From: To: Cc:

Bcc: Subject:

'RDG Tasking for IC Psychologists Jessen and Mitchell

Date: 6/16/2003 4:54:32 PM

My comments are highlighted in yellow. They can be summarized as:

1) contractor activities should not interfere with or supplant the ongoing activities of staff psychologists/psychiatrists

2) we need to distinguish between standards of conduct and othical standards for psychologists - Jim and Bruce can make a contribution in the former area, but mechanisms already exist for monitoring the ethical conduct psychologists

3) Jim and Bruce should not be involved in establishing the credentials for HVT psychologists

 any resurrection of a resistance to interrogation program should be done with the oversight of OMS

5) we are the resident experts in personnel selection - we would welcome the input of Jim and Bruce as we go about our jobs

6) we value their input but they should not be in charge of anything - any reporting they do should be reviewed by

As you are aware, RDG has assumed operational control of the IC psychologists Bruce Jessen and Jim Mitchell. We have an agreement with OTS on the use of the ICs that runs as follows: 'RDG decides when, where, and for how long they deploy, and in what capacity. The ICs agree to this arrangement—indeed, they welcome it—and have pledged to do whatever they can to help us on our missions. As part of the arrangement, we are going to transition them from their previous interrogator role to "strategic consulting" tasks that fit their academic backgrounds, capabilities, and practical and professsional experience as psychologists.

have had long discussions with the ICs and believe they have much value to add to our programs. Toward that end, we have crafted a draft to guide the transition to this new strategic role. We believe this role is more in 1 ne with their IC status.

Because OMS has an excellent staff of psychologists whom we rely on heavily, we solicit your comments on the taskings listed below.

In crafting this list of tasks for the two ICs, we have identified projects that they have direct experience doing for other customers (e.g. DoD), those that relate directly to their skill sets, and those that leverage their personal experience since joining the CIA (the AX transition).

Immediate Project requirement: Jim and Bruce (J&B) will deploy to
to serve as psychologists. There they will conduct a full
psychological review of the HVTs with a view to recommending specific steps we
need to take to prepare the HVTs for the transition to the Endgame Facility at
Guantanamo.

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1/14/2016 1:30 PM

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-- They will begin this effort with Abu Zubaydah, whom they know better than all other HVT personnel. AZ also has been in our control the longest. From the results of their discussions with AZ, J&B will recommend a plan-including specific steps--fo our use in preparing all the HVTs psychologically for the relocation to Guantanamo for long-term detention. Because the confinement of all the HVTs has been on an indeterminate basis--none, including AZ, knows what will become of them--the transition process is extremely tricky.

The objective of this transition program is to provide appropriate structure and meaning to the life of the HVT, all of whom are young and will be confined for the rest of their natural lives, and to ensure that they can be productive intelligence "assets" of CIA for the long-term.

-- Among the issues Jim and Bruce will make recommendations on arc: what are the key occupational, recreational, intellectual, medical, and psychological variables we must consider in the transition of each HVT to GTMO? How do these variables affect intelligence collections and facility security? For example, should we allow HVTs to communicate with each other? How much time outside of isolation is valid? How much external stimuli is appropriate, and what kinds?

Jim and Bruce have the skills to examine these issues systematically and some up with reasonable recommendations. Any data collected by them from detainees with whom they previously interacted as interrogators will always be suspect, however. The project would be better served if our folks did the assessments (particularly since psychiatric assessments might be useful in soem cases) and Jim and Bruce focussed on external data collection.

General Project Work Plan: Per our discussions with J&B, they will work principally as strategic consultants to the HVTI and associated Facilities and Support programs of ROG. As such, primary duties will include:

- -- Give written recommendations and oral presentations on program procedures, methods, and training (see specifics below).
- -- As senior HVTI cadre members and psychologists, deploy to our sites to mentor, review, and provide feedback to management on program development and plans.
- -- During their deployments to our sites, serve as needed as psychologists on the HVTI team.
- -- On site, advise and consult the senior NVTI interrogator and COB as needed.
- -- When available, participate in both the HVT debriefing and interrogator courses as needed.
- -- Advise and consult on the design and use of RDG's training, black sites, and long-term detention facilities
- -- if absolutely necessary to mission, serve as HVT interrogators and/or mentor junior HVT interrogators.

Consultations regarding program development also seem to be appropriate for our consultants, although their expertise in training interrogators seems to have escaped me up until now. My greatest concern in this area is the likelihood of Jim and Bruce ignoring or interfering with our on-site psychologists when they are deployed. Although these guys believe that their way is the only way, there should be an effort to define roles and responsibilities before their arrogance and narcissism evolve into unproductive conflict in the field. It may be helpful for CTC to meet jointly with Jim/Bruce (Do they ever do anything independently?) and our traveling roadshow.

Specific Projects:

1) Draft Code of Ethics/Standards - J&B will get with

2 of 4

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1/14/2016 1:30 PM

and get his input and on-the-shelf ethics code. They will then adapt an interrogator-specific draft set for us. We have identified this as a major gap in our program based on our J&B recommend that we then all sit down and discuss

~- As part of this effort, J&B also will draft a mission statement based on their knowledge of the program (part of which is already contained in the following project proposal).

The use of the term ethics is likely to continue to contribute to confusion. If we have adopted the SERE model, then Jim and Bruce are in a position to facilitate the development of standards of conduct for our program. Special ethical standards for psychologists are unnecessary - our professional responsibilities are clearly articulated by our own code of ethics. We may want to develop examples of how those ethical principles apply in this unique line of work, but this is matter best handled by our cadre of operational psychologists. Jim and Bob have both shown blatant disregard for the ethics shared by almost all of their colleagues. They also used discussions of standards and ethics to limit our participation in this line of work. We have an ethics committee within and they are qualified to monitor any issue that might arrise.

- 2) Project Proposal (see copy separately provided) Baseline psychological review of our interrogation and debriefing tactics, techniques and procedures currently in use with the goal of evaluating, revising, and refining as needed. Also, review potential interrogation and debriefing tactics, techniques and procedures NOT in use by us and evaluate/recommend development and validation of new/modified procedures.
- -- Bottom-line is that this project is intended to identify ways to achieve effective psychological coercive impact on the HVT through application of less invasive physical means--the major thrust of our program since its inception. A refined set of methods/tactics/procedures should further lower the risks of unintended psychological or physical horm to HVT and also lower the strain on HVTI cadre. The project demonstrates our recognition of the need for due diligence in our program and, most important, will result in more productive, efficient intelligence collection.
- -- As part of this project, J&B propose meeting with a senicr psychologist/academic counterpart.

. Without specifying what they are doing for us, J&B want to elicit info on latest developments efforts in the psychology/interrogation field. approve a trip by J&B to meet to acomplish this task.

All worthy goals - hope they enjoy their trip(s)

myopic view of the interrogation process doesn't come back to haunt us. We seem to be wedded exclusively to the military model and not even exploring what the law enforcement community may have to offer. It's hard for me to imagine that these guys can function with even a modicum of objectivity as researchers. I would just encourage a broader approach to the problem.

3) As part of (2) above, draft a separate paper aimed at helping interrogators and dobriefers gain a practical understanding of how human memory works. This will help people understand why HVTs--like "normal" humans--don't recall everything the intel "model" says they should.

4) Draft Protocols on How to Conduct Training/How to Execute Interrogations in the Field - Following baseline review of our documentation, training manuals, procedures, J&B will develop draft papers on how we should train interrogators, using their knowledge of JPRA, Tait, and and how we execute what we train in the field, from the planning of the interrogation to the execution and transition to debriefing. Objective is to create a formal

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1/14/2016 1:30 PM

3 of 4

framework that senior interrogators can use to train, monitor, evaluate, and provide feedback to trainees and novice interrogators. To carry out the project, J&B will need to observe our candidates in action (as psychologists and HVT cadre members).

- -- As part of this, J&B will bring us what JPRA documentation/procedures they have on hand (much of which Bruce drafted).
- -- Major element of this effort will be to train our senior BVT instructors on how to recognize and correct "drift" in the interrogation process.
- 5) J&B will conduct a review of JPRA training and exercises to recommend a list of procedures, methods, and best practices they believe we can incorporate and/or adapt in our program.
- -- in doing this, they will assess the value-added of exposing our HVTI cadre to the physical/psychological pressures applied to students at JPRA. and C/RDG hypothesis is that our program must incorporate such exposures for our interrogators and psychologists to be able to assess accurately the reactions/psychological state of HVTs undergoing enhance interrogation measures.
- 6) Draft a CONOP for developing organic interrogation/counter-interrogations training modules. They will tailor this to help us map out options for establishing an autonomous Directorate of Operations/CIA capability. We will use the conop produced to assess the value of in-house training capabilities and programs for DO officers

  and other CIA personnel who may need it.

If we are talking about reinventing a resistance to interrogation program, we have the internal expertise (complete with substantive and historical knowledge) to accomplish the task. We are not training military personnel at risk of being wrapped up during military missions. Wholesale adoption of the Jim and Bruce show just isn't appropriate.

7) Interrogator Candidate Selection Criteria - develop a set of psychological criteria we can use to screen candidates as well as apply to evaluate certified interrogators.

We welcome their input, but personnel selection is a clearly defined responsibility of . We also are quite competent to do the type of job analysis essential to the development of a successful program. We've actually done this a few time!

P.S. The 1000 meeting on 16 June will be in -RDG's new space (we are your neighbors now, so there goes the neighborhood

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From: To:
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Subject: Re: RDG Tasking for IC Psychologists Jessen and Mitchell

Date: 6/20/2003 2:19:53 PM

 $\,$  – Here are our comments on the possible taskings for the IC psychologists.

 Realizing that the IC's are already en route to to begin a pre-Guantanamo assessment of the detainess, we're still concerned that they are

not the right candidates for that particular task—and that for several reasons  $\cdot$ 

we may want to send someone else later. So far as we're aware, their expertise

in assessing folks for long term incarceration is very limited. Interviewing those who return from relatively short-duration detentions is not likely very relevant to what our detainees will be facing. If it is the best we have, then

we again suggest is probably a better candidate. A psychiatrist, he certainly has debriefed more released hostages than the two ICs combined, and doesn't have the baggage of having applied enhanced measures. Even though

the ICs are very bright folks who have made an effort to forge a positive relationship with their subjects, no professional in the field would credit their later judgements as psychologists assessing the subjects of their enhanced measures. They could be right on target, but if some untoward outcome

is later to be explained, their sole use in this role will be indefensible. There is just too much extraneous at play--with both AZ wanting to be friends so as not to return to the former situation, and the psychologists wanting to be friends so that bygones are bygones--to view even a correct assessment as valid.

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2) In terms of program development, the ICs clearly have experience that will

be useful to many individuals, mostly drawn from their SERE days. While they have more exposure to our current situation than others, this is largely related to an interrogation scenario that will probably not often be repeated.

As others gain more current, more relevant experience, their input will be less

useful--so it will be important that (egos notwithstanding) they are not encouraged to think their experience sets them above anyone else. As IC's they

should only be consultants, on request.

3) The ethics tasking, as we discussed, needs to be clarified. We think the ICs have much to offer in the area of standards of conduct in our program--both

for interrogators and psychologists, primarily drawn from the established standards of the SERE program. That is different from "ethics," per se, which

among other things would relate to blending the roles of interrogator and psychologist. Since a major ethics issue for psychologists will be exactly the

legitimacy of blending these roles (or alternating between them), it will be important that someone other than these two ICs handle that task. They already

occupy an extraordinarily minority position on this (and one contrary to SERE practice), and will simply have no credibility among staff psychologists. The

ethics part actually is straightforward, and the existing code of ethics already address this in clear terms. So, we are left here with tasking on standards of conduct--still a very important assignment.

4) We enthusiastically endorse the proposal that the ICs undertake a baseline

review of the interrogation and debriefing tactics, techniques and procedures currently underway. I would make this their first priority, and even expand the assignment beyond your description—to look at non-miliraty models and really look at measurable outcomes within our own experience.

5) The paper on how memory works also is a good project.

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6) Collecting information on how similar programs are run, and making recommendations for our program is also worthwhile. Having them play central roles in designing and overseeing our program is probably inappropriate, since

this will be the reinvention of a program on which there is substantial internal expertise and historical knowledge. And this is particularly the case

in the area of personnel selection, where we have a wealth of experience. We would welcome informed suggestions, but think this is distinctively an internal staff responsibility.

So, in sum, we think the ICs greatest potential contribution will be in the studies in paras 4-5 above, that a circumscribed role in the paras 3 and 6 tasking has some merit, but that the range of tasks in para 1 are inappropriate

for a combination of reasons.

Final point of concern. One of our RMOs just returned from several days observing the Ft. Bragg SERE course. He learned from the senior SERE psychologist there—who has spoken to our assembled staff in the past and knew

this was an Agency doctor--that the two ICs told him that we were using the waterboard and other enhanced measures on our detainees. We've been extremely

careful in our very limited conversations with SERE folks to say our interest in these techniques related only to evaluating them for possible use within a training program, and are confident that was CTC's guidance also. I hope these

folks are not promoting their importance among their colleagues by inappropriate disclosures; you may want to check with them.

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