

**Medical Officer / Preventive Medical Officer**

**INTERVIEW QUESTIONS**

101

Rank ES-69 Branch 91W FSB Date 22 Mar Unit 426 FSB  
 Duty Position 91W How Long in Job 18 mos  
 How Long in Current MOS 3 1/2 - 17 Interviewer [REDACTED] (5)(6)-2  
 How long have you been in Country 1 yr.

1. What medical requirements in support of the detainee program were identified in the medical annexes of relevant OPLANs, OPORDs, and other contingency planning documents? What identified requirements were actually allocated? What procedures were specified in these documents? **(Collect theater/local policies, SOPs, etc)** (1.1, 1.2, 2.1, 4.1) AR 190-8, paragraph 1-4 g (6): Combatant Commanders, Task Force Commanders and Joint Task Force Commanders will identify requirements and allocations for Army Medical units in support of the EPW, CI and RP Program, and ensure that the medical annex of OPLANs, OPORDs and contingency plans includes procedures for treatment of EPW, CI, RP, and ODs. Medical support will specifically include: (a) First aid and all sanitary aspects of food service including provisions for potable water, pest management, and entomological support. (b) Preventive medicine. (c) Professional medical services and medical supply. (d) Reviewing, recommending, and coordinating the use and assignment of medically trained EPW, CI, RP and OD personnel and medical material. (e) Establishing policy for medical repatriation of EPW, CI and RP and monitoring the actions of the Mixed Medical Commission.

FM 8-10, same core as for US troops

Pdcs for treating pts from DIVS/RG - 3 rules in - EPWs/CI's

2. What training, specific to detainee medical operations, did you receive prior to this deployment? What training have you received during this deployment? (1.4) DoDD 2310.1: The U.S. Military Services shall be given the necessary training to ensure they have knowledge of their obligations under the Geneva Conventions (references (b) through (e)) and as required by DoD Directive 5100.77 (reference (f)) before an assignment to a foreign area where capture or detention of enemy personnel is possible.) AR 350-1, para 4-14 c (2) and table G-1 Refresher training, dated 9 April 2003: Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit. DoDD 5100.77, para 5.5.1: The Secretaries of the Military Departments shall provide directives, publications, instructions, and training so that the principles and rules of law of war will be known to members of their respective Departments, the extent of such knowledge to be commensurate with each individual's duties and responsibilities.

Search classes, EPW brief - restraining, defense, trading  
side. Before (Kuwait) 3 once during. Trained new  
replacements (indiv. level).

3. What are the minimum medical care and field sanitation standards for collection points/internment facilities? What have you observed when detainees are received at collection points/internment facilities? **(Describe the process)** (1.2, 1.4, 1.8) AR 190-8, paragraph 2-1 a (1) (e): Prisoners will be humanely evacuated from the combat zone and into appropriate channels as quickly as possible. . . . The capturing unit may keep prisoners in the combat zone in cases where, due to wounds or sickness, prompt evacuation would be more dangerous to their survival than

retention in the combat zone. Para 3-2 b: Prisoners will not normally be interned in unhealthy areas, or where the climate proves to be injurious to them. Transit camps or collecting points will operate under conditions similar to those prescribed for permanent prisoner of war camps, and the prisoners will receive the same treatment as in permanent EPW camps. Para 3-3 (3): Provide prisoners with humane treatment, health and welfare items, quarters, food, clothing, and medical care. Health Service Command (HSC) provides medical and dental care for EPW in federal or civilian health care facilities per HSC plans. (13) Provide the initial medical examination and monthly screening of prisoners. **AR 190-8, paragraph 3-4 e: EPW/RP will be quartered under conditions as favorable as those for the force of the detaining power billeted in the same area.** The conditions shall make allowance for the habits and customs of the prisoners and shall in no case be prejudicial to their health. The forgoing shall apply in particular to the dormitories of EPW/RP as it regards both total surface and minimum cubic space and the general installation of bedding and blankets. Quarters furnished to EPW/RP must be protected from dampness, must be adequately lit and heated (particularly between dusk and lights-out), and must have adequate precautions taken against the dangers of fire. In camps accommodating both sexes, EPW/RP will be provided with separate facilities for women. When possible consult the preventive medicine authority in theater for provisions of minimum living space and sanitary facilities. f. The daily food rations will be sufficient in quantity, quality, and variety to keep EPW/RP in good health and prevent loss of weight or development of nutritional deficiencies. (1) Account will be taken of the habitual diet of the prisoners. (2) EPW/RP who work may be given additional rations when required. (3) Sufficient drinking water will be supplied to EPW/RP. (4) The use of tobacco will be permitted in designated smoking areas. (5) EPW will, as far as possible, be associated with the preparation of their meals and may be employed for that purpose in the kitchens. Furthermore, they will be given means of preparing additional food in their possession. Food service handlers must have training in sanitary methods of food service. (6) Adequate premises will be provided for messing. (7) Collective disciplinary measures affecting food are prohibited. g. Clothing, underwear, and footwear will be supplied to EPW/ RP in sufficient quantities, and allowances will be made for the climate of the region where the prisoners are detained. Captured uniforms of enemy armed forces will, if suitable for the climate, be made available to clothe EPW/RP. The camp commander will ensure the regular replacement and repair of the above articles. EPW/RP who work will receive clothing appropriate to the nature or location of the work demands. Para 6-6, g: (1) Hygiene and sanitation measures will conform to those prescribed in AR 40-5 and related regulations. Camp commanders will conduct periodic and detailed sanitary inspections. (2) A detailed sanitary order meeting the specific needs of each CI camp or branch camp will be published by the CI camp commander. Copies will be reproduced in a language that the CI understands and will be posted in each compound. (3) Each CI will be provided with sanitary supplies, service, and facilities necessary for their personal cleanliness and sanitation. Separate sanitary facilities will be provided for each sex. (4) All CI will have at their disposal, day and night, latrine facilities conforming to sanitary rules of the Army.

*Same as US Soldiers.*

*3 meals/day, food, latrines - same as Soldiers*

*MRE's*

*PST is located for 1st help to R. Brown.*

4. How often are the collection points/internment facilities inspected (**PVNTMED inspections**)? Who performs the inspections (**field sanitation team, PVNTMED detachment**)? What do the inspections consist of? What do you do with the results of the inspections? Are the appropriate commanders taking the necessary actions to correct the shortcomings noted during your monthly medical inspections? Have you observed any recurring deficiencies during your inspections? (**Obtain copies of past inspection reports**) (1.1, 1.2, 1.3, 1.7, 2.1, 4.1) AR 190-8, paragraph 3-4 i (1): The United States is bound to take all sanitary measures necessary to ensure clean and healthy camps to prevent epidemics. EPW/RP will have access, day and night, to latrines that conform to the rules of hygiene and are maintained in a constant state of cleanliness. In any camps in which women EPW/RP are accommodated, separate latrines will be provided for them. EPW/RP will have sufficient water and soap

for their personal needs and laundry. The necessary facilities and time will be made available for those purposes. **AR 190-8, paragraph 3-4 e: EPW/RP will be quartered under conditions as favorable as those for the force of the detaining power billeted in the same area. [Thus, field prev med requirements outlined in AR 40-5, TB MEDs 530, 577, and 561 are applicable.]** FM 3-19.40, paragraph 2-11: Certain sanitation standards must be met to prevent disease and ensure cleanliness. These standards include—

- Ensuring that internees receive as much water as US soldiers.
- Providing adequate space within housing units to prevent overcrowding.
- Providing sufficient showers and latrines and ensuring that they are cleaned and sanitized daily.
- Teaching dining-facility workers the rules of good food sanitation and ensuring that they are observed and practiced.
- Disposing of human waste properly to protect the health of all individuals associated with the facility according to the guidelines established by preventive medicine (PVNTMED).
- Providing sufficient potable water for drinking, bathing, laundry, and food service.
- Providing materials for personal hygiene.
- Training personnel on proper garbage disposal to prevent insects and vermin that can contribute to health hazards.

Paragraph 2-43: The PVNTMED section provides limited PVNTMED services for the facility. Performs sanitary inspections of housing, food service operations, water supplies, waste disposal operations, and other operations that may present a medical nuisance or health hazard to personnel. Provides training and guidance to the staff, unit personnel, and others. Para 3-49: The division PVNTMED section supports the central CP by—

- Monitoring drinking water and advising on disinfection procedures.
- Controlling animals and insects that carry disease.
- Ensuring that captives help prevent illness by—
  - Drinking enough water.
  - Wearing clothing that is suited for the weather and the situation.
  - Handling heating fuels carefully.
  - Avoiding contact of exposed skin to cold metal.
  - Using insect repellent, netting, and insecticides.
  - Taking approved preventive medication.
  - Using purification tablets when water quality is uncertain.
  - Disposing of bodily wastes properly.
  - Practicing personal hygiene.

Para 3-62: The CHA guards isolate wounded captives and captives suspected of having a communicable disease until medical personnel can examine them (see Chapter 2). Take necessary sanitary measures to ensure a clean, healthy CHA and to prevent epidemics. Request PVNTMED units to assist and advise unit field sanitation teams on—

- The survey and control of disease-carrying insects and rodents
- Sanitary engineering (water treatment and waste disposal)

Para 5-52 (CI): Proper sanitation and cleanliness of a facility prevents the spread of disease among the CI population and the US forces guarding them. The facility commander—

- Conducts periodic, detailed sanitary inspections.
- Publishes a detailed sanitary order in a language that CIs understand and posts it in each compound.
- Provides sanitary supplies, services, and facilities necessary for personal cleanliness and sanitation.
- Ensures that—
  - Hygiene and sanitation measures conform to AR 40-5 and related regulations.
  - Latrines are available 24 hours a day.
  - Separate showers and latrines are available for males and females.
  - Adequate space is allocated to prevent overcrowding within housing units, while maintaining proper segregation and family integrity.
  - Good food sanitation and personal hygiene is observed by food service personnel.
  - Waste is disposed of properly.
  - Sufficient potable water is available for drinking, bathing, doing laundry, and preparing food.

801<sup>st</sup> PM

- Materials are available for personal hygiene, including products for female hygiene and infant care.

Daily rounds - sick call - PM, Monday 801<sup>st</sup>

5. How do you ensure that each unit has a field sanitation team and all necessary field sanitation supplies? What PVNTMED personnel are assigned to MP units responsible for detention operations? (1.1, 1.2, 1.3, 1.4, 1.5, 1.7, 2.1, 4.1) AR 40-5, paragraph 14-3 a: As a minimum, units deploying to the field will—(1) Before deployment, appoint a field sanitation team with responsibilities defined in b below. b. Field sanitation teams. (1) When organic or attached medical personnel are available, they will be appointed and will serve as the field sanitation team for the unit. . . . Company and battery-sized units deploying without organic or attached medical personnel will appoint a field sanitation team. (2) (a) Composition. Company aidmen (military occupational specialty 91A) organic or attached to deployed units will be trained and will function as the unit field sanitation team. If medical personnel are not available, two soldiers will be selected and trained, one of whom must be a noncommissioned officer.

FM 4-02.17, paragraph 3-13: Military Police Units. a. Preventive medicine personnel play a vital role in the oversight of health and sanitation standards in displaced persons assembly areas, enemy prisoner(s) of war (EPW) camps, and confinement facilities. To perform this mission, PVNTMED personnel are assigned to military police (MP) EPW detachments, MP EPW battalions, MP EPW brigades, MP EPW commands, and MP confinement battalions. b. The type and number of PVNTMED personnel assigned is dependent upon the assigned unit's mission. The PVNTMED element can range from a single PVNTMED noncommissioned officer (NCO) to a staff consisting of an environmental science officer, a sanitary engineer, and PVNTMED specialists. c. They serve as technical advisors to the command on PVNTMED issues associated with the supported population. Since the staff's role is advisory, it has no organic equipment and must coordinate for monitoring/testing support from PVNTMED detachments, ASMB or the Theater Army Medical Laboratory (TAML).

6. How are detainees initially evaluated (screened) and treated for medical conditions (same as US)? Who performs the screening? What do you do if a detainee is suspected of having a communicable disease (isolated)? (1.1, 1.2, 2.1, 4.1) AR 190-8, paragraph 2-1 a (2): First aid and medical treatment will be provided to the same extent that the United States provides to its own forces. Sick and wounded prisoners will be evacuated separately, but in the same manner as U.S. and allied forces. Para 2-2 b: Ensure sick and wounded EPW and RP in their custody are classified, by qualified medical personnel, as either walking wounded or litter, or as non-walking wounded. Walking wounded or litter EPW will be evacuated through established evacuation channels. Non-walking wounded or sick EPW will be delivered to the nearest medical aid station and evacuated through medical channels. All detained personnel will remain physically segregated from U.S. and allied patients. Para 3-4 i (2): EPW/RP with a contagious disease, mental condition, or other illness, as determined by the medical officer, will be isolated from other patients. A list of endemic diseases of military importance can be obtained from the theater surgeon or preventive medicine officer. EPW/RP will be immunized and reimmunized against other diseases as recommended by the Theater Surgeon. EPW/RP suffering from serious disease, or whose condition necessitates special treatment, surgery, or

hospital care, must be admitted to any military or civilian medical unit where such treatment can be given. . . EPW/RP will not be denied medical care. Para 6-6 d (2): Each CI will be given an initial radioscopic chest examination. If active disease is found, pulmonary disease consultation is indicated. If no active disease is found, the individual will be followed through routine periodic examinations. (3) For children up to 14 years of age, a tuberculin skin test (TST) will be administered. No chest x-ray is necessary if the TST is negative. The local medical officer will establish guidance for subsequent tests based on the tuberculosis experience of the population. Routine annual tuberculin testing of children is not warranted unless there is clear-cut evidence of high risk. (See AR 40-26, paragraph 8 f.) FM 3-19.40, paragraph 3-48: Prevent captives from incurring disease and nonbattle injuries (DNBI) (heat and cold injuries or communicable diseases) while in captivity. Isolate captives who exhibit obvious signs of disease (diarrhea, vomiting, or fever) until medical personnel make an evaluation. If a large number of captives appear ill, notify medical and command channels for immediate action/treatment. Tables 4-1 (EPW), 5-1 (CI) and 8-1 (US military). US Prisoners: 7-103: The facility commander establishes a close liaison with commanders of local medical and dental facilities to ensure their full support of the confinement facility. He ensures that prisoners receive the same medical and dental care as other soldiers. 7-104: Medical officers or other medically trained personnel conduct sick call, perform emergency medical treatment, and dispense medication. Hold sick call daily at a time that does not interfere with duties and training of prisoners. Medical examinations and treatment usually require using instruments and medications that can cause custody and control problems. Secure medications and equipment when they are not in use, and inventory them frequently. 7-105: Corrections NCOs dispense medication to prisoners in cellblocks, supervise the ingestion or application of the medication, and maintain a medication issue register. When possible, use qualified medical personnel to dispense prescription medication.

Initial screen & translator - asked about red conditions  
No exam - only visible wounds.  
No isolation.

7. How often do you or your staff conduct routine medical inspections (examinations) of detainees? What does the medical evaluation consist of? What is the purpose of the medical examination? How are the results recorded/reported? (1.1, 1.2, 1.3, 1.7, 2.1, 4.1) AR 190-8, paragraph 3-4 i (3): Medical inspections of EPW/RP will be held at least once a month, where each detainee will be weighed and the weight recorded on DA Form 2664-R (Weight Register). . . The purpose of these inspections will be to monitor the general state of health, nutrition, and cleanliness of prisoners and to detect contagious diseases, especially tuberculosis, venereal disease, lice, louse-borne diseases and HIV. Para 3-3 a (22): Information will be posted to the individual's personal, medical, and financial records, and will be provided to the supporting PWIC and next higher headquarters, as required. FM 3-19.40, paragraph 2-10: A medical officer, a physician's assistant (PA), or a nurse practitioner examines each internee monthly. Para 6-6 a (2): A medical officer will examine each CI upon arrival at a camp and monthly thereafter. The CI will not be admitted into the general population until medical fitness is determined. These examinations will detect vermin infestation and communicable diseases especially tuberculosis, malaria, and venereal disease. They will also determine the state of health, nutrition, and cleanliness of each CI. During these examinations, each CI will be weighed, and the weight will be recorded on DA Form 2664-R. (3) Each CI will be immunized or reimmunized as prescribed by theater policy.

8. Does every internment facility have an infirmary? If not, why not? How do detainees request medical care? What are the major reasons detainees require medical care? Have any detainees been denied medical treatment or has medical attention been delayed? If so, why? (1.1, 1.2, 1.8, 2.1, 4.1) AR 190-8, paragraph 3-4, i (2): Every camp will have an infirmary. EPW/RP with a contagious disease, mental condition, or other illness, as determined by the medical officer, will be isolated from other patients. . . . EPW/RP will not be denied medical care. Para 6-6 a (1): Dental, surgical, and medical treatment will be furnished free to the CI. d (1): Medical and dental care, including dentures, spectacles, and other required artificial appliances, will be provided the CI in accordance with AR 40-3. (5) Sick call for the CI desiring medical attention will be held each day. Emergency treatment will be provided at all times. FM 3-19.40, paragraph 6-19: Ensure that medical treatment is available for all internees.

Level I & II.

Trauma early - then resp. ? abd pain. Chronic conditions later.

9. How do detainees obtain personal hygiene products? (1.1, 1.2, 1.8, 4.1) AR 190-8, paragraph 3-4 h: EPW/RP will be provided sundry/health and comfort packs, which may be supplemented with items tailored to their cultural needs, as a temporary substitute for establishing canteen operations. When directed by the Theater Area Provost Marshal or senior Military Police officer in the internment facilities' chain of command, canteens will be installed in all camps, where EPW/RP may procure foodstuffs, soap, tobacco and ordinary articles in daily use.

Handwashing facilities & soap  
Toothpaste, etc.

10. What are the procedures for the transfer of custody of detainees to/from the infirmary for medical treatment? How is security maintained when a detainee is transferred to a medical facility? (Database, form, etc) (1.1, 1.2, 1.7, 4.1) AR 190-8, paragraph 3-3 (22): Establish and maintain complete and accurate accountability information regarding the location, physical and legal status, training, and employment of all individuals in the custody of, or assigned to, the EPW facility. Information will be posted to the individual's personnel, medical, and financial records, and will be provided to the supporting PWIC and next higher headquarters, as required. Para 2-1 a (1) (f): Accountability will be maintained for all evacuated prisoners regardless of the evacuation channel used. Units designated to receive the prisoners at the collection points or camps will prepare a receipt DD Form 629 (Receipt for Prisoner or Detained Person) with a list of each prisoner's name attached and provide a copy of the receipt to the escort. FM 3-19.40, paragraph 3-32: If medical personnel request MP to guard captives at a medical facility in the corps area and the corps commander chooses to delegate that responsibility to the MP, the PM allocates support on a case-by-case basis. The MP structure is not designed to provide MP to guard hospitalized captives on a continuous, uninterrupted basis.

Medics provided security. PLT for transport.

11. What are the procedures for repatriation of sick and wounded detainees? Who is eligible for repatriation based on a medical condition? How do you interact with the Mixed Medical Commission (EPW/RP only)? (1.1, 1.2, 4.1) AR 190-8, paragraph 3-12 a: Sick and wounded prisoners will be processed and their eligibility determined for repatriation or accommodation in a neutral country during hostilities. Both will be according to the procedures set forth below. (1) Sick and wounded prisoners will not be repatriated against their will during hostilities. (2) Procedures for a Mixed Medical Commission will be established by HQDA, according to this regulation and Annex II of the GPW. The purpose of the Commission will be to determine cases eligible for repatriation. h: The EPW and RP noted below will be examined by the Mixed Medical Commission. (1) EPW and RP designated by a camp or hospital surgeon or a retained physician or surgeon who is exercising the functions of the surgeon in a camp. (2) EPW and RP whose applications are submitted by a prisoner representative. (3) EPW and RP recommended for examination by the power on which the EPW and RP depend or by an organization duly recognized by that power and that gives assistance to them. (4) EPW, RP who submit written requests. These EPW will not be examined until the EPW listed in (1), (2), and (3) above have been examined. i: An EPW or RP found ineligible by the Mixed Medical Commission may apply for reexamination 3 months after the last examination. l: The following EPW and RP are eligible for direct repatriation: (1) EPW and RP suffering from disabilities as a result of injury, loss of limb, paralysis, or other disabilities, when these disabilities are at least the loss of a hand or foot, or the equivalent. (2) Sick or wounded EPW and RP whose conditions have become chronic to the extent that prognosis appears to preclude recovery in spite of treatment within 1 year from inception of disease or date of injury.

*Tx to home*

12. Who maintains medical records of detainees? How are these maintained and accessed? What is kept in the medical record? Who collects, analyzes, reports, and responds to detainee DNBI data? (1.1, 1.2, 1.7, 4.1) AR 190-8, paragraph 3-3 a (22): Information will be posted to the individual's personal, medical, and financial records, and will be provided to the supporting PWIC and next higher headquarters, as required. Paragraph 3-4 i (2): The detaining authorities shall, upon request, issue, to every EPW/RP who has undergone treatment, an official certificate indicating the nature of the illness or injury, and the duration and kind of treatment received. A duplicate of this certificate will be forwarded to the ICRC. The detaining authority will also ensure medical personnel properly complete the SF 88 (Report of Medical Examination), SF 600 (Chronological Record of Medical Care and DA Form 3444 (Treatment Record). Paragraph 6-6 f (1): General. The medical records and forms used for the hospitalization and treatment of U.S. Army personnel and for EPWs will be used for CI. The letters "CI" will be stamped at the top of the form. Medical and dental records will accompany the CI when they are transferred. (3) Certificate of medical treatment. Each CI who has undergone medical treatment will be given on request an official certificate indicating the nature of his or her illness or injury, and the duration and kind of treatment given. A duplicate of this certificate will be forwarded to the Branch PWIC. (4) Seriously ill report. When a CI is seriously ill because of injury or disease, the camp or hospital commander will notify the Branch PWIC without delay and provide a brief diagnosis of the case. Follow-up reports, including notification of removal from the seriously ill list, will be submitted each week thereafter during the period the CI remains critical.

*Log book - SF600 if to be transferred.  
3 MDC, 3 PAR PROPS early + FST*

13. What are the standards for detainee working conditions? Who monitors and enforces them? Who administers the safety program? What is included in the safety program? How does a detainee apply for work-related disability compensation? (1.1, 1.2, 1.7, 4.1) AR 190-8, paragraph 3-17: A safety program for EPW and RP will be set up and administered in each EPW camp. Army regulations, circulars, and pamphlets in the 385-series may be used as guides for establishing an EPW and RP safety program. Accident injury forms used in the EPW and RP safety programs will be prepared, administered, and maintained separately from those prepared for other persons included under the Army Safety Program. Paragraph 4-5 a: Unhealthy or dangerous work. EPW and RP may not be employed in any job considered injurious to health or dangerous because of the inherent nature of the work, the conditions under which it is performed, or the person's physical unfitness or lack of technical skill. Paragraph 4-6: Preliminary job training will be given when necessary and; protective clothing and accessories will be provided as required (e.g., hard-toed shoes, goggles, and gloves). Such safety devices will be equal to safeguards provided for civilian labor. Commanders will make periodic inspections to ensure satisfactory conditions and safeguards are maintained at all times. Paragraph 4-8 a: The length of the workday for EPW, including the time for travel will not exceed that permitted for civilians in the locale who are employed in the same general type of work. b. Except as provided in subparagraph c below, the EPW will not be required to work more than 10 hours (in one day) exclusive of a one hour lunch and rest period. They will not be kept out of camp for more than 12 consecutive hours, including travel time. Rest cycles consistent with the wet bulb, black globe temperature will be monitored and followed. c. EPW may be required to work any number of hours for the efficient operation of the EPW compound messes. EPW are responsible for preparing food within these messes. Paragraph 4-9 a: Each EPW will be allowed a rest period of 24 consecutive hours every week. b. Each EPW who has worked for one full year will be given a rest of eight consecutive days during which the U.S. will give working pay to the EPW. Paragraph 4-20 a: An EPW may be injured or suffer a disability while working under circumstances that may be attributed to work. If so, DA Form 2675-R (Certificate of Work Incurred Injury or Disability) will be completed in four copies. The original will be given to the EPW; the second copy will be forwarded to the PWIC to be sent to the National Prisoner of War Information Center; and the third and fourth will be placed in the EPW's personnel file.

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14. How are retained medical personnel identified? What special conditions apply to them? How are they employed in the care of detainees? How are they certified as proficient? Who supervises them? (1.1, 1.2, 1.7, 4.1) AR 190-8, paragraph 1-5 f: Medical Personnel. Retained medical personnel shall receive as a minimum the benefits and protection given to EPW and shall also be granted all facilities necessary to provide for the medical care of EPW. They shall continue to exercise their medical functions for the benefit of EPW, preferably those belonging to the armed forces upon which they depend, within the scope of the military laws and regulations of the United States Armed Forces. They shall be provided with necessary transport and allowed to periodically visit EPW situated in working detachments or in hospitals outside the EPW camp. Although subject to the internal discipline of the camp in which they are retained such personnel may not be compelled to carry out any work other than that concerned with their medical duties. The senior medical officer shall be responsible to the camp military authorities for everything connected with the activities of retained medical personnel. Paragraph 3-4 i (4): EPW who, though not attached to the medical service of the Armed Forces, are physicians, surgeons, dentists, nurses, or medical orderlies may be required to exercise their medical functions in the interests of prisoners of war dependent on the same power after being certified per Paragraph 3-15. They will continue to be classified as EPW, but will receive the same treatment as corresponding RP (medical personnel). They will be exempted from any other work. Paragraph 3-15 b. Enemy personnel who fall within any of the following categories, are eligible to be certified as RP: (1) Medical personnel who are members of the medical service of their armed forces. (2) Medical personnel



who are exclusively engaged in: (a) The search for or the collection, transport, or treatment of the wounded or sick. (b) The prevention of disease. (c) Staffs exclusively engaged in administering medical units and establishments. c. RP whose status is certified will not be considered as EPW; however, they will receive the benefits and protection of an EPW. . . . e. Certification of the retained status of personnel will be effected upon the decision that the special identity card held by each such person is valid and authentic. This certification will be decided, if possible, at the time of processing by the camp commander. f. The Theater Commander, or CINCUSACOM will confirm the certification of the technical proficiency of the persons described in paragraph 3-15d. Qualified U.S. Military medical and religious personnel must first confirm the medical or religious proficiency of each EPW. . . . i. Verifications of retained status and religious or medical proficiency will be recorded on the DA Form 4237-R of the person concerned. Denials of claims to retained status or certification of proficiency will also be recorded together with a brief statement of the reason. k. RP, who are members of the enemy's Armed Forces, will be assigned to EPW camps. If available, they will be assigned in the ratio of two physicians, two nurses, one chaplain, and seven enlisted medical personnel per 1,000 EPW. Economy of medical staffing may be achieved at higher levels per guidance from Commanding General, HSC. As much as possible, these RP will be assigned to camps containing EPW from the same Armed Forces upon which the RP depend. m. Subject to security requirements the theater commander will ensure: (1) Full use of enemy medical personnel for the treatment of sick and wounded EPW/RP. (2) Release of U.S. medical personnel, when possible, from caring for sick and wounded EPW except for supervision and training of enemy medical personnel. n. The senior medical officer in each camp will provide close and continuing supervision of the professional activities of the retained medical persons and report all improper activities. p. EPW camp surgeons or hospital commanders in which retained persons are used will verify: (1) Accuracy of the final diagnosis. (2) Adequacy of treatment. (3) Final disposition of patients treated by RP.

15. What measures are taken to protect US personnel from contracting diseases carried by detainees? Who monitors/enforces these procedures? (1.1, 1.2, 1.5, 1.7, 4.1) FM 3-19.40, paragraph 3-48, Prevent captives from incurring disease and nonbattle injuries (DNBI) (heat and cold injuries or communicable diseases) while in captivity. Isolate captives who exhibit obvious signs of disease (diarrhea, vomiting, or fever) until medical personnel make and evaluation. If a large number of captives appear ill, notify medical and command channels for immediate action/treatment. AR 40-5, paragraph 4-1b d. Preventive measures include personal protective measures (for example, personal hygiene, immunizations, prophylactic medications, and repellents) and environmental control measures (for example, disinfection of water supplies, proper food handling practices, area vector control, and other aspects of field sanitation). Effective implementation of preventive measures require command emphasis and command, unit, and individual soldier education on ways to prevent illnesses. AR 40-5, paragraph 4-1a a. Epidemic potentials include those diseases and injuries that can seriously compromise the ability of a military unit to carry out its mission. Preventive measures are essential. Exercise of command authority based on sound medical recommendations, troop discipline, and provision of PVNTMED services in both garrison and field settings is critical. AR 40-5, paragraph 4-2b b. PVNTMED services and teams will be familiar with disease prevention and control measures and will provide advice and guidance to commanders, units, and individuals on the prevention of communicable diseases. PVNTMED services and teams will also provide guidance to units on disease and environmental threats, specific preventive measures, and medical surveillance during and following deployments.

*Some areas for isolation & respirators*

3590

16. What kind of stress counseling do you provide to Soldiers/Guards of detainees? (1.1, 1.2, 2.1, 4.1) FM 3-19.40, paragraph 2-48: Personnel assigned or attached to I/R facilities are trained on the care and control of housed personnel. They are fully cognizant of the provisions of the Geneva and UN Conventions and applicable regulations as they apply to the treatment of housed personnel. A formal training program should include stress management techniques. FM 8-51, Appendix D, D-2 f (3): Combat stress control units should provide routine mental health consultation to EPW confinement facilities. This should include: stress control advice to the command regarding the stressors of US Army MP personnel and any allied or coalition personnel working at the confinement facility; individual evaluation and intervention for guards or prisoners when indicated. AR 190-8, Paragraph 1-5, (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ).

*CST is located.*

*Φ Φ on detainees*

17. What are the procedures if a detainee in U.S. custody dies? (1.1, 1.2, 4.1) AR 190-8, paragraph 3-3a (20): Report allegations of criminal acts or war crimes committed by or against EPW/RP to the supporting element of the U.S. Army Criminal Investigation Command (USACIDC). Deaths resulting from other than natural causes will be investigated by USACIDC. Para 3-10 c: When an EPW or RP in US custody dies, the attending medical officer furnish the camp (or hospital) commander or other officer charged with their custody before death, the following information: (1) Full name of deceased. (2) ISN of deceased. (3) Date, place, and cause of death. (4) Statement that death was, or was not, the result of the deceased's own misconduct. (5) When the cause of death is undetermined, the attending medical officer will make a statement to that effect. When the cause of death is finally determined, a supplemental report will be made as soon as possible. e. The attending medical officer and the appropriate camp commander will complete a DA Form 2669-R (Certificate of Death). DA Form 2669-R will be reproduced locally on 8 1/2 by 11-inch paper. The form is located at the back of this regulation. This form is for the use of Army only. Enough copies of form will be made out to provide distribution as follows: (1) Original—information center. (2) Copy—information center (branch), if necessary. (3) Copy—The Surgeon General. (4) Copy—EPW or RP personal file. (5) The proper civil authorities responsible for recording deaths in the particular state if the EPW dies in the United States.

*Φ deaths - military affairs with them.*

*CA BN.*

18. What do you perceive to be doctrinal medical shortcomings pertaining to detainee operations? How would you fix/incorporate into updated doctrine/accomplish differently? Does the current force structure of the Medical/MS/SP Corps support the successful accomplishment of detainee operations? What are the shortcomings, and how do we fix the problem at the Army level? (1.1, 1.3, 1.5, 1.7, 2.1, 2.2, 3.1, 4.1) AR 190-8g Combatant Commanders, Task Force Commanders and Joint Task Force Commanders . . . must ensure the proper force structure is included in any joint operational plans. Commanders at all levels will ensure that all EPW, CI, RP, and ODs are accounted for and humanely treated, and that collection, evacuation, internment, transfers, release, and repatriation operations are conducted per this regulation. Combatant Commanders, Task Force Commanders and Joint Task Force Commanders will- (6) Identify requirements and allocations for Army Medical units in support of EPW, CI, and RP Programs, and

ensure that the medical annex of OPLANs, OPORDs and contingency plans includes procedures for treatment of EPW, CI, RP, and ODs. Medical support will specifically include: (a) First aid and all sanitary aspects of food service including provisions for potable water, pest management, and entomological support. (b) Preventive medicine. (c) Professional medical services and medical supply. (d) Reviewing, recommending, and coordinating the use and assignment of medically trained EPW, CI, RP and OD personnel and medical material. (e) Establishing policy for medical repatriation of EPW, CI and RP and monitoring the actions of the Mixed Medical Commission.

ISTAT cartridges temp. sensitive. Need auto weapons  
for convoys -  
Need more people to do add'l tasks - gate guards, hel's,  
Q's for search mission.  
Good overall.

19. If you noticed any markings and/or injuries on a detainee that might lead you to believe the detainee was being abused, what would you do with the information? Do your subordinates know the reporting procedures if they observe or become aware of a detainee being abused? (1.1, 1.2, 1.6, 4.1) **(Serious Incident Report/Commander's Inquiry, etc)** AR 190-40 paragraph 2-1, Military and civilian personnel assigned to or accompanying a DoD Component know that they shall report reportable incidents through their chain of command and that such reports also may also be made through other channels, such as the military police, a judge advocate, or an Inspector General.) AR 190-8, paragraph 3-3a (20): Report allegations of criminal acts or war crimes committed by or against EPW/RP to the supporting element of the U.S. Army Criminal Investigation Command (USACIDC). Deaths resulting from other than natural causes will be investigated by USACIDC. Paragraph 2-1 a (1) (d): The use of physical or mental torture or any coercion to compel prisoners to provide information is prohibited. Paragraph 5-1 a (1): No form of physical torture or moral coercion will be exercised against the CI. AR 190-40, Paragraphs 2-1a and 2-1b. a. Incidents listed in appendix B and appendix C are reportable to HQDA as Category 1 and 2 serious incidents respectively. b. Submission of an SIR will not be delayed due to incomplete information. All pertinent information known at the time of SIR submission will be included. Additional required information will be provided in a subsequent add-on report. AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident.

Report up chain. 0 incidents  
Since detainees - on - detainee fighting.

20. Overall, how do you feel detainees are being treated at the infirmary, collection points and/or detention facilities? What systemic weaknesses have you identified? No standard. Personal observations. (1.1, 1.2, 2.1, 4.1)

Good.

21. What AARs or lessons learned have you written or received regarding detainee operations? Can I get a copy? (preferably on disk) (2.2) AR 350-1, paragraph 4-3 c: The after action review is a structured review process that allows military training participants to discover how and why certain events actually happened and how to improve future task performance. The reviews focus on military training objectives, on performance according to Army standards, and on discovering lesson learned for sustaining and improving collectives and individual task performance proficiency.

22. What do you perceive as the mission of your unit? Describe the importance of your role in that mission. (Insight to the Soldier's understanding and attitude concerning unit mission and their role) AR 600-20 Command Policy 2-1. Chain of Command a. The chain of command assists commanders at all levels to achieve their primary function of accomplishing the unit's assigned mission while caring for personnel and property in their charge. A simple and direct chain of command facilitates the transmittal of orders from the highest to the lowest levels in a minimum of time and with the least chance of misinterpretation. b. Commanders delegate sufficient authority to soldiers in the chain of command to accomplish their assigned duties, and commanders may hold these soldiers responsible for their actions.

*Provide level I / II. Rebuild I med facilities added (CA)*

23. Describe your working environment and living conditions since being in Theater. (Identify physical and psychological impact on Soldier's attitude). (1.2, 1.3, 1.4, 1.5, 1.6, 1.7) FM 10-1, Ch. 7, para. 3, "Tactical Vision. A primary QMC focus at the tactical level will continue to be on sustainment of the soldier. Each company-sized unit will have two cooks and a small, state-of-the-art field kitchen. This provides a limited capability to prepare or heat meals and supplements. An improved containerized capability for providing responsive laundry and shower support well forward on the battlefield must be developed. Frontline soldiers require brief respites from the rigors associated with combat. A facility complex (Force Provider) will be available in which they can shower, clean their clothes, eat hot meals, and rest in an environmentally controlled shelter.

*Improved throughout.*

24. Describe the unit command climate and Soldier morale. Has it changed or evolved since you have been in Theater? (Identifies Soldier's perception of the chain of command and Soldier attitude. Does the Soldier feel supported? Do Soldiers feel the Command cares? Are they getting clear guidance?) 1 AR 600-20 • 13 May 2002 1-5. Command, b. Elements of command. c. The commander is responsible for establishing leadership climate of the unit and developing disciplined and cohesive units. This sets the parameters within which command will be exercised and, therefore, sets the tone for social and duty relationships within the command. (1) Commanders and other leaders

committed to the professional Army ethic promote a positive environment. If leaders show loyalty to their soldiers, the Army, and the Nation, they earn the loyalty of their soldiers. If leaders consider their soldiers' needs and care for their well-being, and if they demonstrate genuine concern, these leaders build a positive command climate. (2) Duty is obedient and disciplined performance. Soldiers with a sense of duty accomplish tasks given them, seize opportunities for self-improvement, and accept responsibility from their superiors. Soldiers, leader and led alike, work together to accomplish the mission rather than feed their self-interest.

*Up at first 2<sup>nd</sup> to new environment.*

*Very supportive command.*

*Couldn't take house off during labor (even if had someone)*

25. Are you aware of any incidences of detainee or other abuse in your unit? AR 190-8, 1-5. General protection policy a. U.S. policy, relative to the treatment of EPW, CI and RP in the custody of the U.S. Armed Forces, is as follows: (1) All persons captured, detained, interned, or otherwise held in U.S. Armed Forces custody during the course of conflict will be given humanitarian care and treatment from the moment they fall into the hands of U.S. forces until final release or repatriation. (2) All persons taken into custody by U.S. forces will be provided with the protections of the GPW until some other legal status is determined by competent authority. (3) The punishment of EPW, CI and RP known to have, or suspected of having, committed serious offenses will be administered IAW due process of law and under legally constituted authority per the GPW, GC, the Uniform Code of Military Justice and the Manual for Courts Martial. (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ). b. All prisoners will receive humane treatment without regard to race, nationality, religion, political opinion, sex, or other criteria. The following acts are prohibited: murder, torture, corporal punishment, mutilation, the taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. c. All persons will be respected as human beings. They will be protected against all acts of violence to include rape, forced prostitution, assault and theft, insults, public curiosity, bodily injury, and reprisals of any kind. They will not be subjected to medical or scientific experiments. This list is not exclusive. EPW/RP are to be protected from all threats or acts of violence. d. Photographing, filming, and video taping of individual EPW, CI and RP for other than internal Internment Facility administration or intelligence/counterintelligence purposes is strictly prohibited. No group, wide area or aerial photographs of EPW, CI and RP or facilities will be taken unless approved by the senior Military Police officer in the Internment Facility commander's chain of command. e. A neutral state or an international humanitarian organization, such as the ICRC, may be designated by the U.S. Government as a Protecting Power (PP) to monitor whether protected persons are receiving humane treatment as required by the Geneva Conventions. The text of the Geneva Convention, its annexes, and any special agreements, will be posted in each camp in the language of the EPW, CI and RP.

*No.*

#### ADVISEMENT OF RIGHTS (For military personnel)

The text of Article 31 provides as follows a. No person subject to this chapter may compel any person to incriminate himself or to answer any questions the answer to which may tend to incriminate him. b. No person subject to this chapter may interrogate or request any statement from an accused or a person suspected of an offense without first informing him of the nature of the accusation and advising him that he does not have to make any statement regarding the offense of which he is accused or suspected, and that any statement made by him may be used as evidence against him in a trial by court-martial. c. No

person subject to this chapter may compel any person to make a statement or produce evidence before any military tribunal if the statement or evidence is not material to the issue and may tend to degrade him. d. No statement obtained from any person in violation of this article, or through the use of coercion, unlawful influence, or unlawful inducement, may be received in evidence against him in a trial by court-martial. (1.2, 1.6)

I am \_\_\_\_\_ (grade, if any, and name), a member of the (DAIG). I am part of a team inspecting detainee operations, this is not a criminal investigation. I am reading you your rights because of a statement you made causes me to suspect that you may have committed \_\_\_\_\_. (specify offense, i.e. aggravated assault, assault, murder). Under Article 31, you have the right to remain silent, that is, say nothing at all. Any statement you make, oral or written, may be used as evidence against you in a trial by courts-martial or in other judicial or administrative proceedings. You have the right to consult a lawyer and to have a lawyer present during this interview. You have the right to military legal counsel free of charge. In addition to military counsel, you are entitled to civilian counsel of your own choosing, at your own expense. You may request a lawyer at any time during this interview. If you decide to answer questions, you may stop the questioning at any time. Do you understand your rights? Do you want a lawyer? (If the answer is yes, cease all questions at this point). Are you willing to answer questions?

26. Describe what you understand happened leading up to and during the incident(s) of abuse. (No applicable standard) \_\_\_\_\_

27. Describe Soldier morale, feelings and emotional state prior to and after these incidents? (Identifies unit and Soldier morale, atmosphere, mood, attitude, stress, retaliation, preemption, family crisis) \_\_\_\_\_

28. Was this incident reported to the chain of command? How, when & what was done? What would you have done? (Identifies compliance, procedure, timeliness, Soldier perception of action taken and effect on unit morale.) (1.2, 1.6) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the

following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and with-out adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

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29. How could the incident have been prevented? (Identifies root cause and perceived solution) (No applicable standard)

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30. Describe any unit training or other programs that you are aware of that teach leaders and Soldiers how to recognize and resolve combat stress. FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The measures which reduce battle fatigue and prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel. )

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31. What measures are in place to boost morale or to relieve stress? (**Identifies perceived solution.**) FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The measures which reduce battle fatigue and prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel.

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32. What measures could the command enact to improve the morale and command climate of your unit? (**Identifies perceived solution.**) FM 22-103, Leadership and Command at Senior Levels, 21 Jun 1987, p. 6, - "Leadership. The process of influencing others to accomplish the mission by providing purpose, direction, and motivation." AR 600-100, Army Leadership, 17 Sep 1993, p. 8, 1987- "Senior-level leadership is the art of direct and indirect influence and the skill of creating the conditions for sustained organizational success to achieve the desired result. But, above all, it is the art of taking a vision of what must be done, communicating it in a way that the intent is clearly understood, and then being tough enough to ensure its execution."

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# INTERROGATOR OIC/NCOIC

Rank LTC Branch MS Date: 22 Mar Unit [REDACTED]  
 Duty Position G2 How Long in Job Jun '02 (~2 yrs.)  
 Interviewer [REDACTED] How Long in Country 1 yr.

1. What references/standards/publications/SOPs do you use to conduct interrogation Operations? (1.1, 1.2, 2.1, 4.1) AR 190-8, DoD Directive 5100.77, 1949 Geneva Convention, FM 34-52 Intelligence Interrogation, FM 3-19.40, These are the primary source for standards and doctrine concerning Detainee Operations).

OPORD 5 App. - say FM 3-19.40 & FM 34-52

2. How does the command ensure that interrogation Operations is conducted in compliance with the international Law of war? (OPORD/FRAGO, ROE, Interrogation Techniques, general orders, humane treatment, etc) (1.1, 1.2, 1.6, 4.1) AR 190-8, paragraph 1-4g. (Combatant Commanders, Task Force Commanders, and joint Task Force Commander have the overall responsibility for the EPW, CI, and RP program, operations, and contingency plans in the theater of operation involved to ensure compliance with international law of war. DoD Directive 2310.1 provides that persons captured or detained by the U S Military services shall normally be handed over for safekeeping to U S Army Military Police, or to detainee collecting points or other holding facilities and installations operated by U S Military Police as soon as practical.) ROE from CJCS ISO Iraqi operations dated 251600Z Apr 03 para 10 (U) All commanders will ensure their personnel are familiar with the law of armed conflict and with these ROE."

SJA oversight - daily

Approved Baghdad

Det. review board - Pms, SJA, G2.

CdS is arbiter

ICRC review

3. Did you and your soldiers undergo Level B Law of War training prior to deployment? Explain what training occurred. Is there a plan to train new Soldiers (replacements) to the unit? Did this training include the treatment of Detainees? Explain. (1.1, 1.2, 1.4, 1.6, 4.1) (AR 350-1 para 4-14c. (2) and table G-1 Refresher training, dated 9 April 2003), Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit. AR 190-8 para 1-5(4)(C DOD Directive 5100.77), All prisoners will receive humane treatment and that the following acts are prohibited murder, torture, corporal punishment, mutilation, taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. Prisoners will be protected against all acts of violence to include public curiosity. (DoD Directive 5100.77, para 5.5.1, The Secretaries of the Military Departments shall provide directives, publications, instructions, and training so that the principles and rules of law of war will be known to members of their respective Departments, the extent of such knowledge to be commensurate with each individual's duties and responsibilities.)

Have station & detainment log.

3598

4. What Home Station/Mob Site Training did you and your soldiers receive prior to deployment to help your unit prepare for Detainee/interrogation Operations? Describe it. How did the training prepare you to conduct Detainee/interrogation Operations for this deployment? How did this training distinguish between the different categories of Detainees (EPWs, RPs, CIs, etc.)? (1.1, 1.2, 1.4, 4.1) DoDD 2310.1 (The U.S. Military Services shall be given the necessary training to ensure they have knowledge of their obligations under the Geneva Conventions (references (b) through (e)) and as required by DoD Directive 5100.77 (reference (f)) before an assignment to a foreign area where capture or detention of enemy personnel is possible.) (AR 350-1 para 4-14c.(2) and table G-1 Refresher training, dated 9 April 2003), Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit. AR 190-8 para 1-5(4)(C DOD Directive 5100.77), All prisoners will receive humane treatment and that the following acts are prohibited murder, torture, corporal punishment, mutilation, taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. Prisoners will be protected against all acts of violence to include public curiosity. (DoD Directive 5100.77, para 5.5.1, The Secretaries of the Military Departments shall provide directives, publications, instructions, and training so that the principles and rules of law of war will be known to members of their respective Departments, the extent of such knowledge to be commensurate with each individual's duties and responsibilities.)

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5. What training did you receive on the established Rules of Engagement (ROE)? How often does this occur? Does this training include Rules of Interaction (ROI)? (1.4, 4.1) (DoD Directive 5100.77, para 5.5.1, The Secretaries of the Military Departments shall provide directives, publications, instructions, and training so that the principles and rules of law of war will be known to members of their respective Departments, the extent of such knowledge to be commensurate with each individual's duties and responsibilities.) ROE from CJCS ISO Iraqi operations dated 251600Z Apr 03 para 10 (U) All commanders will ensure their personnel are familiar with the law of armed conflict and with these ROE." AR 190-8, paragraph 3-6 a, The following acts will not be permitted: (1) Fraternization between EPW, RP and U.S. military or civilian personnel. Fraternization is defined as improper or intimate communications or actions between U.S. Armed Forces personnel and EWP/RP.

ROE - briefed at each B.

6. What procedures are in place to ensure your Soldiers do not violate the rules of engagement for the interment facility/collection point? (1.1, 1.2, 1.4, 1.6, 4.1) FM 3-19.40, paragraph 2-29, An MP commander ensures that soldiers understand use-of-force guidelines and the ROE established by higher headquarters for each mission. Because the use of force and ROE vary depending on the category of housed personnel and the operational environment, the commander develops SOPs that follow the guidance provided. He balances the physical security of force with mission accomplishment and the protection of deployed forces. ROE from CJCS ISO Iraqi operations dated 251600Z Apr 03 para 10 (U) All commanders will ensure their personnel are familiar with the law of armed conflict and with these ROE."

> per norm

3599

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7. What guidance or policies are there to ensure fraternization is not taking place between U.S military personnel and the detainees? (1.1, 1.2, 1.4, 1.6, 4.1) AR 190-8, paragraph 3-6 a, The following acts will not be permitted: (1) Fraternization between EPW, RP and U.S. military or civilian personnel. Fraternization is defined as improper or intimate communications or actions between U.S. Armed Forces personnel and EWP/RP.

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8. What training have you and your subordinates received to ensure your knowledge of DO is IAW the provisions under the Geneva Convention? (1.1, 1.2, 1.3, 4.1) DoDD 2310.1 para 3-3.2 (The U.S. Military Services shall be given the necessary training to ensure they have knowledge of their obligations under the Geneva Conventions (references (b) through (e)) and as required by DoD enemy personnel is possible.) AR 190-8, paragraph 4(b-c) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ). All prisoners will receive humane treatment without regard to race, nationality, religion, political opinion, sex, or other criteria. The following acts are prohibited: murder, torture, corporal punishment, mutilation, the taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. All persons will be respected as human beings. They will be protected against all acts of violence to include rape, forced prostitution, assault and theft, insults, public curiosity, bodily injury, and reprisals of any kind. They will not be subjected to medical or scientific experiments. This list is not exclusive. EPW/RP are to be protected from all threats or acts of violence.)

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9. What is the OIC/NCOICs overall role in detainee operation process? What involvement do the OIC/NCOICs have in the interrogation process of detainee operations? Do the OIC/NCOICs provide a means to validate detainee's information? Do the OIC/NCOICs provide input as to the disposition of the detainee? (1.1, 1.2, 1.6, 4.1) (FM 34-52 page 2-12 Battalion S2 Controls Interrogation employed for temporary period at battalion level receives PIR, IR, and SIR from the supported battalion S2. This will ensure interrogators are fully oriented to the battalion's collection mission. In other instances, interrogators may be placed at brigade in an "on call" status, from which they can proceed to any of the subordinate battalions as circumstances warrant. Upon completion of a low-level, immediate-type interrogation, they can return to brigade and again become available for immediate employment. Commanders and S2s below brigade level who are unable to obtain interrogation support from higher echelons should include provisions in unit and staff standing operating procedures (SOPs) for the "tactical questioning" (not interrogation) of EPWs or detainees. They should identify assigned personnel for language capability. Interrogation personnel should provide training in the area of tactical questioning to designated S2 personnel. The potential for abuse of the EPW is greatest at the initial capture and tactical questioning phase. With the excitement and stress of the battlefield, it may become easy for unskilled personnel to resort to illegal techniques to elicit critical information. Instruction must stress the importance of the proper treatment of EPWs. Emphasize that the abuse of an EPW at the initial stage of contact often renders future interrogation futile. If you are engaged in, or supervising the tactical questioning of EPWs, you are responsible for

3600

DA IG

ensuring that EPWs are treated in accordance with the requirement of international and US law. Any tactical questioning conducted must be in response to the supported commander's PIR.)

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10. Where are your screening sites located (**where detainees are interrogated and screened**)? Are these facilities adequate for your needs? Do you have enough interrogators for your operation needs? What are your personnel shortfalls? (1.1, 1.2, 1.7, 1.8) Local SOPs (FM 34-52 Intelligence Interrogation, page 2-9 At brigade level, EPWs can be detained in open fields, courtyards, gardens, jungle clearings, or similar sites if they are hidden from enemy observation. If necessary, these areas can be enclosed with barbed wire far more efficient EPW handling. Because EPWs seldom remain at a forward collecting point for more than a few hours, EPWs are not usually kept in a building or other shelter. Interrogation facilities at battalion and brigade are kept to a minimum. 2-10 Compared to brigade facilities, division interrogator facilities are expanded. When practicable, interrogations at division should be conducted in improvised interrogation rooms in buildings adjacent to the division collecting point. If possible, separate rooms should be available to permit several interrogations at once. 2-22) The EAC interrogation facility will normally be designated as the Theater Interrogation Facility (TIF). A TIF is staffed by US Army interrogators and analysts, with support from Air Force, Navy, Marine Corps, and other US national agencies as required. In a multinational operation, a combined interrogation facility (CIF) may be established with allied interrogation augmentation.)

*Raid → overcapacity → speed up screening  
(Capacity of interrog. & interrogators exceeded)  
Space & volume of information*

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11. What is the procedure on how to identify a detainee who may have intelligence information? Who performs this procedure? Are MPs involved in the decision-making? Are PIRs used as a basis for the identification of detainees of interest, personality lists used, etc? (1.1, 1.2, 2.1) (FM 34-52 Intelligence Interrogation, page 3-2) If time permits, screeners should question holding area personnel about the EPWs and detainees. Since these personnel are in almost constant contact with the EPWs and detainees, their descriptions of specific ones can help identify sources who might answer the supported commander's PIR and IR. Screeners should identify and note those EPWs and detainees whose appearance and behavior indicate they are willing to cooperate immediately or are unlikely to cooperate ever. Unless time is critically short, screeners should—personally observe the EPWs and detainees. Pay attention to rank and branch of service insignias, and condition of uniform and equipment. Carefully observe the behavior demonstrated by other EPWs and detainees. Look for things like attempts to talk to the guards, intentional placement in the wrong segregation group, or any overt signs of nervousness, anxiety. Or fright. Note any EPWs and detainees whose appearance or behavior indicates willingness to talk.)

*TIP*

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12. Have you personally observed the interrogation operations at this Facility to determine if your unit has the necessary support and supplies to run the facilities? If so, what did you find? (1.1, 1.2, 1.5, 4.1) AR 190-8, paragraph 1-4g(2), (Commanders will plan and procure logistical support to include: transportation, subsistence, personal, organizational and NBC clothing and equipment items, mail collection and distribution, laundry, and bath for DO. (FM 3-19.40, 3601

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para 7-101, Supply functions in a confinement facility are the same as those in other military units. However, stronger security measures are necessary to prevent certain supplies and equipment from falling into the hands of prisoners.)

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13. What control measures are you using to maintain discipline and security within the interrogation facility? (1.1, 1.2, 4.1) AR 190-8, paragraph 3-6 (Measures needed to maintain discipline and security will be established in each camp/collection point and rigidly enforced. The camp commander will maintain records of disciplinary punishments. These records will be open to inspection by the protecting power. The following acts will not be permitted; Fraternization between EPW, RP and U.S. military or civilian personnel. Fraternization is defined as improper or intimate communications or actions between U.S. Armed Forces personnel and EPW/RP. Donating or receiving gifts or engaging in any commercial activity between persons in U.S. custody and U.S. personnel. Setting up of courts by detainees. Disciplinary powers will not be delegated to or exercised by EPW/RP. Punishment will not be administered by EPW/RP.)

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14. How many people are authorized to be present in the room when interrogating/screening a detainee? Under what circumstances are you required and authorized to have more people? (1.7) (no standard)

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15. Are the personal effects of a detainee released to the interrogator or is the interrogator allowed to examine the items? (**DOCUMENT HANDLING**) (1.1, 1.2) (FM 34-52 Intelligence Interrogation, page 4-4 The accountability phase begins at the time the document is captured. Original documents must not be marked, altered, or defaced in any way. Documents must be clearly tagged. The capturing unit attaches a capture document tag (DA Form 5976, Part CNOTE: Different tag. AR 190-8, para 2-1a(b) says use a DD Form 2745 and (d) says Part C is attached to property confiscated from the detainee.) to each document; multiple CEDs are bundled or bagged together. The capture data is always recorded on a captured document tag. The capture document tag should be assigned a sequential number at the first formal exploitation point, showing the nationality of the capturing force by national letters prescribed in STANAG 1059. The capturing unit will record the information as follows: Time document was captured, recorded as a DTG. Place document was captured, including the six-or-eight-digit coordinate, and description of the location of capture. Identify of the capturing unit. Identity of the source from whom the document was taken, if applicable. Summary of the circumstances under which the document was found. CED intelligence value will be determined and exploited as early as possible. The document must be forwarded immediately to higher headquarters. Custody of CEDs transfer (normally from the MP) to MI when MI identifies a document as having intelligence interest. When MI interest in an EPW-related CED stops, MI gives it back to the MP.)

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16. Are you receiving sufficient information from the capture paperwork to properly conduct screenings and interrogations? Are the current requirements for documentation of a captured person sufficient or excessive? Did the changes in procedures as far as documenting captured person improve your ability to gather intelligence? (1.1, 1.2, 2.2, 4.1) (FM 3-19.40, paragraph 2-3, The commander is responsible for the administrative processing of each internee. When processing is complete, he submits a DA Form 2674-R to the servicing internment/resettlement information center (IRIC), which function as the field operations agency for the national IRIC located in CONUS.) (AR 190-8, para 2-1, a. (1) (b) (c), All equipment, documents, and personal property confiscation during the search must be tagged and administratively accounted for by the capturing unit. DD Form 2745, Part C is attached to the property confiscated from the Detainee, so that it may later be matched to that Detainee to include the CJTF Directive on proper paperwork procedures)

*Inefficient - not enough detail re: events of capture  
No tags early, then enforced, but still no info.  
I have time/expertise to get right out of info.  
Clog at either BW or BDE. ↑ role of BDE.*

17. What are the procedures for the transfer of custody of Detainees from the MP/Guard personnel to Military Intelligence personnel? When the detainee is returned to the guard force, what procedures occur? (what info is passed on to the Guard Force (type of reward?)...observation report, paper trail audit) (1.1, 1.2, 4.1) (FM 3-19-40, chapter 3/3-68) If a captive or his equipment or documents are removed from the receiving/processing line, account for them on DD Form 2708 and DA Form 4137. 3-68. The site is located where screeners can observe captives as they are segregated and processed. It is shielded from the direct view of captives and is far enough away that captives cannot overhear screeners' conversations. The site has an operation, administrative, and interrogation area. The interrogation area accommodates, a captive, a guard, and an interpreter as well as furniture. Lights are available for night operations. Accountability procedures are implemented and required forms are available.)

18. Describe the screening /background checks required prior to hiring interpreters. Are they trusted by U.S. Soldiers? (1.3, 1.7, 4.1) (FM 34-52, FM 3-19.40, para 4-6, Request interpreters from MI, PSOP, allied forces, or local authorities as necessary.)

*Cat I - Iraqi → unclass → back of work  
Cat II - US citizen, SECRET  
Cat III - ISSCI*

*Titan → most part OK*

19. What is your perception of the contract interrogators training and capabilities to conduct proper interrogations of detainees? (1.4) (No Standards apply on perceptions.)

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20. How are translators/linguists used during the screening/interrogation process? Do you trust the interpreter? How are MPs/Guards used during this process? (1.1, 1.2, 1.7, 2.1) (FM 34-52 Intelligence Interrogation, use of interpreter page 3-30 Interpreter briefing: Once the interrogator has chosen a method of interpretation, he must brief his interpreter. This briefing must cover current tactical situation, background information obtained on the source, specific interrogation objectives, method of interpretation to be used, the conduct of the interrogation. ) (use METT-T)

21. Do counterintelligence agents conduct interrogations of detainees? What training have they received for conducting interrogations? What is their understanding of the laws of war as it pertains to interrogating detainees? (1.1, 1.2, 1.5) (Counterintelligence agents are not authorized to interrogate detainees unless they are trained on FM 34-52, FM 27-10)

No.

OAS - no document trail of person or evidence  
A - logs.

22. What do you perceive to be doctrinal shortcomings pertaining to Interrogation Operations? How would you fix/incorporate into updated doctrine/accomplish differently? How about Force Structure to ensure Interrogation Operations can be successfully accomplished? What are the shortcomings and how do we fix the problem at the Army-level? (1.1, 1.3, 1.5, 1.7, 4.1)

Doctrine OK.

didn't address asymmetric threat  
"discovery learning"

Language power, training

expected EPW's

Decentralized better is the way to go.

23. What are the procedures if a detainee in U.S. custody dies? (1.1, 1.2, 4.1) AR 190-8, paragraph 3-3a (20): Report allegations of criminal acts or war crimes committed by or against EPW/RP to the supporting element of the U.S. Army Criminal Investigation Command (USACIDC). Deaths resulting from other than natural causes will be investigated by USACIDC. Para 3-10 c: When an EPW or RP in US custody dies, the attending medical officer furnish the camp (or hospital) commander or other officer charged with their custody before death, the following information: (1) Full name of deceased. (2) ISN of deceased. (3) Date, place, and cause of death. (4) Statement that death was, or was not, the result of the deceased's own misconduct. (5) When the cause of death is undetermined, the attending medical officer will make a statement to that effect. When the cause of death is finally determined, a supplemental report will be made as soon as possible. e. The attending medical officer and the appropriate camp commander will complete a DA Form 2669-R (Certificate of Death). DA Form 2669-R will be reproduced locally on 8 1/2 by 11-inch paper. The form is located at the back of this regulation. This form is for the use of Army only. Enough copies of form will be made out to provide distribution as follows: (1) Original-information center. (2) Copy-information center (branch), if necessary. (3) Copy-The Surgeon General. (4) Copy-EPW or RP personal file. (5) The proper civil authorities responsible for recording deaths in the particular state if the EPW dies in the United States.

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24. Do you know of the procedures to get stress counseling (Psychiatrist, Chaplain, Medical)? Do your Soldiers know of the procedures to get counseling (Psychiatrist, Chaplain, Medical)? (1.1, 1.2, 1.6, 2.1, 4.1) FM 3-19.40, paragraph 2-48: Personnel assigned or attached to I/R facilities are trained on the care and control of housed personnel. They are fully cognizant of the provisions of the Geneva and UN Conventions and applicable regulations as they apply to the treatment of housed personnel. A formal training program should include stress management techniques. FM 8-51, Appendix D, D-2 f (3): Combat stress control units should provide routine mental health consultation to EPW confinement facilities. This should include: stress control advice to the command regarding the stressors of US Army MP personnel and any allied or coalition personnel working at the confinement facility; individual evaluation and intervention for guards or prisoners when indicated. AR 190-8, Paragraph 1-5, (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ).

Combat stress - yes! - rank immaterial  
Being monitored

25. Are you aware of your requirement to report abuse or suspected abuse of detainees? (1.1, 1.2, 1.6, 4.1) AR 190-40 para 2-1, Military and civilian personnel assigned to or accompanying a DoD Component know that they shall report reportable incidents through their chain of command and that such reports also may also be made through other channels, such as the military police, a judge advocate, or an Inspector General.) AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident.

Yes. Up the chain

26. Do your subordinates know the reporting procedures if they observe or become aware of a Detainee being abused? (1.2, 1.6) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs.

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At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

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27. What steps would you take if a subordinate reported to you an incident of alleged Detainee abuse? (1.2, 1.6, 4.1) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C, Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

*MP's making reference to PT. SJA investigated?  
talked to CDRs*

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28. Do you feel you can freely report an incident of alleged Detainee abuse outside Command channels (IG, CID) (1.6, 4.1) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C, Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences

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of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

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29. What procedures do you have to report suspected detainee abuse (IG, CID, Next Level Commander) (1.2, 1.6, 4.1) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C, Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

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30. What procedures are in place for Detainees to report alleged abuse? (1.2, 1.6, 4.1) AR 190-8, para 5-1, g. Appeals and periodic review of security internment cases. (1) Appeals. The CI who are interned for imperative security reasons will be accorded the right to appeal the order directing their internment. Such appeals will be decided with the least possible delay by a board of officers. Appeals will be decided only on the grounds of the existence or nonexistence of imperative security reasons requiring the internment of the protected person. 6-4. Internee Committee a. Election. At each

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camp and branch camp, CI will be elected by secret written ballot to the Internee Committee. This committee is empowered to represent the camp to the protecting powers; International Committee of the Red Cross, or other authorized relief or aid organizations and U.S. military authorities. *e. Duties.* (3) (c) The presentation and transmittal of petitions and complaints to the appropriate authorities in proportion to the kind of labor performed. 6-9. Complaints and requests to camp commanders and protecting power, a. Persons may make complaints or requests to the camp commander, who will try to resolve the complaints and answer the requests. If the CI are not satisfied with the way the commander handles a complaint or request, they may submit it in writing, through channels, to HQDA, ODCSOPS (DAMO - ODL) NPWIC, WASH DC 20310-0400. *b.* Persons exercising the right to complain to the protecting power about their treatment and camp may do so—(1) By mail. (2) In person to the visiting representatives of the protecting power. (3) Through their Internee Committee. *c.* Written complaints to the protecting power will be forwarded promptly through HQDA (DAMO - ODL) NPWIC, WASH DC 20310-0400. A separate letter with the comments of the camp commander will be included. Military endorsements will not be placed on any CI communications. *d.* If a protecting power communicates with a CI camp commander about any matter requiring an answer, the communication and commander's reply will be forwarded to HQDA (DAMO-ODL) NPWIC, WASH DC 20310-0400, for proper action. *e.* Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.

31. What do you perceive as the mission of your unit? Describe the importance of your role in that mission. (*Insight to the Soldier's understanding and attitude concerning unit mission and their role*) AR 600-20 Command Policy 2-1. Chain of Command *a.* The chain of command assists commanders at all levels to achieve their primary function of accomplishing the unit's assigned mission while caring for personnel and property in their charge. A simple and direct chain of command facilitates the transmittal of orders from the highest to the lowest levels in a minimum of time and with the least chance of misinterpretation. *b.* Commanders delegate sufficient authority to soldiers in the chain of command to accomplish their assigned duties, and commanders may hold these soldiers responsible for their actions.

32. Describe your working environment and living conditions since being in Theater. (*Identify physical and psychological impact on Soldier's attitude*). (1.2, 1.3, 1.4, 1.5, 1.6, 1.7) FM 10-1, Ch. 7, para. 3, "Tactical Vision. A primary QMC focus at the tactical level will continue to be on sustainment of the soldier. Each company-sized unit will have two cooks and a small, state-of-the-art field kitchen. This provides a limited capability to prepare or heat meals and supplements. An improved containerized capability for providing responsive laundry and shower support well forward on the battlefield must be developed. Frontline soldiers require brief respites from the rigors associated with combat. A facility complex (Force Provider) will be available in which they can shower, clean their clothes, eat hot meals, and rest in an environmentally controlled shelter.

*Land grab in Mosul's palace - OS next to E2*  
*Organization*  
*Open bay to all ranks / gardens*

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33. Describe the unit command climate and Soldier morale. Has it changed or evolved since you have been in Theater? (Identifies Soldier's perception of the chain of command and Soldier attitude. Does the Soldier feel supported? Do Soldiers feel the Command cares? Are they getting clear guidance?) 1 AR 600-20 • 13 May 2002 1-5. Command, b. Elements of command. c. The commander is responsible for establishing leadership climate of the unit and developing disciplined and cohesive units. This sets the parameters within which command will be exercised and, therefore, sets the tone for social and duty relationships within the command. (1) Commanders and other leaders committed to the professional Army ethic promote a positive environment. If leaders show loyalty to their soldiers, the Army, and the Nation, they earn the loyalty of their soldiers. If leaders consider their soldiers' needs and care for their well-being, and if they demonstrate genuine concern, these leaders build a positive command climate. (2) Duty is obedient and disciplined performance. Soldiers with a sense of duty accomplish tasks given them, seize opportunities for self-improvement, and accept responsibility from their superiors. Soldiers, leader and led alike, work together to accomplish the mission rather than feed their self-interest.

*Unrelenting pace - no breaks, Overly fatigued.  
CgS should have alleviated some stress.*

*Evolution to battle rhythm slow or none.*

34. Are you aware of any incidences of detainee or other abuse in your unit? AR 190-8, 1-5. General protection policy a. U.S. policy, relative to the treatment of EPW, CI and RP in the custody of the U.S. Armed Forces, is as follows: (1) All persons captured, detained, interned, or otherwise held in U.S. Armed Forces custody during the course of conflict will be given humanitarian care and treatment from the moment they fall into the hands of U.S. forces until final release or repatriation. (2) All persons taken into custody by U.S. forces will be provided with the protections of the GPW until some other legal status is determined by competent authority. (3) The punishment of EPW, CI and RP known to have, or suspected of having, committed serious offenses will be administered IAW due process of law and under legally constituted authority per the GPW, GC, the Uniform Code of Military Justice and the Manual for Courts Martial. (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ). b. All prisoners will receive humane treatment without regard to race, nationality, religion, political opinion, sex, or other criteria. The following acts are prohibited: murder, torture, corporal punishment, mutilation, the taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. c. All persons will be respected as human beings. They will be protected against all acts of violence to include rape, forced prostitution, assault and theft, insults, public curiosity, bodily injury, and reprisals of any kind. They will not be subjected to medical or scientific experiments. This list is not exclusive. EPW/RP are to be protected from all threats or acts of violence. d. Photographing, filming, and video taping of individual EPW, CI and RP for other than internal Internment Facility administration or intelligence/counterintelligence purposes is strictly prohibited. No group, wide area or aerial photographs of EPW, CI and RP or facilities will be taken unless approved by the senior Military Police officer in the Internment Facility commander's chain of command. e. A neutral state or an international humanitarian organization, such as the ICRC, may be designated by the U.S. Government as a Protecting Power (PP) to monitor whether protected persons are receiving humane treatment as required by the Geneva Conventions. The text of the Geneva Convention, its annexes, and any special agreements, will be posted in each camp in the language of the EPW, CI and RP.

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**ADVISEMENT OF RIGHTS (For military personnel)**

The text of Article 31 provides as follows a. No person subject to this chapter may compel any person to incriminate himself or to answer any questions the answer to which may tend to incriminate him. b. No person subject to this chapter may interrogate or request any statement from an accused or a person suspected of an offense without first informing him of the nature of the accusation and advising him that he does not have to make any statement regarding the offense of which he is accused or suspected, and that any statement made by him may be used as evidence against him in a trial by court-martial. c. No person subject to this chapter may compel any person to make a statement or produce evidence before any military tribunal if the statement or evidence is not material to the issue and may tend to degrade him. d. No statement obtained from any person in violation of this article, or through the use of coercion, unlawful influence, or unlawful inducement, may be received in evidence against him in a trial by court-martial. (1.2, 1.6)

I am \_\_\_\_\_ (grade, if any, and name), a member of the (DAIG). I am part of a team inspecting detainee operations, this is not a criminal investigation. I am reading you your rights because of a statement you made causes me to suspect that you may have committed \_\_\_\_\_. (specify offense, i.e. aggravated assault, assault, murder). Under Article 31, you have the right to remain silent, that is, say nothing at all. Any statement you make, oral or written, may be used as evidence against you in a trial by courts-martial or in other judicial or administrative proceedings. You have the right to consult a lawyer and to have a lawyer present during this interview. You have the right to military legal counsel free of charge. In addition to military counsel, you are entitled to civilian counsel of your own choosing, at your own expense. You may request a lawyer at any time during this interview. If you decide to answer questions, you may stop the questioning at any time. Do you understand your rights? Do you want a lawyer? (If the answer is yes, cease all questions at this point). Are you willing to answer questions?

35. Describe what you understand happened leading up to and during the incident(s) of abuse. (No applicable standard) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

36. Describe Soldier morale, feelings and emotional state prior to and after these incidents? (Identifies unit and Soldier morale, atmosphere, mood, attitude, stress, retaliation, preemption, family crisis) \_\_\_\_\_  
\_\_\_\_\_  
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37. Was this incident reported to the chain of command? How, when & what was done? What would you have done? (Identifies compliance, procedure, timeliness, Soldier perception of action taken and effect on unit morale.) (1.2, 1.6) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

38. How could the incident have been prevented? (Identifies root cause and perceived solution) (No applicable standard)

39. Describe any unit training or other programs that you are aware of that teach leaders and Soldiers how to recognize and resolve combat stress. FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The measures which reduce battle fatigue and prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive

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assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel. ) \_\_\_\_\_

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40. What measures are in place to boost morale or to relieve stress? (Identifies perceived solution.) FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The measures which reduce battle fatigue and prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel. \_\_\_\_\_

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41. What measures could the command enact to improve the morale and command climate of your unit? (Identifies perceived solution.) FM 22-103, Leadership and Command at Senior Levels, 21 Jun 1987, p. 6, - "Leadership. The process of influencing others to accomplish the mission by providing purpose, direction, and motivation." AR 600-100, Army Leadership, 17 Sep 1993, p. 8, 1987- "Senior-level leadership is the art of direct and indirect influence and the skill of creating the conditions for sustained organizational success to achieve the desired result. But, above all, it is the art of taking a vision of what must be done, communicating it in a way that the intent is clearly understood, and then being tough enough to ensure its execution." \_\_\_\_\_

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**Medical Officer / Preventive Medical Officer**  
**INTERVIEW QUESTIONS**

b6-2

24(2) ES E7  
Rank A Branch 915 Date 23 Mar Unit 801st MAB, Co  
Duty Position 915 How Long in Job 10 mos - 5 yrs.  
How Long in Current MOS 1 Interviewer   
How long have you been in Country 10 mos - 9 yrs. 1 yr.

1. What medical requirements in support of the detainee program were identified in the medical annexes of relevant OPLANs, OPORDs, and other contingency planning documents? What identified requirements were actually allocated? What procedures were specified in these documents? **(Collect theater/local policies, SOPs, etc)** (1.1, 1.2, 2.1, 4.1) AR 190-8, paragraph 1-4 g (6): Combatant Commanders, Task Force Commanders and Joint Task Force Commanders will identify requirements and allocations for Army Medical units in support of the EPW, CI and RP Program, and ensure that the medical annex of OPLANs, OPORDs and contingency plans includes procedures for treatment of EPW, CI, RP, and ODs. Medical support will specifically include: (a) First aid and all sanitary aspects of food service including provisions for potable water, pest management, and entomological support. (b) Preventive medicine. (c) Professional medical services and medical supply. (d) Reviewing, recommending, and coordinating the use and assignment of medically trained EPW, CI, RP and OD personnel and medical material. (e) Establishing policy for medical repatriation of EPW, CI and RP and monitoring the actions of the Mixed Medical Commission.

Same tools as US facilities.

2. What training, specific to detainee medical operations, did you receive prior to this deployment? What training have you received during this deployment? (1.4) DoDD 2310.1: The U.S. Military Services shall be given the necessary training to ensure they have knowledge of their obligations under the Geneva Conventions (references (b) through (e)) and as required by DoD Directive 5100.77 (reference (f)) before an assignment to a foreign area where capture or detention of enemy personnel is possible.) AR 350-1, para 4-14 c (2) and table G-1 Refresher training, dated 9 April 2003: Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit. DoDD 5100.77, para 5.5.1: The Secretaries of the Military Departments shall provide directives, publications, instructions, and training so that the principles and rules of law of war will be known to members of their respective Departments, the extent of such knowledge to be commensurate with each individual's duties and responsibilities.

3. What are the minimum medical care and field sanitation standards for collection points/internment facilities? What have you observed when detainees are received at collection points/internment facilities? **(Describe the process)** (1.2, 1.4, 1.8) AR 190-8, paragraph 2-1 a (1) (e): Prisoners will be humanely evacuated from the combat zone and into appropriate channels as quickly as possible. . . . The capturing unit may keep prisoners in the combat zone in cases where, due to wounds or sickness, prompt evacuation would be more dangerous to their survival than



2 915 → each BDE  
Up to 2d hold - no shelter; latrines &  
sand in tank bag.

retention in the combat zone. Para 3-2 b: Prisoners will not normally be interned in unhealthy areas, or where the climate proves to be injurious to them. Transit camps or collecting points will operate under conditions similar to those prescribed for permanent prisoner of war camps, and the prisoners will receive the same treatment as in permanent EPW camps. Para 3-3 (3): Provide prisoners with humane treatment, health and welfare items, quarters, food, clothing, and medical care. Health Service Command (HSC) provides medical and dental care for EPW in federal or civilian health care facilities per HSC plans. (13) Provide the initial medical examination and monthly screening of prisoners. **AR 190-8, paragraph 3-4 e: EPW/RP will be quartered under conditions as favorable as those for the force of the detaining power billeted in the same area.** The conditions shall make allowance for the habits and customs of the prisoners and shall in no case be prejudicial to their health. The forgoing shall apply in particular to the dormitories of EPW/RP as it regards both total surface and minimum cubic space and the general installation of bedding and blankets. Quarters furnished to EPW/RP must be protected from dampness, must be adequately lit and heated (particularly between dusk and lights-out), and must have adequate precautions taken against the dangers of fire. In camps accommodating both sexes, EPW/RP will be provided with separate facilities for women. When possible consult the preventive medicine authority in theater for provisions of minimum living space and sanitary facilities. f. The daily food rations will be sufficient in quantity, quality, and variety to keep EPW/RP in good health and prevent loss of weight or development of nutritional deficiencies. (1) Account will be taken of the habitual diet of the prisoners. (2) EPW/RP who work may be given additional rations when required. (3) Sufficient drinking water will be supplied to EPW/RP. (4) The use of tobacco will be permitted in designated smoking areas. (5) EPW will, as far as possible, be associated with the preparation of their meals and may be employed for that purpose in the kitchens. Furthermore, they will be given means of preparing additional food in their possession. Food service handlers must have training in sanitary methods of food service. (6) Adequate premises will be provided for messing. (7) Collective disciplinary measures affecting food are prohibited. g. Clothing, underwear, and footwear will be supplied to EPW/RP in sufficient quantities, and allowances will be made for the climate of the region where the prisoners are detained. Captured uniforms of enemy armed forces will, if suitable for the climate, be made available to clothe EPW/RP. The camp commander will ensure the regular replacement and repair of the above articles. EPW/RP who work will receive clothing appropriate to the nature or location of the work demands. Para 6-6, g: (1) Hygiene and sanitation measures will conform to those prescribed in AR 40-5 and related regulations. Camp commanders will conduct periodic and detailed sanitary inspections. (2) A detailed sanitary order meeting the specific needs of each CI camp or branch camp will be published by the CI camp commander. Copies will be reproduced in a language that the CI understands and will be posted in each compound. (3) Each CI will be provided with sanitary supplies, service, and facilities necessary for their personal cleanliness and sanitation. Separate sanitary facilities will be provided for each sex. (4) All CI will have at their disposal, day and night, latrine facilities conforming to sanitary rules of the Army.

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4. How often are the collection points/internment facilities inspected (**PVNTMED inspections**)? Who performs the inspections (**field sanitation team, PVNTMED detachment**)? What do the inspections consist of? What do you do with the results of the inspections? Are the appropriate commanders taking the necessary actions to correct the shortcomings noted during your monthly medical inspections? Have you observed any recurring deficiencies during your inspections? (**Obtain copies of past inspection reports**) (1.1, 1.2, 1.3, 1.7, 2.1, 4.1) AR 190-8, paragraph 3-4 i (1): The United States is bound to take all sanitary measures necessary to ensure clean and healthy camps to prevent epidemics. EPW/RP will have access, day and night, to latrines that conform to the rules of hygiene and are maintained in a constant state of cleanliness. In any camps in which women EPW/RP are accommodated, separate latrines will be provided for them. EPW/RP will have sufficient water and soap

Ø handwashing  
Only bottled H<sub>2</sub>O at BDE.

Ø shade early  
DA IG

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for their personal needs and laundry. The necessary facilities and time will be made available for those purposes. **AR 190-8, paragraph 3-4 e: EPW/RP will be quartered under conditions as favorable as those for the force of the detaining power billeted in the same area. [Thus, field prev med requirements outlined in AR 40-5, TB MEDs 530, 577, and 561 are applicable.]** FM 3-19.40, paragraph 2-11: Certain sanitation standards must be met to prevent disease and ensure cleanliness. These standards include—

- Ensuring that internees receive as much water as US soldiers.
- Providing adequate space within housing units to prevent overcrowding.
- Providing sufficient showers and latrines and ensuring that they are cleaned and sanitized daily.
- Teaching dining-facility workers the rules of good food sanitation and ensuring that they are observed and practiced.
- Disposing of human waste properly to protect the health of all individuals associated with the facility according to the guidelines established by preventive medicine (PVNTMED).
- Providing sufficient potable water for drinking, bathing, laundry, and food service.
- Providing materials for personal hygiene.
- Training personnel on proper garbage disposal to prevent insects and vermin that can contribute to health hazards.

Paragraph 2-43: The PVNTMED section provides limited PVNTMED services for the facility. Performs sanitary inspections of housing, food service operations, water supplies, waste disposal operations, and other operations that may present a medical nuisance or health hazard to personnel. Provides training and guidance to the staff, unit personnel, and others. Para 3-49: The division PVNTMED section supports the central CP by—

- Monitoring drinking water and advising on disinfection procedures.
- Controlling animals and insects that carry disease.
- Ensuring that captives help prevent illness by—
  - Drinking enough water.
  - Wearing clothing that is suited for the weather and the situation.
  - Handling heating fuels carefully.
  - Avoiding contact of exposed skin to cold metal.
  - Using insect repellent, netting, and insecticides.
  - Taking approved preventive medication.
  - Using purification tablets when water quality is uncertain.
  - Disposing of bodily wastes properly.
  - Practicing personal hygiene.

Para 3-62: The CHA guards isolate wounded captives and captives suspected of having a communicable disease until medical personnel can examine them (see Chapter 2). Take necessary sanitary measures to ensure a clean, healthy CHA and to prevent epidemics. Request PVNTMED units to assist and advise unit field sanitation teams on—

- The survey and control of disease-carrying insects and rodents
- Sanitary engineering (water treatment and waste disposal)

Para 5-52 (CI): Proper sanitation and cleanliness of a facility prevents the spread of disease among the CI population and the US forces guarding them. The facility commander—

- Conducts periodic, detailed sanitary inspections.
- Publishes a detailed sanitary order in a language that CIs understand and posts it in each compound.
- Provides sanitary supplies, services, and facilities necessary for personal cleanliness and sanitation.
- Ensures that—
  - Hygiene and sanitation measures conform to AR 40-5 and related regulations.
  - Latrines are available 24 hours a day.
  - Separate showers and latrines are available for males and females.
  - Adequate space is allocated to prevent overcrowding within housing units, while maintaining proper segregation and family integrity.
  - Good food sanitation and personal hygiene is observed by food service personnel.
  - Waste is disposed of properly.
  - Sufficient potable water is available for drinking, bathing, doing laundry, and preparing food.

- Materials are available for personal hygiene, including products for female hygiene and infant care.

*Monthly - all base camps.*

*Bottled H<sub>2</sub>O*

*Field mice & snakes.*

*IFAC.*

5. How do you ensure that each unit has a field sanitation team and all necessary field sanitation supplies? What PVNTMED personnel are assigned to MP units responsible for detention operations? (1.1, 1.2, 1.3, 1.4, 1.5, 1.7, 2.1, 4.1) AR 40-5, paragraph 14-3 a: As a minimum, units deploying to the field will—(1) Before deployment, appoint a field sanitation team with responsibilities defined in b below. b. Field sanitation teams. (1) When organic or attached medical personnel are available, they will be appointed and will serve as the field sanitation team for the unit. . . . Company and battery-sized units deploying without organic or attached medical personnel will appoint a field sanitation team. (2) (a) Composition. Company aidmen (military occupational specialty 91A) organic or attached to deployed units will be trained and will function as the unit field sanitation team. If medical personnel are not available, two soldiers will be selected and trained, one of whom must be a noncommissioned officer.

FM 4-02.17, paragraph 3-13: Military Police Units. a. Preventive medicine personnel play a vital role in the oversight of health and sanitation standards in displaced persons assembly areas, enemy prisoner(s) of war (EPW) camps, and confinement facilities. To perform this mission, PVNTMED personnel are assigned to military police (MP) EPW detachments, MP EPW battalions, MP EPW brigades, MP EPW commands, and MP confinement battalions. b. The type and number of PVNTMED personnel assigned is dependent upon the assigned unit's mission. The PVNTMED element can range from a single PVNTMED noncommissioned officer (NCO) to a staff consisting of an environmental science officer, a sanitary engineer, and PVNTMED specialists. c. They serve as technical advisors to the command on PVNTMED issues associated with the supported population. Since the staff's role is advisory, it has no organic equipment and must coordinate for monitoring/testing support from PVNTMED detachments, ASMB or the Theater Army Medical Laboratory (TAML).

*PSTs & supplies - left in barracks.*

*Supply chain slow.*

*No fly bait ; snare traps.*

6. How are detainees initially evaluated (screened) and treated for medical conditions (same as US)? Who performs the screening? What do you do if a detainee is suspected of having a communicable disease (isolated)? (1.1, 1.2, 2.1, 4.1) AR 190-8, paragraph 2-1 a (2): First aid and medical treatment will be provided to the same extent that the United States provides to its own forces. Sick and wounded prisoners will be evacuated separately, but in the same manner as U.S. and allied forces. Para 2-2 b: Ensure sick and wounded EPW and RP in their custody are classified, by qualified medical personnel, as either walking wounded or litter, or as non-walking wounded. Walking wounded or litter EPW will be evacuated through established evacuation channels. Non-walking wounded or sick EPW will be delivered to the nearest medical aid station and evacuated through medical channels. All detained personnel will remain physically segregated from U.S. and allied patients. Para 3-4 i (2): EPW/RP with a contagious disease, mental condition, or other illness, as determined by the medical officer, will be isolated from other patients. A list of endemic diseases of military importance can be obtained from the theater surgeon or preventive medicine officer. EPW/RP will be immunized and reimmunized against other diseases as recommended by the Theater Surgeon. EPW/RP suffering from serious disease, or whose condition necessitates special treatment, surgery, or

hospital care, must be admitted to any military or civilian medical unit where such treatment can be given. . . . EPW/RP will not be denied medical care. Para 6-6 d (2): Each CI will be given an initial radioscopic chest examination. If active disease is found, pulmonary disease consultation is indicated. If no active disease is found, the individual will be followed through routine periodic examinations. (3) For children up to 14 years of age, a tuberculin skin test (TST) will be administered. No chest x-ray is necessary if the TST is negative. The local medical officer will establish guidance for subsequent tests based on the tuberculosis experience of the population. Routine annual tuberculin testing of children is not warranted unless there is clear-cut evidence of high risk. (See AR 40-26, paragraph 8 f.) FM 3-19.40, paragraph 3-48: Prevent captives from incurring disease and nonbattle injuries (DNBI) (heat and cold injuries or communicable diseases) while in captivity. Isolate captives who exhibit obvious signs of disease (diarrhea, vomiting, or fever) until medical personnel make an evaluation. If a large number of captives appear ill, notify medical and command channels for immediate action/treatment. Tables 4-1 (EPW), 5-1 (CI) and 8-1 (US military). US Prisoners: 7-103: The facility commander establishes a close liaison with commanders of local medical and dental facilities to ensure their full support of the confinement facility. He ensures that prisoners receive the same medical and dental care as other soldiers. 7-104: Medical officers or other medically trained personnel conduct sick call, perform emergency medical treatment, and dispense medication. Hold sick call daily at a time that does not interfere with duties and training of prisoners. Medical examinations and treatment usually require using instruments and medications that can cause custody and control problems. Secure medications and equipment when they are not in use, and inventory them frequently. 7-105: Corrections NCOs dispense medication to prisoners in cellblocks, supervise the ingestion or application of the medication, and maintain a medication issue register. When possible, use qualified medical personnel to dispense prescription medication.

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7. How often do you or your staff conduct routine medical inspections (examinations) of detainees? What does the medical evaluation consist of? What is the purpose of the medical examination? How are the results recorded/reported? (1.1, 1.2, 1.3, 1.7, 2.1, 4.1) AR 190-8, paragraph 3-4 i (3): Medical inspections of EPW/RP will be held at least once a month, where each detainee will be weighed and the weight recorded on DA Form 2664-R (Weight Register). . . . The purpose of these inspections will be to monitor the general state of health, nutrition, and cleanliness of prisoners and to detect contagious diseases, especially tuberculosis, venereal disease, lice, louse-borne diseases and HIV. Para 3-3 a (22): Information will be posted to the individual's personal, medical, and financial records, and will be provided to the supporting PWIC and next higher headquarters, as required. FM 3-19.40, paragraph 2-10: A medical officer, a physician's assistant (PA), or a nurse practitioner examines each internee monthly. Para 6-6 a (2): A medical officer will examine each CI upon arrival at a camp and monthly thereafter. The CI will not be admitted into the general population until medical fitness is determined. These examinations will detect vermin infestation and communicable diseases especially tuberculosis, malaria, and venereal disease. They will also determine the state of health, nutrition, and cleanliness of each CI. During these examinations, each CI will be weighed, and the weight will be recorded on DA Form 2664-R. (3) Each CI will be immunized or reimmunized as prescribed by theater policy.

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8. Does every internment facility have an infirmary? If not, why not? How do detainees request medical care? What are the major reasons detainees require medical care? Have any detainees been denied medical treatment or has medical attention been delayed? If so, why? (1.1, 1.2, 1.8, 2.1, 4.1) AR 190-8, paragraph 3-4, i (2): Every camp will have an infirmary. EPW/RP with a contagious disease, mental condition, or other illness, as determined by the medical officer, will be isolated from other patients. . . . EPW/RP will not be denied medical care. Para 6-6 a (1): Dental, surgical, and medical treatment will be furnished free to the CI. d (1): Medical and dental care, including dentures, spectacles, and other required artificial appliances, will be provided the CI in accordance with AR 40-3. (5) Sick call for the CI desiring medical attention will be held each day. Emergency treatment will be provided at all times. FM 3-19.40, paragraph 6-19: Ensure that medical treatment is available for all internees.

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9. How do detainees obtain personal hygiene products? (1.1, 1.2, 1.8, 4.1) AR 190-8, paragraph 3-4 h: EPW/RP will be provided sundry/health and comfort packs, which may be supplemented with items tailored to their cultural needs, as a temporary substitute for establishing canteen operations. When directed by the Theater Area Provost Marshal or senior Military Police officer in the internment facilities' chain of command, canteens will be installed in all camps, where EPW/RP may procure foodstuffs, soap, tobacco and ordinary articles in daily use.

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10. What are the procedures for the transfer of custody of detainees to/from the infirmary for medical treatment? How is security maintained when a detainee is transferred to a medical facility? (Database, form, etc) (1.1, 1.2, 1.7, 4.1) AR 190-8, paragraph 3-3 (22): Establish and maintain complete and accurate accountability information regarding the location, physical and legal status, training, and employment of all individuals in the custody of, or assigned to, the EPW facility. Information will be posted to the individual's personnel, medical, and financial records, and will be provided to the supporting PWIC and next higher headquarters, as required. Para 2-1 a (1) (f): Accountability will be maintained for all evacuated prisoners regardless of the evacuation channel used. Units designated to receive the prisoners at the collection points or camps will prepare a receipt DD Form 629 (Receipt for Prisoner or Detained Person) with a list of each prisoner's name attached and provide a copy of the receipt to the escort. FM 3-19.40, paragraph 3-32: If medical personnel request MP to guard captives at a medical facility in the corps area and the corps commander chooses to delegate that responsibility to the MP, the PM allocates support on a case-by-case basis. The MP structure is not designed to provide MP to guard hospitalized captives on a continuous, uninterrupted basis.

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11. What are the procedures for repatriation of sick and wounded detainees? Who is eligible for repatriation based on a medical condition? How do you interact with the Mixed Medical Commission (EPW/RP only)? (1.1, 1.2, 4.1) AR 190-8, paragraph 3-12 a: Sick and wounded prisoners will be processed and their eligibility determined for repatriation or accommodation in a neutral country during hostilities. Both will be according to the procedures set forth below. (1) Sick and wounded prisoners will not be repatriated against their will during hostilities. (2) Procedures for a Mixed Medical Commission will be established by HQDA, according to this regulation and Annex II of the GPW. The purpose of the Commission will be to determine cases eligible for repatriation. h: The EPW and RP noted below will be examined by the Mixed Medical Commission. (1) EPW and RP designated by a camp or hospital surgeon or a retained physician or surgeon who is exercising the functions of the surgeon in a camp. (2) EPW and RP whose applications are submitted by a prisoner representative. (3) EPW and RP recommended for examination by the power on which the EPW and RP depend or by an organization duly recognized by that power and that gives assistance to them. (4) EPW, RP who submit written requests. These EPW will not be examined until the EPW listed in (1), (2), and (3) above have been examined. i: An EPW or RP found ineligible by the Mixed Medical Commission may apply for reexamination 3 months after the last examination. l: The following EPW and RP are eligible for direct repatriation: (1) EPW and RP suffering from disabilities as a result of injury, loss of limb, paralysis, or other disabilities, when these disabilities are at least the loss of a hand or foot, or the equivalent. (2) Sick or wounded EPW and RP whose conditions have become chronic to the extent that prognosis appears to preclude recovery in spite of treatment within 1 year from inception of disease or date of injury.

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12. Who maintains medical records of detainees? How are these maintained and accessed? What is kept in the medical record? Who collects, analyzes, reports, and responds to detainee DNBI data? (1.1, 1.2, 1.7, 4.1) AR 190-8, paragraph 3-3 a (22): Information will be posted to the individual's personal, medical, and financial records, and will be provided to the supporting PWIC and next higher headquarters, as required. Paragraph 3-4 i (2): The detaining authorities shall, upon request, issue, to every EPW/RP who has undergone treatment, an official certificate indicating the nature of the illness or injury, and the duration and kind of treatment received. A duplicate of this certificate will be forwarded to the ICRC. The detaining authority will also ensure medical personnel properly complete the SF 88 (Report of Medical Examination), SF 600 (Chronological Record of Medical Care and DA Form 3444 (Treatment Record). Paragraph 6-6 f (1): General. The medical records and forms used for the hospitalization and treatment of U.S. Army personnel and for EPWs will be used for CI. The letters "CI" will be stamped at the top of the form. Medical and dental records will accompany the CI when they are transferred. (3) Certificate of medical treatment. Each CI who has undergone medical treatment will be given on request an official certificate indicating the nature of his or her illness or injury, and the duration and kind of treatment given. A duplicate of this certificate will be forwarded to the Branch PWIC. (4) Seriously ill report. When a CI is seriously ill because of injury or disease, the camp or hospital commander will notify the Branch PWIC without delay and provide a brief diagnosis of the case. Follow-up reports, including notification of removal from the seriously ill list, will be submitted each week thereafter during the period the CI remains critical.

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13. What are the standards for detainee working conditions? Who monitors and enforces them? Who administers the safety program? What is included in the safety program? How does a detainee apply for work-related disability compensation? (1.1, 1.2, 1.7, 4.1) AR 190-8, paragraph 3-17: A safety program for EPW and RP will be set up and administered in each EPW camp. Army regulations, circulars, and pamphlets in the 385-series may be used as guides for establishing an EPW and RP safety program. Accident injury forms used in the EPW and RP safety programs will be prepared, administered, and maintained separately from those prepared for other persons included under the Army Safety Program. Paragraph 4-5 a: Unhealthy or dangerous work. EPW and RP may not be employed in any job considered injurious to health or dangerous because of the inherent nature of the work, the conditions under which it is performed, or the person's physical unfitness or lack of technical skill. Paragraph 4-6: Preliminary job training will be given when necessary and; protective clothing and accessories will be provided as required (e.g., hard-toed shoes, goggles, and gloves). Such safety devices will be equal to safeguards provided for civilian labor. Commanders will make periodic inspections to ensure satisfactory conditions and safeguards are maintained at all times. Paragraph 4-8 a: The length of the workday for EPW, including the time for travel will not exceed that permitted for civilians in the locale who are employed in the same general type of work. b. Except as provided in subparagraph c below, the EPW will not be required to work more than 10 hours (in one day) exclusive of a one hour lunch and rest period. They will not be kept out of camp for more than 12 consecutive hours, including travel time. Rest cycles consistent with the wet bulb, black globe temperature will be monitored and followed. c. EPW may be required to work any number of hours for the efficient operation of the EPW compound messes. EPW are responsible for preparing food within these messes. Paragraph 4-9 a: Each EPW will be allowed a rest period of 24 consecutive hours every week. b. Each EPW who has worked for one full year will be given a rest of eight consecutive days during which the U.S. will give working pay to the EPW. Paragraph 4-20 a: An EPW may be injured or suffer a disability while working under circumstances that may be attributed to work. If so, DA Form 2675-R (Certificate of Work Incurred Injury or Disability) will be completed in four copies. The original will be given to the EPW; the second copy will be forwarded to the PWIC to be sent to the National Prisoner of War Information Center; and the third and fourth will be placed in the EPW's personnel file.

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14. How are retained medical personnel identified? What special conditions apply to them? How are they employed in the care of detainees? How are they certified as proficient? Who supervises them? (1.1, 1.2, 1.7, 4.1) AR 190-8, paragraph 1-5 f: Medical Personnel. Retained medical personnel shall receive as a minimum the benefits and protection given to EPW and shall also be granted all facilities necessary to provide for the medical care of EPW. They shall continue to exercise their medical functions for the benefit of EPW, preferably those belonging to the armed forces upon which they depend, within the scope of the military laws and regulations of the United States Armed Forces. They shall be provided with necessary transport and allowed to periodically visit EPW situated in working detachments or in hospitals outside the EPW camp. Although subject to the internal discipline of the camp in which they are retained such personnel may not be compelled to carry out any work other than that concerned with their medical duties. The senior medical officer shall be responsible to the camp military authorities for everything connected with the activities of retained medical personnel. Paragraph 3-4 i (4): EPW who, though not attached to the medical service of the Armed Forces, are physicians, surgeons, dentists, nurses, or medical orderlies may be required to exercise their medical functions in the interests of prisoners of war dependent on the same power after being certified per Paragraph 3-15. They will continue to be classified as EPW, but will receive the same treatment as corresponding RP (medical personnel). They will be exempted from any other work. Paragraph 3-15 b. Enemy personnel who fall within any of the following categories, are eligible to be certified as RP: (1) Medical personnel who are members of the medical service of their armed forces. (2) Medical personnel

who are exclusively engaged in: (a) The search for or the collection, transport, or treatment of the wounded or sick. (b) The prevention of disease. (c) Staffs exclusively engaged in administering medical units and establishments. c. RP whose status is certified will not be considered as EPW; however, they will receive the benefits and protection of an EPW. . . . e. Certification of the retained status of personnel will be effected upon the decision that the special identity card held by each such person is valid and authentic. This certification will be decided, if possible, at the time of processing by the camp commander. f. The Theater Commander, or CINCUSACOM will confirm the certification of the technical proficiency of the persons described in paragraph 3-15d. Qualified U.S. Military medical and religious personnel must first confirm the medical or religious proficiency of each EPW. . . . i. Verifications of retained status and religious or medical proficiency will be recorded on the DA Form 4237-R of the person concerned. Denials of claims to retained status or certification of proficiency will also be recorded together with a brief statement of the reason. k. RP, who are members of the enemy's Armed Forces, will be assigned to EPW camps. If available, they will be assigned in the ratio of two physicians, two nurses, one chaplain, and seven enlisted medical personnel per 1,000 EPW. Economy of medical staffing may be achieved at higher levels per guidance from Commanding General, HSC. As much as possible, these RP will be assigned to camps containing EPW from the same Armed Forces upon which the RP depend: m. Subject to security requirements the theater commander will ensure: (1) Full use of enemy medical personnel for the treatment of sick and wounded EPW/RP. (2) Release of U.S. medical personnel, when possible, from caring for sick and wounded EPW except for supervision and training of enemy medical personnel. n. The senior medical officer in each camp will provide close and continuing supervision of the professional activities of the retained medical persons and report all improper activities. p. EPW camp surgeons or hospital commanders in which retained persons are used will verify: (1) Accuracy of the final diagnosis. (2) Adequacy of treatment. (3) Final disposition of patients treated by RP.

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15. What measures are taken to protect US personnel from contracting diseases carried by detainees? Who monitors/enforces these procedures? (1.1, 1.2, 1.5, 1.7, 4.1) FM 3-19.40, paragraph 3-48, Prevent captives from incurring disease and nonbattle injuries (DNBI) (heat and cold injuries or communicable diseases) while in captivity. Isolate captives who exhibit obvious signs of disease (diarrhea, vomiting, or fever) until medical personnel make and evaluation. If a large number of captives appear ill, notify medical and command channels for immediate action/treatment. AR 40-5, paragraph 4-1b d. Preventive measures include personal protective measures (for example, personal hygiene, immunizations, prophylactic medications, and repellents) and environmental control measures (for example, disinfection of water supplies, proper food handling practices, area vector control, and other aspects of field sanitation). Effective implementation of preventive measures require command emphasis and command, unit, and individual soldier education on ways to prevent illnesses. AR 40-5, paragraph 4-1a a. Epidemic potentials include those diseases and injuries that can seriously compromise the ability of a military unit to carry out its mission. Preventive measures are essential. Exercise of command authority based on sound medical recommendations, troop discipline, and provision of PVNTMED services in both garrison and field settings is critical. AR 40-5, paragraph 4-2b b. PVNTMED services and teams will be familiar with disease prevention and control measures and will provide advice and guidance to commanders, units, and individuals on the prevention of communicable diseases. PVNTMED services and teams will also provide guidance to units on disease and environmental threats, specific preventive measures, and medical surveillance during and following deployments.

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16. What kind of stress counseling do you provide to Soldiers/Guards of detainees? (1.1, 1.2, 2.1, 4.1) FM 3-19.40, paragraph 2-48: Personnel assigned or attached to I/R facilities are trained on the care and control of housed personnel. They are fully cognizant of the provisions of the Geneva and UN Conventions and applicable regulations as they apply to the treatment of housed personnel. A formal training program should include stress management techniques. FM 8-51, Appendix D, D-2 f (3): Combat stress control units should provide routine mental health consultation to EPW confinement facilities. This should include: stress control advice to the command regarding the stressors of US Army MP personnel and any allied or coalition personnel working at the confinement facility; individual evaluation and intervention for guards or prisoners when indicated. AR 190-8, Paragraph 1-5, (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ).

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17. What are the procedures if a detainee in U.S. custody dies? (1.1, 1.2, 4.1) AR 190-8, paragraph 3-3a (20): Report allegations of criminal acts or war crimes committed by or against EPW/RP to the supporting element of the U.S. Army Criminal Investigation Command (USACIDC). Deaths resulting from other than natural causes will be investigated by USACIDC. Para 3-10 c: When an EPW or RP in US custody dies, the attending medical officer furnish the camp (or hospital) commander or other officer charged with their custody before death, the following information: (1) Full name of deceased. (2) ISN of deceased. (3) Date, place, and cause of death. (4) Statement that death was, or was not, the result of the deceased's own misconduct. (5) When the cause of death is undetermined, the attending medical officer will make a statement to that effect. When the cause of death is finally determined, a supplemental report will be made as soon as possible. e. The attending medical officer and the appropriate camp commander will complete a DA Form 2669-R (Certificate of Death). DA Form 2669-R will be reproduced locally on 8 1/2 by 11-inch paper. The form is located at the back of this regulation. This form is for the use of Army only. Enough copies of form will be made out to provide distribution as follows: (1) Original—information center. (2) Copy—information center (branch), if necessary. (3) Copy—The Surgeon General. (4) Copy—EPW or RP personal file. (5) The proper civil authorities responsible for recording deaths in the particular state if the EPW dies in the United States.

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18. What do you perceive to be doctrinal medical shortcomings pertaining to detainee operations? How would you fix/incorporate into updated doctrine/accomplish differently? Does the current force structure of the Medical/MS/SP Corps support the successful accomplishment of detainee operations? What are the shortcomings, and how do we fix the problem at the Army level? (1.1, 1.3, 1.5, 1.7, 2.1, 2.2, 3.1, 4.1) AR 190-8g Combatant Commanders, Task Force Commanders and Joint Task Force Commanders . . . must ensure the proper force structure is included in any joint operational plans. Commanders at all levels will ensure that all EPW, CI, RP, and ODs are accounted for and humanely treated, and that collection, evacuation, internment, transfers, release, and repatriation operations are conducted per this regulation. Combatant Commanders, Task Force Commanders and Joint Task Force Commanders will- (6) Identify requirements and allocations for Army Medical units in support of EWP, CI, and RP Programs, and

ensure that the medical annex of OPLANs, OPORDs and contingency plans includes procedures for treatment of EPW, CI, RP, and ODs. Medical support will specifically include: (a) First aid and all sanitary aspects of food service including provisions for potable water, pest management, and entomological support. (b) Preventive medicine. (c) Professional medical services and medical supply. (d) Reviewing, recommending, and coordinating the use and assignment of medically trained EPW, CI, RP and OD personnel and medical material. (e) Establishing policy for medical repatriation of EPW, CI and RP and monitoring the actions of the Mixed Medical Commission.

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19. If you noticed any markings and/or injuries on a detainee that might lead you to believe the detainee was being abused, what would you do with the information? Do your subordinates know the reporting procedures if they observe or become aware of a detainee being abused? (1.1, 1.2, 1.6, 4.1) **(Serious Incident Report/Commander's Inquiry, etc)** AR 190-40 paragraph 2-1, Military and civilian personnel assigned to or accompanying a DoD Component know that they shall report reportable incidents through their chain of command and that such reports also may also be made through other channels, such as the military police, a judge advocate, or an Inspector General.) AR 190-8, paragraph 3-3a (20): Report allegations of criminal acts or war crimes committed by or against EPW/RP to the supporting element of the U.S. Army Criminal Investigation Command (USACIDC). Deaths resulting from other than natural causes will be investigated by USACIDC. Paragraph 2-1 a (1) (d): The use of physical or mental torture or any coercion to compel prisoners to provide information is prohibited. Paragraph 5-1 a (1): No form of physical torture or moral coercion will be exercised against the CI. AR 190-40, Paragraphs 2-1a and 2-1b. a. Incidents listed in appendix B and appendix C are reportable to HQDA as Category 1 and 2 serious incidents respectively. b. Submission of an SIR will not be delayed due to incomplete information. All pertinent information known at the time of SIR submission will be included. Additional required information will be provided in a subsequent add-on report. AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident.

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20. Overall, how do you feel detainees are being treated at the infirmary, collection points and/or detention facilities? What systemic weaknesses have you identified? **No standard. Personal observations.** (1.1, 1.2, 2.1, 4.1)

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21. What AARs or lessons learned have you written or received regarding detainee operations? Can I get a copy? (preferably on disk) (2.2) AR 350-1, paragraph 4-3 c: The after action review is a structured review process that allows military training participants to discover how and why certain events actually happened and how to improve future task performance. The reviews focus on military training objectives, on performance according to Army standards, and on discovering lesson learned for sustaining and improving collectives and individual task performance proficiency.

22. What do you perceive as the mission of your unit? Describe the importance of your role in that mission. **(Insight to the Soldier's understanding and attitude concerning unit mission and their role)** AR 600-20 Command Policy 2-1. Chain of Command *a.* The chain of command assists commanders at all levels to achieve their primary function of accomplishing the unit's assigned mission while caring for personnel and property in their charge. A simple and direct chain of command facilitates the transmittal of orders from the highest to the lowest levels in a minimum of time and with the least chance of misinterpretation. *b.* Commanders delegate sufficient authority to soldiers in the chain of command to accomplish their assigned duties, and commanders may hold these soldiers responsible for their actions.

23. Describe your working environment and living conditions since being in Theater. **(Identify physical and psychological impact on Soldier's attitude).** (1.2, 1.3, 1.4, 1.5, 1.6, 1.7) FM 10-1, Ch. 7, para. 3, "Tactical Vision. A primary QMC focus at the tactical level will continue to be on sustainment of the soldier. Each company-sized unit will have two cooks and a small, state-of-the-art field kitchen. This provides a limited capability to prepare or heat meals and supplements. An improved containerized capability for providing responsive laundry and shower support well forward on the battlefield must be developed. Frontline soldiers require brief respites from the rigors associated with combat. A facility complex (Force Provider) will be available in which they can shower, clean their clothes, eat hot meals, and rest in an environmentally controlled shelter.

24. Describe the unit command climate and Soldier morale. Has it changed or evolved since you have been in Theater? **(Identifies Soldier's perception of the chain of command and Soldier attitude. Does the Soldier feel supported? Do Soldiers feel the Command cares? Are they getting clear guidance?)** 1 AR 600-20 • 13 May 2002. 1-5. Command, b. Elements of command. *c.* The commander is responsible for establishing leadership climate of the unit and developing disciplined and cohesive units. This sets the parameters within which command will be exercised and, therefore, sets the tone for social and duty relationships within the command. (1) Commanders and other leaders

committed to the professional Army ethic promote a positive environment. If leaders show loyalty to their soldiers, the Army, and the Nation, they earn the loyalty of their soldiers. If leaders consider their soldiers' needs and care for their well-being, and if they demonstrate genuine concern, these leaders build a positive command climate. (2) Duty is obedient and disciplined performance. Soldiers with a sense of duty accomplish tasks given them, seize opportunities for self-improvement, and accept responsibility from their superiors. Soldiers, leader and led alike, work together to accomplish the mission rather than feed their self-interest. .

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25. Are you aware of any incidences of detainee or other abuse in your unit? AR 190-8, 1-5. General protection policy a. U.S. policy, relative to the treatment of EPW, CI and RP in the custody of the U.S. Armed Forces, is as follows: (1) All persons captured, detained, interned, or otherwise held in U.S. Armed Forces custody during the course of conflict will be given humanitarian care and treatment from the moment they fall into the hands of U.S. forces until final release or repatriation. (2) All persons taken into custody by U.S. forces will be provided with the protections of the GPW until some other legal status is determined by competent authority. (3) The punishment of EPW, CI and RP known to have, or suspected of having, committed serious offenses will be administered IAW due process of law and under legally constituted authority per the GPW, GC, the Uniform Code of Military Justice and the Manual for Courts Martial. (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ). b. All prisoners will receive humane treatment without regard to race, nationality, religion, political opinion, sex, or other criteria. The following acts are prohibited: murder, torture, corporal punishment, mutilation, the taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. c. All persons will be respected as human beings. They will be protected against all acts of violence to include rape, forced prostitution, assault and theft, insults, public curiosity, bodily injury, and reprisals of any kind. They will not be subjected to medical or scientific experiments. This list is not exclusive. EPW/RP are to be protected from all threats or acts of violence. d. Photographing, filming, and video taping of individual EPW, CI and RP for other than internal Internment Facility administration or intelligence/counterintelligence purposes is strictly prohibited. No group, wide area or aerial photographs of EPW, CI and RP or facilities will be taken unless approved by the senior Military Police officer in the Internment Facility commander's chain of command. e. A neutral state or an international humanitarian organization, such as the ICRC, may be designated by the U.S. Government as a Protecting Power (PP) to monitor whether protected persons are receiving humane treatment as required by the Geneva Conventions. The text of the Geneva Convention, its annexes, and any special agreements, will be posted in each camp in the language of the EPW, CI and RP.

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#### **ADVISEMENT OF RIGHTS (For military personnel)**

The text of Article 31 provides as follows a. No person subject to this chapter may compel any person to incriminate himself or to answer any questions the answer to which may tend to incriminate him. b. No person subject to this chapter may interrogate or request any statement from an accused or a person suspected of an offense without first informing him of the nature of the accusation and advising him that he does not have to make any statement regarding the offense of which he is accused or suspected, and that any statement made by him may be used as evidence against him in a trial by court-martial. c. No

person subject to this chapter may compel any person to make a statement or produce evidence before any military tribunal if the statement or evidence is not material to the issue and may tend to degrade him. d. No statement obtained from any person in violation of this article, or through the use of coercion, unlawful influence, or unlawful inducement, may be received in evidence against him in a trial by court-martial. (1.2, 1.6)

I am \_\_\_\_\_ (grade, if any, and name), a member of the (DAIG). I am part of a team inspecting detainee operations, this is not a criminal investigation. I am reading you your rights because of a statement you made causes me to suspect that you may have committed \_\_\_\_\_. (specify offense, i.e. aggravated assault, assault, murder). Under Article 31, you have the right to remain silent, that is, say nothing at all. Any statement you make, oral or written, may be used as evidence against you in a trial by courts-martial or in other judicial or administrative proceedings. You have the right to consult a lawyer and to have a lawyer present during this interview. You have the right to military legal counsel free of charge. In addition to military counsel, you are entitled to civilian counsel of your own choosing, at your own expense. You may request a lawyer at any time during this interview. If you decide to answer questions, you may stop the questioning at any time. Do you understand your rights? Do you want a lawyer? (If the answer is yes, cease all questions at this point). Are you willing to answer questions?

26. Describe what you understand happened leading up to and during the incident(s) of abuse. (No applicable standard) \_\_\_\_\_

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27. Describe Soldier morale, feelings and emotional state prior to and after these incidents? (Identifies unit and Soldier morale, atmosphere, mood, attitude, stress, retaliation, preemption, family crisis) \_\_\_\_\_

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28. Was this incident reported to the chain of command? How, when & what was done? What would you have done? (Identifies compliance, procedure, timeliness, Soldier perception of action taken and effect on unit morale.) (1.2, 1.6) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the

following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and with-out adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

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29. How could the incident have been prevented? (Identifies root cause and perceived solution) (No applicable standard)

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30. Describe any unit training or other programs that you are aware of that teach leaders and Soldiers how to recognize and resolve combat stress. FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The measures which reduce battle fatigue and prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel. )

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31. What measures are in place to boost morale or to relieve stress? (**Identifies perceived solution.**) FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The measures which reduce battle fatigue and prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel.

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32. What measures could the command enact to improve the morale and command climate of your unit? (**Identifies perceived solution.**) FM 22-103, Leadership and Command at Senior Levels, 21 Jun 1987, p. 6, - "Leadership: The process of influencing others to accomplish the mission by providing purpose, direction, and motivation." AR 600-100, Army Leadership, 17 Sep 1993, p. 8, 1987- "Senior-level leadership is the art of direct and indirect influence and the skill of creating the conditions for sustained organizational success to achieve the desired result. But, above all, it is the art of taking a vision of what must be done, communicating it in a way that the intent is clearly understood, and then being tough enough to ensure its execution."

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Code of SMC at FSB to build camps.

Supply list for camp ops -

sanitary supplies

rodents / flies, chlorine

Ant for capacity of DO facility

Deployed to 5/8

PM DET at home - 61<sup>st</sup>

had ENTO

Wild packs of dogs

killed.

BT for mosquito sprayers - esp. Baghdad  
(water main breaks)

No commo on MTOE

No hardened vehicles, no security on convoys  
(no convoy)

No generator on MTOE

3629

DAIG



Fusion 200-2 (FST supplies -  
too heavy)

- add fly bait
- larvicide
- del poisons.

make part  
of MES

No NSN for chlorine bits.

No uniforms treated 5/4 - did six more in.

φ DEET

φ transportation for supplies out of Kuwait

field sanit bits too expensive.

CO or

No support from M&B. PM lost to get anything. Not seen as important.

Local entities brought on base camps

- eventually F&B from DIVS&B

Units didn't want interference, inspections.

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PM out of F&B/M&B to DIVS&B.

Going to 5 BCTs - 2 9/5 at each  
F&B, E7/CPT at QHOC.

MTDF only supplies 3 teams, only 1 NCO.  
Need 1 NCO at each F&B/BCT.

No authority given low rank.

# INTERROGATOR OIC/NCOIC

b6-2

Rank MAJ Branch MT Date: 22 Mar Unit BCT, (10)  
 Duty Position S2 How Long in Job 2 yrs.  
 Interviewer [REDACTED] How Long in Country 1 yr.

1. What references/standards/publications/SOPs do you use to conduct interrogation Operations? (1.1, 1.2, 2.1, 4.1) AR 190-8, DoD Directive 5100.77, 1949 Geneva Convention, FM 34-52 Intelligence Interrogation, FM 3-19.40, These are the primary source for standards and doctrine concerning Detainee Operations).

SMES, SOPs are in country.

2. How does the command ensure that interrogation Operations is conducted in compliance with the international Law of war? (OPORD/FRAGO, ROE, Interrogation Techniques, general orders, humane treatment, etc) (1.1, 1.2, 1.6, 4.1) AR 190-8, paragraph 1-4g. (Combatant Commanders, Task Force Commanders, and joint Task Force Commander have the overall responsibility for the EPW, CI, and RP program, operations, and contingency plans in the theater of operation involved to ensure compliance with international law of war. DoD Directive 2310.1 provides that persons captured or detained by the U S Military services shall normally be handed over for safekeeping to U S Army Military Police, or to detainee collecting points or other holding facilities and installations operated by U S Military Police as soon as practical.) ROE from CJCS ISO Iraqi operations dated 251600Z Apr 03 para 10 (U) All commanders will ensure their personnel are familiar with the law of armed conflict and with these ROE."

Colson mandated pre-OEF. OIF fell back on OEF experience.

Locally No. 311<sup>th</sup> overnight.  
Div. IG inspection

3. Did you and your soldiers undergo Level B Law of War training prior to deployment? Explain what training occurred. Is there a plan to train new Soldiers (replacements) to the unit? Did this training include the treatment of Detainees? Explain. (1.1, 1.2, 1.4, 1.6, 4.1) (AR 350-1 para 4-14c. (2) and table G-1 Refresher training, dated 9 April 2003), Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit. AR 190-8 para 1-5(4)(C DOD Directive 5100.77), All prisoners will receive humane treatment and that the following acts are prohibited murder, torture, corporal punishment, mutilation, taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. Prisoners will be protected against all acts of violence to include public curiosity. (DoD Directive 5100.77, para 5.5.1, The Secretaries of the Military Departments shall provide directives, publications, instructions, and training so that the principles and rules of law of war will be known to members of their respective Departments, the extent of such knowledge to be commensurate with each individual's duties and responsibilities.)

OJT - (2) sent

Law of war train-up pre-deployment.

4. What Home Station/Mob Site Training did you and your soldiers receive prior to deployment to help your unit prepare for Detainee/interrogation Operations? Describe it. How did the training prepare you to conduct Detainee/interrogation Operations for this deployment? How did this training distinguish between the different categories of Detainees (EPWs, RPs, CIs, etc.)? (1.1, 1.2, 1.4, 4.1) DoDD 2310.1 (The U.S. Military Services shall be given the necessary training to ensure they have knowledge of their obligations under the Geneva Conventions (references (b) through (e)) and as required by DoD Directive 5100.77 (reference (f)) before an assignment to a foreign area where capture or detention of enemy personnel is possible.) (AR 350-1 para 4-14c.(2) and table G-1 Refresher training, dated 9 April 2003), Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit. AR 190-8 para 1-5(4)(C DOD Directive 5100.77), All prisoners will receive humane treatment and that the following acts are prohibited murder, torture, corporal punishment, mutilation, taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. Prisoners will be protected against all acts of violence to include public curiosity. (DoD Directive 5100.77, para 5.5.1, The Secretaries of the Military Departments shall provide directives, publications, instructions, and training so that the principles and rules of law of war will be known to members of their respective Departments, the extent of such knowledge to be commensurate with each individual's duties and responsibilities.)

JRSC  
SS's / A

All detainees processed same, but  
severe got orange jumpsuit.

5. What training did you receive on the established Rules of Engagement (ROE)? How often does this occur? Does this training include Rules of Interaction (ROI)? (1.4, 4.1) (DoD Directive 5100.77, para 5.5.1, The Secretaries of the Military Departments shall provide directives, publications, instructions, and training so that the principles and rules of law of war will be known to members of their respective Departments, the extent of such knowledge to be commensurate with each individual's duties and responsibilities.) ROE from CJCS ISO Iraqi operations dated 251600Z Apr 03 para 10 (U) All commanders will ensure their personnel are familiar with the law of armed conflict and with these ROE." AR 190-8, paragraph 3-6 a, The following acts will not be permitted: (1) Fraternization between EPW, RP and U.S. military or civilian personnel. Fraternization is defined as improper or intimate communications or actions between U.S. Armed Forces personnel and EWP/RP.

ROE throughout - down chain from SJA

No specific ROE, but part of inter. process.

Said SJA for  
identifying det's

6. What procedures are in place to ensure your Soldiers do not violate the rules of engagement for the interment facility/collection point? (1.1, 1.2, 1.4, 1.6, 4.1) FM 3-19.40, paragraph 2-29, An MP commander ensures that soldiers understand use-of-force guidelines and the ROE established by higher headquarters for each mission. Because the use of force and ROE vary depending on the category of housed personnel and the operational environment, the commander develops SOPs that follow the guidance provided. He balances the physical security of force with mission accomplishment and the protection of deployed forces. ROE from CJCS ISO Iraqi operations dated 251600Z Apr 03 para 10 (U) All commanders will ensure their personnel are familiar with the law of armed conflict and with these ROE."

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7. What guidance or policies are there to ensure fraternization is not taking place between U.S military personnel and the detainees? (1.1, 1.2, 1.4,1.6, 4.1) AR 190-8, paragraph 3-6 a, The following acts will not be permitted: (1) Fraternization between EPW, RP and U.S. military or civilian personnel. Fraternization is defined as improper or intimate communications or actions between U.S. Armed Forces personnel and EWP/RP.

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8. What training have you and your subordinates received to ensure your knowledge of DO is IAW the provisions under the Geneva Convention? (1.1, 1.2, 1.3, 4.1) DoDD 2310.1 para 3-3.2 (The U.S. Military Services shall be given the necessary training to ensure they have knowledge of their obligations under the Geneva Conventions (references (b) through (e)) and as required by DoD enemy personnel is possible.) AR 190-8, paragraph 4(b-c) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ). All prisoners will receive humane treatment without regard to race, nationality, religion, political opinion, sex, or other criteria. The following acts are prohibited: murder, torture, corporal punishment, mutilation, the taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. All persons will be respected as human beings. They will be protected against all acts of violence to include rape, forced prostitution, assault and theft, insults, public curiosity, bodily injury, and reprisals of any kind. They will not be subjected to medical or scientific experiments. This list is not exclusive. EPW/RP are to be protected from all threats or acts of violence.)

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9. What is the OIC/NCOICs overall role in detainee operation process? What involvement do the OIC/NCOICs have in the interrogation process of detainee operations? Do the OIC/NCOICs provide a means to validate detainee's information? Do the OIC/NCOICs provide input as to the disposition of the detainee? (1.1, 1.2, 1.6, 4.1) (FM 34-52 page 2-12 Battalion S2 Controls Interrogation employed for temporary period at battalion level receives PIR, IR, and SIR from the supported battalion S2. This will ensure interrogators are fully oriented to the battalion's collection mission. In other instances, interrogators may be placed at brigade in an "on call" status, from which they can proceed to any of the subordinate battalions as circumstances warrant. Upon completion of a low-level, immediate-type interrogation, they can return to brigade and again become available for immediate employment. Commanders and S2s below brigade level who are unable to obtain interrogation support from higher echelons should include provisions in unit and staff standing operating procedures (SOPs) for the "tactical questioning" (not interrogation) of EPWs or detainees. They should identify assigned personnel for language capability. Interrogation personnel should provide training in the area of tactical questioning to designated S2 personnel. The potential for abuse of the EPW is greatest at the initial capture and tactical questioning phase. With the excitement and stress of the battlefield, it may become easy for unskilled personnel to resort to illegal techniques to elicit critical information. Instruction must stress the importance of the proper treatment of EPWs. Emphasize that the abuse of an EPW at the initial stage of contact often renders future interrogation futile. If you are engaged in, or supervising the tactical questioning of EPWs, you are responsible for

ensuring that EPWs are treated in accordance with the requirement of international and US law. Any tactical questioning conducted must be in response to the supported commander's PIR.)

*Side oversight, No interr.*

10. Where are your screening sites located (where detainees are interrogated and screened)? Are these facilities adequate for your needs? Do you have enough interrogators for your operation needs? What are your personnel shortfalls? (1.1, 1.2, 1.7, 1.8) Local SOPs (FM 34-52 Intelligence Interrogation, page 2-9 At brigade level, EPWs can be detained in open fields, courtyards, gardens, jungle clearings, or similar sites if they are hidden from enemy observation. If necessary, these areas can be enclosed with barbed wire far more efficient EPW handling. Because EPWs seldom remain at a forward collecting point for more than a few hours, EPWs are not usually kept in a building or other shelter. Interrogation facilities at battalion and brigade are kept to a minimum. 2-10 Compared to brigade facilities, division interrogator facilities are expanded. When practicable, interrogations at division should be conducted in improvised interrogation rooms in buildings adjacent to the division collecting point. If possible, separate rooms should be available to permit several interrogations at once. 2-22) The EAC interrogation facility will normally be designated as the Theater Interrogation Facility (TIF). A TIF is staffed by US Army interrogators and analysts, with support from Air Force, Navy, Marine Corps, and other US national agencies as required. In a multinational operation, a combined interrogation facility (CIF) may be established with allied interrogation augmentation.)

*No.*  
*TIF teams on site in same route, 9/2 90% at CP.*  
*Push TIF team at each BN, then 2-3 at BDE. (5 to total)*  
*Dep. on size of AO. SZ based on NTC model, not*  
*24/7 for 1 yr. Need more for 3 shifts of 8 hrs. for continuous ops.*  
*No stop loss - down PCS 5 replacement*

11. What is the procedure on how to identify a detainee who may have intelligence information? Who performs this procedure? Are MPs involved in the decision-making? Are PIRs used as a basis for the identification of detainees of interest, personality lists used, etc? (1.1, 1.2, 2.1) (FM 34-52 Intelligence Interrogation, page 3-2) If time permits, screeners should question holding area personnel about the EPWs and detainees. Since these personnel are in almost constant contact with the EPWs and detainees, their descriptions of specific ones can help identify sources who might answer the supported commander's PIR and IR. Screeners should identify and note those EPWs and detainees whose appearance and behavior indicate they are willing to cooperate immediately or are unlikely to cooperate ever. Unless time is critically short, screeners should--personally observe the EPWs and detainees. Pay attention to rank and branch of service insignias, and condition of uniform and equipment. Carefully observe the behavior demonstrated by other EPWs and detainees. Look for things like attempts to talk to the guards, intentional placement in the wrong segregation group, or any overt signs of nervousness, anxiety. Or fright. Note any EPWs and detainees whose appearance or behavior indicates willingness to talk.)

*BN SZ BN CDRs - power thru # - political contacts ->*  
*intel.*

12. Have you personally observed the interrogation operations at this Facility to determine if your unit has the necessary support and supplies to run the facilities? If so, what did you find? (1.1, 1.2, 1.5, 4.1) AR 190-8, paragraph 1-4g(2), (Commanders will plan and procure logistical support to include: transportation, subsistence, personal, organizational and NBC clothing and equipment items, mail collection and distribution, laundry, and bath for DO. (FM 3-19.40,

para 7-101, Supply functions in a confinement facility are the same as those in other military units. However, stronger security measures are necessary to prevent certain supplies and equipment from falling into the hands of prisoners.)

No. Observed source mtgs - I intel officers  
1 police.

13. What control measures are you using to maintain discipline and security within the interrogation facility? (1.1, 1.2, 4.1) AR 190-8, paragraph 3-6 (Measures needed to maintain discipline and security will be established in each camp/collection point and rigidly enforced. The camp commander will maintain records of disciplinary punishments. These records will be open to inspection by the protecting power. The following acts will not be permitted; Fraternization between EPW, RP and U.S. military or civilian personnel. Fraternization is defined as improper or intimate communications or actions between U.S. Armed Forces personnel and EPW/RP. Donating or receiving gifts or engaging in any commercial activity between persons in U.S. custody and U.S. personnel. Setting up of courts by detainees. Disciplinary powers will not be delegated to or exercised by EPW/RP. Punishment will not be administered by EPW/RP.)

mtgs outside tent:

14. How many people are authorized to be present in the room when interrogating/screening a detainee? Under what circumstances are you required and authorized to have more people? (1.7) (no standard)

No set limit, but tent capacity of 4.

15. Are the personal effects of a detainee released to the interrogator or is the interrogator allowed to examine the items? (**DOCUMENT HANDLING**) (1.1, 1.2) (FM 34-52 Intelligence Interrogation, page 4-4 The accountability phase begins at the time the document is captured. Original documents must not be marked, altered, or defaced in any way. Documents must be clearly tagged. The capturing unit attaches a capture document tag (DA Form 5976, Part CNOTE: Different tag. AR 190-8, para 2-1a(b) says use a DD Form 2745 and (d) says Part C is attached to property confiscated from the detainee.) to each document; multiple CEDs are bundled or bagged together. The capture data is always recorded on a captured document tag. The capture document tag should be assigned a sequential number at the first formal exploitation point, showing the nationality of the capturing force by national letters prescribed in STANAG 1059. The capturing unit will record the information as follows: Time document was captured, recorded as a DTG. Place document was captured, including the six-or-eight-digit coordinate, and description of the location of capture. Identify of the capturing unit. Identity of the source from whom the document was taken, if applicable. Summary of the circumstances under which the document was found. CED intelligence value will be determined and exploited as early as possible. The document must be forwarded immediately to higher headquarters. Custody of CEDs transfer (normally from the MP) to MI when MI identifies a document as having intelligence interest. When MI interest in an EPW-related CED stops, MI gives it back to the MP.)

MPs interviewed carefully & stored. Yes, but  
had issues.

16. Are you receiving sufficient information from the capture paperwork to properly conduct screenings and interrogations? Are the current requirements for documentation of a captured person sufficient or excessive? Did the changes in procedures as far as documenting captured person improve your ability to gather intelligence? (1.1, 1.2, 2.2, 4.1) (FM 3-19.40, paragraph 2-3, The commander is responsible for the administrative processing of each internee. When processing is complete, he submits a DA Form 2674-R to the servicing internment/resettlement information center (IRIC), which function as the field operations agency for the national IRIC located in CONUS.) (AR 190-8, para 2-1, a. (1) (b) (c), All equipment, documents, and personal property confiscation during the search must be tagged and administratively accounted for by the capturing unit. DD Form 2745, Part C is attached to the property confiscated from the Detainee, so that it may later be matched to that Detainee to include the CJTF Directive on proper paperwork procedures)

→ Ant of paperwork vs. automated

17. What are the procedures for the transfer of custody of Detainees from the MP/Guard personnel to Military Intelligence personnel? When the detainee is returned to the guard force, what procedures occur? (what info is passed on to the Guard Force (type of reward?)...observation report, paper trail audit) (1.1, 1.2, 4.1) (FM 3-19-40, chapter 3/3-68). If a captive or his equipment or documents are removed from the receiving/processing line, account for them on DD Form 2708 and DA Form 4137. 3-68. The site is located where screeners can observe captives as they are segregated and processed. It is shielded from the direct view of captives and is far enough away that captives cannot overhear screeners' conversations. The site has an operation, administrative, and interrogation area. The interrogation area accommodates, a captive, a guard, and an interpreter as well as furniture. Lights are available for night operations. Accountability procedures are implemented and required forms are available.)

NA - only to DIV.

18. Describe the screening /background checks required prior to hiring interpreters. Are they trusted by U.S. Soldiers? (1.3, 1.7, 4.1) (FM 34-52, FM 3-19.40, para 4-6, Request interpreters from MI, PSOP, allied forces, or local authorities as necessary.)

Only interview Cat II at BDF

No records to do background check. Word of mouth / references

Not on AVIS list.

Titan - made us do vetting - no process.

Cat II up & treated?ing only. No cat II's at BN.

19. What is your perception of the contract interrogators training and capabilities to conduct proper interrogations of detainees? (1.4) (No Standards apply on perceptions.)

NA. Would have been helpful to have them

Screen employees.



20. How are translators/linguists used during the screening/interrogation process? Do you trust the interpreter? How are MPs/Guards used during this process? (1.1, 1.2, 1.7, 2.1) (FM 34-52 Intelligence Interrogation, use of interpreter page 3-30 Interpreter briefing: Once the interrogator has chosen a method of interpretation, he must brief his interpreter. This briefing must cover current tactical situation, background information obtained on the source, specific interrogation objectives, method of interpretation to be used, the conduct of the interrogation. ) (use METT-T)

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21. Do counterintelligence agents conduct interrogations of detainees? What training have they received for conducting interrogations? What is their understanding of the laws of war as it pertains to interrogating detainees? (1.1, 1.2, 1.5) (Counterintelligence agents are not authorized to interrogate detainees unless they are trained on FM 34-52, FM 27-10)

*yes.*  
*OGAs ← FBI - good relationship. Interrogations always c*  
*unit interv.*  
*if time took det (apprehension & trips) → credibility issue.*

22. What do you perceive to be doctrinal shortcomings pertaining to Interrogation Operations? How would you fix/incorporate into updated doctrine/accomplish differently? How about Force Structure to ensure Interrogation Operations can be successfully accomplished? What are the shortcomings and how do we fix the problem at the Army-level? (1.1, 1.3, 1.5, 1.7, 4.1).

*focus on CTC, but reality takes longer.*  
*Schoolhouse doesn't know what to fix - disconnect*  
*g/fc long & reality. Need experienced folks to*  
*write doctrine.*

23. What are the procedures if a detainee in U.S. custody dies? (1.1, 1.2, 4.1) AR 190-8, paragraph 3-3a (20): Report allegations of criminal acts or war crimes committed by or against EPW/RP to the supporting element of the U.S. Army Criminal Investigation Command (USACIDC). Deaths resulting from other than natural causes will be investigated by USACIDC. Para 3-10 c: When an EPW or RP in US custody dies, the attending medical officer furnish the camp (or hospital) commander or other officer charged with their custody before death, the following information: (1) Full name of deceased. (2) ISN of deceased. (3) Date, place, and cause of death. (4) Statement that death was, or was not, the result of the deceased's own misconduct. (5) When the cause of death is undetermined, the attending medical officer will make a statement to that effect. When the cause of death is finally determined, a supplemental report will be made as soon as possible. e. The attending medical officer and the appropriate camp commander will complete a DA Form 2669-R (Certificate of Death). DA Form 2669-R will be reproduced locally on 8 1/2 by 11-inch paper. The form is located at the back of this regulation. This form is for the use of Army only. Enough copies of form will be made out to provide distribution as follows: (1) Original-information center. (2) Copy-information center (branch), if necessary. (3) Copy-The Surgeon General. (4) Copy-EPW or RP personal file. (5) The proper civil authorities responsible for recording deaths in the particular state if the EPW dies in the United States.

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Call higher. 15-6. CID.

24. Do you know of the procedures to get stress counseling (**Psychiatrist, Chaplain, Medical**)? Do your Soldiers know of the procedures to get counseling (**Psychiatrist, Chaplain, Medical**)? (1.1, 1.2, 1.6, 2.1, 4.1) FM 3-19.40, paragraph 2-48: Personnel assigned or attached to I/R facilities are trained on the care and control of housed personnel. They are fully cognizant of the provisions of the Geneva and UN Conventions and applicable regulations as they apply to the treatment of housed personnel. A formal training program should include stress management techniques. FM 8-51, Appendix D, D-2 f (3): Combat stress control units should provide routine mental health consultation to EPW confinement facilities. This should include: stress control advice to the command regarding the stressors of US Army MP personnel and any allied or coalition personnel working at the confinement facility; individual evaluation and intervention for guards or prisoners when indicated. AR 190-8, Paragraph 1-5, (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ).

Combat stress tent at CCO. CH.  
at Talafer.

25. Are you aware of your requirement to report abuse or suspected abuse of detainees? (1.1, 1.2, 1.6, 4.1) AR 190-40 para 2-1, Military and civilian personnel assigned to or accompanying a DoD Component know that they shall report reportable incidents through their chain of command and that such reports also may also be made through other channels, such as the military police, a judge advocate, or an Inspector General.) AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident.

Yes. Up chain → 15-6.

26. Do your subordinates know the reporting procedures if they observe or become aware of a Detainee being abused? (1.2, 1.6) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs.

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At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

*Yes*

27. What steps would you take if a subordinate reported to you an incident of alleged Detainee abuse? (1.2, 1.6, 4.1) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: *b.* War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C, Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: *g.* Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, *a.* Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

*Up chain*

28. Do you feel you can freely report an incident of alleged Detainee abuse outside Command channels (IG, CID) (1.6, 4.1) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: *b.* War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C, Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: *g.* Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences

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of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

Yes

29. What procedures do you have to report suspected detainee abuse (IG, CID, Next Level Commander) (1.2, 1.6, 4.1) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C, Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

30. What procedures are in place for Detainees to report alleged abuse? (1.2, 1.6, 4.1) AR 190-8, para 5-1, g. Appeals and periodic review of security internment cases. (1) Appeals. The CI who are interned for imperative security reasons will be accorded the right to appeal the order directing their internment. Such appeals will be decided with the least possible delay by a board of officers. Appeals will be decided only on the grounds of the existence or nonexistence of imperative security reasons requiring the internment of the protected person. 6-4. Internee Committee a. Election. At each

camp and branch camp, CI will be elected by secret written ballot to the Internee Committee. This committee is empowered to represent the camp to the protecting powers; International Committee of the Red Cross, or other authorized relief or aid organizations and U.S. military authorities. *e. Duties. (3) (c)* The presentation and transmittal of petitions and complaints to the appropriate authorities in proportion to the kind of labor performed. 6-9. Complaints and requests to camp commanders and protecting power, *a.* Persons may make complaints or requests to the camp commander, who will try to resolve the complaints and answer the requests. If the CI are not satisfied with the way the commander handles a complaint or request, they may submit it in writing, through channels, to HQDA, ODCSOPS (DAMO - ODL) NPWIC, WASH DC 20310-0400. *b.* Persons exercising the right to complain to the protecting power about their treatment and camp may do so—(1) By mail. (2) In person to the visiting representatives of the protecting power. (3) Through their Internee Committee. *c.* Written complaints to the protecting power will be forwarded promptly through HQDA (DAMO - ODL) NPWIC, WASH DC 20310-0400. A separate letter with the comments of the camp commander will be included. Military endorsements will not be placed on any CI communications. *d.* If a protecting power communicates with a CI camp commander about any matter requiring an answer, the communication and commander's reply will be forwarded to HQDA (DAMO-ODL) NPWIC, WASH DC 20310-0400, for proper action. *e.* Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.

*Tell Inter.*

31. What do you perceive as the mission of your unit? Describe the importance of your role in that mission. (*Insight to the Soldier's understanding and attitude concerning unit mission and their role*) AR 600-20 Command Policy 2-1. Chain of Command *a.* The chain of command assists commanders at all levels to achieve their primary function of accomplishing the unit's assigned mission while caring for personnel and property in their charge. A simple and direct chain of command facilitates the transmittal of orders from the highest to the lowest levels in a minimum of time and with the least chance of misinterpretation. *b.* Commanders delegate sufficient authority to soldiers in the chain of command to accomplish their assigned duties, and commanders may hold these soldiers responsible for their actions.

32. Describe your working environment and living conditions since being in Theater. (*Identify physical and psychological impact on Soldier's attitude*). (1.2, 1.3, 1.4, 1.5, 1.6, 1.7) FM 10-1, Ch. 7, para. 3, "Tactical Vision. A primary QMC focus at the tactical level will continue to be on sustainment of the soldier. Each company-sized unit will have two cooks and a small, state-of-the-art field kitchen. This provides a limited capability to prepare or heat meals and supplements. An improved containerized capability for providing responsive laundry and shower support well forward on the battlefield must be developed. Frontline soldiers require brief respites from the rigors associated with combat. A facility complex (Force Provider) will be available in which they can shower, clean their clothes, eat hot meals, and rest in an environmentally controlled shelter.

*Austere → Improving*

33. Describe the unit command climate and Soldier morale. Has it changed or evolved since you have been in Theater? (Identifies Soldier's perception of the chain of command and Soldier attitude. Does the Soldier feel supported? Do Soldiers feel the Command cares? Are they getting clear guidance?) 1 AR 600-20 • 13 May 2002 1-5. Command, b. Elements of command. c. The commander is responsible for establishing leadership climate of the unit and developing disciplined and cohesive units. This sets the parameters within which command will be exercised and, therefore, sets the tone for social and duty relationships within the command. (1) Commanders and other leaders committed to the professional Army ethic promote a positive environment. If leaders show loyalty to their soldiers, the Army, and the Nation, they earn the loyalty of their soldiers. If leaders consider their soldiers' needs and care for their well-being, and if they demonstrate genuine concern, these leaders build a positive command climate. (2) Duty is obedient and disciplined performance. Soldiers with a sense of duty accomplish tasks given them, seize opportunities for self-improvement, and accept responsibility from their superiors. Soldiers, leader and led alike, work together to accomplish the mission rather than feed their self-interest.

*In-country R&P facility on Lake.  
COP excellent S&D, very typical skills.*

34. Are you aware of any incidences of detainee or other abuse in your unit? AR 190-8, 1-5. General protection policy a. U.S. policy, relative to the treatment of EPW, CI and RP in the custody of the U.S. Armed Forces, is as follows: (1) All persons captured, detained, interned, or otherwise held in U.S. Armed Forces custody during the course of conflict will be given humanitarian care and treatment from the moment they fall into the hands of U.S. forces until final release or repatriation. (2) All persons taken into custody by U.S. forces will be provided with the protections of the GPW until some other legal status is determined by competent authority. (3) The punishment of EPW, CI and RP known to have, or suspected of having, committed serious offenses will be administered IAW due process of law and under legally constituted authority per the GPW, GC, the Uniform Code of Military Justice and the Manual for Courts Martial. (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ). b. All prisoners will receive humane treatment without regard to race, nationality, religion, political opinion, sex, or other criteria. The following acts are prohibited: murder, torture, corporal punishment, mutilation, the taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. c. All persons will be respected as human beings. They will be protected against all acts of violence to include rape, forced prostitution, assault and theft, insults, public curiosity, bodily injury, and reprisals of any kind. They will not be subjected to medical or scientific experiments. This list is not exclusive. EPW/RP are to be protected from all threats or acts of violence. d. Photographing, filming, and video taping of individual EPW, CI and RP for other than internal Internment Facility administration or intelligence/counterintelligence purposes is strictly prohibited. No group, wide area or aerial photographs of EPW, CI and RP or facilities will be taken unless approved by the senior Military Police officer in the Internment Facility commander's chain of command. e. A neutral state or an international humanitarian organization, such as the ICRC, may be designated by the U.S. Government as a Protecting Power (PP) to monitor whether protected persons are receiving humane treatment as required by the Geneva Conventions. The text of the Geneva Convention, its annexes, and any special agreements, will be posted in each camp in the language of the EPW, CI and RP.

*Yes. BN "detention" facility.*

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### ADVISEMENT OF RIGHTS (For military personnel)

The text of Article 31 provides as follows a. No person subject to this chapter may compel any person to incriminate himself or to answer any questions the answer to which may tend to incriminate him. b. No person subject to this chapter may interrogate or request any statement from an accused or a person suspected of an offense without first informing him of the nature of the accusation and advising him that he does not have to make any statement regarding the offense of which he is accused or suspected, and that any statement made by him may be used as evidence against him in a trial by court-martial. c. No person subject to this chapter may compel any person to make a statement or produce evidence before any military tribunal if the statement or evidence is not material to the issue and may tend to degrade him. d. No statement obtained from any person in violation of this article, or through the use of coercion, unlawful influence, or unlawful inducement, may be received in evidence against him in a trial by court-martial. (1.2, 1.6)

I am \_\_\_\_\_ (grade, if any, and name), a member of the (DAIG). I am part of a team inspecting detainee operations, this is not a criminal investigation. I am reading you your rights because of a statement you made causes me to suspect that you may have committed \_\_\_\_\_. (specify offense, i.e. aggravated assault, assault, murder). Under Article 31, you have the right to remain silent, that is, say nothing at all. Any statement you make, oral or written, may be used as evidence against you in a trial by courts-martial or in other judicial or administrative proceedings. You have the right to consult a lawyer and to have a lawyer present during this interview. You have the right to military legal counsel free of charge. In addition to military counsel, you are entitled to civilian counsel of your own choosing, at your own expense. You may request a lawyer at any time during this interview. If you decide to answer questions, you may stop the questioning at any time. Do you understand your rights? Do you want a lawyer? (If the answer is yes, cease all questions at this point). Are you willing to answer questions?

35. Describe what you understand happened leading up to and during the incident(s) of abuse. (No applicable standard) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

36. Describe Soldier morale, feelings and emotional state prior to and after these incidents? (Identifies unit and Soldier morale, atmosphere, mood, attitude, stress, retaliation, preemption, family crisis) \_\_\_\_\_  
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\_\_\_\_\_

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37. Was this incident reported to the chain of command? How, when & what was done? What would you have done? (Identifies compliance, procedure, timeliness, Soldier perception of action taken and effect on unit morale.) (1.2, 1.6) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and with-out adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

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38. How could the incident have been prevented? (Identifies root cause and perceived solution) (No applicable standard)

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39. Describe any unit training or other programs that you are aware of that teach leaders and Soldiers how to recognize and resolve combat stress. FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The measures which reduce battle fatigue and prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive

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assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel. ) \_\_\_\_\_

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40. What measures are in place to boost morale or to relieve stress? (**Identifies perceived solution.**) FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The measures which reduce battle fatigue and prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel. \_\_\_\_\_

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41. What measures could the command enact to improve the morale and command climate of your unit? (**Identifies perceived solution.**) FM 22-103, Leadership and Command at Senior Levels, 21 Jun 1987, p. 6, - "Leadership. The process of influencing others to accomplish the mission by providing purpose, direction, and motivation." AR 600-100, Army Leadership, 17 Sep 1993, p. 8, 1987- "Senior-level leadership is the art of direct and indirect influence and the skill of creating the conditions for sustained organizational success to achieve the desired result. But, above all, it is the art of taking a vision of what must be done, communicating it in a way that the intent is clearly understood, and then being tough enough to ensure its execution." \_\_\_\_\_

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NCOIC  
GUARD FORCE  
COLLECTION POINT & INTERNMENT FACILITY  
INTERVIEW QUESTIONS

Rank C6 Branch MP State/Component \_\_\_\_\_ Date 25 Mar 04  
Unit 101 MP CO Duty Position Team Leader How Long in Job 1 yr.  
Interviewer (5)(6)-2 *rotating 24-hr periods*

1. How did you prepare yourself and your Soldiers to become familiar with and understand the applicable regulations, OPORD/FRAGOs directives, international laws and administrative procedures to operate an I/R facility or Collection Point? (1.1, 1.2, 1.4, 1.6, 4.1) AR 350-1 para 4-14 c (2) and table G-1 Refresher training, dated 9 April 2003, Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit. FM 3-19.40, paragraph 2-2, Commanders are familiar with applicable regulation, directives, international laws, and administrative procedures. ) ROE from CJCS ISO Iraqi operations dated 251600Z Apr 03 para 10 (U) All commanders will ensure their personnel are familiar with the law of armed conflict and with these ROE."

*No direct support for SO*

*Only general support, but SO's having trouble*

*Dev. own SOP based on AR & FM & MP handbook.*

*Fall back on experience & confinement facilities here.*

*Run like combat confinement.*

2. Did you and all of your Soldiers undergo Law of War training prior to deployment? Explain what training occurred. What is your plan to train new Soldiers (replacements) to the unit? Did this training include the treatment of Detainees? Explain. (1.1, 1.2, 1.4, 4.1) (AR 350-1 para 4-14c.(2) and table G-1 Refresher training, dated 9 April 2003), Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit. AR 190-8 para 1-5(4)(C DOD Directive 5100.77), All prisoners will receive humane treatment and that the following acts are prohibited murder, torture, corporal punishment, mutilation, taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. Prisoners will be protected against all acts of violence to include public curiosity. (DoD Directive 5100.77, para 5.5.1, The Secretaries of the Military Departments shall provide directives, publications, instructions, and training so that the principles and rules of law of war will be known to members of their respective Departments, the extent of such knowledge to be commensurate with each individual's duties and responsibilities.)

*Yes. Briefings for SJA re: GC, myths, treatment of detainees.*

*Continuity book for replacements + OJT*

3. What policies/procedures does your unit have in place to support the U. S. policy relative to the humane treatment of Detainees? (1.1, 1.2, 4.1) AR 190-8, paragraph 1-5 a-g, (All persons detained, captured, interned, or otherwise held in U S Armed Forces custody during

the course of conflict will be given humanitarian care and treatment from the moment they fall into the hands of U S forces until final release and repatriation. All persons taken into custody by U S forces will be provided with the protection of the GPW until some other legal status is determined by competent authority.)

4. Does your unit have a formal training program for the care and control of Detainees? Describe what it includes. **(For Permanent Internment Facilities only)** (1.1, 1.2, 1.4) (FM 3-19.40, para 2-48. Personnel assigned or attached to I/R facilities are trained on the care and control of housed personnel. They are fully cognizant of the provisions of the Geneva and UN Conventions and applicable regulations as they apply to the treatment of housed personnel. A formal training program should include— \* Principles and laws of land warfare, specifically provisions of Geneva and UN Conventions and HN laws and customs. \* Supervisory and human relations techniques. \* Methods of self-defense. \* The use of force, the ROE, and the ROI. \* Firearms qualification and familiarization. \* Public relations, particularly CONUS operations. \* First aid. \* Stress management techniques. \* Facility regulations and SOPs. \* Intelligence and counterintelligence techniques. \* Cultural customs and habits of internees. \* The basic language of internees. FM 3-19.40 para 2-49. The guard force should receive additional training in— \* Riot control measures, control agents, and dispersers. \* QRF actions. \* Searching techniques, including the use of electronic detection devices. \* Nonlethal equipment and weapons.

5. What training did your unit receive on the established Rules of Engagement (ROE)? How often does this occur? Does this training include Rules of Interaction (ROI)? (1.4, 4.1) ((DoD Directive 5100.77, para 5.5.1, The Secretaries of the Military Departments shall provide directives, publications, instructions, and training so that the principles and rules of law of war will be known to members of their respective Departments, the extent of such knowledge to be commensurate with each individual's duties and responsibilities.) ROE from CJCS ISO Iraqi operations dated 251600Z Apr 03 para 10 (U) All commanders will ensure their personnel are familiar with the law of armed conflict and with these ROE."

*ROE cards pre-deploy & updated in theater x 2.  
Briefs & changes in ROE from SJA.  
Φ ROIs, but he briefed rules to his files.*

6. What procedures do you have in place to ensure Soldiers understand the use of force and rules of engagement for the internment facility/collection point? What

guidance or policies do you have to ensure fraternization is not taking place between U.S military personnel and the detainees? (1.1, 1.2, 1.4, 1.6, 4.1) AR 190-8, paragraph 3-6 a, The following acts will not be permitted: (1) Fraternization between EPW, RP and U.S. military or civilian personnel. Fraternization is defined as improper or intimate communications or actions between U.S. Armed Forces personnel and EWP/RP (FM 3-19.40, paragraph 2-29, An MP commander ensures that soldiers understand use-of-force guidelines and the ROE established by higher headquarters for each mission. Because the use of force and ROE vary depending on the category of housed personnel and the operational environment, the commander develops SOPs that follow the guidance provided. He balances the physical security of force with mission accomplishment and the protection of deployed forces. ROE from CJCS ISO Iraqi operations dated 251600Z Apr 03 para 10 (U) All commanders will ensure their personnel are familiar with the law of armed conflict and with these ROE.).

*NCO oversight at all times. PLT SGT v'd on MP's constantly.*

7. Describe the training the guard force received to prepare them for their duties (5Ss & T)) How does your unit conduct sustainment training for Detainee Operations in Theater? How often does this occur and please describe it? When did your unit last conduct this training? (1.1, 1.2, 1.4, 4.1) (FM 3-19.40, para 2-48. Personnel assigned or attached to I/R facilities are trained on the care and control of housed personnel. They are fully cognizant of the provisions of the Geneva and UN Conventions and applicable regulations as they apply to the treatment of housed personnel. A formal training program should include— \* Principles and laws of land warfare, specifically provisions of Geneva and UN Conventions and HN laws and customs. \* Supervisory and human relations techniques. \* Methods of self-defense. \*The use of force, the ROE, and the ROI. \*Firearms qualification and familiarization. \*Public relations, particularly CONUS operations. \*First aid. \*Stress management techniques. \*Facility regulations and SOPs. \*Intelligence and counterintelligence techniques. \* Cultural customs and habits of internees. \*The basic language of internees. FM 3-19.40 para 2-49. The guard force should receive additional training in— \*Riot control measures, control agents, and dispersers. \*QRF actions. \*Searching techniques, including the use of electronic detection devices. \*Nonlethal equipment and weapons. The guard force should receive additional training in— • Riot control measures, control agents, and dispersers. • QRF actions. • Searching techniques, including the use of electronic detection devices. • Nonlethal equipment and weapons.

*Mission sprung on them unexpectedly - dev. SOP was pre-deploying training on SO.*

8. What Home Station/Mob Site Training did your unit conduct prior to deployment to help your unit prepare for Detainee Operations? Describe it. How did the training prepare you to conduct Detainee Operations for this deployment? What are your unit's strengths and weaknesses? How did this training distinguish between the different categories of Detainees (EPWs, RPs, CIs, etc.)? (1.1, 1.2, 1.4, 4.1) (AR 350-1 para 4-14c.(2) and table G-1 Refresher training, dated 9 April 2003), Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the

missions of the unit. AR 190-8 para 1-5(4)(C DOD Directive 5100.77), All prisoners will receive humane treatment and that the following acts are prohibited murder, torture, corporal punishment, mutilation, taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. Prisoners will be protected against all acts of violence to include public curiosity.

*This soldier was not there - in BNCOZ*

9. Describe the training you received during your last Military Institutional School (BNCOZ/ANCOC) in handling/processing Detainees. How was it helpful in preparing you for Detainee Operations? How would you improve the training at the schoolhouse? (1.1, 1.4)

*"Check the block" thing - not applicable, realistic.  
Outdated, didn't prepare for combat scenarios.*

*Improve scenarios (IEDs) - adapt thing / FTX to address new environs.*

*Hasn't been in NR/JLR*

10. What are some of the basic operations of the collection point/internment facility?

Is there a copy of the Geneva Convention posted in the detainee's home language within these camps? Are camps segregating Detainees by nationality, language, rank, and sex? How are captured Medical personnel and Chaplains being used in the camps? What provisions are in place for the

receipt and distribution of Detainee correspondence/mail? Are the daily food rations sufficient in quantity or quality and variety to keep detainees in good health? Are personal hygiene items and needed clothing being supplied to the Detainees? Are the conditions within the camp sanitary enough to ensure a clean and healthy environment free from disease and epidemics? Is there an infirmary located within the camp? (1.1, 1.2, 4.1)

AR 190-8, paragraph 1-5 a-g, (All persons detained, captured, interned, or otherwise held in U S Armed Forces custody during the course of conflict will be given humanitarian care and treatment from the moment they fall into the hands of U S forces until final release and repatriation. All persons taken into custody by U S forces will be provided with the protection of the GPW until some other legal status is determined by competent authority.) AR 190-8, paragraph 3-4. AR 190-8 para 3-4.b ...females will be separated from males. AR 190-8, 1-5, g (1) EPW, and RP will enjoy latitude in the exercise of their religious practices, including attendance at service of their faith, on condition that they comply with the disciplinary routine prescribed by the military authorities. (2) Military chaplains who fall into the hands of the U.S. and who remain or are retained to assist EPW, and RP, will be allowed to minister to EPW, RP, of the same religion Para 6-6, g: (1) Hygiene and sanitation measures will conform to those prescribed in AR 40-5 and related regulations. (2) A detailed sanitary order meeting the specific needs of each CI camp or branch camp will be published by the CI camp commander. Copies will be reproduced in a language that the CI understands and will be posted in each compound. (3) Each CI will be provided with sanitary supplies, service, and facilities necessary for their personal cleanliness and sanitation. Separate sanitary facilities will be provided for each sex. (4) All CI will have at their disposal, day and night, latrine facilities conforming to sanitary rules of the Army.

*No.*  
*All killed needs 2x/d.*  
*no,*  
*showers 3x/d*  
*soap at handwash*  
*etc. i*  
*showers.*  
*Thompson's*  
*of mass*  
*New jumpsuits*  
*even shower*  
*landing by*  
*US personnel*  
*3650*

Segregate: ♂ & ♀, no < 15-16 yo., ♂ by nationality or other grps  
Strict control (no talking) ; so no need to segregate.

Medic screening at IP, lets tell MP to see med.  
Medic to front or to 626 F&B (~~some~~ BOE level I & II)  
incl. dental

Good sanitation. 626 lost cage b/c poor sanit.  
lets built sun-ants, HW stns, gravel paths

11. What control measures are your unit using to maintain discipline and security in the collection point/internment facility? (1.1, 1.2, 1.6, 4.1) AR 190-8, paragraph 3-6 (Measures needed to maintain discipline and security will be established in each camp/collection point and rigidly enforced. The camp commander will maintain records of disciplinary punishments. These records will be open to inspection by the protecting power. The following acts will not be permitted; Fraternization between EPW, RP and U.S. military or civilian personnel. Fraternization is defined as improper or intimate communications or actions between U.S. Armed Forces personnel and EPW/RP. Donating or receiving gifts or engaging in any commercial activity between persons in U.S. custody and U.S. personnel. Setting up of courts by detainees. Disciplinary powers will not be delegated to or exercised by EPW/RP. Punishment will not be administered by EPW/RP.)

Rules for dets in Arabic - read at IP & posted.  
Isolation (can't have circle of rocks), gag if  
continued talking.

626 let them talk & hindered interr.  
↳ stealing det \$

flexi in front at all times.

12. What procedures are in place to account for and dispose of captured enemy supplies and equipment? What procedures are in place to process personnel, equipment, and evidence? (1.1, 1.2, 4.1) AR 190-8, para 2-1, a. (1) (b) (c), All equipment, documents, and personal property confiscation during the search must be tagged and administratively accounted for by the capturing unit. DD Form 2745, Part C is attached to the property confiscated from the Detainee, so that it may later be matched to that Detainee. AR 190-8, paragraph 1-4g(3), (Commanders will collect and dispose of captured enemy supplies and equipment through theater logistics and EOD channels.)

Bugged, tagged & inventoried for 4137, stored.  
Inter & access.

13. What is your ratio of guards to detainees in your collection point/internment facility? Is this ratio the proper mix for you to perform your mission? If not, what are the shortfalls? Why are their shortfalls? How do these shortfalls impact your mission? (1.1, 1.2, 1.3, 2.1, 3.1, 4.1) FM 3-19.40, paragraphs 3-38 thru 3-39. A brigade without an MP platoon in DS sets up and operates its own forward CPs The number of MP teams needed to operate a forward CP is based on the number of captives expected and METT-TC. The

1:1 - augmented 2 IN  
(b)(2)-3 5

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DA IG

*lets run thru drills*

projected number of captives is based on mission analysis and intelligence estimates conducted by the brigade Intelligence Officer (US Army) (S2). Division forward CPs are mobile; they can be set up, expanded, and relocated quickly as the tactical situation warrants. AR 190-47, paragraph 11-3(4)(a), Guard requirements for prisoners being transported outside an ACS facility, by means of foot, motor vehicle, or aircraft (other than AIREVAC or U.S. Marshals Service aircraft) are as follows:

(a) Trained correctional, military police or security personnel: Under maximum custody circumstances, there will be one guard per restrained prisoner and two unarmed guards or one armed guard per unrestrained prisoner. Under medium custody circumstances, there will be one guard per five prisoners. In minimum custody circumstances there will be one guard per ten prisoners. Trustee guards will be determined by the ACS facility commander.

(b) Non-correctional personnel: It is required that at least one guard be a SGT or above who is equal or senior to prisoners in a pretrial status. Under maximum custody circumstances, prisoners will have two guards per prisoner. In medium custody

*MPs used for DO inspected other MP direct support mission.*

14. How are you organized to handle the different categories of personnel (EPW, CI, OD, females, juveniles and refugees)? Do you maintain a separate site for sick or wounded Detainees? If so where is it and how does your unit maintain the security and safeguarding of Detainees there? (1.1, 1.2, 1.3, 2.1, 3.1) FM 3-19.40, paragraph 2-1, An MP battalion commander tasked with operating an I/R facility is also the facility commander. As such, he is responsible for the safety and well-being of all personnel housed within the facility. Since an MP unit may be tasked to handle different categories of personnel (EPW, CI, OD refugees, and US military prisoner), the commander, the cadre, and support personnel must be aware of the requirements for each category.

*Allowed to stay in bldg (Plenigles) if case provided.*

15. What is the number of personnel needed to escort prisoners internally and externally? (i.e. for medical, evacuation, etc.)? (1.1, 1.7) (FM 3-19.4 Chapter 7 Para 7.8, The number of MP needed to operate a division forward collecting point is based on the number and rate of captives expected and the METT-TC. ) AR 190-47, paragraph 11-3(4)(a), Guard requirements for prisoners being transported outside an ACS facility, by means of foot, motor vehicle, or aircraft (other than AIREVAC or U.S. Marshals Service aircraft) are as follows:

(a) Trained correctional, military police or security personnel: Under maximum custody circumstances, there will be one guard per restrained prisoner and two unarmed guards or one armed guard per unrestrained prisoner. Under medium custody circumstances, there will be one guard per five prisoners. In minimum custody circumstances there will be one guard per ten prisoners. Trustee guards will be determined by the ACS facility commander.

(b) Non-correctional personnel: It is required that at least one guard be a SGT or above who is equal or senior to prisoners in a pretrial status. Under maximum custody circumstances, prisoners will have two guards per prisoner. In medium custody

*Blindfolded, shackled (cuffs already in place)  
in vehicle by MPs.*

*'Chain gang' for transport to DIV cage - part of log pack*  
*Only MP's escort [redacted] b2-3*

16. What are the procedures for transporting and evacuating detainees? What are the procedures for transferring Detainees from the collection points to US Military controlled detention facilities? How is the transfer of Detainees handled between different services? (1.1, 1.2, 4.1) AR 190-8, paragraph 3-11 (General. d. Transfer within the territory of the detaining power will always be carried out humanely and in conditions no less favorable than those enjoyed by the troops of the detaining power during their movements. If EPW/RP are transferred on foot, only those who are fit to walk may be so transferred. The EPW/RP will not be exposed to excessive fatigue during transfer by foot.

e. The sick, wounded, or infirm EPW and RP as well as maternity cases will be evacuated through U.S. military medical channels and will remain in medical channels until they are certified "fit for normal internment" by competent medical authorities.

f. Necessary clothing, adequate shelter, and medical attention will be made available.

g. Suitable precautions will be taken to prevent EPW and RP, from escaping and to ensure their safety. Wounded and sick EPW and RP will not be transferred as long as their recovery may be endangered by the journey, unless their safety demands it.

*DD 2708, 4137 for property.*

*511th MP at Ft Brann run DIV cage - lax rules.*

17. What are the procedures for the transfer of custody of Detainees from the collection points/internment facility to Military Intelligence/OGA personnel? When the detainee is returned to the guard force, what procedures occur with the detainee?

**(in processing, medical screening, suicide watch, observation report DD Form 2713?, etc)** (1.1, 1.2, 4.1) FM 3-19.40 para 3-14. Property Accountability. \*Have MI sign for property on DA Form 4137 and for captives on DD Form 2708. \*Return confiscated property to supply after it is cleared by MI teams. Items kept by MI because of intelligence value are forwarded through MI channels. \* Evacuate retained items with the captive when he moves to the next level of internment. \* Maintain controlled access to confiscated and impounded property

*6 MPs guarding MI. MI returned det to cage.*

*"Handshake" transfer to OGA.*

*Did sleep deprivation for MI.*

18. What MP units (guards, escort, detachments) do you have at your disposal to operate and maintain this collection point/internment facility? What non-MP units are you using to help operate this collection point/internment facility? If you do not use MP teams, what forces are required to operate the Collection Point (guard, security etc)? Do you have any shortfalls in performing the Collection Point mission? How does this affect your doctrinal mission? How long are you holding Detainees at the collection point? Is holding the detainees longer than the 12/24 hours impacting

*mk 8  
IN*



on your units' ability to perform its mission? Why? (1.1, 1.2, 1.3) FM 3-19.40, paragraph 3-45, Captives should not remain at a forward CP more than 12 hours before being escorted to the central CP. FM 3-19.40, paragraph 3-54. Captives should not remain at the central CP more than 24 hours before being evacuated to the CHA. When all captives are accounted for, processed, and ready for evacuation to the CHA,

Longest hold = 22 days

Kept digital log. Avg = 1 wk.

19. Describe how this unit is able to maintain the security and safeguarding of Detainees at this internment facility/collection point. Describe your security requirements. (What are your clear zones? How do your Guard Towers permit an unobstructed view of the clear zone and how do they allow for overlapping fields of fire? Describe your perimeter security. (1.1, 1.2, 1.8, 2.1) FM 3-19.40, paragraph 2-1, An MP battalion commander tasked with operating an I/R facility is also the facility commander. As such, he is responsible for the safety and well being of all personnel housed within the facility. Since an MP unit may be tasked to handle different categories of personnel (EPW, CI, OD refugees, and US military prisoner), the commander, the cadre, and support personnel must be aware of the requirements for each category.

Survivor Safety Surber.

Back up light sets.

Civil from schoolhouse videotaped this facility as a model.

20. How do you maintain a high state of discipline with your Soldiers to enhance the internal and external security of the internment facility/Collection Point? (1.1, 1.2, 1.6) FM 3-19.40, paragraph 2-19, The MP commander establishes security measures that effectively control housed personnel with minimal use of force..... The physical construction of the facility and the presence of guard personnel create the most obvious means of providing internal and external security. Maintaining a high state of discipline, a system of routines, and required standards of behavior are all measures that enhance effective security and control.

Competition

Strict leadership.

21. Does this facility include Sally Ports? Describe the system in place. (1.8, 4.1)

No

Competition among MPs to best improve facility.

22. What do you have in place for communications (between guards/towers and the TOC/C<sup>2</sup>)? What problems do you have? How do you overcome them? (1.1, 1.2, 1.5, 1.8)

Flu comms c CP/ADB

Handheld radios w/ E mfs.

23. Describe the latrine facilities for Detainees' use (do they have access to it day and night and does it conform to the rules of hygiene and do females have separate facilities). How are they cleaned and how often and by whom? Where do they bathe and conduct other personal hygiene (this will depend how long it takes to evacuate Detainees to U.S. Military Controlled Detention Facilities—12/24 hours is the standard)? (1.1, 1.2, 1.8)) AR 190-8 para 3-4.i.(1) paraphrased...EPWs will have day/night access to latrines that are clean. Females will have separate latrines. AR 190-8 para 6-6.g.(4) paraphrased...All CI will have access to day/night latrines that are sanitary.

Yes.  
Ask.  
Daily turned by detz.

24. How do the Detainees receive fresh water (Bottled water or Lister bag)? (1.1, 1.2, 1.8)) AR 190-8, paragraph 3-4 f(3) Sufficient drinking water will be supplies to EPW/RP.

Water cans from water point by mfs

25. Can you give some examples of contraband? What are the procedures when you find contraband?? (i.e., Knives, Narcotics, weapons, currency) AR 190-8 and local SOP.

Eat & take food away. Nothing at showdowns.

26. Describe your lighting systems at the Facility/Collection Point (how does it affect security) . How about heating during the winter? What fire prevention/safety measures are in place? (1.8) AR 190-8, paragraph 3-4 e, EPW/RP will be quartered under

conditions as favorable as those for the force of detaining power billeted in the same area. The conditions shall make allowance for the habits and customs of the prisoners and shall in no case be prejudicial to their health. The forgoing shall apply in particular to the dormitories of EPW/RP as it regards both total surface and minimum cubic space and the general installation of bedding and blankets. Quarters furnished to EPW/RP must be protected from dampness, must be adequately lit and heated (particularly between dusk and lights-out), and must have adequate precautions taken against the dangers of fire. FM 3-19.40 para 4-103 "...minimize escapes by examining the lighting system during darkness to detect poorly lighted areas along the perimeter (replace burned out or broken light bulbs immediately)" FM 3-19.40 para 2-37 The engineer officer is responsible for the maintenance of utilities (i.e. heat). AR 190-8 para 3-17(a) A safety program for EPW/RP will be setup and administered in each camp. AR 190-8 para 3-17(a) A safety program for CI will established and administered IAW AR 385-10.

*Hand-washed lights & generator back-up lights.*

*Blankets for cold weather. No heat.*

*Fire ~~prevent~~ extinguishers. No smoking.*

27. How are Detainee complaints and requests to the camp commander processed?

(1.1, 1.2, 4.1) AR 190-8, paragraph 3-16 (EPW and RP have the right to make complaints and requests to camp commanders and the ICRC/protecting powers regarding the conditions of their internment. EPW and RP may not be punished for making complaints, even if those complaints later prove unfounded. Complaints will be received in confidence, as they might endanger the safety of other detainees. Appropriate action, including segregation, will be taken to protect detainees when necessary. This policy also applies to persons who are confined pending trial or as a result of a trial. b. EPW and RP may take complaints or requests to the camp commander.

c. Persons exercising the right to complain to the ICRC or protecting power about their treatment and camp may do so:

(1) By mail.

(2) In person to the visiting representatives of the ICRC or protecting power.

(3) Through their detainee representative.

d. Written complaints to the protecting power will be forwarded promptly through HQDA, ODCSOPS (DAMO-ODL) NPWIC. A separate letter with the camp commander's comments will be included. Military endorsements will not be placed on a detainee's communication.

e. If an ICRC/protecting power communicates directly with an EPW/CI camp commander about any matter requiring an answer, the communication and commander's reply will be forwarded to HQDA, ODCSOPS (DAMO-ODL) NPWIC, for proper action.

f. Any act or allegation of inhumane treatment will be investigated and, if substantiated, reported to HQDA as a Serious Incident Report (SIR) per AR 190-40. Once completed, a copy of the SIR accompanies the prisoner to the EPW/CI camp, and a copy is furnished to the monitoring Branch PWIC. All available pertinent information that the EPW or RP is willing to give, will be entered on the form.)

*Ask the MP.*

28. What are your shortcomings/problems in feeding the population? What is the menu of the population? (1.1, 1.2, 1.8, 4.1) (FM 3-19.40, paragraph 6-14. If dining facilities don't exist, then Detainees are to be fed MREs.)

N/A

29. What problems, if any, do you feel the unit has regarding manning or personnel resourcing in conducting Detention Operations? What about the number of personnel to control the detention operation in regards to riot control? (1.1, 1.7) (FM 3-19.4 Chapter 7 Para 7.8, The number of MP needed to operate a division forward collecting point is based on the number and rate of captives expected and the METT-TC.)

Call CP → QRF. Never happened.

Max [redacted] ( [redacted] capacity) - Avg. [redacted]  
(6)(2)-3 (5)(2)-3

30. What personal equipment is the unit experiencing as a shortfall concerning detainee operations, (i.e., restraints, uniforms, CIF items, weapons, etc.)? (1.5)

No.

31. What types of supplies is greater in-demand for the unit during detainee operations? And are these items regularly filled? What major shortfalls has the unit encountered in regard to materiel and supply distribution? (1.5)

Supplies not a problem - bought as needed.

32. What transportation problems is the unit experiencing to move detainees during the operation? (1.5)

Borrow vehicles - F800 or Hagi trucks.

33. What safety programs/policies are currently being used in the Detainee camps? (1.1, 1.2, 4.1) AR 190-8, paragraph 3-17 (A safety program for EPW and RP will be set up and administered in each EPW camp. Army regulations, circulars, and pamphlets in the 385-series may be used as guides for establishing an EPW and RP safety program. Accident injury forms used in the EPW and RP safety programs will be prepared, administered, and maintained separately from those prepared for other persons included under the Army Safety Program.) AR 190-8 para 3-17(a) A safety program for CI will established and administered IAW AR 385-10.

*Chores - paint, work details  
No formal safety program.*

34. Do you know of the procedures to get stress counseling (Psychiatrist, Chaplain, Medical)? Do your Soldiers know of the procedures to get counseling (Psychiatrist, Chaplain, Medical)? (1.1, 1.2, 1.6, 2.1, 4.1) FM 3-19.40, paragraph 2-48: Personnel assigned or attached to I/R facilities are trained on the care and control of housed personnel. They are fully cognizant of the provisions of the Geneva and UN Conventions and applicable regulations as they apply to the treatment of housed personnel. A formal training program should include stress management techniques. FM 8-51, Appendix D, D-2 f (3): Combat stress control units should provide routine mental health consultation to EPW confinement facilities. This should include: stress control advice to the command regarding the stressors of US Army MP personnel and any allied or coalition personnel working at the confinement facility; individual evaluation and intervention for guards or prisoners when indicated. AR 190-8, Paragraph 1-5, (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ).

*Chaplain. CSC / m tt.*

35. Are you aware of your requirement to report abuse or suspected abuse of detainees? (1.1, 1.2, 1.6, 4.1) AR 190-40 para 2-1, Military and civilian personnel assigned to or accompanying a DoD Component know that they shall report reportable incidents through their chain of command and that such reports also may also be made through other channels, such as the military police, a judge advocate, or an Inspector General.) AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident.

*Yes.*

36. Do your subordinates know the reporting procedures if they observe or become aware of a Detainee being abused? (1.1, 1.2, 1.6, 4.1) AR 190-40 para 2-1, Military and civilian personnel assigned to or accompanying a DoD Component know that they shall report reportable incidents through their chain of command and that such reports also may also be made through other channels, such as the military police, a judge advocate, or an Inspector General. AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

*Up chain of Command.*

37. What steps would you take if a subordinate reported to you an incident of alleged Detainee abuse? (1.2, 1.6, 4.1) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C, Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all

official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

Up chain

38. Do you feel you can freely report an incident of alleged Detainee abuse outside Command channels (IG, CID) (1.1, 1.2, 1.6, 4.1) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C, Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex

BDE S3, CH, CID in house, IG.

39. What procedures do you have to report suspected detainee abuse (IG, CID, Next Level Commander) (1.1, 1.2, 1.6, 4.1) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C, Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to

include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

2823 - sworn statement

40. What systems are in place for detainees to report alleged abuse? (1.1, 1.2, 1.6, 4.1) AR 190-8, para 5-1, g. Appeals and periodic review of security internment cases. (1) Appeals. The CI who are interned for imperative security reasons will be accorded the right to appeal the order directing their internment. Such appeals will be decided with the least possible delay by a board of officers. Appeals will be decided only on the grounds of the existence or nonexistence of imperative security reasons requiring the internment of the protected person. 6-4. Internee Committee a. Election. At each camp and branch camp, CI will be elected by secret written ballot to the Internee Committee. This committee is empowered to represent the camp to the protecting powers, International Committee of the Red Cross, or other authorized relief or aid organizations and U.S. military authorities. e. Duties. (3) (c) The presentation and transmittal of petitions and complaints to the appropriate authorities in proportion to the kind of labor performed. 6-9. Complaints and requests to camp commanders and protecting power, a. Persons may make complaints or requests to the camp commander, who will try to resolve the complaints and answer the requests. If the CI are not satisfied with the way the commander handles a complaint or request, they may submit it in writing, through channels, to HQDA, ODCSOPS (DAMO - ODL) NPWIC, WASH DC 20310-0400. b. Persons exercising the right to complain to the protecting power about their treatment and camp may do so— (1) By mail. (2) In person to the visiting representatives of the protecting power. (3) Through their Internee Committee. c. Written complaints to the protecting power will be forwarded promptly through HQDA (DAMO - ODL) NPWIC, WASH DC 20310-0400. A separate letter with the comments of the camp commander will be included. Military endorsements will not be placed on any CI communications. d. If a protecting power communicates with a CI camp commander about any matter requiring an answer, the communication and commander's reply will be forwarded to HQDA (DAMO-ODL) NPWIC, WASH DC 20310-0400, for proper action. e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.

To mps



41. What do you perceive as the mission of your unit? Describe the importance of your role in that mission. (Insight to the Soldier's understanding and attitude concerning unit mission and their role) AR 600-20 Command Policy 2-1. Chain of Command a. The chain of command assists commanders at all levels to achieve their primary function of accomplishing the unit's assigned mission while caring for personnel and property in their charge. A simple and direct chain of command facilitates the transmittal of orders from the highest to the lowest levels in a minimum of time and with the least chance of misinterpretation. b. Commanders delegate sufficient authority to soldiers in the chain of command to accomplish their assigned duties, and commanders may hold these soldiers responsible for their actions.

EPWs (general support)  
Escort / convoys (direct support PLT) Set back  
joint ops to Iraqi police, then turned them  
over to CP

42. Describe your working environment and living conditions since being in Theater. (Identify physical and psychological impact on Soldier's attitude). (1.2, 1.3, 1.4, 1.5, 1.6, 1.7) FM 10-1, Ch. 7, para. 3, "Tactical Vision. A primary QMC focus at the tactical level will continue to be on sustainment of the soldier. Each company-sized unit will have two cooks and a small, state-of-the-art field kitchen. This provides a limited capability to prepare or heat meals and supplements. An improved containerized capability for providing responsive laundry and shower support well forward on the battlefield must be developed. Frontline soldiers require brief respites from the rigors associated with combat. A facility complex (Force Provider) will be available in which they can shower, clean their clothes, eat hot meals, and rest in an environmentally controlled shelter.

Terrible, but improved. Less from sleeping  
in what fields.

43. Describe the unit command climate and Soldier morale. Has it changed or evolved since you have been in Theater? (Identifies Soldier's perception of the chain of command and Soldier attitude. Does the Soldier feel supported? Do Soldiers feel the Command cares? Are they getting clear guidance?) 1 AR 600-20 • 13 May 2002 1-5.

Command, b. Elements of command. c. The commander is responsible for establishing leadership climate of the unit and developing disciplined and cohesive units. This sets the parameters within which command will be exercised and, therefore, sets the tone for social and duty relationships within the command. (1) Commanders and other leaders committed to the professional Army ethic promote a positive environment. If leaders show loyalty to their soldiers, the Army, and the Nation, they earn the loyalty of their soldiers. If leaders consider their soldiers' needs and care for their well-being, and if they demonstrate genuine concern, these leaders build a positive command climate. (2) Duty is obedient and disciplined performance. Soldiers with a sense of duty accomplish tasks given them, seize opportunities for self-improvement, and accept responsibility from their superiors. Soldiers, leader and led alike, work together to accomplish the mission rather than feed their self-interest.

LT stealing \$ from evidence rm - repeatedly - covered by COCO

Very good in PLT. CO - worst 1SG & Co  
(inexperienced, not supportive, belittled soldiers, unprofessional)

Sexual harassment. Believed people for no reason.

Source of prob was BN CDR - heard on MP CO s/c they

held they're better (prohibited wearing T's, coins)  
2 escapes at DIV cage → ↓ morale (help playing spades)

44. Are you aware of any incidences of detainee or other abuse in your unit? AR 190-8, 1-5. General protection policy a. U.S. policy, relative to the treatment of EPW, CI and RP in the custody of the U.S. Armed Forces, is as follows: (1) All persons captured, detained, interned, or otherwise held in U.S. Armed Forces custody during the course of conflict will be given humanitarian care and treatment from the moment they fall into the hands of U.S. forces until final release or repatriation. (2) All persons taken into custody by U.S. forces will be provided with the protections of the GPW until some other legal status is determined by competent authority. (3) The punishment of EPW, CI and RP known to have, or suspected of having, committed serious offenses will be administered IAW due process of law and under legally constituted authority per the GPW, GC, the Uniform Code of Military Justice and the Manual for Courts Martial. (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ). b. All prisoners will receive humane treatment without regard to race, nationality, religion, political opinion, sex, or other criteria. The following acts are prohibited: murder, torture, corporal punishment, mutilation, the taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. c. All persons will be respected as human beings. They will be protected against all acts of violence to include rape, forced prostitution, assault and theft, insults, public curiosity, bodily injury, and reprisals of any kind. They will not be subjected to medical or scientific experiments. This list is not exclusive. EPW/RP are to be protected from all threats or acts of violence. d. Photographing, filming, and video taping of individual EPW, CI and RP for other than internal Internment Facility administration or intelligence/counterintelligence purposes is strictly prohibited. No group, wide area or aerial photographs of EPW, CI and RP or facilities will be taken unless approved by the senior Military Police officer in the Internment Facility commander's chain of command. e. A neutral state or an international humanitarian organization, such as the ICRC, may be designated by the U.S. Government as a Protecting Power (PP) to monitor whether protected persons are receiving humane treatment as required by the Geneva Conventions. The text of the Geneva Convention, its annexes, and any special agreements, will be posted in each camp in the language of the EPW, CI and RP.

No.

#### ADVISEMENT OF RIGHTS (For military personnel)

The text of Article 31 provides as follows a. No person subject to this chapter may compel any person to incriminate himself or to answer any questions the answer to which may tend to incriminate him. b. No person subject to this chapter may interrogate or request any statement from an accused or a person suspected of an offense without first informing him of the nature of the accusation and advising him that he does not have to make any statement regarding the offense of which he is accused or suspected, and that any statement made by him may be used as evidence against him in a trial by court-martial. c. No person subject to this chapter may compel any person to make a statement or produce evidence before any military tribunal if the statement or evidence is not material to the issue and may tend to degrade him. d. No statement obtained from any person in violation of

this article, or through the use of coercion, unlawful influence, or unlawful inducement, may be received in evidence against him in a trial by court-martial. (1.2, 1.6)

I am \_\_\_\_\_ (grade, if any, and name), a member of the (DAIG). I am part of a team inspecting detainee operations, this is not a criminal investigation. I am reading you your rights because of a statement you made causes me to suspect that you may have committed \_\_\_\_\_. (specify offense, i.e. aggravated assault, assault, murder). Under Article 31, you have the right to remain silent, that is, say nothing at all. Any statement you make, oral or written, may be used as evidence against you in a trial by courts-martial or in other judicial or administrative proceedings. You have the right to consult a lawyer and to have a lawyer present during this interview. You have the right to military legal counsel free of charge. In addition to military counsel, you are entitled to civilian counsel of your own choosing, at your own expense. You may request a lawyer at any time during this interview. If you decide to answer questions, you may stop the questioning at any time. Do you understand your rights? Do you want a lawyer? (If the answer is yes, cease all questions at this point). Are you willing to answer questions?

45. Describe what you understand happened leading up to and during the incident(s) of abuse. (No applicable standard) \_\_\_\_\_

46. Describe Soldier morale, feelings and emotional state prior to and after these incidents? (Identifies unit and Soldier morale, atmosphere, mood, attitude, stress, retaliation, preemption, family crisis) \_\_\_\_\_

47. Was this incident reported to the chain of command? How, when & what was done? What would you have done? (Identifies compliance, procedure, timeliness, Soldier perception of action taken and effect on unit morale.) (1.2, 1.6) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other

LT stealing \$ from evidence rm - repeatedly - covered  
by COCO

Very good in PLT. CO - worst 1SG & Co  
(inexperienced, not supportive, belittled soldiers, unprofessional)

Sexual harassment. Relieved people for no reasons.

Source of probs was BN CDR - hard on MP CO b/c they

held them in better (robbed wearing T's, coins)

2 escapes at DIV cage → ↓ morale (Cpl's playing spades)

44. Are you aware of any incidences of detainee or other abuse in your unit? AR 190-8, 1-5. General protection policy a. U.S. policy, relative to the treatment of EPW, CI and RP in the custody of the U.S. Armed Forces, is as follows: (1) All persons captured, detained, interned, or otherwise held in U.S. Armed Forces custody during the course of conflict will be given humanitarian care and treatment from the moment they fall into the hands of U.S. forces until final release or repatriation. (2) All persons taken into custody by U.S. forces will be provided with the protections of the GPW until some other legal status is determined by competent authority. (3) The punishment of EPW, CI and RP known to have, or suspected of having, committed serious offenses will be administered IAW due process of law and under legally constituted authority per the GPW, GC, the Uniform Code of Military Justice and the Manual for Courts Martial. (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ). b. All prisoners will receive humane treatment without regard to race, nationality, religion, political opinion, sex, or other criteria. The following acts are prohibited: murder, torture, corporal punishment, mutilation, the taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. c. All persons will be respected as human beings. They will be protected against all acts of violence to include rape, forced prostitution, assault and theft, insults, public curiosity, bodily injury, and reprisals of any kind. They will not be subjected to medical or scientific experiments. This list is not exclusive. EPW/RP are to be protected from all threats or acts of violence. d. Photographing, filming, and video taping of individual EPW, CI and RP for other than internal Internment Facility administration or intelligence/counterintelligence purposes is strictly prohibited. No group, wide area or aerial photographs of EPW, CI and RP or facilities will be taken unless approved by the senior Military Police officer in the Internment Facility commander's chain of command. e. A neutral state or an international humanitarian organization, such as the ICRC, may be designated by the U.S. Government as a Protecting Power (PP) to monitor whether protected persons are receiving humane treatment as required by the Geneva Conventions. The text of the Geneva Convention, its annexes, and any special agreements, will be posted in each camp in the language of the EPW, CI and RP.

No.

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incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General-protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

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48. How could the incident have been prevented? (Identifies root cause and perceived solution) (No applicable standard)

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49. Describe any unit training or other programs that you are aware of that teach leaders and Soldiers how to recognize and resolve combat stress. FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The measures which reduce battle fatigue and prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel. )

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50. What measures are in place to boost morale or to relieve stress? (Identifies perceived solution.) FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The measures which reduce battle fatigue and prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel. \_\_\_\_\_

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\_\_\_\_\_

51. What measures could the command enact to improve the morale and command climate of your unit? (Identifies perceived solution.) FM 22-103, Leadership and Command at Senior Levels, 21 Jun 1987, p. 6, - "Leadership. The process of influencing others to accomplish the mission by providing purpose, direction, and motivation." AR 600-100, Army Leadership, 17 Sep 1993, p. 8, 1987- "Senior-level leadership is the art of direct and indirect influence and the skill of creating the conditions for sustained organizational success to achieve the desired result. But, above all, it is the art of taking a vision of what must be done, communicating it in a way that the intent is clearly understood, and then being tough enough to ensure its execution." \_\_\_\_\_

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**DIV SPT AREA/BDE SPT AREA CDR**  
(or whoever is responsible for the COLLECTION POINT)  
(as it relates to the COLLECTION POINT)  
**INTERVIEW QUESTIONS**

Rank LTJ Branch PMO Date 22 MAR 04 Unit 801st MSB  
Duty Position PMO/OSC How Long in Job 12 mos.  
Interviewer Collection point. (Div.)  
D-Reau.

1. As the BSA/DSA Commander what are your responsibilities concerning the EPW/Detainee Collection Point? How has your unit prepared for this mission? What is your relationship with the Collection Point OIC? (1.1, 1.2, 1.4) (DOD Directive 2310.1 provides that persons captured or detained by the U.S. Military Service shall normally be handed over for safeguarding to U.S. Army Military Police, or to detainee collecting points or other holding facilities and installations operated by U.S. Army Military Police as soon as practical. AR 190-8, para 1-5, a. (1) All persons captured, detained, interned, or otherwise held in U.S. Armed Forces custody during the course of the conflict will be given humanitarian care and treatment from the moment they fall into the hands of the U.S. forces until final release or repatriation.) FM 63-20 Ch 5 MP Operations. A direct support military police platoon is usually operating from the BSA. The battlefield missions performed by this platoon may include battlefield circulation control, area security, operation of the EPW point, and law enforcement. MPs conduct collection, evacuation, and internment operations to support their EPW mission. The EPW point holds EPWs captured by brigade units until they can be evacuated to the division central collection point. FM 3-19.40 covers EPW operations in detail. FM 63-21 Ch 4 S1 Section. Other functions of the PAC in support of the MSB include- Coordinate with the S2/S3, S4, and MP platoon leader on the location of EPW collection points; Project numbers of EPWs and civilian internees; Determine total transportation requirements for losses, replacements, and EPWs. Submit transportation request to the S4.

*Daily Contact Face to Face or Phone. Disposition. Accountability. Treatment. Food. of detainees how to improve. The Fac.*

*Limited knowledge. MP PLT was from 511th MP. had OIT when PLT were changed out. Little hand-off*

Human Treatment  
Training of Guard Force, Briefing S4, LDR. on detainees ops  
# of detainees, Transportation Coordination to higher.  
Transportation Coordination to higher

2. Can you tell me what basic publications you use for Detainee Operations (doctrine and standards)? Describe the basic principles of detainee operations and how you are applying them? (1.1, 4.1) (AR 190-8, DoD Directive 5100.77, 1949 Geneva Convention, FM 3-19.40 I/R Operations FM 3-19.4 MP Commander's Handbook are the basic/primary sources for doctrine and standards. FM 63-20 Forward Support BN, FM 63-21 Main Support BN)

FM 3-19.40 FARGO ITF7, SOP SFOR,  
GC.

Guard Force Seq, Supply Guard, Security of DO.  
Guard bag to protect from mortar.

Moving detainees to the rear as  
quick as possible one  
ID of who they are.

*Rule of Force.*

3667

DAIG

3. How did you prepare yourself and your junior leaders to become familiar with and understand the applicable regulations, OPORD/FRAGOs directives, international laws and administrative procedures to support the operation of a Collection Point? (1.1, 1.2, 1.4, 1.6, 4.1) AR 350-1 para 4-14 c (2) and table G-1 Refresher training, dated 9 April 2003), Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit. FM 3-19.40, paragraph 2-2, Commanders are familiar with applicable regulation, directives, international laws, and administrative procedures. ) ROE from CJCS ISO Iraqi operations dated 251600Z Apr 03 para 10 (U) All commanders will ensure their personnel are familiar with the law of armed conflict and with these ROE." FM 63-20 & 63-21

Daily discussion on detainees  
Reading OPORD/FRAGO daily for changes in near to his ops.  
Guard mount. Training.  
would pick topic on what to train on.

4. How did Home Station/Mob Site Training prepare you to conduct Detainee Operations to include having a Collection Point in your area? (Did this include Law of War and treatment of Detainees training.)? ? (1.1, 1.2, 1.3, 1.4, 4.1) DoDD 2310.1 (The U.S. Military Services shall be given the necessary training to ensure they have knowledge of their obligations under the Geneva Conventions (references (b) through (e)) and as required by DoD Directive 5100.77 (reference (f)) before an assignment to a foreign area where capture or detention of enemy personnel is possible. AR 350-1 para 4-14 c (2) and table G-1 Refresher training, dated 9 April 2003), Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit. AR 190-8 para 1-5 (4) (C), DOD Directive 5100.77, All prisoners will receive humane treatment and that the following acts are prohibited murder, torture, corporal punishment, mutilation, taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. Prisoners will be protected against all acts of violence to include public curiosity. (AR 350-1 para 4-14c.(2) and table G-1 Refresher training, dated 9 April 2003), Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit. AR 190-8 para 1-5(4)(C DOD Directive 5100.77), All prisoners will receive humane treatment and that the following acts are prohibited murder, torture, corporal punishment, mutilation, taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. Prisoners will be protected against all acts of violence to include public curiosity. (DoD Directive 5100.77, para 5.5.1, The Secretaries of the Military Departments shall provide directives, publications, instructions, and training so that the principles and rules of law of war will be known to members of their respective Departments, the extent of such knowledge to be commensurate with each individual's duties and responsibilities.

Meet the unit in Theater.

5. In relation to where the detainees are housed, how far away are your ammunition and fuel storage sites? (1.1, 1.2, 1.8) AR 190-8, Paragraph 2-1 f (2) Prisoners will not be located next to obvious targets such as ammunition sites, fuel facilities, or communications equipment.... FM 3-19.40 para 3-25 ...Do not locate captives near obvious targets (ammunition, fuel)



POC was at least a mile away.  
Amnio - was at least a mile away.

6. How do you integrate the security and defense of the collection point into the BSA/DSA defense? What is your normal ratio of guards to detainees in the camp? Is this ratio the proper mix for you to perform your mission? If not, what are the shortfalls? How do these shortfalls impact your mission (1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.7, 1.8, 2.1, 3.1, 4.1) FM 63-20 Ch 5 The FSB commander is responsible for BSA security and terrain management. His goals in this area include the following: Secure the BSA and facilities. Minimize enemy interference in C3. Minimize enemy interference in support operations. Ensure freedom of movement of friendly troops throughout the BSA. This will involve control of dislocated civilians which is coordinated with the division G5 through the DISCOM headquarters. Defeat Level I threats and respond appropriately to Level II and III threats as discussed in this chapter. Provide and coordinate area damage control FM 63-21 Ch 1 The MSB commander plans and manages the security and movement of MSB elements in coordination with the DISCOM S2/3. METT-TC for the guard ratio.

Ran a Sergeant per.

would look at the Base Cluster to provide  
prim support.

7. Are you experiencing any transportation problems to move detainees, and if so what? What is the number of personnel needed to move prisoners internally or externally (i.e. to the internment facility, from the BN Collection Points, for medical, evacuation, etc.)? (1.1, 1.5 1.7) FM 3-19.40 paragraph 3-45 Captives should not remain at the forward CP more than 12 hours before being escorted to the central CP. When they have been processed and are ready for evacuation, MP leaders - Report the status to the BSA TOC and the PM (through MP channels). Request transportation, rations, and water from the FSB Supply Officer (US Army) (S4). Ensure that receipts are ready for signature. Ensure that property is properly tagged and given to escort guards. FM 3-19.4 Chapter 7 Para 7.8, The number of MP needed to operate a division forward collecting point is based on the number and rate of captives expected and the METT-TC. FM 3-19.40 para 3-54 Captives should not remain at the central CP more than 24 hours before being evacuated to the CHA. FM 3-19.40, para 4-34, A transfer may be a result of reclassification or another situation requiring the movement of an EPW. Transfer an EPW from one facility to another under conditions that are comparable to those for a member of the US armed forces when possible. Security measures are determined by MP and are influenced by the type of EPW being transferred, the mode of transportation used, and other pertinent conditions. AR 190-47, 11-3.b.(4), Guard requirements for prisoners being transported outside an ACS facility, by means of foot, motor vehicle, or aircraft (other than AIREVAC or U.S. Marshals Service aircraft) are as follows: (a) Trained correctional, military police or security personnel: Under maximum custody circumstances, there will be one guard per restrained prisoner and two unarmed guards or one armed guard per unrestrained prisoner. Under medium custody circumstances, there will be one guard per five prisoners. In minimum custody circumstances there will be one guard per ten prisoners. Trustee guards will be determined by the ACS facility commander. (b) Non-correctional personnel: It is required that at least one guard be a SGT or above who is equal or senior to prisoners in a pretrial status. Under maximum custody circumstances, prisoners will have two guards per prisoner. In medium

(S)(2)-3  
man guard Force

Ratio was 1 to 5 man to 1 to 3 last couple months. The ratio was (S)(2)-3 1 to 3 (per.)

added guards.

(S)(2)-3  
MP per PLT

(S)(2)-3  
one to ratio min of guards  
evac is would have

custody circumstances, prisoners will have one guard per two prisoners, and in minimum custody circumstances there will be one guard per five prisoners.

8. What MP units (guards, escort, detachments) do you have at your disposal to operate and maintain the collection point? Do you have any shortages? How do these shortages impact your mission? What non-MP units are you using to help operate the camp? Do you have any shortages? How do these shortages impact your mission? (1.1, 1.2, 1.3, 1.7) FM 3-19.40 para 3-37. A division operates two types of CPs—forward and central. A division MP Company operates forward CPs in each maneuver brigade AO and a central CP in the division rear area. Both CPs are temporary areas designed to hold captives until they are removed from the battlefield. Forward CPs are positioned as far forward as possible to accept captives from maneuver elements. Central CPs accept captives from forward CPs and local units. MPs have doctrinal mission but JRTC/NTC had the BSA CDR responsible

Not at  
Div.

511th MP Co PLT:

Shortages when needed an IIR Spec, CCT Team.  
help design the layout of the collection point.

had to use other units SOP and then tailor it to come up with  
own policy.

9. What personnel or equipment USR shortages are affecting your ability to support detainee operations? What are your resource shortfalls to support this operation? What types of supplies is greater in-demand for the unit during detainee operations? (1.3, 1.5, 1.7, 2.1, 3.1) USR

N/A.

10. What do you perceive to be doctrinal shortcomings pertaining to Detainee Operations and how would you fix/incorporate into updated doctrine/accomplish differently? How about Force Structure to ensure Detainee Operations can be successfully accomplished? What are the shortcomings and how do we fix the problem at the Army-level? (1.1, 1.3, 1.5, 1.7, 4.1) (AR 190-8, paragraph 1-4g(2), (Commanders will plan and procure logistical support to include: transportation, subsistence, personal, organizational and NBC clothing and equipment items, mail collection and distribution, laundry, and bath for DO. FM 3-19.40, para 7-101, Supply functions in a confinement facility are the same as those in other military units. However, stronger security measures are necessary to prevent certain supplies and equipment from falling into the hands of prisoners.)

everything is mission depend and what is the plan  
if so, then doc allow the unit to put full  
resources to it.

It not doctrinal as in the Odr.  
Id'ing what are the pri resources.

3670

DA IG

11. What procedures do you have in place to ensure Soldiers and leaders understand the use of force and rules of engagement for the collection point?

(1.1, 1.2, 1.4, 1.6, 4.1) ROE from CJCS ISO Iraqi operations dated 251600Z Apr 03 para 10

(U) All commanders will ensure their personnel are familiar with the law of armed conflict and with these ROE."

Had ROE Training

OJT Training - Rules for Detainees were different than regular  
IRAQI on the street.

Guard mount. - address ROE

12. What kind of stress counseling are Soldiers/Guards provided? (1.1, 1.2, 2.1, 4.1) FM 3-19.40, paragraph 2-48, Personnel assigned or attached to I/R facilities are trained on the care and control of housed personnel. They are fully cognizant of the provisions of the Geneva and UN Conventions and applicable regulations as they apply to the treatment of housed personnel. A formal training program should include - stress management techniques. AR 190-8, Paragraph 1-5, (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ). FM 8-51, Appendix D, D-2 f (3): Combat stress control units should provide routine mental health consultation to EPW confinement facilities. This should include: stress control advice to the command regarding the stressors of US Army MP personnel and any allied or coalition personnel working at the confinement facility; individual evaluation and intervention for guards or prisoners when indicated.

CPT  
serves  
as  
chaplain

one incident where a Female was aggressed verbally  
a detainee, soldier had verbal counseling and  
had her see a doctor.

13. Do you maintain a separate site for sick or wounded Detainees? If so where is it and how does your unit maintain the security and safeguarding of Detainees there? (1.1, 1.2, 1.8, 2.1, 3.1) AR 190-8, paragraph 3-4 i(2) Every camp will have an infirmary. EPW/RP with a contagious disease, mental condition, or other illness, as determined by the medical officer, will be isolated from other patients. A list of endemic diseases of military importance can be obtained from the theater surgeon or preventive medicine officer. EPW/RP will be immunized and reimmunized against other diseases as recommended by the Theater Surgeon. EPW/IR suffering from serious disease, or whose condition necessitates special treatment, surgery, or hospital care, must be admitted to any military or civilian medical unit where such treatment can be given. FM 3-19.40 Para 2-10 Commanders consider the following when establishing medical care (see AR 190-8): • The medical treatment facility provides isolation of communicable diseases, disinfection, and inoculations. Use retained medical personnel and EPWs with medical training to the fullest extent possible when caring for sick and wounded EPWs. When medical care is inadequate, transfer housed personnel to military or civilian medical facilities where the required treatment is available. AR 190-8 para 6-6.c. Medical facilities. Each CI camp will provide personnel, material, and facilities for adequate routine and emergency dispensary treatment.

if not housed at the Hosp then they were  
separated the best they could.

TB - only little area.

Fenced off area - supply  
interior huts was used could put in a hut.

3671

14. What medical assets are in direct support of the collection point? What medical support are you lacking? How does this affect the ability to perform the rest of your mission? (1.1, 1.2, 2.1, 4.1) AR 190-8 para 1-4g(6) (The commander should identify requirements for Army Medical units in support of the EPW, CI, and RP program and ensure that the medical annex of OPLANs, OPORDs, and CONPLANS include procedure for treatment of EPW, CI, RP, and ODs. a. Medical support specifically includes: First aid and all sanitary aspects of food service including provisions for potable water, pest management, and entomological support. b. Preventive Medicine: Reviewing, recommending, and coordinating the use and assignment of medically trained EPW, CI, RP, and OD personnel and medical material? Establishing policy for medical repatriation of EPW, CI, and RP and monitoring the actions of the Mixed Medical Commission?

Daily Med visit - Treat detainees having illness, sick ed 25th Cst if the medic could not handle

15. Describe how the unit plans and procures logistical support to include: subsistence, organizational, and NBC clothing and equipment items, mail collection and distribution, laundry, and bath equipment ISO DO. (1.1, 1.2, 1.4) AR 190-8, paragraph 1-4g(2), (Commanders will plan and procure logistical support to include: transportation, subsistence, personal, organizational and NBC clothing and equipment items, mail collection and distribution, laundry, and bath for DO.)

Started with hose to do Laundry before the Reg had hot shower

10/81 MP Supply Held Supply for DO.

Needs were Id daily, blankets, cots good syst not problem

Food - use contractor to provide Hot Foods - 2 Hots, snacks or 3rd meal if they wanted. Policy - was 2 meals. Sub with Fruits, dates

16. How do you provide the collection point with water? (Bottled water or bulk water)? (1.1, 1.2, 1.8) AR 190-8, paragraph 3-4 f(3) Sufficient drinking water will be supplies to EPW/RP

Bottle water - Trade in empty bottle when they want it. had Faucets in install. Pre med inspected.

17. What are the procedures if a detainee in U.S. custody dies? (1.1, 1.2, 4.1) AR 190-8 para 3-3a (20): Report allegations of criminal acts or war crimes committed by or against EPW/RP to the supporting element of the U.S. Army Criminal Investigation Command (USACIDC). Deaths resulting from other than natural causes will be investigated by USACIDC. Para 3-10 c: When an EPW or RP in US custody dies, the attending medical officer furnish the camp (or hospital) commander or other officer charged with their custody before death, the following information: (1) Full name of deceased. (2) ISN of deceased. (3) Date, place, and cause of death. (4) Statement that death was, or was not, the result of the deceased's own misconduct. (5) When the cause of death is undetermined, the attending medical officer will make a statement

to that effect. When the cause of death is finally determined, a supplemental report will be made as soon as possible. e. The attending medical officer and the appropriate camp commander will complete a DA Form 2669-R (Certificate of Death). DA Form 2669-R will be reproduced locally on 8 1/2 by 11-inch paper. The form is located at the back of this regulation. This form is for the use of Army only. Enough copies of form will be made out to provide distribution as follows: (1) Original—information center. (2) Copy—information center (branch), if necessary. (3) Copy—The Surgeon General. (4) Copy—EPW or RP personal file. (5) The proper civil authorities responsible for recording deaths in the particular state if the EPW dies in the United States.

Notify Chain of Command.

Preserve command scene. Secure

Conduct investigation

18. What AARs or lessons learned have you written or received regarding detainee operations? Can I get a copy? (preferably on disk) (2.1, 2.2) AR 350-1, paragraph 4-3c. The after action review is a structured review process that allows military training participants to discover how and why certain events actually happened and how to improve future task performance. The reviews focus on military training objectives, on performance according to Army standards, and on discovering lesson learned for sustaining and improving collectives and individual task performance proficiency.

*Have not written anything.*

Provide verbal info to MP Corps. - briefing - Transformation of MP.  
Attend working group at Ft. Leavenworth on DO.

19. Are you aware of your requirement to report abuse or suspected abuse of detainees? (1.1, 1.2, 4.1) AR 190-40 para 2-1, Military and civilian personnel assigned to or accompanying a DoD Component know that they shall report reportable incidents through their chain of command and that such reports also may also be made through other channels, such as the military police, a judge advocate, or an Inspector General.) AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident.

yes -

*Source statement.*

any abuse from outside org be given  
to the PMD to investigate and talk to the outside  
org.

Notify Chain of command have indep source look at the abuse, JG, etc

20. What procedures do you have to report suspected detainee abuse? Who can you report abuse/suspected abuse to? (IG, CID, Next Level Commander) (1.1, 1.2, 1.6, 4.1) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C, Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving

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the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

*IG, higher headquarters.*

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21. Do your subordinates know the reporting procedures if they observe or become aware of a Detainee being abused? (1.1, 1.2, 4.1) AR 190-40 para 2-1, Military and civilian personnel assigned to or accompanying a DoD Component know that they shall report reportable incidents through their chain of command and that such reports also may also be made through other channels, such as the military police, a judge advocate, or an Inspector General. AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this

regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

outside reg - yes.

Knew of the requirement to report.

the chain of command  
night

22. What steps would you take if a subordinate reported to you an incident of alleged Detainee abuse? (1.2, 4.1) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C, Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

see # 20

Sworn statement

chain of command

23. What systems are in place for detainees to report alleged abuse? (1.1, 1.2, 1.6, 4.1) AR 190-8, para 5-1, g. Appeals and periodic review of security internment cases. (1) Appeals. The CI who are interned for imperative security reasons will be accorded the right to appeal the order directing their internment. Such appeals will be decided with the least possible delay by a board of officers. Appeals will be decided only on the grounds of the existence or nonexistence of imperative security reasons requiring the internment of the protected person. 6-4. Internee Committee a. Election. At each camp and branch camp, CI will be elected by secret written ballot to the Internee Committee. This committee is empowered to represent the camp to the protecting powers; International Committee of the Red Cross, or other authorized relief or aid organizations and U.S. military authorities. e. Duties. (3) (c) The presentation and transmittal of petitions and complaints to the appropriate authorities in proportion to the kind of labor performed. 6-9. Complaints and requests to camp commanders and protecting power, a. Persons may make complaints or requests to the camp commander, who will try to resolve the complaints and

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answer the requests. If the CI are not satisfied with the way the commander handles a complaint or request, they may submit it in writing, through channels, to HQDA, ODCSOPS (DAMO - ODL) NPWIC, WASH DC 20310-0400. b. Persons exercising the right to complain to the protecting power about their treatment and camp may do so—(1) By mail. (2) In person to the visiting representatives of the protecting power. (3) Through their Internee Committee. c. Written complaints to the protecting power will be forwarded promptly through HQDA (DAMO - ODL) NPWIC, WASH DC 20310-0400. A separate letter with the comments of the camp commander will be included. Military endorsements will not be placed on any CI communications. d. If a protecting power communicates with a CI camp commander about any matter requiring an answer, the communication and commander's reply will be forwarded to HQDA (DAMO-ODL) NPWIC, WASH DC 20310-0400, for proper action. e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used

Chaplain - visit  
infrequent - Red Cross visit  
one in visit

Interpreter who work with MP.  
in interrogate.

24. What do you perceive as the mission of your unit? Describe the importance of your role in that mission. (Insight to the Soldier's understanding and attitude

concerning unit mission and their role) AR 600-20 Command Policy 2-1. Chain of Command a. The chain of command assists commanders at all levels to achieve their primary function of accomplishing the unit's assigned mission while caring for personnel and property in their charge. A simple and direct chain of command facilitates the transmittal of orders from the highest to the lowest levels in a minimum of time and with the least chance of misinterpretation. b. Commanders delegate sufficient authority to soldiers in the chain of command to accomplish their assigned duties, and commanders may hold these soldiers responsible for their actions.

Safe Guard of detainee  
Till they were process out or  
set-free

25. Describe your working environment and living conditions since being in Theater. (Identify physical and psychological impact on Soldier's attitude). (1.2, 1.3, 1.4, 1.5, 1.6, 1.7) FM 10-1, Ch. 7, para. 3, "Tactical Vision. A primary QMC focus at the tactical level will continue to be on sustainment of the soldier. Each company-sized unit will have two cooks and a small, state-of-the-art field kitchen. This provides a limited capability to prepare or heat meals and supplements. An improved containerized capability for providing responsive laundry and shower support well forward on the battlefield must be developed. Frontline soldiers require brief respites from the rigors associated with combat. A facility complex (Force Provider) will be available in which they can shower, clean their clothes, eat hot meals, and rest in an environmentally controlled shelter.

D-Room - was not bad.  
PLT Dunning Point ->

Lived in Tent or harden Building or Trailer.  
Spe. or Cots

release  
came from  
G-2, IAB  
by verbat  
for First's  
The Formal  
Board set.

had  
HVT  
ne  
he took  
part in  
releasing  
detainees  
to the civilian

working  
for PLT  
Tents then  
moved in to  
wooden  
building



Fail -

26. Describe the unit command climate and Soldier morale. Has it changed or evolved since you have been in Theater? (Identifies Soldier's perception of the chain of command and Soldier attitude. Does the Soldier feel supported? Do Soldiers feel the Command cares? Are they getting clear guidance?) 1 AR 600-20 • 13 May 2002 1-5.

Command, b. Elements of command. c. The commander is responsible for establishing leadership climate of the unit and developing disciplined and cohesive units. This sets the parameters within which command will be exercised and, therefore, sets the tone for social and duty relationships within the command. (1) Commanders and other leaders committed to the professional Army ethic promote a positive environment. If leaders show loyalty to their soldiers, the Army, and the Nation, they earn the loyalty of their soldiers. If leaders consider their soldiers' needs and care for their well-being, and if they demonstrate genuine concern, these leaders build a positive command climate. (2) Duty is obedient and disciplined performance. Soldiers with a sense of duty accomplish tasks given them, seize opportunities for self-improvement, and accept responsibility from their superiors. Soldiers, leader and led alike, work together to accomplish the mission rather than feed their self-interest. .

home  
Not knowing when they were going home was  
a factor. only 30% of the division got envior leave.  
Safe area except for a few mortar attack.  
3 meals, hot water.

Are you aware of any incidences of detainee or other abuse in your unit? AR 190-8, 1-5. General protection policy a. U.S. policy, relative to the treatment of EPW, CI and RP in the custody of the U.S. Armed Forces, is as follows: (1) All persons captured, detained, interned, or otherwise held in U.S. Armed Forces custody during the course of conflict will be given humanitarian care and treatment from the moment they fall into the hands of U.S. forces until final release or repatriation. (2) All persons taken into custody by U.S. forces will be provided with the protections of the GPW until some other legal status is determined by competent authority. (3) The punishment of EPW, CI and RP known to have, or suspected of having, committed serious offenses will be administered IAW due process of law and under legally constituted authority per the GPW, GC, the Uniform Code of Military Justice and the Manual for Courts Martial. (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ). b. All prisoners will receive humane treatment without regard to race, nationality, religion, political opinion, sex, or other criteria. The following acts are prohibited: murder, torture, corporal punishment, mutilation, the taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. c. All persons will be respected as human beings. They will be protected against all acts of violence to include rape, forced prostitution, assault and theft, insults, public curiosity, bodily injury, and reprisals of any kind. They will not be subjected to medical or scientific experiments. This list is not exclusive. EPW/RP are to be protected from all threats or acts of violence. d. Photographing, filming, and video taping of individual EPW, CI and RP for other than internal Internment Facility administration or intelligence/counterintelligence purposes is strictly prohibited. No group, wide area or aerial photographs of EPW, CI and RP or facilities will be taken unless approved by the senior Military Police officer in the Internment Facility commander's chain of command. e. A neutral state or an international humanitarian organization, such as the ICRC, may be designated by the U.S. Government as a Protecting Power (PP) to monitor whether protected persons are receiving humane treatment as required by the Geneva Conventions. The text of the Geneva Convention, its annexes, and any special agreements, will be posted in each camp in the language of the EPW, CI and RP. No

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**ADVISEMENT OF RIGHTS (For military personnel)**

The text of Article 31 provides as follows a. No person subject to this chapter may compel any person to incriminate himself or to answer any questions the answer to which may tend to incriminate him. b. No person subject to this chapter may interrogate or request any statement from an accused or a person suspected of an offense without first informing him of the nature of the accusation and advising him that he does not have to make any statement regarding the offense of which he is accused or suspected, and that any statement made by him may be used as evidence against him in a trial by court-martial. c. No person subject to this chapter may compel any person to make a statement or produce evidence before any military tribunal if the statement or evidence is not material to the issue and may tend to degrade him. d. No statement obtained from any person in violation of this article, or through the use of coercion, unlawful influence, or unlawful inducement, may be received in evidence against him in a trial by court-martial. (1.2, 1.6)

I am \_\_\_\_\_ (grade, if any, and name), a member of the (DAIG). I am part of a team inspecting detainee operations, this is not a criminal investigation. I am reading you your rights because of a statement you made causes me to suspect that you may have committed \_\_\_\_\_. (specify offense, i.e. aggravated assault, assault, murder). Under Article 31, you have the right to remain silent, that is, say nothing at all. Any statement you make, oral or written, may be used as evidence against you in a trial by courts-martial or in other judicial or administrative proceedings. You have the right to consult a lawyer and to have a lawyer present during this interview. You have the right to military legal counsel free of charge. In addition to military counsel, you are entitled to civilian counsel of your own choosing, at your own expense. You may request a lawyer at any time during this interview. If you decide to answer questions, you may stop the questioning at any time. Do you understand your rights? Do you want a lawyer? (If the answer is yes, cease all questions at this point). Are you willing to answer questions?

27. Describe what you understand happened leading up to and during the incident(s) of abuse. (No applicable standard) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

28. Describe Soldier morale, feelings and emotional state prior to and after these incidents? (Identifies unit and Soldier morale, atmosphere, mood, attitude, stress, retaliation, preemption, family crisis) \_\_\_\_\_

29. Was this incident reported to the chain of command? How, when & what was done? What would you have done? (Identifies compliance, procedure, timeliness, Soldier perception of action taken and effect on unit morale.) (1.2, 1.6) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

30. How could the incident have been prevented? (Identifies root cause and perceived solution) (No applicable standard)

*Closer Supervise by her NCO.*  
*Never*

31. Describe any unit training or other programs that you are aware of that teach leaders and Soldiers how to recognize and resolve combat stress. FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The measures which reduce battle fatigue and

prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel. )

*Pre med care over a Taught  
Some classes on classes.*

32. What measures are in place to boost morale or to relieve stress? (Identifies perceived solution.) FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The measures which reduce battle fatigue and prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel.

*MWR Facilities -> Phones, internet cafe, shops (PX Concess.,  
movies, Playstation games, stereo.*

*Each unit had Funds + eq. -> weights, sport eq.  
Religion*

33. What measures could the command enact to improve the morale and command climate of your unit? (Identifies perceived solution.) FM 22-103, Leadership and Command at Senior Levels, 21 Jun 1987, p. 6, - "Leadership. The process of influencing others to accomplish the mission by providing purpose, direction, and motivation." AR 600-100, Army Leadership, 17 Sep 1993, p. 8, 1987- "Senior-level leadership is the art of direct and indirect influence and the skill of creating the conditions for sustained organizational success to achieve the desired result. But, above all, it is the art of taking a vision of what must be done, communicating it in a way that the intent is clearly understood, and then being tough enough to ensure its execution."

*They were doing all they  
could.*

3680

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# MANEUVER BDE/BN XO INTERVIEW QUESTIONS

Rank COL Branch INF Date 23 March 04 Unit BCT  
Duty Position Bde CO How Long in Job 18 months  
Interviewer \_\_\_\_\_ How Long in Theater 12 months

1. (ALL) What are your responsibilities concerning detainee operations?  
(BDE XO) What are your responsibilities concerning the Forward Collection Point in the BSA? What is your relationship with the Forward Collection Point OIC?

(1.1, 1.2, 1.4) (DOD Directive 2310.1 provides that persons captured or detained by the U.S. Military Service shall normally be handed over for safeguarding to U.S. Army Military Police, or to detainee collecting points or other holding facilities and installations operated by U.S. Army Military Police as soon as practical. AR 190-8, para 1-5, a. (1) All persons captured, detained, interned, or otherwise held in U.S. Armed Forces custody during the course of the conflict will be given humanitarian care and treatment from the moment they fall into the hands of the U.S. forces until final release or repatriation.) FM 63-20 Ch 5 MP Operations. A direct support military police platoon is usually operating from the BSA. The battlefield missions performed by this platoon may include battlefield circulation control, area security, operation of the EPW point, and law enforcement. MPs conduct collection, evacuation, and internment operations to support their EPW mission. The EPW point holds EPWs captured by brigade units until they can be evacuated to the division central collection point. FM 3-19.40 covers EPW operations in detail. FM 63-21 Ch 4 S1 Section. Other functions of the PAC in support of the MSB include- Coordinate with the S2/S3, S4, and MP platoon leader on the location of EPW collection points; Project numbers of EPWs and civilian internees; Determine total transportation requirements for losses, replacements, and EPWs. Submit transportation request to the S4.

visit every wk. at a min  
brief every night.  
for so release.  
6-2  
look at living condition of detainees

Bn can be very involved. Do not take more detainees if not involved. If you take more detainees you have to make sure you have to you will make enemies.

2. (ALL) Can you tell me what basic publications you use for Detainee Operations (doctrine and standards)? (1.1, 4.1) (AR 190-8, DoD Directive 5100.77, 1949 Geneva Convention, FM 3-19.40 I/R Operations FM 3-19.4 MP Commander's Handbook are the basic/primary sources for doctrine and standards.

No.

3. (ALL) How did you prepare yourself and your junior leaders to become familiar with and understand the applicable regulations, OPORD/FRAGOs directives, international laws and administrative procedures to support Detainee Operations? (1.1, 1.2, 1.4, 1.6, 4.1) AR 350-1 para 4-14 c (2) and table G-1 Refresher training, dated 9 April 2003), Level B training is conducted in units for officers, warrant officers,

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NCOs and enlisted personnel commensurate with the missions of the unit. FM 3-19.40, paragraph 2-2, Commanders are familiar with applicable regulation, directives, international laws, and administrative procedures. ) ROE from CJCS ISO Iraqi operations dated 251600Z Apr 03 para 10 (U) All commanders will ensure their personnel are familiar with the law of armed conflict and with these ROE." FM 63-20 & 63-21

ROE had an Annex in  
in OPRD,  
FARGO.

4. (ALL) How did Home Station/Mob Site Training prepare you to conduct Detainee Operations? (Did this include Law of War and treatment of Detainees training.)? ? (1.1, 1.2, 1.3, 1.4, 4.1) DoDD 2310.1 (The U.S. Military Services shall be given the necessary training to ensure they have knowledge of their obligations under the Geneva Conventions (references (b) through (e)) and as required by DoD Directive 5100.77 (reference (f)) before an assignment to a foreign area where capture or detention of enemy personnel is possible. AR 350-1 para 4-14 c (2) and table G-1 Refresher training, dated 9 April 2003), Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit. AR 190-8 para 1-5 (4) (C), DOD Directive 5100.77, All prisoners will receive humane treatment and that the following acts are prohibited murder, torture, corporal punishment, mutilation, taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. Prisoners will be protected against all acts of violence to include public curiosity. (AR 350-1 para 4-14c.(2) and table G-1 Refresher training, dated 9 April 2003), Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit. AR 190-8 para 1-5(4)(C DOD Directive 5100.77), All prisoners will receive humane treatment and that the following acts are prohibited murder, torture, corporal punishment, mutilation, taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. Prisoners will be protected against all acts of violence to include public curiosity. (DoD Directive 5100.77, para 5.5.1, The Secretaries of the Military Departments shall provide directives, publications, instructions, and training so that the principles and rules of law of war will be known to members of their respective Departments, the extent of such knowledge to be commensurate with each individual's duties and responsibilities.

BRTC gave the unit training Detainees  
Search. proper move to CP.

Geneva Con Law of War classes given by  
ROE and had ROE Card JAG - Bde.  
3x5 card. had to certify in K they were.

5. (ALL) Can you describe the process of getting a Detainee to the Forward Collection Point in the BSA beginning with the point of Capture? How long do detainees stay in the company holding area before being transported to the BDE Forward Collection Point? (1.1, 1.2, 1.3, 1.5, 1.6, 1.7, 1.8, 2.1, 4.1)

Soldiers had packet that contained what  
he need to get from the Detainees

gave away explain why Detainee was Detained  
to the civilian

Live Condition in CP.

had to be right. 2

road in front.

blankets -  
to the front

Meals -  
HILL  
3683  
property  
sent  
in a box

6. (BN XO) How do your companies integrate the security and defense of the company holding areas into their perimeter defense? What is your normal ratio of guards to detainees in the holding area? Is this ratio the proper mix for you to perform your mission? If not, what are the shortfalls? How do these shortfalls impact your mission (1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.7, 1.8, 2.1, 3.1, 4.1)

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7. (ALL) Are you experiencing any transportation problems to move detainees, and if so what? What is the number of personnel needed to move prisoners internally or externally (i.e. from the BN holding areas to the Forward Collection Point, for medical evacuation, etc.)? (1.1, 1.5 1.7) FM 3-19.40 paragraph 3-45

Captives should not remain at the forward CP more than 12 hours before being escorted to the central CP. When they have been processed and are ready for evacuation, MP leaders - Report the status to the BSA TOC and the PM (through MP channels). Request transportation, rations, and water from the FSB Supply Officer (US Army) (S4). Ensure that receipts are ready for signature. Ensure that property is properly tagged and given to escort guards. FM 3-19.4 Chapter 7 Para 7.8, The number of MP needed to operate a division forward collecting point is based on the number and rate of captives expected and the METT-TC. FM 3-19.40 para 3-54 Captives should not remain at the central CP more than 24 hours before being evacuated to the CHA. FM 3-19.40, para 4-34, A transfer may be a result of reclassification or another situation requiring the movement of an EPW. Transfer an EPW from one facility to another under conditions that are comparable to those for a member of the US armed forces when possible. Security measures are determined by MP and are influenced by the type of EPW being transferred, the mode of transportation used, and other pertinent conditions. AR 190-47, 11-3.b.(4), Guard requirements for prisoners being transported outside an ACS facility, by means of foot, motor vehicle, or aircraft (other than AIREVAC or U.S. Marshals Service aircraft) are as follows: (a) Trained correctional, military police or security personnel: Under maximum custody circumstances, there will be one guard per restrained prisoner and two unarmed guards or one armed guard per unrestrained prisoner. Under medium custody circumstances, there will be one guard per five prisoners. In minimum custody circumstances there will be one guard per ten prisoners. Trustee guards will be determined by the ACS facility commander. (b) Non-correctional personnel: It is required that at least one guard be a SGT or above who is equal or senior to prisoners in a pretrial status. Under maximum custody circumstances, prisoners will have two guards per prisoner. In medium custody circumstances, prisoners will have one guard per two prisoners, and in minimum custody circumstances there will be one guard per five prisoners.

hard to move detainees from Bde CP to Div CP.  
due to sup. Move detainees in Log Pack by  
wheels. (and some by air) due to IED / Ambuses.

8. (ALL) What personnel or equipment USR shortages are affecting your ability to support detainee operations? What are your resource shortfalls to



point of Captains  
would need HMMV.

support this operation? What types of supplies is greater in-demand for the unit during detainee operations? (1.3, 1.5, 1.7, 2.1, 3.1) USR

WIRE, Sand bags, Tents, wood, Digging eq.  
and protect Soldiers

9. (ALL) What do you perceive to be doctrinal shortcomings pertaining to Detainee Operations and how would you fix/incorporate into updated doctrine/accomplish differently? How about Force Structure to ensure Detainee Operations can be successfully accomplished? What are the shortcomings and how do we fix the problem at the Army-level? (1.1, 1.3, 1.5, 1.7, 4.1) (AR 190-8, paragraph 1-4g(2), (Commanders will plan and procure logistical support to include: transportation, subsistence, personal, organizational and NBC clothing and equipment items, mail collection and distribution, laundry, and bath for DO. FM 3-19.40, para 7-101, Supply functions in a confinement facility are the same as those in other military units. However, stronger security measures are necessary to prevent certain supplies and equipment from falling into the hands of prisoners.)

FSB B CO now had to do FOB Security, DO.  
and repair eq. did not have people to do mission

Would Like to have more MP had a PLT would like  
a Co.

PLT for DO, PLT to Train Police

10. (ALL) What procedures are in place to ensure Soldiers and leaders understand the use of force and rules of engagement? (1.1, 1.2, 1.4, 1.6, 4.1) ROE from CJCS ISO Iraqi operations dated 251600Z Apr 03 para 10 (U) All commanders will ensure their personnel are familiar with the law of armed conflict and with these ROE."

see page 2 for ROE.

held the Command responsible for their Action  
All should know ROE

11. (ALL) What kind of stress counseling are Soldiers/Guards provided? (Psychiatrist, Psychologist, Chaplain, Medical, CBT Stress Teams) (1.1, 1.2, 2.1, 4.1) FM 3-19.40, paragraph 2-48, Personnel assigned or attached to I/R facilities are trained on the care and control of housed personnel. They are fully cognizant of the provisions of the Geneva and UN Conventions and applicable regulations as they apply to the treatment of housed personnel. A formal training program should include - stress management techniques. AR 190-8, Paragraph 1-5, (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ). FM 8-51, Appendix D, D-2 f (3): Combat stress control units should provide routine mental health consultation to EPW confinement facilities. This should include: stress control advice to the command regarding the stressors of US Army MP personnel and any allied or coalition personnel working at the confinement facility; individual evaluation and intervention for guards or prisoners when indicated.

had a stress management Team at FSB - (3 Soldiers)

Chaplain were involved with stresses of War  
and Counselling.

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DA IG

12. (ALL) What are the procedures for evacuating a sick or wounded Detainee? How does your unit maintain the security and safeguarding of sick or wounded Detainees while in transport? (1.1, 1.2, 1.8, 2.1, 3.1) AR 190-8, paragraph 3-4 i(2) Every camp will have an infirmary. EPW/RP with a contagious disease, mental condition, or other illness, as determined by the medical officer, will be isolated from other patients. A list of endemic diseases of military importance can be obtained from the theater surgeon or preventive medicine officer. EPW/RP will be immunized and reimmunized against other diseases as recommended by the Theater Surgeon. EPW/IR suffering from serious disease, or whose condition necessitates special treatment, surgery, or hospital care, must be admitted to any military or civilian medical unit where such treatment can be given. FM 3-19.40 Para 2-10. Commanders consider the following when establishing medical care (see AR 190-8): • The medical treatment facility provides isolation of communicable diseases, disinfection, and inoculations. Use retained medical personnel and EPWs with medical training to the fullest extent possible when caring for sick and wounded EPWs. When medical care is inadequate, transfer housed personnel to military or civilian medical facilities where the required treatment is available. AR 190-8 para 6-6.c. Medical facilities. Each CI camp will provide personnel, material, and facilities for adequate routine and emergency dispensary treatment.

had [redacted] with detainees if evac.  
(5X2)-3  
Doctor on hand to from medical section in FSB  
Detainee Treated just like soldiers

13. (ALL) Describe how the unit plans and procures logistical support to include: subsistence, organizational, and NBC clothing and equipment items, mail collection and distribution, laundry, and bath equipment ISO DO. (1.1, 1.2, 1.4) AR 190-8, paragraph 1-4g(2). (Commanders will plan and procure logistical support to include: transportation, subsistence, personal, organizational and NBC clothing and equipment items, mail collection and distribution, laundry, and bath for DO.)

FSB - brought most of the wood, Plex glass, clothes.  
other stuff came from SOI & MSB.

14. (BN XO) How do you provide your unit holding area with water? (Bottled water or bulk water)? (1.1, 1.2, 1.8) AR 190-8, paragraph 3-4 f(3) Sufficient drinking water will be supplies to EPW/RP

15. (ALL) What are the procedures if a detainee in U.S. custody dies? (1.1, 1.2, 4.1) AR 190-8 para 3-3a (20): Report allegations of criminal acts or war crimes committed by or against EPW/RP to the supporting element of the U.S. Army Criminal Investigation Command (USACIDC). Deaths resulting from other than natural causes will be investigated by USACIDC. Para 3-10 c: When an EPW or RP in US custody dies, the attending medical officer furnish the camp (or hospital) commander or other officer charged with their custody before death, the following information: (1) Full name of deceased. (2) ISN of deceased. (3) Date, place, and cause of death. (4) Statement that death was, or was not, the result of the deceased's own misconduct. (5) When the cause of death is undetermined, the attending medical officer will make a statement to that effect. When the cause of death is finally determined, a supplemental report will be made as soon as possible. e. The attending medical officer and the appropriate camp commander will complete a DA Form 2669-R (Certificate of Death). DA Form 2669-R will be reproduced locally on 8 1/2 by 11-inch paper. The form is located at the back of this regulation. This form is for the use of Army only. Enough copies of form will be made out to provide distribution as follows: (1) Original—information center. (2) Copy—information center (branch), if necessary. (3) Copy—The Surgeon General. (4) Copy—EPW or RP personal file. (5) The proper civil authorities responsible for recording deaths in the particular state if the EPW dies in the United States.

~~CCIR to higher~~  
CCIR to higher

15-6

Document what occurs for future reference.

16. (ALL) What AARs or lessons learned have you written or received regarding detainee operations? Can I get a copy? (preferably on disk) (2.1, 2.2) AR 350-1, paragraph 4-3c. The after action review is a structured review process that allows military training participants to discover how and why certain events actually happened and how to improve future task performance. The reviews focus on military training objectives, on performance according to Army standards, and on discovering lesson learned for sustaining and improving collectives and individual task performance proficiency.

See briefing slides

will sent to Div & CALL

17. (ALL) Are you aware of your requirement to report abuse or suspected abuse of detainees? (1.1, 1.2, 1.6, 4.1) AR 190-40 para 2-1, Military and civilian personnel assigned to or accompanying a DoD Component know that they shall report reportable incidents through their chain of command and that such reports also may also be made through other channels, such as the military police, a judge advocate, or an Inspector General.) AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident.

yes.

18. (ALL) What procedures do you have to report suspected detainee abuse?

Who can you report abuse/suspected abuse to? (IG, CID, Next Level

Commander) (1.1, 1.2, 1.6, 4.1) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C, Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

*Capture info*

*Submit thru Green Tag channel.*

*hold individual*

*or remove soldiers out of situation so they would not do something wrong.*

19. (ALL) Do your subordinates know the reporting procedures if they observe or become aware of a Detainee being abused? (1.1, 1.2, 1.6, 4.1) AR 190-40 para 2-1, Military and civilian personnel assigned to or accompanying a DoD Component know that they shall report reportable incidents through their chain of command and that such reports also may also be made through other channels, such as the military police, a judge advocate, or an Inspector General. AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their

ADG(0)  
Gc  
PMO

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honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

yes - report the Chain of Cmd.

20. (ALL) What steps would you take if a subordinate reported to you an incident of alleged Detainee abuse? (1.2, 1.6, 4.1) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C, Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and without adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)

Investigate  
Secure the Area.  
IS-6.  
advise higher of Action.

21. What do you perceive as the mission of your unit? Describe the importance of your role in that mission. (Insight to the Soldier's understanding and attitude concerning unit mission and their role) AR 600-20 Command Policy 2-1. Chain of Command  
a. The chain of command assists commanders at all levels to achieve their primary function of

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accomplishing the unit's assigned mission while caring for personnel and property in their charge. A simple and direct chain of command facilitates the transmittal of orders from the highest to the lowest levels in a minimum of time and with the least chance of misinterpretation. b. Commanders delegate sufficient authority to soldiers in the chain of command to accomplish their assigned duties, and commanders may hold these soldiers responsible for their actions.

*Safe & Security envior. for the soldier  
was in.*

*it was critical to protect forces.*

22. Describe your working environment and living conditions since being in Theater. (Identify physical and psychological impact on Soldier's attitude). (1.2, 1.3, 1.4, 1.5, 1.6, 1.7) FM 10-1, Ch. 7, para. 3, "Tactical Vision. A primary QMC focus at the tactical level will continue to be on sustainment of the soldier. Each company-sized unit will have two cooks and a small, state-of-the-art field kitchen. This provides a limited capability to prepare or heat meals and supplements. An improved containerized capability for providing responsive laundry and shower support well forward on the battlefield must be developed. Frontline soldiers require brief respites from the rigors associated with combat. A facility complex (Force Provider) will be available in which they can shower, clean their clothes, eat hot meals, and rest in an environmentally controlled shelter.

*Rush living in dirt in the begining  
MRE no ATC.*

*at the end COTS, heat wooden floor.  
Hot meals.*

23. Describe the unit command climate and Soldier morale. Has it changed or evolved since you have been in Theater? (Identifies Soldier's perception of the chain of command and Soldier attitude. Does the Soldier feel supported? Do Soldiers feel the Command cares? Are they getting clear guidance?) 1 AR 600-20 • 13 May 2002 1-5. Command, b. Elements of command. C. The commander is responsible for establishing leadership climate of the unit and developing disciplined and cohesive units. This sets the parameters within which command will be exercised and, therefore, sets the tone for social and duty relationships within the command. (1) Commanders and other leaders committed to the professional Army ethic promote a positive environment. If leaders show loyalty to their soldiers, the Army, and the Nation, they earn the loyalty of their soldiers. If leaders consider their soldiers' needs and care for their well-being, and if they demonstrate genuine concern, these leaders build a positive command climate. (2) Duty is obedient and disciplined performance. Soldiers with a sense of duty accomplish tasks given them, seize opportunities for self-improvement, and accept responsibility from their superiors. Soldiers, leader and led alike, work together to accomplish the mission rather than feed their self-interest.

*pretty good. → Soldier knew they had a real  
mission could see what they made a diffent  
to the IIR.*

24. Are you aware of any incidences of detainee or other abuse in your unit? AR 190-8, 1-5. General protection policy a. U.S. policy, relative to the treatment of EPW, CI and RP

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in the custody of the U.S. Armed Forces, is as follows: (1) All persons captured, detained, interned, or otherwise held in U.S. Armed Forces custody during the course of conflict will be given humanitarian care and treatment from the moment they fall into the hands of U.S. forces until final release or repatriation. (2) All persons taken into custody by U.S. forces will be provided with the protections of the GPW until some other legal status is determined by competent authority. (3) The punishment of EPW, CI and RP known to have, or suspected of having, committed serious offenses will be administered IAW due process of law and under legally constituted authority per the GPW, GC, the Uniform Code of Military Justice and the Manual for Courts Martial. (4) The inhumane treatment of EPW, CI, RP is prohibited and is not justified by the stress of combat or with deep provocation. Inhumane treatment is a serious and punishable violation under international law and the Uniform Code of Military Justice (UCMJ). b. All prisoners will receive humane treatment without regard to race, nationality, religion, political opinion, sex, or other criteria. The following acts are prohibited: murder, torture, corporal punishment, mutilation, the taking of hostages, sensory deprivation, collective punishments, execution without trial by proper authority, and all cruel and degrading treatment. c. All persons will be respected as human beings. They will be protected against all acts of violence to include rape, forced prostitution, assault and theft, insults, public curiosity, bodily injury, and reprisals of any kind. They will not be subjected to medical or scientific experiments. This list is not exclusive. EPW/RP are to be protected from all threats or acts of violence. d. Photographing, filming, and video taping of individual EPW, CI and RP for other than internal Internment Facility administration or intelligence/counterintelligence purposes is strictly prohibited. No group, wide area or aerial photographs of EPW, CI and RP or facilities will be taken unless approved by the senior Military Police officer in the Internment Facility commander's chain of command. e. A neutral state or an international humanitarian organization, such as the ICRC, may be designated by the U.S. Government as a Protecting Power (PP) to monitor whether protected persons are receiving humane treatment as required by the Geneva Conventions. The text of the Geneva Convention, its annexes, and any special agreements, will be posted in each camp in the language of the EPW, CI and RP.

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#### **ADVISEMENT OF RIGHTS (For military personnel)**

The text of Article 31 provides as follows a. No person subject to this chapter may compel any person to incriminate himself or to answer any questions the answer to which may tend to incriminate him. b. No person subject to this chapter may interrogate or request any statement from an accused or a person suspected of an offense without first informing him of the nature of the accusation and advising him that he does not have to make any statement regarding the offense of which he is accused or suspected, and that any statement made by him may be used as evidence against him in a trial by court-martial. c. No person subject to this chapter may compel any person to make a statement or produce evidence before any military tribunal if the statement or evidence is not material to the issue and may tend to degrade him. d. No statement obtained from any person in violation of this article, or through the use of coercion, unlawful influence, or unlawful inducement, may be received in evidence against him in a trial by court-martial. (1.2, 1.6)

I am \_\_\_\_\_ (grade, if any, and name), a member of the (DAIG). I am part of a team inspecting detainee operations, this is not a criminal investigation. I

am reading you your rights because of a statement you made causes me to suspect that you may have committed \_\_\_\_\_. (specify offense, i.e. aggravated assault, assault, murder). Under Article 31, you have the right to remain silent, that is, say nothing at all. Any statement you make, oral or written, may be used as evidence against you in a trial by courts-martial or in other judicial or administrative proceedings. You have the right to consult a lawyer and to have a lawyer present during this interview. You have the right to military legal counsel free of charge. In addition to military counsel, you are entitled to civilian counsel of your own choosing, at your own expense. You may request a lawyer at any time during this interview. If you decide to answer questions, you may stop the questioning at any time. Do you understand your rights? Do you want a lawyer? (If the answer is yes, cease all questions at this point). Are you willing to answer questions?

25. Describe what you understand happened leading up to and during the incident(s) of abuse. (No applicable standard) \_\_\_\_\_

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26. Describe Soldier morale, feelings and emotional state prior to and after these incidents? (Identifies unit and Soldier morale, atmosphere, mood, attitude, stress, retaliation, preemption, family crisis) \_\_\_\_\_

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27. Was this incident reported to the chain of command? How, when & what was done? What would you have done? (Identifies compliance, procedure, timeliness, Soldier perception of action taken and effect on unit morale.) (1.2, 1.6) (AR 190-40, Appendix B, Category 1 Reportable Serious Incidents, B-1. Actual or alleged incidents involving the following: b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Conventions, and atrocities. B-2. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-40, Appendix C Category 2, Reportable Serious Incidents, C-1. Actual or alleged incidents involving the following: g. Incidents involving prisoners or detainees of Army confinement or correctional facilities to include escape from confinement or custody, disturbances which require the use of force, wounding or serious injury to a prisoner, and all prisoner deaths. C-2. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident. AR 190-8, 5-1. General protection policy—civilian internee, a. Treatment. (1) No form of physical torture or moral coercion will be exercised against the CI. This provision does not constitute a prohibition against the use of minimum force necessary to effect compliance with measures authorized or directed by these regulations. (2) In all circumstances, the CI will be

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treated with respect for their person, their honor, their family rights, their religious convictions and practices, and their manners and customs. At all times the CI will be humanely treated and protected against all acts of violence or threats and insults and public curiosity. In all official cases they will be entitled to a fair and regular trial as prescribed by this regulation. (3) The CI will be especially protected against all acts of violence, insults, public curiosity, bodily injury, reprisals of any kind, sexual attack such as rape, forced prostitution, or any form of indecent assault. (4) The CI will be treated with the same consideration and with-out adverse distinction based on race, religion, political opinion, sex, or age. AR 190-8, para 6-9, e. Any act or allegation of inhumane treatment or other violations of this regulation will be reported to HQDA (DAMO-ODL), WASH DC 20310-0400 as a Serious Incident Report. Reporting instructions in AR 190-40 will be used.)\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

28. How could the incident have been prevented? (Identifies root cause and perceived solution) (No applicable standard)\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

29. Describe any unit training or other programs that you are aware of that teach leaders and Soldiers how to recognize and resolve combat stress. FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The measures which reduce battle fatigue and prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel. )

*Chaplain No.*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

30. What measures are in place to boost morale or to relieve stress? (Identifies perceived solution.) FM 22-51, para 11-5. Prevention of Misconduct Stress Behaviors. The

measures which reduce battle fatigue and prevent battle fatigue casualties should also help reduce the incidence of misconduct stress behaviors. However, additional actions also need to be practiced consistently by leadership at all echelons and by buddies at the small unit level. FM 22-51, para 1-3, Stress control requires special involvement from direct (small unit) leaders. The responsibility extends up through the organizational leaders and their staffs (both officers and noncommissioned officers [NCOs]) at all echelons. Appendix A describes combat stress risk factors and prescribes leaders' actions to control them. Leaders, staffs, and individual soldiers all receive assistance from the supporting chaplains, the medical personnel, and combat stress control/mental health personnel (see Appendix B for information pertaining to combat stress control units). If any link in the chain of responsibility is weak, it is the responsibility of the other members of the chain to strengthen it. FM 8-51, para 1-1, b. Responsibility For Stress Control. Control of stress is the commander's responsibility (see FM 22-51) at all echelons. The commander is aided in this responsibility by the noncommissioned officer (NCO) chain of support; the chaplaincy; unit medical personnel; general, principal, and special staff, and by specialized Army CSC units and mental health personnel.

*weigh  
down.*

<i>PT.</i>	<i>Hollow party</i>
<i>Church.</i>	<i>B.B.Q.</i>
<i>boxing smoker. (mach.)</i>	<i>4th July</i>
<i>unit news.</i>	<i>Base Sports events.</i>
<i>VTC's -&gt; SPT op.</i>	<i>B-Bull.</i>

31. What measures could the command enact to improve the morale and command climate of your unit? (Identifies perceived solution.) FM 22-103, Leadership and Command at Senior Levels, 21 Jun 1987, p. 6, - "Leadership. The process of influencing others to accomplish the mission by providing purpose, direction, and motivation." AR 600-100, Army Leadership, 17 Sep 1993, p. 8, 1987- "Senior-level leadership is the art of direct and indirect influence and the skill of creating the conditions for sustained organizational success to achieve the desired result. But, above all, it is the art of taking a vision of what must be done, communicating it in a way that the intent is clearly understood, and then being tough enough to ensure its execution."

*Quicker. emphasis on Quality of Life  
would have helped.*