**INTRODUCTION & BACKGROUND**

- When individuals seeking asylum arrive in the United States, their immigration status remains uncertain. Until formal court hearings occur, no definitive ruling exists on whether these individuals can stay in the US. Many asylum seekers are survivors of human rights violations such as torture, domestic abuse, and trafficking, which can be corroborated by medical and psychiatric examination. Documenting these findings significantly increases the probability that a refugee seeker is granted asylum.

- Forensic evaluations are also essential for individuals seeking additional forms of human rights aid such as U-visas, T-visas, and more.

- The purpose of student-run asylum clinics and human rights initiatives is to provide forensic psychiatric and/or physical examinations to document the forms of trauma and abuse to support human rights legal cases. Currently, there are 20+ student-run asylum clinics officially associated with the non-profit national organization, Physicians for Human Rights (PHR), and more operating independently that provide services to meet regional needs of asylum seekers.

- During the founding of the Vanderbilt University School of Medicine Asylum Collaborative (VUMAC), we have encountered both foreseen and unforeseen obstacles. Notably, some obstacles revealed a discrepancy between the local need of the community and the services provided by the collaborative. In particular, there was an unmet regional need for pediatric asylum evaluations.

**SPECIFIC AIMS & HYPOTHESIS**

**Specific Aims:**

- This project has two specific aims. The first aim is to investigate the pediatric capacity of student-run asylum clinics and initiatives nationwide. The second aim focuses on investigating whether there are unique geographical obstacles during the founding and/or maintenance of student-run asylum clinics and initiatives.

**Pediatric Scope:**

- Hypothesis 1: Asylum clinics and human rights initiatives will have low rates of services available to pediatric populations due to an added element of vulnerability in the pediatric population and a lack of physician evaluators specialized in conducting pediatric forensic evaluations.

- Hypothesis 2: The proportion of average completed pediatric asylum evaluations relative to the average number of pediatric referrals will be less than the proportion of average completed adult asylum evaluations relative to the average number of adult asylum referrals.

**Regional Barriers Scope:**

- Hypothesis: There are unique challenges in founding and maintaining asylum clinics in the US Southeast compared to the rest of the US.

**METHODS**

- **Study Design:** Survey study

- **Study Cohort**
  - Medical schools in the United States with organizations that provide forensic evaluations to support human rights legal cases

- **Key variables**
  - Pediatric Scope:
    - Amount of pediatric forensic evaluations provided through the clinic
    - Amount of pediatric forensic evaluation requested in the region
  - Regional Barriers Scope:
    - Institutional resources and funding
    - Regional political and policy differences
    - Cultural diversity and language barriers in staff
    - Collaboration with local institutions
    - Capacity building and training

- **Analysis**
  - This study will use X² analysis to evaluate categorical data and a non-paired T-test to evaluate the differences in quantitative data.

**REFERENCES**