



Federal Health Matters

APA Continues to Debate Role of Psychologists in Interrogations

Some military psychologists could be affected by an evolving controversy within the American Psychological Association (APA) regarding psychologists' roles in the interrogation of terrorism detainees. The controversy was sparked by evidence from government sources that, since 2002, military and civilian psychologists have helped to teach and implement harsh interrogation techniques used by the DoD and Central Intelligence Agency (CIA). Although the APA has condemned the abusive treatment of detainees, it maintains that psychologists can make positive contributions to interrogations—an official position that some of its members are trying to change.

The debate has its roots in the DoD's Survival, Evasion, Resistance, and Escape (SERE) program. Started after the Korean War, the SERE program trains service members from all military branches to resist torture in the event they are detained in countries that do not abide by the Geneva Conventions. The program's instructors, who are not trained interrogators, subject participating service members to mock interrogations that can involve isolation, extreme temperatures, forced nudity, sexual humiliation, sleep deprivation, stress positions, and waterboarding (simulated drowning). SERE psychologists screen and train the instructors and attempt to prevent their deviation from acceptable behavior during the mock interrogations.

Since September 11, 2001, however, there is evidence that psychologists have helped to transfer SERE interrogation techniques to real-life interroga-

tions. In September 2002, staff from the U.S. detention center in Guantanamo Bay, Cuba attended a SERE psychologist conference in Fort Bragg, NC. The Guantanamo attendees included members of the detention center's Behavioral Science Consultation Team (BSCT), a group of psychologists and psychiatrists responsible for developing interrogation strategies and assessing intelligence production from interrogations. Subsequently, BSCT staff discussed the possibility of using SERE techniques on detainees at an October meeting in Guantanamo. Two months later, Donald Rumsfeld, then secretary of defense, approved the use of many of these techniques at the detention center.

According to the opening statement of Sen. Carl Levin (D-MI) at a June 17 Senate Armed Services Committee hearing on aggressive interrogation techniques, U.S. forces in Afghanistan and Iraq eventually heard about and adopted many of the techniques. In addition, two former SERE psychologists reportedly taught SERE techniques to CIA interrogators.

Psychologists have been criticized for participating in specific interrogations that used SERE techniques. A leaked log describing the Guantanamo interrogation of Mohammed al-Qahtani, the accused "20th hijacker" of the 9/11 attacks, indicates that a BSCT psychologist suggested putting him in a swivel chair to "keep him awake and stop him from fixing his eyes on one spot." Other techniques used on al-Qahtani, to which the psychologist may not have been a party, included interrogating him in 20-hour sessions, forcing him to urinate in his pants and perform dog tricks, and dressing him in women's underwear. (The DoD dismissed murder and war

crimes charges against al-Qahtani without prejudice in May 2008.) In addition, *Vanity Fair* reported in July 2007 that former SERE psychologists were involved in the interrogation of Abu Zubaydah, an alleged senior al Qaeda operative, at one of the undisclosed CIA prisons known as "black sites." Zubaydah was stripped, subjected to cold temperatures and extremely loud music, and waterboarded during interrogations, according to reports in the *New York Times*.

The general interrogation-influenced conditions at Guantanamo also have been described as ethically problematic for psychologists and other health professionals working there. One such condition is detainee isolation. A leaked DoD document lists a standard operating procedure at Guantanamo's Camp Delta, as of March 2003, as isolating detainees during the first 30 days of their imprisonment in order to "enhance and exploit [their] disorientation and disorganization" for interrogation purposes. Concerns also have been raised about patient confidentiality. A 2005 article published in the *New England Journal of Medicine* cited "strong evidence" that Guantanamo BSCT members have had access to detainees' personal health information.

Both critics and defenders of psychologist involvement in interrogations, however, have praised one psychologist for blowing the whistle on harsh detainee treatment. Michael Gelles, the former chief psychologist for Naval Criminal Investigative Service, reported such treatment to his superiors and apparently influenced Rumsfeld's January 2003 decision to rescind his approval of SERE techniques.

In February 2005, the APA responded to concerns about the

interrogation issue by convening a 10-member Presidential Task Force on Psychological Ethics and National Security (PENS). PENS's June 2005 report affirmed that the role of interrogation consultant can be an appropriate one for psychologists, although it warned APA members to adhere to the APA Ethics Code when serving in this role, to refrain from participating in "torture or other cruel, inhuman, or degrading treatment," and to report psychologists who do participate in such treatment. Critics have charged that the report emphasized psychologists' potential contributions to national security over their immediate responsibility to individuals and that PENS's membership was rife with conflicts of interest; six members of the task force had served in intelligence-related roles for the DoD.

Since the PENS report, the APA has condemned abusive interrogations in increasingly specific language. Through a resolution adopted in August 2006, the association reaffirmed its ban on "torture" and "cruel, inhuman, or degrading treatment or punishment" and defined these terms, respectively, in accordance with Article 1 of the United Nations Declaration and Convention Against Torture and the 2006 McCain Amendment. In an August 2007 resolution, the APA specified that its condemnation of abusive techniques includes, but is not limited to, waterboarding, sexual humiliation, induced hypothermia, and 17 other specific techniques. And in November 2007, APA president Sharon Stephens Brehm and APA chief executive officer Norman B. Anderson wrote President Bush to urge that he ban certain techniques and establish policies and procedures for the judicial review of U.S. detainees in foreign detention centers.

Controversy over the APA's position on the issue continues, however. Some APA members have said that the 2007 resolution provides loopholes for interrogation consultants by placing the

phrases "used for the purposes of eliciting information in an interrogation process" and "used in a manner that represents significant pain or suffering or in a manner that a reasonable person would judge to cause lasting harm" before its descriptions of certain prohibited techniques. Some have called for the APA to follow in the footsteps of the American Psychiatric Association and the American Medical Association, which resolved in May 2006 and June 2006, respectively, to prohibit their members from taking part in any interrogations.

Although a proposed moratorium on interrogation support failed at the APA's 2007 convention, APA members will have a chance to vote on a similar measure by mail between August 1 and September 15 of this year. The new measure, which was proposed by a June petition signed by more than 1% of the APA's membership, would forbid members from working "in settings where persons are held outside of, or in violation of, either International Law (e.g., the [United Nations] Convention Against Torture and the Geneva Conventions) or the U.S. Constitution (where appropriate), unless they are working directly for the persons being detained or for an independent third party working to protect human rights." This prohibition would not be enforceable, as it would not become part of the APA Ethics Code, but it would be an official policy communicated by the APA and considered by the APA Ethics Committee in adjudicating cases.

The APA has mailed ballots on the prohibition, along with member statements in support of and in opposition to it, to all of its voting members. Robert J. Resnick's oppositional statement said that the prohibition would affect psychologists "in psychiatric hospitals, U.S. correctional facilities, and countless other settings" where the application of international standards or the U.S. Constitution are

ambiguous. Prohibition supporter Ruth Fallenbaum, however, countered that it would not apply to such settings because they "function within the legal system."

IOM Recommends Better DoD Monitoring of Dietary Supplement Use

The DoD needs to implement a system for monitoring the safety of dietary supplements used by military personnel, according to a new report by an Institutes of Medicine (IOM) committee. The report, *Use of Dietary Supplements by Military Personnel*, notes that dietary supplements are becoming increasingly popular among military personnel and may have a greater impact on these populations, which often face heightened physiologic demands, than on civilians. It recommends that the DoD respond by (1) conducting more surveys at military bases about dietary supplements, their benefits, and their adverse effects; (2) including dietary supplements in its medication reporting system; and (3) designating a committee for overseeing and coordinating activities related to supplements. The oversight committee could provide guidance on when to begin a review of supplements based on the prevalence of their use and the severity of their reported adverse effects. The IOM adds that, without a better dietary supplement monitoring system, service members will continue to make health-related decisions without knowing their consequences and the success of military operations will be compromised. ●