

## G29 The Assessment of Refugees for Signs of Torture: An Italian Glimpse

Daniele M. Gibelli, MD\*, Laboratorio di Antropologia e Odontologia Forense, Sezione di Medicina Legale, Dipartimento di Scienze Biomediche per la Salute, V. Mangiagalli, 37, Milan, ITALY; and Marco Grandi, MD, Danilo De Angelis, DDS, and Cristina Cattaneo, PhD, Univ of Milan, Via Mangiagalli 37, Milan, ITALY

After attending this presentation, attendees will become acquainted with the medicolegal service for the assessments of refugees in Milan, and in detail, the limits that are usually encountered in the evaluation of signs of torture.

The presentation will impact the forensic science community by providing information in this sensitive and recent field of application of forensic clinical pathology.

Assessment of torture allegations is one of the most recent fields of application of clinical forensic pathology, which is often affected by specific diagnostic limits, especially for what concerns the assessment of scars and the reconstruction of their origin.

In Italy, specific committees actually exist for the recognition of the status of refugee, which only in the last year have begun to include forensic pathologists.

The goal of this presentation is to familiarize attendees with the signs of torture in an initial sample of refugees examined at the Institute of Legal Medicine of Milan in order to show the difficulties which are encountered in establishing a correct coordination between the different types of professionals involved in the specific committees and the pitfalls in the interpretation of lesions and scars.

Twenty-six cases have been assessed thus far between 2008 and 2012. Each alleged victim was interviewed and examined. Every scar and lesion was analyzed, especially those concerning morphology and size, and photographed. In several cases X-rays were taken, for a better understanding of bone calluses.

The final report concerning the consistency between lesions and the given history was performed according to the indications of the Istanbul protocol.

In most cases, the subjects came from African countries and a high number of them went through Libya during the civil riots. Almost all the subjects are male, and, in 56% of cases, they are aged between 20 and 30 years. Only in 32% of cases, the history revealed torture for political reasons, whereas in 28% of cases a history of random military aggression was given. Blunt and thermal lesions were most frequently reported (respectively 49% and 23%). Blunt lesions were most frequently performed by truncheons and wooden sticks (respectively 26% and 24%) and were observed on the limbs and the torso; thermal injuries were performed by torches (45%) and cigarettes (30%) and highly affected the limbs. Sharp force injuries were produced by knives in 70% of cases and were observed most frequently on the trunk. Gunshot lesions, dog bites, and chemical and blast lesions were present.

One of the most relevant results concerns the correlation between scars and the origin of the lesions reported by the refugee. In almost all cases, the analysis led to a general concordance with the presumed history, although other origins could not be excluded. In a few cases, the scars were highly suggestive for the reported history according to the existing literature and concerned specific modalities, such as thermal and sharp force lesions.

This presentation highlights the lack of information in literature concerning the correct assessment of scars and the need for further studies in this relatively recent and sensitive field. Another important point of discussion concerns the need for a correct coordination between the different professional figures involved in such committees in order to produce a useful and clear report of the alleged tortures. **Human Rights, Torture, Refugees**