history, that dictates priorities and modifies environments.

Table 2: Specific Methods

'Submarine or 'Underwater treatment'	The victim is forced to submerge the head in a sink or bucket full of excrement, urine and water.
'The Hood:'	The victim's head is forced into a plastic bag, usually containing insecticide, until suffocation.
'Telephone:'	Beating from behind simultaneously on both ears.
'Parrot Perch' or 'Pau de Arrara'	The victim's wrists and ankles are tied together and the whole body is suspended from an iron bar under the knees, leaving the naked body doubled over and defenseless. In this position electro-shocks are applied and filthy water forced into the mouth.
'Dogs Pit:'	The victim is kept a few feet above the ground as (s)he is hanged from the hands which are kept tied together on the back.
'Hook' or 'Hanging:'	The victim is hanged from a rope which is hooked to a strap around the waist, while the hands are tied to the back.
'Mitrione's vest.' ^a	The garment is gradually inflated until it crushes the victim's ribs and makes breathing impossible.
'Picada:'	A straight pin inserted most commonly under the victim's fingernails.

a Named after Dan Mitrione, a North American AID official, allegedly an advisor to the Uruguayan police in counter insurgency techniques, including methods of torture [3, 9].

By focusing on the individual or his/her immediate family as the source of aggression, this theory avoids a critical examination of the problem. It ignores the history of societies which value highly certain types of aggressive behaviours, which glorifies the aggressive war hero, and which pretend that amassing destructive power is a deterrence of war and a preserver of peace. In other words, for the study of the individual that concerns us here we must look beyond the individual and his/her family, into the conditions that typically prevail in society which favours—and benefits—from such practices. The political torturer works in the name of the society, the army, the interest of the nation, etc. He is not the isolated maleficarum that our conscience would like us to believe; he is a member of an organised group that operates semi-autonomously, but does so under the direction of branches of the government—an element of a network devised to reserve power and facilitate domination. Does this mean that anyone could become a torturer? The answer is not black or white. Perhaps a now classical experiment better illustrates the dilemma. Some years ago S. Milgram conducted an experiment, 'Behavioral Study of Obedience' in a laboratory at Yale University [33]. The experiment consisted of 40 volunteers who were led to believe that they were to take part in an experimental design on memory and learning. Each volunteer was instructed to administer electric shocks to a learner-victim whenever (s)he gave an incorrect answer to a question. Although the victims never actually received an electric discharge, they had been instructed to pretend as if the shock had been experienced. The experiment was designed so that when the punitive shock had reached certain voltage, the teacher-volunteer had the option of stopping the procedure, but was verbally encouraged, and even firmly ordered to proceed administering shocks at higher voltage if the learner-victim failed to complete the task. In the experiment none of the 40 subjects stopped prior to shock level 300, at which the victim began kicking the wall and no longer provided answers to the multiple choice questions. At the end of the experiment 26 of the 40 subjects completed the series by administering 520 volts.

This experiment tells us about human potentialities, and how given the manipulation of certain variables, one can end up doing something contrary to one's expectations. Certainly, there are many aspects of the experiment that one can question, eg., who were the real victims here. But besides that, let us not forget that this experiment was conducted in one of the most prestigious universities in the United States, in the name of science, and in a contemporary industrial society where science is highly regarded. Therefore, the setting was one in which the average person would have difficulty believing that such an experiment could be wrong [34]. Many of the participants continued to shock the victims under much stress and

pain, fighting the contradictions and trying to justify the scientists' recommendations.

The point of this experiment is that ascribing to the individual torturer a particular psychopathology reveals nothing, unless there is interest in maintaining that if there were no sadistic-sociopaths, or that if they all received some sort of psychotherapy, this type of practice would stop.

How does the torturer become a professional in torturing? First, the external and material circumstances of his background must be such that will accommodate his nefarious occupation with relative ease. Second, he must be educated to be efficient and perform his work with determination. This education, given in schools of torture [1, 35], sometimes with "instructors" from other countries [3, 35], aims not only at providing the torturer with the techniques for torment, but also at preparing him psychologically and ideologically for his labour. How is this mental preparation achieved? First, it is done by emphasising the non-humanness of target groups. The victim needs to be perceived as a thing, as something contrary to what the state, and the social class it serves, regards as the communal good—by educating this way the propitious conduct is motivated and targeted. Secondly, training is done by conditioning the prospective torturers that they are to act for the good of the nation, the good of the country. Therefore, even the most brutal actions do not constitute a violation of the high moral principles under which they allegedly operate. Third, by education that emphasises loyalty to an organisation that will protect the individuals involved and maintain secrecy. This services to exculpate residues of personal responsibility while subordinating individual will to that of the organisation. Fourth, instructors simulate an aura of mysticism aimed at encouraging a long-term commitment and group cohesiveness. Torturers are frequently called by pseudonyms that stress certain personal characteristics, and some are even referred to as doctors [1, 36].

Despite these training and accommodating personalities, it is likely that the torturer experiences some mental stress by tormenting his victims, and realizes that he is also the object of exploitation. He is usually a low-ranking employee likely belonging to a social class exploited by those whose interests he serves, and the means for ends that are not truly his. This situation not only places him in severe contradiction that resonates in his practice, but also demands attempts at resolution on the personal level.

According to Festinger [37, 38], if an individual holds two ideas of mental sets that are not psychologically consistent with each other, he will experience discomfort produced by such inconsistency (or dissonance). In order to resolve the conflict the individual will either change both ideas or add a third one that will bring about less incon-

sistency. In other words, he will have to come up with something that will convince him that one of the ideas or sets is worth pursuing, especially if the ideas have already been transformed into acts. What is characteristic here is that the arousal of dissonance always contains personal involvement, and, in order to reduce the dissonance created, self-justification is the rule.

If we extrapolate this to the situation facing the torturer, then we can see that he finds himself in a dilemma: he needs to rationalise, to deny, to protect himself from the perception of his own doing. He needs to obtain some (subjective) gains, or else, due to the nature of his practice, he runs the serious risk of being flooded with unbearable stress that would break into his psyche and probably make him collapse (testimonies of victims of torture and agencies for human rights indicate that frequently the torturers torment their victims in a state of alcohol intoxication or under the effects of drugs [39]). The literature reviewed does not contain interviews or direct 'studies' on the psychology of the torturer, but by the nature of his practice and the accounts given by some torture victims one can infer some of the major psychological response mechanisms assisting the torturer. First, the torturer, not blind to the perceptions of his own doing, needs to distort reality, to exculpate himself from what and how he does, and to come up with maneuvers that would obscure the relationship between his actions and the effect they cause. Here the basic mechanism is projection: the victim is held responsible for his/her own suffering, a "you're getting what you looked for." But that transfer of blame is probably not sufficient, for the torturer knows he himself is the victimiser. Something more is needed: the torturer needs to dissociate himself from the victim, create distance, and he does it by ascribing a derogatory status to the victim (something he has been taught to do) which is, in a deeper level, a projected hatred of his practice and of his ultimate sponsors, and that *that* he will destroy in the victim. The contention here is not that the torturer is *the* victim, but rather that the problem is, we may say, dialectical. The torturer is the victimiser, but he has within himself the victim which he denies. That is, he conjures out his condition of (also) victim, by projecting it onto the tortured, and proceeds to destroy it. Thus, by torturing his victim, the torturer obtains three victories: one that comes from the triumph of having projectively annihilated his own feelings of victimisation by torturing others. Another victory is from avenging in the victim, his own displaced hatred toward those for whom he works and who are the real beneficiaries of his necrofilic activity. But also, at another level, by torturing the victim, the torturer obtains a triumph over his own fear of retaliation and death, by being in absolute control over the lives of others.

Conclusions

To know and not to act is as if not knowing at all.
Old Japanese Proverb

Torture, as a structured apparatus used by nations to structure and maintain a given order of power relations, constitutes part of the daily experience suffered by thousands throughout the world. The case of several Latin American countries, whose governments not only declare themselves democratic, but which are also referred to as democracies by other governments, is a crude and typical example.

Here, I have described some aspects of that particular kind of torture, its known short-term and long-term effects, and its purposes, and elaborated on some psychodynamic elements under which the man who carries on with torturing probably operates. Of course, these elaborations do not pretend to be exhaustive, nor are they intended to be an apology for the men who actually do the torturing. Rather, the point is that these men should be understood in the historical and social context in which they operate, without forgetting who pays, who supports and who benefits from their practice. Fortunately, there exists throughout the world agencies and organisations concerned and vigilant of human rights which have bravely denounced torture, but unfortunately, those who are in the position of strength to exert necessary effective pressure over nations which indulge in such practice give lip-service criticism, or plainly ignore it.

Finally, I want to briefly mention another type of state torture that should concern us, but which due to its nature and implications will require a separate study. I am referring to the systematic, well-orchestrated and 'dosed' psychological and physical violence that a country, by virtue of its economic and military might, exerts over smaller nations and their people. Such smaller nations, due to their own historical and concrete existing conditions, lack the effective means to prevent such violence, or to respond with a likewise effective (defensive) counterforce.

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