



Standing with Health Professionals on the Front Lines

Physicians for Human Rights
2019 Annual Report

DR NTJENGA
GV health
INDICED

Standing with Health Professionals on the Front Lines

As we go to print, we are weeks into one of the greatest global public health crises of the last century. One thing that we've learned in these very challenging times is that there's so much we don't know about the COVID-19 pandemic and the long-term impacts it will have on our lives and institutions.

What we do know is that Physicians for Human Rights' (PHR) work is more critical than ever. The coronavirus crisis has highlighted squarely the central issues that PHR wrestles with every day: the critical importance of using science-based approaches, of protecting health workers, and of safeguarding the human rights of all people, but most particularly women and children, immigrants, refugees, detainees, and other populations at risk. As the pandemic erupted, PHR pivoted to bring the full force of our partnerships and global networks of medical professionals to address the COVID-19 crisis on many fronts, demanding protection for frontline health workers, advocating for migrant children and families at the U.S. border, in U.S. detention, and in refugee settings, and mobilizing the public and the medical community to insist that human rights be respected amidst the unfolding public health emergency.

As you will read in these pages, throughout the year, we continued to amplify the voices of health experts and scientists working at the intersection of medicine, science, and human rights, and to advocate on behalf of desperate asylum seekers at the U.S.-Mexico border, Rohingya refugees in Bangladesh, health professionals and civilians under attack in Syria and Yemen, survivors of sexual violence in the DRC and Kenya, and many others. In the face of ongoing assaults on human rights, we are keeping these issues in the eye of policymakers and the public and moving the needle on accountability and justice.

PHR's work is urgently needed, as never before. Thank you for helping us to support the courageous medical professionals and human rights defenders who dedicate their lives to upholding human rights for all.

Alan K. Jones
Board Chair

Donna McKay
Executive Director

Cover: A Kenyan doctor wearing protective gear to prevent coronavirus infection at Kenyatta National Hospital in Nairobi. Photo: Yasuyoshi Chiba/AFP/Getty Images

Right: Doctors test each other for coronavirus at St. Barnabas Hospital in New York. Photo: Misha Friedman/Getty Images

The  INDEPENDENT

"[In Yemen], the prospects are very bleak – Yemenis are far more vulnerable than any other population in the region."

Rayan Koteiche, PHR Researcher, Middle East and North Africa





THE
Nation.


"From an epidemiological perspective, you want to minimize the number of people in those detention facilities.... Keeping people in these crowded and dirty conditions, whatever the justification, is a terrible policy from the perspective of public health."

Dr. Christopher Beyrer, PHR Advisory Council Member

The New York Times

"Health care workers are working diligently to keep the pandemic at bay.... The keys for the public are social distancing and staying at home."

*Dr. Vidya Kumar Ramanathan,
PHR Asylum Network Member*



A mother from Guatemala is reunited with her four-year-old son after they were separated for a month when they crossed into the United States.

Photo: Joe Raedle/Getty Images

MOVE ON

"Children and families that are seeking asylum in the U.S. are pursuing their legal rights. They have a legal right to seek asylum. That means that they should be treated with respect."

Sural Shah, MD, PHR Asylum Network Member

The INDEPENDENT

"Family separation has not ended, nor have all separated families been reunited.... [The Trump administration must] immediately reunite families, including deported parents, and end this deplorable family separation practice for good."

Donna McKay, PHR Executive Director

The Devastating Impact of U.S. Immigration Policies

The Trump administration's brutal enforcement of family separation and its crackdown on migrants and asylum seekers has precipitated a full-blown human catastrophe at the U.S.-Mexico border. PHR has mobilized thousands of medical professionals around the country to document this emergency and take action against these cruel and inhumane policies. Bringing our unique medical perspective to the issue, we published five major reports and a wide range of products on the dire impacts of U.S. asylum policies that were picked up by the world's most influential media. Our "No More Watching and Waiting" campaign gathered more than 60,000 signatures to demand an end to these appalling practices.

Through our work at this extraordinary moment in history, PHR has galvanized a whole new cohort of medical and other health professionals to use their training to advocate for human rights. We have had a surge of interest from medical schools to host PHR asylum clinics, where the next generation of medical professionals are being trained to put the defense of human rights at the core of their careers. Through our student chapters and Asylum Network of more than 1,700 doctors, nurses, and other health professionals, we rallied protesters in front of the White House to end the detention of children and brought our research and data to the highest levels of domestic and international policymaking. Our doctors testified on Capitol Hill, provided critical inputs to U.S. legislation, and presented our findings to the United Nations Human Rights Council in Geneva. Across the globe, PHR is helping to awaken and build the advocacy voices of health professionals, amplifying their power to lead in this struggle for human rights and dignity.

The New York Times

"Doctors, who have a moral and ethical obligation and duty to care for patients, are actively being prevented from carrying out the practice of medicine as they've been trained to practice it."

Kathryn Hampton, Senior Officer, PHR Asylum Program


Vidya Kumar Ramanathan, MD, MPH A Witness to U.S. Cruelty

PHR Asylum Network Member Vidya Kumar Ramanathan, MD, MPH is an emergency room pediatrician in Ann Arbor, Michigan and a medical consultant for Freedom House Detroit, where she has conducted more than 350 forensic medical exams for asylum seekers since 2006. Dr. Ramanathan recently travelled to Matamoros, Mexico to examine the harmful conditions faced by migrant children and families forced to wait there by U.S. immigration policies.

"When I walked through the border tent encampments in Matamoros, Mexico, I was struck by the sheer number of families I found crowded together there. These cramped conditions naturally lead to medical, public health, and human rights hazards. Worried mothers recounted stories of terrible violence they had fled as a driving force to make the grueling 1,500-mile journey to the United States, where they hoped to find safety for their children. Now, because of the Migrant Protection Protocols (MPP), they were facing unexpectedly harsh conditions on the Mexican side of the border. One mother cried to me about her fear of being raped in the tent: sexual violence, kidnappings, and killings are rampant in the region. Another mother bemoaned the poor health of her children exposed to the elements, and worried about whether they would survive their wait for asylum. A third mother brought her child for evaluation, as he could not sleep or eat after witnessing a relative's murder; the camp had no way to support his severe post-traumatic stress. As PHR partners and human rights advocates, we must speak out against the cruel MPP rule, as we see that it violates the basic human rights of these asylum seekers. We must challenge all policies that violate our values and principles. Our humanity depends on it."

Dr. Vidya Kumar Ramanathan meets with a father and child from sub-Saharan Africa in Detroit, Michigan, where she conducts pro bono forensic medical evaluations of asylum seekers.





Not Just Trauma, Torture

PHR's ground-breaking report "You Will Never See Your Child Again" provided the first medical and psychological evidence of the long-lasting harm caused by the U.S. government's forcible separation of asylum-seeking families. PHR clinicians found that nearly all the children and parents evaluated in our study had signs and symptoms of post-traumatic stress disorder, depression, and anxiety – up to a year after they had been reunited. Our evidence, cited in major domestic and international media and solicited by lawmakers on Capitol Hill, showed the administration's ongoing family separation practices for what they are: cruel, inhuman, and degrading treatment – and, in all the cases PHR evaluated, enforced disappearance and torture. We are continuing to galvanize health professionals and to advocate at the highest levels on behalf of the more than 5,500 children forcibly taken from their parents under the ongoing and despicable U.S. government's family separation practices.

theguardian

"As a clinician, nobody was prepared for this to happen on our soil. It is beyond shocking that this could happen in the United States, by Americans, at the instruction and direct intention of US government officials."

Dr. Ranit Mishori, PHR Senior Medical Advisor



Los Angeles Times

“We need to hold the U.S. government accountable not just for the deaths that occur of immigrants in their custody, but also for the neglect and abuse that can lead to or exacerbate serious health problems.”

Dr. Altaf Saadi, PHR Asylum Network Member



Amy J. Cohen, MD

Exposing the Toxic Stress of Family Separation

PHR's expertise on the impact of U.S. policies on asylum seekers has been sought out by policymakers at all levels of government. In July 2019, PHR Asylum Network member and child psychiatrist Amy J. Cohen, MD testified before Congress on the treatment of migrant children arriving at the U.S. southern border.

“These children are coming because of the terrifying, life-threatening conditions they face in their home countries, where their local agencies of government can’t or won’t protect them.... Unfortunately, our policies of removing these children from their family and subjecting them to protracted detention pile trauma upon trauma. The results can be devastating. The terrible toll exacted on children when separated from their parents is the most extreme trauma that a child can endure. It often results in something we call “toxic stress” – a condition which impacts many systems of the body, the brain, and the mind, and can lead to irreversible damage, even early death.”

Testimony submitted for the record by Amy J. Cohen, MD to the Senate Democratic Policy and Communications Committee, July 23, 2019

Left: A Honduran father and his six-year-old son, who were separated for 85 days after they crossed into the United States. Photo: Mario Tama/Getty Images

Above: PHR Asylum Network Member Amy J. Cohen, MD testifies before Congress on the impact of U.S. border policies. Photo: Senate Democratic Media Center

Dispelling Myths about Migrants

In the face of the U.S. administration's egregious vilification of asylum seekers, PHR undertook a study of children fleeing their home countries to seek safety in the United States. PHR's report "There Is No One Here to Protect You" showed that children arriving at the U.S.-Mexico border are escaping intense violence and trauma and deserve to have their asylum claims heard. The study drew widespread domestic and international attention and helped counter false narratives about migrant children and families.

Trauma Among Children Seeking Asylum in the United States

Types of violence experienced:



78%

Suffered direct physical violence



71%

Suffered threats of violence or death



18%

Suffered sexual violence



59%

Witnessed acts of violence

Consequences of Violence against Children Seeking Asylum in the United States

More than three quarters of children were likely or diagnosed to be suffering from at least one major mental health disorder. Of these, the most common were:



64%

Post-traumatic stress disorder

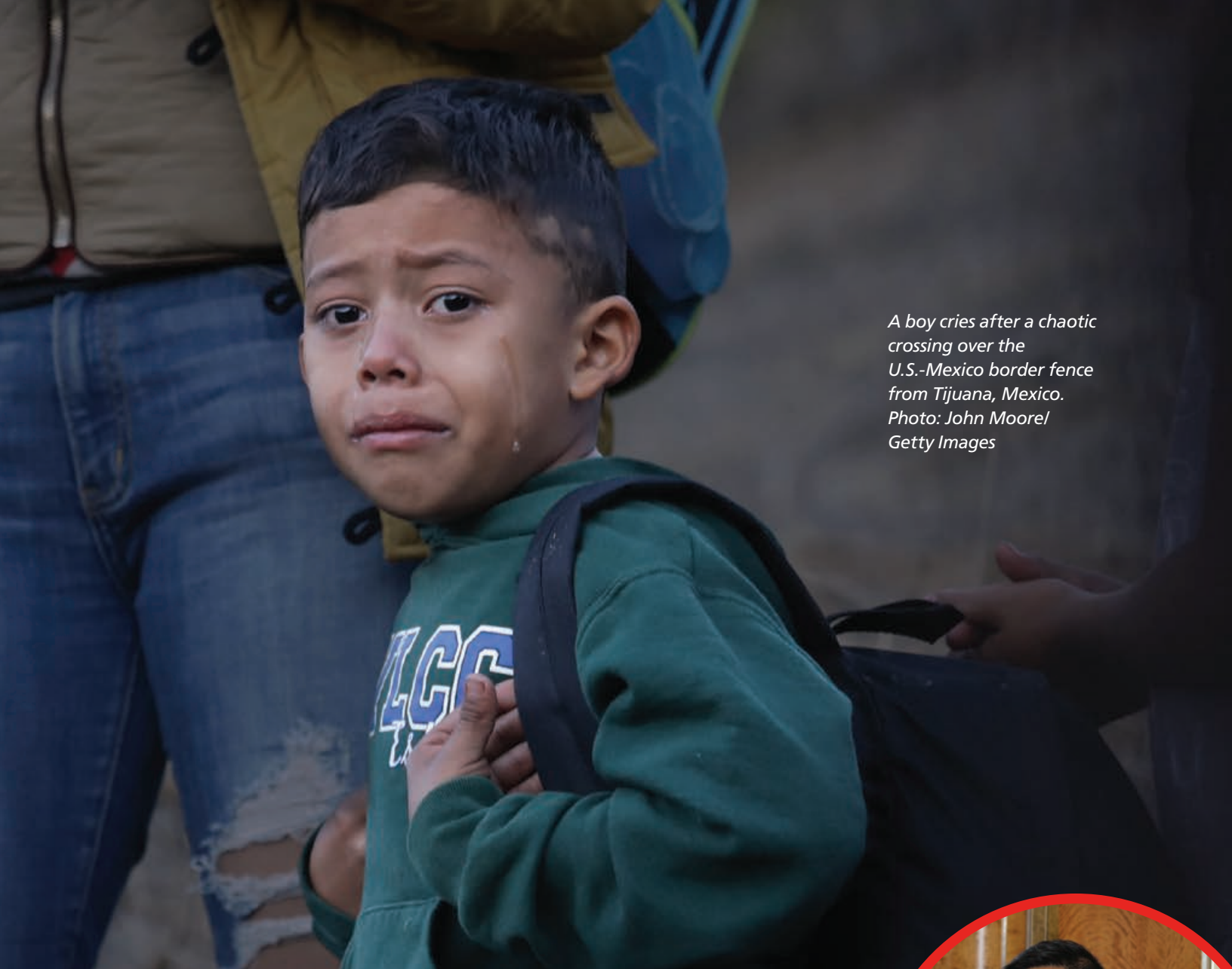
40%

Major depressive disorder

19%

Anxiety disorder

Sources: Data from 183 children evaluated by Physicians for Human Rights Asylum Network experts between 2014 and 2018.



*A boy cries after a chaotic crossing over the U.S.-Mexico border fence from Tijuana, Mexico.
Photo: John Moore/ Getty Images*

Joseph Shin, MD

Holding the U.S. Government Accountable

Joseph Shin, MD, PHR Asylum Network member and co-director of the Weill Cornell Center for Human Rights, authored PHR's 2019 study of trauma among child asylum seekers from Central America, which found that the vast majority had experienced direct physical violence, and more than three quarters were likely or diagnosed to be suffering from major mental health disorders. We invited Dr. Shin to present his findings at the United Nations Human Rights Council in Geneva, where his deep expertise gave him a new platform as a powerful advocate for this highly at-risk population.

"Going to Geneva at first felt like a steep learning curve. But when I delivered my speech to a room full of representatives from permanent missions, I knew that we had taken one step in a larger process. We documented what is happening in the United States and brought our evidence to the global stage. Governments were listening. We were holding our own government accountable in the community of nations, in order to prevent these unjust U.S. policies from setting a precedent for other nations and to maintain a moral clarity and focus on the wellbeing of children first and foremost."



PHR Asylum Network Member Joseph Shin, MD presents PHR's findings on trauma among child asylum seekers at the Human Rights Council in Geneva.

When Being a Doctor Is a Crime

After nearly a decade of brutal conflict in Syria, PHR's critical work documenting the government's relentless attacks on civilians has become a key element in global efforts to secure accountability for these heinous crimes. UN monitoring and accountability mechanisms and NGOs rely on our meticulous documentation of assaults on health facilities and personnel by the Syrian government and its Russian allies. The data is cited regularly by key policymakers and has been featured repeatedly in top global media, keeping attention focused on the regime's serial and flagrant violations of international law. In August, Director of Policy Susannah Sirkin took our data to the United Nations Security Council; her rebuttal of the Russian representative's cynical denials of complicity and culpability in the attacks made headlines around the world. Following that impassioned testimony, Security Council members urged the Secretary-General to launch an investigation into the bombings of civilian infrastructure. Within two days, the Secretary-General initiated a Board of Inquiry and a conditional ceasefire announced by the Syrian government went into effect, temporarily reducing hostilities in the country's northwest region.

With the acceleration of prosecutions in other countries against alleged war crimes in Syria, attention is also focused on the vast numbers of detentions, torture, enforced disappearances, and deaths of people in Syrian government custody.

In 2019, we took an international team of doctors to Turkey to interview survivors of the Syrian government's brutal detention system. Our report "My Only Crime Was That I Was A Doctor" is the first investigation to document the Syrian regime's purposeful and illegal strategy to specifically target health workers for arrest, detention, and torture; its release was front-page news in major global media. Ahead of the report's launch in Berlin and New York, PHR convened a high-level meeting in Berlin of Syrian NGOs, doctors, and some of the world's leading justice and accountability organizations working on the issue of attacks on health care in Syria. As PHR conducts cutting-edge advocacy that holds the best promise for impact, we are also ensuring that those working on this issue align our efforts and develop strategies that have the best chance of bringing accountability and justice for the Syrian people.

Through our research, advocacy, and extensive partnerships on the ground in Syria and around the world, PHR is revealing the truth and moving the needle of accountability for the atrocious human rights abuses perpetrated by the Syrian regime and its Russian allies.



Michele Heisler, MD, MPA A Shared Oath to Care for All

PHR Medical Director Michele Heisler, MD, MPA has volunteered with PHR since she was in medical school, when she participated in a human rights investigation in Turkey in the 1990s. A lifelong human rights activist, Dr. Heisler has authored dozens of PHR reports and medical journal articles. She recently traveled with a team of PHR doctors to Turkey once again, this time to interview Syrian medical workers who were detained and tortured by the Syrian government during the country's bloody nine-year conflict.

"The Syrian health workers we interviewed chose daily to provide desperately needed health care, medicines, and medical supplies under incredibly dangerous circumstances. A surgeon described his fear operating on a demonstrator with a bullet lodged near his spine. He also worried about being detained and tortured for providing care. He saved his patient's life. But he was indeed later detained and tortured. As a physician myself, I've tried to imagine being brutally tortured for fulfilling my duties to provide medical care to all who need it. I took the same oath as these Syrian physicians and other health workers, but would I have the courage to pay the price they did to honor these oaths? The suffering inflicted on them is unfathomable. Their moral courage and persistence are inspiring."

*PHR Medical Director Michele Heisler, MD, MPA, speaking with a Syrian pediatrician who was brutally tortured by Syrian security forces for providing medical care to all sides.
Photo: Diego Cupolo for Physicians for Human Rights*



A Syrian paramedic who was detained and tortured by Syrian security forces, who accused her of providing medical assistance to combatants and supporting "terrorists."

THE LANCET

"I don't see any end to the widespread impunity for these egregious violations of international humanitarian law. The intention of the Syrian regime is to make delivery of health care a crime and to criminalise doctors for treating people."

Susannah Sirkin, PHR Director of Policy

“These attacks are not unfortunate side effects of the war but have become crucial parts of the Syrian military’s strategy. In our assessment, over 90% of these incidents are attributable to the Syrian government and its affiliates, including militias and Russian allies.”

Rayan Koteiche, PHR Researcher, Middle East and North Africa





Dr. Ahmed, MD*

Bearing Witness to Achieve Justice

Dr. Ahmed is one of the thousands of Syrian health workers who have been detained and tortured – some even killed – by the Syrian government during their country's eight-year conflict – simply for carrying out their professional duty to care for all, regardless of political affiliation. An orthopedic surgeon, Dr. Ahmed was arrested by Syrian security forces in 2011 while caring for a patient at his hospital in Idlib. "They took me in my lab coat, took me in front of my colleagues, in front of my patients, like a common criminal," he told PHR researchers. He was detained and tortured for four months, accused of supporting "terrorists" and working against the regime. Now a program officer for a German medical aid organization based in Turkey, Dr. Ahmed said that it is critical for survivors to speak out about their experiences in order to secure justice for those persecuted, harmed, and killed by the Syrian regime.

"When PHR asked me to provide my testimony, I didn't have any faith in international justice. But one of my colleagues encouraged me to participate. She is American and her mother is a Holocaust survivor. She told me to never give up and told me, 'It took us a very long time to prosecute those who tortured us and killed our families.' After hearing this, I decided to participate in PHR's research. It is crucial for our stories to be documented. There are currently many extremist groups that emerge where dictatorships flourish. They are recruiting the young generation by promising them justice through pursuing revenge. By providing my testimony to PHR and documenting these stories, I can show my children that one day we will achieve justice and accountability. I am protecting my children from falling victim to the rhetoric of extremist groups. This is an effort all people should contribute to."

*Last name omitted for security reasons

Left: The entrance to Kafr Nabl Hospital in Syria's Idlib governorate, which was put out of service by Russian airstrikes in May 2019. Photo: Omar Haj Kadour/AFP/Getty Images

Above: Syrian surgeon Dr. Ahmed speaking at the New York launch of PHR's report on the detention and torture of Syrian medical workers.



AP Associated Press

"Disproportionate and excessive use of tear gas, rubber bullets, and live ammunition by security forces are critically injuring Sudanese citizens who are exercising their legal right to peaceful demonstration, causing serious long-term health risks and, in some cases, even death."

Dr. Rohini Haar, PHR Medical Expert

Medical Workers on the Front Lines of Sudan's Revolution

The ouster of longtime Sudanese dictator Omar al-Bashir and the formation of a new transitional government in the spring and summer of 2019 was an extraordinary testament to the power of civil society, including health professionals, in promoting human rights, justice, and peace.

From the start of the dramatic protests that brought about this transition toward civilian rule, Sudan's medical professionals were at the forefront of the protests calling for human rights and an end to corruption, but also of attending to the injured. The government's ruthless security forces responded by arresting and detaining dozens of heroic doctors, attacking medical facilities, and targeting, injuring, and even killing health workers who were carrying out their medical duties or participating in the protests.

PHR has a long history of work in Sudan, where we began investigating the al-Bashir government's genocidal assault in the province of Darfur in 2004. When this latest crackdown occurred, we quickly reached out to our Sudanese medical networks to get first-hand, real-time reports from health professionals in the heart of the protests. Our report "Intimidation and Persecution" showed that security forces committed gross violations of human rights using unnecessary, disproportionate, and sometimes lethal force, and by targeting, imprisoning, and killing medical personnel. We took our evidence to the United Nations Human Rights Council in Geneva, and our in-depth research made us a go-to organization for updates on the Sudanese crisis.

When paramilitary forces opened fire on a peaceful sit-in in Khartoum, killing dozens of people and injuring more than 200, we called on the UN to open an independent investigation into the bloodshed and launched our own investigation into the attacks. We are continuing our work to expose evidence of human rights violations, support our medical colleagues on the ground, promote truth-telling, and keep international attention on the need for accountability and long-term monitoring of Sudan's evolving situation.

Left: Sudanese medical workers rallying in Khartoum in May 2019. Medical professionals played a key role in nationwide pro-democracy protests that helped end 30 years of dictatorship. Photo: Ashraf Shazly/AFP/Getty Images

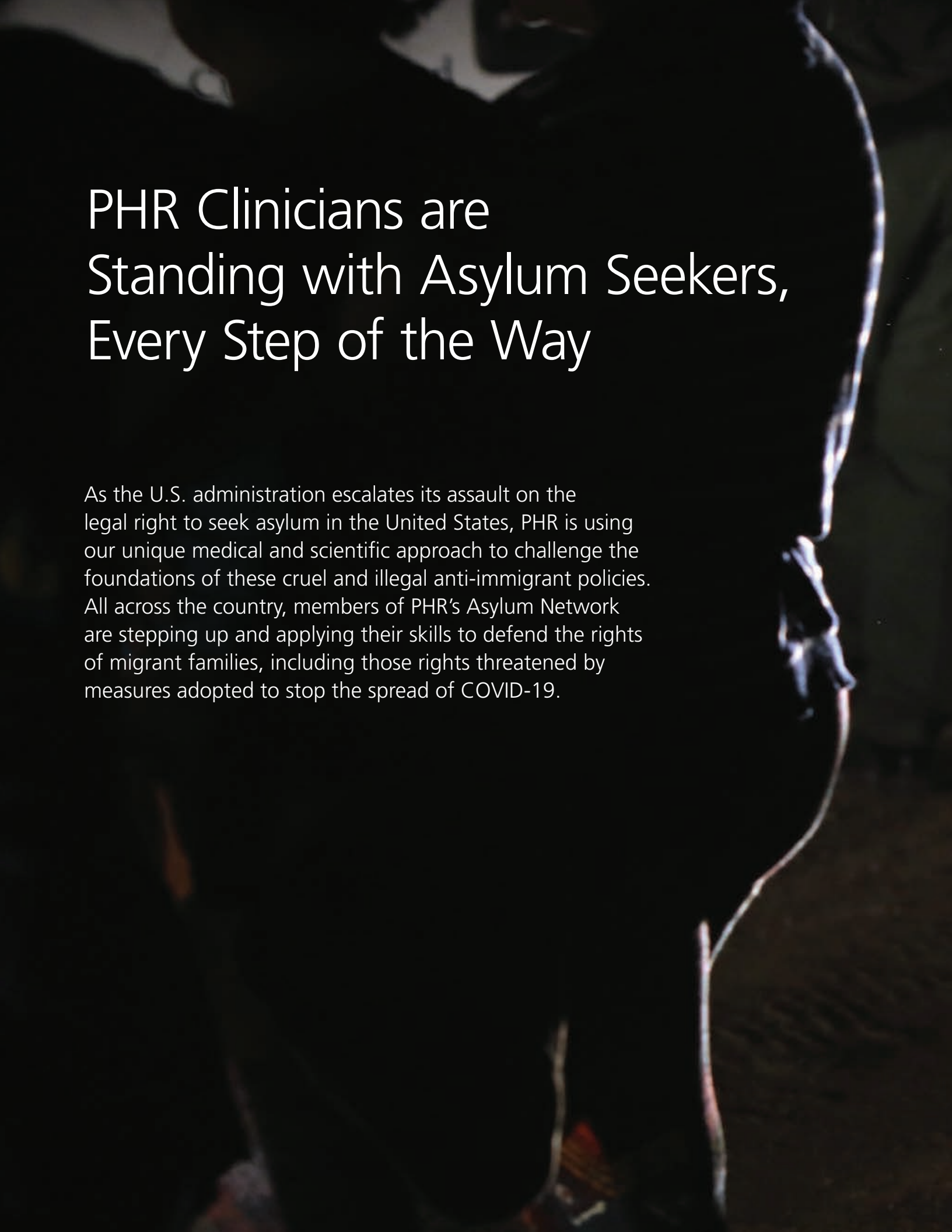
A Sudanese Medical Colleague The Power of Scientific Documentation

When Sudanese security forces opened fire on June 3, 2019 on a peaceful pro-democracy sit-in in Khartoum, PHR launched an investigation to gather evidence of the killings, violence, and other human rights abuses that occurred. Sudanese medical and academic researchers working with PHR documented multiple incidents of security forces unlawfully harassing, intimidating, and detaining health workers who were administering care to injured protesters, as well as targeted violent attacks on facilities where health workers were treating injured protesters. A Sudanese medical colleague who collaborated with PHR in documenting the violence, and who must remain anonymous for security reasons, told us:

"Doing this investigation for PHR was deeply meaningful. You have gotten me so excited about this work that I want to continue this kind of documentation – scientifically documenting, with informed consent, so that this cannot happen again in our society and so that victims can obtain justice. I want to thank you for the opportunity – I'm very grateful. I know that most of the people whose stories I documented, they are grateful, too, to be heard."

Sudanese health workers take part in pro-democracy protests outside the army complex in the capital Khartoum in April 2019. Photo: Ashraf Shazly/AFP/Getty Images





PHR Clinicians are Standing with Asylum Seekers, Every Step of the Way

As the U.S. administration escalates its assault on the legal right to seek asylum in the United States, PHR is using our unique medical and scientific approach to challenge the foundations of these cruel and illegal anti-immigrant policies. All across the country, members of PHR's Asylum Network are stepping up and applying their skills to defend the rights of migrant families, including those rights threatened by measures adopted to stop the spread of COVID-19.

At Border Crossings

PHR doctors are documenting the cases of asylum seekers who are fleeing extreme violence and trauma and are being denied the right to have their asylum claims heard promptly.



"The amount of time asylum seekers spend waiting, whether in detention or in a setting where they feel unsafe, is often correlated with an increase in complex physical and mental health problems."

Mary Cheffers, MD, PHR Asylum Network Member



"The U.S. government's policy of keeping asylum seekers waiting in limbo is dangerous for children. It deprives them of the stability and safety that they need to stay healthy and heal."

*Sural Shah, MD, MPH
PHR Asylum Network Member*

In Migrant Camps in Mexico

Our doctors are exposing how punitive U.S. policies like the Migrant Protection Protocols and the "Third Country" asylum rule egregiously obstruct the right to seek asylum and subject asylum seekers to further trauma.

"Thousands of children and their parents are stranded in makeshift camps at the U.S. border, in unsanitary conditions, and without adequate food, access to clean water, or medical care. As a physician, I know the serious toll that harsh rules like 'Remain in Mexico' can take on asylum seekers' physical and mental health, and how U.S. policies are exposing people in already vulnerable situations to further violence, extortion, and other physical and psychological trauma."

Ranit Mishori, MD, PHR Senior Medical Advisor

In U.S. Immigration Detention

Courageous whistleblower doctors are speaking out about the dire and dangerous conditions in U.S. immigration detention.



"Physicians have an obligation to notify authorities of imminent threats of harm to children. When our warnings to Homeland Security went unheeded, the ethics were clear: we were duty-bound to notify congress. We had insider information about harmful conditions that had been hidden from Congress and the public."

*Scott Allen, MD, FACP, PHR Expert Medical Advisor
and 2019 PHR Gala Honoree*



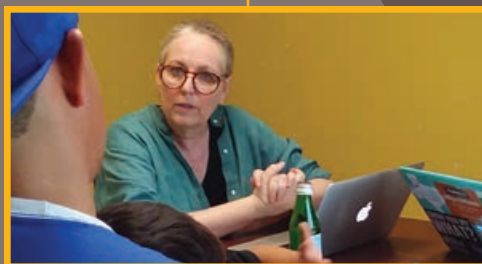
"The separation of families and detention of toddlers are wrong. I have witnessed the trauma children experience in detention and I know that trauma impacts their lives long after they are released. We have the obligation to sound the alarm when we learn that people are being harmed."

*Pamela McPherson, MD, FAPA, Medical and
Psychiatric Expert and 2019 PHR Gala Honoree*

Tijuana, Mexico

Dilley, TX

Matamoros,
Mexico



In Health Care Facilities

PHR partners are showing how harsh and discriminatory immigration enforcement actions are violating patient rights and obstructing migrants' access to critical medical care.



"Since 2016, U.S. immigration enforcement actions in or near hospitals, clinics, and other health care facilities have increasingly compromised patient care and threatened the health of immigrant women, men, and children. It's critical that health care facilities actively counter these accelerating threats. Immigrants must be able to access health care and other important social services without fear of deportation."

*Altaf Saadi, MD
PHR Asylum Network Member*

Detroit, MI

Boston, MA



Across the Country and in Immigration Court

Our doctors provide medical and psychological evaluations that bolster asylum seekers' applications to win safe haven in the United States.

"As an ER pediatrician and through my training with PHR, I realized that I could use my skills in recognizing the signs of trauma to make a real difference in people's lives, and to support their efforts to obtain asylum and the safety they so desperately need."

*Vidya Kumar Ramanathan, MD, MPH
PHR Asylum Network Member*



"If you have a physical or psychological evaluation which shows that your injuries, whether they be mental, physical, or both, are consistent with what you say happened to you in your home country, having that evidence backed up by a licensed and experienced clinician increases your chances of getting asylum up to 90 percent."

*Katherine Ratzan Peeler, MD
PHR Asylum Network Member*

Washington, DC

Area Enlarged

Geneva, Switzerland

N

Map Key



- Actions in the United States
- Actions outside the United State



On Capitol Hill

PHR clinicians are providing critical science-based data to key legislators and policymakers to help change unjust and illegal U.S. immigration policies.

"As a medical expert, I regularly witness the dire impacts of the MPP [Migrant Protection Protocols].... I have seen how the MPP puts the mental and physical health of asylum seekers at grave risk, allowing harm to be inflicted upon a population that has already experienced severe levels of trauma.... Each day that asylum seekers are forced to wait in these precarious settings compounds the massive trauma that forced them to flee their homes to seek safe haven within our borders. This situation can quite literally be a threat to their lives."

*Todd Schneberk, MD, PHR Asylum Network Member,
from his testimony before the House Homeland Security
Committee, Subcommittee on Border Security*



At the United Nations

PHR doctors are bringing a unique and critical medical voice to international debates about immigration policy and ensuring the world knows that the medical community in the United States is standing up for the rights of asylum seekers.

"There's a growing child rights crisis at the U.S.-Mexico border. Violence is a major factor driving children and families to seek refuge. Harsh border enforcement will not serve as an effective deterrent and will only cause more harm to an already traumatized population.... Prioritizing security over life endangers us all."

*Joseph Shin, MD, PHR Asylum Network Member,
from his oral statement to the 41st regular session
of the United Nations Human Rights Council*



Innovating to End Sexual Violence

PHR's witness protection technology has been a critical tool in enhancing security for survivors of sexual violence and their families in the Democratic Republic of the Congo.

When a military court there tried militia leader Frédéric Masudi Alimasi for leading a six-month reign of terror in villages in North Kivu – including rape, murder, torture, and sexual slavery – dozens of witnesses braved threats and intimidation to come forward to participate in a justice process. PHR's ViVoMo voice modification technology – which we first piloted in the landmark Kavumu child rape trial in 2017 – and head-to-toe coverings allowed witnesses to testify in anonymity and helped to reduce safety risks. In November 2019, Alimasi was sent to prison for life, and two other militiamen were sentenced to 15 and 20 years. The judges also held the Congolese state responsible for failing in its mission to protect civilians and ordered it to pay reparations to 307 victims who were civil parties to the case, as well as to provide medical care for some 170 survivors of sexual violence. Together with our partners, PHR is continuing to innovate so that victims and witnesses can secure essential protections while courageously seeking justice and accountability.



"We need to shift the stigma away from the survivor and put it on the perpetrator."

Karen Naimer, PHR Director of the Programs

Upper right: Members of Kenya's Survivors of Sexual Violence Network, which PHR honored with its 2019 Physicians for Human Rights award.

Click Here to Access Justice for Survivors

PHR's award-winning mobile app, MediCapt, has had an exceptional year. After the app won the "Frontlines of Health" award at MIT Solve in September 2018, the World Bank Group and the Sexual Violence Research Initiative honored MediCapt with its 2019 "Development Marketplace Award for Innovation in the Prevention and Response to Gender Based Violence." The trailblazing app – which helps clinicians collect and document evidence of sexual violence, safely store it, and securely transmit it to police, lawyers, and judges involved in prosecuting sexual violence crimes – also won the New England Business Association's New England Innovation Award in the nonprofit category and was recognized as the 2019 Science and Human Rights Innovator by the Science and Human Rights Coalition of the American Association for the Advancement of Science. MediCapt, it said, "best exemplified the Coalition's values: collaboration, evidence-based advocacy, innovation, and positive impact on human rights."

Developed through a collaborative design process with our partners in the Democratic Republic of the Congo (DRC) and Kenya, MediCapt started being used in patient evaluations in Kenya in 2018. In 2019, we partnered with Dropbox to strengthen the security of the system. It will start being used with patients in the DRC in 2020.

A Primer on How to Prevent Sexual Violence

In Kenya, elections have frequently been marked by deadly violence, sexual assault, and serious human rights violations and abuses: following presidential elections in 2007, 900 women, girls, men, and boys were sexually assaulted during a two-month wave of violence. PHR's Kenya-based team has been working to improve the documentation and prosecution of cases of sexual violence in Kenya since 2011. In 2019, with our partners at UN Women and the Office of the UN High Commissioner for Human Rights, we launched an investigation to determine how and why the Kenyan government has failed to protect its citizens from election-related sexual violence; our report showed that while Kenya has made institutional and legislative improvements, serious gaps and shortfalls allowed a fresh surge of sexual assaults during the 2017 elections. With the general elections scheduled for 2022, we are working with the Kenyan government and other stakeholders to ensure that all in Kenya are able to vote safely and to live free from the fear of sexual violence.



Ruth Ngugi, Senior Nurse

Fighting Sexual Violence with a Tablet in Her Hand

Ruth Ngugi, a senior nurse in charge of the accident and emergency department, is one of 13 PHR partners who are pioneering the use of our MediCapt app at Kenya's Naivasha County Referral Hospital. Closely involved in co-designing and piloting the app, Ngugi speaks about how working on MediCapt has helped her to be a better advocate for survivors of sexual violence.

"PHR's app MediCapt has changed my attitude towards attending to and understanding the experiences of survivors of sexual violence. It promotes best practices, like ensuring the patient gives informed consent, and it has helped me to avoid some errors in that it will not accept incomplete data. It has also motivated me to do more for the survivors because it strengthens evidence – aside from documenting a patient's history, laboratory findings, and results of the physical examination, it also has provisions for

forensic photography. This definitely improves the quality of evidence that I collect and, in turn, helps the survivor. Additionally, I have seen patients open up more because they feel the information they give is treated with a lot of confidentiality. Since I started working with PHR, I feel more confident and motivated when taking care of survivors of sexual violence: I always try to follow up on a case to know whether the survivor obtained justice. Working with MediCapt has been encouraging because it has improved the quality of my documentation and has strengthened the evidence I can bring against sexual violence crimes."

Ruth Ngugi (far right), senior nurse at Kenya's Naivasha County Referral Hospital, practices using the photo-capture feature of PHR's mobile app MediCapt, which she helped co-design and pilot.



“The plight of the Rohingya refugees in Bangladesh won’t significantly improve until Myanmar’s government guarantees a safe, dignified and voluntary repatriation of those refugees back to Myanmar.”

Phelim Kline, PHR Deputy Director of Programs and Director of Research and Investigations



Forging a Path to Justice for the Rohingya

PHR has used our medical expertise to expose grave human rights violations in Myanmar for more than 10 years. When Myanmar security forces unleashed horrific violence on the Rohingya minority in August 2017, PHR launched a series of investigations to document the mass killings, gang rapes, maiming, and forced disappearances, and we published three reports showing how the Myanmar authorities carried out a widespread and systematic campaign to eliminate the Rohingya or drive them out of the country.

PHR also published three articles in the peer-reviewed journals *Conflict & Health* and *Lancet Planetary Health*, drawing upon scores of clinical evaluations and qualitative interviews of Rohingya survivors, as well as an unprecedented quantitative survey of 604 Rohingya leaders representing more than 900,000 Rohingya.

In a major win for our Washington DC-based advocacy, the BURMA Act 2019 – which would authorize humanitarian assistance and impose sanctions on human rights abusers in Myanmar – passed in a landslide bipartisan vote in the U.S. House of Representatives. We have also brought our findings to the UN Human Rights Council, the International Independent Fact-Finding Mission on Myanmar and the Special Rapporteur for Myanmar at the UN's Office of the High Commissioner for Human Rights. As a result, international accountability mechanisms at the highest level have requested our data to be used as part of their investigations.

PHR and human rights advocates marked a significant milestone when the International Court of Justice in the Hague ordered Myanmar to take urgent measures to protect the Rohingya population. While only a first step, the ruling is an important milestone for this long-persecuted minority and a victory and validation of our ongoing efforts to secure justice and accountability for the Rohingya.

Left: Rohingya refugees in Cox's Bazar, Bangladesh attend a ceremony on the second anniversary of the deadly 2017 crackdown by the Myanmar military which killed thousands of Rohingya and drove more than 740,000 others out of the country. Photo: Allison Joyce/Getty Images

A meeting sharing PHR's findings on attacks against the Rohingya with Rohingya community members in Bangladesh's Kutupalong refugee camp.

Validating the Rohingya Community's Suffering

Bringing our documentation back to communities affected by human rights violations – to the people who trust in PHR's process and efforts and who take risks to share their stories and experiences with us – is an absolutely fundamental part of our work and ethical commitment. To honor this commitment, Dr. Jennifer Leigh, a PHR researcher investigating attacks against the Rohingya, shared our findings at a Rohingya community meeting in Bangladesh's Kutupalong refugee camp and described the gathering:

"Several participants wept, expressing a deep sense of gratitude and validation that what they knew as their lived experience had been documented in an objective way. Several also expressed surprise, particularly regarding the extent of the violence – they said they knew many villages had been affected, but had never heard specific numbers, and so had feared it was nearly all, without ever really knowing for sure. They were also particularly pleased to hear that the findings had been shared with the UN Fact Finding Mission, Human Rights Council, and Special Rapporteur for Myanmar."



Exposing Systemic Medical Deficiencies at Guantánamo

PHR has led groundbreaking research and advocacy for nearly two decades on the U.S. government's systematic, illegal, and unethical torture program and the complicity of medical professionals in these shameful actions. In 2019, in partnership with the Center for Victims of Torture, we published a report showing how the 40 detainees who languish at Guantánamo Bay detention center – 31 of them never charged with a crime and five of them long cleared for transfer but still detained – are being deprived of adequate medical care, even as they age and suffer from the long-term consequences of torture and indefinite detention. Our report found systemic and longstanding deficiencies in care, including the subordination of medical needs to security functions, the pervasive failure by medical professionals to address the torture of their patients at the hands of the CIA, patient neglect, discontinuity of care, and detainees denied access to their own medical records.

Following several months of joint advocacy, we were vindicated when one of our key recommendations – the creation of a Chief Medical Officer position at U.S. Naval Station Guantánamo Bay – was included in the National Defense Authorization Act for Fiscal Year 2020. PHR remains committed to the immediate closure of Guantánamo. But our evidence is helping ensure that, as long as detainees remain at Guantánamo, their human right – enshrined in international law – to the highest attainable standard of physical and mental health will be respected.

The New York Times

“The physicians were present in interrogations that were harmful and life-threatening, and that violates the first principle of medical ethics: First, do no harm.”

*Brigadier General (Ret.) Stephen N. Xenakis, MD,
PHR Advisory Council Member*



The Road to Ending Torture

PHR has led a decades-long effort to end the use of torture and ill-treatment around the world, to ensure that doctors and lawyers document and preserve evidence of these crimes so that perpetrators face justice and accountability, and to guarantee that victims and survivors receive redress.

In 2018, we spearheaded an ambitious international effort to update the Istanbul Protocol, guidelines which were developed under PHR's leadership and adopted by the United Nations in 1999 to effectively investigate and document torture and ill-treatment. Vincent Iacopino, MD, PhD – a world-renowned anti-torture expert, PHR Advisory Council member, and a lead author of the original Istanbul Protocol – led more than 180 of the world's top anti-torture experts from 51 countries in expanding and clarifying the guidelines.

The Istanbul Protocol (2020 edition) – expected to be published by the Office of the UN High Commissioner for Human Rights in 2020 – offers crucial guidance to help states reform policies to prevent torture, improve their forensic capacity, and measure accountability and progress. By setting international standards and guidelines, we are empowering medical professionals around the world to effectively document human rights abuses – and we are exponentially increasing our ability to create systemic change to end torture.

As proof of the importance the Istanbul Protocols holds, PHR helped to secure a milestone victory in the United Kingdom Supreme Court in March 2019, when Dr. Iacopino provided a witness statement that convinced the Court to grant asylum to a Sri Lankan torture survivor. The unanimous decision set a precedent in British courts for considering medical-legal opinions and medical evidence of torture documented according to the Istanbul Protocol.

The detainee hospital's operating room at Guantánamo Bay detention center.
Photo: Joe Raedle/Getty Images

Floor shackles inside Guantánamo Bay detention center.
Photo: Jim Watson/AFP/Getty Images

Health Care Under Fire in Yemen



Yemen, entering the sixth year of a brutal civil war, is in the grips of a catastrophe: three quarters of its population – 22 million people – are in desperate need of humanitarian aid; 8.4 million do not know where their next meal will come from; and 400,000 children are suffering from severe acute malnutrition. Since the entry of the Saudi-Emirati-led coalition into the war in 2015, PHR has been documenting one particularly cruel aspect of the conflict: attacks against desperately needed health care facilities by all warring parties, including the Yemeni government, the Saudi-Emirati-led coalition, and the Houthi armed group.

Working with one of Yemen's leading human rights organization, Mwatana for Human Rights, PHR has identified 120 instances in which hospitals and clinics have been bombarded, shelled, overrun, and put out of service and health workers attacked, intimidated, and prevented from carrying out their duties. In an effort to curb these attacks, PHR, in partnership with other NGOs, successfully advocated for the German government to suspend arms sales to Saudi Arabia. We also testified before the U.S. Congress's Tom Lantos Human Rights Commission to urge the United States to support a UN-led peace process and to pressure the Saudi-led coalition to halt attacks on health care and civilian infrastructure in Yemen by leveraging targeted holds on arms sales. We will continue to use our findings to vigorously advocate for an end to attacks on civilians, accountability for perpetrators of atrocities, and justice for the Yemeni people.

Hivi Mohammad Rashid Nerway, MD Supporting Iraqi Survivors' Claims for Justice and Reparations

In the wake of the so-called Islamic State's 2014 assault on the Yazidi and other communities in northern Iraq, in which men were massacred and thousands of women and girls were kidnapped and sexually enslaved, PHR launched a program to hone Iraqi medical and legal professionals' skills in forensically documenting evidence of sexual violence and torture. Dr. Hivi Mohammad Rashid Nerway, director of the Women and Girls Support Center in Dohuk, says the skills she learned are helping her support efforts toward justice for survivors of human rights violations.

"Survivors have a natural instinct to trust doctors, because we are the ones who provide the care, medical and psychological. Having this unique role and having this trust helps us to document survivors' cases in an efficient way. The PHR trainings were extremely helpful. Learning about the international standards for documentation can help us, clinicians, to do our job in a way that supports the survivor's claim for justice and reparations. My role is simple, as long as I am alive. I will always be available to help victims of violations, and I will stay committed to my principles and ethics and continue to stand and support the Yazidi community in its pursuit of justice and accountability."

Above: Dr. Hivi Rashid attending a PHR training in Dohuk, Kurdistan Region of Iraq, on documenting sexual violence in adults, adolescents, and children.

*The intensive care department of al-Thawra Hospital Authority in Taiz, Yemen after it was shelled in clashes.
Photo: Ahmad al-Basha*



A Salute to Courageous Human Rights Defenders

PHR's 2019 gala – the largest in our history – paid tribute to three honorees who have shown extraordinary courage in the defense of human rights. Dr. Scott A. Allen and Dr. Pamela K. McPherson accepted the Physicians for Human Rights Award in recognition of having boldly blown the whistle after witnessing shocking conditions at U.S. migrant detention facilities. We also honored the Survivors of Sexual Violence Network in Kenya. Jaqueline Mutere, an activist and survivor of sexual violence in Kenya, accepted the Physicians for Human Rights Award on behalf of the Network, which she co-founded and leads. The awards were presented by acclaimed actress and activist Julianna Margulies. Through the exceptional generosity of our supporters, the gala raised more than one million dollars, a record-breaking contribution to support our work around the world.

All photos: Mike Loccisano/Getty Images



PHR Honoree Dr. Pamela K. McPherson, PHR Board Chair Alan K. Jones, PHR Executive Director Donna McKay, PHR honoree Survivors of Sexual Violence in Kenya Representative Jaqueline Mutere, actress Julianna Margulies, and PHR Honoree Dr. Scott A. Allen.



PHR Board Members Dr. Kathleen Foley and Dr. Gail Saltz and Oak Foundation Board Members Dr. Andy Rothschild and Dr. Barbra Rothschild.



Maimonides Medical Center President and CEO Kenneth Gibbs and former Montefiore Medical Center President and CEO Dr. Steven M. Safyer.



Sherrye Dantzker and PHR Board Member Dr. David Dantzker.



Dr. Chithra Balasingham, Dr. Ravinder Tikoo, Kristin Auerbach, Peter Auerbach, Gloria Mosquera, and Reuven Oded.



PHR Board Members and Gala Co-chairs Dana C. Stone and Dr. Kerry J. Sulkowicz. Not pictured: Co-chairs PHR Board Member Dr. Deborah D. Ascheim and Board Chair Alan K. Jones.



PHR Board Member and ACLU Executive Director Anthony D. Romero and PHR Board Member Lois Whitman.

A New Team of Global Experts Boosts PHR's Work

Since our inception, PHR has benefited from an extraordinary array of talented and committed experts who have contributed to our work in myriad ways, bringing their medical and scientific expertise to our research and advocacy. In 2019, we launched PHR's Advisory Council, composed of a diverse and distinguished group of medical, legal, and scientific leaders from around the world who will help guide PHR's programmatic work going forward. The council, which we are continuing to build and diversify in many regions, brings a wide range of specialized knowledge in such fields as forensic medicine; medical ethics; the health impacts of chemical and conventional weapons, torture, and sexual violence; women's health; health care in confinement settings; the psychological consequences of human rights violations; monitoring and evaluation methods; training of doctors and data collectors; media strategies; writing for medical journals; survey research; data analysis, and more. This powerful new asset will further elevate our work and enable us to continue expanding and enhancing the global network of medical and scientific experts engaged in the struggle for human rights.

Kerry J. Sulkowicz, MD

Council Chair
Founder and Managing Principal,
Boswell Group LLC,
PHR Board of Directors

Patrick Ball, PhD

Director of Research, Human Rights
Data Analysis Group

Christopher Beyrer, MD, MPH

Desmond M. Tutu Professor in Public
Health and Human Rights,
Johns Hopkins Bloomberg
School of Public Health

Şebnem Korur Fincancı, MD

President, Human Rights
Foundation of Turkey

Mona Hanna-Attisha, MD, MPH, FAAP

Founder and Director,
Pediatric Public Health Initiative,
Michigan State University and
Hurley Children's Hospital

Alastair Hay, PhD, OBE

Professor Emeritus of
Environmental Toxicology,
University of Leeds

Howard Hu, MD, MPH, ScD

Affiliate Professor, Department of
Environmental and
Occupational Health Sciences,
University of Washington

Vincent Iacopino, MD, PhD

Adjunct Professor of Medicine,
University of Minnesota
Medical School,
PHR Medical Director Emeritus

Jennifer Leaning, MD, SMH

Professor of the Practice of
Health and Human Rights,
Harvard Chan School of Public Health

Juan E. Méndez, LLB

Professor of Human Rights Law,
American University-Washington
College of Law, former UN
Special Rapporteur on torture and
other cruel, inhuman and degrading
treatment or punishment

Vivienne Nathanson, MD

World Medical Association,
Royal College of Obstetricians and
Gynaecologists, University of
Durham School for Health

Nizam Peerwani, MD

Chief Medical Examiner, Tarrant,
Denton, Parker, and Johnson
counties, TX, Texas Forensic
Science Commission

Michael Posner, JD

Director, Center for Business and
Human Rights, NYU Stern
School of Business

Dainius Pūras, MD

Director, Human Rights Monitoring
Institute, Vilnius, Professor of Child
Psychiatry and Public Mental
Health, Vilnius University

Patricia Sellers, JD

Special Advisor for Gender for the
Office of the Prosecutor of the
International Criminal Court

David Wells, MD

Associate Professor of
Forensic Medicine,
Monash University, Australia

Matthew Wynia, MD, MPH

Director, Center for Bioethics and
Humanities, University of Colorado

Brigadier General (Ret.) Stephen N. Xenakis, MD

Executive Board Member,
Center for Ethics and Rule of Law,
University of Pennsylvania
Law School

Volunteers

Every year, Physicians for
Human Rights receives more than
\$2.7 million in donated and in-kind
services. We thank the many
physicians, scientists, lawyers, and
other health and legal professionals
who volunteer their time and
expertise to help us document and
call attention to mass atrocities and
severe human rights violations.

John Abraham, MD

Stacy Abrams, PA-C
Davina Abujudeh, LCSW
Sanjay Adhia, MD
Harrison Adika, LLB
Cara Agerstrand, MD
Joanne Ahola, MD
Mayada Akil, MD
Hana Akselrod, MD
Loren Amdursky, MD
Eddy Ameen, PhD
Maithri Ameresekere, MD
Ahmed Amin, MD
Michael Anastario, PhD
Andrea Arena, MD
Ellen Arfin, LCSW
Johanna Arias, LCSW-C
Nassim Assefi, MD
Dietrich Ayala
Soussan Ayubcha, MD, MHSA
Dalia Balsamo, MD, FAPA
Gloire Bamporike Ndimubandi
Ali Barazi
Katharine Barnard, MD
Stacy Barron, MD
Florence Bartenge
Robert Bartlett, PhD
Josaphat Bashomeka Mutayongwa
Suzanne Baumgarten, PsyD
Mukta Baweja, MD
Allison Bell, PsyD
Goli Bellinger, LCSW-C
Ahmed Benasr, MD
Harveen Bergquist, MD, MSc
Patrick Bigabwa Bitingyingwa, MD
John Bishop, PhD
Craig Blinderman, MD
Erika Bliss, MD
David Bodeli Dombi, LLB
Rachel Boersma, PhD, RN
Shulamith Bonham, MD
Ann Bortz, PsyD
Jessica Boyatt, PsyD
J. Wesley Boyd, MD, PhD
Rosa Bramble, LCSW-R
Adam Brenner, MD
Jocelyn Brown, MD, MPH
Renee Brown, LCSW
Lisa Buchberg, DMH
Steve Caddle, MD
Katrin Carlson, PsyD
Wei-li Chang, MD
Joanna Chapin, MD
Mitchell Charap, MD
Jane Charget, MD
Laurie Charles, PhD
Avik Chatterjee, MD, MPH
Mary Cheffers, MD
Isabel Chen, MD, MPH

Beatrice Chepkigeng

Stephanie Cho, MD
Deborah Choate
Gilmore Chung, MD
Jeannine Cicco Barker, PsyD
Justin Cikuru
Patricia Close, MD
Phyllis Cohen, PhD
Amy Cohen, MD
Tania Coiner, PhD
Janice Colton, PhD
Anastasia Coutinho, MD
Sondra Crosby, MD
Michele Curtis, MD, MML, MPH
Gerald Cyprus, MD
Clifford Dacso, MD, MBA, MPH
Elisheva Dan, PhD
Teresa Daniels, MD
Priscilla Dass-Brailsford, PhD
Trish Dayan, LCSW
Annelies De Wulf, MD
Jodi Dean, LCSW
Mark DeAntonio, MD
Renee DeBoard-Lucas, PhD
Miriam Denmark, LCSW
Michael Devlin, MD
Carolyn Dickie, ANP, ANP-C
Andrew Dixon, MD
Chelsea Dodgen, LCSW, MSW
Nina Douglass, LCSW
Mihaela Dranoff, PhD
Elizabeth Dugan, MD
Rebecca Duilt, MD
Mary Ann Dutton, PhD
Carol Dyer, MD
Barbara Eisold, PhD
Eleanor Emery, MD
Nathan Ewigman, MPH, PhD
Angela Fairweather, PhD
Jacqueline Ndeye Néné Fall,
DUPP, DEA
Yesenia Fermin
Dominic Ferro, MD
Carol Fetterman, PhD
Mary Jo Fink, MD
Marie Forgeard-Lacasse, PhD
Eric Fox, MD
Diana Franco, DSW, LCSW-R, LISW
Julia Frank, MD
Karla Fredricks, MD
Wendy Freed, MD
Hina Fullar, MD
Sonya Gabrielian, MD, MPH
Lynne Gaby, MD
Ana Gamez, MBA, PhD
Frances Geteles-Shapiro, PhD
Julia Geynisman-Tan, MD
Naomi Gikonyo
Stephen Githinji
Melika Givili
David Glosser, ScD
Anju Goel, MD, MPH
Jeffrey Goldberg, MD
Eric Goldsmith, MD
Lisa Goldstein, MD
Annekathryn Goodman, MD, MPH
Nithya Gopal, MD
Elizabeth Goren, PhD
Arthur Grant MD, PhD
Suzan Greenberg PsyD
Astrea Greig, PsyD
Kim Griswold, MD

Sarah Jane Grossbard, MD
David Guggenheim, PsyD
Elisabeth Guthrie, MD
Rohini J. Haar, MD, MPH
Erin Hadley, PhD
Sana Hamzeh, PsyD
Jennifer Hanner, MD
Nadia Hashimi, MD
Denise Heebink, MD
Elizabeth Hegeman, PhD
Robert Hiensch, MD
MacKenzi Hillard, MD
Valerie Hoover, PhD
Karen Hopenwasser, MD
Beth Horowitz, MD
Jill Horwitz, LCSW
Teyah Hufts, LPC
Marc Igdalsky, PA
Roya Ijadi-Maghsoodi, MD, MSc
Ellen Isaacs, MD
Angelina Ithondeka, MD
Thomas Jacobs, MD
Lauren Jacobson, NP
Tasha James, LPC
Arash Javanbakht, MD
Robert Jayes, MD
Abhishek Jaywant, PhD
Jessica Jeffrey, MD
Elena Jiménez Gutiérrez, MD
Laura Josephs, PhD
Sandrine Kaboya Masango, MD
Thomas Kalman, MD, MSc
Samuel Kamau
Wangu Kanja
Barbara Kaplan
Jacobsberg, LCSW, RN
Sheri Kardooni
Mona Karim, MD
Cynthia Karimi
Dorcas Karimi
Stephanie Karmo, MD
Boris Katz, PhD
Gunisha Kaur, MD
Annalise Keen, MD
Serem Keitany
Sally Keller, JD, PhD
Carol Kessler, MD
Barbara Kevorkian, LCSW
Eindra Khin Khin, MD
Michael Khoury, MD
Joseph Kibet
Jacqueline Kiio
Leslie Kimball Franck, LCP, PhD
Baudouin Kipaka Basilimu, LLB, MA
Emily Kiragu
Rachel Kirumba
Sevy Kishimbi Kabala, MD
Jules Kitumaini Buuma
Judy Kleppel, MD, MPH
Emily Kline, PhD
Matthew Knauer, PsyD
Rose Koeh, MSN
Sharon Kozberg, PhD
Carolyn Kreinsen, MD, MSc
Pamela Krell, PhD
Ian Kronish, MD
Patrick Kubuya, MD
Taylor Kuhn
Benjamin Kuria
Sunny Lai, MD
Frances Lang, LICSW
Christopher Lanoue, MD

Carole Lapidus, LCSW
Lisa Larrabee, LCSW-C, LICSW, RPT-S
Marc Lavietes, MD
Kara Leach, MD
Adam Lesser, LCSW
Peggy Leung, MD
Whitney Lieb, MD
Susan Lindau, LCSW
Tamara Lipshie, MD
Nubia Llubes, MD
Tinh Luong
Ellen Luria, MPH, MSW
Stuart Lustig, MD, MPH
Lisa Lyons, PhD
Aurélien Mahamba Kikoli, MD
Diana Mahoney, LCSW
Toby Mailman, LCSW
Robert Marlin, MD, MPH, PhD
Terry Marx, MD, MPH
Jaime Matoras, LMHC
Patrick McColloster, MD
Thomas McCoy, LCSW, MDiv
Stephen McElroy, MD, MPH
Katherine McKenzie, MD
Kathryn McNally, PsyD
Jennifer McQuaid, PhD
Ben McVane, MD
Shailen Mehta, MD
Peter Meiland, PhD
Donald Mellman, MD, MBA, MPH
Sylvester Mesa
Sarah Messmer, MD
John Miller
Naomi Miller, PhD
Amy Miranda, LCSW
Charles Mitchell, MD
Roselyn Mkabana
Mildred Mogire
Patrick Mokaya
Rose Molina, MD
David Moltz, MD
Juliana Morris, MD
Elise Morris, MD
Sarah Muiya
Debora Munczek, PhD
John Mungai, MSc
Teophila Murage
Seraphine Musambi Kilongozi
Livingston Musumba
Jaqueline Namuye Mutere
Grace Muthima
Julien Mutombo Wa Ilunga
Benjamin Mwaura
Tatiana Ndagijimana Bugeni
Millicent Ndiba
Ruth Ngugi
Giang Nguyen, PhD
Viet Nguyen MD, MPH
Jeffrey Nichols, MD
Beatrice Njeri
Justus Nondi, MBChB
Thierry Ntumba Nasibu, MD
Justin Nyakundi Nyatete
Rose Odera
Caroline Ojwang
Dorothy O'Keefe, MD
Kennedy Okello
Joe Omido, LLB
Sarah O'Neill, PhD
Anthony Onyango
Stephen Onyango, MD
Spyros D. Orfanos, PhD

Phyllis Oropallo, LMFT, LMHC
Deborah Ottenheimer, FACOG, MD
Byram Ozer, MD, PhD
Florescia Pahl, PsyD
Martha Palacio, LCSW
Amy Pandya, MD
Christine Pao, LCSW
Parveen Parmar, MD, MPH
Nishant Patel, PhD
Rupa J. Patel, MD, MPH, DTM&H
Jennifer Pauk, LCSW-C, MPH
Amanda Payne, BSN, CCRN, SANE-A
Katherine Peeler, MD
Vivian Pender, MD
Adam Perrin, MD
Scott Petersen, LCSW, MAC
Kenneth Pettersen, MD
Susan Pincus, MD
Laura Pinsky, LCSW
Elaine Pitt, MD
Matthew Pius, MD
Christie Platt, PhD
Dana Plyler, LCSW
Jonathan Posner, MD
Shayne Ragbeer
Falu Rami, LMFT
Natalia Ramos MD, MPH
Andrew Ramsey, MD, MPH
Sundeep Randhawa, MD
Courtney Ray, PhD
James Recht, MD
Nicki Reno-Welt, PA-C
Carla Lee Rice, LCSW
Adam Richards MD,
PhD, MPH, DTM&H
Asya Rivinson, LCSW
Daniel Robins, LCSW
Colin Robinson, MD, MPH
Sarah Rocha, MD
Brie Romines, MD
Jessica Rosenberg, LCSW, PhD
Seth Rosenblatt, MD
Daniel Rosengart, PsyD
Brad Roter, MD
Katalin Roth, JD, MD
Nora Rowley, MD
Carrie E. Ruggieri, LMHC
Joseph Ruggiero, PhD
Nadine Neema Rukunghu, MD
Altaf Saadi, MD
Karen Saal, MD
Gloria Saez, LCSW
Prantik Saha, MD
Ashanda Saint Jean, MD
Josimar Saldana, PhD
William Salton, PhD
Kristin Samuelson, PhD
Josephine C. Sang
Fereshteh Sani, MD
Kacie Saulters, MD
Lynn Schackman, MD
Caitlin Schaninger, MD, MBA
Todd Schneberk, MD, MA, MSHP
Daniel Schwarz, PhD
Cheryl Seaman, MD
Elizabeth Selden, MD, MSW
Nelly Seya Kazadi
Seema Shah, MD, MPH
Sural Shah, MD, MPH
Christa Sharma, LICSW
Thaddeus Shattuck, MD
Jeffrey Sherman, MD

Joseph Shin, MD
Rachel Singer, PhD
Elizabeth Singer, FACEP, MD, MPH
Solomon Sirma, MD
Pierrette Sivita Kisonia
Joyce Slochower, PhD
Shabnam Smith
Juliana Snapp, LCSW
Devanshi Somaiya
Sheila Sontag, FAPA, MD
Craig Spencer, MD, MPH
Rachel Staples
Lauren Steffel, PsyD
Zina Steinberg, EdD
Matthew Steinfeld, PhD
Jennifer Stella, MD
Karen Stewart, LCSW
James Stewart, MD
Jillian Stile, PhD
Wendy Stock, PhD
Katherine Stolarz, DO
Eric Stone, LCSW
Jeffrey Stovall, MD
Yorgos Strangas, MD
Andrew Stryker, LISW, MSW
Shanna Stryker, MD
Gabrielle Stutman, PhD
Maggie Sullivan, FNP-BC, RN
Maureen Suter, MD
Donna Sutter, MD, MPH
Stephen Symes, MD
Breena Taira, MD, MPH
Helayna Taylor, PhD
Caroline Teal, LMHC, MA
Michael Teitelman, MD, PhD
Debra Teplin, PA
Purity Thirikwa
Jason Thompson, PhD
Patricia Thornton, PhD
Craig Torres-Ness, MD, MPH
Polina Trachuk, MD
Patricia Trainor, PhD
Anna Van Meter, PhD
Jessica Vernon, MD
Jen Virgo, LICSW
Muriel Volpellier, MA, MD
Arno Vosk, MD
Benson Wahome
Pascal Wahwere Muhindo, MD
Jeffrey Walden, FAAFP, MD
Soma Wali, MD
Anne Walters, PhD
Yi Wang, MD
Tanya Weisman, MD
Susan Welsby, MD
Rachel Wheeler, MD
Mary White, MD
Daniel Winetsky, MD
Roxanne Wolanczyk, LCSW
Roxanna Wolfe, PsyD
Hilary Wolkoff, LCSW
Janet Yanez, MA
Erin Zahradnik, MD
Sandra Zakowski, PhD
Lynne Zeavin, PhD
Beth Zeeman, MD
Maria Zerrate Parra, MD
Hijab Zubairi, MD, MPH
Lucia Zuniga, MSN

Board

Board of Directors

Alan K. Jones, Chair*
Adrian Arena
Deborah D. Ascheim, MD,
Co-Vice Chair *†
Kristin Auerbach
Marion J. Bergman, MD, MPA*
David Dantzker, MD, Treasurer*
Kathleen M. Foley, MD,
Co-Vice Chair*
Justice Richard J. Goldstone, LLB
Raymond P. Happy
Richard Horton, FRCP, FMedSci
Ambassador Stephen J. Rapp, JD
Adam Richards,
MD, PhD, MPH
Anthony D. Romero, JD
Gail Saltz, MD
Donna Shelley, MD, MPH*
Gerson H. Smoger, JD, PhD,
Secretary*
Dana C. Stone, LMSW, MS, OT*
Kerry J. Sulkowicz, MD*†
Lois Whitman, JD, MSW

Emeritus Board Members

Frank Davidoff, MD, MACP
Carola Eisenberg, MD
H. Jack Geiger, MD, M Sci Hyg†
Robert S. Lawrence, MD†

* Members of PHR's Executive Committee

† Past Board Chair

Staff

Executive Management Team

Donna McKay, MS,
Executive Director
Hannah Chotiner-Gardner,
Chief Development Officer
DeDe Dunevant,
Director of Communications
Laurie E. McLeod, MBA,
Director of Finance and
Administration
Karen Naimer, JD, LL.M., MA,
Director of Programs
Susannah Sirkin, MEd,
Director of Policy

Administration and Finance

Kelsey Anderson,
Executive Associate
Jonas Hayes,
Accounting Associate
Varduhi Kyureghyan, Controller
Giuseppe Mercuri, MS,
Operations Associate

Advocacy

Michael Payne, Senior Advocacy
Officer and Interim
Advocacy Director
Lawrence Robinson, MA,
Advocacy Coordinator

Communications

Hannah Dunphy, Digital
Communications Manager
Nadine Mansour,
Communications Associate
Lesedi Ntsele,
Digital Campaign Manager
Claudia Rader, MS, Senior
Communications Manager
Kevin Short,
Media Relations Manager
Michelle Wilczynski, MA,
Digital Director

Development

Julia DiLaura,
Director of Institutional
Development
Clemmie Faust,
Associate Grant Writer
Amelia Hussein, MS,
Development Associate
Emily Reers,
Institutional Development
Coordinator
Beth Scully, Senior Grant Writer

Medical Experts

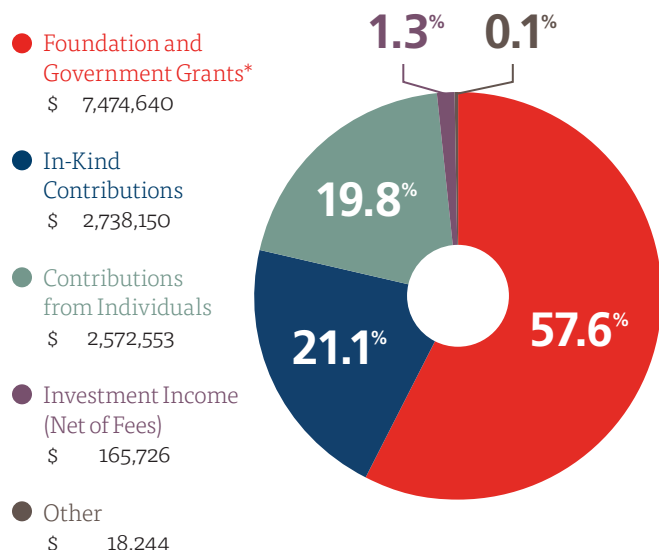
Michele Heisler, MD, MPA,
Medical Director
Ranit Mishori, MD, MHS,
Senior Medical Advisor

Policy and Programs

Abdulrazzaq Al-Saiedi, MPA,
Iraq Country Expert
Isabel Fredricks, Program Associate,
Program on Sexual Violence in
Conflict Zones
Lindsey Green, MA,
Senior Program Coordinator,
Program on Sexual Violence in
Conflict Zones
Hajar Habbach, MA, Asylum
Program Coordinator
Maram Haddad, MA, Senior
Program Coordinator,
Research and Investigations,
Iraq Team
Kathryn Hampton, MSt,
Senior Officer, Asylum Program
Katy Johnson, MA, Program Officer,
Program on Sexual Violence in
Conflict Zones
Suzanne Kidenda,
Kenya Program Officer,
Program on Sexual Violence in
Conflict Zones
Phelim Kine,
Deputy Director of Programs
and Director of Research and
Investigations
Rayan Koteiche, MA, Researcher,
Middle East and North Africa,
Research and Investigations
Thomas McHale, SM,
Senior Program Officer,
Program on Sexual Violence in
Conflict Zones
Joyeux Mushekuru, JD,
DRC Coordinator,
Program on Sexual Violence in
Conflict Zones
Joanna Naples-Mitchell, JD,
U.S. Researcher,
Research and Investigations
Tamaryn Nelson, MPA,
Senior Researcher,
Research and Investigations
Naitore Nyamu-Mathenge, MA,
Kenya Head of Office,
Program on Sexual Violence in
Conflict Zones
Elizeba Owange,
Kenya Program and Operations
Associate, Program on Sexual
Violence in Conflict Zones
Elsa Raker,
Asylum Program Associate

Financials

Fiscal Year Ending June 30, 2019 Operating Revenue



Statement of Activities (for the year ending June 30, 2019)

Revenues	
Foundation and Government Grants*	\$ 7,474,640
In-Kind Contributions	\$ 2,738,150
Contributions from Individuals	\$ 2,572,553
Investment Income (Net of Fees)	\$ 165,726
Other	\$ 18,244
Total Operating Revenue for FY18	\$ 12,969,313
Operating Expenses	\$ 9,725,735

Statement of Financial Position (for the year ending June 30, 2019)

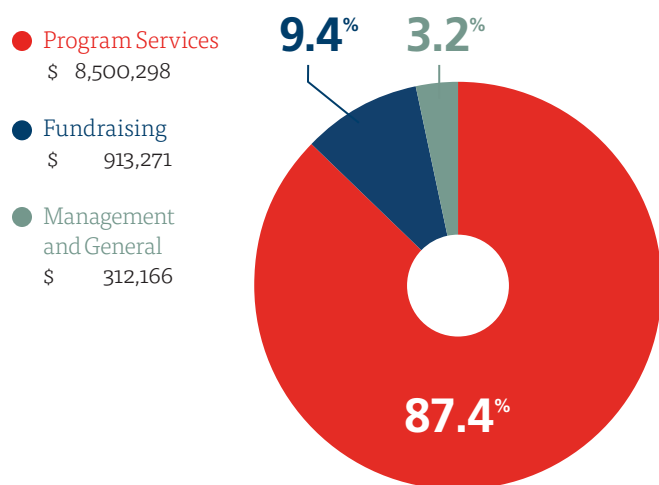
Assets	
Investments	\$ 6,997,904
Cash and Cash Equivalents	\$ 2,759,696
Grant and Contribution Receivables	\$ 1,993,014
Deposits	\$ 294,559
Property and Equipment, Net of Depreciation	\$ 180,117
Prepaid Expenses and Other	\$ 83,931
Total Assets	\$ 12,309,221

Liabilities and Net Assets

Temporarily Restricted Assets	\$ 7,868,438
Unrestricted Assets	\$ 3,820,953
Accrued Expenses	\$ 278,706
Accounts Payable	\$ 236,203
Deferred Rental Obligation	\$ 104,921
Total Liabilities and Net Assets	\$ 12,309,221

* Includes Temporary Restricted Contributions for Future Years

Fiscal Year Ending June 30, 2019 Operating Expenses



Editorial: Claudia Rader
Graphic Design: Beveridge Seay, Inc.

PHR received the highest rating for the fifth consecutive year, a distinction held by only 15 percent of the 1.5 million charities that are rated annually by Charity Navigator.





Physicians for
Human Rights

phr.org

For more than 30 years, Physicians for Human Rights (PHR) has used science and the uniquely credible voices of medical professionals to document and call attention to severe human rights violations around the world. PHR, which shared in the Nobel Peace Prize for its work to end the scourge of land mines, uses its investigations and expertise to advocate for persecuted health workers and facilities under attack, prevent torture, document mass atrocities, and hold those who violate human rights accountable.

Through evidence,
change is possible.



Shared in the 1997
Nobel Peace Prize