

Penn professor urges physicians to help victims of torture seeking asylum

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Refugees seeking asylum in the United States are twice as likely to be granted protection if their application is supported by medical documentation of torture, writes Jules Lipoff, MD, an assistant professor of Clinical Dermatology at the Perelman School of Medicine at the University of Pennsylvania and two colleagues in the March 7, 2016 issue of *JAMA Internal Medicine*.

"Physicians are uniquely able to help victims of torture and trauma secure asylum status by providing a comprehensive evaluation," write Lipoff and co-authors Jenna M. Peart, MD, of Presbyterian St. Luke's Medical Center in Denver and Elisabeth H. Tracey, fourth-year [medical](#) student at the Perelman School of Medicine. "Physicians should directly and empathetically elicit a detailed history of any trauma and ask about the origin of all exam findings."

The United Nations' Convention against Torture forbids countries from transporting people to any country where there is reason to believe they will be tortured. As a signatory to the treaty, the United States grants asylum to individuals who demonstrate a credible fear of persecution in court.

When appropriate, forensic medical evaluations may be used to corroborate episodes of trauma. Asylum-seekers who receive medical evaluations along with legal support have success rates of 79 to 89 percent compared to the national average of 37.5 percent, suggesting that the medical assessments have a substantial effect on the application

process.

"In some cases, a forensic medical evaluation may mean the difference between an individual securing legal status and being forcibly returned to a country in which they face persecution and torture," say the authors in their letter to the editor.

Examples of findings during medical evaluations which could substantiate allegations of torture include scars compatible with whipping, an injury to the arms known as brachial plexus palsy causing significant loss of function, and bone fractures. The authors note that in one group of asylum-seekers, 69 percent had scars on their head and neck, 10 percent had scars on their genitals, seven percent had broken bones, and six percent had burn marks.

In the United States, official asylum evaluations comprise an oral history, physical exam, and review of records. Physicians record their findings in a medical affidavit, including thorough descriptions, photographs, and/or drawings. The affidavit is submitted as corroborating evidence in court. On occasion, the physician may also testify as an expert witness.

Noting that [physicians](#) can be trained to perform forensic evaluations in short courses and offer this service on a volunteer, part-time basis, the authors write that "physicians should consider this unique opportunity to defend [human rights](#)." Furthermore, Lipoff and colleagues "encourage all physicians to appreciate the far-reaching effects of these traumas on all victims of forced migration."

The Penn Human Rights Clinic, a medical student-run clinic dedicated to providing psychiatric and physical evaluations of survivors of persecution seeking asylum in the United States, provides such training. The program was founded in 2012 as a collaboration between Physicians

for Human Rights and medical students and physicians at Penn.

Provided by University of Pennsylvania School of Medicine

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