REVIEW OF DEPARTMENT COMPLIANCE WITH PRESIDENT'S EXECUTIVE ORDER ON DETAINEE CONDITIONS OF CONFINEMENT

## Table of Contents

Table of Contents ..... 2
List of Appendices ..... 3
Executive Summary ..... 4
Introduction ..... 6
Methodology ..... 7
Authorities ..... 8
Guantánamo Detention Policy and Practice ..... 8
Input from External Sources ..... 9
Orientation to Camp Operations ..... 10
Joint Medical Group ..... 13
Joint Intelligence Group ..... 15
Findings ..... 16
Shelter ..... 17
Hygiene ..... 20
Clothing and Bedding ..... 21
Food and Water ..... 23
Religious Practice ..... 25
Recreation ..... 27
Sleep ..... 29
Detainee Discipline System. ..... 30
Detainee Compliance with Camp Rules and Vetting Criteria ..... 32
Intellectual Stimulation ..... 34
Mail ..... 36
Protection from Violence ..... 38
Protection from Violence - Use of Force ..... 40
Protection from Violence-Forced Cell Extractions ..... 42
Protection from Violence-Shackling ..... 44
Protection from Sensory Deprivation-Solitary Confinement ..... 45
Protection from Sensory Deprivation-Human-to-Human Contact. ..... 47
Protection from Humiliation. ..... 49
Healthcare Services-Quality of Care and Access ..... 51
Medical/Dental Confidentiality of Medical Records and Information ..... 54
Medical Ethics-Medical Treatment of Hunger Strikers ..... 56
Healthcare Personnel Management-Behavioral Science Consultants (BSC) ..... 59
Interrogation ..... 61
Outside Access to Detainees ..... 64
Attorney Access to Detainee-Clients ..... 66
Detainees Ordered or Approved for Release. ..... 68
Repatriation/Transfer ..... 70
Conclusions ..... 72
Glossary ..... 75
Bibliography ..... 78

## List of Appendices

1. Common Article 3 of the Geneva Conventions
2. Executive Order, Review and Disposition of Individuals Detained at the Guantánamo Bay Naval Base and Closure of Detention Facilities, dated 22 January 2009
3. SECDEF Memo, Review of Department Compliance with Presidents Executive Order on Detainee Conditions of Confinement, dated 2 February 2009
4. Compliance Review Team Activity Log
5. American Civil Liberties Union/Amnesty International/Human Rights First/Human Rights Watch letter to President Obama dated 30 January 2009
6. Assistant Secretary of Defense Joseph A Benkert Draft Letter to: Anthony D Romero, Larry Cox, Elisa Massimino and Kenneth Roth Larry Cox letter Elisa Massimino letter Anthony Romero letter Kenneth Roth letter
7. HRW, Locked Up Alone - Detention Conditions and Mental Health at Guantánamo
8. Human Rights First, Elisa Massimino Letter to Joseph Benkert
9. Amnesty International Larry Cox Letter to Ms. Sandra Hodgkinson and Mr. Alan Liotta
10. ACLU Anthony D Romero Letter to Joseph Benkert
11. Letter from COL Masciola to VADM MacDonald
12. Photos Depicting Camps at Guantánamo

Part 1
Part 2
Part 3
Part 4
Part 5
Part 6
Part 7
Part 8
Part 9
Part 10
Part 11
Part 12
Part 13
13. 30-2 Discipline Matrix
14. 30-3 BI-CI-Privileges
15. Detainee Diet Menu
16. 30-4 Detainee Camp Rules
17. 30-1 Detainee Offense Matrix
18. JTF-Guantánamo Graph, Population Incident Ratio

## Executive Summary

The Secretary of Defense tasked a special DoD team to review the conditions of confinement at Guantánamo Bay Naval Base, to ensure all detainees there are being held "in conformity with all applicable laws governing the conditions of confinement, including Common Article 3 of the Geneva Conventions," pursuant to the President's Executive Order on Review and Disposition of Individuals Detained at the Guantánamo Bay Naval Base and Closure of Detention Facilities, dated January 22, 2009. The Review Team conducted 13 days of investigation on site that included more than 100 interviews with JTF-Guantánamo leadership, support staff, interrogators, and guards, multiple announced and unannounced inspections of all camps during daylight and night operations, reviewed numerous reports, video, discipline records, and observed many aspects of daily operations. Collectively, we talked to a number of detainees and observed detainee activities, including enteral feedings and interrogations. The review Team also solicited a sampling of opinion, studies, and published works, which reflected the perspective of detainees and other concerned interest groups, many with recommendations to improve detention conditions. This included our request for additional views from four organizations who wrote to the President concerning Guantánamo on January 30, 2009: Human Rights First, Human Rights Watch, the American Civil Liberties Union and Amnesty International. These organizations responded to that request on February 6,2009 , and their submissions were carefully considered.

After considerable deliberation and a comprehensive review, it is our judgment that the conditions of confinement in Guantánamo are in conformity with Common Article 3 of the Geneva Conventions. ${ }^{1}$

In our view, there are two components in the scope of the compliance review taken from Common Article 3: the first is the explicit prohibition against specified acts (at any time and at any place). Any substantiated evidence of prohibited acts discovered in the course of the review would have warranted a finding of "non-compliance" with Common Article 3. We found no such evidence.

Additionally, determining conformity with Common Article 3 requires examination of the directive aspect of the Article, this being that "Persons...shall in all circumstances be treated humanely." This element of the effort demanded that the Review Team examine conditions of detention based upon our experience and professional backgrounds, informed and challenged by outside commentary. As a result of that effort, we find that the conditions of confinement in Guantánamo also meet the directive requirements of Common Article 3 of the Geneva Conventions.

While we conclude that conditions at Guantánamo are in conformity with Common Article 3, from our review, it was apparent that the chain of command responsible for the detention mission at Guantánamo consistently seeks to go beyond a minimalist approach to compliance with Common Article 3, and endeavors to enhance conditions in a manner as humane as possible consistent with security concerns. In this regard, in this report our team has identified a number of items which we recommend the Department of Defense continue to pursue consistent with that humane approach described above, or in several cases, items that we recommend for JTF-

[^0]Guantánamo that are not now in place. In this report, we do not intend to suggest that these recommendations are items that the Department must pursue to satisfy Common Article 3. Rather, they are items that we view as consistent with the approach of the Chain of Command to continually enhance conditions of detainment.

Broadly stated, among the things we recommend:
First, in our view, socialization, or interaction among the detainees, is important because of the length of time individuals at Guantánamo have been detained. Current socialization practices are in conformity with Common Article 3. However, the team believes that in certain camps, further socialization is essential to maintain humane treatment over time. In our opinion, the key to socialization is providing more human-to-human contact, recreation opportunities with several detainees together, intellectual stimulation, and group prayer.

Second, the Review Team recognized that detainee access to high quality healthcare services is a fundamental aspect of humane treatment that is greatly enhanced by appropriate human-tohuman contact and socialization between detainees and healthcare providers. JTF-Guantánamo appreciates that delivery of quality healthcare requires trusting relationships between providers and their patients. Although this type of trusting relationship is difficult to achieve in a custodial environment, the Review Team makes recommendations that can serve to enhance further the high quality of care delivered to detainees.

Third, as long as JTF-Guantánamo is operational, it will continue to require extensive resources. The most significant activity in this regard involves the continued support for camp improvement projects currently underway that affect the ability to provide socialization opportunities. Enhancement of humane treatment, as the operation continues, and as the detainee population spends more time under U.S. control, will also require strengthening of internal controls and continued dedication of both funds and personnel. As a related matter, the Review Team recommends additional actions to maintain the firewall protections that separate current intelligence gathering and healthcare.

Fourth, we endorse the use of video recording in all camps and for all interrogations. The use of video recordings to confirm humane treatment could be an important enabler for detainee operations. Just as internal controls provide standardization, the use of video recordings provides the capability to monitor performance and maintain accountability.

Finally, the Review Team has also made several recommendations to sustain a humane treatment standard in the face of individual detainees' uncertainty and anxiety about their futures. We conclude that certainty regarding the detainees' future has a direct correlation to detainee behavior and therefore, conditions inside the camp population. There are still some detainees in Guantánamo despite court orders that the U.S. government has failed to meet its burden that they are enemy combatants. Understandably, these detainees continue to express their extreme frustration with their continued detention. This is a great concern to the Review Team because it complicates conditions of detention. Therefore, the Review Team strongly endorses the continued interagency process to resolve these detainees' future.

## Introduction

On 22 January 2009, the President signed the Executive Order that directed the Secretary of Defense to immediately undertake a review of the conditions of detention at Guantánamo to ensure that no individual at Guantánamo is being held there, "except in conformity with all applicable laws governing the conditions of such confinement, including Common Article 3 of the Geneva Conventions." The President further directed that such review shall be completed within 30 days and any necessary corrections shall be implemented immediately thereafter." ${ }^{2}$ Consequently, the Secretary of Defense directed the Vice Chief of Naval Operations to undertake a "Review of Department Compliance with [the] President's Executive Order on Detainee Conditions of Confinement" ${ }^{\prime 3}$ with a team of experts from the Office of the Under Secretary of Defense for Policy, Office of the Assistant Secretary of Defense for Health Affairs, the Joint Staff, Department of the Navy, Department of the Army, and USSOUTHCOM ${ }^{4}$ to review relevant documents, inspect all detention facilities at Guantánamo, and interview as appropriate USSOUTHCOM and JTF-Guantánamo personnel to ensure compliance with the Executive Order.

This report responds to tasking from the President and the Secretary of Defense and examines the present conditions of detention at Guantánamo, relying most principally upon the provisions of Common Article 3 of the Geneva Conventions to determine whether the conditions of confinement conform to the requirements outlined in the Executive Order.

There are two components in the scope of the compliance review taken from Common Article 3 of the Geneva Conventions: the first is the explicit prohibition against acts (at any time and at any place) that include:
(a) violence to life and person, in particular murder of all kinds, mutilation, cruel treatment and torture;
(b) taking of hostages;
(c) outrages upon personal dignity, in particular humiliating and degrading treatment;
(d) the passing of sentences and the carrying out of executions without previous judgment pronounced by a regularly constituted court affording all the judicial guarantees that are recognized as indispensible by civilized peoples.

Substantiated evidence of prohibited acts discovered in the course of the review would warrant a finding of "non-compliance" with Common Article 3 and result in the requirement for immediate corrective action.

[^1]The second component in the examination of compliance is directive in nature: "Persons taking no active part in the hostilities, including members of the armed forces, who have laid down their arms...shall in all circumstances be treated humanely." This area was open to the interpretation and judgment of the Review Team because there is no clear definition of "humane" treatment, in either U.S. or international law and the absence of prohibitive acts alone was an insufficient indicator of whether the conditions of detention would continue to be humane over time.

While we conclude that conditions at Guantánamo are in conformity with Common Article 3, from our review, it was apparent that the chain of command responsible for the detention mission at Guantánamo seeks to go beyond a minimalist approach to compliance with Common Article 3, and endeavors to enhance conditions in a manner as humane as possible consistent with security concerns. In this regard, in this report our team has identified a number of items which we recommend the Department of Defense continue to pursue consistent with that humane approach described above, or in several cases, items that we recommend for JTF-Guantánamo that are not now in place. In this report, we do not intend to suggest that these recommendations are items that the Department must pursue to satisfy Common Article 3. Rather, they are items that we view as consistent with the approach of the Chain of Command.

The needs of detainees are not static and therefore, require us to review the rationale for decisions and the expenditure of resources over the continuum of detention operations in Guantánamo. The compliance review includes not only an assessment of the physical structures that support detention operations and the physical health of the detainees, but importantly, the mental well-being of detainees after several years of camp operations...meaning that policies, programs, and structures put in place several years ago, while technically "humane" in their formative stages require review and adjustment over time.

Under the broad prescription for the obligation to be "humane" in the treatment of detainees, the team's findings are followed by prioritized recommendations ${ }^{5}$ for new initiatives and continuation of existing practices that the team endorses as a means for assisting USSOUTHCOM in its efforts to enhance humane conditions of detention in Guantánamo. The team also includes a specific request that higher authority place increased emphasis on the transfer of detainees.

## Methodology

The report reviewed all aspects of detention conditions from detainee arrival to detainee transfer/repatriation. We looked across three areas: governing authorities, the Guantánamo detention policies and practices derived from those authorities, and views from outside groups critical of local operating procedures. From all of the above, the team drew conclusions and developed recommendations.

[^2]
## Authorities

The review assessed current governing authorities and directives. These included, but were not limited to the following applicable laws: Geneva Conventions Common Article 3; Torture Statute (18 USC 2340), DoD Appropriations Act of 2006, Title X, sections 1001-1006; War Crimes Statute (18 USC 2441); Detainee Treatment Act 2005; Military Commission Act 2006; Hamdan v. Rumsfeld; Rasul v. Bush; Hamdi v. Rumsfeld.

The review also included a review of following applicable regulations: DoDD 2310.01E (DoD Detainee Program); DoDD 2311.01E (DoD Law of War Program); DoDI 2310.08E (DoD Medical Program Support for Detainee Operations); DoDD 3115.09 (DoD Intelligence Interrogations, Detainee Debriefings, and Tactical Questioning); Army FM 2-22.3 (Human Intelligence Collector Operations).

Other guidance related to the conditions of detention included: DEPSECDEF memo of 07 Jul 06, "Applying Common Article 3;" COMSOUTHCOM memo of 22 Jan 07, "Implementing Guidance on Detainee Operations and Human Intelligence Collector Operations;" DEPCOS SOUTHCOM memo of 12 Feb 07, "Implementing Provision for Inspection in DoD Detainee Program."

Other reference material that the team reviewed included the following documents: Geneva Convention on Prisoners of War; Geneva Convention on Civilians; AR 190-8 (1997) (Enemy Prisoners of War, Retained Personnel, Civilian Internees, and Other Detainees); Joint Publication 3-63 (Joint Detainee Operations); FM 3-19.40, (Internment Resettlement Operations); "World Medical Association Malta Declaration on Treatment of Hunger Strikes;" "Bureau of Prisons Protocol on Forced Cell Extractions;" and "American Correctional Association Standards."

## Guantánamo Detention Policy and Practice

The Review Team divided into the following teams: Detention Operations, Intelligence, Policy, Legal, and Medical. They reviewed implementing guidance and directives from USSOUTHCOM, JTF-Guantánamo, the Joint Detention Group (JDG) Commander and the Joint Intelligence Group (JIG) Director. The Review Team conducted more than 100 interviews with JDG and JIG leadership, support staff, interrogators, and guards. They conducted announced and unannounced inspections of all camps during daylight and night operations. They reviewed Inspector General reports, medical records, and inspection results from USSOUTHCOM. Additionally, they followed up on individual allegations of mistreatment. Teams reviewed the Detainee Information Management System (DIMS), Joint Detainee Information Management System (JDIMS), and Forced Cell Extraction video. Teams reviewed discipline records on the guard force and witnessed interrogations. Collectively, teams talked to a number of detainees and observed detainee recreation, art classes, enteral feedings and interrogations. ${ }^{6}$

[^3]
## Input from External Sources

The Review Team identified numerous parties interested in detention conditions at Guantánamo among U.S. government interagency and Department of Defense entities, as well as other organizations outside of the U.S. government, recognized for their interest in detainee-related issues. In the time available for the review, we solicited a sampling of opinions, studies, and published works, which reflected the perspective of detainees and other concerned interest groups who posed critical, contrary views, many with recommendations to improve detention conditions. The Review Team assessed the individual contribution of each organization or entity and then applied it (anonymously, to give each assertion equal weight and value) to specific elements of the detention condition review.

To gain an appreciation for the broadest array of views that exist concerning the detention mission in Guantánamo and the evolution of the conditions of detention there, the Review Team first looked to historical documents and reports provided by the International Committee of the Red Cross (ICRC). The ICRC has had access to the detention camps in Guantánamo since 2002 and has provided numerous reports on conditions of detention. The ICRC enjoys unfettered access to detainees in Guantánamo, as well as detainee medical records. They visit Guantánamo at least quarterly and provide the JTF-Guantánamo and USSOUTHCOM leadership feedback on their observations and recommendations. Communications between the ICRC and the United States are treated as confidential communications, for the purposes of enhancing a candid sharing of observations and recommendations pertaining to conditions of detention.

In addition, the Review Team heard from many other external groups, including Human Rights Watch, Human Rights First, Amnesty International, and the American Civil Liberties Union, who have all expressed views on detention issues in Guantánamo matters, formally as well as informally. Inputs received were candid, succinct, constructive, and representative of longstanding concerns. We also reviewed documents and comments from the Military Commissions Defense Counsel, University of California, Berkeley and the Center for Constitutional Rights, Brookings Institute, American Psychological Association, American Psychiatric Association, Institute of Medicine, American Medical Association, Habeas Corpus Counsel, American Correctional Association, and American Bar Association.

The purpose of our work was to examine the conditions of detention at Guantánamo, in its current form, for compliance with applicable law, including Common Article 3 of the Geneva Conventions. Therefore, we took the comments without challenge, debate, or any attempt to refute the assertions. Their input represented a perspective that challenged prevailing views and practices. We applied the merits of the arguments from outside groups, pitted them against prevailing practices, and then deliberated on findings and recommendations. ${ }^{7}$

In summary, the report provides a comprehensive, probative examination designed to challenge and test current operating policies and practices; it uses an interdisciplinary method that depicts a portrait of each element of detention conditions and identifies what specific issues of detention policy and practice stand in dispute. The Review Team made two categories of recommendations: those we consider to be priorities, and those we consider to be of secondary

[^4]importance. It is the view of our team that all of these recommendations, if implemented, will assist USSOUTHCOM in its efforts to enhance humane conditions of detention in Guantánamo.

Orientation to Camp Operations

Commander, Joint Task Force-Guantánamo

Commander, Joint Task Force-Guantánamo has operational command of detention operations in Guantánamo and reports directly to Commander, USSOUTHCOM. Beneath the JTF are three separate and independent commands: the Joint Detention Group (JDG), Joint Medical Group (JMG), and Joint Intelligence Group (JIG). The Commanders of the Detention Group and Medical Group, and the Director of the Intelligence Group report directly to the JTF Commander.

## Joint Detention Group

Detention operations fall under the cognizance of the Commander, Joint Detention Group (CJDG). CJDG is directly responsible for the humane custody of detainees. Detainees live in nine camps, built between 2002 and 2006, along the southeast portion of the U.S-controlled area of Guantánamo Bay, Cuba - separated from the Naval Station Guantánamo facilities - controlled and secured exclusively by JTF-Guantánamo.

With humane treatment as the baseline, the Joint Detention Group leadership organizes camp operations around a compliance model, through the means of incentive-based options to encourage compliance. The options available to the CJDG only contribute to the quality of detention for the detainee; they cannot affect the length of detention. Privileges vary from camp to camp, with the greatest number of privileges offered in the communal living camp (the camp preferred by detainees). Unfortunately, the CJDG's housing options are limited to two. The first is a communal-style living camp, with open bay barracks, a large recreation area, and relatively liberal privileges available to detainees there. The second is maximum-security facilities, similar to maximum-security facilities used by prison systems throughout the United States, with single cell detention, smaller recreation areas, and fewer privileges. Detainees considered to be a lesser risk, based upon compliance with camp rules, live in the former camp, while detainees considered to be a higher risk, based upon failure to comply with camp rules, live in the latter camps. The challenge for the CJDG is to carefully assess risk when deciding whether a particular detainee is suitable for placement in the communal living camp. In 2004, the communal living camp was the scene of a detainee plot to commandeer a food truck to be used to kill guards. ${ }^{8}$ In 2006, the same camp was the scene of a costly riot that almost resulted in the serious injury of guards. However, to encourage compliance with camp rules, the CJDG is forced to continually seek to offer detainees the privilege of residing in the communal living camp, as a reward for complying with camp rules while they reside in the maximum security facilities.

[^5]The camps are numbered in the order in which they opened. However, they can be categorized as follows: Communal Living Camp - Camp 4; Maximum Security Camps - Camps 1 through 3, 5 (including Camp 5 Echo Block), 6, and 7; Pre-Release-Transfer -Camp Iguana; and, Limited Use - Camp Echo. The following describe each camp.

## Communal Living Camp

Camp 4, first occupied in February 2003, offers communal living, numerous recreation facilities, education and intellectual stimulation programs, and houses detainees considered the most compliant with camp rules. Unlike other camps, Camp 4 offers communal living in open-bay barracks with open access to fresh air in outdoor recreation and communal facilities throughout the day. It includes additional access to large recreation areas equipped with a basketball court, volleyball court, and soccer facility, during a specified four-hour period each day. Camp 4 has a media center equipped with satellite television, bench seating, and a classroom used to teach literacy and art.

## Maximum Security

Camp 1, which became operational in April 2002, is an open-air facility with approximately 200 steel mesh single cells. Cells in this style camp offer the least unencumbered square feet of living space. Cells face each other, arranged in rows, with an equal number of cells on each side of the block. Camp 1 includes an outdoor exercise area for each block, equipped with a treadmill or elliptical machine.

Camp 2 and Camp 3 are adjoining facilities. The cells are similar to Camp 1. Camps 2 and 3 became operational in October 2002, with a current capacity of about 400 detainees. Each Camp has 10 adjoining blocks of 24 to 48 cells each, and offer access to sunlit spaces throughout the day with the same sort of outdoor recreation facilities as Camp 1 for each block. Two cells in Camp 3 are now available for use as a movie room for detainees.

Camp 5, a maximum-security facility built in April 2004, is a climate-controlled single cell facility with a capacity to hold 100 detainees. All occupied cells have a clear window to permit entry of sunlight. The facility resembles a hub and spoke design. The hub consists of a centrally located automated control center that enables staff to control all operations throughout the building, including ingress/egress, opening and closing of doors and other operations. The spokes consist of four, 2 -story wings, each with two rows of adjoining cells that face each other, and one additional wing for administrative offices. Three outdoor recreation facilities are accessible from adjacent wings. The building has a climate controlled meeting room for legal representation and separate movie rooms on each tier for detainee use at specified periods throughout the day.

Camp 5 Echo (part of Camp 5), first occupied by detainees in April 2008, is an open air facility with 24 individual adjoining steel mesh cells arranged in two parallel and equal rows - similar to Camp 1. The recreation facilities are similar to those found in Camps 1, 2, and 3, equipped with treadmills, elliptical machines and soccer balls; enabling a total of four detainees to participate in recreation simultaneously in four adjacent yards.

Camp 6, the newest facility, became operational in December 2006. Although originally built as a medium security, climate-controlled facility, JTF leadership converted it to a maximumsecurity facility with an automated control center when, in June 2006, the risk of detainee suicide became acutely apparent. ${ }^{9}$ Camp 6 detainees reside in eight pods that are equipped with 22 cells each. Each pod is a two-story wedge shaped wing attached to the main structure, with 11 cells on each story. Each pod is equipped with skylights that permit the entry of natural sunlight, and includes a communal area equipped with tables and chairs used for recreation and entertainment activities throughout the day. The tables and chairs are of steel construction and are fixed in place similar to detention facilities in use throughout the United States.

The JDG is presently in the process of converting areas of Camp 6 into a medium security facility, through expanded recreation areas, increased communal areas, and similar modifications. A recently constructed outdoor recreation area can accommodate up to 22 detainees in a yard used for sports, exercise, reading, relaxation, prayer and meals. Two additional recreation areas, each sub-divided with 11 standard-size recreation rooms, accommodate one-to-two detainees each; and two more recreation areas are sub-divided with five standard size recreation rooms each. A newly constructed media building for Camp 6 includes a television and DVD player, and can accommodate up to 20 detainees for entertainment or classroom activities. Construction is underway to transform four pods and provide detainees free access to communal and recreation areas throughout most of the day similar to Camp 4.

Camp 7, occupied by detainees in September 2006, is a climate-controlled, single-cell facility currently used to house the High-Value Detainees. Each tier includes a dual-cell recreation yard that is divided into two separate recreation areas that are enclosed by chain link fencing, enabling two detainees to participate simultaneously in four hours of recreation daily. Recreation yards include elliptical machines and stationary bicycles, soccer balls, racquetballs, and an opportunity to read newspapers, magazines, and participate in prayer and meals. Media rooms are available three times weekly for each detainee to watch movies of their choice, read newspapers, magazines, books and play hand-held electronic games.

## Pre-Release/Transfer Facility

Detainees who occupy a special legal status (associated with court cases) reside in Camp Iguana. All conditions at Camp Iguana are communal and provide detainees access to sunlight throughout the day. Security conditions at Camp Iguana enable detainees to move freely within a fenced area comprised of several wooden, hut-like buildings - some used for sleeping, others for recreation, meals and prayer. Detainees are free to move from living quarters - complete with bed, wooden dresser, desk, table and chair - to an outdoor recreation facility that overlooks the shore along Guantánamo Bay's southeastern coastline. A treadmill, elliptical trainer, picnic table, and planted garden with garden hose are among the outdoor provisions for these detainees. One building in the facility is available specifically for religious worship, with numerous rugs and a sound system that provides the daily call to prayer. A second building includes a library with books in native languages and a reading area, along with access to satellite television, three

[^6]different newspaper publications that are updated routinely, art supplies, hand-held games, puzzles, and Sudoku. A third building has a washer and dryer for detainee use. Finally, the camp has a shower and hygiene building with running hot and cold water, sinks, mirror, toilets, and showers. Because of the status of Camp Iguana detainees, this camp is not an option that is available to the CJDG for moves involving general population detainees.

## Limited Use Facility

Camp Echo became operational in October 2004 for housing detainees and conducting attorneydetainee/client meetings. Each detainee resides in a hut-like wooden structure, separated in half, with one-half for a meeting area and the other half being a cell area. Each structure includes a table and chairs to facilitate meetings (these are not accessible to the detainee while he is in his cell). Each detainee receives magazines, books, newspapers and similar items. Detainees have access to natural light and fresh air through open front doors.

## Joint Medical Group

The Joint Medical Group at JTF-Guantánamo provides extensive healthcare services to the detainee population. Medical services are available 24 hours per day, without regard to disciplinary status or detainees' cooperation with intelligence gathering and legal processes. The training curriculum prepares the guard force to recognize medical and dental emergencies and contact medical personnel for immediate response. Routine medical and dental care is available as needed, with timing of medical care based upon the severity of the condition. Medical specialty evaluation and treatment sub-specialists visit Guantánamo on a quarterly or semiannual basis and as needed. Specific facilities and services available include the following.

Medical Facilities: A Detainee Hospital, ${ }^{10}$ opened on 4 September 2002, is located adjacent to Camp 4. This facility has 17 inpatient beds (expandable to 30 ), an operating room, X-ray capabilities, pharmacy, central sterile supply, dental suite ( 2 chairs), physical therapy, optometry (with optical fabrication capability provided as a local resource through the Naval Hospital), audiology and several patient treatment areas. It serves as the inpatient facility for all detainee camps. The core medical team consists of five physicians, one physician assistant, two dentists, 17 nurses, and 84 Corpsmen. The detainee hospital has minimum staffing of at least one nurse and four Corpsmen 24 hours per day. For emergency care, Corpsmen and nurses can respond to every camp within minutes. Physicians are present at the hospital during normal working hours and available on call after hours, no more than a few minutes away. There are three ambulances available (at Camp 6, Camp 7 and at the Detainee Hospital) for emergency transport, and a recent appendectomy was started within an hour of diagnosis. Physicians are present at the hospital during normal working hours and available on call, no more than a few minutes away (after hours). A small medical treatment room, with a Corpsman on duty 24 hours per day, is located in Camp 5. ${ }^{11}$ Camp 6 has a larger medical space with treatment areas, a dental room, and administrative spaces. ${ }^{12}$ Camp 6 medical staff includes a physician, who is available during normal working hours and on call after hours. There is also at least one nurse and five Corpsmen

[^7]in the Camp 6 medical area 24 hours per day who provide medical support for Camps 5, 6 and Echo. Camp 7 has a dedicated medical treatment room and dental chair. A physician is on site during normal working hours and on call after hours. A Corpsman is present in Camp 7 on duty 24 hours per day.

The Naval Hospital on the main base provides support services for care beyond Detainee Hospital capabilities. It has a Computerized Tomography (CT) Scanner and a cardiac catheterization laboratory, which requires 48-72 hours to activate for diagnostic procedures due to importation of appropriate supplies and specialty staff from mainland military medical facilities.

Routine Care: Medical personnel (usually Hospital Corpsmen) make daily rounds in all camps to distribute prescribed medications. Detainees may express medical complaints either to medical personnel making rounds or to the guards. Corpsmen and guards relay detainee medical complaints either verbally or via the Detainee Information Management System (DIMS). For minor ailments, Corpsmen may dispense over-the-counter medications to detainees. Triage nurses review all care and assessments provided by Corpsmen. Detainees may also request appointments with a physician assistant or physician. These evaluations may occur either in the detainee's camp or at the medical facility, depending upon the nature of the complaint. Routine appointments are available within a range of same-day to two weeks, but average a week or less.

Preventive Services: Detainees receive a full medical assessment upon arrival at Guantánamo. In addition to medical history, physical evaluation and mental health assessment, the JMG screens detainees for chronic disease and tests them for hepatitis, HIV and tuberculosis. Detainees receive tetanus, diphtheria, measles, mumps and rubella (the basic immunization series) upon arrival, with the provision for additional clinically indicated immunizations in the future. Detainees have been given a standing offer to receive the influenza immunization annually, but they have the option to refuse. The JMG reviews detainee medical records and history on an annual basis; age-appropriate screening services are optional (e.g. Prostate Specific Antigen, colonoscopy).

Dental Care: Dental services are available at the Detainee Hospital, in the Camp 6 Medical Facility and at Camp 7. Detainees may request routine dental evaluations and cleanings; the clinic will respond to acute problems within 24 hours. Dental sub-specialists visit Guantánamo periodically to provide periodontal and prosthodontics services.

Optometry: The Naval Hospital Optometrist provides routine eye exams for detainees on a weekly basis. Local fabrication of polycarbonate lenses is available on Guantánamo and permits detainees to receive eyeglasses within a day of their evaluation. The optometrist also responds to urgent and emergent eye conditions on an on-call basis. He maintains a listing of detainees with chronic eye conditions, and provides appropriate follow-up. For example, he provides annual eye exams to all detainees with diabetes.

Mental Health: Detainees receive a mental health assessment upon arrival at Guantánamo and as needed, thereafter. The Behavioral Health Unit (BHU), completed in November 2005, has a capacity of 12 inpatients. Mental health services are available both upon detainee request and by
consultation. The BHU has a total staff of 17 personnel including a psychiatrist, a psychologist, behavioral health nurses, psychiatric technicians, with at least one nurse and two psychiatric technicians present at all times.

Medical Specialty Services: The Naval Hospital has Orthopedic Surgery, General Surgery and Internal Medicine specialists who can provide consultations for detainee care, but other required medical specialists travel to Guantánamo. Military medical specialists make periodic visits to Guantánamo to provide consultation and treatment for detainees and military beneficiaries. Dermatology, urology and cardiology appointments are available regularly. Prosthetics services appointments are available periodically along with neurology; radiology; prosthodontics, gastroenterology; and ear, nose and throat consultants. The hospital will facilitate the travel of other specialists to Guantánamo as necessary to provide medical care needed by detainees. To date, one detainee has received an oncology evaluation and chemotherapy treatment for cancer, and another refused a recommendation for cardiac catheterization. Eight detainees with amputations have received artificial limbs. Patients with handicaps receive accommodative medical equipment (walkers, wheelchairs, handicapped toilets, etc.) as needed and ordered by their physicians.

## Joint Intelligence Group

A civilian director, employed by the Defense Intelligence Agency, with an O-6 deputy director, leads the Joint Intelligence Group (JIG). The JIG assigns personnel into functional branches, with interrogation being one of the functions, supported by analysts, linguists and information managers. Interrogators work in the Interrogation Control Element (ICE), led by an ICE Chief and Deputy ICE Chief, assisted by subordinate Section Chief and Assistant Section Chief.

JTF-Guantánamo schedules interrogations daily, between the hours of 0800 and 2030. All interrogations are voluntary; approximately one-third of the sessions are at detainees' request. Given the length of time that most detainees have spent at Guantánamo, the primary focus of interrogations is to gather security and force protection information related to the operations of the detention camps. The current nature of the intelligence mission lends itself to the use of direct approaches and small incentive items to encourage detainees to volunteer information.

## Findings

This section examines each element of conditions of detention from detainee arrival at Guantánamo to transfer/repatriation. The analysis includes an assessment of governing authorities, a review of current procedures, a review of representative concerns expressed by groups outside the Department of Defense, and a list of recommended actions for the department, presented in an issue paper format. The specific topic areas include:

Shelter
Hygiene
Clothing and Bedding
Food and Water
Religious Practice
Recreation
Sleep
Detainee Discipline System
Detainee Compliance with Camp Rules and Vetting Criteria
Intellectual Stimulation
Mail
Protection from Violence
Protection from Violence-Use of Force
Protection from Violence-Forced Cell Extractions
Protection from Violence-Shackling
Protection from Sensory Deprivation-Solitary Confinement
Protection from Sensory Deprivation-Human-to-Human Contact
Protection from Humiliation
Health Care Services-Quality of Care and Access
Medical/Dental Confidentiality of Medical Records and Information
Medical Ethics-Medical Treatment for Hunger Strikers
Healthcare Personnel Management-Behavioral Science Consultants (BSC)
Interrogation
Outside Access to Detainees
Attorney Access to Detainee-Clients
Detainees Ordered or Approved For Release
Repatriation/Transfer.

## Shelter

A. Legal/Policy Authority. Under DoDD 2310.01 E , detainees are entitled to "adequate shelter." Additional amplifying reference material may be found in GPW (Art. 25), GCC (Art. 85), and AR 190-8 (6-1), which provide for protection from dampness, adequately heated and lighted quarters, spacious and well-ventilated, taking into account the climate and the age, sex, and health of detainees.
B. Detainee/NGO input. Detainees should be afforded maximum access to natural light while still providing them with safety measures against brightness and direct sunlight, including more time outside. Detainees should be able to see a clock in order to better gauge their time. Detainees should be, as much as possible, grouped according to cultural and ethnic backgrounds. Allow all detainees to live in Camp 4 or a Camp 4-like (collective living) environment. In the meantime, consider making Camp 6 a medium security facility. Make the windows in the cells of Camp 5 clear instead of opaque. Prevent extremes of heat and cold in detainee cells. Improve detainee living areas to make them feel more comfortable.
C. Practice/Implementation. Detainee housing is managed through the operation of nine different camps (Camps 1, 2, 3, 4, 5, 6, 7, Echo, and Iguana). Each camp has multiple housing options to enable grouping of detainees by cultural or ethnic backgrounds, and these are always taken into consideration. All detainees are housed in either individual cells or communal bays that facilitate security for the safety of both staff and detainees. Every cell is equipped with a toilet, sink, and mirror, and communal bays offer free access to communal areas with toilets, sinks, and mirrors. The camps also include a mixture of closed climate-controlled facilities, or open-air facilities with forced air and fans to provide comfort. The closed climate-controlled facilities maintain a temperature register between 75-80 degrees Fahrenheit and are always monitored by the guard force. All spaces provide ample access to daylight with either windows in individual cells, skylights, and/or open air doors. Recreation areas directly adjoin all detainee housing units, and provide ample access to fresh air daily. All detainees are allowed a minimum of four hours outside recreation per day for compliant detainees, and no less than two hours for non-compliant detainees. All recreation areas have appropriate sun screening to provide shaded areas. Clocks are also placed in all housing units in the plain view of detainees. The detainee population does not include any juveniles or females. All facilities have been greatly improved since detainees first arrived in January 2002 at Camp X-Ray. ${ }^{13}$

Camps 1, 2, and 3 are open air modular facilities with steel-mesh single cells that offer access to sunlight and fresh air throughout the day, as well as showers and recreation spaces directly outside the end of each block. ${ }^{14}$ Unencumbered living space is approximately 25 square feet per cell; overall cell size is approximately 45 square feet.

Camp 4 offers communal living in barracks-style, air conditioned bays for some of the most compliant detainees. ${ }^{15}$ Detainees live communally in groups no larger than ten, and have 20 hours per day of access to fresh air and outdoor recreation. There is a total of approximately 512

[^8]square feet of space in each building used for sleeping, with approximately 50 square feet per detainee.

Camp 5 is a maximum-security facility where detainees are housed in adjacent individual cells aligned in upper and lower tiers within four separate wings. ${ }^{16}$ Detainees are now housed only in cells with clear windows. Unencumbered living space is approximately 56 square feet per cell; overall cell size is approximately 75 square feet.

Camp 6 is a climate controlled facility with detainees housed in eight pods - each comprised of 22 adjacent individual cells. A detainee pod can be described as an open, two-story pie-shaped wing with sky lights, 11 cells on each story with the bottom floor cells opening directly to an indoor communal table/recreation area, and second floor cells connected by way of a catwalk and stairway. ${ }^{17}$ Renovations are ongoing in this camp to create more communal living opportunities and provide additional outdoor, fresh air recreation yards. Unencumbered living space is approximately 54 square feet per cell; overall cell size is approximately 80 square feet.

Camp 7 is a climate-controlled, single-cell facility currently used to house the High-Value Detainees. The cells in this facility are designed to limit communications between detainees. However, all detainees are allowed up to 4 hours of paired outdoor, fresh air recreation per day. Unencumbered living space is approximately 55 square feet per cell; overall cell size is approximately 86 square feet.

The interior temperature of Camps 5, 6, and 7, respectively, is kept at a comfortable level for detainees and staff (typically between 75 and 80 degrees Fahrenheit).

Camp Echo is separated into areas that are designated for housing of detainees, and attorneydetainee/client meetings. Each detainee is housed in a hut-like wooden structure that is separated into two halves, with one half being a meeting area with a table and chairs, and the other half being a cell area with a shower, toilet, and sink. ${ }^{18}$ Detainees have access to natural light and fresh air through open front doors. Unencumbered living space is approximately 90 square feet per cell; overall cell size is approximately 135 square feet.

Camp Iguana is a communal camp with wooden, hut-like living structures, which provide freedom to move about from different buildings designated for housing, prayer, library, laundry facilities, shower/bathroom, outdoor recreation, and lounge areas. ${ }^{19}$ Detainees also have free access to satellite television, books, newspapers, magazines, handheld games, puzzles, and art supplies. Detainees have unfettered access outside their living facilities within the confines of the camp. There is a total of approximately 250 square feet of space in each building used for sleeping, with approximately 35 square feet per detainee. All camps, except Camps 1-3, are equipped with camera monitoring equipment; however, none are used currently to video record, except on demand in response to specific events.

[^9]D. Team Analysis. Approximately sixty percent of the detainee population is housed in individual cells. All cells in Camps 5, 6, 7 and Echo exceed those typical of medium and maximum-security detention facilities throughout the United States in terms of standard design and cell size; however, cells in Camp $2 / 3$ should be modified to expand the unencumbered living space.

The physical camp design for all detention spaces facilitates personal contact and interaction between staff and detainees.

Renovations underway in Camp 6 are an initiative that we strongly endorse to improve detainee quality of life, with conditions that are closer to those in Camp 4. Completion of Camp 6 construction will build upon the success of the Camp 4 model with classrooms and free access to communal areas and recreation facilities. Engineers are currently transforming four Camp 6 pods by removing barriers to offer open access for detainees to roam freely from their cells, to indoor communal areas and to outdoor large recreation facilities for up to 20 hours each day.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Expedite improvements in Camp 6 to provide the JDG Commander the maximum number of options available to manage the detainee population.
- Continue to manage and maintain current structures as required to provide adequate shelter.
- Continue to house detainees in Camp 5 only in cells with clear windows.
- Continue to monitor environment in climate-controlled facilities to ensure temperatures remain comfortable.


## Recommend:

- Modify an appropriate number of cells in Camp 2/3, in order to provide detainees housed there more living space.
- Video record all activities in detention camps.


## Hygiene

A. Legal/Policy Authority. Common Article 3. Under DoDD 2310.01E, detainees are entitled to humane care and treatment. Additional reference material may be found in GPW (Art. 29), GCC (Art. 85), and AR 190-8 (6-1), which provide for day and night access to sanitary conveniences that conform to the rules of hygiene and are clean, with water and soap for daily personal toilette, and showers and baths. They also provide that necessary time should be set aside for washing and cleaning.
B. Detainee/NGO Input. Frequent and extended shower periods should be allowed; personal hygiene items should be made readily available. Detainees should be provided tools, within the limits of safety and security, so they can do their own grooming and trimming. Ensure that detainees have privacy while using the toilet. Detainees with disabilities need to be given the proper facilities so as to ensure their own personal hygiene.
C. Practice/Implementation. All detainees are provided unlimited and direct access to potable water, sinks, and toilet facilities, and every detainee is given an opportunity to shower daily for 10 minutes. ${ }^{20}$ Cells are available for housing disabled detainees, and medical staff can provide a special toilet seat if required. While using toilets, detainees are allowed to shield their lower bodies for privacy with a thin foam rubber mat, towel, sheet or other issued items. All Camps provide direct access to running potable water, sinks, mirror, and toilets in cells or unlimitedaccess communal areas. Showers are located in cells of Camps Echo and 7, in communal areas of Camps 4 and Iguana, and at individual shower stalls outside of cells in Camps 1, 2, 3, 5, and 6. Each detainee is provided with soap, toothpaste, toothbrush, shampoo, towels, and footwear suitable for showering. ${ }^{21}$ These items are considered basic issue items and detainees are never denied access to them, unless they are considered a self-harm risk or they use such items to threaten themselves, other detainees or guard staff. In addition, electric trimmers and nail clippers are stored by the staff, and offered weekly. Barber services are offered monthly. Each detainee is also provided supplies to clean his own cell or bay.
D. Team Analysis. Camp practices today exceed the standards for providing day and night access to all basic hygiene requirements. Detainees are never denied access to basic hygiene items, except as discussed above. In the past, showering was more limited; however, as of this date, detainees are permitted to shower daily. Input from outside sources was considered and helpful as detention practices evolved in this area.

## E. Findings/Recommendation. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Continue to manage and maintain current facilities to provide all hygienic requirements.
- Continue daily access to showers, weekly access to hair trimming, and monthly access to a barber.

[^10]A. Legal/Policy Authority. Under DoDD 2310.01E, detainees are entitled adequate clothing. Additional reference material may be found in GPW (Art. 27), GCC (Art. 85, 90), and AR 190-8 (6-1, 6-5), which provide for suitable bedding and sufficient blankets; necessary clothing, footwear, and changes of underwear; and adequate water and soap for washing personal laundry.
B. Detainee/NGO input. Some criticisms include that staff ensure the right fit of clothing for detainees, and improve the efficiency and proper distribution of clothing. Provide the means for detainees to wash their own clothes.
C. Practice/Implementation. All detainees are provided one uniform top and bottom (three uniforms each in Camp 4), one pair of underwear (three in Camp 4), two pairs of socks, one pair of exercise shorts, one $t$-shirt, one pair of deck shoes or basketball shoes, and one pair of rubber shower shoes. Highly compliant detainees are issued white and tan uniforms, compliant detainees are issued tan uniforms, and detainees in a disciplinary status are issued orange uniforms while they are in that status. ${ }^{22}$ Sizes of uniforms and other clothing items are provided in conformance with detainee requests. Extra-large size uniforms are typically the most popular choice by detainees and are willingly provided by the JDG.

Laundry services for clothing are offered to all detainees weekly; underwear and exercise clothing may be exchanged upon request. Detainees in Camp Iguana tend to do their own laundry, with all soap and supplies provided by the JDG. During our team's review of Camps 5 and 6, we observed guard staff exchanging clothing for detainees and found procedures consistent with the stated SOP (detainees are provided clean clothes to change into before they give-up their dirty clothes). Camp 7 guards launder all detainee clothing and bedding on-site weekly (blankets are laundered monthly), and store additional items for prompt replacement for those items found unserviceable.

For bedding, all detainees are given a thin foam mat, a thick foam mattress with built-in pillow, blanket and padded, rip-stop sheet. Recently, an additional pillow was issued to detainees in all camps, since some detainees did not prefer the pillow built into the foam mattress. Additional comfort items, such as padded blankets are provided to compliant detainees upon request. Blankets are exchanged and laundered each month based on schedule for each camp. Special anti-rip blankets and smocks are provided to those detainees determined by competent medical authority to be at risk for self-harm. During our team's review of bedding in Camps 5, 6 and Echo, we observed occupied cells and found bedding materials to be appropriate and serviceable.
D. Team Analysis. We reviewed the JDG SOP; Discipline Matrix (Appendix 13); [Table 30-3] Basic Issue and Comfort Items list (Appendix 14), and observed procedures for issuing, care, replacement, laundering and exchange of detainee clothing and bedding. We saw clothing and bedding in cells within each camp and observed that issued items were serviceable. Detainees in a discipline status lose privileges consistent with the standard procedures identified in the Discipline Matrix (Appendix 13) and Basic Issue and Comfort Items Privileges (Appendix 14). During routine cell inspections, guards record the contents of each detainee's cell/bay in the

[^11]Detainee Information Management System (DIMS), and include clothing and bedding in the report. We observed a detainee in Camp 2 who refused to accept basic and comfort items, but declined to explain why, when asked. Each exchange of serviceable, laundered clothing and bedding is recorded in DIMS for each detainee. During our team's visit, we reviewed all procedures used to ensure detainees are provided with clothing and bedding material.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Continue to manage the program and enforce the standards already established in the SOP for the proper care and handling of detainee clothing and bedding material.


## Food and Water

A. Legal/Policy Authority. Under DoDD 2310.01 E , detainees are to be provided adequate food and water. Additional reference material may be found in GPW (Art. 26), GCC (Art. 89), and AR 190-8 (6-5), which provide for daily food rations sufficient in quality, quantity, and variety to keep detainees in a good state of health and prevent weight loss or nutritional deficiency. They also provide that customary diet should be taken into account and sufficient water be made available.
B. Detainee and NGO input. Past criticisms include claims that detainees should receive balanced meals according to their customs and cultures and ensure they receive meals in a timely matter. Serve meals at a hotter temperature and rotate the menu more often.
C. Practice/Implementation. Joint Detention Group SOP provides the implementing authority for the JDG.

Three hot halal meals per day - with $4500-5000 \mathrm{cal} /$ day - are served to detainees in each camp, with six menus for detainees to choose from - specifically: regular, high fiber, vegetarian, vegetarian with fish, bland, and soft food. (Note: halal is an Arabic term used to designate an object or an action that is permissible to use or engage, according to Islamic law and custom). Bi-weekly, detainees in each camp have an opportunity to select new meals from the menu. (See Appendix 15 for full list of meal choices provided to detainees). A typical meal includes meat, starch (plus bread), vegetable, dessert, fruit, fruit juice or similar drink. ${ }^{23}$ The hospital nutritionist reviews and discusses meal selections with the CJDG, and adjusts diets in cases where medically warranted. More than 40 individually prepared special diet meals, as prescribed by physician, are also provided. Meal times, content, and delivery are adjusted during religious holidays to accommodate fasting. Feast meals are provided bi-weekly in all camps, and include double portions of meat, starch and vegetable. Additional break-the-fast snacks are offered during Ramadan.

Adherence to the SOP, coupled with routine preventative medicine inspections ensure that meals are delivered promptly without spoilage. Our team reviewed the inspection results for 02 Dec 08,29 Dec 08, and 14 Jan 09 , and each inspection revealed a SATISFACTORY rating. ${ }^{24}$ However, two of those inspections recorded a small number of meals delivered to detainees in Camps 5 and Echo that were approximately five degrees under the optimal standard. Detainee meal consumption is monitored constantly by guard force and medical staff for unsafe and unhealthy weight loss and to ensure adequate nutrition and hydration.

All detainees have unlimited access to potable water in their cells. In addition, all detainees are provided bottled water upon request, unless they have been placed in a disciplinary status for using the bottle as a weapon (e.g., using the bottle to squirt or spray bodily fluids on guard staff or visitors).

[^12]In Camps 4, and Iguana, meals are taken communally and detainees are permitted to keep various non-perishable items following the meals. Meals are taken in the cells and recreation areas in Camps $1,2 / 3,5,6,7$, and Echo, and also offered in the communal area for detainees in Camp 6. Detainees are provided a minimum of one hour to consume the meal. In each of these camps, compliant detainees are permitted to retain three non-perishable items per meal.

In Camp Iguana, the detainees as a group are provided a $\$ 100$ monthly supplement for snacks that are purchased by JDG personnel at the Naval Station exchange. Snacks are stored in each detainee's personal living area at Camp Iguana.
D. Team Analysis. We observed that hot meals were delivered - upon receipt at the Camp - by guards to detainees. Detainees were allowed to take meals in recreation areas, living bays and communal pods, in accordance with the camp schedule. All detainees were offered a meal.
Those detainees who took meals consumed them upon receipt. Meal content matched the stated SOP for menu choices, with hearty portions. In each cell, we saw the non-perishable items that detainees retained, including salt, pepper and olive oil. A great deal of care and effort is placed into meal preparation and delivery by the entire staff.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Continue to manage the program and enforce the standards already established in the SOP for the proper preparation and distribution of detainee meals.


## Religious Practice

A. Legal/Policy Authority. Under DoDD 2310.01 E , detainees are to be provided the opportunity for free exercise of their religion, consistent with requirements of detention. Additional reference material may be found in GPW (Art. 34), GCC (Art. 93), and AR 190-8 (67), which provide for complete latitude in the exercise of religious duties, including attendance at services, if they comply with the prescribed disciplinary routine. In addition, ministers of religion who are detainees should be allowed to minister freely to members of the community.
B. Detainee/NGO Input. Use a Muslim Chaplain (when available) to train the guard force on how to be culturally and religiously sensitive to the detainees, including maintaining silence during prayer time. Respect religious items and books and provide regular prayer times. Provide for group prayer at all camps.
C. Practice/Implementation. All detainees are provided one Koran in the language of their choice, in addition to an Arabic Koran and TafSeer. All detainees are provided prayer beads, cap, rug, and current prayer schedule. ${ }^{25}$ These items are retained by all detainees regardless of disciplinary status, unless deliberately used for self-harm or as a weapon. Guards and staff have received specialized cultural and religious sensitivity training. Cultural and religious considerations are also taken into account when assigning detainees to housing areas. Guards observe silence during all prayer times.

A monthly prayer schedule is published and call to prayer is sounded five times daily in all camps. Prayer is led within each camp and block by a detainee-selected prayer leader. In Camps $2,3,5,6$, and Echo group prayer is typically conducted by detainees from their individual cells. When this occurs, the food tray access doors of the prayer leaders are lowered to facilitate call to prayer on each block/tier. At times when detainees are engaged in group or communal activities and prayer call sounds, prayer is led by prayer leaders in person. In Camps 4 and Iguana, group prayer is conducted in communal areas of the camps. At Camp 7, prayer is conducted individually in their cells. Guard movement and activity is limited to only those actions required to maintain security. Visual signals are placed on each block/tier signifying quiet time. Each detainee cell and common area includes an arrow pointing towards Mecca.

The team observed that the Koran was respected at all times. Guards followed applicable guidance and did not touch the Koran, unless specifically authorized to do so by CJDG. We observed that the guards also took special precautions to respect the Koran when detainees would hold it and refuse to put it down before entry of an FCE team.

Due to cultural sensitivities, modified frisk searching procedures are in place that respect the detainee's groin area, and guards are not allowed to conduct frisk searches of this area. Guards are limited to grasping the waistband of detainees' trousers, and shaking the pants.
D. Team Analysis. All detainees are given wide latitude in the exercise of their religious beliefs and they are able to retain religious items at all times. Concerns raised in the early years of detention operations at Guantánamo highlighted the importance of respect for the religious

[^13]traditions of the detainees. In response, considerable efforts were undertaken to avoid actions that could be construed as disrespectful. For example, guards are given awareness training and required to control noise and movement during prayer times. Guards have been disciplined ${ }^{26}$ for interfering with prayer time. A full-time cultural advisor has been employed by the JTF for the past several years. He provides a robust level of advice to leadership within the JTF, and most particularly, the JDG. The CJDG recognizes that the SOP does not permit searching of the Koran or detainee groin areas, which is contrary to standard security procedures in most detention facility operations, and that it carries a level of risk. However, he has accepted that risk out of an elevated respect for religious concerns of the detainees.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Give detainees in Camp 7 opportunities for group prayer with three or more detainees, similar to practices in other camps.
- Continue to allow free exercise of religion to the maximum extent possible, within current security restrictions.
- Continue to avoid actions that are disrespectful of detainees.

[^14]
## Recreation

A. Legal/Policy Authority. Common Article 3. Under DoDD 2310.01E, detainees will be treated humanely and respected as human beings. Additional reference material may be found in GPW (Art. 38, 98), GCC (Art. 94, 125), and AR 190-8 (6-7), which provide that detainees are encouraged to participate in intellectual, educational, and recreational pursuits, as well as sports and games. In addition, all possible facilities and equipment are to be provided for this purpose, including sufficient space for outdoor exercise and sports. Detainees in a disciplinary status are to be allowed to exercise and stay in the open air at least two hours daily.
B. Detainee/NGO input. Some criticism include recommendations that detainees be provided more time to exercise and participate in recreation by providing a variety of sports and indoor activities, either by themselves or in group. Recommendations include expansion of existing recreational areas for a wider variety of sports or activities. Many have suggested detainees should be able to go outside during daylight hours and enjoy fresh air and natural light.
C. Practice/Implementation. The JDG SOP provides implementing instructions for all recreation procedures. All camps have outdoor recreation facilities for detainees. In all camps, access to shaded recreation areas is provided for daylight recreation periods. Daylight recreation is the norm in every camp, but some recreation periods occur after dusk based on detainee request, daylight hours available, or limitations caused by the availability of recreation areas.

Recreation periods. All compliant detainees are offered a minimum of four hours of outdoor recreation per day, and up to 20 hours per day (Camps 4 and Iguana). All detainees in a discipline status are offered a minimum of two hours outdoor recreation daily.

Communal recreation. All camps, except Camp 7, offer communal recreation - the opportunity for detainees to conduct exercise or social activities in a group of at least four - to as many as 22 detainees - simultaneously. Detainees in Camps 4, 6 and Iguana recreate together while enclosed in a single, large recreation yard with facilities/equipment to support soccer, basketball, volleyball, jogging, table tennis, foosball, treadmill and elliptical machines - for up to 20 hours daily (limited to four hours daily in Camp 4 and Camp 6 large recreation facilities). ${ }^{27}$ In Camps $1,2,3,5$, and Echo, communal recreation is conducted via groups of two to eight in doubleoccupant recreation areas that enable interaction for four to 16 detainees outdoors simultaneously, depending on the camp. ${ }^{28}$ In Camp 7, each detainee is offered four hours recreation daily; however, there are limited opportunities for communal recreation, as detainees are limited to a single recreation partner (the same partner each day).

Camp 6 initiatives. A large outdoor recreation area was recently constructed at Camp 6 and another is under construction. A new classroom with TV and DVD player in Camp 6 offers movies and more learning opportunities with language classes for detainees. ${ }^{29}$

Communal Social Activities. Detainees in Camp 4 and Iguana spend the entire day in a

[^15]communal environment, with access to books, magazines, newspapers, games, and televisions with DVD players. In the communal pods of Camp 6, which are similar to a common dayroom equipped with fixed tables and chairs for group meeting, as many as nine compliant detainees are offered to meet approximately twice weekly in three-hour communal social activities. There, detainees are offered TV, three newspaper publications, detainee newsletter, books, magazines, art supplies, board games, handheld electronic games and puzzles. Detainees in Camp 3 are offered communal periods for viewing TV with DVD players, handheld games and newspapers for periods up to three hours, on an average of three times per week. All newspapers and magazines are redacted if necessary for security purposes.
D. Team Analysis. We reviewed all procedures used to ensure detainees are provided with adequate opportunity for outdoor recreation. Camps 4 and Iguana offer the most expansive recreation opportunities for detainees, and compliance with camp rules remains highest in these camps. In Camp 4, detainees violating camp rules and subject to discipline in accordance with established procedures are typically moved to another camp. In Camp Echo, detainees have access to recreation facilities for a minimum of four hours daily, and often more, subject to the availability of recreation facilities. To build upon the success of the Camp 4 model with classrooms, and free access to communal areas and recreation facilities, engineers are currently transforming four Camp 6 pods by removing barriers to offer open access for detainees to roam freely from cell, to indoor communal area, to an outdoor, large recreation facility for 20 hours each day. The modification will likely influence detainee compliance and entice more detainees to earn the privilege to enjoy its new benefits. The basic philosophy behind recreation is to maximize socialization and physical fitness opportunities among detainees for considerable periods of the day. In almost all cases, detainees are provided much more recreation than the minimum standard (the only exception is the two-hour limit for non-compliant detainees). Facilities and equipment are in good condition in all camps. In Camp 7, there are limited opportunities for communal recreation, as detainees are limited to a single recreation partner (the same partner each day).
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

Strongly recommend:

- Accelerate the completion of Camp 6 recreation areas and facilities supporting enhancements for socialization.
- Expand recreation options in Camp 7, including allowing for greater communal recreation opportunities among detainees (e.g., three or more detainees in recreation together, different recreation partners, etc.).
- Continue to resource the Joint Task Force with assigned personnel, money and contracts necessary to keep pace with changes to operations and facilities deemed valuable in supporting compliant behavior and preparation for detainee transition from Guantánamo.
- Continue to manage the program and enforce the standards already established in the SOP enabling each detainee a minimum of four hours of recreation daily.


## Sleep

A. Legal/Policy Authority. Common Article 3. Under DoDD 2310.01E, detainees are to be treated humanely and sensory deprivation is prohibited. Additional reference material may be found in GPW (Art. 25), GCC (Art. 85), and AR 190-8 (6-1), which provide for quarters that are adequately heated and lighted, particularly between dusk and lights out, with suitable bedding and sufficient blankets.
B. Detainee/NGO Input. Detainees should be allowed to have full sleep without interruption, noise or any other distractions. Lights in the cells should be turned off or lowered at night.
C. Practice/Implementation. All detainees are permitted an unlimited amount of sleep during day and night, and lights are dimmed from 2200 until first Morning Prayer call is held.
Detainees are provided sufficient bedding, foam eye mask, and ear plugs for use during sleep unless they misuse these items in violation of camp rules or are a self harm risk. Guard force and staff are required to respect quiet hours during the periods that lights are dimmed.
D. Team Analysis. Detainees are provided proper bedding and no restrictions for when they can sleep.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Continue to provide detainees ability to sleep as desired, and respect quiet hours during the period of time that lights are dimmed.


## Detainee Discipline System

A. Legal/Policy Authority. Common Article 3. According to DoDD 2310.01E, detainees are protected from violence to life and person including threats or violence, rape, assault, bodily injury and reprisals. The discipline system must be applied without regard to race, color, religion or faith, sex, birth or wealth, or any other similar criteria. Available reference material includes GPW (Art. 13, 17, 82-98); GCC (Art 31-33, 100); AR 190-8 (3-6, 3-7, 6-10, 6-11, 6-12), which require that: camp rules must be posted; a responsible officer may be delegated to investigate and adjudicate offenses; and disciplinary punishments cannot exceed 30 days, nor may discontinuance of privileges exceed basic humane treatment requirements.
B. Detainee/NGO Input. Make sure detainees fully understand the rules of the facilities; explain the penalty for breaking the rules and the rewards for abiding by the rules. Do not use adjustments to the temperatures in the cells as a means of punishment. Do not allow disciplinary punishments to affect use of hygiene issued items. Do not exceed 30 consecutive days of discipline for one or a combination of rule infractions. Any disciplinary measure should be performed in a legal and humane way abiding by all international humanitarian standards. Avoid collective punishment.
C. Practice/Implementation. The disciplinary system includes incentives designed to encourage compliance with camp rules, but its provisions never fall below the threshold of humane treatment. Camp rules [Appendix 16], which are read to each detainee in his native language and posted in English and Arabic in every recreation yard ${ }^{30}$; and the discipline (consequence) matrix [Appendices 13, 14, and 17] offers a standardized regime of non-discriminatory disciplinary measures. Disciplinary status is served in individual cells with reduced access to recreation, as discussed above. The maximum time on disciplinary status is 30 consecutive days. No detainees in a disciplinary status are permitted to be housed in Camp 4 or Iguana. Disciplinary infractions are reported by guard chain of command and adjudicated by a discipline official appointed and responsible directly to CJDG. Detainees are notified of their infractions and the consequences after the case is adjudicated. A detainee may complain about mistreatment at any time, to the guard force, the Non-commissioned Officer in Charge, the Assistant Watch Commander, or the Watch Commander. The guard force is instructed to note a complaint in the significant activities section of DIMS. All of these complaints are subject, at least, to a preliminary inquiry, and if indicated, investigated by the JDG staff (refer to Protection Against Violence, below). Detainees frequently violate camp rules, by assaulting the guard force, refusing to comply with orders, or by refusing to return from recreation. Indiscipline has been steadily increasing since November of 2008; whether from frustration about their fate, or as an attempt to influence public opinion, is unclear. But the empirical data shows that detainee misconduct is increasing [Appendix 18]. During the weekend of 13-15 February, for example, over 100 disciplinary reports were received and adjudicated each day.
D. Team Analysis. The disciplinary system is a just and fair system without regard to race, color, religion or faith, sex, birth or wealth, or any other similar criteria. Corporal and collective punishments are prohibited and not practiced. Camp rules are published to all detainees.

[^16]Disciplinary status is limited to a maximum of 30 consecutive days. ${ }^{31}$ Disciplinary measures do not reduce basic issue comfort items, only additional comfort items and privileges. Cell temperature manipulation is not an authorized disciplinary measure. No disciplinary measures exceed the standards laid out in existing law and policy guidance.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Continue to manage the program and enforce the standards already established in the SOP for the proper administration of discipline.

[^17]
## Detainee Compliance with Camp Rules and Vetting Criteria

A. Legal/Policy Authority. Common Article 3. According to DoDD 2310.01E, detainees will be treated humanely and respected as human beings. Detainee "compliance criteria" are to be applied without regard to race, color, religion or faith, sex, birth or wealth, or any other similar criteria. Available reference material includes: GPW (Art. 14, 16, 22, 25, 82-90), GCC (Art. 27, 33,85 ), and AR 190-8 (3-3, 3-7, 6-1, 6-10, 6-11, 6-12), which provide: that communal living is the primary standard, but security concerns and disciplinary status may regulate the living conditions; disciplinary punishments cannot exceed 30 days (followed by three days off disciplinary status), nor may discontinuance of privileges fall below the threshold required for basic humane treatment; corporal and collective punishments are not authorized.
B. Detainee/NGO Input. Increase opportunities for communal living and movement to Camp 4, or its equivalent. Movement of detainees should take into account cultural, linguistic, or religious differences. Do not move detainees based on cooperation with interrogators.
C. Practice/Implementation. The JDG SOP compliance and vetting criteria are designed to incentivize compliance with camp rules, with a gradual increase of communal living arrangements being made available to compliant detainees.

The JDG convenes a board at least quarterly to review detainee conduct and status in the camps and determine whether detainees can be moved to camps with more communal living opportunities. Board information packets include a list of recent reports, disciplinary infractions, security risk, and over-all compliance with camp rules. Compliance with camp rules is the overriding basis for deciding in which camp detainees will live. Intelligence gathering considerations are not a motive for any camp assignment. The vetting board that team members attended appropriately weighed the criteria in the SOP, in a non-discriminatory fashion. The JDG Commander's intent was clearly to move as many detainees to communal living conditions as possible, consistent with the safety of the detainees and the guard force.

Detainees are also reassigned to camps and cells within camps for various reasons. These include, but are not limited to, detainee behavior, detainee eligibility for increased privileges based on compliance, improvement of pod/cellblock dynamics, detainee language or ethnic background, force protection concerns, and detainee medical limitations. The JDG commander, using the criteria discussed above, may also order cell or internal camp changes on the recommendation of the camp commanders and elements of the JDG Staff. Where possible, these moves are discussed at the morning staff meeting, where input is provided by all board members discussed above. The team observed this process at several morning updates and confirmed the movement/vetting process in camp visits over two weeks.
D. Team Analysis. The compliance/vetting system is a just and fair system without regard to race, color, religion or faith, sex, birth or wealth, or any other similar criteria. The camp leadership is making considerable effort to move detainees who are compliant into a more communal setting. The current compliance and vetting system is effective, comprehensive, and fair, taking into account cultural, linguistic, and religious differences and balancing security concerns within the camp. Although in the past, the impact on intelligence collection was a
consideration in camp assignments, cooperation with interrogators is no longer a factor in the movement of detainees. However, intelligence input to the decision-making process is essential to maintain camp security. The JDG is in compliance with all legal authorities and available guidance.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Properly resource the efforts of the JDG Commander to enhance conditions of detention, especially all socialization initiatives in Camp 6.
- Continue to manage the program and enforce the standards already established in the SOP for the proper vetting of compliant detainees.


## Recommend:

- Conduct regular vetting, within reasonable security management practices, so that qualified detainees are expeditiously moved to communal living conditions.


## Intellectual Stimulation

A. Legal/Policy Authority. Common Article 3. Under DoDD 2310.01E, detainees are to be treated humanely and respected as human beings. Additional reference material may be found in GPW (Art. 38), GCC (Art. 94), and AR 190-8 (6-7), which encourage detainees to participate in intellectual and educational pursuits.
B. Detainee/NGO Input. Encourage the detainees to grow intellectually by providing them educational programs suitable to their age, language and educational level. Teach the illiterate how to read and encourage learning several languages, such as English, Pashtu, and Arabic. Train them in skills or trades to enable them to better reintegrate into their society. Allow detainees to stimulate their minds through reading, distance learning or watching TV and to keep reading materials and other media in their cells.
C. Practice/Implementation. The JDG has provided programs for intellectual stimulation to detainees that include: access to library materials, movie program, access to newspapers (redacted for security purposes), board games, handheld games, puzzles, playing cards, art classes, reading and literacy classes (native language and second language), television and radio news, sports and entertainment programs (native languages), and family phone calls. Note, detainees in Camp 7 are not authorized telephone calls; all other detainees are.

A detainee library provides all detainees with regular access to more than 13,000 books, 900 magazines, and 300 DVDs - all of which span 18 native languages of the population. In addition, access to two Arabic newspapers and the USA Today is provided (certain articles are redacted for security reasons). ${ }^{32}$ Library staff distributes books weekly to detainees in all camps, and all detainees are permitted to maintain at least three books and one magazine at a time. Compliant detainees in Camps 1, 2, 3, 5, 6 and 7 are allowed four books and two magazines at a time, and Camps Echo, Iguana and 4 are allowed five books, three magazines and one personal DVD at a time.

Compliant detainees (except those in Camp 7) are also afforded opportunities to participate in Literacy, Humanities, and Art programs. The Detainee Literacy Program consists of classes in Arabic or Pashtu at the beginner, intermediate, and advanced level curriculum. The Humanities Program consists of classes Arabic or English. The Art Program consists of classes to learn and enhance art skills.
D. Team Analysis. Detainees at all levels of security are provided opportunity for intellectual stimuli through access to books, magazines, newspapers, library services, television, and DVDs. Compliant detainees are also provided access to a variety of educational programs.

[^18]E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

Strongly recommend:

- Continue to provide the current level of programs.

Recommend:

- Expand program content for intellectual stimulation, and provide for wider detainee access, subject to legitimate security concerns.
A. Legal/Policy Authority. Common Article 3. Under DoDD 2310.01E, detainees are to be treated humanely and respected as human beings. The ICRC may provide "services." Additional reference material may be found in GPW (Art. 71, 76, 123), GCC (Art. 107, 112, 137), and AR 190-8 (6-8), which allows detainees to send and receive letters, cards, and telegrams; censoring is to be done as soon as possible; and Red Cross correspondence will be facilitated.
B. Detainee/NGO input. There are recommendations that the JTF create a more expedient method to screen detainee mail so that it may be delivered more quickly to the detainees. Some have also recommended the staff explain to the detainee why the detainee's mail was censored so future correspondence would not be censored again, and have recommended the JTF no longer censor mail. Some commentators recommend that detainees be allowed to send photographs to family.
C. Practice/Implementation. Incoming mail for detainees includes three categories: ordinary mail, processed through a designated Washington, D.C. postal address and delivered to and from Naval Station Guantánamo, Guantánamo Bay; International Committee of the Red Cross mail, written by the detainee in presence of ICRC representative and delivered by ICRC members, or Red Cross Messages written by outside sources and delivered by ICRC to detainees; legal mail, sent from lawyers or courts to and from the detainee.

Outgoing Mail. Trained mail clerks collect detainee outgoing mail twice weekly in each camp (dates vary for each camp). Detainees in compliant status are authorized to write as many letters and postcards they desire, using stationary and pens provided by the staff. According to procedures, guards do not otherwise handle detainee mail, unless conducting an authorized search or inspection of a detainee's cell. Detainees in a discipline status are also provided pens and stationery with which to write letters, but are limited to only one hour daily to write mail, in each camp.

ICRC Mail. During periodic ICRC visits to Guantánamo Bay, ICRC representatives meet with detainees and collect any outgoing Red Cross Messages (RCM) from the detainee. These representatives consolidate ICRC mail daily and provide to members of the Joint Detention Group staff in the Detainee Mail Processing Center (DMPC) for screening. At the DMPC, the staff rapidly screens the correspondence for security and force protection violations. Any RCM that includes violations of force protection or security rules will be redacted by the DMPC and will be returned to the ICRC with redactions to provide to the detainee.

Cleared Mail. All detainee ordinary mail - both incoming and outgoing - is screened by designated members of the JTF-Guantánamo staff in the Detainee Mail Processing Center (DMPC) for security and force protection violations. Upon review, the detainee receives the inbound correspondence with redactions as appropriate. Correspondence that violates force protection rules is redacted by the JDG staff and distributed promptly to detainees. Properly cleared outgoing detainee letters and postcards are mailed to the APO by members of the DMPC. Detainees are not authorized to ship or receive boxes or containers.

Legal Mail. There is no limit on the number of letters a detainee may write to his lawyer, and no limit to the amount of legal mail the detainee may keep in his cell. Detainees who are in discipline status are limited to one hour daily to review and write legal correspondence, but may request an extension (CJDG retains authority to grant an extension). In each camp, additional storage bins are provided to detainees who choose to store mail outside the cell, in designated spaces. The guard force may search envelopes used to store legal mail-for contraband-but are prohibited from reading detainee legal mail. Outbound legal mail is picked-up from detainees by the guard force and mailed to the DoD Privilege Team at the designated secure location, for delivery to detainees' attorneys. In-bound legal mail is sent by the DoD Privilege Team to the JTF-Guantánamo Staff Judge Advocate (SJA). The SJA's office delivers the inbound legal mail to the intended detainee. At all times in the process, the attorney-client privilege is protected.
D. Team Analysis. We reviewed the Joint Detention Group SOP and observed procedures for handling, distributing and storing detainee mail in all JTF camps. We interviewed the JDG and the SJA, to include the members responsible for processing detainee mail, observed detainee cells and designated storage areas used to secure each detainee's mail, and observed the distribution of mail to and from detainees. Additionally, our team reviewed seven consecutive JDG weekly reports used to track consolidated incoming and outgoing mail for detainees during the period 5 December 2008 to 16 January 2009 and recorded an average of 17 days to redact, distribute and release detainee mail. Yet, according to staff records of detainee mail delivered during a one-week period in July 2008, review and redactions averaged approximately 60 days, which slowed delivery. We interviewed DMPC personnel and confirmed the report contents. Since August 2008, the mail review process has indicated shorter time periods to clear and deliver detainee mail. Additionally, new procedures have been established to enable the ICRC to take photographs of each willing detainee and provide him with five copies so detainees may send photos to family and friends. Moreover, detainees are allowed to post up to five photographs in their cells, and store all mail and correspondence in envelopes and bins provided by the guards. A review of Camp 7 mail indicates it takes a longer time to process and deliver mail than in other camps due to, inter alia, the lack of dedicated resources, such as Bahasa and Swahili linguists.

## E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Recommend:

- Hire Bahasa and Swahili linguists to assist with mail process.
- Add more properly trained staff and qualified translators to the Detainee Mail Processing Center (DMPC) for reviewing and redacting detainee mail, to further expedite its delivery.


## Protection from Violence

A. Legal/Policy Authority. Common Article 3. Under DoDD 2310.01E, detainees are to be protected from violence to life and person, including threats of violence, rape, assault, bodily injury, and reprisals. Additional reference material may be found in GPW (Art. 13, 17, 87), GCC (Art. 31-33, 100), DoDD 5210.56, Use of Force, the UCMJ (Art. 93, 128), AR 190-8 (1-5, 6-11), and FM 3-19.40 (5-52), which provide that no person will use physical force against a detainee except to defend themselves, prevent an escape, prevent injury to other persons or property, quell a disturbance, move an unruly detainee, or as otherwise authorized in AR 190-14 (Use of Force). No corporal punishment is permitted.
B. Detainee/NGO Input. Whenever possible, look for the means to ease the use of restrictive security measures to ensure more humane treatment. Take disciplinary action against personnel mistreating detainees.
C. Practice/Implementation. The guard force has been trained on humane treatment standards. In the face of severe provocation, including constant verbal assaults and physical assaults with bodily fluids, including human waste, the guard force acts in a professional manner and protects the detainees from all forms of physical abuse.

The compliance Review Team inspected records of internal investigations of allegations regarding the improper use of force. The allegations were reported by detainees, attorneys, outside organizations, and members of the guard force and investigated by the command, with the assistance of the JDG Military Police Investigators (MPI). These allegations included slamming the food tray door, excessive use of force during FCEs or other movements of detainees, restraints being placed on too tightly, inappropriate use of pepper spray, and threats. Of allegations of excessive use of force investigated, only a handful were substantiated, and of these the vast majority were for minor violations of the SOP, including inappropriate use of pepper spray and slamming closed the food tray door. ${ }^{33}$
D. Team Analysis. Guards clearly understand their responsibility for humane treatment, as well as their obligation to refrain from the use of excessive force. Allegations of misconduct on the part of the guard force are infrequent and isolated. The actions of the guard force far exceed standards. Any allegations of abuse or mistreatment are investigated, documented, and appropriate action taken, if such allegations of abuse are substantiated.

[^19]E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

Strongly recommend:

- Continue to train and emphasize humane treatment, investigate all allegations, and take appropriate action as warranted.


## Protection from Violence - Use of Force

A. Legal/Policy Authority. Common Article 3. Under DoDD 2310.01E, detainees are to be protected from violence to life and person, including threats of violence, rape, assault, bodily injury, and reprisals. Additional reference material may be found in GPW (Art. 13, 17, 87), GCC (Art. 31-33, 100), DoDD 5210.56, Use of Force, the UCMJ (Art. 93, 128), AR 190-8 (1-5, 6-11), and FM 3-19.40 (5-52), which provide that no person will use physical force against a detainee except to defend themselves, prevent an escape, prevent injury to other persons or property, quell a disturbance, move an unruly detainee, or as otherwise authorized in AR 190-14 (Use of Force). No corporal punishment is permitted.
B. Detainee/NGO Input. Whenever possible, look for the means to ease the use of restrictive security measures to ensure more humane treatment. Investigate and punish for excessive use of force.
C. Practice/Implementation. Guard force personnel and staff are properly trained to use the minimum amount of force necessary at all times. Security measures are adjusted and employed commensurate with the security risk. All personnel interviewed knew how to report allegations of abuse up their chain of command and all felt compelled and willing to report any allegation or suspicion of abuse. There is an active "anonymous" abuse telephone hot line listed in the SOP. It was responsive when tested by our team; however, we learned that no complaints have ever been called into the hotline. Complaints of excessive force were well documented and investigated. Most of these claims were reported by habeas or military commission attorneys, or the detainees themselves. The team traced several allegations of excessive force, from initial report to final resolution. The JDG Deputy Commander conducts an initial credibility review, or Rule of Court Martial 303 "Commander's Inquiry," based on the video tapes of the FCE, or movement, and the medical report available in the Detainee Information Management System (DIMS). If there is a credible allegation or injury to a detainee, the Military Police Investigators (MPI) open a case. Of the MPI cases reviewed, none were substantiated for excessive force by the guard force. Several guards were disciplined for violations of the SOP, however, including shutting the food service door too abruptly, or use of Oleoresin Capiscum (OC) pepper spray inappropriately. Administrative sanctions imposed on the guards, including Non-Judicial Punishment, were appropriate and measured, in relation to the offenses noted. ${ }^{34}$
D. Team Analysis. All detainees are well protected from violence, and current practices are consistent with legal authority cited above. The JDG SOP and use of force tactics, techniques, and procedures (TTPs) were reviewed and found to be in compliance with governing regulations. The JDG force is professional, well trained, knowledgeable, and conscious of their responsibility to treat the detainees in a humane manner. There is a consistent effort to perform directly in accordance with the published SOP. Every member of the JTF-Guantánamo team interviewed was aware of his or her responsibilities to protect the detainees from abuse and mistreatment. In a review of relevant records, it was evident that leadership took allegations of staff misconduct

[^20]seriously and took appropriate action to ensure that even the appearance of impropriety was addressed. There were no incidents of excessive force observed.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Continue to train and supervise the guard force in proper uses of force, investigate all allegations, and take appropriate action as warranted.


## Protection from Violence-Forced Cell Extractions

A. Legal/Policy Authority. Common Article 3. Under DoDD 2310.01E, detainees are to be protected from violence to life and person, including threats of violence, rape, assault, bodily injury, and reprisals. Additional reference material may be found in GPW (Art. 13, 17, 87), GCC (Art. 31-33, 100), DoDD 5210.56, Use of Force, the UCMJ (Art. 93, 128), AR 190-8 (1-5, 6-11), and FM 3-19.40 (5-52), which provide that no person will use physical force against a detainee except to defend themselves, prevent an escape, prevent injury to other persons or property, quell a disturbance, move an unruly detainee, or as otherwise authorized in AR 190-14 (Use of Force). No corporal punishment in permitted.
B. Detainee/NGO Input. Commentators have expressed concern about unprofessional behavior on the part of FCE team, including the use of excessive force.
C. Practice/Implementation. Similar to procedures used in detention facilities throughout the United States, FCE is a level of force authorized by CJDG in response to certain acts of noncompliance and/or emergency situations that cannot be resolved with lesser levels of force. Before an FCE is ordered, every effort is made to resolve the matter without entering the cell or using force (e.g., using linguists to convince the detainee to comply with direction). The FCE Team is not deployed as a punishment or for interrogation purposes. All FCE Team members use the minimum amount of force necessary to accomplish the extraction. When it is believed the detainee is in the process of committing self harm or there are signs of a potential self harm (no visual sight of the detainee/covered window), then an immediate response force is deployed. Non-emergent FCEs are not conducted during prayer call or within 30 minutes after call to prayer unless specifically authorized by the CJDG. The camp OIC briefs the FCE Team prior to each FCE: "When conducting the FCE, your primary focus is safety and security. Use the minimum amount of force necessary." Prior to entering the cell, the FCE team directs the detainee to lie down and not move. In the vast majority of cases, the detainee follows the directions and the FCE proceeds without incident. The standard FCE team will include five trained security force personnel, a medical staff member, and a videographer. All FCEs are videotaped from the team brief until detainee is moved and secured. A Medical Corpsman is on standby during FCEs with an Emergency Response Kit to assess and provide care to the detainee and/or guard force. The Corpsman does not participate in the FCE. While the guard force wears protective gear and clothing to protect against a combative detainee, most FCEs are nonconfrontational and accomplished with little, if any, force. The guard force is also trained and instructed on modified FCE procedures to use if a detainee is less than $85 \%$ of his ideal body weight or has another medical condition that requires FCE procedure modification.
D. Team Analysis. The team observed FCE actions and reviewed tapes of FCEs conducted during a period of increased detainee resistance to authority. ${ }^{35}$ All guards were observed using

[^21]the minimum amount of force necessary, and used caution to prevent harm to the detainee within required levels of safety and security.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Continue to train and supervise the guard force in proper uses of force, investigate all allegations, and take appropriate action as warranted.
taping of the events. Of $20 \mathrm{FCE} / \mathrm{excessive}$ use of force claims since the beginning of 2007, none has been substantiated.


## Protection from Violence—Shackling

A. Legal/Policy Authority. Common Article 3. Under DoDD 2310.01E, detainees are to be protected from violence to life and person, including threats of violence, rape, assault, bodily injury, and reprisals. Additional reference material may be found in GPW (Art. 13, 17, 87), GCC (Art. 31-33, 100), DoDD 5210.56, Use of Force, the UCMJ (Art. 93, 128), AR 190-8 (1-5, 6-11), and FM 3-19.40 (5-52), which provide that no person will use physical force against a detainee except to defend themselves, prevent an escape, prevent injury to other persons or property, quell a disturbance, move an unruly detainee, or as otherwise authorized in AR 190-14 (Use of Force). No corporal punishment is permitted.
B. Detainee/NGO Input. The use of shackles should be minimized and used only when necessary; in such cases they should not be placed tightly on bare skin. Minimize the use of shackles when transporting a detainee to and from the hospital.
C. Practice/Implementation. Detainees are unrestrained when they are in their cells, communal living bays, and recreation areas. Detainees are restrained when outside such areas, and only for safety and security purposes, and never for discipline. All detainees are routinely restrained with hand restraints when removed from their cells or bays for movement within the camp. Leg restraints will be added if security concerns warrant. Except for detainees at Camp Iguana, leg restraints will be applied if being moved outside of the camp. The primary means of leg restraint is by use of soft leather restraints with padded fleece lining; however, non-padded leg restraints will be used for FCEs. Detainees are restrained in classrooms, TV/movie rooms, interview rooms, and Camp 6 communal recreation bay areas by use of soft leg restraints through an eye bolt or table leg. This is for the protection of staff members including instructors present for such activities. All guards are trained in the proper procedures for applying restraints to ensure security and prevent injury to detainees. Hospital transports will follow the same restraint procedures, but may be modified if there is a threat of injury or harm to the detainee. It is noteworthy that in the past, detainees have become combative during medical procedures assaulting staff. Supervisors inspect restraints after guards apply them. ${ }^{36}$
D. Team Analysis. The CJDG maintains responsibility for the safety and security of all visitors, staff and detainees. The use of restraints is strictly limited to reasons of safety and security. The JDG uses restraint equipment that provides the required level of security, but also takes into consideration detainee comfort. The JDG considered outside input in making its decision to use soft leg restraints.

## E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Continue to train and supervise the guard force in the proper use of restraints.
- Continue to seek ways to satisfy security requirements but also take into account humane treatment of detainees.

[^22]
## Protection from Sensory Deprivation—Solitary Confinement

A. Legal/Policy Authority. Common Article 3. Under DoDD 2310.01E, detainees are to be treated humanely and respected as human beings. Sensory deprivation is not authorized. Additional reference material may be found in GPW (Art. 13, 17, 21, 22), GCC (Art. 27. 30-33, 84), and AR 190-8 (1-5, 6-1), which provides for individual or collective accommodations; and, where possible, to group detainees by nationality, language, or custom. Except for disciplinary or penal sanctions, detainees may not be held in "close confinement."
B. Detainee/NGO Input. Keep solitary confinement to a minimum. Solitary confinement must only be used as a deterrent against bad behavior and nothing else. Limit the amount of time in solitary confinement. The mental health of detainees in solitary confinement should be checked regularly by physicians. Stop holding detainees in Camps 5 and 6 in solitary confinement.
C. Practice/Implementation. Detainees in Guantánamo are never placed in solitary confinement or isolation. All detention spaces and cells have been built to support a program that enhances the safety and security of both detainees and staff members alike. All detention cells, except in Camp 7, permit easy communication and interaction with other detainees in adjoining cells. In addition, all detainees are allowed times outside of their cells daily for communal recreation with other detainees in open air adjoining recreation spaces. Compliant detainees are offered no less than four hours recreation daily, and even noncompliant detainees in a discipline status are offered two hours recreation daily. Discipline is administered through a process of reduced levels of privileges, and not by use of isolation or solitary confinement. Detainees in Camp 7 are housed in cells that do not permit communication with adjacent cells. Detainees in Camp 7 also do not have the same level of socialization as detainees in other camps in Guantánamo. ${ }^{37}$ To mitigate the potential adverse effects of less socialization, Camp 7 detainees are offered the opportunity to socialize daily through four hours of recreation, and weekly through two hours of socialization management. This is a program that seeks to maintain detainees' mental well-being through intellectual stimulation.
D. Team Analysis. Solitary confinement is normally defined as confinement of a detainee in isolation from other detainees, and is not a procedure authorized for or applied to any detainees. Contrary to many criticisms, the facility designs of Camps 5 and 6 exceed those typical of medium and maximum-security detention facilities throughout the United States in terms of design, cell configuration, cell space, and ease of communications between cells. It is worth noting that JTF-Guantánamo handles detainees who are a threat to themselves, other detainees, or staff in the same way that detention facilities across the United States do so, through the use of single cells in maximum-security facilities. In fact, these cells, and many of the practices of JTFGuantánamo in its maximum-security facilities, are utilized to mitigate threats posed by detainees to themselves, other detainees, and staff. JTF-Guantánamo has medium security facilities (Camp 4 and soon certain areas of Camp 6) available to detainees who follow camp rules and refrain from acts that could threaten themselves, other detainees, and staff. As described elsewhere in the report, JTF-Guantánamo has a vetting program to move detainees within and between camps, depending upon their behavior and threat level. Detainees are well

[^23]aware of the requirements necessary to move into medium-security facilities, principally Camp 4 , and the consequences of non-compliance (e.g., remaining in Camps 5 or 6, or movement from Camp 4 into Camps 5 or 6). Use of single cells in Guantánamo is solely undertaken for purposes of maintaining good order within the detention facilities and is not used as a form of punishment.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Increase detainee-to-detainee contact in Camp 7, including the ability for detainees to communicate with each other from within their cells.


## Recommend:

- Maximize interaction between detainees, communal living and recreation interaction, subject to security concerns.
- Regularly conduct vetting, and ensure that qualified detainees are moved to communal living conditions subject to reasonable security concerns.


## Protection from Sensory Deprivation-Human-to-Human Contact

A. Legal/Policy Authority. Common Article 3. Under DoDD 2310.01E, detainees are to be treated humanely and respected as human beings. Sensory deprivation is not authorized. Additional reference material may be found in GPW (Art. 13, 17, 21, 22), GCC (Art. 27. 30-33, 84), and AR 190-8 (1-5, 6-1), which provides for individual or collective accommodations; and, where possible, to group detainees by nationality, language, or custom. Except for disciplinary or penal sanctions, detainees may not be held in "close confinement."
B. Detainee/NGO Input. Cease using sensory deprivation methods, such as goggles, during movements of detainees between camps or any other areas. Detainees should be allowed phone calls, video-teleconferences, and visits from family members. Immediate family members that are detainees should be allowed to visit or be housed together. Ensure proper translation of all information. Expand access to outside news (in several relevant languages) with little or no censorship.
C. Practice/Implementation. Sensory deprivation is defined in FM 2.22-3 as an arranged situation causing significant psychological distress due to a prolonged absence, or significant reduction, of the usual external stimuli and perceptual opportunities. Sensory deprivation is prohibited. The use of goggling and earmuffs for security purposes is not prohibited in DoD policy or directives. FM 3-19.40 specifically contemplates the use of such devices for security purposes.

During security transports of detainees outside of their respective camps, it is necessary to temporarily apply shielding devices for security purposes only. Blackened goggles and ear muffs are only placed on detainees for transports outside of their respective camps. These devices are immediately removed upon arrival to the point of destination.

For all detainees, except those in Camp 7, telephone calls are continually offered on a rotational basis through the population, and all detainees are offered at least one call quarterly, and more frequently if logistically possible. ${ }^{38}$ Additionally, telephone calls can be approved for humanitarian purposes upon request.

Camps 1-6, Echo and Iguana offer ample human-to-human contact daily. Detainees are housed within either individual adjoining cells or communal bays, and are allowed to see and speak in conversational tone with neighboring detainees in cells/bays, and while at recreation periods. Most of the detainees are offered recreation for a minimum of four hours daily, and detainees in a discipline status are offered at least two hours of recreation daily with other detainees in either adjoining or shared recreation areas. In addition, the guard force maintains a minimum of 3minute checks on all detainees, and routine medical checks are conducted daily.

Camp 7 consists of single cells that do not allow for communication between cells. However, detainees there are allowed to recreate in adjacent, but separated open-air recreation spaces for at least four hours daily with a recreation partner. These detainees are also offered special socialization management opportunities once per week for two hours.

[^24]D. Team Analysis. The JDG recognizes the importance of human-to-human contact and has taken steps to maximize such contact, consistent with security considerations within the various camps. Throughout the detention facilities, except in Camp 7, detainees are allowed to interact and communicate with detainees in neighboring bay/cells without restrictions, and compliant detainees are allowed to recreate in the presence of other detainees for at least four hours per day; even the least compliant are offered two hours of recreation per day with neighboring detainees. In addition, throughout all camps the guards continually observe and interact with all detainees, as required to insure safety and security of detainees.

Camp 7 cells limit human-to-human contact, but detainees are given opportunity to socialize daily through four hours of recreation, and weekly for two hours for socialization management. This is a program that seeks to maintain detainees' mental well-being through intellectual stimulation.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Increase detainee-to-detainee contact in Camp 7, including the ability for detainees to communicate with each other from within their cells.
- Continue to allow maximum interaction between detainees, and maximize communal living and recreation interaction within reasonable security concerns.


## Recommend:

- Seek ways to provide more frequent telephone calls.
- Approve and implement family visits.
- Approve and implement video teleconferencing with families.


## Protection from Humiliation

A. Legal/Policy Authority. Common Article 3. According to DoDD 2310.01E, detainees will be treated humanely and respected as human beings. It prohibits "outrages upon personal dignity, in particular humiliating and degrading treatment," forced prostitution, rape, indecent assault, and subjecting detainees to public curiosity and other inhumane treatment. Additional reference material includes: GPW (Art. 13, 14, 17); GCC (Art 27); AR 190-8 (1-5), which protect detainees against insults or public curiosity and entitles them, in all circumstances, to respect for their persons and their honor.
B. Detainee/NGO Input. Teach personnel the safe and humane way to treat detainees and take disciplinary action against personnel mistreating detainees. Investigate and punish personnel who humiliate detainees.
C. Practice/Implementation. JDG SOPs emphasize respect for the person. Search for and seizure of contraband take a graduated approach: guards use a detainee "pat-down" search first, followed by an electronic wand or "Rapiscan" system to search private areas; if those means are not available or sufficient, guards conduct a modified strip search, respecting detainee privacy; complete strip searches are a last resort, only authorized by CJDG. ${ }^{39}$ Female guards are not authorized in areas of the camps that would provide them a view of detainees showering; female guards are not permitted to be present when strip searches occur, nor are they authorized to operate "Rapiscan" systems. To minimize public exposure, media are restricted from taking identifying photos of detainees.

The team conducted spot-checks of guard behavior and analyzed the MPI log of incidents looking for allegations of "humiliating and degrading" conduct. Our review revealed substantiated violations of the SOPs (like calling the detainees names, making obscene gestures, or conducting a search improperly), in which cases guards were awarded Non-Judicial Punishment (NJP) or administrative sanctions for their conduct. ${ }^{40}$ The team confirmed that guard mount training ${ }^{41}$ and other sustainment training contained discussion of the humane treatment standards discussed above.
D. Team Analysis. JDG SOPs and training emphasize respect for the person. Any allegations of abuse or mistreatment are appropriately investigated and documented, and appropriate action is taken. While there are occasional minor violations of the SOP against humiliating treatment of any kind, the camp leadership properly supervises the guard force, investigates allegations of mistreatment, and appropriately sanctions any misconduct identified and substantiated. Complaints of this nature from the external community have declined over time.

[^25]E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

Strongly recommend:

- Continue to train and enforce the standards already established in the SOP for the proper conduct of the guard force.


## Healthcare Services—Quality of Care and Access

A. Legal /Policy Authority. Common Article 3. Governing authorities for provision of medical care to detainees include DoDD 2310.01E and DoDI 2310.08E. The former requires that "adequate medical treatment" be provided to all detainees. The latter charges health care personnel with protecting the detainees' "physical and mental health and provid[ing] appropriate treatment for disease;" health care providers may only participate in procedures necessary for the "protection of the physical or mental health or the safety of the detainee." Additional reference material includes GWS (Art. 12), GPW (Art. 30, 31), GCC (Art. 91, 92) AR 190-8 (3-4, 6-6) and FM 3-19.40, which provide for an adequate infirmary, protection from infectious diseases, monitoring of the detainees' health and weight, non-discriminatory treatment; and the provision that only urgent medical reasons will authorize priority in the order of treatment to be administered.
B. Detainee/NGO Input. Ensure that only medical personnel, not interrogators or guard personnel, are involved in decisions involving the medical care of detainees; have facilities well equipped and supplied; explain to detainees that medical care is not tied to cooperation in interrogations, whether they are hunger striking, or whether they are on disciplinary status; allow medical professionals to have a greater say in a detainee's confinement conditions; and allow outside medical organizations access to the detainees for an independent medical evaluation. Some commentators have alleged that detainees' health has been neglected-that adequate medical care was either not available or withheld. Specific allegations have included charges of neglect of mental health and cardiologic conditions, and failure to diagnose and treat hepatitis and tuberculosis, to name just a few. Finally, it has been suggested that dedicated linguists be used for medical purposes.
C. Practice/Implementation. There are several JMG SOPs governing detainee care delivered at the Joint Medical Group (JMG). The JMG's staffing/resources are adequate to meet workload requirements, and are augmented by the Navy as necessary. Detainees can access medical care 24 hours per day without regard to disciplinary status or detainees' cooperation with intelligence gathering and legal processes. ${ }^{42}$ For emergency care, Corpsmen and nurses are can respond to every camp within minutes. Physicians are present at the hospital during normal working hours and available on call, no more than a few minutes away after hours. There are three ambulances available (at Camp 6, Camp 7 and at the Detainee Hospital) for emergency transport, and a recent appendectomy was started within an hour of diagnosis. Formal sick call is conducted at least weekly on all blocks, but is available daily as Corpsmen make medication rounds in the camps. Corpsmen are readily identifiable by their uniforms and the equipment they carry. The guard force and/or Corpsman annotates requests for medical attention or a request for a medical appointment through DIMS, which nurses check frequently to process requests in timely manner.

Routine medical and dental care is available as needed, with timing of medical care based upon the severity of the condition. ${ }^{43}$ Routine appointments are normally scheduled within seven days.

[^26]Medical specialty evaluation and treatment is provided by local specialists and sub-specialists who visit Guantánamo on a quarterly or semi-annual basis, or as necessary. ${ }^{44}$ Local specialty care referrals are completed within two weeks. If a detainee requires inpatient services, he is transported to the Detainee Hospital for inpatient care. The Detainee Hospital is staffed with nurses and Corpsmen 24 hours per day and averages approximately 12 inpatient admissions per year. ${ }^{45}$

The Behavioral Health Unit provides mental health evaluations, supportive psychotherapy, psychotherapeutic medication management, suicide prevention education, initial, weekly followup and final evaluations for hunger strikers and monthly preventive screenings to a diverse group of detainees. ${ }^{46}$ According to one of the providers at the Behavioral Health Unit, the current population of detainees with active symptoms of mental disorders is less than eight percent which is relatively low compared to prison populations in the United States in which mental disorders average around forty to fifty-five percent. The mental health staff provides mental health screens, empathetic listening and are helping detainees with coping and/or communication skills. In addition, they are actively engaged with the detainee population to help promote socialization and prevent self harm. In addition to the robust outpatient services provided, the unit averages four inpatients per day. During hospitalization, detainees receive care from the attending physician or psychologist, nurses and Corpsmen 24 hours per day and are afforded the same access to recreation, basic and comfort items as other detainees.

Dedicated medical linguists are available during normal duty hours to assist with general, specialty, and behavioral healthcare. However, for emergencies, when medical linguists are unavailable, other non-medical linguists are used.
D. Team Analysis. The professionalism and dedication of the JMG staff are noteworthy. Healthcare personnel are protecting detainees' physical and mental health and provide appropriate treatment for disease. The scope, quality and documentation of care provided to detainees are similar, and in most cases identical, to care received by U.S. Armed Forces personnel. Primary care and medical specialty services are provided to meet detainees' healthcare needs in a timely manner. The JMG provides medical care based upon medical need and operates independently of the JDG or JIG. The JMG does not communicate with interrogators, or support intelligence collection activities. Care is delivered without regard to hunger striking, disciplinary status or detainees' cooperation with intelligence gathering or legal processes. Medical personnel are available 24 hours per day, and respond to emergencies in all detainee camps within minutes. Guards are trained as first responders and can stop bleeding or initiate Cardiopulmonary Resuscitation if the need arises while awaiting the arrival of medical personnel. All care by Corpsmen is reviewed by nurses or physicians, and physicians and other licensed independent practitioners participate in a regular peer review program. Medical personnel are aware of the requirement to report any observed or suspected abuse, and are knowledgeable about the reporting chain. Dedicated medical interpreters are assigned to the

[^27]Detainee Hospital. However, use of non-medical interpreters for provision of health care is sometimes necessary due to manpower shortages. Medical personnel provide pertinent information during the vetting process that helps the JDG make decisions about moves between and within the camps, and provides requests and advice for medically necessary items for detainees. Per the Geneva Conventions, ICRC provides periodic review of medical services. Additionally, the JMG requested the American Correctional Association to provide a consultative assist visit in the Spring of 2008, the results of which are confidential.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Expand detainee access to dedicated linguists to assist with medical evaluation and treatment during evening and weekend hours, to enhance detainee trust in the role of medical providers and to improve the quality of medical care.
- Continue to focus on appropriate detainee access to healthcare services.
- Continue to use input from appropriate external experts and agencies, as is currently practiced, to assess and maintain quality of healthcare services.
A. Legal/Policy Authority. DoDI 2310.08E requires maintenance of accurate and complete medical records (Para 4.2). Paragraph 4.4 requires the safeguarding of patient confidences and privacy within the constraints of the law. Under U.S. law and applicable medical practice standards, there is no absolute confidentiality of medical information for any person. When patient-specific medical information is disclosed for purposes other than treatment, healthcare personnel must record the circumstances of the disclosure, including the name of the approving medical unit commander. Similar to legal standards applicable to U.S. citizens, permissible purposes for disclosure include preventing harm to any person, maintaining public health and order in detention facilities, any lawful law enforcement, intelligence, or national security-related activity. The May 2, 2008 Memorandum "Access to Detainee Medical Records by the Office of Military Commissions" from the Office of the Assistant Secretary of Defense (Global Security Affairs) provides additional guidance for a procedure to be used for any requests for medical information by the Office of the Military Commissions.
B. Detainee/NGO Input. Medical-patient confidentiality is a right. Records should be maintained as private and only seen by medical personnel. Both the detainee and his legal counsel should have direct access to the detainee's medical records. Guards should remain out of hearing range when medical providers are talking with the detainees.
C. Practice/Implementation. JTF-JMG SOPs are in place to govern medical records and confidentiality. Medical records for detainees were established upon in-processing and are maintained throughout detention. The medical record is organized in a standardized health record format. The JMG staff ensures the confidentiality, security, and integrity of all health records. ${ }^{47}$ Only essential medical personnel are authorized admittance to the medical records areas. The approving authority for release of medical/dental information is designated as the JTF Surgeon, per procedural guidelines, in accordance with DoD policy. In an interview, the Medical Plans Officer detailed the process for medical information requests. Requests for medical records by an outside agency, non-medical JDG staff, detainee attorney, and/or prosecution attorney are submitted to the Staff Judge Advocate (SJA) for validation. If records are cleared for release, certified copies are provided through the SJA to the requestor.
Documentation of the appropriate authority for disclosure is kept on file.
D. Team Analysis. Guantánamo complies with governing authorities with respect to confidentiality of medical information. Medical care is documented in medical records, which have been established for detainees and are appropriately maintained in a secure location with access limited only to medical personnel who are providing healthcare services. A computerized information system is also in use at the detainee medical treatment facilities for reporting of laboratory studies, x-rays, etc. Corpsmen passing medications on the cell blocks take as much precaution as safety allows to preserve confidentiality between medical staff and detainees.

[^28]Requests for medical information by non-medical personnel require approval by the JTF Surgeon per DoD policies and JMG SOPs. Behavioral Science Consultants have no access to medical records or medical information systems. During a review of non-medical electronic systems, DIMS ${ }^{48}$ and JDIMS, ${ }^{49}$ the potential to share specific medical information with non-medical personnel was discovered. JMG personnel stated that they do not have access to the JDIMS module and were unaware of medical information in the system. Additionally, the JDIMS OIC and JIG OIC personnel were notified and are aggressively working to identify the root cause of and to correct the problem. Health records are being maintained, and medical records and information are being protected. Requests for medical information are being answered in accordance with established procedures and policies, and only with approval of the JTF Surgeon.

## E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the

 Geneva Conventions. No prohibited acts were found and conditions are humane.
## Strongly recommend:

- Modify policy and training regarding entry of specific medical information into DIMS (from which JDIMS data is drawn), which will ensure compliance with current medical information policies regarding confidentiality.


## Recommend:

- Consider implementing Armed Forces Health Longitudinal Technology Application-Theater (AHLTA-T), the Military Health System's electronic health record system, for detainee operations, which could help with document preservation. JTF-JMG has submitted an Operational Needs Statement.

[^29]A. Legal /Policy Authority. Common Article 3. U.S. Government policy is to prevent selfharm and to protect the life and health of those in its custody. DoDI 2310.08E states that health care personnel are to "uphold the humane treatment of detainees and to ensure that no individual in the custody or under the physical control of the Department of Defense...shall be subject to cruel, inhuman, or degrading treatment or punishment..." Health care personnel caring for detainees also "have a duty to protect detainees' physical and mental health and provide appropriate treatment of disease." Paragraph 4.7 says " $[\mathrm{i}] \mathrm{n}$ general, health care will be provided with the consent of the detainee. To the extent practicable, standards and procedures for obtaining consent will be consistent with those applicable to consent from other patients." Paragraph 4.7.1 goes on to say "In the case of a hunger strike, attempted suicide, or other attempted self-harm, medical treatment or intervention may be directed without the consent of the detainee to prevent death or serious harm. Such action must be based on a medical determination that immediate treatment or intervention is necessary to prevent death or serious harm, and, in addition, must be approved by the commanding officer of the detention facility or other designated senior officer responsible for detainee operations." DoD policy for treatment of hunger strikers is similar to that used by the Bureau of Prisons, as authorized in Title 28, Code of Federal Regulations, Part 549. Additional references include GPW (Art. 30, 31) and FM 319.40, which provide for monitoring of the detainees' health and weight.
B. Detainee/NGO Input. The World Medical Association (WMA) has stated in its Declaration of Malta that force feeding is "never ethically acceptable" and "feeding accompanied by...coercion, force or use of physical restraints...is a form of inhuman and degrading treatment." Others add, "Have medical personnel comply with the international medical and ethical standards, especially if they participate in enteral feedings of detainees. Cease enteral feeding of hunger striking detainees. Avoid any method of coercion to get them to stop hunger striking."
C. Practice/Implementation. Healthcare services provided to detainees are generally done with the consent of the detainee. Detainees frequently refuse vital signs, laboratory studies, recommended medical and dental procedures, and preventive services, such as flu shots. Some detainees have refused food or water as a means to protest various aspects of their detention. When a detainee begins refusing water or when he has eaten less than 25 percent of nine consecutive meals, medical personnel are notified and begin medical assessment and monitoring, which includes a thorough review of medical history, physical examination and mental health assessment. The initial psychological assessment is conducted by a psychologist or psychiatrist, followed by weekly mental health follow-ups, which may be done by a psychiatric technician. Close medical monitoring and daily weights are continued until the detainee either chooses to resume eating or his medical condition deteriorates to a point, which in the judgment of the attending physician, would present a significant threat to life or health if the fasting were to continue.

A medical recommendation for intervention with involuntarily intravenous therapy or enteral feeding must be approved by the CJTF. A physician directs and oversees the enteral feeding
process, ${ }^{50}$ the goal of which is to sustain the life and health of hunger strikers. The physician is assisted by a feeding nurse and one or more Corpsmen, and receives periodic consultations from a nutritionist. Detainee medical complaints during hunger striking may be addressed by the enteral feeding team or may be referred to the hospital or clinic medical team in the same way as provided for other detainees. Guards weigh hunger strikers daily, offer a regular meal to all hunger striking detainees at each meal time and provide information to medical personnel about quantities of food and water the detainee has taken. This information is relayed to the attending physician, who makes a determination of whether enteral feeding or other therapy is indicated and provides appropriate medical orders.

Enteral feedings may be withheld for detainees who are taking nutrition orally or when otherwise clinically indicated. Detainees who take nine consecutive meals (or three if they have not required enteral feeding) are no longer considered to be a hunger striker. Medical monitoring by the attending physician is continued for a period following the end of a hunger strike to ensure stability of any medical conditions and maintenance of body weight. Enteral feeding is administered twice daily for most hunger strikers. The Review Team observed multiple enteral feedings in Camps 3, 5, and 6. Many detainees refused requests to come out of their cells for enteral feedings. When this occurred, guards relayed this information to the CJDG, who authorized an FCE to accomplish the enteral feeding. Detainees requiring FCE during our observations appeared passive throughout the process. Medical personnel were standing by for all FCEs. FCE teams placed detainees in feeding chairs or on gurneys when deemed necessary by medical personnel. Restraints were used for enteral feedings for the minimum possible time as necessary to protect both the detainee and staff. Feedings were accomplished in feeding chairs, ${ }^{51}$ except for one detainee who was placed on a gurney due to a back problem that made sitting in the chair uncomfortable. ${ }^{52}$ Many of the feeding chairs observed had been customized with pillows and padding for comfort. None of the feedings observed involved use of head restraints. ${ }^{53}$ Detainees appeared generally cooperative with medical administration of the feedings.

New sterile feeding tubes are generally used for each feeding. ${ }^{54}$ Per JMG SOP, time in the feeding chair may not exceed two hours and is rigorously monitored by the staff.

[^30]D. Team Analysis. DoD and JTF-Guantánamo policy is to preserve the life and health of those detained and under its care. The process of ordering life sustaining nutritional support for detainees whose continued fasting poses a significant threat to life or health, is similar to that used by the U.S. Bureau of Prisons, and has been upheld in U.S. Federal Courts.

The current feeding program is being conducted solely as a medical procedure to sustain the life and health of hunger strikers. Hunger strikers receive individualized medical care and access to the same medical treatment services as other detainees. The current process is lawful and is being administered in a humane manner.

It is important to note that medical care is generally provided with the consent of the detainee. Processes for permitting detainees to refuse diagnostic tests, examinations and treatments are similar to those used for other patients. Exceptions may apply for lifesaving emergency medical care provided to a patient incapable of providing consent or for care necessary to protect public health. Enteral feeding of hunger strikers for whom continued fasting might result in death or serious harm is being conducted as a medical procedure with the sole purpose of preserving life and health, and in accordance with Common Article 3 and DoD policy. Detainees are weighed monthly by guard staff. Hunger strikers are weighed daily. Guards in Camp 4 reported that detainees are permitted to weigh themselves and report their weight.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Require JMG or JDG personnel to directly observe and record detainee weights.
- Continue safe and humane treatment of hunger strikers whose life or health is jeopardized by hunger striking.
- Continue to provide sufficient medical staffing at the JMG to fully support medical treatment necessary to sustain the life and health of detainees on hunger strike.


## Healthcare Personnel Management—Behavioral Science Consultants (BSC)

A. Legal Policy/Authority. Common Article 3. DoDI 2310.08E, in Para 4.1 states that all health care personnel have a duty to uphold the humane treatment of detainees and to ensure that no individual in the custody of the DoD is subject to cruel inhuman or degrading treatment. Para 4.9 speaks to management of healthcare personnel. Enclosure 2 of the reference authorizes BSCs to make psychological assessments of the character, personality and other behavioral characteristics of detainees and based on such assessments; advise authorized personnel performing lawful interrogations and other lawful detainee operations, including intelligence activities and law enforcement. Their professional role is not in a provider-patient relationship, but in relation to a person who is the subject of a lawful governmental inquiry, assessment, investigation, interrogation, adjudication, or other proper action.
B. Detainee/NGO Input. As part of an ongoing medical ethical debate, the following professional organizations have, at times, been critical of current military practice with respect to Behavioral Science Consultants. The two most vocal organizations on this matter are the American Psychiatric Association and the American Psychological Association. Each view is summarized below:

> The American Psychiatric Association opposes the use of psychiatrists in interrogating prisoners. The proper role of psychiatrists is to provide humane and compassionate care for those suffering from mental illnesses. We believe that the use of psychiatrists to aid in interrogations is a serious violation of medical ethics and should be discontinued.
> The American Psychological Association prohibits psychologists from any involvement in interrogations or any other operational procedures at detention sites that are in violation of the U.S. Constitution or international law.
C. Practice/Implementation. JTF and JMG SOPs provide guidance for healthcare professionals assigned to the JMG about their mission and interaction with the Behavioral Science Consultant Team (BSCT). In short, no JMG personnel are involved with interrogations and no BSC personnel are involved in medical treatment of detainees.

The JMG provides all medical care including mental health evaluations and treatment for the detainees. Moreover, interviews with JMG personnel confirmed that they work completely independently from the JDG and JIG. The medical staff is aware of requirements to report instances of observed or suspected violation of applicable standards for the protection of detainees to the chain of command.

As of 2007, the BSCT reports directly to the CJTF, and provides advice to the CJDG. One of the two BSCs assigned and the BSC technician work full time advising the CJDG regarding camp operations. When the BSCs are in the detention camps, they do not have any contact with detainees or medical personnel. They do not provide medical care except in the event of an emergency when no other medical professional is available. They also provide behavioral analysis in preparation for the vetting process to ensure safe and effective planning for detainee moves within the camps and provide training to the guard force. They went on to say that, they are doing very little if any work with the JIG personnel except for occasional training provided for new interrogators and personnel arriving at JTF-Guantánamo Detention Facilities. When/if a

BSC is present for an interrogation, they are located outside of the room and only observe. They are charged with reporting any observed or suspected abuse during the interrogation.

JTF-Guantánamo has been in the process of approving a local JTF-BSCT SOP (currently still in draft form), that provides additional guidance to strengthen the informational firewall between the duties of medical personnel and BSCs. This guidance provides for establishment of a forum for the BSCT, JTF Surgeon and Senior Medical Officer (SMO) to meet as needed to reinforce compliance with DoDI 2310.08E, but they have not had a need for this meeting to date. The current BSCs emphasized that their duties are distinctly separate from those of the JMG, and stated that they do not have any access to medical records or information. If the BCST had a request for medical information, it would be submitted the same way as any other outside agency, (filtered through the SJA to evaluate appropriateness of request, then sent to JTF Surgeon for approval). Similarly, if they want to consult with a JMG psychologist, they must gain the approval of the JTF Surgeon.
D. Team Analysis. Medical care is provided only by JMG staff. The currently assigned BSCs are both clinical psychologists and are operating in accordance with governing policies and procedures. According to the CJTF, the BSCT function in this operational environment is a vital resource for commanders. Their primary role as behavioral advisors to the CJTF and CJDG is helping bring about improvements in detention camp dynamics. They are aware of requirements to report instances of observed or suspected violations of applicable standards for the protection of detainees to the chain of command. Finally, they have taken great care to keep their BSC roles separate from the delivery of health care services and health information, and to ensure that they are not perceived by detainees as healthcare personnel. Once updated and approved, the additional measures within the draft JTF SOP of July 2007 would firmly establish a firewall that more clearly delineates healthcare personnel from the BSC role.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Sustain BSC resource to ensure continued mission support to JDG Commander and, to a lesser extent, the JIG Director.
- Expedite routing and approval of the draft JTF BSCT SOP to ensure the inclusion of appropriate firewalls and safeguards between the intelligence and other roles of BSCs and JMG medical care providers.
- Continue to have Behavioral Science Consultants observe and support the separation of medical information from intelligence operations and continue to provide behavioral consultation aimed at optimizing the safety of the camps.


## Recommend:

- Dedicate two Behavioral Science Consultants solely to provide psychological consultation to the CJDG, JIG and CJTF in order to support safe, legal ethical and effective detention and interrogation operations at JTF-Guantánamo.


## Interrogation

A. Legal/Policy Authority. Common Article 3 of the Geneva Conventions requires humane treatment, and prohibits violence to life and person, cruel treatment and torture, outrages upon personal dignity (humiliating and degrading treatment), and punishment without due process. From that overarching policy, DoDD 2310.01E, DoDD 3115.09, and Army Field Manual 2-22.3 delineate the proper means of handling and interrogation of detainees such as those held in Guantánamo. The Detainee Treatment Act of 2005 prohibits cruel, inhuman or degrading treatment or punishment, and specifically mandates that no person detained by DoD may be interrogated using techniques not authorized by FM 2-22.3.
B. Detainee/NGO Input. The gathering of information from detainees should be done in accordance with international standards, and must not supersede humanitarian concerns. Along those lines, the detainee should not be punished or rewarded based on his cooperation with interrogators, and it should be made clear to detainees that interrogators are not responsible for detention operations. Use of detention practices to set conditions for interrogation should be prohibited.

Medical personnel should not assist with interrogations, nor should medical information be exploited for intelligence purposes. Moreover, medical care should not be made contingent upon cooperation with interrogators.

The use of "solitary confinement," "Fear Up," sleep deprivation, and degrading treatment as interrogation techniques is inhumane. Detainees must be permitted free exercise of their religion; therefore, possession of religious items should not be contingent on cooperation with interrogations.
C. Practice/Implementation. Only interrogation techniques and approaches permitted in FM 222.3 are used in Guantánamo. However, not all techniques and approaches from the FM are used. Separation is permitted only when approved, case by case, by the Commander, USSOUTHCOM. Such authorization has only been requested and granted on four occasions, and has not been used since early 2007. In local practice, interrogation approaches not permitted in Guantánamo include False Flag, Fear Up, and Ego Down.

The Joint Intelligence Group (JIG) Interrogation Control Element (ICE) has adopted a Standard Operating Procedure (SOP) which sets forth guidance and limitations for all aspects of interrogations, including the development of interrogation plans, scheduling and conduct of interrogations, use of incentive items, employment of linguists, interrogation techniques and approaches that may be used, interrogation training, and oversight mechanisms.

Interrogations of Guantánamo detainees are all voluntary. Approximately one-third of all interrogations take place at the request of the detainee. Detainees are permitted to decline participation in interrogations at any time, with no negative disciplinary consequences. At no time does the Joint Detention Group (JDG) allow any level of non-participation or noncooperation in interrogations to influence the disciplinary status of any detainee.

Interrogators are permitted to provide incentives to detainees who participate in interrogations. These incentives are items such as fast food from restaurants available on the Guantánamo Naval Station, cookies, sweets, and the like. Also, on occasion the interrogation team may provide a home cooked meal from a recipe from the detainee's home country. Tea and coffee are often served during the interrogation, and sometimes the detainee, the interrogator, and the translator, where one is needed, watch a video selected based on the preferences of the detainee. Videos with political, religious, or violent content are not permitted. Detainee cooperation with interrogation has no effect on comfort items or basic issue items provided to the detainee while in the detention camps.

Joint Medical Group personnel do not participate in interrogations, do not provide patientprovider information to interrogators, and do not medicate or otherwise prepare detainees for interrogation. Medical personnel may recommend to the CJDG that a detainee not be available for interrogation. When the CJDG puts a detainee off limits for interrogation, that detainee is off limits until the CJDG rescinds that status.

JTF Behavioral Science Consultant Team (BSCT) personnel may observe interrogations, but may not conduct them or be present in the interrogation room. The BSCT advises interrogators in a manner similar to psychologists assisting in criminal investigations, but does not plan, conduct or direct interrogations. The BSCT also serves as yet another oversight mechanism; responsible for observing interrogators for "drift" in their personalities or interrogation practices that may tend toward unauthorized interrogation behavior.

Detainees are restrained during interrogations only to the minimum level required for safety of all personnel involved, consistent with security requirements. Restraints are determined by the JDG, and delineated in interrogation plans.

Interrogations do not infringe upon the detainees' exercise of religion. The JDG issues every detainee a Koran, prayer rug, prayer cap, and prayer beads, regardless of disciplinary status and regardless of the detainee's cooperativeness in interrogation. None of these items are impacted by a detainee's level of cooperation with interrogators. The exercise of religion is respected at all stages during the interrogation process. Interrogations cease during prayer time at the detainee's request/preference.
D. Team Analysis. Interrogation practices in Guantánamo are in compliance with Army FM 222.3. While approach techniques are authorized by FM 2-22.3, JTF-Guantánamo does not, as a matter of local practice, use them. The use of incentive items in connection with interrogations continues to be standard practice at Guantánamo, and does not violate principles of humane treatment. The use of couches and soft chairs, offering of food items and movies or books, as well as time away from the detainee's cell, are intended to provide the detainee an environment of comfort, not coercion. Neither basic items nor additional comfort items provided by the JDG are conditioned upon a detainee's cooperation with interrogators. Many of the changes made to standard interrogation practices within JTF-Guantánamo have been instituted under the leadership of the current JIG Director - yet they have not been formally incorporated into the SOP for interrogators, which was last updated in April 2007. The long-standing view of commentators concerning interrogation in Guantánamo contrast sharply with current practice.

Significant changes made in Guantánamo have moved interrogation practices far beyond the minimum standards articulated in Common Article 3, U.S. law and DoD regulations.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

## Strongly recommend:

- Update the JIG Interrogation Control Element (ICE) SOP to reflect current intelligence collection practices in Guantánamo.
- Continue to train JIG personnel on strict compliance with local and DoD-wide policy, directives, and instructions, as well as U.S. law, particularly Geneva Conventions Common Article 3.


## Recommend:

- Video record and archive interrogations in Guantánamo to confirm compliance with law and policy, subject to security concerns.


## Outside Access to Detainees

A. Legal/Policy Authority. Common Article 3. According to DoDD 2310.01E, the ICRC shall be allowed to offer its services. Additional reference material includes GPW (Art. 70-75, 78, 125, 126); GCC (Art. 104, 140, 142); AR 190-8 (1-5, 3-4, 3-5, 3-16, 6-8) state that: ICRC services may be offered in the areas of communication, relief parcels, detainee complaints, and camp administration.
B. Detainee/NGO Input. Other than the International Committee of the Red Cross (ICRC), enhance the transparency of operations by allowing authorized organizations, NGOs and selected personnel from the UN to visit and speak with the detainees.
C. Practice/Implementation. The Geneva Conventions address the matter of access by the International Committee of the Red Cross (ICRC) to persons detained during armed conflict. Per the DoD Directive, the ICRC shall be allowed to offer its services during an armed conflict, however characterized, to which the United States is a party. Traditionally, the ICRC has performed this important function during the conduct of detention operations and has historically enhanced DoD's ability to conduct detention operations effectively. Since the opening of the detention facilities at Guantánamo, the ICRC has been afforded the ability to meet privately with the detainees during regular visits to Guantánamo. These visits occur in locations within the camps that prevent the conversation from being overheard by camp personnel. After every visit, the ICRC debriefs the camp authorities, describing the general state of detention, making recommendations for improvement and relaying any detainee allegations and complaints received. Any substantive written or oral reports provided by the ICRC are promptly forwarded for consideration and action where appropriate.
D. Team Analysis. The ICRC is the only international or non-governmental organization with a special responsibility under the Law of War, including the full Geneva Conventions and Common Article 3, to provide services to the detaining power. They visit at least quarterly, have access to all detainees in a private setting, and provide regular communications with camp authorities concerning their conversations. The communications between the ICRC and the U.S. Government are confidential and intended to assist the detaining power in providing humane treatment for detainees. The unique modalities that govern the relationship between the ICRC and the United States encourage a candid, thoughtful exchange of ideas concerning the conditions of detention. The involvement of other international and non-governmental organizations, though unable to provide the same comprehensive and confidential services to the detainees, may be beneficial in making the operations at Guantánamo more transparent, and in offering their services for the humane care and treatment of detainees as well as assistance in repatriation of certain detainees.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

Strongly recommend:

- Continue to encourage and maintain the ongoing relationship with the ICRC as they periodically visit Guantánamo.

Recommend:

- Consider inviting non-governmental organizations and appropriate international organizations to send representatives to visit Guantánamo, in a manner that does not jeopardize the current relationship with the ICRC and is consistent with security and safety of the detainees and guard force.


## Attorney Access to Detainee-Clients

A. Legal/Policy Authority. Judge Joyce Hens Green, U.S. District Court for the District of Columbia, Protective Order and Procedures for Counsel Access to Detainees at the United States Naval Base in Guantánamo Bay, Cuba ("Protective Order") November 5, 2004; Military Commissions Act of 2006; Commander, JTF-Guantánamo Memorandum "Military Commissions Counsel Visitation of Detainees Practices Guide ("Practices Guide")" 19 May 2008.
B. Detainee/NGO Input. Detainees have been denied access to attorneys in Guantánamo. Attorneys have been denied access to their detainee-clients.
C. Practice/Implementation. Currently there are more than 200 detainee habeas corpus petitions filed with the U.S. District Court for the District of Columbia. Those cases are proceeding under the cognizance of various federal judges. Detainees have been advised of the means by which they may request attorneys from federal courts. There are 14 detainees charged under the Military Commissions Act. Attorneys for habeas corpus and military commissions cases are permitted to travel to Guantánamo and meet with their clients.

There are 13 attorney visitation rooms in Camp Delta, including ten in Camp Echo, two in Camp 6, and one in Camp 5. JTF-Guantánamo received over 1,300 habeas corpus attorney visits and more than 500 Military Commissions attorney visits on behalf of detainees in calendar year 2008. In addition, 30 attorney-detainee client telephone calls were facilitated in calendar year 2008, most occurring after the Supreme Court's decision in Boumediene v. Bush, when it became clear that the detainee habeas corpus cases filed in the U.S. District Court for the District of Columbia would be permitted to move forward and the Chief Judge of the District Court ordered all parties to expedite the cases. For JTF-Guantánamo, this meant expanding attorneydetainee client meeting times, to include weekends and installing telephone capability to permit the calls between detainees in Guantánamo and attorneys calling from a designated secure location in Alexandria, Virginia.

The JDG and the JTF-Guantánamo Office of the Staff Judge Advocate (SJA) facilitate attorney visitation and telephone calls in accordance with the Protective Order, in the case of habeas corpus related visits, and the Practices Guide in the case of military commissions related visits. The foregoing respectively govern all aspects of attorney visitation and communications with their detainee clients in Guantánamo, including entry into and exit from the camps, inspection of personal belongings and papers for security purposes, and the collection, delivery, and handling of legal mail by JTF-Guantánamo staff. The Protective Order requires legal counsel to comply with various security procedures implemented by Commander, JTF-Guantánamo. The Practices Guide contains similar language. The rules in place seek to protect the attorney client privilege, facilitate legal representation of the detainees, facilitate access by the detainees to U.S. Federal Courts, and protect legitimate security interests of JTF-Guantánamo and the United States Government.

Counsel have the opportunity to raise concerns about JTF-Guantánamo's security practices with the SJA and if they cannot reach a satisfactory resolution, challenge such security procedures before courts of competent jurisdiction.
D. Team Analysis. Detainees have access to federal court. Attorneys have access to their detainee clients and the means to seek redress in the event they believe their access is unreasonably curtailed. Detainees who are representing themselves or who otherwise desire to do so, have the ability to access the federal courts. Attorneys have access to their detaineeclients and the means to seek redress for concerns that cannot be resolved locally.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

Strongly recommend:

- Continue JTF-Guantánamo efforts to facilitate attorney-detainee client communications.
- Continue JTF-Guantánamo efforts to provide attorney access to detainee clients.


## Detainees Ordered or Approved for Release

A. Legal/Policy Authority. Common Article 3. Under DoDD 2310.01E, detainees are to be treated humanely and respected as human beings. Additional reference material may be found in GPW (Art. 13, 17, 21, 22), GCC (Art. 27. 30-33, 84), U.S. District Court Order, Boumediene v. Bush, 20 November 2008; Convening Authority Appointment Letter of 9 July 2004; Deputy Secretary of Defense CSRT Implementation Guidance of 14 July 2006. Boumediene v. Bush, 128 S.Ct. 2229 (2008); DEPSECDEF Action Memo 4 August 2008; ASD Action Memo 15 August 2008, and, ASD Action Memo 25 September 2008.
B. Detainee/NGO Input. As a general matter, NGOs have complained about the amount of time it has taken to repatriate individuals who have the status of those currently held in Camp Iguana. They point to the last group of Uighurs who were housed in Camp Iguana for many months before they were transferred to Albania and note that many of the detainees who are there now, have been there since August 2008. Additionally, many commentators have complained about insufficient personal freedoms afforded to those who they say should be free because they believe that, in essence, a judicial determination has been made that these individuals "did nothing wrong."
C. Practice/Implementation. Camp Iguana currently holds two detainees in whose case the U.S. District Court for the District of Columbia ordered the United States "to take all necessary and appropriate diplomatic steps to facilitate [their release]." In addition, Camp Iguana holds one detainee whose CSRT the U.S. Court of Appeals for the D.C. Circuit struck down as invalid and approximately 15 other detainees in whose habeas corpus petitions, the DoD has declined to assert their continued enemy combatant status.

In the case of each of these individuals, the Department of Defense is awaiting successful diplomatic efforts to secure a willing nation to accept the detainees and an agreement from the detainees to go to such nations. In the case of approximately 15 of the detainees in Camp Iguana, there are legitimate concerns that their home nation will mistreat them upon their return. No other acceptable solution has been found for their transfer out of Guantánamo. In the case of several other detainees, the nation to which they would like to be transferred has declined to accept them and they have expressed concerns of mistreatment if they are returned to their home nation.

While JTF-Guantánamo continues to hold these individuals, as diplomatic efforts proceed, it is noteworthy that the detainees have been removed from the detention facilities and placed in Camp Iguana, which essentially is a holding facility (similar to the concept relied upon by Immigrations and Customs Enforcement to detain individuals in the U.S.) for individuals in the categories above awaiting transfer. As described elsewhere in this report, the limitations placed upon detainees' living arrangements, movements, recreation, dining arrangements, access to televisions, access to snacks purchased at the local Navy Exchange, and similar activities are considerably less onerous than is the case in JTF-Guantánamo's detention facilities. The JDG exercises the minimum level of restriction over detainee activities in Camp Iguana practicable, subject to the necessity to maintain good order and discipline within the camp. For example, guards generally do not enter the camp. Detainees establish their own living arrangements
among themselves, decide whether to watch television and what to watch, decide their own recreation schedule, and even decide whether to allow their lawyers into the camp. Security is maintained by guards stationed outside of the camp who stand watch using guard towers, personal observation through chain link fencing, and cameras inside the living quarters.
D. Team Analysis. Individuals in Camp Iguana should be transferred as quickly as possible. In the past-either because they refuse to be transferred to appropriate destination countries, or because no acceptable country has been found to take them-detainees in Camp Iguana have resided there for many months before their transfer. Detainees in Camp Iguana awaiting transfer should be permitted maximum personal freedom, subject to legitimate security measures to maintain good order and discipline within the camp. JTF-Guantánamo has taken steps to institute more personal freedoms within Camp Iguana than exist in any other camps in Guantánamo. If detainees feel that they are entitled to additional freedoms, they have access to guard staff within the camp to whom they may direct complaints. They also have attorneys who have access to the courts to bring complaints in the event issues cannot otherwise be resolved to their satisfaction. Uighur detainees have been residing in Camp Iguana since August 2008. Their frustration at remaining in Camp Iguana is understandably growing as time passes. This puts increasing pressure on the guard staff and other detainees within the camp.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

Strongly recommend:

- Make status determinations and repatriation/transfer of designated detainees a priority including, at minimum, by seeking immediate assistance from the interagency to repatriate/transfer detainees who have been cleared for immediate release in connection with litigation.
- Continue to maximize personal freedoms of Camp Iguana detainees consistent with their status, subject to legitimate security measures required to maintain good order and discipline within the camp.


## Repatriation/Transfer

A. Legal/Policy Authority. Common Article 3. According to DoDD 2310.01E, the ICRC shall be allowed to offer its services to detainees. Available reference material includes GPW (Art. $70-75,78,125,126)$; GCC (Art. 104, 140, 142); and AR 190-8 (1-5, 3-4, 3-5, 3-16, 6-8) which state: ICRC services may be offered in the areas of communication, relief parcels, detainee complaints, and camp administration.
B. Detainee/NGO Input. Consider medical professional options when discussing the repatriation of detainees on humanitarian grounds. When a detainee has been identified for repatriation, keep him informed of the progress of his status. Detainees who are eligible for repatriation are in no way forced to do so; they have the right to refuse, and that right must be explained to them.
C. Practice/Implementation. Detainees have several opportunities to make inputs into the repatriation or transfer process. The JTF SJA meets with the detainee to advise him of the possibility and ask if he has any fear of going to the destination country, then notifies the chain of command. The ICRC will offer each detainee identified for movement an opportunity to talk to them, called an "exit interview." Immediately upon completion of the interview, the ICRC notifies the Department of Defense of the results so that any fears expressed can be reviewed and, when appropriate, acted upon. Finally, a detainee with habeas corpus counsel can, where appropriate, discuss with his attorney (including by phone), efforts to repatriate him and to clarify any concerns he might have. This information is provided to the appropriate authorities for consideration during the repatriation/transfer process. Should there be changes to the transfer schedule of a detainee, the camp authorities advise the detainee and keep him advised of the status of his repatriation/transfer. Finally, the detainee is allowed to take his legal mail and other personal property with him as he departs Guantánamo.

The opinions and recommendations of medical professionals are one factor in decisions about detainee repatriation. During transfer preparations, JTF-Guantánamo medical personnel prepare a detailed narrative medical summary on the identified detainees. A copy of this summary, along with 90 days or more worth of medication (as appropriate), are given to the flight crew of the repatriation aircraft for delivery to receiving government officials. In addition, all detainees leaving Guantánamo are offered a physical exam. This, in part, is to ensure the detainee is able to travel and to identify any special considerations for travel.
D. Team Analysis. Detainees are afforded the opportunity to have an input into the final destination for their repatriation/transfer, through the JTF SJA, the ICRC, and their habeas corpus attorney (where appropriate). Fears expressed by the detainee concerning the repatriation/transfer country are taken under consideration by the U.S. Government, consistent with U.S. treaty obligations. Accountability for the detainee is maintained throughout the process, until he is delivered to the destination country.
E. Findings/Recommendations. Conditions are in compliance with Common Article 3 of the Geneva Conventions. No prohibited acts were found and conditions are humane.

Strongly recommend:

- Continue to solicit detainee input into proposed repatriation/transfer destinations, using all appropriate means.


## Recommend:

- Accelerate negotiation efforts to send those detainees who have been determined to be suitable for transfer or release, who have legitimate fears of persecution, to an appropriate third country.


## Conclusions

I have completed the review directed to determine whether the conditions of detention in Guantánamo Bay, Cuba are "in conformity with applicable laws governing the conditions of confinement, including Common Article 3 to the Geneva Conventions." As a collective result of the efforts of the team that assisted me in this review, it is my judgment that the conditions of confinement in Guantánamo are in conformity with Common Article 3 to the Geneva Conventions and conform to the requirements outlined in the Executive Order.

As discussed in the introductory remarks, there are two components in the scope of the compliance review taken from Common Article 3: the first is the explicit prohibition against specified acts (at any time and in any place). As indicated previously, substantiated evidence of prohibited acts discovered in the course of the review would have warranted a finding of "Noncompliance" with Common Article 3 and resulted in the requirement for immediate corrective action. No prohibited acts were found.

Additionally, determining conformity with Common Article 3 also requires examination of the directive aspect of the Article, this being that "Persons . . . shall in all circumstances be treated humanely." This element of the effort demanded that the team examine conditions of detention from a subjective viewpoint, relying upon their experience and professional backgrounds, informed and challenged by outside commentary. As a result of that effort, I find that conditions of confinement in Guantánamo also meet the directive requirements of Common Article 3 of the Geneva Conventions.

The concept of humane treatment requires the examiner to look at various factors in a continuum to assess whether what is humane today, is or will be humane over a longer period of detention. Treatment must be viewed in the context of specific and relevant circumstances to determine whether it is adequate. While our review has determined that all conditions of confinement are currently in conformity with Common Article 3, our list of recommendations calls attention to those actions that we think will assist USSOUTHCOM in its continuing efforts to enhance humane conditions of detention in Guantánamo.

The Review Team recognized the value of socialization throughout the detention facilities, especially considering the length of time individuals at Guantánamo have been detained. The key to socialization is providing more human-to-human contact, recreation opportunities with several detainees together, intellectual stimulation, and group prayer. Socialization is essential to maintain humane treatment over time.

With regard to detainees held at Camp 7, who are the most limited in their human-to-human contact, the Review Team vigorously urges that additional steps be taken to increase detainee-todetainee contact, and offer them opportunities for group prayer and expanded recreation options, consistent with Commander, USSOUTHCOM initiatives. The conditions in Camp 7 are designed with security in mind, but limit communication and physical interaction between detainees. Detainees are currently limited to recreation with a single partner. In the area of religious practice, the detainees in all other camps are able to conduct group prayer and communal recreation. Allowing a variety of different detainees in groups of three or more to
participate in recreation and prayer together will be a positive step toward greater socialization. In sum, Camp 7 procedures and its physical plan need to be modified in accordance with USSOUTHCOM initiatives in order to increase detainee-to-detainee contact.

Additionally, the Review Team recognized that detainee access to high quality healthcare services is a fundamental aspect of humane treatment that is greatly enhanced by appropriate human-to-human contact and socialization between detainees and healthcare providers. Delivery of quality healthcare requires development of trusting relationships between providers and their patients. Although difficult to achieve in a custodial environment, several actions may serve to facilitate improvements to enhance further the high quality of care delivered to detainees. We recommend expanding detainee access to dedicated linguists to assist with medical evaluation and treatment during evening and weekend hours to enhance detainee trust in the role of medical providers and to improve the quality of medical care. Moreover, we recommend JDG or JMG personnel directly observe and record detainee weights, since weight loss may be an early and sensitive indicator of a developing healthcare problem. Finally, we also recommend implementing policies and training regarding entry of specific medical information into nonmedical databases such as DIMS and JDIMS to support an appropriate level of medical confidentiality.

As detention operations in Guantánamo enter their eighth year, JTF-Guantánamo will continue to require extensive resources. Enhancement of humane treatment, as the operation continues, and as the detainee population spends more time under U.S. control, will also require strengthening of internal controls and continued dedication of both funds and personnel. BSCs are a vital resource for understanding and improving the operational environment. Their ability to provide behavioral analysis has proven effective in identifying developing tensions and recommending options for strategies to improve camp dynamics. We must develop courses of action to ensure the sustainment of the BSCT as a core capability at Guantánamo.

Internal controls are equally critical in maintaining the course established toward improving stability. The JTF must expedite final approval of the draft JTF BSCT SOP and the JIG ICE SOP to reflect current practices at Guantánamo and to ensure that the appropriate firewalls are maintained, including the firewall between healthcare and intelligence. The Review Team also found several additional new actions that involve internal controls. In that regard, we would endorse the use of video recording in all camps and for all interrogations. The use of video recordings to confirm humane treatment and limit disruption of operations from false complaints will be an important enabler for detainee operations. Just as internal controls provide standardization, the use of video recordings would provide the capability to monitor performance and maintain accountability.

The Review Team has also identified several actions that we believe are important to maintaining a humane treatment standard during the period of prolonged detention. The most critical activity in this regard is the improvement in Camp 6 to provide socialization incentives. Camp 4 currently offers the greatest degree of socialization opportunities, including communal living, frequent human-to-human contact, recreation, intellectual stimulation, and religious gatherings, which clearly assisted in management of that camp. The CJDG has recognized this
and is moving quickly to institute greater socialization in Camp 6. It is essential to accelerate the completion of Camp 6 recreation areas and facilities, supporting enhancements for socialization.

The Review Team is convinced that the ability of detainees to understand their future has a direct correlation to detainee behavior and conditions inside the camp population, and will impact the long-term ability to comply with Common Article 3 of the Geneva Conventions. Rising tension and anxiety among the detainees leads to acts of defiance, non-compliance with camp rules, and manifestations of self-harm or attempts to injure or kill camp personnel. Therefore, we recommend seeking immediate assistance through the interagency process to expeditiously determine the detainees' future and take action to repatriate or transfer detainees as appropriate. Increased emphasis in this regard will help the JDG Commander manage the detainee population consistent with Common Article 3 of the Geneva Conventions.

Not knowing when they might depart Guantánamo (for home or elsewhere) has almost certainly increased tension and anxiety within the detainee population. This tension is further exacerbated in one particular population - the Chinese Uighurs. For several years the DoD and the State Department have been struggling to transfer 17 Chinese Uighur detainees from Guantánamo to a suitable third country. Due to U.S. obligations, the U.S. cannot send them back to China. Recent court rulings increased the pressure to move these detainees out of Guantánamo as soon as a suitable third country has been selected.

In addition to the Chinese Uighurs, there are now two additional detainees (Algerian, but captured in Bosnia) that the court has ordered be released from U.S. custody. All these detainees are now housed in Camp Iguana, a holding camp that provides the greatest amount of freedom for the detainees while ensuring continued camp and U.S. naval base security. Despite increased freedoms at Camp Iguana, the detainees there continue to vocally and physically express their extreme frustration with their continued detention at Guantánamo.

Therefore, the Review Team requests that emphasis be placed on providing immediate assistance within the interagency process on where to transfer these detainees (especially those currently housed in Camp Iguana).

## Glossary

A
AHLTA-T
APO
AR
ARB
Army MedCom
Assisting Military Officer

## B

Behavioral Science Consultants

## BHU

BSCT

## C

CAT
CJDG
CJTF
Corpsman
CRT
CSRT

D
DH
DIMS
DMO
DMPC
DoDD
DoDI
DTA

## E

EMR

F
FCE
FM
G

Emergency Medical Response

Forced Cell Extraction
Field Manual
Detention Hospital
Detainee Information Management System
Detainee Movement Operations
Detainee Mail Processing Center
Department of Defense Directive
Department of Defense Instruction
Detainee Treatment Act of 2005
UN Convention Against Torture
Joint Detention Group Commander
Commander, Joint Task Force
Hospital Corpsman (HM) is a rating in the U.S.
Navy and a member of the Navy's Medical Corps
Compliance Review Team
Combatant Status Review Tribunal
Armed Forces Health Longitudinal Technology Application - Theater
Army Postal Office
Army Regulation
Administrative Review Board
Army Medical Command
responsible for meeting with the detainee prior to the Administrative Review Board hearing

Behavioral science experts who provide reports concerning the predictability of violence, threat assessment and personality assessment of a subject
Behavioral Health Unit
Behavioral Science Consultation Team

Detaine Treatment Act of 2005


| GCC | Geneva Convention Relative to the Protection of Civilian Persons in Time of War (Geneva IV) |
| :---: | :---: |
| GPW | Geneva Convention Relative to the Treatment of Prisoners of War (Geneva III) |
| GTMO | Guantánamo Bay |
| GWS | Geneva Convention for the Amelioration of the Condition of the Wounded and Sick in Armed Forces in the Field (Geneva I) |
| H |  |
| Halal Meals | The term is widely used to designate food seen as permissible according to Islamic law. |
| $\underline{\text { I }}$ |  |
| ICE | Intelligence Control Element, |
|  | Or, Immigration and Customs Enforcement |
| ICRC | International Committee of the Red Cross |
| IP | Interrogation Plan |
| IPF | Interrogation Plan Form |
| ISN | Internment Serial Number |
| J |  |
| JDG | Joint Detention Group |
| JDIMS | Joint Detainee Information Management System |
| JIG | Joint Intelligence Group |
| JMG | Joint Medical Group |
| JTF-GTMO | Joint Task Force Guantánamo |
| M |  |
| MCA | Military Commissions Act |
| MMC | Manual for Military Commissions |
| MP | Military Police |
| MPO | Medical Plans Officer |
| $\underline{N}$ |  |
| NCOIC | Non-Commissioned Officer in Charge |
| NGO | Non-Government Organization |
| O |  |
| OIC | Officer in Charge |
| $\underline{P}$ |  |
| Pashtu | (Naskh: بیبنت - IPA: [pa 'to]; alternative spelling: |

Geneva Convention Relative to the Protection of Civilian Persons in Time of War (Geneva IV)
Geneva Convention Relative to the Treatment of Prisoners of War (Geneva III)
Guantánamo Bay
Geneva Convention for the Amelioration of the Condition of the Wounded and Sick in Armed Forces in the Field (Geneva I)

The term is widely used to designate food seen as permissible according to Islamic law.

Intelligence Control Element, Or, Immigration and Customs Enforcement International Committee of the Red Cross Interrogation Plan
Interrogation Plan Form Internment Serial Number

Joint Detention Group
Joint Detainee Information Management System
Joint Intelligence Group
Joint Medical Group
Joint Task Force Guantánamo

Military Commissions Act
Manual for Military Commissions
Military Police
Medical Plans Officer

Non-Commissioned Officer in Charge
Non-Government Organization
(Naskh: צبִنتو - IPA: [pa 'to]; alternative spelling:
(Pakhto, Pushto, Pukhto, Pashtu, or Pushtu), also known as Afghani, is an Indo-European language spoken primarily in Afghanistan and northwestern Pakistan.

PPD

## $\underline{\mathbf{R}}$ <br> Rainbow Chart Code System

Ramadan

RCM
$\underline{S}$
SC

SJA
SMO
SOP

## T

Tafseer
TB
TTP

## $\underline{\mathbf{U}}$

UCMJ
UN

W
WMA

Purified Protein Derivative

Chart code system the JDG/JMG uses to activate its Emergency Response System
A Muslim religious observance that takes place during the ninth month of the Islamic calendar, requiring the faithful to fast from the rising to the setting of the sun every day of the month Red Cross Message

Intelligence Officer
Supreme Court
Or, U.S. Southern Command
Or, Section Chief
Staff Judge Advocate
Senior Medical Officer
Standard Operating Procedures
(aka Tafsir) is the Arabic word for exegesis or commentary, usually of the Qur'an
Tuberculosis
Tactics, Techniques and Procedures

Uniform Code of Military Justice United Nations

World Medical Association

## Bibliography

Authorities

- Executive Order: Review and Disposition of Individuals Detained at the Guantánamo Bay Naval Base and Closure of Detention Facilities, http://www.whitehouse.gov/the press office/Closure Of Guantánamo Detention Facili ties/, January 22, 2009.
- Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT), adopted and opened for signature by General Assembly Resolution 39/40 of December 10, 1984, http://www.unhchr.ch/html/menu3/b/h cat39.htm.
- Rasul v. Bush, 542 U.S. 466 (2004), U.S. Supreme Court
- Hamdi v. Rumsfeld, 542 U.S. 507 (2004), U.S. Supreme Court
- Hamdan v. Rumsfeld, 126 S. Ct. 2749 (2006), U.S. Supreme Court
- Boumediene v. Bush, 553 U.S. (2008)
- Department of Defense Directive 2310.01E, The Department of Defense Detainee Program, http://www.dtic.mil/whs/directives/corres/html/231001.htm, September 5, 2006.
- Department of Defense Directive 3115.09, DoD Intelligence Interrogations, Detainee Debriefings, and Tactical Questioning, http://www.dtic.mil/whs/directives/corres/pdf/311509p.pdf, October 9, 2008.
- FM 2.22-3, Human Intelligence Collector Operations, Headquarters, Department of the Army, http://www.army.mil/institution/armypublicaffairs/pdf/fm2-22-3.pdf, September 2006.
- Department of Defense Instruction 2310.08E, Medical Program Support for Detainee Operations, http://www.dtic.mil/whs/directives/corres/pdf/231008p.pdf, June 6, 2006.
- Memorandum on Amended Policy Guidance on International Committee of the Red Cross (ICRC) Communications, October 5, 2007.
- Policy Memorandum, Application of Common Article 3 of the Geneva Conventions to the Treatment of Detainees in the Department of Defense, July 7, 2006
- Protective Order and Procedures for Counsel Access to Detainees at the United States Naval Base in Guantánamo Bay, Cuba (Protective Order), Judge Joyce Hens Green, 344 F.Supp.2d 174 (D.D.C. 2004), 5 November 2004
- Memorandum, Implementation of Combatant Status Review Tribunal Procedures for Enemy Combatants Detained at U.S. Naval Base Guantánamo Bay, Cuba, Gordon R. England, 14 July 2006
- Memorandum, Order Establishing Combatant Status Review Tribunal, Paul Wolfowitz, 7 July 2004
- Memorandum, Clarification of Intelligence Interrogation Policy—Detainee Status Determinations and the Conduct of Interrogations during Segregation and Separation, James R. Clapper, Jr., 20 Sep 2007.

References

- Geneva Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW), http://www.icrc.org/ihl.nsf/7c4d08d9b287a42141256739003e63bb/6fef854a3517b75ac1 25641e004a9e68.
- Geneva Convention Relative to the Protection of Civilian persons in Time of War of August 12, 1949 (GCC), http://www.icrc.org/ihl.nsf/FULL/380? OpenDocument.
- AR 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, http://www.army.mil/usapa/epubs/pdf/r190_8.pdf, October 1, 1997.
- FM 3-19.40, Internment/Resettlement Operations, http://www.army.mil/usapa/doctrine/19 Series Collection 1.html, September 4, 2007.
- AR15-6, Investigation into FBI Allegations of Detainee Abuse at Guantánamo Bay, Cuba Detention Facility (Final Report), www.defenselink.mil/news/Jul2005/d20050714report.pdf , 1 April 2005 (Amended 9 June 2005)
- Code of Federal Regulations, Title 28 Judicial Administration, Chapter V Bureau of Prisons, Subchapter C Institutional Management, Part 549 Medical Services, http://ecfr.gpoaccess.gov/cgi/t/text/textidx?c=ecfr\&tpl=/ecfrbrowse/Title28/28cfr549_main_02.tplDetainee Treatment Act of 2005 (Sections 1002-1005)
- Body of Principles for the Protection of All Persons under Any Form of Detention or Imprisonment, Adopted by General Assembly resolution 43/173 of 9 December 1988
- Standard Minimum Rules for the Treatment of Prisoners, Adopted by the First United Nations Congress on the Prevention of Crime and the Treatment of Offenders, held at Geneva in 1955, and approved by the Economic and Social Council by its resolution 663 C (XXIV) of 31 July 1957 and 2076 (LXII) of 13 May 1977
- Joint Detention Group (JGD) Standard Operating Procedure (SOP)
- Joint Task Force Guantánamo (JTF-GTMO) Standard Operating Procedure (SOP)
- JTF-Guantánamo Joint Medical Group Standard Operating Procedure (SOP)
- JTF-Guantánamo Joint Interrogation Group (JIG) Intelligence Collection Element (ICE) Standard Operating Procedure (SOP)
- JTF-Guantánamo Memorandum, Military Commissions Counsel Visitation of Detainees Practices Guide (Practices Guide), 19 May 2008
- Memorandum on Behavioral Science Consultation Policy from Headquarters, U.S. Army Medical Command, October 20, 2006.
- Sondra S. Crosby; Caroline M. Apovian; Michael A. Grodin, Hunger Strikes, Forcefeeding, and Physicians' Responsibilities, JAMA, August 1, 2007; 298: 563-566.
- DoD Designated Civilian Official (DCO) Memorandum, Implementation of Administrative Review Procedures for Enemy Combatants Detained at U.S. Naval Base Guantánamo Bay, Cuba, of 14 September 2004
- Deputy Secretary of Defense Memorandum, Implementation of Combatant Status Review Tribunal Procedures for Enemy Combatants Detained at U.S. Navy Base Guantánamo Bay, Cuba, of 14 July 2006
- Deputy Secretary of Defense Memorandum, Order Establishing Combatant Status Review Tribunal, 7 Jul 2004
- USSOUTHCOM Inspector General inspection results, Inspection of JTF-Guantánamo, 59 May 2008
- USSOUTHCOM Inspector General inspection results, Inspection of JTF-Guantánamo , 9-15 September 2007
- USSOUTHCOM Unannounced Periodic Inspection Report for Detainee Camps, period of inspection: 10-12 July 2008
- USSOUTHCOM Unannounced Periodic Inspection Report for Detainee Camps, period of inspection: 10 December 2007
- USSOUTHCOM Unannounced Periodic Inspection Report for Detainee Camps, period of inspection: 07 August 2007
- USSOUTHCOM Unannounced Periodic Inspection Report for Detainee Camps, period of inspection: 21 May 2007

External input

- Letter from ACLU, Amnesty International, Human Rights First and Human Rights Watch to President Obama, http://www.aclu.org/pdfs/safefree/coalitionlettertoobama.pdf, January 30, 2009.
- Locked Up Alone: Detention Conditions and Mental Health at Guantánamo, Human Rights Watch, http://www.hrw.org/sites/default/files/reports/us0608 1.pdf, June 9, 2008.
- Cruel and Inhuman: conditions of isolation for detainees at Guantánamo Bay, Amnesty International, http://www.amnestyusa.org/document.php?id=ENGAMR510512007\&lang=e, May 4, 2007.
- Letter from ACLU Human Rights Program Director J. Dakwar to Secretary of Defense R. Gates, January 9, 2009.
- Letter from ACLU Executive Director A.D. Romero to ASD J.A. Benkert, February 6, 2009.
- Letter from Amnesty International Executive Director L. Cox to DASD(DA) S. Hodgkinson and ODA Principal Director A. Liotta, February 6, 2009.
- Letter from Human Rights First CEO E. Massimino to ASD J. Benkert, February 6, 2009.
- Guantánamo and its Aftermath: U.S. Detention and Interrogation Practices and their Impact on Former Detainees, Human Rights Center, U.C. Berkeley, International Human Rights Clinic, U.C. Berkeley, Center for Constitutional Rights, http://hrc.berkeley.edu/pdfs/Gtmo-Aftermath.pdf, November 12, 2008.
- Situation of Detainees at Guantánamo Bay: Report of the Chairperson-Rapporteur of the Working Group on Arbitrary Detention, United Nations Economic and Social Council, http://daccessdds.un.org/doc/UNDOC/GEN/G06/112/76/PDF/G0611276.pdf, February 27, 2006.
- Standard Minimum Rules for the Treatment of Prisoners, First United Nations Congress on the Prevention of Crime and the Treatment of Offenders, held at Geneva in 1955, and approved by the Economic and Social Council by its resolution 663 C (XXIV) of 31 July 1957 and 2076 (LXII) of 13 May 1977.
- Abuse of Iraqi POWs by GIs Probed, 60 Minutes II, Rebecca Leung, April 28, 2004, www.cbsnews.com/stories/2004/04/27/60II/main614063.shtml
- Jamie Mayerfeld, "Playing by Our Own Rules: How U.S. Marginalization of International Human Rights Law Led to Torture," Harvard Human Rights Journal, Spring 2007, 20 Harv. Hum. Rts. J. 89.
- Report of the American Psychological Association Presidential Task Force on Psychological Ethics and National Security, June 2005.
- Report of the Council on Ethical and Judicial Affairs, CEJA 10-A-06, Physician Participation in Interrogation, 2006.
- The World Medical Association Policy, October 2006, http://www.wma.net/e/policy/h31.htm,
- World Medical Association Declaration on Hunger Strikers, Adopted by the 43rd World Medical Assembly Malta, November 1991 and editorially revised at the 44th World Medical Assembly Marbella, Spain, September 1992 and revised by the WMA General Assembly, Pilanesberg, South Africa, October 2006
- Military Medical Ethics- Physician First, Last, Always, George J. Annas, J.D., M.P.H, Boston School of Public Health, Department of Health Law, Bioethics \& Human Rights, 11 Aug 2008, New England Journal of Medicine
- The Istanbul Statement on the Use and Effects of Solitary Confinement, adopted on 9 December 2007 at the International Psychological Trauma Symposium, Istanbul, as reported in TORTURE Volume 18, Number 1, 2008.
- Report of the APA Presidential Advisory Group on the Implementation of the Petition Resolution, American Psychologist Association Council of Representatives, December 2008
- Report of the APA Presidential Advisory Group on the Implementation of the Petition Resolution Elena J Eisman, Ed.D.,ABPP; Armand R Cerbone, Ph.D. et al, December 2008
- Program Statement \# P5566.06, Use of Force and Application of Restraints, Harley G Lappin, U.S. Department of Justice, Federal Bureau of Prisons, 30 November 2005
- Program Statement \# P6031.01, Patient Care, Harley G Lappin, U.S. Department of Justice, Federal Bureau of Prisons, 15 January 2005
- Program Statement \# P6010.01, Administrative Safeguards for Psychiatric Treatment and Medication, Kathleen M Hawk, U.S. Department of Justice, Federal Bureau of Prisons, 21 September 1995 (Effective 25 September 1995)
- Program Statement \# P 5562.05, Hunger Strikes, Harley G Lappin, U.S. Department of Justice, Federal Bureau of Prisons, 29 July 2005

Previous reports

- Church Report, 25 May 2004, Vice Admiral Albert T. Church III, http://www.defenselink.mil/news/Mar2005/d20050310exe.pdf
- Investigation into FBI Allegations of Detainee Abuse at Guantánamo Bay, Cuba Detention Facility, Schmidt-Furlow Report, 1 April 05, as amended 9 Jun 05, http://www.defenselink.mil/news/Jul2005/d20050714report.pdf


[^0]:    ${ }^{1}$ Text of Common Article 3 is attached at Appendix 1.

[^1]:    ${ }^{2}$ Executive Order of 22 Jan 2009, Review and Disposition of Individuals Detained at the Guantánamo Bay Naval Base and Closure of Detention Facilities. See Appendix 2.
    ${ }^{3}$ SECDEF Memorandum, Review of Department Compliance with President's Executive Order on Detainee Conditions of Confinement, dated 2 Feb 2009. See Appendix 3.
    ${ }^{4}$ Team consisted of ADM Patrick Walsh, USN, Vice Chief of Naval Operations and representatives from: OSD Office of Detainee Affairs; OASD Health Affairs; Joint Staff Detainee Affairs, Health Services Support Division, and Office of Legal Counsel; Office of the Chief of Naval Operations; Department of the Army Office of the Judge Advocate General; Department of the Navy Office of the Judge Advocate General; Army Corrections Command; and HQ USSOUTHCOM.

[^2]:    ${ }^{5}$ The team's recommendations are divided between those of particular importance, which are indicated by the phrase, "strongly recommend," and those recommendations we deem important, but are of lesser priority.

[^3]:    ${ }^{6}$ See Appendix 4, Compliance Review Team activity log.

[^4]:    ${ }^{7}$ See Appendices 5 through 11. See also attached Bibliography for additional external community input considered.

[^5]:    ${ }^{8}$ More than 10 detainees in Camp 4 attacked an FCE team using various items (e.g., pieces of large floor fans). Guards were forced to use non-lethal weapons for the first and only time in the history of detention operations in Guantánamo to quell the riot, protect themselves, and escape from the detainees.

[^6]:    ${ }^{9}$ Three detainees committed suicide by hanging in Camp 1 during the evening hours of 9 and 10 June 2006.

[^7]:    ${ }^{10}$ See Appendix 12, Figures 12-1 through 12-6.
    ${ }^{11}$ See Appendix 12, Figure 12-7.
    ${ }^{12}$ See Appendix 12, Figure 12-8.

[^8]:    ${ }^{13}$ Camp X-Ray in 2002 and in 2008 is depicted in photos attached at Appendix 12, Figures 0-1 and 0-2.
    ${ }^{15}$ See Appendix 12, Figures 1-1 through 1-9.
    ${ }^{15}$ See Appendix 12, Figures 2-1 through 2-7.

[^9]:    ${ }^{16}$ See Appendix 12, Figures 3-1 through 3-4.
    ${ }^{17}$ See Appendix 12, Figures 4-1 through 4-5.
    ${ }^{18}$ See Appendix 12, Figures 5-1 through 5-3.
    ${ }^{19}$ See Appendix 12, Figures 6-1 through 6-9.

[^10]:    ${ }^{20}$ See Appendix 12, Figures 1-1, 1-9, 2-7, 3-1, 3-4, 4-1, 4-3, 5-2, and 6-2.
    ${ }^{21}$ See Appendix 12, Figures 7-1, 7-5 through 7-7, 7-9, and 7-11.

[^11]:    ${ }^{22}$ See Appendix 12, Figures 7-1, 7-5 through 7-9, 7-11, and 7-12.

[^12]:    ${ }^{23}$ See Appendix 12, Figures 8-1 through 8-5.
    ${ }^{24}$ Possible outcomes are Satisfactory and Unsatisfactory.

[^13]:    ${ }^{25}$ See Appendix 12, Figures 7-2, 7-5 through 7-9, and 7-12.

[^14]:    ${ }^{26}$ The team reviewed a sampling of disciplinary records of guards disrupting prayer. Of those, MPI investigated and found two substantiated. One guard was given a written reprimand, and the other an oral reprimand.

[^15]:    ${ }^{27}$ See Appendix 12, Figures 2-2, 2-4 through 2-6, 2-8, 6-5, 6-7 through 6-9.
    ${ }^{28}$ See Appendix 12, Figures 1-3, 1-7, 1-8, 3-2, 3-3, 4-2, and 5-3.
    ${ }^{29}$ See Appendix 12, Figures 4-4 through 4-6.

[^16]:    ${ }^{30}$ For one example, see Appendix 12, Figure 9-1.

[^17]:    ${ }^{31}$ Currently, there is no policy in place to address serious misconduct, such as aggravated assault. Although extraterritorial criminal jurisdiction is available for serious assaults, under 18 USC§ 113, policy limitations have prohibited exercise of that jurisdiction because it requires transfer of the detainee to the United States to stand trial.

[^18]:    ${ }^{32}$ See Appendix 12, Figures 10-1 through 10-10.

[^19]:    ${ }^{33}$ For example, three individuals were counseled and given additional training, while one sergeant was relieved from duty for a minor SOP violation. The guard who was counseled for inappropriate use of OC pepper spray had already been assaulted twice that day and was anticipating a third assault, when he preemptively used OC on the detainee.

[^20]:    ${ }^{34}$ Of the MPI cases reviewed, the majority were allegations of excessive use of force. Of claims of excessive use of force in FCEs or shackling, discussed below, none were substantiated. Of the other claims, only a handful were substantiated for minor violations; guard force personnel received administrative punishment or non-judicial punishment.

[^21]:    ${ }^{35}$ For example, the team received a complaint from a detainee that he had been severely beaten during an FCE six weeks ago. The JDG provided a video tape of the FCE, which showed no evidence of excessive force. On the contrary, the detainee had assaulted the guard force, leaping across the room to attack the guards when they placed him back in his cell. The FCE team subdued the detainee again with the minimum amount of force necessary. Investigation into his medical status revealed no broken bones, injuries to the thigh, or dislocated fingers (as he claimed). And allegations associated with FCE efforts have been repeatedly refuted with comprehensive video

[^22]:    ${ }^{36}$ Of several allegations of excessive use of force with regard to shackling that the team looked at, none was found to be substantiated by appropriate investigations conducted by the JDG.

[^23]:    ${ }^{37}$ Commander, USSOUTHCOM has consistently sought to maximize socialization and intellectual stimulation during the time detainees have been held in Camp 7.

[^24]:    ${ }^{38}$ For a photo of a telephone room, see Appendix 12, Figure 11-1.

[^25]:    ${ }^{39}$ Several guards interviewed did not recall ever using full strip search, even with the most uncooperative detainees.
    ${ }^{40}$ Of 20 allegations obscene gestures, derogatory comments, or inappropriate conduct with detainees investigated that we looked at, 14 allegations of comments or gestures were substantiated. Five received NJP, four received a reprimand, and five received a verbal reprimand, according to staff disciplinary records.
    ${ }^{41}$ Guard mount training is conducted adjacent to each camp, prior to each shift, for up to an hour.

[^26]:    ${ }^{42}$ For photos of medical facilities inside Camps 5 and 6, see Appendix 12, Figures 12-7 and 12-8.
    ${ }^{43}$ There are approximately 3400 block sick call visits per year on average. The JMG has completed an average of 1400 routine appointments per year and there have been over 400 medical and dental surgeries and 6500 dental appointments since commencement of detention operations in Guantánamo.

[^27]:    ${ }^{44}$ Over the past year, there have been over 50 consults requested for various specialties, including dermatology; urology; cardiology; prosthetics services; neurology; radiology; prosthodontics; ear, nose and throat; and gastroenterology consultants to name a few.
    ${ }_{45}^{45}$ For photos of Detention Hospital facilities, see Appendix 12, Figures 12-1 through 12-6.
    ${ }^{46}$ The staff averages $100-120$ visits per week including preventive screenings within the camps.

[^28]:    ${ }^{47}$ The Detainee Hospital stores detainee medical records for Camps 1-6, Echo and Iguana in the Medical Administration Bldg within locked file cabinets. The outside door is equipped with a cipher lock. Active records for Camps 1-4 and Iguana are located at the nursing station in the Detention Hospital within a secured area. Active medical records for Camp 5, 6 and Echo are kept in the nursing office in Camp 6. It is secured when not manned. Active medical records for Camp 7 are kept in Camp 7 medical clinic.

[^29]:    ${ }^{48}$ Detainee Information Management System (DIMS) is a web-based intranet application running on a dedicated and isolated server. It provides real time visibility to all essential elements of information needed for detention operation. It can include general requests for medical personnel, but should not include specific medical information.
    49 Joint Detainee Information Management System (JDIMS) is an information management tool controlled by the Joint Intelligence Group (JIG), developed and used primarily to support interrogations. Information stored on this database includes interrogation reports, intelligence messages, intelligence reports, analyst products, and periodic detainee assessments by DoD and other U.S. Government organizations, such as the U.S. Army Criminal Investigation Task Force (CITF).

[^30]:    ${ }^{50}$ Enteral feeding is the process of providing nutritional support for a patient by passing a tube through the nose into the stomach (a nasogastric feeding tube), through which nutritional supplements, such as Ensure Plus or Boost Plus, can be infused. This is a common medical procedure used to safely provide nutrition to a patient who is not taking food by mouth, but whose intestinal function is intact (e.g., a patient whose jaw is wired shut). The nasogastric tube used is size 10 or 12 French, which would be $3.5-4.5$ millimeters in diameter (slightly larger in diameter than a piece of cooked spaghetti but less than a pencil eraser). The tube should be well lubricated (viscous lidocaine should be offered, but some patients prefer other lubricants). After insertion of the tube, its placement in the stomach is confirmed prior to allowing the nutritional supplement to flow in from a hanging bag by gravity. This procedure usually takes about an hour, after which the feeding tube is removed. Once stabilized, most patients can be sustained on two feedings per day. For a photo of a typical enteral feeding kit, see Appendix 12, Figure 13-1.
    ${ }^{51}$ See Appendix 12, Figure 13-2.
    ${ }^{52}$ Medical staff reports that similar accommodations are made for other detainees as clinically indicated. Photo at Appendix 12, Figure 13-4.
    ${ }^{53}$ For an example of a chair with head restraints, see Appendix 12, Figure 13-3.
    ${ }^{54}$ The JMG SOP, which guides cleaning requirements for feeding tubes, has been reviewed and approved by the Infection Control Officer. Per manufacturer guidelines tubes may not be used for more than 14 days and are always used for only one detainee.

