Psychologists Obtain Advanced Training on Human Rights Law and Evaluations of Torture Survivors

By George Hough, PhD, ABPP

The Physicians for Human Rights (PHR) Asylum Program hosted a workshop offering basic and advanced training for mental health specialists on the subjects of human rights law and the forensic evaluation of torture survivors. The workshop, titled “Aiding Survivors of Torture & Other Human Rights Abuses: Physical and Psychological Documentation of Individuals Seeking Humanitarian Protection in the U.S.,” was held March 31—April 1, 2012 in Boston, MA. The first full day of basic training was held at Tufts University School of Medicine in downtown Boston, and the second half-day of advanced training was held at the PHR headquarters in Cambridge. Workshop participants represented a broad array of the helping professions, including social workers, psychologists, psychiatrists, and physicians from various specialties (e.g., anesthesiology, family practice, pulmonology, rehabilitation medicine, psychiatry), as well as medical students from PHR student chapters.

This specialized training included: an overview of the PHR Asylum Network; immigration and legislative updates; case law and trends in asylum testimony; basic and advanced interviewing techniques with asylum clients; aspects of physical and psychological evaluations and documentation of the pathologies resulting from torture (i.e., evidence of “tribal markings,” female genital mutilation, and evidence of ritualistic torture); mock cross-examinations; an overview of the U.S. immigration detention system; and the foundations of scientifically-based evidence collection and documentation. All training was anchored in the Istanbul Protocol and in PHR's Guide to Medical and Psychological Evaluation of Torture.

The purpose of the training was to address a central problem occurring within the asylum system—that the current number of immigrants arriving in the United States who are seeking asylum from torture and persecution in their country of origin continues to rise. Accordingly, the population of asylum seekers formally detained in American detention centers rises at a proportionate rate. Approximately 1.2 million immigrants have passed through detention in the past three years, with the average length of stay at 30 days. Most detention centers are constructed far from an urban area, which adds to this population’s invisibility within American culture. Detainees have a right to legal representation, but not at the government’s expense. Eighty-four percent of detainees are thus legally unrepresented. As of September 2011, approximately 298,000 cases were pending resolution in Federal Immigration Courts.

A number of detainees are asylum seekers who arrive from countries where they have been subjected to the practice of torture and persecution for their political beliefs, or because of their membership within a discriminated group (i.e., race, religion, ethnicity, sexual orientation). As observed in The Istanbul Protocol: “Although international human rights and humanitarian law consistently prohibit torture under any circumstance, torture and ill-treatment are practiced in more than half of the world’s countries.” For some detainees, deportation to their country of origin places them at high risk for further harm. For those individuals seeking asylum due to prior persecution or the credible threat of future persecution and/or torture, obtaining a comprehensive medical and psychological evaluation that can objectively document and correlate current evaluation findings with reported trauma history is often vital to obtaining asylum in the U.S. To help address this need, PHR’s Asylum Network is comprised of over 450 health care professionals throughout the United States who provide pro bono psychological and physical evaluations to document evidence of torture and other human rights violations for men, women and children fleeing persecution in their home countries. The weight of these evaluations can often tip the balance between life and death.

Four core members of PHR’s training faculty provided the training. Christy Fujio, JD, MA is the Asylum Program Director for PHR and manages oversight of the Asylum Network and PHR’s efforts to protect the human rights of asylum seekers in the
United States through research, documentation and advocacy. Mike Corradini, JD, MA, is the Asylum Advocacy Associate at PHR. Mr. Corradini works with PHR’s asylum program and policy team to develop and advocate for positive changes to asylum law and the immigration detention system. Dr. Coleen Kivlahan, MD, MSPH, is senior Director of Health Care Affairs at the American Association of Medical Colleges and has extensive experience conducting forensic evaluations of political asylum seekers. She is also the recipient of the 2005 Pride in the Profession award from the Board of Directors of the American Medical Association Foundation. Dr. Joanne Ahola, MD is a board certified psychiatrist in New York City and is on the voluntary faculty of the Weill Cornell Medical College, where she serves as Medical Director of the Weill Cornell Center for Human Rights. Dr. Aloha’s special interests include evaluation and research with LGBT/HIV+ asylum clients. Ms. Kelly Holz is the PHR Asylum Coordinator and arranged all logistical details and training. Psychologists interested in learning more about the PHR Asylum Network should contact asylum@phrusa.org.

REFERENCES


Note: The Istanbul Protocol is a United Nations document published in numerous languages that is recognized as setting the international standard for such investigations. The Istanbul Protocol provides a set of guidelines for the assessment of persons who allege torture and ill treatment, for investigating cases of alleged torture, and for reporting such findings to the judiciary and any other investigative body.


Note: PHR’s evaluation and data collection techniques are grounded in the Istanbul Protocol, which is the internationally recognized standard for evaluations of torture and cruel and degrading treatment and is an official document adapted by the United Nations for such investigations around the world.


Article 2 of the Convention defines torture as: “…any act intentionally performed whereby physical or mental pain or suffering is inflicted on a person for purposes of criminal investigation, as a means of intimidation, as personal punishment, as a preventive measure, as a penalty, or for any other purpose. Torture shall also be understood to be the use of methods upon a person intended to obliterate the personality of the victim or to diminish his physical or mental capacities, even if they do not cause physical pain or mental anguish.” Cited in Manual on the Effective Investigation and Documentation of Torture and other Cruel, Inhuman or Degrading Treatment or Punishment. Submitted to the United Nations High Commission for Human Rights 9 August 1999” (p.7).


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