WHAT YOUR PATIENT IS THINKING

When your patient is a survivor of torture

Kolbassia Haoussou (@haoussou) explains what doctors can do to help refugees who have experienced torture

Kolbassia Haoussou

I arrived in the UK some years ago after I fled persecution in my country. I don’t want to share too much about my past but I am drawing on my personal experience and those of others like me—normal people forced into desperate situations because of torture. I was detained by the UK authorities after I tried to secure protection through the asylum process. After my release, and with the help of other refugees, I went to see a local doctor because I had headaches, I was bleeding, could not sleep, was having nightmares, and I needed help.

Explain your role

For many people like me, trusting any person in a uniform or any person who you think may be an official is very hard. After torture it is easy to lose faith in other human beings. I have had to learn to trust again. Don’t assume that people will trust you or understand why you are asking particular questions. Many survivors of torture will also have an active asylum claim and may fear that something said to a person in an official position will impact negatively on that claim. So it is important that doctors explain their role, and that any medical information shared in the appointment will not be passed on to those who make decisions about immigration status.

Luckily my doctor took the time to build a rapport with me. She turned to face me rather than staring at her computer screen. She explained to me about confidentiality. There was no judgment and no assumptions. These little things helped. She referred me to hospital where I underwent emergency surgery related to the bleeding.

Be careful what you ask us to disclose

Disclosing torture can result in flashbacks, nightmares, and can just make trauma worse. If I have come for help with a health problem, please only ask about things that are relevant to that specific problem, and explain why you are asking those questions. Continuity of care is helpful; if I have disclosed information to you before, it is important that you read my notes rather than asking me to remind you, so I am not forced to explain myself time and time again. It is hard to repeat painful experiences.

For some of us there is shame and stigma associated with disclosing torture, especially when the torture is sexual in nature. Asking people whether they would like to speak to a male or female doctor can help.

Help us find peer support

Our needs are complex. Our health needs may be physical, psychological, and more often long term. Our living conditions, poverty, and uncertain status and future in our new country are just a few of the other issues we face. Other survivors can help, so let us know about specialist rehabilitation services and groups of others who have been through similar experiences.

In the meantime, don’t judge us, treat us with respect and dignity, and listen to us carefully, as the reality is that we will not walk in with a sign saying “torture survivor.” If we hang our heads, come across as cold, or avoid eye contact, we are not being rude, we might just be embarrassed, we might just find it difficult to express ourselves, we might just be trying to cope, or we might just be from a culture where we are taught to avoid eye contact out of respect.

Treat me how you might want to be treated given a day in my shoes.

Competing interests: I have read and understood BMJ policy on declaration of interests and declare the following: I am the survivor advocate and network coordinator of Survivors Speak OUT (SSO), a group that I cofounded. I work for the charity Freedom from Torture, which supports and facilitates SSO. Since 1985 Freedom from Torture has been the only charity solely dedicated to the support and rehabilitation of survivors of torture who seek refuge in the UK.

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What you need to know

Be aware that it may be very hard for us to trust anyone who may be an official, and be clear about your role
Do not be afraid to ask us about torture if you think it has occurred, but don’t ask us to relive it by describing it for you
Tell us how to contact other survivors and organisations that can help us

Notes for international readers

Kolbassia Haoussou accessed care within the UK National Health Service, where medical advice and treatment is available free at the point of delivery. If care had not been free, he would not have been able to get help.
For more information on what constitutes torture and more resources for survivors, see www.freedomfromtorture.org/survivor-voices/7225

Further resources

For your patients
Survivors Speak OUT network, part of Freedom from Torture (www.freedomfromtorture.org/survivor-voices/7225)

Further reading
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