



COALITION FOR WORK WITH PSYCHOTRAUMA AND PEACE KOALICIJA ZA RAD SA PSIHOTRAUMOM I MIR

OUTLINE FOR TAKING A HISTORY (“ANAMNESIS”) IN MIGRANTS

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THIS VERSION IS FOR EDUCATIONAL PURPOSES ONLY

INTRODUCTION AND PURPOSE OF THIS DOCUMENT

This document is intended to outline the basic information that should be obtained from a migrant. There are several purposes for obtaining this information. The first is so that the migrant can be worked with in a professional way by psychologists, medical professionals, volunteers, and others. Another reason for this is legal. It is quite possible that, on the basis of the information obtained, the person could be able to obtain asylum or other legal benefits. The lack of such information frequently forms a barrier for the migrant obtaining the proper status.

We are very much aware of the time involved in taking a good history. It may take several sessions to gain the trust of the migrant or other traumatized person. The time involved is virtually always worthwhile.

We strongly urge you to work through Course 1 of Pragmatic Empowerment Training (PET), which is available without charge on the CWPP website. That course gives an introduction to working with people and to self-care.

Because of the issue of trust, there are questions as to who should be present at which stages. Ideally, there should only be the client, the person taking the history, and the interpreter. The presence of anyone else may lead to the inhibition of the client. However, the client may want a trusted person to be present, at least for parts of the history taking. In the later stages, at least, there should be an opportunity for the client to be alone with the person taking the history for a fairly substantial period. More information may then come out, which the client was embarrassed to talk about or that the client did not want anyone else to hear.

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Please inform us if you think that we've left something out and/or if you have other suggestions for modifying this document.

SOME POINTS ABOUT INTERPRETATION

The interpreter is a crucial person in the process of taking a history.

The person of the interpreter is quite important. S/he should not be related to the client in any way, that is, family, friend, co-resident of the accommodation, etc.

Further, the interpreter should be of the same ethnic group and religion of the client, or should be a foreigner from another friendly region or from abroad.

The interpreter should be of the same gender as the client.

Another point here is the experience of the interpreter. If the interpreter is not experienced in working with migrants or other traumatized people, s/he can get very upset by the process and be badly secondarily traumatized. Even experienced interpreters can be highly secondarily traumatized.

In this context, the interpreter should be briefed beforehand as to what will happen. This also is important so that the interpreter can look up words that s/he might not know. This process goes both ways, that is, that the interpreter gives the person taking the history some cultural background and perhaps knows more about the general situation in the client's region of origin.

The same sort of debriefing process should take place after each session. The person taking the history may have questions about the cultural aspects of verbal and/or non-verbal communication and about cultural and other situational aspects. Also, the interpreter may have questions. Further, it is very important to realize that the interpreter may be secondarily traumatized by what was said. Attention should be given to this, as it may be quite troubling for the interpreter.

Another point in this context is that interpretation is difficult and tiring work. Thus, the interpreter should not work more than 60-75 minutes without a break.

Still another point is how the conversation is carried out. Thus, both the person taking the history and the client should speak for short periods of only a sentence or two to allow the interpreter to take things in and to translate properly. This can be a learning process for the person taking the history, for the client, and for the interpreter.

Sometimes, interpretation can be done online or by telephone. This can make the process more anonymous. Also, there are more and more apps for phones and computers that also make it possible to interpret anonymously, although the quality of the translation is not always perfect. The method used for interpretation should be what the client feels most comfortable with.

ETHICS AND PRIVACY

We cannot emphasize sufficiently that the information obtained may not be released to any other person or organization without the *written* consent of the client.

If the information has been obtained using a translator or interpreter, that person also *must* agree to the same conditions. Further in this regard, the information must be translated into the client's mother tongue. This sometimes can be extremely problematic when there is inadequate interpretation available. Again, various apps may be useful, although the translations that they give are not always completely accurate.

BASIC DATA

- Name.
- Age.
- Where is the home of the person? Be as specific as possible.
- Specific ethnicity.
- Religion.
- Sexual orientation.
- Family.
 - Father, mother, sisters, brothers, children, wider family.
 - Where are these people?
 - Is the person in contact with these people? If so, how and how often?
- Education.
- Occupation.
- Work experience.
- Citizenship.
- What documents does the person have?
- How long has the person been underway?
- Current status in the region of origin.
- Current status in the region of residence.

EVENTS IN THE HOME REGION

- What happened to the person in the region of origin?
 - This information should be as detailed as possible. It may be necessary to obtain a minute by minute account of any torture, destruction of property, massacres, battles, etc. *This can be crucial for the person, and the more detail that you can obtain, the better.*
- What happened to the person's family, friends, and colleagues in the region of origin?
 - Again, as for the person him/her self, the more detail, the better.
- What has happened to people of the person's political views, religion, sexual orientation, ethnicity, etc. in the region of origin?
- How does the client view his/her fate if s/he were to return to the region of origin?

REASONS FOR DEPARTURE

This is self-explanatory. Again, this must be as detailed as possible.

EVENTS DURING THE JOURNEY

Again, this should be as detailed as possible. It should include each step in the process and a description of each incident along the way. Getting this information can take a very substantial amount of time.

EVENTS IN THE CURRENT REGION OF RESIDENCE

Again, this should be in great detail, including all actions by governmental bodies, by non-governmental organizations, by smugglers, and by others.

This should include legal actions as well as abuse.

It should include any actions that the migrant him/her self has taken.

Any available documents should be copied, and the data compiled into the report.

MEDICAL HISTORY AND CURRENT MEDICAL STATE

If possible, this part of the history taking should be carried out by a physician or other health professional, perhaps a nurse, who has had training from Amnesty International, the IRCT, or a similar organization. Unfortunately, there are few such physicians and nurses on the ground where they are needed. If you know of physicians or nurses interested in learning how to take these kinds of histories and giving these kinds of physical examinations, please contact us and we will attempt to organize a course for them.

It is beyond the scope of this document to go into the medical side too deeply. However, a few important points are as follows:

- This part of the history taking should be carried out by someone of the same gender as the client.
- The circumstances of this should be as formal as possible. However, if torture was carried out by a physician or in the presence of a physician or in a medical or similar setting, the environment should be as informal as possible. As few instruments as possible should be present.
- The medical history of the person in the region of origin before violence took place should be taken. This should include any diseases, injuries, operations, etc. It also should include the treatment obtained for these conditions.
- The medical consequences of any violence that took place in the region of origin should be noted. This can include torture, war wounds, etc.
- The medical consequences of incidents that took place along the journey should be noted.
- The current physical state of the client should be noted. Describe any symptoms, injuries, etc.
- What medications is the client using now? Who prescribed them and for what? If possible, let the client show you the containers and note them down.
- What substances, legal or illegal, not prescribed by a doctor should be noted. This can even include large amounts of coffee or tea or cigarettes, aside from other substances or drugs. Addiction, or even improper use of legal drugs, can be a substantial issue. Trading even of supposedly therapeutic drugs can create large problems.

If it is at all possible, have the client have a complete physical examination by a physician or other medically trained person educated to do these specific types of examinations. If there is no specifically trained person in the area, there is information available online as to how to carry out and report on such examinations. Also, there are several organizations, including ours, who are willing to train medical professionals to carry out and report on such examinations. Further, medical tests such as x-rays, blood tests, etc. should be carried out. Further, photos of any wounds or other relevant disfigurement, etc. should be made.

CURRENT AND PAST PSYCHOLOGICAL STATE

In our view, far too little attention is paid to the psychological state of clients. Furthermore, among many if not most migrants, work on psychological issues is highly stigmatized, particularly for males. Nonetheless, it is important for the client's psychological and physical wellbeing, and possibly from a legal standpoint, to obtain a clear picture of the client's past and present mental state. Such diagnoses, in some cases, can be the basis for a claim for asylum, especially if they cannot be treated in the region of origin. In our experience, virtually all migrants and other traumatized people have psychological reactions, whether or not they admit to them. Most of these reactions would be natural, considering the traumas that almost all migrants have experienced.

We urge all non-psychologically and/or medically trained people to obtain such training before working with clients on these issues. The CWWPP provides such training online with its Pragmatic Empowerment Training (PET) program if other training is not available locally.

It is important to get an idea of the client's psychological state before the violence in the region of origin took place and to identify pre-existing issues. Further, the person taking the history should ask how the violence in the region of origin affected the person and his/her family, friends, ethnic group, etc. and what psychological effects this had on him/her. Also, it is important to find out how the specific events that happened to the client in the region of origin, along the journey, and in the region of current residence have affected the client.

There is a difficult balance here. On the one hand, it may be a great relief to the client to finally get out what has happened and how s/he is feeling about it. On the other hand, this may retraumatize the client. The relationship with the person taking the history should be as long as possible. If the initial person taking the history is leaving quickly, s/he may want to ask someone who is staying for a longer period to take this part of the history and to follow up with the client. Also, in some cases, there may be possibilities to follow up with the client online. We consider this follow-up to be essential. We have seen too many clients get lost in the effort to do this work quickly.

OTHER INFORMATION

It is important to ask the client if there are any other issues that s/he feels need to be discussed. Often, these also have relevance for the legal situation and for the physical and psychological situation of the client.

REPORTING

We like to prepare an extremely detailed report for ourselves. Other reports for various purposes can be extracted from this.

We must note that each jurisdiction has specific rules and procedures and criteria. Thus, if the client is going for a hearing before a court or tribunal, a local judicial officer, that is, a local lawyer or other person with experience in the specific region, should be consulted to determine what should and what should not be included in the report. Groups like Amnesty International, the IRCT, and others have general guidelines, but local conditions may differ considerably from these.

FURTHER POINTS, CONCLUSIONS AND EPILOGUE

We strongly urge people taking histories to follow up clients, not only with their legal situations but also with their medical and psychological ones. This can be crucial and literally can save lives. We know of too many cases in which inadequate medical care has been given to migrants. We also know of a very large number of situations in which clients have been abused. Further, we know of a large number of situations of self-harm, suicide, and violence caused by frustration and despair. In this sense, the act of taking a history can be a sign to a client that there is someone in the wider world cares about what happens to him/her. That history also can form the basis for medical and/or psychological therapy.

We also have seen too many instances where the history taking has been inadequate. Thus, we urge you strongly to learn how to do this and to take the time required to take a detailed history.

If you have any comments or further questions, please do not hesitate to contact us.