



Reaching out to broken angels and resettlers: an interview with Dr Philip Beh

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One of the hardest lessons in life is to remain composed when unpredictable external factors sweep through ferociously, and to persist in striving for the greater goal.

Dr Philip SL Beh, a renowned forensic pathologist who worked in the Forensic Pathology Service, Department of Health for 13 years before joining the Department of Pathology, The University of Hong Kong as a Clinical Lecturer in 1995, is no stranger to this philosophy. From co-founding an organisation called 'RainLily' that serves survivors of sexual violence, to fighting for the rights of asylum seekers, Dr Beh's dedication to community service was never a smooth venture.

Dr Beh's story began with the decision to start a career in forensic pathology. Initially started by chance, Dr Beh grew to appreciate the emerging development and diversity of forensic pathology. Apart from examining cadavers in criminal cases, the responsibility includes clinically assessing victims of child abuse and sexual violence at the request of the police. He gradually noticed the inadequacies of the investigative process carried out by the police and forensic pathologist: victims of sexual abuse were frequently transported around and repeatedly pressed to recount stories to different strangers, an act that further traumatised the victim. Police officers and doctors potentially caused more

psychological harm to victims by accusations and use of inappropriate language. In addition, no morning-after pill or screening for sexually transmitted diseases (STDs) were offered, despite the victims' universal concern of contracting an infection or getting pregnant. Dr Beh was stirred to action when he heard about a girl raped at home by a construction worker. With inadequate support she turned to a life of vice.

In an attempt to provide survivors of sexual abuse with the care they deserve, Dr Beh actively liaised with doctors, counsellors, and social workers who shared his passion for women's and victims' rights. In 2000, RainLily was cofounded by Dr Beh and a group of dedicated women keen to promote gender equality as a non-governmental charitable organisation that provided Hong Kong's first and only one-stop service for victims of sexual abuse. One of the major projects under Association Concerning Sexual Violence Against Women, RainLily was run by professionals across disciplines as a pilot programme, supported by the Lotteries Fund and the Jockey Club. It aims to provide one-stop assistance including medical consultation, forensics assessment, counselling, and police reporting under the same roof, adhering to international recommendations. Victims of sexual abuse can receive personalised care and service here:

those wishing for 'a day in court' receive legal advice; those just wanting to mentally recover receive help from counsellors through artwork, peer self-help support groups, and a hotline; standard pregnancy prevention and STD screening is routine.

With signs of reform in the police in the handling of sexual abuse victims and in the legislation amendments for rape, Dr Beh was optimistic about pioneering an overdue change in the service for victims of sexual violence. This was not as easy as anticipated. Funding came due and was discontinued, despite 5 years of established work with persistently positive feedback from clients of the service. The Kwong Wah Hospital, where RainLily had its centre, was also undergoing renovations and could no longer accommodate the service. Yet these problems may have been a blessing in disguise. With the loss of financial support and a venue, Dr Beh and staff at RainLily were forced to look for help elsewhere. What was surprising was that victims voluntarily came forward and shared their stories on the radio and in the press to fight for a continuation of the much-needed service. It was an emotional gesture of courage, community effort, and trust. Their determination was rewarded with the establishment of a now permanent sponsor, Community Chest, and a location at the Prince of Wales Hospital. Dr Beh is currently involved in the advisory and negotiation works with the government and hospitals in favour of a total review of systems and victims' cases, supporting the RainLily team in the provision of up-to-date needs-based protection of women's rights and dignity.

Equally unnoticed were the needs of another marginalised group, asylum seekers. Hong Kong is a signatory to the international Convention against Torture and has obligations in assessing the status of asylum seekers to identify true victims, and to provide assistance for resettlement. Nonetheless the huge influx of Vietnamese people from the mid-1970s not only influenced the political and social context, but also blurred the line between economic migrants and true refugees. Public opinion gradually turned against these asylum seekers. The government's engagement in screening them was often impeded by a language barrier and indifference culminating in the procrastination about status.

Dr Beh's first exposure to asylum seekers was through his job as a forensic pathologist tasked with writing medical reports for homicides, riots, and rape cases that had occurred within refugee camps. As he became more closely involved with these victims, he developed views very distinct from the general public who had preconceived ideas and expressed cultural indifference. Dr Beh recalled their 'difficult'

living conditions in shacks, relying on aid, forbidden to work, and waiting endlessly for their asylum status to be confirmed. Undeterred by cultural differences and the unfamiliarity of asylum seekers' countries, Dr Beh gained their trust and learned about their agonising experiences in war, famine, torture, child armies, and acid attacks. "When you really listened to the stories of these people pleading for refuge, you could never send them home," Dr Beh remarked compassionately. This was how Dr Beh devoted himself to helping asylum seekers through the physical and psychological trauma as well as the application process for refugee status.

Since 2000, Dr Beh has been referred cases by the United Nations High Commissioner for Refugees and provides medical examinations for asylum seekers to support their claim for refugee status. Dr Beh is surprised by the limited number of referrals for medical assessment, without which the refugee application process is incomplete. He speculates that the reason is limited resources and low priority on the government agenda for managing asylum seekers, on whose behalf Dr Beh also seeks to lobby. Even for cases being processed, scars and evidence would have faded over the years and access to medical investigations and treatment was finite. This added to Dr Beh's frustration.

Dr Beh's sense of 'fair-play' compelled him to fight for justice for 'marginalised groups'. An illustrative example is his defence of a Nepalese asylum seeker, Limbu Dilbahadur, who was shot dead by a policeman in 2009. Dr Beh was of the opinion that the forensic evidence was inconsistent with the police officer's account. He regarded the shooting as unnecessary and unjustified. He fought to be heard in court and demanded compensation for the victim's family. In the end, although a verdict of lawful killing was issued, Dr Beh considered his action to have been fair and just.

When asked about his future aspirations and service plans, he humbly describes his modest wish to provide better service and care to the marginalised victims of sexual violence and asylum seekers, despite the many hurdles and disappointments along the way. Likewise, he encourages medical students and young doctors to maintain an interest in current issues, not just to discuss them but to act. "Nothing happens too quickly. Only with fervour, patience and dedication can you make things change for the greater cause," Dr Beh added. Dr Beh remains optimistic about future developments and envisages more parties joining the fight for humanistic values. Somebody needs to start somewhere, and the future lies in the hands of passionate people who really contemplate what could and should be done.