

DEPARTMENT OF THE ARMY HEADQUARTERS, 1ST CAVALRY DIVISION CAMP VICTORY APO, AE 09344

FIVA-CG

REPLY TO

MEMORANDUM FOR SEE DISTRIBUTION

HJune 2004

SUBJECT: Inspector General's Brigade and Division Interrogation Facilities Inspection Report of Findings and Recommendations

1. The Inspector General, 1^{st} Cavalry Division, conducted an inspection of our Brigade and Division Interrogation Facilities from 10 - 19 May 2004. The objectives of the inspection were twofold: (1) to assess BIF and DIF operations' compliance and adherence to standards defined in the 1CD Apprehension and Detention SOP, version 5, and (2) to identify areas of noncompliance and systemic issues and recommend corrective measures.

2. The inspection results are enclosed. Areas of concern were identified that require your attention and action. Specifically, review your policies and guidance to ensure compliance with the recommendations noted in the inspection report.

PETER W. CHIARELLI Major General, USA Commanding

DISTRIBUTION: Commander, 1st BCT 2^d BCT 3rd BCT 5th BCT 39th ESB 312th MI BN 545th MP CO ACofS, G4 ACofS, G6 Provost Marshal Staff Judge Advocate

Encl

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DOD-038296



DEPARTMENT OF THE ARMY HEADQUARTERS, 1ST CAVALRY DIVISION APO, AE 09344

FIVA-IG (20-1)

REPLY TO

1 June 2004

MEMORANDUM FOR COMMANDING GENERAL, 1st CAVALRY DIVISION

SUBJECT: Inspector General's Brigade and Division Interrogation Facilities Inspection Report of Findings and Recommendations

1. **PURPOSE.** To provide the Commanding General (CG), 1st Cavalry Division (1CD), a report of the Inspector General's findings and recommendation pertaining to the inspection of the Division's Brigade Interrogation Facilities (BIFs) and Division Interrogation Facility (DIF).

2. REFERENCES (Encl 1).

3. BACKGROUND.

a. On 30 April 04 during the morning Battle Update Brief (BUB), the CG, 1CD, directed the staff to formulate and develop an inspection program of the 1CD BIFs and DIF in order to (IOT) assess and ensure the facilities were in compliance with the Geneva Convention, Command Directives, Fragmentary Orders (FRAGOs), Regulations, and Standard Operating Procedures (SOPs).

b. Immediately following the BUB, the 1CD Chief of Staff (CofS), $COL_{D(f)Cf}^{[b](6) \ge 2.5}$ chaired a meeting with the following individuals: $LTC_{D(f)Cf}^{[b](6) \ge 2.5}$ Division Staff Judge Advocate (SJA), $LTC_{D(f)Cf}^{[b](6) \ge 2.5}$ Division Provost Marshal (PM), $LTC_{D(f)Cf}^{[b](6) \ge 2.5}$ Commander 312th Military Intelligence (MI) Battalion (BN), and MAJ_{D(f) \ge 2.5}^{[b](6) \ge 2.5} Division Inspector General (IG). The aforementioned individuals discussed the inspection program to include staff lead, mission, intent, and purpose.

c. The CofS appointed the IG as staff lead for the inspection program. Further guidance issued by the CofS included briefing the CG, 1CD, no later than (NLT) 7 May 04 on the inspection program's mission, intent, concept of the operation, and concept of support; continuing to refine the 1CD Apprehension and Detention (A&D) SOP; developing the inspection checklists; and beginning inspections NLT 10 May 04.

d. On 7 May 04, the IG presented the Brigade and Division Interrogation Facility Inspection Program Concept Brief (Encl 2) to the CG, 1CD. Personnel in attendance included the Division SJA, Division PM, SGM

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Commander 312th MI BN, and MAJ^{[b][0][2]} 312th MI BN XO. The CG, 1CD, approved Enclosure 2 and provided further guidance annotated below.

(1) The inspection team is authorized to close any facility that is in violation of the Geneva Convention or violating basic human dignity. Such violations will be reported to the CG, 1CD, immediately. If a facility is closed, the detainees will be transferred to another facility. Less serious violations will be brought to the attention of the Brigade Combat Team (BCT) Commander for correction with a courtesy copy going to the CG, 1CD.

(2) The team will not shirk in its responsibilities. Attention to detail is a must. Anything less than forthright and honest reporting should not and will not be tolerated.

(3) If during the course of the inspection, primarily the sensing sessions with detainees, the team finds credible or preponderance of evidence pointing toward inhumane treatment, the information collected will be presented to the SJA for a legal review to see if the information warrants an immediate 15-6 investigation by an outside agency.

(4) If violations occur, the team will dictate the corrective action with a suspense that will be implemented. Failure to correct the violation by the suspense date necessitates notifying the CG, 1CD.

e. On 8 May 04, the inspection team developed the following facility shut-down criteria for incorporation into the 1CD A&D SOP.

(1) Medical and Environmental.

(a) Failure to provide sick call procedures and adequate medical care.

(b) Failure to provide adequate meals and water for consumption.

(2) Interrogation and Counter Resistance.

(a) Use of stress positions (physical postures) without CG, 1CD, approval.

(b) Use of loud music and light control to create fear or disorient the detainee without CG, 1CD, approval.

(c) Use of the "Pride" and "Ego Down" approaches without CG, CJTF-7, approval.(d) Use of the "Incentives" approach without CG, CJTF-7, approval.

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(3) BIF and DIF Operations.

(a) Failure of the guard force being briefed on the Rules for the Use of Force (RUF).

(b) Failure to establish procedures to remove soldiers from duty for suspected cases of mistreatment of detainees.

(4) Evidence and Legal Process.

(a) Failure to post CG, 1CD, policy letter stipulating treating detainees with dignity and respect.

(b) Serious violations and grave breaches of the Geneva Convention.

(c) Any detainee incident involving death, broken bone, injury requiring inpatient medical care, forcible sodomy, sexual abuse, or degradation or humiliation that shocks the conscience.

f. On 9 May 04, 1CD published (U) 1CD FRAGO 183 [PM TACTICAL ORDER 09MAY04] TO OPORD 03-52 [PEGASUS FREEDOM] which included the BIF and DIF inspection program guidance to the Division.

g. Announced inspections began 10 May 04 and concluded 19 May 04.

4. METHODOLOGY.

a. A two-phased inspection program consisting of a one-time, announced inspection for each facility (Phase I) and monthly, recurring unannounced inspections of each facility (Phase II).

b. The inspection team consisted of subject matter experts (SMEs) as well as a translator for interviewing detainees. Inspection team (# (rank and name (Focus Area)):

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(1) 2 x IG (MAJ ^{bio)226 (b)(7)(C)2} and IG Assistant NCO (Staff Lead))

(2) 1-2 x 31E (SFC binicize and SPC binicize (BIF and DIF Operations))

(3) 1 x G2X (CPT binesa) (Interrogation and Counter Resistance))

(4) 1 x Clinician (MAJ (5)(6)-2 (Medical and Environmental))

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(5) 1 x SJA (LTC DOMESTOR CPT DOMESTOR (Evidence and Legal Process))

(6) 1 x Translator (SFC $\frac{10}{10}\frac{10}{10}\frac{10}{2}$

c. Inspection team provided verbal feedback during the course of the inspections and Focus Area SMEs either provided a copy of their checklist results upon completion of the inspection or emailed their checklists results to their facility counterpart within twenty-four hours.

d. IG collected all inspection results for collation, analysis, and production of this report.

5. SCOPE.

a. The team inspected the Division's five BIFs (1BCT, 2BCT, 3BCT, 5BCT, and 39BCT) and the DIF.

b. Inspections are designed to be intrusive and last no more than three to four hours (average was three hours) consisting of a verbal in-brief, direct inspection of the facilities proper, direct observation of interrogation(s) (if scheduled), interviews with facility staff/personnel, interviews with detainees, document review, and a verbal out-brief.

6. FINDINGS.

a. Objectives.

(1) Assess BIF and DIF operations' compliance and adherence to standards defined in the 1CD A&D SOP, version 5.

(2) Identify areas of non-compliance and systemic issues and recommend corrective measures.

b. Inspection Focus Areas (Staff Proponent).

(1) Staff Lead (IG).

(2) Medical and Environmental (Division Surgeon). Inspection included twenty checklist items.

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(3) Interrogation and Counter Resistance (G2X). Inspection included fifteen checklist items.

(4) BIF and DIF Operations (PM). Inspection included sixty-nine checklist items.

(5) Evidence and Legal Process (SJA). Inspection involved ten checklist items.

c. Standard. 1CD Apprehension and Detention SOP, version 5.

d. Inspection Results.

(1) Medical and Environmental Findings. 6 of 6 facilities inspected did not violate shutdown criteria. 1 of 6 facilities inspected received all "GOs" on checklist items; however, no facility received less than 16 of 20 "GOs." Most common deficiency: 3 of 6 facilities failed to conduct medical screenings prior to release or transfer of their detainees. Detailed findings listed in Enclosure 3.

(2) Interrogations and Counter Resistance Findings. 6 of 6 facilities inspected did not violate shut-down criteria. 4 of 6 facilities inspected received all "GOs" on checklist items and 1 of 6 received 14 of 15 "GOs." Most common deficiency: 2 of 6 facilities failed to have a copy of the 1CD Detainee Operations/Interrogation SOP on hand. Detailed findings listed in Enclosure 4.

(3) BIF and DIF Operations Findings. 6 of 6 facilities inspected did not violate shutdown criteria. 0 of 6 facilities inspected received all "GOs" on checklist items. Most common deficiency: 6 of 6 facilities were improperly running and controlling their evidence room. Detailed findings listed in Enclosure 5.

(4) Evidence and Legal Process Findings. 6 of 6 facilities inspected did not violate shutdown criteria. 0 of 6 facilities inspected received all "GOs" on checklist items. Most common deficiency: 6 of 6 facilities were failing to provide detainees receipts for their personal belongings confiscated during their apprehension. Detailed findings listed in Enclosure 6.

(5) The IG, SJA, and DSS conducted interviews with detainees at all facilities except for 2BCT BIF. At all locations, detainees stated they were treated fairly and humanely. The detainees also stated they were receiving adequate food, water and medical treatment. All detainees interviewed stated they were unaware of why they had been detained. In regards to these allegations, the IG questioned the facility's COC to ascertain the validity of the allegations. In all instances, the detainees had been told why they had been apprehended and detained. There

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was no credence or substantiation to the detainee's allegations. In a majority of the interviews, the detainees stated they disliked the way in which the apprehending unit treated them, specifically in regards to issues relating to cultural awareness, i.e. being made to lose face or stature in front of their families. During the course of the interviews, the team ascertained that in no instance did apprehending units ransack a household while looking for items of interest and or contraband. Several of the detainees wanted to be able to notify their families as to their whereabouts and status.

7. RECOMMENDATIONS (Staff Lead).

a. The CG, 1CD, approve these findings.

b. The staff continue to revise the 1CD A&D SOP with monthly revisions. (PMO)

c. The IG continue the BIF and DIF inspection program and to provide feedback via a monthly written report to the CG, 1CD. (IG)

d. The facilities fully implement the manning positions, permanent and temporary/rotational, as outlined in the 1CD A&D SOP. (Unit)

f. Each BIF and DIF establish a property book for all materials, i.e. restraint devices, cots, mats, blankets, Korans, etc., at the facility in order to ensure proper accountability. (Unit)

g. All facilities must implement a grievance process for the detainees to be able to voice or submit written complaints. The grievance process must be the same for each facility. A translation of the process must be provided so that the detainees can read and understand the method of submittal for a grievance during their in-processing. The grievance process must be included in the 1CD A&D SOP. (SJA)

h. All facilities must implement a reporting process for detainee mistreatment, abuse, or inhumane treatment. The reporting process must be the same for each facility. The reporting process must be available to both the guard force and the detainees. A translation of the process must be provided so that the detainees can read and understand during their in-processing the method of reporting allegations of mistreatment, abuse, or inhumane treatment. The reporting process must be included in the 1CD A&D SOP. (IG/Assist SJA)

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i. Each facility must have its own SOP that reflects at a minimum the standards outlined in the 1CD A&D SOP and also includes the necessary details for the running of the facility. (Unit/Assist PMO)

j. Batons should not be used by units until they have received the appropriate instruction from trained and qualified non-lethal instructors. The training must be documented and on file at the facility. (Unit: Coordinate with SFC ^{b(6)/24(b)(f)(C)/2}

k. Detainees must be fed three (3) meals a day. All facilities were providing enough caloric intake for their detainees; however, there is no need to only be feeding the detainees twice daily. Meals must include fresh fruit, juice, bread, and milk. When possible, provide "Halah" meals for the detainees. As a side note, detainees do not like to drink water from bottles where the writing is in English. Several incidents have been reported where detainees have refused to drink such water. To prevent possible detainee heat injuries, units should have an adequate supply of "Arabic" water on hand. (Unit)

1. The 1CD A&D SOP must be revised to include a section on restraint devices, their use, and approval authority. (PMO/Assist SJA)

m. The 1CD A&D SOP must be revised to include a section on disciplinary procedures, their use, and approval authority. (PMO/Assist SJA)

n. Each facility must coordinate with SFC ^{D(0)/24} (0)/0C/2 b) (0)/24 (0)/0C/2 so that he may in turn coordinate with the 38th MP DET (CID) POC SA (0)(0)/14 (0)/0C/3 for evidentiary procedures.

o. Each facility must have a video recorder available to document detainee self-abuse; any necessary restraining, disciplining, or forced-cell removal/extractions; and evidentiary procedures. Video taping will document that the minimum amount of force was used for each incident. (G4/Assist G6)

p. Each BIF and DIF must have a personnel training program for new and recurring facility training. (PMO)

q. Each facility must have a mandatory reading file on hand that includes daily, weekly, and monthly signatory information that must be read by all facility personnel prior to beginning shift. Daily information should be limited in nature and be similar in form to III Corps "RED HASH" messages. For example, when a FRAGO is published that dictates a change to the current

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standard, a BIF and DIF message would be generated that would need to be read by all facility personnel prior to their coming on shift. This will preclude an overlooking of issues by a facility. The overall reading file program must be Division driven. (PMO)

r. Division Safety be included on the inspection team.

s. Re-emphasize that NO battalion holding areas authorized without explicit approval from the CG, 1CD.

t. The 1CD A&D SOP must be revised to include the verbatim entry in Chapter K, Release Procedures, "All recommendations from the staff to release a detainee must be reviewed and acted upon by the BCT Commander (or his designee) within 24 hours of the recommendation for release being sent to the BCT Commander." (SJA)

8. CONCLUSION. The inspection revealed there was a moderate level of compliance with the current 1CD A&D SOP existing at each BIF and DIF at the time of the inspection. However, many of the deficiencies noted during the inspection have already been reported as being corrected. 1CD is treating the detainees under its control with dignity and respect.

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9. Point of contact for this inspection is MAJ

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3. Medical and Environmental Findings

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- 4. Interrogation and Counter Resistance Findings
- 5. BIF and DIF Operations Findings
- 6. Evidence and Legal Process Findings

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Enclosure 1 (References) to Inspector General's Brigade and Division Interrogation Facilities Inspection Report of Findings and Recommendations

References:

1. (S//REL USA AND MCFI) CJTF-7 FRAGO 749 [INTELLIGENCE AND EVIDENCE-LED DETENTION OPERATIONS RELATING TO DETAINEES] TO CJTF-7 OPORD 03-036

2. (U) CJTF-7 FRAGO 455 (200415DJUL03) CLASSIFYING AND PROCESSING ENEMY PRISONERS OF WAR/DETAINED PERSONS/CIVILIAN INTERNEES]

3. (U) CJTF-7 FRAGO 741 [RULES FOR THE USE OF FORCE (RUF) FOR DETENTION FACILITIES] TO CJTF-7 OPORD 04-01

4. (S//REL USA AND MCFI) 1CD FRAGO 167 [AM TACTICAL ORDER 04 MAY 04] TO OPORD 03-52 [PEGASUS FREEDOM]

5. (U) FM 34-52: INTELLIGENCE INTERROGATION

6. (U) FM 100-5: US ARMY OPERATIONS

7. (U) FM 27-10: THE LAW OF LAND WARFARE

8. (U) AR 190-51: SECURITY OF UNCLASSIFIED ARMY PROPERTY (SENSITIVE AND NONSENSITIVE)

9. (U) AR 190-8/MCO 3461.1: ENEMY PRISONERS OF WAR, RETAINED PERSONNEL, CIVILIAN INTERNEES AND OTHER DETAINEES

10. (U) AR 195-2: CRIMINAL INVESTIGATIVE ACTIVITIES

11. (U) AR 381-10: US ARMY INTELLIGENCE ACTIVITIES

12. (U) AR 3-19.40: INTERNMENT/RESETTLEMENT OPERATIONS

13. (U) (S/NOFORN) CJTF-7 INTERROGATION AND COUNTER-RESISTANCE POLICY, 12 OCTOBER 2003

14. (U) (FOUO) 1CD APPREHENSION AND DETENTION SOP Version 5.0

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15. (U) MANUAL FOR COURTS MARTIAL

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Enclosure 3 (Medical and Environmental Findings) to Inspector General's Brigade and Division Interrogation Facilities Inspection Report of Findings and Recommendations

1. Findings. 6 of 6 facilities inspected did not violate shut-down criteria. 1 of 6 facilities inspected received all "GOs" on checklist items; however, no facility received less than 16 of 20 "GOs."

2. Objectives.

a. Assess BIF and DIF operations' compliance and adherence to standards defined in the 1CD A&D SOP, version 5.

b. Identify areas of non-compliance and systemic issues and recommend corrective measures.

3. Standard. 1CD Apprehension and Detention SOP, version 5.

4. Inspection Results.

a. The current facility does not provide for sufficient latrines for the detainees. The latrine at the facility did not have a door and the guard force could observe detainees using the latrine.

b. The current facility does not provide for sufficient shower facilities for the detainees. In conjunction with the insufficient shower facilities, the water storage tank used to provide the water for the shower was inadequate (capacity too small).

c. The detainees were sharing one bar of soap that was being kept at the single shower point.

d. Some medication that is being administered is not being taken. Inspectors found four Tylenol tablets in a detainee's bed.

e. Detainees are not being screened prior to being transferred or released. This is because there are no medical personnel working full time at the facility.

f. Insufficient hygiene items being provided for the detainee population.

g. Facility should attempt to provide fresh fruit, juices, and milk for the detainees' consumption.

h. The initial medical screening form is not being reviewed by a certified health care provider.

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Enclosure 4 (Interrogation and Counter Resistance Findings) to Inspector General's Brigade and Division Interrogation Facilities Inspection Report of Findings and Recommendations

1. Findings. Interrogations and Counter Resistance Findings. 6 of 6 facilities inspected did not violate shut-down criteria. 4 of 6 facilities inspected received all "GOs" on checklist items and 1 of 6 received 14 of 15 "GOs." Most common deficiency: 2 of 6 facilities failed to have a copy of the 1CD Detainee Operations/Interrogation SOP on hand.

2. Objectives.

a. Assess BIF and DIF operations' compliance and adherence to standards defined in the 1CD A&D SOP, version 5.

b. Identify areas of non-compliance and systemic issues and recommend corrective measures.

3. Standard. 1CD Apprehension and Detention SOP, version 5.

4. Inspection Results.

a. Sworn statements provided by the capturing unit need to reflect why the specific individual detained was detained. Often, one blanket sworn statement signed by two separate individual is used for everyone who was detained during the raid. This meets the intent of having two sworn statements; however, it does not allow for the specificity needed for the interrogators to perform their jobs, nor does it allow for the specificity needed for future prosecution efforts if necessary.

b. FM 34-52, Intelligence Interrogation, was not on file at the facility.

c. A copy of the 1CD Detainee Operations/Interrogation SOP was not on file at the facility.

d. Interrogators were able to recite the Brigade PIRs from memory.

e. Interrogators kept very comprehensive SIR records.

f. Interrogators knew which interrogation techniques required CG, 1CD, and CG, CJTF-7, approval from memory.

g. Policy letters and SOPs were signed by the interrogators. Although this is not necessary, such policy helps reinforce understanding and compliance.

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Enclosure 5 (BIF and DIF Operations Findings) to Inspector General's Brigade and Division Interrogation Facilities Inspection Report of Findings and Recommendations

1. Findings. 6 of 6 facilities inspected did not violate shut-down criteria. 0 of 6 facilities inspected received all "GOs" on checklist items. 6 of 6 facilities were improperly running and controlling their evidence room.

2. Objectives.

a. Assess BIF and DIF operations' compliance and adherence to standards defined in the 1CD A&D SOP, version 5.

b. Identify areas of non-compliance and systemic issues and recommend corrective measures.

3. Standard. 1CD Apprehension and Detention SOP, version 5.

4. Inspection Results.



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Enclosure 5 (BIF and DIF Operations Findings) to Inspector General's Brigade and Division Interrogation Facilities Inspection Report of Findings and Recommendations

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Enclosure 6 (Evidence and Legal Process Findings) to Inspector General's Brigade and Division Interrogation Facilities Inspection Report of Findings and Recommendations

1. Findings. 6 of 6 facilities inspected did not violate shut-down criteria. 0 of 6 facilities inspected received all "GOs" on checklist items. Most common deficiency: 6 of 6 facilities were failing to provide detainees receipts for their personal belongings confiscated during their apprehension.

2. Objectives.

a. Assess BIF and DIF operations' compliance and adherence to standards defined in the 1CD A&D SOP, version 5.

b. Identify areas of non-compliance and systemic issues and recommend corrective measures.

3. Standard. 1CD Apprehension and Detention SOP, version 5.

4. Inspection Results.

a. The facility does not have a secure evidence room or a building that can safeguard the evidence collected by Coalition Forces.

b. An evidence custodian per shift has not been identified. Several personnel have access to the evidence wall locker.

c. All evidence is not stored at the facility.

d. Detainees are not given a receipt for their personal property.

e. Copies of the RUF not posted for the guards or interrogators.

f. There were no "No Photography" signs posted anywhere on the premises.

g. The guard force has not been trained on the Geneva Convention or RUF.

h. The facility has a secure evidence room that is neatly organized with shelving and lidded containers for evidence.

i. An evidence custodian per shift has been appointed; however, more than one person per shift has access to the evidence room.

j. There were no copies of the Geneva Convention available for detainees or guards.

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