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## **Systematic use of psychological torture by US Forces\***

Physicians for Human Rights\*\*

### **Abstract**

This report is the first to comprehensively examine the use of psychological torture by US personnel in the so-called “war on terror.”<sup>1</sup> It reviews the techniques used on detainees, what clinical experience and studies reveal about the long-lasting and extremely devastating health consequences of psychological torture, how a regime of psychological torture came about and was perpetuated, and what the current status of psychological torture is in US policy. Although the evidence is far from complete, what is known warrants the inference that psychological torture was central to the interrogation process and reinforced through conditions of confinement. Evidence exists of its continued use in 2004 and some practices likely remain in place to this day. (...)

### **A regime of psychological torture**

Much of what took place in the closed facilities where detainees were kept and interrogated remains secret. In particular, the policies and practices of the Central Intelligence Agency (CIA) are almost completely shielded from public scrutiny. Yet there is

sufficient evidence available now to show a consistent pattern of the use of psychological torture as a key element in the interrogation of detainees by US personnel. Various techniques were often applied in combination, in order to amplify and heighten their effect.

### **Prolonged isolation**

The use of prolonged isolation took place in all three theaters of operation throughout the “war on terror” and most likely is continuing today. There are reports from the US-run Bagram Air Force Base in Afghanistan that forces used solitary confinement at the base in 2002 and that the harshest treatment was directed at detainees held in isolation.<sup>7</sup> US personnel also used isolation as an interrogation tactic in Iraq. Based on visits to detention facilities throughout Iraq in 2003, the ICRC (International Committee of the Red Cross) found that detainees held at Baghdad International Airport were “held for nearly 23 hours a day in strict solitary confinement in small concrete cells devoid of daylight”.<sup>8</sup>

An even more restrictive use of isolation was in place at Abu Ghraib prison in Iraq.

### **Sleep deprivation**

The use of sleep deprivation appears to have been a common interrogation tactic in Afghanistan, Iraq, and Guantánamo.

\*) The following is an extract from the report

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Physicians for Human Rights (PHR) worked to stop torture, disappearances, and political killings by governments and opposition groups and to investigate and expose violations, including: deaths, injuries, and trauma inflicted on civilians as well as harsh methods of incarceration in prisons and detention centers.

Detainees held at various locations in Afghanistan in 2002 and 2003 describe being routinely deprived of sleep.<sup>18</sup> The spokesman for the American-led force in Afghanistan admitted in 2003 that sleep deprivation was “probably within the lexicon”<sup>19</sup> and that a “common technique” for keeping detainees awake was to keep bright lights on at all times or to wake detainees every fifteen minutes.<sup>20</sup> At Guantánamo, sleep deprivation also was regularly employed. Personnel familiar with conditions there described how sleep deprivation was implemented at the naval base in 2003:

An inmate was awakened, subjected to an interrogation in a facility known as the Gold Building, then returned to a different cell. As soon as the guards determined the inmate had fallen into a deep sleep, he was awakened again for interrogation after which he would be returned to yet a different cell. This could happen five or six times during a night.<sup>21</sup>

Its use continued in 2004, according to detainees held there during that time.<sup>22</sup>

Sleep deprivation occurred in detention facilities throughout Iraq as well. (...)

(...) At Guantánamo, detainees’ accounts of forced nudity and sexual humiliation were confirmed by FBI reports. An FBI letter to an Army official states that during late 2002 an agent witnessed a female interrogator at Guantánamo rubbing lotion on a detainee’s arms during Ramadan, when “physical contact with a woman would have been particularly offensive to a Moslem male.”<sup>33</sup> News reports confirmed that the use of female interrogators violating Muslim taboos regarding sex and contact with women occurred at Guantánamo in 2003 as well.<sup>34</sup> These accounts were confirmed to PHR by a source familiar with conditions there. According to

the source, in 2003 female interrogators used sexually provocative acts as part of interrogation. For example, female interrogators sat on detainees’ laps and fondled themselves or detainees, opened their blouses and pushed their breasts in the faces of detainees, opened their skirts, kissed detainees and if rejected, accused them of liking men, and forced detainees to look at pornographic pictures or videos.<sup>35</sup> Although the use of female interrogators appeared to decline in 2004, a source told PHR that humiliation and violation of cultural and religious taboos, including forced shaving, persisted.<sup>36</sup> (...)

#### **Use of threats and dogs to induce fear of death or injury**

Interrogators in Afghanistan, Iraq, and Guantánamo cultivated the fear of injury and death through the use of military working dogs, the threat of beatings or electrocutions, and mock executions.

There is evidence that the use of dogs to instill fear and threaten detainees was used as an interrogation technique in all three theaters of operation, from the beginning of the “war on terror.” (...)

Aside from the use of dogs, mock executions and death threats were prevalent in Afghanistan and Iraq. A detainee in Kandahar, Afghanistan says that in 2002, a 9 mm pistol was held to his temple.<sup>47</sup> A Criminal Investigation Command report describes a compact disc that contains digital images of American soldiers conducting mock executions on Afghan detainees beginning in early December 2003 at Fire Base Tycze, Dah Rah Wood, Afghanistan.<sup>48</sup>

#### **Combination of techniques**

The evidence points to a widespread and systematic application of these techniques, often in combination. (...)

(...) Detainees reported that at Guantánamo in late 2002, they observed techniques such as short-shackling, loud music playing in interrogation, forced shaving of beards and hair, putting people in cells naked, taking away people's comfort items, sleep deprivation, and the use of cold air.<sup>54</sup> (...)

### Health consequences

Psychological torture and cruel, inhuman, and degrading treatment can have extremely destructive health consequences for individuals. Short- and long-term effects can include memory impairment, reduced capacity to concentrate, somatic complaints such as headache and back pain, hyperarousal, avoidance, irritability, severe depression with vegetative symptoms, nightmares, feelings of shame and humiliation, and post-traumatic stress disorder.<sup>63</sup> Sources with knowledge of interrogation at Guantánamo told PHR that some detainees there suffer from incoherent speech, disorientation, hallucination, irritability, anger, delusions, and sometimes paranoia.<sup>64</sup> Some detainees who have been released from US run detention facilities after being subjected to a combination of psychologically abusive interrogation techniques report that they suffer from depression, thoughts of suicide and nightmares, memory loss, emotional problems, and are quick to anger and have difficulties maintaining relationships and employment.<sup>65</sup> Based on past experience, post-traumatic stress disorder is likely to be common.

### Prolonged isolation

In the 1950s and 1960s, studies demonstrated that short-term isolation caused an inability to think or concentrate, anxiety, somatic complaints, temporal and spatial disorientation, deficiencies in task performance, hallucinations, and loss of motor coordination.<sup>66</sup> The findings of contemporary re-

search are consistent with the earlier findings of solitary confinement's harmful consequences. Effects include depression, anxiety, difficulty with concentration and memory, hypersensitivity to external stimuli, hallucinations and perceptual distortions, paranoia, and problems with impulse control.<sup>67</sup> People who are exposed to isolation for the first time develop "a predictable group of symptoms, which might almost be called a 'disease syndrome.'"<sup>68</sup> The symptoms include "bewilderment, anxiety, frustration, dejection, boredom, obsessive thoughts or ruminations, depression, and, in some cases, hallucination."<sup>69</sup>

### Sleep deprivation

The most pronounced impact of total sleep deprivation is cognitive impairment<sup>74</sup>, which can include "impairments in memory, learning, logical reasoning, arithmetic skills, complex verbal processing, and decision making."<sup>75</sup> Sleep-deprived individuals take longer to respond to stimuli, and sleep loss causes "attention deficits, decreases in short-term memory, speech impairments, perseveration, and inflexible thinking."<sup>76</sup> These symptoms may appear after one night of total sleep deprivation, after only a few nights of sleep restriction (five hours of sleep per night)<sup>77</sup>. (...)

### Sexual humiliation

According to clinicians at the Minnesota-based Center for Victims of Torture (CVT), forced nakedness is intended to create a power differential between detainees and interrogators by stripping the victim of his/her identity, inducing immediate shame, and establishing an environment where the threat of sexual and physical assault is always present. By denying the victim the most basic forms of decency and privacy, forced nudity conveys the message that interrogators have

absolute control over the detainees' bodies and can do as they please. Implied in the context of forced nudity is the threat of other, more abusive violations, whether sexual or physical.<sup>81</sup>

There is evidence that US personnel directed sexual humiliation toward detainees because they knew that Arabs are particularly vulnerable to sexual humiliation and sought to exploit that vulnerability.<sup>82</sup> Clinicians at the Center for the Treatment of Torture Victims in Berlin, Germany (Berlin Center), who treat a large population of Muslims, have found that Muslim victims of sexual torture forever carry a stigma and will often be ostracized by the community. They have found that male victims often feel degraded in their manhood, especially if the perpetrator was a woman. (...)

### **Psychological torture**

The use of psychological torture followed directly from decisions by the civilian leadership as well as high ranking military officers, including those in the executive branch, and their support of decisions to "take the gloves off" in interrogations and "break" prisoners by employing techniques of psychological torture including sensory deprivation, isolation, sleep deprivation, forced nudity, the use of military working dogs to instill fear, cultural and sexual humiliation, mock executions, and the threat of violence or death toward detainees or their loved ones. These kinds of techniques have extremely devastating consequences for individuals subjected to them and can be just as harmful and are often more long-lasting than physical torture.

The infamous pictures from Abu Ghraib prison in Iraq indelibly brought home how severe forms of psychological coercion – detainees terrorized by snarling dogs and wires dangling from their wrists, subjected to se-

vere sexual humiliation, and disoriented by hooding – are indeed forms of torture. What the images do not show, but what this report reveals, is that psychological torture, even if not as graphic as the images, was at the center of the treatment and interrogation of detainees in US custody in Afghanistan, Guantánamo and Iraq since 2002.

Since the Abu Ghraib scandal broke a year ago, the physical abuse of detainees through beatings, use of stress positions, deprivation of food, and infliction of severely cold and hot temperatures, has understandably gained the most attention, and the United States Army has itself labeled the deaths of 26 detainees as homicides. The evidence now available from witness accounts, documents released under the Freedom of Information Act, official investigations, leaked reports from the International Committee of the Red Cross (ICRC), media reports, and inquiries by Physicians for Human Rights, shows that physical forms of torture and cruel, inhuman and degrading treatment served only to punctuate the pervasive use of psychological torture by US personnel against detainees.

The use of the psychologically abusive interrogation methods is immoral and is illegal under the Geneva Conventions and other sources of international law to which the United States is a party, civil domestic law and the Uniform Code of Military Justice. US courts, international treaty bodies, UN special rapporteurs on torture, and the US State Department have all identified these techniques as a form of torture or cruel, inhuman, or degrading treatment. Indeed, when Congress enacted a law to implement the requirement of the Convention against Torture to criminalize torture, it defined precisely what it meant by the criminal act of mental or psychological torture. The US Congress defined the severe mental pain

or suffering that constitutes an element of the crime of torture as including threats of death or injury and the administration or application or threatened administration or application of “procedures calculated to disrupt profoundly the senses or the personality.”<sup>2</sup> This definition encompasses exactly the procedures that were used.

Psychological torture also violates longstanding instructions for military interrogations. Army Field Manual 34-52, the Army’s guide on interrogations, currently being revised, allows psychological methods of interrogation, but draws a very sharp line at psychological coercion and efforts to break down detainees, which it considered both unlawful and ineffective:

[The] use of force, mental torture, threats, insults, or exposure to unpleasant or inhumane treatment of any kind is prohibited by law and is neither authorized nor condoned by the US Government. Experience dictates that the use of force is not necessary to gain the cooperation of sources for interrogation. Therefore, the use of force is a poor technique, as it yields unreliable results, may damage subsequent collection efforts, and can induce the source to say whatever he thinks the interrogator wants to hear.<sup>3</sup>

The Federal Bureau of Investigation agrees. After the Abu Ghraib scandal, it issued an electronic communication that said that FBI policy “has consistently provided that FBI personnel may not obtain statements during interrogations by the use of force, threats, physical abuse, threats of such abuse or severe physical conditions.”<sup>4</sup> It reiterated, “It is the policy of the FBI that no interrogation of detainees, regardless of status, shall be conducted using methods which could be interpreted as inherently coercive, such as physical abuse or the threat of such abuse to the

person being interrogated or to any third party, or imposing severe physical conditions.”<sup>5</sup> This reiteration of policy came on the heels of a number of complaints from the FBI to the Department of Defense regarding their use of unacceptably aggressive interrogation tactics.<sup>6</sup>

### Closing remarks

Based on a review of disclosed documents, comprising administration memorandums, government documents released pursuant to a Freedom of Information Act request, and leaked International Committee of the Red Cross reports, as well as PHR’s own interviews, it is clear that US personnel have used these techniques systematically at detention facilities in Afghanistan, Guantánamo, and Iraq, from the beginning of the “war on terror” through 2004. Some techniques, like sleep deprivation and nakedness, were designed to part of interrogation plans and strategies for particular detainees; others, like long-term isolation, were part and parcel of the conditions of confinement for many detainees. Because of the close relationship between conditions of confinement and interrogation techniques, the victims could well number in the thousands. The evidence points to a system of consistent psychological torture and ill-treatment, accompanied by physical abuse that was central to the interrogation of detainees. There has been no accountability for the practice of psychological torture among officials responsible for putting the practices into place.

### References

The numbers of references refer to their original placement in the PHR report.

The report called “Break Them Down” and its references can in full extension be accessed at [www.phrusa.org/research/torture/news\\_2005-05-01.html](http://www.phrusa.org/research/torture/news_2005-05-01.html)