Author's response to reviews

Title: Household Exposure to Violence and Human Rights Violations in Western Bangladesh (II): History of Torture and Other Traumatic Experience of Violence and Functional Assessment of Victims

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Author's response to reviews: see over
Title: Household Exposure to Violence and Human Rights Violations in Western Bangladesh (II): History of Torture and Other Traumatic Experience of Violence and Functional Assessment of Victims

Reviewer: Edward Mills

Reviewer's report:
This follow-up article is well-written, interesting and addresses an important topic. Below, my comments address minor issues that the authors may choose to address:

1. All writing style comments from my review on paper I apply again here.
2. Don’t use the +/- symbols for standard deviations. For some reason, SD is preferred these days.
3. As before, use exact p-values where possible.
4. I don’t agree that a tool has been developed here. It has, maybe been piloted.
5. But I don’t understand why you didn’t take the opportunity for a test-retest or use of a control group. Could you explain?

Reviewer: Neil J Mitchell

Reviewer's report:
I have fewer comments on this second paper. It is more focused on assessing physical well-being and outside my area.

6. MINOR REVISION: The term ‘torture’ is used for a range of activities. Are they all ‘torture’ or are some of the activities ‘cruel or degrading treatment’? Unless all the activities listed are torture it would be best if more pedantic to consistently refer to ‘torture and cruel… etc’ throughout the paper.

7. There are spikes to the violence. Can these be linked to elections – and pre-election violence at these times of heightened general political activity – levels of political threat may be seen to rise at these times and were obviously extreme at the time of the war (see literature from other review).

8. Perpetrators – again the information is very rich. I was surprised not to see the armed militias attached to the governing party as mentioned as perpetrator.

9. The authors are aware of the limitations of the survey method – and possibility of over-reporting. Again, some of the contextual information provided in my other review about human rights conditions generally in Bangladesh may be helpful.
Response to the concerns of reviewers and editors

Editors:
The authors declare that they have no competing interests. The manuscript including the figures, tables and references has been re-organized to conform to the journal style according to the checklist. We have made all changes suggested by the reviewers. A medical editor did a major revision and grammar corrections for the manuscript, in particular for the Methods and Discussion sections. To be consistent with the manuscript Part I, we modified the title of this manuscript.

Reviewers:
Points 1-3 and 6
We have revised the manuscript according to the suggestions of the reviewers. References have been updated. The expressions of standard deviation and torture and cruel, inhuman, degrading punishment or treatment (TCIDPT) throughout the paper have been changed. We also corrected a mistake: the order of variables, in the data presented in Table 5.

Point 4
(Page 3): The last line of Conclusion was rephrased as:
*The results indicated that the simple and rapid method of assessment used here is a promising tool that could be used to monitor the quality and outcome of rehabilitation.*

(Page 4) The following sentence in the third paragraph was rephrased as:
*It was a pilot study using a simple and rapid method of assessment, which could be further developed for use in countries with limited resources. Such a tool would be valuable for generating a baseline for monitoring the quality and outcome of rehabilitation services.*

Point 5
The following sentences were added to the Limitations and Strengths to explain the reason we decided not to have a “healthy” control and why we did not take the re-test.

(Page 24) One limitation was that owing to logistical and political constraints, we did not recruit people without prior TCIDPT experience as a healthy control group while taking into account neighbourhood effect on OPV or human rights violations.

(Page 25) We had hoped to use the results as a baseline for a large-scale intervention in this community, and to repeat the measurements afterwards to monitor the quality and outcome of rehabilitation. We had already developed plans for various interventions including setting up a platform, Victim Association, where the survivors can talk about their fears and stigmas and re-construct their self-images, and which will also serve as a place for social participation and political empowerment. The members should assist the Victim Association to raise the community awareness and spread knowledge about
human rights by organizing various community activities. Unfortunately, these cannot immediately be realized for unexpected reasons.

Point 7
We have observed that the peaks of violence and human rights violations reporting corresponded to the year of general elections in Bangladesh in 1991, 1996 and 2001. We further explained the trend of violence reporting by rephrasing the following sentence and adding more information in the section of Discussion as:

(Page 18-19) The years 1971, 1990-91, 1996-97 and 2000-01 are crucial in the history of OPV and human rights violations in the whole of Bangladesh. In these years, there was a high level of political tension and violence; this pattern is shown in our study and also reported by other institutions (Human Rights Watch, 2006 #176; Asian Legal Resource Center and Asian Human Rights Commission (AHRC), 2006 #180; The Redress Trust, 2004 #181; Sreeradha, 2005 #81). There were general elections in Bangladesh in 1991, 1996 and 2001, which were wrecked by pre and post-election violence. Over 80% of the participants in our study claimed to be “party supporters” but only a few of them revealed which political party they supported. Therefore we were unable to do further analysis to test our hypothesis that the supporters of an opposition party were more likely to be victimized as the political tension increased sharply in the year of general elections.

Point 8
The following sentences were added in the fourth paragraph:

(Page 19) From the results of our study it appeared that the police were the major perpetrators. Individuals could be attacked by armed militias associated with party politics, but such incidents were not reported here. Such individuals were not likely to present in the mobile clinic, because the recruitment criteria were primary or secondary victims subjected to any of four categories of OPV and human rights violations perpetrated by the members of law enforcement agency.

Point 9 Contextual information has been referred.

(Page 4) The Cingranelli-Richards Human Rights Database shows that the people of Bangladesh have been terrorized especially since the 1990s, with increasing numbers of political imprisonments, torture, disappearances and extrajudicial executions (Cingranelli, 2009 #170). The Political Terror Scale developed by Gibney et al. (Gibney, 2009 #171) measured the level of human rights violations in Bangladesh as 4 on a scale of 5 since late 1990s, which indicated that the majority of population was affected.

(Pages 19-20) Mitchell (2004) pointed out that the degree of political control that the political authorities exercise over a law enforcement agency varies across time and political system. It is plausible that if individuals in a law enforcement agency have goals independent of those of the authority, or have private interests, this may influences the choice, level and method of violence (Mitchell, 2004 #172).

(Pages 20-21) A low level of control of corruption in the administration is likely to provide the members of law enforcement agency with a wealth of opportunities for
hidden actions including the perpetration of sexual violence \cite{Butler2007}. It is also plausible that in the society in which homosexuality is not approved of, the setting of detention and prison allows the individuals of law enforcement agency who seek for particular sexual interest to conceal their actions.

The following references were added to the first paragraph of Limitations and Strengths in the section of Discussion:

\textbf{(Page 24)} Our findings concerning perpetrators and years of perpetrations were consistent with reports from other international institutions \cite{HumanRightsWatch2006,AsianLegalResourceCenter2006,AHRC2006,TheRedressTrust2004,Sreeradha2005} and also from a local human rights organisation, Odhikar. A medical examination that found traces of injury is also a validation of the oral reports. We used simple physical tests to confirm the reliability of subjective difficulty in walking reported by the study participants.

\textbf{Others:}

\textbf{(Page 4)} References 1-8 were deleted because there were much more references in this field.

\textbf{(Page 5)} Following information was added to the first paragraph in the section of Methods:

\textit{Operation Clean Heart in 2002 and Operation Spider Web in 2004.}

\textbf{(Page 7)} We added the following information in the section of Methods:

\textit{The questionnaire was developed in English and translated into Bengali.}

\textbf{(Page 13)} We added the following information in the first paragraph:

\textit{Among five victims of terrorists, two were also abused by the police and three were secondary victims.}

\textbf{(Pages 14-15)} More detailed information was provided in the following paragraph:

\textit{we compared the mean handgrip strength of male participants aged 25-44 years old with that of a reference group of 100 healthy males aged 27-42 years in West Bengal: that of 50 office workers was 43 kg and that of 50 metal workers performing intensive manual labour was 41 kg.}

\textbf{(Page 16)} We explained why we have adjusted with cluster of village in the analysis in the second paragraph and third paragraph:

\textit{After adjusting for age and BMI and the cluster effect of villages (prevalence of annual injury rate and violence-related injury was related to the level of exposure to OPV varied by villages) \cite{Wang2009}, we found a strong negative association between standing balance and the number of injuries.}

\textit{The distances involved depended on which village a participant lived in.}
In order to clarify how to calculate the BMI, the following sentences in the section of Methods were moved to the section of Results.

**BMI is defined as an individual’s body weight divided by the square of his or her height.** The mean BMI was 20.7 with a SD of 3.0 (range 13-29) for males and was 22.2 with a SD of 3.9 (range 12.9-31.2) for females. We used the cut-off values for being overweight (23.0<BMI<27.0) and obese (BMI>27.0 kg/m²) recommended for a Southeast Asian population by Singaporean and Indian researchers [Misra, 2003 #168; Singapore Ministry of Health and Health Promotion Board, 2005 #146]. These values are somewhat lower than the global values.

In order to explain why we used handgrip strength to examine the muscular function, we moved the following paragraph in the section Method to the section of Results.

**In our study we assessed muscular function by measuring handgrip strength, which is required in many daily activities in a rural area. Hand dynamometer testing is recommended to determine the loss of handgrip strength [Alperovitch-Najenson, 2004 #131; Mathiowetz, 1985 #133; Mathiowetz, 1986 #134]. This method is widely used for outcome documentation after injuries of the upper extremities [Chau, 1997 #139], as a functional index of nutritional status, and for determination of impairment [Gunther, 2008 #140].**