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May 31, 2007

Dr. Robert M. Gates Secretary of Defense 1000 Defense Pentagon Washington, DC 20301-1000

Dear Secretary Gates:

We wish to express our appreciation for the recent declassification and web-posting of the Office of the Inspector General's "Review of DoD-Directed Investigations of Detainee Abuse" (the "OIG Report" or the "Report"). Such transparency is essential to the ongoing efforts of many concerned Americans, both within and outside the Department of Defense, who seek reclamation of the US military's over two centurylong commitment against torture and abuse.

To that end, we urge you to undertake several remedial measures, described below, in response to the OIG Report's depiction of the re-engineering of the Survival, Evasion, Resistance and Escape ("SERE") training program for use in interrogation and the role of psychologists in the development and implementation of abusive interrogation methods.

In disclosing new details of the program and the role played by SERE psychologists in abusive interrogation methods, the OIG Report confirms and further develops an already robust public record on this subject. This record depicts the inevitable, destructive nature of the program and misuse of psychology for the cruel, inhumane, and degrading treatment of detainees.

SERE, a training program for US military personnel at risk of capture, includes a significant psychological component, overseen by military psychologists at multiple sites, particularly Fort Bragg, North Carolina. As part of the program, trainees are subjected to harsh and abusive psychological interrogation methods - largely derived from Cold War techniques employed by Soviet and Chinese interrogators to extract false confessions.

Various reports have described SERE training methods in terms strikingly similar to reported abuses of detainees in US custody: stress positions, prolonged sleep deprivation, isolation, "noise stress" (including sensory bombardment with loud music and strobe lights), sexual humiliation, forced nudity, extreme cold, and more. The medical and psychological literature and experience with torture survivors demonstrate the enormous harm caused by such methods, ranging from psychosis and suicidal ideation to post-traumatic stress disorder.

Nevertheless, according to the OIG, in 2002 the Commander of Guantanamo Bay (JTF-170) adopted torture and other abusive "counterresistance" techniques used in SERE training as interrogation policy for Guantanamo. This initiative was undertaken in conjunction with SERE psychologists from the Joint Personnel Recovery Agency (the "JPRA" oversees the SERE program) and the Army Special Operations Command, including the Army Special Operations Command's "Psychological Directorate." (See OIG Report, pp. 24-25.) Behavioral Science Consultative Teams (BSCTs), which included psychologists and other health professionals were tasked with developing standard operating procedures (SOP) for using the SERE methods in interrogations at Guantanamo. (Id. P. 25.)

The OIG additionally found that the SERE methods later became the standard operating procedure for interrogations conducted in both Iraq and Afghanistan, and had migrated from Guantanamo due, in part, to training and support from JPRA, BSCT, and Special Operations psychologists and others. (Id. p. 27-28.)

We recognize that since the issuance of the OIG report in August 2006, the DoD has taken some measures to repair the damage caused by the widespread influence of SERE-based methods in interrogations. The new Army Field Manual on human intelligence gathering, for example, explicitly prohibits several SERE-based techniques, yet Appendix M of the manual explicitly permits what amounts to isolation, along with sleep and sensory deprivation. The manual is silent on a number of other SERE-based methods, creating ambiguity and doubt over their place in interrogation doctrine.

In addition, guidelines for health personnel, drafted in 2005 and revised in 2006 by the former Assistant Secretary of Defense for Health Affairs, William Winkenwerder, Jr., have reduced the role of psychiatrists as BSCT members in response to the new interrogation policies of the medical associations.

However, these guidelines continue to call on military psychologists to play a central role in interrogations by BSCTs, fail to bind health professionals to their ethical obligations to "first do no harm," and place clinicians in the Military Intelligence chain of command rather than within the Medical Department. This is a dangerous role to impose on mental health experts, one that led to the misappropriation of SERE psychological expertise in the first place, as documented by the OIG and others.

PHR, therefore, respectfully urges you to take the following actions:

- 1. Fully implement the OIG's recommendation to "preclude the use of Survival, Evasion, Resistance, and Escape physical and psychological coercion techniques" in all interrogations. (Id, pp. 29-30.) This includes rescission of Appendix M of the new Army Field Manual and specific prohibition, by name, of each of the known SERE-based methods and their equivalents.
- 2. Abolish the BSCTs and rescind the June 6, 2006 Department of Defense Instruction(Medical Program Support for Detainee Operations), which established guidelines for the BSCTs and other health personnel. Establish new unambigious guidelines holding all health care professionals, regardless of their designated role or assignment, to the well-established health professional principle to prevent, avoid and minimize harm.
- 3. In the interest of transparency reflected in the declassification of the OIG Report, declassify and release all other documents shedding light on US interrogation policy and practices, including but not limited to SERE-based methods.

Once again, we thank you for making the landmark disclosures in the OIG Report available for public comment and discourse and for this opportunity to highlight its significant insights into the exploitation of the SERE program. We would welcome the opportunity to speak with you further about our concerns and recommendations.

Sincerely,

Leonard S. Rubenstein, JD Executive Director Physicians for Human Rights

Stephen N. Xenakis, MD Brigadier General (Ret.), US Army