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CIA torture doctors and psychologists

Monday, September 21, 2009

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Nat Hentoff

The fearlessly independent Physicians for Human Rights — founded in 1986 and sharer of the Nobel Peace Prize in 1997 — has once again exposed the shameful role of doctors and psychologists throughout the CIA's torture interrogations, banned by the international Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, as well as in the Geneva Conventions and our own statutes.

Despite all the attention and furor when the former CIA Inspector General's 2004 report was finally released through an ACLU lawsuit — to the rage of objectors Dick Cheney and CIA Director Leon Panetta — the continuing debate has yet to focus on, and deal with, the Physicians for Human Rights Aug. 31 report:

“Aiding Torture: Health Professionals’ Ethics and Human Rights Violations Demonstrated in the May 2004 Inspector General’s Report” — with additional incriminating details that “CIA Health Professionals’ Role in Torture Worse Than Previously Known.”

The startling indictment is that “health professionals were involved at every stage in the development, implementation and legitimization of this torture program.” They were as disgracefully complicit as John Yoo and the other Justice Department lawyers who provided torturously manipulated “legal” cover to the CIA and its bosses in the Defense department and the Oval Office.

Preceding the waterboarding, the confinement of battered, shackled terrorism suspects in boxes so small they could only crouch, very prolonged sleep deprivation, et al, there was the “intake process closely linked to the process of interrogation.”

As Dr. Steven H. Miles painstakingly described in his path-breaking accounts of the self-degradation of these health professions — “Oath Betrayed: America’s Torture Doctors” (paperback, University of California Press, 2009) — the psychologists had information about the prisoners to indicate their possible phobias and other vulnerabilities. They informed the interrogators using “enhanced” techniques on how best to “crack” these suspects.

Furthermore, “by requirement,” Physicians for Human Rights reports, “all interrogations were monitored in real-time by health professionals.” They not only saw it all as it happened but were committed to making the torture as effective as possible.

For instance, “a medical device called a pulse oximeter (a device to measure oxygen saturation in a subject’s blood) was placed on the finger of a detainee to monitor the effectiveness of his respiration during waterboarding ... to calibrate physical and mental pain and suffering.” Don’t let up now!

Since there is clear evidence of deaths during interrogations — from Defense Department autopsy reports obtained by the ACLU and the scrupulous reporting of the New Yorker’s Jane Mayer — did any of these on-the-spot doctors and psychologists intervene before it was too late?

What makes this Physicians for Human Rights documentation so nightmarish are the details. For example, we’ve heard of suspects often being hooded. What’s so terrible about that? But what was hooding actually like? Will we ever know?

This PHR report quotes from a February 2004 report by the International Committee of the Red Cross (ICRC) on interrogations in Iraq, but as PHR has previously noted, “hooding was used both during transportation and during interrogation,” not only in Iraq. And we can only guess what special forms of hooding were invented in the CIA’s secret prisons.

This is what the ICRC found: “Hooding (was) used to prevent people from seeing and to disorient them, and also to prevent them from breathing freely. One, or sometimes two bags, sometimes with an elastic blindfold over the eyes which, when slipped down, further impeded proper breathing.” And during beatings, the hooded prisoner was all the more anxious and apprehensive as to when the blows would come and where.

Also, “Hooding could last for periods from a few hours to up to 2 to 4 consecutive days, during which hoods were lifted only for drinking, eating or going to the toilets.”

And where were the doctors and psychologists?

One detainee cited in the ICRC report, Mr. Bin Attash, claimed he was forced to wear a diaper for a long time. He told the International Red Cross “on several occasions the diaper was not replaced so he had to urinate and defecate on himself while shackled in the prolonged stress standing position.”

And “three other detainees specified that they had to defecate and urinate on themselves and remain standing in their own body fluids.” Physicians for Human Rights adds: “The placement of a normally continent adult in a diaper will likely lead to efforts by the adult to resist urination or defecation, which in turn will likely result in bowel cramping and bladder spasm.”

Calling this, and so much more, “an unconscionable affront to the practice of medicine” (and psychology), Physicians for Human Rights, as I’ll report next week, has urgent recommendations on the accountability of health professionals for these affronts — committed in plain view of professional

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