Physicians for Human Rights

Basic Guidelines for Taking Forensic Photographs of Physical Injuries and Wounds

Overview

Medical-legal evaluation:

An evaluation by a clinician trained to interview and conduct physical and/or psychological examinations of individuals who allege having experienced torture and/or other forms of ill-treatment. The aim is to document and evaluate the consistency of accounts, physical and psychological symptoms and signs, and other forms of evidence with what the individual reports having experienced. The Istanbul Protocol Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment sets out standards and guidance for the conduct and write-up of these evaluations.

Forensic Photography:

A process of documenting evidence of injuries to provide a permanent record for legal proceedings and other mechanisms to achieve accountability for perpetrators of human rights violations. These guidelines are intended to guide health care professionals, lawyers, and others in collecting forensic photographic evidence of torture and illtreatment without compromising survivors' safety or confidentiality. These guidelines may also be useful for survivors who would like to take pictures of their physical injuries on their own devices and share that information with others.

Photographs can be a key component of medical-legal evaluations. They can augment written reports, provide a visual record of scars and injuries, and corroborate medical reports. This does not mean that a lack of photographs or the failure to capture a good image of a lesion means that the evaluation is not valuable or that a lesion does not exist. Nonetheless, good photography practices can only help a case.

Istanbul Protocol standards for taking photographs in person can also be adapted for medical-legal evaluations done when clinicians need to evaluate survivors remotely (e.g., using a secure video platform, rather than face-to-face). Conducting remote evaluations entails additional considerations, such as ensuring robust protocols for storage, confidentiality, and guaranteeing security before and after the images are taken. Moreover, photographs taken over video platforms can be obtained using the screen shot function on a phone, tablet, or computer. (in-app screen shot functionality exists for Zoom and others). Apart from these areas, remote and in-person documentation procedures are relatively similar.

Section I: Preparing for the Evaluation

- Create a protocol for the labeling of photos. Every photo should include:

 The date/time (either a digital time stamp, or written on a piece of paper)
 - An ID number or name of the survivor/case
 - An ID number or name of the photographer
 - Address where the photo was taken (so long as confidentiality is not broken).
 - Numbering for each lesion/injury
 - \circ Number of the photo

E.g., a photo may be labelled 245.3.2. – where 245 is the case ID number, 3 is the lesion number, and 2 is the photo number.

- Develop a protocol for the secure and confidential storage of photos.
- Create a chain of custody form to be completed (see attached example).



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Preparing for the Evaluation

Remote Evaluation Considerations:

- Determine whether the remote platform is secure and is accessible to the interviewee.
- Test the technical platform's ability to take screenshots or photographs.
- Check the WIFI connection for both sides before beginning the call.

Tell the interviewee to show a 360degree view of the room to ensure that there is no one else sitting in on the call or to clearly indicate and note who else is present.

- Guarantee that the evaluation setting is secure, confidential, and comfortable for the survivor.
- Ensure that there is enough storage on the camera/phone/tablet/computer for multiple photos. It must last the entire session.
- Fully charge the camera/phone/tablet/computer before the session. It should have enough battery to last the entire session.
- Clean the camera lens before the session.
- Become familiar with your camera settings. In most cases, the automatic settings on cameras are sufficient.
- Take a few test photos before the evaluation. Make sure:
 - \circ The object is in focus
 - Colors are accurate
- If the colors look poor during practice shots, you can use flash. However, ensure that the pictures taken in flash are not overexposed (i.e., that colors are not too washed out).
- Have a tape measure, ruler, or coin on hand, or ask the survivor to have one before the session.

Section II: Informed Consent

- Before taking any photos, proceed through the informed consent process to seek permission to take photos.
- Inform the survivor how the photographs will be taken and how they will be used.
- Explain any risks associated with forensic photography, including the potential for re-traumatization, or breach of privacy if the photos are lost or stolen.
- If a female survivor is being assessed, there should always be another female present among the evaluators when taking photos of injuries on the body.
- The survivor can decline the taking of photographs at any time.
- The survivor has the right to ask any questions.
- Consider what is a relevant amount of clothes to remove. Avoid exposing people unnecessarily.
- Continue to ask for informed consent throughout the photography process to ensure that the survivor does not feel pressured to continue.

<u>NOTE</u>: Informed consent is not a blanket approval – during the session, inquire before taking any photo whether you can proceed, especially if taking images of the face, sensitive anatomical parts, or other identifiable marks.

Section III: Taking the Photograph	Photograph all visible injuries, as well as the injuries the survivor reports. There are additional considerations for obtaining consent/assent from children as described in the instructional video on informed consent linked below.
Part A: How to Take the Photograph	 Use this standardized procedure while taking photos to ensure proper documentation. Use a ruler, coin, pen, or other object of known size to illustrate the size of the lesion. Ensure that the ruler or other object does not cover any scars in the photo. In all photos, make sure to write on the ruler or a piece of paper: the ID number/name of the survivor the date and time the ID number or name of the photographer the address where the photos were taken the number for each lesion/injury the number of the photo When showing the date and time: Digitally: Use the camera's automatic time stamp. Non-digitally: Show a newspaper, clock, or label with time in the photo. A newspaper will document that the photo was not taken before that date.

- Long Range: shows the injured portion in relation to the rest of the body.
- Medium Range: captures the injury and surrounding anatomical markers (e.g., joints, appendages). Must show the size of the injury and its location on the body.
- Close Range: focuses directly on the scar/lesion itself. Must show the color and shape of the injury. If there are several small injuries adjacent to one another, you don't have to take a photo of each of these separately.







Close view

Taking the Photograph	l						
continued	Part B: Coloring and Positioning		 Be sure that what you are photographing fills the whole field of view. Do not leave extra space on the top, bottom, or sides of the photo. Take photos in color. Natural light is preferred, but lamps and other light sources are acceptable to improve brightness. Adjust the lighting or try a different perspective to ensure that the wound is discernible from the surrounding skin. Be mindful of the individual's skin color during this process. Position the camera at 90 degrees from the body part being photographed to avoid distortion from angulation. Ensure that you can clearly see what part of the body is being photographed. Take pictures of important lesions from different angles to allow multidimensional analysis and to avoid lighting disturbances. Take pictures of survivors recreating their position (e.g. defensive posture) when sustaining injuries/ill-treatment in a full body picture to demonstrate the mode of injury. Photographs cannot show the faces of minors or survivors of sexual violence (except if strictly requested by the legal team). Blur noticeable features of the face such as the eyes, mouth, rest of face, noticeable tattoos, and other identifiable anatomical markers if the survivor does not want their identity revealed. As an alternative to identifying individuals with their faces, you can instead rely on a robust labeling system. Avoid taking images of genital injuries, unless absolutely necessary for the case. 				
	Part C: Confidentiality	•					
	Part D: Photography of Clothing		Photos can also be taken of the clothes that were worn on the day(s) when the witness was arrested and/or injuries were inflicted. Clothes may show evidence that violence or specific procedures took place (e.g., holes, blood stains, color marking, etc.)				
		 Use a ruler if you take pictures of clothes with stains and holes. Document the time, date, and the ID number/name of both the survivor a photographer (with their consent). If you wish to preserve the clothes, don't wash them. Preserve them in pap bags only (no plastic bags). Air is beneficial with this type of evidence. Follow processes for chain of custody for this type of evidence. 					
Survivors may a themselves. Prior to the inth have any of th Ask for conse disseminate th Record who to time and date photos were ta During the into also be asked	nt to collect, use, and hese photos. bok the photos, the , and where the		 Taking Photos with a Phone or Tablet Stabilize the device by holding it with both hands. It may be easier to stabilize your phone if you hold it horizontally. Leave the time and date settings on. Ensure the subject of your photo is in focus by centering it in the viewfinder. Stay in automatic mode and flash if there is no natural light. Try to take photos with the rear camera, where possible, i.e., do not use selfie mode, if possible. 		Longitudinal Photography Bruises may only appear some time after the injury was inflicted. Bruises may also change size (for example grow in size) and change color. In circumstances where the injury was very recently inflicted, it can be a good idea to photographically document the bruises again after a few days or ask the survivor to do that.		

Conducting remote evaluations entails additional considerations, such as ensuring robust protocols for storage, confidentiality, and guaranteeing security before and after the images are taken. Label photos numerically in the order they were taken. Section IV: • The file names of the photographs should NOT include the survivor's name. Labeling Use a numerical code associated with the survivor. Use a body diagram chart (available in Annex III of the Istanbul Protocol) to document and describe all lesions, scars, and injuries. Ensure that photo numbers and labeling correspond to the injury • documentation on the body diagram and on the affidavit. Include the siding (left or right) of the lesion or scar for close-up pictures using symbols: L (left) and R (right). Include a statement that attests to your presence during the photo-taking. This is especially important if you are receiving images the survivor took during the evaluation. • Do not edit or alter the picture after taking it. Section V: Do not edit or alter the file name or date after creating it. Storage • Secure all photographs, diagrams, and related documents in a secure, password-protected file offline or on a secure digital cloud. Use a locked cabinet for printed photos. Store evidence with a chain of custody form. (See example in attached form.) Document: Who took the original photo and when. 0 Anyone to whom the photo was transferred and when. 0 Store evidence in a space safe from theft and/or damaging elements. . Use encryption. If needing to send photographs by email, use encryption. If needing to print and send photographs, write the file number on the back of each photo, and send the photographs in a sealed envelope. See also the videos below for brief guidance on informed consent and on taking **Further** forensic photographs. While these were developed for securing informed Resources consent and for taking forensic photographs in cases of sexual violence in several African countries, they have useful instructions that apply more broadly: Guidance for informed consent/assent: https://phr.org/how-to-obtainmeaningful-informed-consent/ Guidance for taking forensic photographs: https://phr.org/what-isforensic-photography/ For more than 35 years, Physicians for Human Rights (PHR) has used science and the uniquely credible voices of medical professionals to document and call attention to severe human rights violations around the world. PHR, which shared in the Nobel Peace Prize for its work to end the scourge of landmines, employs its investigations and expertise to advocate for persecuted health workers and Physicians for facilities under attach, prevent torture, document mass atrocities, and hold those Human Rights who violate human rights accountable.

EVIDENCE COLLECTION CHAIN OF CUSTODY FORM

Case #:

Exhibit Reference #:

Date Collected:

Time Collected:

Description:

Location Where Found/Seized/Produced:

Collected By:

[PRINT FULL NAME(S) IN BLOCK LETTERS]

[SIGNATURE]

[TITLE AND AGENCY]

Transferred From:

[PRINT FULL NAME(S) IN BLOCK LETTERS]

[SIGNATURE]

[TITLE AND AGENCY]

Transferred To:

[PRINT FULL NAME(S) IN BLOCK LETTERS]

[SIGNATURE]

[TITLE AND AGENCY]

Time:

Date of Transfer: