(3RD) CHURCH REPORT: Review of DoD Detention Operations and Detainee Interrogation Techniques, 07 Mar 05

DSLOC REF No.	CHURCH REPORT NOTATION	Problem In Detail (Finding)	REPORT RECOMMENDATIONS
C-001P	p. 3, 7, 196-197, 214, 201- 203, 237, 268-269	(U) Lack of specific guidance, clarity, and consistency on interrogation techniques among Afghanistan, Iraq, and GTMO interrogation operations	(U) Inferred: Standardize interrogation guidance under a single policy that provides for specific and unambiguous guidance applicable to all areas of operation. Decisions on the applicability of specific techniques should be reserved for the policy source and not left for interpretation by implementing levels.
	ES, p. 3	(U) Missed Opportunity: No specific guidance on interrogation techniques was provided to the commanders responsible for Afghanistan and Iraq, as it was to SOUTHCOM for GTMO	
	ES, p. 7	(U) CJTF-180 Mar 04 guidance was not drafted as carefully as it could have or should have been (revived modified and eliminated practices without explanation and included techniques from unsigned draft SECDEF memo, which was never approved)	(U) In Jun 04, CENTCOM directed that all interrogations in CENTCOM be standardized under a single policy. CFC-A directed that CJTF76 adopt this policy (developed in May 04 and based on FM 34-52). Policy remains in effect.
	p. 196- 197	(U) Evidence suggests that in developing techniques, interrogators in Afghanistan took so literally FM 34-52's suggestion to be creative that they strayed significantly from a plain-language reading of FM 34-52. Language from Appendix H (outdated 1987 edition) may have been perceived by interrogators as conveying a broad span of control which, when coupled with an expansive interpretation of the techniques themselves, made it possible to cite doctrinal origins for many of the most controversial counter-resistance techniques.	
	p. 214	(U) In short, up until the adoption of CJTF-7 policy in June 2004, it is likely that many units in Afghanistan were simply conducting interrogations as they always had: based on their interpretation of FM 34-52, rather than any	

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		theater interrogation policy. This finding is supported by the general left-to-right continuity of X marks representing techniques employed, including some in techniques that had been prohibited by LTG McNeill (e.g., stress positions	
	p. 196, 201-203	(b)(1),(b)(5)	[JSAP LC 00010-03, 04/15/03. Response went from CJCS to SECDEF. No clear picture as to what happened next]. Could be compliance, or dissemination
	p. 237	(U) The SECDEF issued specific guidance for the interrogation of al Qaeda and Taliban detainees at GTMO, but guidance for the interrogation of al Qaeda and Taliban detainees in Afghanistan was developed within CJTF-180. CJTF submitted to the Joint Staff a list of techniques being employed in Afghanistan in January 2003; and though the CJCS determined that the list was inconsistent with the techniques approved for GTMO, no response was provided. As a result, interrogation in Afghanistan – while they did not contribute to any detainee abuses – remained less restrictive than those in GTMO until June 2004, when CJTF-7's policy was adopted.	

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	p. 268- 269	(b)(1),(b)(5)	
C-002P	p. 3, 239, 304	(U) Interrogation Operations Planning Missed Opportunity: No evidence that specific detention or interrogation lessons learned from previous conflicts were incorporated into planning for operations in support of the GWOT.	(U) Future planning for detention and interrogation operations in the GWOT should take full advantage of prior and ongoing experience in these areas.
	p. 239	(U) There was no evidence that specific detention and interrogation lessons learned from previous conflicts were incorporated in planning for OEF.	(U) Inferred: Incorporate lessons learned in future planning for detention and interrogation operations
	p. 304	(U) Missed Opportunity: There was no evidence that specific detention and interrogations lessons learned from previous conflicts in the Balkans, Afghanistan, and elsewhere were incorporated in planning for OIF.	

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C-003P	p. 10, 11, 47, 92, 237, 303	(U) Ineffective Policy Dissemination	Inferred: Need improved processes for dissemination of policy guidance, ensuring compliance, and obtaining feedback on implementation down through the unit-level [Issue closely related to C-030, Compliance]
	ES, p. 10	(U) Dissemination of interrogation policy was generally poor in Afghanistan and Iraq, and interrogators fell back on their training and experience, often relying on a broad interpretation of FM 34-52.	
	ES, p. 11	(U) Missed Opportunity: Interrogation policy was never issued to the CJTF commanders in Afghanistan or Iraq (as was done for GTMO) Interrogation policy reflecting the lessons learned to date in the GWOT should have been in place in Iraq long before Sep 03	
	p. 47	(U) Individual interrogators' compliance with approved interrogation policies was often proportional to the "fidelity of transmission" from HHQ to the unit level, and then to the interrogators via WO and Senior Enlisted leadership. Details of approved theater interrogation policies were often lost during this process, frequently during the latter stage (though many units never received the approved policies at all). This left implementation of interrogation techniques up to individual interrogators' judgment.	[Dissemination & Compliance]
	p. 92	(U) In fact, a large majority of interrogators and field officers interviewed were unaware of the specific guidance and relied solely on their training and experience.	[Dissemination]
	p. 237	(U) We concur with BG Jacoby that dissemination of approved interrogation policies in Afghanistan was poor until the adoption of CJTF-7's May 13, 2004 interrogation policy. Until that point, interrogators largely relied upon broad interpretation of FM 34-52	[Dissemination]

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	p. 303	(U) [Major Finding in Iraq] Dissemination of approved interrogation policies was ineffective, often resulting in interrogators' lack of awareness of which techniques were currently authorized. This was largely due to reliance on SIPRNET as the medium for disseminating guidance.	[Dissemination]
C-004P	p. 10, 41, 42, 44, 148, 150, 151, 153, 217-218, 256-257	(U) Compatibility and sufficiency of MP and MI Doctrine for detention and interrogation operations	Inferred: Clarify and reconcile doctrine for MP and MI detention and interrogation operations
	ES, p. 10	(U) The GTMO model of MP/MI relations, when interrogations are conducted under controlled conditions, with specific guidance and rigorous command oversight, is a model that should be considered for use in other interrogation operations in the GWOT.	(U) Consider the GTMO MP/MI model for use in other interrogation operations in the GWOT
	p. 41	(U) MP and MI doctrine do not completely describe the functional relationship between detention and interrogation operations. Existing guidance is vague or non-existent (although doctrine clearly and expressly forbids inhumane treatment).	Inferred: Doctrine requires clarification
	p. 42	(U) There is a lack of doctrine regarding MP and MI roles in the application of the "outside-the-interrogation-room" techniques approved by DoD and service authorities in the course of the GWOT.	Inferred: Doctrine required
	p. 42, 44	(U) Neither MP nor MI doctrine prescribes specific responsibilities for the employment of techniques requiring coordination outside the interrogation room. In	Inferred: Doctrine requires clarification – division of labor to avoid /minimize need for creation of potentially non-compliant and disparate local polices

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		the absence of a clear doctrinal division of labor, commanders must develop local policies for employment of such techniques. A particular hazard of this arrangement is that if MPs are not adequately trained on approved interrogation techniques, they may make inappropriate individual judgments regarding the appropriateness of techniques ordered or implied by MI personnel.	
	p. 44	(U) Doctrine permits presence of MP guards during interrogations, but does not describe what role they should play or prohibit any particular roles	Inferred: Doctrine required to specify and prohibit roles as appropriate
	p. 44	(U) The presence of dogs during interrogations is neither specifically authorized nor specifically prohibited. The presence of dogs could become problematic in the absence of additional, specific training.	Inferred: Clarify in MI doctrine/policies (MP doctrine likely to consider use of dogs as possibly excessive force that could inherently be abuse)
	p. 148	(U) Doctrine permits the presence of MP's during interrogations, but it does not describe what rile they should play – nor for that matter, prohibit any roles. And doctrine is silent on the issue of whether (and hoe) MPs should assist with interrogation techniques employed outside the interrogation room. Therefore, while doctrine does not give affirmative license for MPs to help set the conditions for subsequent interrogations by assisting with techniques outside the interrogation room, it also does not prohibit the practice – and as discussed above, practical reality dictates that MPs must be involved with such techniques if they are to be used at all.	(U) [Echoes discussion on pp. 41-44]
	p. 150	(U) Both the Ryder and Taguba Reports, therefore, rejected a key ingredient of the GTMO model: MP participation in interrogation techniques outside the interrogation room that help to set the conditions for subsequent interrogations. To the extent that they	(U) It is entirely appropriate, indeed essential, for MPs to help set the conditions for successful interrogations – both by collecting intelligence on detainees, and by carrying out approved interrogation techniques outside the interrogation room." Before carrying out this

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		rejected it because they believed it was prohibited by doctrine, we disagree with this position because, as explained earlier, MP and MI doctrine are silent on whether (and how) MPs should assist with interrogation techniques employed outside the interrogation room. To the extent that they rejected it because they believed it encouraged detainee abuse by MPs, we again disagree, because both MP and MI doctrine are unequivocal on the issue of humane treatment of detainees. [Ryder and Taguba] underestimate the importance of intelligence collection operations, which may be aided by close – but carefully controlled – coordination between MP and MI units.	mission, of course, MPs should be properly trained on implementing the techniques. And they should receive their tasking from a central authority – not via casual conversations with MI personnel. Further, we agree with the Independent Panel that MP and MI units should belong to the same tactical command, which makes close coordination between these units possible. Current MP and MI doctrine, however, needs to be updated to reflect these realities.
	P. 151	(U) Current MP and MI doctrine, however, needs to be updated to reflect these realities. AS noted above, current doctrine leaves many of the specifics about the proper relationship between MP and MI units unanswered Doctrine should not leave such important matters to interpretation.	(U) Accordingly, it [doctrine] requires revision, and we suggest the following points for consideration: (1) MPs should not participate in interrogation sessions, other than to provide necessary security; (2) MPS should help set the conditions for subsequent interrogations by passively collecting information on detainees. Doctrine should include guidance on how this can be done in a thorough, systematic manner and how the information can best be compiled and shared with MI personnel; (3) MPs should help set the conditions for subsequent interrogations by implementing, at the direction of MI personnel, approved interrogation techniques that occur outside the interrogation room, in the cell block. It is crucial here, as the Independent Panel put it, that doctrine define the MP's role "with precision." At a minimum, doctrine should describe (a) the manner in which MI personnel should coordinate requests for MP assistance through a central authority (for example from a JIG [Joint Interrogation Group] to a JDOG [Joint Detainee Operations Group]; (b) specific examples pf

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			interrogation techniques that would fall into this category; (c) guidance on how MPs should implement those techniques; and (d) any appropriate limitations on MP participation with such techniques
	p. 153	(b)(1),(b)(5)	
	p. 217- 218		
	p. 256	(U) In Iraq, as in Afghanistan decisions as to whether MPs participated in the implementation of techniques such as Sleep Adjustment or MRE-only diet, or were present in the interrogation room, devolved to the unit level due to doctrinal vagaries we discussed previously.	(U) [Ties to Afghanistan MP/MI doctrine issue]
	p. 256- 257	(U) LTG Sanchez added "The assertion made in the Taguba report that [assignment of the senior officer present, MI Brigade Commander COL Pappas, as overall commander of the base at Abu Ghraib] was non-doctrinal is contentious and one that I totally disagree with." Again,	(U) [Ties to MP and MI relationship issues]

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C-005P	p. 16, 92- 94, 97, 236, 274	(U) Failure to anticipate, detect, and react to warning signs of abuse	(U) Inferred: Put in place more specific procedures and direct guidance to prevent further abuse. Emphasize stronger leadership, greater oversight, and enforcement of good military discipline to lessen the likelihood of abuse.
	ES, p. 16	(U) Roughly one-third (23) of the abuse cases occurred at the point of capture in Afghanistan or Iraq – that is, during or shortly after capture of a detainee. Necessary military discipline was lacking in some instances	(U) Need for military discipline is paramount to guard against the possibility of abuse in the volatile [capture] situation.
	ES, p. 16	(U) There was a failure to react to early –clearly present – warning signs of abuse. 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) Put in place more specific procedures and direct guidance to prevent further abuse.
	ES, p. 16	(U) A breakdown of good order and discipline in some units could account for other incidents of abuse. This implies a failure of unit-level leadership to recognize the inherent potential for abuse due to individual misconduct, to detect and mitigate stress on troops involved in detention & interrogation operations, and failure to provide requisite oversight.	(U) Stronger leadership and greater oversight would have lessened the likelihood of abuse.
	p. 92-94, 97	(U) There is no single explanation for why abuses occurred; rather, a combination of factors played a role: (1) Roughly one-third occurred at Point of Capture (POC) where passions run high and service members find themselves in dangerous situations. This potentially volatile situation is also the point at which the need for military discipline is paramount in order to guard against the p[possibility of detainee abuse, and that discipline was lacking in some instances. (2) The nature of the enemy in Iraq (and to a lesser extent, in Afghanistan) may have played a role in the abuse. Service members	(U) Stronger leadership and greater oversight would have lessened the likelihood of abuse.

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		may have at times permitted our enemy's treacherous tactics and disregard for the law of war to erode their own standards of conduct. (3) A <u>breakdown of good order and discipline</u> in some units could account for other incidents of abuse. This breakdown implies a failure of unit-level leadership to recognize the potential for abuse in detention and interrogation operations, to detect and mitigate the enormous stress on our troops, and a corresponding failure to provide the requisite oversight to prevent such abuse. The absence of strong leadership or oversight may have contributed to setting the conditions for abuse.	
	p. 236	(U) Oversight of detainee operations at the BCP prior to the deaths was not examined in any depth. For example, the only direct oversight in our review was by the local CJTF-180 Provost Marshall (an Army Major). Although he identified questionable practices a month prior to the deaths, he did not ensure corrective action was taken.	
	p. 274	(U) We found no evidence of any policy or directive that might be interpreted as ordering or permitting the Abu Ghraib abuse, and agree with LTG Sanchez, who stated: "The cause of these abuses and deaths were the training, leadership, and discipline failures inside of the units. The institutional guidance and the policies were all in place. The advice, the procedures, everything that was necessary for a commander to be successful I think had been done. The resourcing was progressing at a very slow pace, but it was in concert with the overall situation of the task force and the environment that we were in And I think in the end, it was just plain and simple failures in those three areas at the lowest levels of leadership	[Positive; however, some could take issue with LTG Sanchez's claim that all the policies were in place, given the clear failure to disseminate them and evidence of non-compliance even when they were available]

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C-006P	p. 18, 46, 332-333, 334-335, 337	(U) Lack of Interagency policy governing the involvement of OGAs in the interrogation of DoD detainees	(b)(1),(b)(5)
	y.		(U) We therefore recommend the establishment and wide promulgation of interagency policies governing the involvement of OGAs in the interrogation of DoD detainees.
	ES, p. 18	(U) The practice of holding "ghost detainees" for the CIA – although limited in scope – was guided by oral, ad hoc agreements and was the result, in part, of the lack of any specific, coordinated interagency guidance	
	ES, p. 18- 19	(U) DoD personnel 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.	(U) We therefore recommend the establishment and wide promulgation of interagency policies governing the involvement of OGAs in the interrogation of DoD detainees.
	p. 46	(U) [N]or are there policies governing the interaction of DoD interrogators and CIA, FBI, or other U.S. government law enforcement and intelligence personnel	
	p. 332	b)(1),(b)(5)	

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	p. 332- 333	(b)(1),(b)(5)	
	p. 333		[See p. 332]
	p. 334- 335		(S) [See p. 337 recommendation.] SECRET

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	p. 335	(b)(1),(b)(5)	(S) [See p. 337 recommendation.] SECRET
	p. 337		(8) [See p. 337 recommendation.] SECRET
	p. 337		(b)(1),(b)(5)
C-007P	p. 19, 354, 357, 365	(U) Limited/Non-Standard Training of Medical Personnel in the screening/treatment of detainees led to inconsistent field-level implementation of specific requirements.	(U) There is a need for [a] focused training program in this area so that our medical personnel are aware of and comply with detainee screening and medical treatment requirements. One obvious need is for a clear and concise training curriculum in a standardized format amenable to use in diverse settings
	ES, p. 19	(U) In Afghanistan and Iraq we found inconsistent field-level implementation of specific requirements.	

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	ES, p. 19	(U) Few U.S. [medical] personnel, however, had received specific training relevant to detainee screening and medical treatment.	
	p. 354	AFG- (FOUO)-Specific training WRT detainee medical care was limited to informal sessions after deployment to help them distinguish between real and "pseudo" complaints by detainees. Responses to a question about governing directives for detainee medical care were vague, and none mentioned the Geneva Conventions.	(U) Inferred: Training deficiency; also p. 357
	p. 357	IRAQ- (FOUO)-None of the interviewed medical personnel described pre-deployment training related to detainee medical care or Geneva Convention responsibilities, although one physician described such training previously in medical school. When asked about directives governing their duties relative to providing medical care for detainees, only a handful mentioned the Geneva Conventions at all. Most made vague reference to unspecified Army regulations. Training received in theater mostly related to specific medical issues or approaches to unruly detainees.	(U) Inferred: Training deficiency; also p. 354
	p. 365	(U) Medical personnel appeared to understand, in general terms, their responsibility for providing humane medical care to detainees, but few had received training specifically relevant to detainee screening and medical treatment. In Afghanistan and Iraq we found inconsistent field-level implementation of specific requirements, such as monthly medical inspections and weight recordings.	(U) We note that OSD is currently developing specific policies to address this issue: One obvious need is for a clear and concise training curriculum in a standardized format amenable to use in diverse settings

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C-008P	p. 19-20, 353, 359, 362-363, 367	(U) Assess whether medical personnel have adequately discharged their obligation to report (and where possible, prevent) detainee abuse.	(U) Our insights, taken together, suggest the need to clarify and reinforce the special responsibilities of medical personnel in preventing and reporting suspected detainee abuse. Inferred : Standardize practice for medical personnel to report suspected incidents of detainee abuse
	p. 353	GTMO- (FOUO) In July 2004, four medical providers now indicated they had seen or suspected detainee abuse. [All cases had been previously reported and investigated, with corrective action taken as required]	[Reporting suspected abuse. See also p. 359 and 362-363]
	p. 359	IRAQ- (FOUO) Of the 38 medical personnel interviewed, four said they had seen or suspected detainee abuse.	[Reporting suspected abuse. See also p. 353 and 362-363]
	p. 362- 363	IRAQ- (FOUO) We do not know whether medical personnel reported suspicions of detainee abuse in this [these cases] case, but the circumstances should probably have led them to consider detainee abuse. [In the 12/1/03 case,] concerns of medical personnel are suggested in a Memorandum for the Record, dated May 11, 2004 from personnel of 21 st Combat Support Hospital. We do not know whether medical personnel reported suspicions of abuse at the time of death. [In the 6/13/03 case] interviews revealed that an Army physician suspected detainee abuse and reported this to investigators within a month or so of the death.	[Reporting suspected abuse. See also p. 353 and 359]
	p. 367	(U) We identified several cases where medical personnel witnessed behavior or circumstances that should probably have led them to suspect detainee abuse. We do not know whether they reported those suspicions.	(U) Our insights, taken together, suggest the need to clarify and reinforce the special responsibilities of medical personnel in preventing and reporting suspected detainee abuse.