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## Doctors and Torture

Op-Ed

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THERE IS GOOD REASON to believe that psychologists and psychiatrists have been involved in the cruel interrogations that have taken place in Guantanamo Bay and elsewhere in the war against terrorism. Both the American Psychological Association and the American Psychiatric Association have therefore made clear that it is unethical for members of their profession whether in the military or not to participate in torture. But that ethical injunction has little force unless there is a clear definition of what constitutes torture.

Are prolonged isolation, sexual humiliation, sleep deprivation, forced nudity, growling guard dogs, sensory deprivation, and strobe lights psychological torture? And what about using coercive methods based on psychiatric evaluations that reveal the fears, concerns, and anxieties of the detainee? Or having a Behavioral Science Consultation Team hidden behind a one-way mirror guiding interrogators on how best to exploit the vulnerabilities of a detainee?

According to the Physicians for Human Rights, all of these measures, which they describe as "systematic psychological torture," have been used at Guantanamo Bay with the participation of psychologists, psychiatrists and other physicians. But until Secretary of State Condoleezza Rice's statement in Kiev last week, the American government's position was that none of these measures could be defined as torture or was forbidden by American law.

The now notorious Justice Department Bybee memorandum prepared in 2002 for Counsel to the President Alberto Gonzales had declared that acts of interrogators "may be cruel, inhumane, or degrading" but still not torture. The department set the bar for torture so high that almost any cruel measure would be permissible under US law. The memorandum's definition of the level of severe pain that had to be met for torture sounded particularly strange to physicians pain "equivalent in intensity to the pain accompanying serious physical injury, such as organ failure, impairment of bodily function or even death." Even more extreme was the definition of psychological torture requiring that the torturer "intended to cause prolonged mental harm." Under this interpretation the interrogators could escape liability by saying that none of them specifically intended to cause the prolonged mental harms that detainees have apparently suffered (22 of them have attempted suicide).

In January, Gonzales, by then nominee for attorney general, explained why the lines had been drawn this way. He stated that torture was forbidden but that interrogation involving cruel, inhumane, or degrading treatment was not forbidden if it took place outside the United States and American citizens were not the victims tailor-made for Guantanamo Bay and the CIA. This was the Justice Department's interpretation of the international treaty ratified in 1994, called the Convention Against Torture and Other Cruel Inhumane and Degrading Treatment or Punishment.

Defenders of the Bush administration have said that their critics have confused torture with cruel and inhumane treatment. But if there was confusion, it was because most Americans had no idea that their government had adopted such an appalling legal interpretation of torture and permitted everything else that took place at Guantanamo Bay.

Senator John McCain has proposed legislation that would remedy these abuses, and this week the Army approved a manual that protects prisoners from some of the practices that took place in Guantanamo and elsewhere, but the details remain classified. Still troubling is the report that the Army guidelines are based on the Geneva Conventions, which the Bush administration says do not apply to suspected terrorists or to the Guantanamo detainees.

Given the long tradition of "Do No Harm," it is difficult to imagine any healthcare professional saying it would be ethical for physicians to participate in cruel, inhumane, degrading, and punitive interrogations even if the attorney general decrees that it is not a crime.

Rice seems to have joined those of us who are appalled by the administration's manipulation of the law. In Kiev last week, she broke ranks and said that the ban on "cruel, inhumane, and degrading treatment applies . . . both in the US and around the world." One can only hope that Rice is articulating a new Bush administration position and that the American Psychiatric Association and the American Psychological Association will both issue new guidelines emphasizing that it is unethical to participate in any interrogation involving torture.

There are those who will still want to use torture in ticking bomb scenarios. Such concerns do not justify the shameful practices at Guantanamo Bay. What American law and American psychiatrists and psychologists need to do now is to reassert our basic norms of decent and ethical conduct, which seem to have collapsed in our response to 9/11.

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