

even those from earlier conflicts such as Vietnam) were incorporated into planning for operations in support of the Global War on Terror.

Interrogation Techniques Actually Employed by Interrogators (U)

(U) Guantanamo Bay, Cuba

(U) In GTMO, we found that from the beginning of interrogation operations to the present, interrogation policies were effectively disseminated and interrogators closely adhered to the policies, with minor exceptions. Some of these exceptions arose because interrogation policy did not always list every conceivable technique that an interrogator might use, and interrogators often employed techniques that were not specifically identified by policy but nevertheless arguably fell within the parameters of FM 34-52.

(U) Finally, we determined that during the course of interrogation operations at GTMO, the Secretary of Defense approved specific interrogation plans for two "high-value" detainees who had resisted interrogation for many months, and who were believed to possess actionable intelligence that could be used to prevent attacks against the United States. Both plans employed several of the counter-resistance techniques found in the December 2, 2002, GTMO policy, and both successfully neutralized the two detainees' resistance training and yielded valuable intelligence. We note, however, that these interrogations were sufficiently aggressive that they highlighted the difficult question of precisely defining the boundaries of humane treatment of detainees.

(U) Afghanistan and Iraq

(U) Our findings in Afghanistan and Iraq stand in contrast to our findings in GTMO. Dissemination of interrogation policy was generally poor, and interrogators fell back on their training and experience, often relying on a broad interpretation of FM 34-52. In Iraq, we also found generally poor unit-level compliance with approved policy memoranda even when those units were aware of the relevant memoranda. However, in both Afghanistan and Iraq, there was significant overlap between the techniques contained in approved policy memoranda and the techniques that interrogators employed based solely on their training and experience.

(U) While these problems of policy dissemination and compliance were certainly cause for concern, we found that they did not lead to the employment of illegal or abusive interrogation techniques. According to our investigation, interrogators clearly understood that abusive practices and techniques - such as physical assault, sexual humiliation, terrorizing detainees with unmuzzled dogs, or threats of torture or death - were at all times prohibited, regardless of whether the interrogators were aware of the latest policy memorandum promulgated by higher headquarters.

(U) Nevertheless, as previously stated, we consider it a missed opportunity that interrogation policy was never issued to the CJTF commanders in Afghanistan or Iraq, as was done for GTMO. Had this occurred, interrogation policy could have benefited from additional expertise and oversight. In Iraq,

by the time the first CJTF-7 interrogation policy was issued in September 2003, two different policies had been thoroughly debated and promulgated for GTMO, and detention and interrogation operations had been conducted in Afghanistan for nearly two years.

Detainee Abuse (U)

(U) Overview

(U) We examined the 187 DoD investigations of alleged detainee abuse that had been closed as of September 30, 2004. Of these investigations, 71 (or 38%) had resulted in a finding of substantiated detainee abuse, including six cases involving detainee deaths. Eight of the 71 cases occurred at GTMO, all of which were relatively minor in their physical nature, although two of these involved unauthorized, sexually suggestive behavior by interrogators, which raises problematic issues concerning cultural and religious sensitivities. (As described below, we judged that one other substantiated incident at GTMO was inappropriate but did not constitute abuse. This incident was discarded from our statistical analysis, as reflected in the chart below.) Three of the cases, including one death case, were from Afghanistan, while the remaining 60 cases, including five death cases, occurred in Iraq. Additionally, 130 cases remained open, with investigations ongoing. Finally, our investigation indicated that commanders are making vigorous efforts to investigate every allegation of abuse - regardless of whether the allegations are made by DoD personnel, civilian contractors, detainees, the International Committee of the Red Cross, the local populace, or any other source.

(U) We also reviewed a July 14, 2004, letter from an FBI official notifying the Army Provost Marshal General of several instances of "aggressive interrogation techniques" reportedly witnessed by FBI personnel at GTMO in October 2002. One of these was already the subject of a criminal investigation, which remains open. The U.S. Southern Command and the current Naval Inspector General are now reviewing all of the FBI documents released to the American Civil Liberties Union (ACLU) - which, other than the letter noted above, were not known to DoD authorities until the ACLU published them in December 2004 - to determine whether they bring to light any abuse allegations that have not yet been investigated.

(U) Underlying Reasons for Abuse

(U) If approved interrogation policy did not cause detainee abuse, the question remains, what did? While we cannot offer a definitive answer, we studied the DoD investigation reports for all 70 cases of closed, substantiated detainee abuse to see if we could detect any patterns or underlying explanations. Our analysis of these 70 cases showed that they involved abuses perpetrated by a variety of active duty, reserve, and National Guard personnel from three Services on different dates and in different locations throughout Afghanistan and Iraq, as well as a small number of cases at GTMO. While this diversity argues against a single, overarching reason for abuse, we did identify several factors that may help explain why the abuse occurred.

(U) Second, there was a failure to react to early warning signs of abuse. Though we cannot provide details in this unclassified executive summary, it is clear that such warning signs were present - particularly at Abu Ghraib - in the form of communiqués to local commanders, that should have prompted those commanders to put in place more specific procedures and direct guidance to prevent further abuse. Instead, these warning signs were not given sufficient attention at the unit level, nor were they relayed to the responsible CJTF commanders in a timely manner.

(U) Finally, a breakdown of good order and discipline in some units could account for other incidents of abuse. This breakdown implies a failure of unit-level leadership to recognize the inherent potential for abuse due to individual misconduct, to detect and mitigate the enormous stress on our troops involved in detention and interrogation operations, and a corresponding failure to provide the requisite oversight.

Use of Contract Personnel in Interrogation Operations (U)

(U) Overall, we found that contractors made a significant contribution to U.S. intelligence efforts. . . not withstanding the highly publicized involvement of some contractors in abuse at Abu Ghraib, we found very few instances of abuse involving contractors.

DoD Support to Other Government Agencies (U)

(U) DoD personnel frequently worked together with OGAs to support their common intelligence collection mission in the Global War on Terror, a cooperation encouraged by DoD leadership early in Operation ENDURING FREEDOM. In support of OGA detention and interrogation operations, DoD provided assistance that included detainee transfers, logistical functions, sharing of intelligence gleaned from DoD interrogations, and oversight and support of OGA interrogations at DoD facilities. However, we were unable to locate formal interagency procedures that codified the support roles and processes.

(U) In OEF [Operation Enduring Freedom] and OIF [Operation Iraqi Freedom], senior military commanders were issued guidance that required notification to the Secretary of Defense prior to the transfer of detainees to or from other federal agencies. This administrative transfer guidance was followed, with the notable exception of occasions when DoD temporarily held detainees for the CIA - including the detainee known as "Triple-X" - without properly registering them and providing notification to the International Committee of the Red Cross. This practice of holding "ghost detainees" for the CIA was guided by oral, *ad hoc* agreements and was the result, in part, of the lack of any specific, coordinated interagency guidance. Our review indicated, however, that this procedure was limited in scope. To the best of our knowledge, there were approximately 30 "ghost detainees," as compared to a total of over 50,000 detainees in the course of the Global War on Terror. The practice of DoD holding "ghost detainees" has now ceased.

(U) Aside from the general requirement to treat detainees humanely, we found no specific DoD-wide direction governing the conduct of OGA interrogations in DoD interrogation facilities. In response to questions and interviews for our report, however, senior officials expressed clear expectations that DoD-authorized interrogation policies would be followed during any interrogation conducted in a DoD facility. For example, the Joint Staff J-2 stated that “[o]ur understanding is that any representative of any other governmental agency, including CIA, if conducting interrogations, debriefings, or interviews at a DoD facility must abide by all DoD guidelines.” On many occasions, DoD and OGA personnel did conduct joint interrogations at DoD facilities using DoD authorized interrogation techniques. However, our interviews with DoD personnel assigned to various detention facilities throughout Afghanistan and Iraq demonstrated that they did not have a uniform understanding of what rules governed the involvement of OGAs in the interrogation of DoD detainees. Such uncertainty could create confusion regarding the permissibility and limits of various interrogation techniques. We therefore recommend the establishment and wide promulgation of interagency policies governing the involvement of Other Government Agencies in the interrogation of DoD detainees.

CONCLUSION (U)

(U) Human intelligence, in general, and interrogation, in particular, is an indispensable component of the Global War on Terror. The need for intelligence in the post-9/11 world and our enemy’s ability to resist interrogation have caused our senior policy makers and military commanders to reevaluate traditional U.S. interrogation methods and search for new and more effective interrogation techniques. According to our investigation, this search has always been conducted within the confines of our armed forces’ obligation to treat detainees humanely. In addition, our analysis of 70 substantiated detainee abuse cases found that no approved interrogation techniques caused these criminal abuses; however, two specific interrogation plans approved for use at Guantanamo did highlight the difficulty of precisely defining the boundaries of humane treatment.”

(U) **OIG Assessment:** The Church Report largely declared that all DoD areas of concern regarding detention operations were being addressed “adequately and expeditiously.” However, subsequent information and other reports demonstrated a seeming disconnect between policy for local techniques, tactics, and procedures, and leadership and command oversight of how actual, suspected, and reported incidents of detainee abuse were investigated for resolution. The Church Report did not explain if, how, or to what extent, detainee abuse practices infiltrated, and from what source, throughout U.S. Central Command’s detention and interrogation operations. Although the Church review lacked the statutory authority normally associated with an issue of this magnitude, it nonetheless served as a basis for several other investigations, assessments, and reviews.

(U) Notably, the report provided a holistic, positive, yet somewhat indirect approach to DoD interrogation techniques and operations. However, it lacked clear and explicit individual findings and specific recommendations. This

lack highlighted the need for more information in several areas, including separate assessments of possible detainee abuse involving Guantanamo, Afghanistan, Iraq, Special Operations, and the Iraq Survey Group. Also, the report did not perform an in-depth review of special operations forces and protected units, although a classified attachment to the base report included some special mission unit interrogation practices. However, the Church team did attempt to determine whether responsible parties conducted any investigations, and if so, whether they reported results. For example, the classified portion dealing with special mission units assessed nonjudicial punishment under AR 15-6 and compared the consistency and equitableness of punishments throughout the theater. As appropriate, the overall report also sought to assess when and whether nonjudicial reviews were passed to criminal investigators.

Appendix N. U.S. Army Surgeon General Assessment of Detainee Medical Operations for OEF, GTMO, and OIF (Kiley Report) (U)

Investigating Officer: MG Martinez-Lopez, Commander, U.S. Army Medical
Research and Materiel Command

Appointing Authority: LTG Kiley, US Army Surgeon General

Date of Initiation: November 12, 2004

Date of Completion: April 13, 2005

(U) Scope:

To assess detainee medical operations in OEF [Operation Enduring Freedom], GTMO [Guantanamo], and OIF [Operation Iraqi Freedom], (primarily via a 14-question assessment survey), that focused on:

- detainee medical policies and procedures
- medical records management
- the incidence and reporting of alleged detainee abuse by medical personnel
- training of medical personnel for the detainee health care mission

(U) Executive Summary Extract:

(U) **Methods**

(U) The team interviewed medical personnel in maneuver, combat support, and combat service support units in 22 states and 5 countries. The interviewees were preparing to deploy (future), had previously deployed (past), or were currently deployed (present) to OEF, GTMO, or OIF; they included AC [Active Component] and RC (U.S. Army Reserve (USAR) and National Guard (NG)) personnel. For the current interviews, the Team visited the detention medical facilities at Bagram, Afghanistan and Guantanamo Bay, Cuba, and in Iraq, the Team met with the Commander, Task Force (TF) 134 (TF responsible for detainee operations), and interviewed medical personnel supporting detainee operations at Abu Ghraib, Camp Danger, Camp Liberty and Camp Bucca. In Kuwait, the Team met with the Combined Forces Land Component Command (CFLCC) Deputy Commander and Chief of Staff, as well as the CFLCC Surgeon, to gain a perspective on the planning factors for detainee medical operations. For the past and future interviews, the Team traveled to units in 22 states and Germany. A leadership perspective on the issue of detainee medical operations was gained through interviews with medical personnel from command and control elements at corps, theater, and level I, II and III medical units. For training interviews, the Team visited faculty and students of training programs at the Army Medical Department Center and School (AMEDDC&S), and trainers at the Military Intelligence (MI) School, National Training Center (NTC), Joint Readiness Training

Center (JRTC), Continental U.S. Replacement Centers (CRC), and 12 Power Projection Platform (PPP) sites. Additionally, lesson plans and other training materials were reviewed at these training sites.

(U) Policy and Guidance

(U) Theater-Level Policy and Guidance. In reviewing policy and guidance, including Operation Orders (OPORDERs), Fragmentary Orders (FRAGOs), and Standing Operating Procedures (SOPs), OEF theater-specific detainee medical policies were found dating back to 2004; 47% of past and 60% of present OEF interviewees were aware of the policies. GTMO had well-defined detainee medical policies that have been in place since 2003; 100% of the interviewed personnel were aware of the policies. For OIF, there was no evidence of specific theater-level policies for detainee medical operations until 2004. Only 56% of past OIF interviewees were aware of policies in theater, whereas 88% of current OIF interviewees were aware of policies in theater. This improvement is attributed to the superlative efforts of TF134, combined with the introduction of one field hospital for level III+ detainee health care management across the theater.

(U) Standard of Care. In the early stage of OIF, there was confusion among some medical personnel, both leaders and subordinates, regarding the required standard of care for detainees. Medical personnel were unsure if the standard of care for detainees was the same as that for U.S./Coalition Forces in theater, or if it was the standard of care available in the Iraqi health care system. This confusion may be explained by the use of different classifications for detained personnel (Enemy Prisoner of War (EPW), detainees, Retained Personnel (RP), Civilian Internees (CI)) that, under Department of Defense (DoD) and Department of the Army (DA) guidance, receive different levels of care. Theater-level guidance was not provided in a timely manner to early-deploying medical units or personnel, and in the absence of guidance many units developed their own policies. As the OIF theater matured and roles and responsibilities were clarified, theater-level policy was developed and promulgated, resolving the early confusion.

(U) Recommendations. Although not required by law, DA guidance (DoD level is preferable) should standardize detainee medical operations for all theaters, should clearly establish that all detained individuals are treated to the same care standards as U.S. patients in the theater of operation, and require that all medical personnel are trained on this policy and evaluated for competency.

(U) Medical Records

(U) Medical Records Training. Medical records management was a primary area of focus for this assessment. When asking past/present/future personnel from OEF, GTMO, and OIF about their training in detainee medical records management, 4% of AC and 6% of RC interviewees received Military Occupational Specialty (MOS) or other school training.

(U) Medical Records Generation. There was wide variability in medical records generation at level I and II facilities. In some cases, no records were generated. In others, detainee care was documented in a log book for statistical purposes and unit reports. In other cases, care was documented on Field Medical Cards (FMCs) (Department of Defense Form 1380 (DD1380)) only.

(U) Access to and Security of Detainee Medical Records at Detention Medical Facilities. The Team was asked to address access to, and security of, detainee medical records at detention medical facilities. In general, the medical records for detainees were managed the same as records for the AC. The security of records and confidentiality of medical information tended to be better at detention facilities that were co-located with medical facilities. Security and confidentiality also generally improved as an individual theater matured.

(U) Medical Screening, Medical Care, and Medical Documentation Associated with Interrogation. There are inconsistencies in the guidance for pre- and post-interrogation screening. Medical care, including screenings, at or near the time of interrogation, was neither consistently documented nor consistently included in detainee medical records. Some medical personnel were unclear whether interrogations could be continued if a detainee required medical care during the interrogation.

(U) Recommendations. DA [Department of the Army] guidance (DoD level is preferable) should require that detainee medical records at facilities delivering level III and higher care be generated in the same manner as records of U.S. patients in theater. Guidance should address the appropriate location and duration of maintenance as well as the final disposition of detainee medical records at facilities that deliver level III or higher care. Most importantly, guidance is needed to define the appropriate generation, maintenance, storage, and final disposition of detainee medical records at units that deliver level I and II care.

(U) Reporting of Detainee Abuse

(U) Abuse Reporting Training. The Team found that 16% of AC and 15% of RC interviewees (past/present/future OEF/GTMO/OIF combined) received MOS or other school training about reporting possible detainee abuse.

(U) Abuse Reporting Policies. Unit policies, SOPs and Tactics, Techniques, and Procedures (TTPs) were most often either absent or not properly disseminated to deployed medical personnel. The Team found no DoD, Army, or theater policies requiring that actual or suspected abuse be documented in a detainee's medical records; however, theater-level guidance specifically requiring medical personnel to report detainee abuse was implemented just within the past year.

(U) Observing and Reporting Suspected Detainee Abuse. The personnel interviewed during this assessment were vigilant in reporting actual or suspected detainee abuse to their medical supervisor, chain of command, or

CIO. Only 5% of interviewees directly observed suspected abuse and only 5% had a detainee report abuse to them. Previously deployed interviewees reported the suspected abuse 91% of the time when the suspected abuse was alleged by a detainee and 80% if they directly observed suspected detainee abuse. For those interviewees presently deployed, 25% had a detainee report alleged abuse and 3% directly observed suspected abuse. All presently deployed interviewees reported the alleged or suspected abuse. Only two medical personnel failed to properly report actual or suspected detainee abuse that had not previously been conveyed to an appropriate authority. The Team referred these cases to the CID.

(U) Recommendations.

(U) Medical. At all levels of professional training, medical personnel should receive instruction on the requirement to detect, document and report actual or suspected detainee abuse.

(U) DoD-Wide. Medical planners at all levels should ensure clearly written standardized guidance is provided to all medical personnel. This guidance should list possible indicators of abuse and contain concise instruction documentation and procedure for reporting actual or suspected abuse.

(U) Other Issues

(U) OIF Theater Preparation for Detainee Care. In planning for detainee medical operations, there were limited assets allocated to provide support for detainee/EPW medical care. Recommend the AMEEO establish an experienced subject-matter expert team to comprehensively define the personnel, equipment, and supplies needed to support detainee medical operations, and develop a method to ensure a flexible delivery system for these special resources.

(U) Medical Screening and Sick Call at the Division Internment Facilities (DIF) and Prisons. The Team found that detainees have excellent access to daily sick call, outpatient, and inpatient medical care at the OIFs and Prisons. Recommend DA guidance (DoD level is preferable) require initial medical screening examinations shortly after arriving at the detention facility.

(U) Restraints/Security. The use of physical restraints for detainees varied widely within and among all interviewed units. The Team found no evidence that medical personnel used medications to restrain detainees. Interviewees reported medical personnel were tasked to perform a variety of detainee security roles. [a]s medical personnel were tasked to provide security support, it impacted on the ability of the medical unit to provide care to all patients, including U.S. Soldiers. Recommend DA (DoD level is preferable) standardize the use of restraints for detainees in units delivering medical care. The guidance should contain clear rules for security-based restraint versus medically-based restraints. Medical personnel should not be encumbered with duties related to security of detainees.

(U) **Medical Personnel Interactions with Interrogators.** DA guidance (DoD level is preferable) should prohibit all medical personnel from active participation in interrogations. This includes medical personnel with specialized language skills serving as translators. Empower medical personnel to halt interrogations when a necessary examination or treatment is required.

(U) **Medical Personnel Photographing Detainees.** DA guidance (DoD level is preferable) should authorize photographing detainee patients for the exclusive purpose of including these photos in medical records. Informed consent should not be required to use photographs in this manner (consistent with AR 40-66). Additionally, photographs of detainees taken by medical personnel for other reasons, including future educational material, research, or unit logs, should require a detainee's informed consent.

(U) **Behavioral Science Consultation Teams (BSCT).** There is no doctrine or policy that defines the role of behavioral science personnel in support of interrogation activities. DoD should develop well-defined doctrine and policy for the use of BSCT personnel. A training program for BSCT personnel should be implemented to address the specific duties. The Team recommends that more senior psychologists should serve in this type of position. There is no requirement or need for physicians/psychiatrists to function in this capacity.

(U) **Stress on Medical Personnel Providing Detainee Medical Care.** Recommend the U.S. Army Medical Command (MEDCOM) establish an experienced SME team comprised of a psychiatrist, a psychologist, chaplain, and clinical representation from all levels of care, to comprehensively define the training requirements for medical personnel in their pre-deployment preparation. Other initiatives include revising combat stress control doctrine to effectively deliver support to medical personnel in theater, develop an effective system to regularly monitor post deployment stress, and refine leadership competencies to assess, monitor and identify coping strategies of medical personnel in a warfare environment.

(U) **Interviewee Training Requests.** The Team asked interviewees the following question: "If you were responsible for the training of medical personnel prior to deployment, what aspects of training would you focus on with regard to detainee care?" Many interviewees noted that current training in this area was not sufficient.

(U) **OIG Assessment:** Although the assessment discussed the reporting of detainee abuse, it did not conclusively determine whether deployed medical personnel may have directly participated in or otherwise aided others in the commission of any reported or suspected case of possible detainee abuse. The report did not adequately indicate whether field medical commanders personally initiated any internal, unit-level investigations of any allegation that medical personnel may have participated in, directly or indirectly.

Appendix O. Army Regulation 15-6 Investigation into FBI Allegations of Detainee Abuse at Guantanamo Bay, Cuba Detention Facility (Furlow/Schmidt Report) (U)

Investigating Officers: BG Furlow, United States Army South Deputy
Commander for Support and LTG Schmidt, United States Southern Command
Air Forces Commander

Appointing Authority: GEN Craddock, Commander, USSOUTHCOM

Date of Initiation: December 29, 2004 (*note: LTG Schmidt assigned lead on
February 28, 2005*)

Date of Completion: April 1, 2005

(U) **Scope:** In response to FBI agent allegations regarding possible detainee abuse at Guantanamo, the Army Regulation 15-6 was directed to address eight allegations of abuse:

- That military interrogators improperly used military working dogs during interrogation sessions to threaten detainees, or for some other purpose.
- That military interrogators improperly used duct tape to cover a detainee's mouth and head.
- That DoD interrogators improperly impersonated FBI agents and Department of State officers during the interrogation of detainees.
- That, on several occasions, DoD interrogators improperly played loud music and yelled loudly at detainees.
- That military personnel improperly interfered with FBI interrogators in the performance of their FBI duties.
- That military interrogators improperly used sleep deprivation against detainees.
- That military interrogators improperly chained detainees and placed them in a fetal position on the floor, and denied them food and water for long periods of time.
- That military interrogators improperly used heat and cold during their interrogation of detainees.

(U) **Executive Summary Extract:**

(U) Detention and Interrogation operations at GTMO cover a 3-year period and over 24,000 interrogations. This AR 15-6 investigation found only three interrogations acts to be conducted in violation of existing interrogation techniques authorized by Army Field Manual 34-52 and the existing DoD guidance. The AR 15 -6 also found the failure to monitor the cumulative impact of the authorized interrogations of one high value detainee resulted in abusive and degrading treatment. Finally, the AR 15-6 investigation found that the communication of a threat to another high value detainee was in violation of SECDEF guidance and the UCMJ. We found no evidence of torture."

(U) **OIG Assessment:** Although the report covered approximately 3 years at Guantanamo (2001-2004), the scope of the investigation was limited to allegations from the Federal Bureau of Investigation. This report also relied heavily on the Church Report's findings to establish when key policy decisions and changes in interrogation procedures occurred. The report stated, "Our independently derived findings regarding the development and adjustments to policy and interrogation techniques are identical to the Church report." Also, the report did not summarize or submit as a complete exhibit the Federal Bureau of Investigation's own internal investigation and findings.

Appendix P. Matrix of Detainee Investigations and Evaluations (U)

(U) **Purpose:** In May 2004, following the media release of photos showing abuses of prisoners and detainees of the DoD controlled Abu Ghraib Prison Facility, the DoD IG established a reporting requirement for the various Military Criminal Investigative Organizations and other agencies reporting allegations of detainee and prisoner abuse. The statistics from this reporting are presented in matrix format for the leadership and depicts the status of all open and closed investigative activities regarding reported allegations of detainee and prisoner abuse. The statistics provide a single-source database of reported detainee abuse activities and could be used for trend analysis.

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Monthly DoD IG Overview of Investigations/Evaluations
Current as of 2/27/2006

TYPE	DoD	ARMY	NAVY	MARINES	AIR FORCE	TOTAL
	JOINT/COCOM Ongoing/Closed	Ongoing/Closed	Ongoing/Closed	Ongoing/Closed	Ongoing/Closed	(Ongoing/Closed)
Preliminary Inquiries	1 0 / 7	2 0 / 11	0/0	13/111	0/0	142 13/119
Criminal Investigations	3 0 / 71	152/462	10/23 ⁴	0/0	2/3	653 164/489
Non-Criminal Investigations	5 0 / 4	28 ⁶ / 0	0/0	7 0 / 10	0/0	42 28/14
Inspections/Reviews	8 1 / 2	9 0 / 2	0/0 ¹⁰	0/0	0/0	5 1/4
Total	15 1/74	655 180/475	33 10/23	134 13/121	5 2/3	842 206/636

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¹ SOUTHCOM denotes previous SOUTHCOM reporting
² Army IG - Senior Official Inquiries
³ DIA initiated a criminal investigation on April 5, 2005
⁴ NCIS detainee abuse cases - ongoing.
⁵ BG Formica, 3 Corps, AR 15-6 into detainee completed; MG Fay CJTF-7 directed AR 15-6 - completed; MG Taguba AR 15-6 completed; BG Furlow, 15-6 JTF GHMEO completed.
⁶ Non-criminal command investigations (15-6) - ongoing; no further status.
⁷ Marine IG reporting Command JAG non-criminal cases - ongoing.
⁸ DoDIG Oversight of investigations and inspections DoD-wide - ongoing; VADM Church Interrogation Special Focus Group - complete.
⁹ Honorable James R. Schlesinger Independent Panel to Review DoD Detention Operations - complete
¹⁰ Army IG review of detainee procedures (Report published 21 Jul) and Reserve IG assessment of training - completed.
¹¹ Navy review conducted at Guantanamo Bay by VADM Church - completed

Appendix Q. Detainee Senior Leadership Oversight Committee (U)

Background (U)

(U) In November 2004, the Deputy Assistant Secretary of Defense for Detainee Affairs and the Joint Staff J-5 Deputy Director, War on Terrorism established the Detainee Senior Leadership Oversight Council (DSLOC) within the Office of the Secretary of Defense. DSLOC members include representatives from the Office of the Secretary of Defense, the Deputy Under Secretary of Defense for Intelligence, the Joint Staff, the Services, and the Combatant Commands. The DSLOC is chaired by the Vice Director, Joint Staff. A DoD Inspector General representative attends the DSLOC meetings in an observation role. Working in concert with the DoD Detainee Task Force, which provides daily oversight of detainee issues, the DSLOC meets quarterly to review and monitor the status of 492 recommendations and actions resulting from the 13 senior-level reports. These meetings provide attendees with the opportunity to brief others on the status of each plan for implementing the separate recommendations made by the reports.

Purpose (U)

(U) The primary purpose of the DSLOC is to consolidate and evaluate each of the 492 recommendations and assign an office of primary responsibility to track the implementation status of each recommendation.

(U) **OIG Observation #1.** The DSLOC has evaluated, assigned for action, and tracked the implementation and adjudication status of 492 recommendations as of March 2006. The recommendations include quality of life issues; infrastructure and communication requirements; medical records; incident reporting processes; and policy, doctrine and training, in an effort to systematically improve the overall conduct and management of detention and interrogation operations. The DSLOC process for assigning office of primary responsibility and tracking the implementation status of each recommendation is very effective. As a result, the DSLOC is able to consolidate key resources to support successful management and oversight. By requiring periodic updates and meeting quarterly, the DSLOC systematically tracks the implementation status of the individual recommendations.

(U) **OIG Suggestion.** We suggest that the Office of the Secretary of Defense continue to resource the DSLOC quarterly meetings and work with the Detainee Task Force until DoD management officials satisfactorily implement or adjudicate each recommendation. The DSLOC should report its results to the Office of the Secretary of Defense detailing the actions taken to implement

or otherwise resolve each individual recommendation. To sustain the long-term effectiveness of each recommendation, each Service Secretary, Combatant Commander, and agency Inspector General should initiate followup inspections and evaluations of actions taken to implement those recommendations.

(U) **OIG Observation #2.** Attendance at the DSLOC quarterly meeting is disappointing. Although Office of the Secretary of Defense and Joint Staff policy action officers and legal advisors are well represented, Service and Combatant Command Inspectors General, as well as representatives of the Joint and interagency intelligence community and other agencies, usually do not attend.

(U) **Suggestion.** The DSLCOC could increase attendance at the quarterly meetings by formally inviting the Inspectors General of the Services and Combatant Commands. The Inspectors General can assist offices of primary responsibility in preparing and reviewing DSLOC input. The Inspectors General could also use Command annual inspection programs to sustain implementation and to advise commanders of future areas of concern, as necessary. Additionally, the DSLOC could encourage more senior-level officials from the DoD intelligence community, the Department of Justice, and the Department of State to improve interagency coordination and information-sharing by formally inviting them to DSLOC meetings, where they could brief council members on the implementation status of recommendations within their areas of responsibility. The Army G2 could also encourage senior Army intelligence staff to attend quarterly DSLOC meetings and to brief other attendees on key military intelligence issues, such as interrogations.

(U) **Conclusion.** The DoD Inspector General commends the overall work of the DSLOC leadership and membership as highly exemplary. Bringing order and efficiency to widely disparate DoD offices, organizations, and issues, the DSLOC initiatives are an outstanding example of a well managed and professional program to provide senior-level DoD officials with the information they need on detainee abuse. The DSLOC ability to identify and leverage primary offices of responsibility in implementing and monitoring each recommendation is a mammoth task that has led to the successful resolution of many of the 492 recommendations. As of March 2006, 421 recommendations were closed and 71 recommendations remain open.

Appendix R. Case Study: Reporting and Investigating (U)

Part I (U)

(U) This case study illustrates the difficulty that can occur in reporting and investigating allegations of detainee abuse in a command environment with multiple organizations and differing reporting chains of command.

(U) A senior DoD civilian from a Defense agency who served in a management position within the former Iraq Survey Group, henceforth referred to as "Mr. Q," reported poor living conditions and made early allegations of detainee mistreatment. Specifically, Mr. Q said that other members of his organization reported to him that certain detainees delivered to the Joint Interrogation and Debriefing Center located at Camp Cropper showed signs of possible physical abuse. Believing that capturing units might be responsible for these actions, Mr. Q informed his immediate supervisors, his unit commander, and his agency Inspector General verbally and via e-mail. The capturing units were not in the Iraq Survey Group or Defense agency chain of command. Mr. Q departed theater shortly thereafter without the issue being resolved. Subsequently, the Iraq Survey Group Commander verbally raised the issue of possible detainee abuse with the U.S. Central Command Chief of Staff and to the Commander of the capturing unit that the allegations of abuse were directed toward. However, Mr. Q's specific allegation dealing with detainee mistreatment was seemingly overshadowed and the command initially focused only on the issue of poor living conditions. In response to a DoD Inspector General questionnaire, the former U.S. Central Command Chief of Staff discussed his conversation with the Iraq Survey Group Commander and wrote, "I took his concern more from the "physical plant" stand-point and the access of intelligence agency personal (*sic*) to these detainees - I did not take his comments as allegations of abuse by personnel at Camp Cropper." Consequently, U.S. Central Command took no initial action (i.e. formal inquiry or investigation) concerning the allegation of possible detainee abuse at that time.

(U) Approximately 5 months later, a retired U.S. Army Colonel. ("the Colonel"), visited Iraq at the request of Combined Joint Task Force-7 (CJTF-7) and the U.S. Army Deputy Chief of Staff for Intelligence to provide feedback on the overall HUMINT process in the Iraq Theater of Operations, to include, "...advice concerning in-country detainee operations and interrogations." Informed of the Colonel's pending trip, Mr. Q forwarded the Colonel a summary of his previously submitted allegations and asked the Colonel to follow up on them during his visit to Iraq if possible.

(U) Upon completing his mission in Iraq and prior to departing, the Colonel verbally out-briefed his observations to the CJTF-7 senior intelligence officer

(C2) in December 2003. He also provided a copy of a memorandum for record that detailed the essence of Mr. Q's original allegations.

(U) Based on the memorandum for the record detailing Mr. Q's allegation, the CJTF-7 C2 then briefed the CJTF-7 Staff Judge Advocate and showed the information provided by the Colonel. The Staff Judge Advocate concurred that the matter should be presented to the CJTF-7 Commander and accompanied the CJTF-7 C2 to visit the CJTF-7 Commander the following day. The CJTF-7 C2 later related that the Staff Judge Advocate took over from that point and that the CJTF-7 Commander directed that an investigation be conducted.

(U) In January 2004, the Deputy Commanding General, Combined joint Task Force-7, appointed an officer from the III Corps G2 to conduct the AR 15-6 investigation. About 7 months had elapsed from Mr. Q's initial notification of the allegations until an AR 15-6 investigation was finally conducted. Not surprising during this confused and extremely high operational tempo period, the quality and availability of possible evidence, the accessibility of alleged victims, and witness recollections all eroded. Consequently, the investigating officer's actions were significantly constrained and the accuracy and effectiveness of the resulting report less than optimal. A III Corps Staff Judge Advocate memo to the Colonel dated April 7, 2004, detailing the investigator's findings specifically concluded, "For whatever reason, perhaps because her conversations with people took place almost four months after yours and a full eight months after the events should have been first reported, people did not remember events with the same clarity and sincerity with which they obviously recounted to you."

Part 2 (U)

(U) Returning to the case study, Mr. Q's original complaint in June 2003 was parsed into two distinct elements as it moved up the chain of command. The first element, quality of life, concentrated on the physical care, housing, and the conditions under which detainees lived. The second element focused on direct allegations of detainee abuse. However, despite the Iraq Survey Group Commander's personal briefing of Mr. Q's complaint, only detainee physical care and housing later emerged as an immediate action item. The Iraq Survey Group Commander also personally informed the Special Operations Task Force Commander of the allegations of detainee abuse and received the Special Operations Task Force Commander's assurance that an investigation would look into the allegations. However, our evaluation determined that there are no written results or indication that an investigation occurred. Meanwhile, a local subordinate commander of the local 800th MP Brigade oversaw physical improvements of living conditions at the temporary Camp Cropper facility.

(U) The III Corps G2 officer that was finally appointed as an AR 15-6 investigating officer focused primarily on the quality of life conditions described in the appointing letter. Remarkably, the substantive allegations of

possible detainee abuse were not addressed as the report moved through III Corps. Consequently:

- The AR 15-6 investigating officer failed to properly investigate the allegations of detainee abuse, but also investigated the wrong camp location. Specifically, the AR 15-6 officer's report focused on the former Joint Interrogation and Debriefing Center located at Camp Cropper, which had been closed before the AR 15-6 investigation.
- Assuming that the quality of life issue was now moot, the AR 15-6 officer closed the investigation without:
 - addressing the actual allegations of detainee abuse, or
 - pursuing contact with the original complainant.

(U) The investigating officer's failure to interview Mr. Q as the original source of the complaint greatly exasperated the case's misdirection. Likewise, the investigating officer was not aware of the Colonel's own observations and information. Regardless, III Corps accepted the investigating officer's final report as complete. Only when the results of the investigation were later sent to the complainants (the Colonel and Mr. Q) was the officer's report seriously questioned.

Summary (U)

(U) The case study aptly demonstrates some of the obvious difficulties encountered by those who sought to report allegations of possible detainee abuse. As discussed in this case study and the report findings, problems occurred in identifying the proper command element in the various operational control and administrative control relationships resulting from differences in the multiple component and task organized structures. Unity of command difficulties involved multiple players including initially V Corps, then III Corps, coalition partners, and various task forces including Commander, Joint Special Operations Task Force, CJTF-7, the Iraq Survey Group, and its assorted force providers such as the DIA and Other Government Agencies (i.e. the Central Intelligence Agency and the Federal Bureau of Investigation). The presence of multiple headquarters operating within the same theater of operations created numerous management and oversight problems in deciphering procedures and policy guidance.

(U) When allegations of abuse randomly flow up and across command channels without commanders flagging those issues for action, the result is sometimes lack of official documentation, miscommunication of key issues, and misdirection of proper response. Consequently, commanders, other official reporting channels, and investigating elements remain unaware of the actual frequency of occurrence and severity of allegations of detainee abuse. As the case study highlights, untimely and inconsistent reporting hinders expeditious decision-making and creates unnecessary obstacles to solving the problem.

Appendix S. Secretary of Defense Memorandum, April 16, 2003



~~SECRET//NOFORN~~
THE SECRETARY OF DEFENSE
1000 DEFENSE PENTAGON
WASHINGTON, DC 20301-1000
UNCLASSIFIED

APR 16 2003

MEMORANDUM FOR THE COMMANDER, US SOUTHERN COMMAND

SUBJECT: Counter-Resistance Techniques in the War on Terrorism (S)

~~(S//NF)~~ I have considered the report of the Working Group that I directed be established on January 15, 2003.

~~(S//NF)~~ I approve the use of specified counter-resistance techniques, subject to the following:

- (U) a. The techniques I authorize are those lettered A-X, set out at Tab A.
- (U) b. These techniques must be used with all the safeguards described at Tab B.
- ~~(S//NF)~~ c. Use of these techniques is limited to interrogations of unlawful combatants held at Guantanamo Bay, Cuba.
- ~~(S//NF)~~ d. Prior to the use of these techniques, the Chairman of the Working Group on Detainee Interrogations in the Global War on Terrorism must brief you and your staff.

~~(S//NF)~~ I reiterate that US Armed Forces shall continue to treat detainees humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions. In addition, if you intend to use techniques B, I, O, or X, you must specifically determine that military necessity requires its use and notify me in advance.

~~(S//NF)~~ If, in your view, you require additional interrogation techniques for a particular detainee, you should provide me, via the Chairman of the Joint Chiefs of Staff, a written request describing the proposed technique, recommended safeguards, and the rationale for applying it with an identified detainee.

~~(S//NF)~~ Nothing in this memorandum in any way restricts your existing authority to maintain good order and discipline among detainees.

Attachments:
As stated

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FOREIGN NATIONALS

Classified By: Secretary of
Defense
Reason: 1.5(a)
Declassify On: 2 April 2013

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TAB A

INTERROGATION TECHNIQUES

~~(S//NF)~~ The use of techniques A - X is subject to the general safeguards as provided below as well as specific implementation guidelines to be provided by the appropriate authority. Specific implementation guidance with respect to techniques A - Q is provided in Army Field Manual 34-52. Further implementation guidance with respect to techniques R - X will need to be developed by the appropriate authority.

~~(S//NF)~~ Of the techniques set forth below, the policy aspects of certain techniques should be considered to the extent those policy aspects reflect the views of other major U.S. partner nations. Where applicable, the description of the technique is annotated to include a summary of the policy issues that should be considered before application of the technique.

A. ~~(S//NF)~~ Direct: Asking straightforward questions.

B. ~~(S//NF)~~ Incentive/Removal of Incentive: Providing a reward or removing a privilege, above and beyond those that are required by the Geneva Convention, from detainees. (Caution: Other nations that believe that detainees are entitled to POW protections may consider that provision and retention of religious items (e.g., the Koran) are protected under international law (see Geneva III, Article 34). Although the provisions of the Geneva Convention are not applicable to the interrogation of unlawful combatants, consideration should be given to these views prior to application of the technique.)

C. ~~(S//NF)~~ Emotional Love: Playing on the love a detainee has for an individual or group.

D. ~~(S//NF)~~ Emotional Hate: Playing on the hatred a detainee has for an individual or group.

E. ~~(S//NF)~~ Fear Up Harsh: Significantly increasing the fear level in a detainee.

F. ~~(S//NF)~~ Fear Up Mild: Moderately increasing the fear level in a detainee.

G. ~~(S//NF)~~ Reduced Fear: Reducing the fear level in a detainee.

H. ~~(S//NF)~~ Pride and Ego Up: Boosting the ego of a detainee.

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~~UNCLASSIFIED~~

Tab A

~~UNCLASSIFIED~~

I. ~~(S//NF)~~ Pride and Ego Down: Attacking or insulting the ego of a detainee, not beyond the limits that would apply to a POW. [Caution: Article 17 of Geneva III provides, "Prisoners of war who refuse to answer may not be threatened, insulted, or exposed to any unpleasant or disadvantageous treatment of any kind." Other nations that believe that detainees are entitled to POW protections may consider this technique inconsistent with the provisions of Geneva. Although the provisions of Geneva are not applicable to the interrogation of unlawful combatants, consideration should be given to these views prior to application of the technique.]

J. ~~(S//NF)~~ Futility: Invoking the feeling of futility of a detainee.

K. ~~(S//NF)~~ We Know All: Convincing the detainee that the interrogator knows the answer to questions he asks the detainee.

L. ~~(S//NF)~~ Establish Your Identity: Convincing the detainee that the interrogator has mistaken the detainee for someone else.

M. ~~(S//NF)~~ Repetition Approach: Continuously repeating the same question to the detainee within interrogation periods of normal duration.

N. ~~(S//NF)~~ File and Dossier: Convincing detainee that the interrogator has a damning and inaccurate file, which must be fixed.

O. ~~(S//NF)~~ Mutt and Jeff: A team consisting of a friendly and harsh interrogator. The harsh interrogator might employ the Pride and Ego Down technique. [Caution: Other nations that believe that POW protections apply to detainees may view this technique as inconsistent with Geneva III, Article 13 which provides that POWs must be protected against acts of intimidation. Although the provisions of Geneva are not applicable to the interrogation of unlawful combatants, consideration should be given to these views prior to application of the technique.]

P. ~~(S//NF)~~ Rapid Fire: Questioning in rapid succession without allowing detainee to answer.

Q. ~~(S//NF)~~ Silence: Staring at the detainee to encourage discomfort.

R. ~~(S//NF)~~ Change of Scenery Up: Removing the detainee from the standard interrogation setting (generally to a location more pleasant, but no worse).

S. ~~(S//NF)~~ Change of Scenery Down: Removing the detainee from the standard interrogation setting and placing him in a setting that may be less comfortable; would not constitute a substantial change in environmental quality.

T. ~~(S//NF)~~ Dietary Manipulation: Changing the diet of a detainee; no intended deprivation of food or water; no adverse medical or cultural effect and without intent to deprive subject of food or water, e.g., hot rations to MREs.

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Tab A

~~UNCLASSIFIED~~

U. ~~(S//NF)~~ Environmental Manipulation: Altering the environment to create moderate discomfort (e.g., adjusting temperature or introducing an unpleasant smell). Conditions would not be such that they would injure the detainee. Detainees would be accompanied by interrogator at all times. [Caution: Based on court cases in other countries, some nations may view application of this technique in certain circumstances to be inhumane. Consideration of these views should be given prior to use of this technique.]

V. ~~(S//NF)~~ Sleep Adjustment: Adjusting the sleeping times of the detainee (e.g., reversing sleep cycles from night to day.) This technique is NOT sleep deprivation.

W. ~~(S//NF)~~ False Flag: Convincing the detainee that individuals from a country other than the United States are interrogating him.

X. ~~(S//NF)~~ Isolation: Isolating the detainee from other detainees while still complying with basic standards of treatment. [Caution: The use of isolation as an interrogation technique requires detailed implementation instructions, including specific guidelines regarding the length of isolation, medical and psychological review, and approval for extensions of the length of isolation by the appropriate level in the chain of command. This technique is not known to have been generally used for interrogation purposes for longer than 30 days. Those nations that believe detainees are subject to POW protections may view use of this technique as inconsistent with the requirements of Geneva III, Article 13 which provides that POWs must be protected against acts of intimidation; Article 14 which provides that POWs are entitled to respect for their person; Article 34 which prohibits coercion and Article 126 which ensures access and basic standards of treatment. Although the provisions of Geneva are not applicable to the interrogation of unlawful combatants, consideration should be given to these views prior to application of the technique.]

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Tab A

~~SECRET//NOFORN~~
UNCLASSIFIED

TAB B

GENERAL SAFEGUARDS

(S//NF) Application of these interrogation techniques is subject to the following general safeguards: (i) limited to use only at strategic interrogation facilities; (ii) there is a good basis to believe that the detainee possesses critical intelligence; (iii) the detainee is medically and operationally evaluated as suitable (considering all techniques to be used in combination); (iv) interrogators are specifically trained for the technique(s); (v) a specific interrogation plan (including reasonable safeguards, limits on duration, intervals between applications, termination criteria and the presence or availability of qualified medical personnel) has been developed; (vi) there is appropriate supervision; and, (vii) there is appropriate specified senior approval for use with any specific detainee (after considering the foregoing and receiving legal advice).

(U) The purpose of all interviews and interrogations is to get the most information from a detainee with the least intrusive method, always applied in a humane and lawful manner with sufficient oversight by trained investigators or interrogators. Operating instructions must be developed based on command policies to insure uniform, careful, and safe application of any interrogations of detainees.

(S//NF) Interrogations must always be planned, deliberate actions that take into account numerous, often interlocking factors such as a detainee's current and past performance in both detention and interrogation, a detainee's emotional and physical strengths and weaknesses, an assessment of possible approaches that may work on a certain detainee in an effort to gain the trust of the detainee, strengths and weaknesses of interrogators, and augmentation by other personnel for a certain detainee based on other factors.

(S//NF) Interrogation approaches are designed to manipulate the detainee's emotions and weaknesses to gain his willing cooperation. Interrogation operations are never conducted in a vacuum; they are conducted in close cooperation with the units detaining the individuals. The policies established by the detaining units that pertain to searching, silencing, and segregating also play a role in the interrogation of a detainee. Detainee interrogation involves developing a plan tailored to an individual and approved by senior interrogators. Strict adherence to policies/standard operating procedures governing the administration of interrogation techniques and oversight is essential.

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Reason: 1.5(a)
Declassify On: 2 April 2013

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~~(S//NF)~~ It is important that interrogators be provided reasonable latitude to vary techniques depending on the detainee's culture, strengths, weaknesses, environment, extent of training in resistance techniques as well as the urgency of obtaining information that the detainee is known to have.

~~(S//NF)~~ While techniques are considered individually within this analysis, it must be understood that in practice, techniques are usually used in combination; the cumulative effect of all techniques to be employed must be considered before any decisions are made regarding approval for particular situations. The title of a particular technique is not always fully descriptive of a particular technique. With respect to the employment of any techniques involving physical contact, stress or that could produce physical pain or harm, a detailed explanation of that technique must be provided to the decision authority prior to any decision.

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Tab B

Appendix T. Deputy Secretary of Defense, Memorandum, December 30, 2005 (U)



DEPUTY SECRETARY OF DEFENSE
1010 DEFENSE PENTAGON
WASHINGTON, DC 20301-1010

DEC 30 2005

MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS
CHAIRMAN OF THE JOINT CHIEFS OF STAFF
UNDER SECRETARIES OF DEFENSE
COMMANDERS OF THE COMBATANT
COMMANDS
DIRECTORS OF THE DEFENSE AGENCIES
DIRECTORS OF THE DOD FIELD ACTIVITIES

SUBJECT: Interrogation and Treatment of Detainees by the Department of
Defense

The following provision appears in the Defense Appropriations Act, 2006
(§ 1402):

No person in the custody or under the effective control of the Department
of Defense or under detention in a Department of Defense facility shall be
subject to any treatment or technique of interrogation not authorized by and
listed in the United States Army Field Manual on Intelligence Interrogation.

Pursuant to the above, effective immediately, and until further notice, no person in
the custody or under the effective control of the Department of Defense or under
detention in a Department of Defense facility shall be subject to any treatment or
interrogation approach or technique that is not authorized by and listed in United
States Army Field Manual 34-52, "Intelligence Interrogation," September 28,
1992. Department of Defense Directive 3115.09, "DoD Intelligence
Interrogations, Detainee Debriefings and Tactical Questioning," November 3,
2005, remains in effect.

This guidance does not apply to any person in the custody or under the effective
control of the Department of Defense pursuant to a criminal law or immigration
law of the United States.

The President's February 7, 2002 direction that all persons detained by the U.S.
Armed Forces in the War on Terrorism shall be treated humanely remains in
effect. Consistent with the President's guidance, DoD shall continue to ensure that
no person in the custody or under the control of the Department of Defense,
regardless of nationality or physical location, shall be subject to cruel, inhuman, or
degrading treatment or punishment.



Robert England
ACTIVE

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