

Science of Detection: Integrating Practice & Theory (July 17-18 2003)

July 17:

8:30 – 9:00: Sign-in, coffee (the doors at least open); setting up computers, etc.

9:00 – 9:30: General Introduction (Kirk -- & the three of us can introduce ourselves) & statement of the goal of the meeting; outline of schedule

9:30 – 11:30: Each participant can introduce themselves, just by going around the room. Opportunity for each researcher to provide 5 min of description of their research. *[this seems like it might fit well here: so that the whole group knows the whole group before they break out into smaller groups --?]*

11:30 – 11:45: break

11:45 – 1:45: Break out into working groups & working lunch*

1:45 – 2:00: break

2:00 – 4:00: Break out into different working groups*

4:00 – 5:30: General discussion

6:30 or so (these are likely to be early sorts of people, yes?!): dinner

July 18

9:00 – 9:30: Summary of previous day's discussions (we would provide this)

9:30 – 11:00: Recommendations for "best practice"

11:00 – 12:00: Areas for future research; mechanisms for evaluation; other meetings needed

- We might identify four or so themes or questions and let people self-select, before the meeting, which two they would like to focus on in these working groups (and then we can reassign as necessary). This puts a maximum of 10 people in each group (excluding observers) and would create about four groups per session. We would need then four room and four note-takers. Ideally, these rooms would have capacity for powerpoint but if not, we can make sure people have hand-outs of additional data they might want to share. We would each be a leader in each group, perhaps? Or designate a participant?

Kirk;s list:

Embassy Walk-In Phenomena

Throughout the world, individuals regularly walk into an American Embassy and state that they have valuable information regarding threats to U.S. interests abroad or sensitive intelligence information. These “walk-ins” or “volunteers” will also phone in or send emails to U.S. embassies with offers of information.

Some walk-ins actually have valuable, sensitive information, some are mentally unstable, and some are “provocations,” hoping to pique the interest of the CIA to identify Agency employees and /or the methods used by the Agency to handle walk-ins. Others simply wish to provide false and misleading information to the Agency, and still others may have useful information but are trying to peddle the information to multiple governments in the hope of reaping financial gain.

Determining who has legitimate information of value and who is engaging in a deception is clearly a critical issue. Constraints include limited time to interview the walk-in, variability in interviewer skill (sometimes the interviewer is an Embassy Security Officer, other times it is an Agency ops officer), or lack of face-to-face observation in the case of individuals calling in or writing email.

Law Enforcement Threat Assessment

Law enforcement, especially the FBI and Secret Service, receive threats by phone, letters, and email. Responding in terms of false positives and false negatives has significant impact in terms of public safety and expending resources. How can these types of threats be validated?

Law Enforcement Interrogation and Debriefing

Law enforcement routinely question witnesses and suspects regarding criminal activity. How do you tell if the individual is telling the truth, lying, or something in between? Acts of omission and acts of commission are both important to identify.

Intelligence gathering

Many government agencies, including but not limited to DOD, FBI, DOE, CIA, and the Department of Treasury, gather “intelligence” of one type or another. A high priority is how to evaluate the authenticity of both the source of information and the information itself. Issues that need to be addressed include whether the person is who s/he says s/he is, whether s/he has access to the information s/he purports to have, and whether the information accurate.

Themes:

1. Types & definitions of deception: Intent to provide information versus mental instability versus provocations versus malice versus seeking \$: authenticity of the apparent deception & determination of intent; cross-cultural issues
2. Deception detection: Constraints on opportunity to observe another; variance depending on method/mode of information (phone, email, face-to-face, letters); technological methods (NIRS, etc.); detection of resources of another person
3. Issues of training: “expert” versus novice; operatives’ perceived threat versus felt need to respond at all costs to all threats; issues of cultural differences
4. ?

Questions prompted by Kirk’s list:

1. What history of success or failure do we have, and what can we learn from our own history (avoiding hindsight bias, if possible)? How can we analyze these situations with the technology of decision-making analysis that has been used in the practice of medicine?
2. What similar situations do we have in other venues that can inform us about this (where else do we ask people to keep or divulge secrets? Separate themselves from home and family and country? Quickly size up another individual, etc.)
3. What is the impact of our felt need to act secretly? In haste? How would the behavior be different if those needs were not present?
4. How does the current behavior of the U.S. embassy personnel (or whomever the officers are) impact on how people offer information?
5. What are the relative rates of lies of omission versus lies of commission?
6. What are the dimensions of truth? Lies, truth, something in between? How much truth is present in our everyday social world, and how does this vary as a function of culture? How much is truth valued (as compared to other valued behaviors) and again, how does this vary as a function of culture?
7. How do we find out if the informant has knowledge of which s/he is not aware?
8. How do we detect lies: explicit behaviors; changes in behaviors; events contrary to my belief or memory; understanding the determinant motivation of the informer; informer’s explicit knowledge of the individual officer; consistency across changes in situation and interactions with others
9. How do we perceive inconsistency: that is, what is the presumed structure of truth so that inconsistency with this structure can be recognized? Do we fallaciously assume that

the usual norm is truth telling, whereas the usual norm is social negotiation? How might this vary with culture?

10. How important are differential power and status between informer and officer?

11. What assumptions do we make, and which should we make, about behaviors associated with deceit, and how much does this vary with culture?

12. How does motive affect social negotiation?

13. How are judgments about deception affected by *negativity bias*, *positive affective forecasting bias*, and *moral judgment* tendencies?

June 17, 2003

1. Can we reasonably map types of lies, or conceptions of lies, to specific behaviors and to the likelihood of their occurrence to specific situations? E.g., lies about bombs in suitcases to airport security. Once we do this, can we create categories and relationships among categories, and then test the validity of such across samples?
2. What pharmacological agents are known to affect apparent truth-telling behavior?
3. What has the U.S. government or military, or other governments or agencies, used in Guantanamo or other places abroad, in interrogation of captives/prisoners?
4. Much of what is understood about how the brain works comes from analysis of nonhuman animals. An fMRI or better yet, NIRS methodology that could be used with relatively small animals (rabbits, rats, dogs, cats) without necessity of anesthesia would be valuable. Relevant to this, what image motion algorithms could be useful?
5. Might it be possible to greatly increase the likelihood of success if we agree that different strategies are needed to different types of interactions? That is, to proposed that the same methodology may not be appropriate for personnel selection as for surveillance or law enforcement or airport screening.
6. What are the working definitions of deception and deception detection? Spinning, withholding, false memories, trickery, plausible denial statements, and so on. What are the relationship of these to error & lapses of memory, self-deception, MPI and malingering; plausible deniability; avoiding answering?
7. How similar is the task to detection of mental illnesses?
8. What is the role of malice in deception, and how might this make us think differently about the behavior compared to the detection of mental instability or illness?
9. What are the explicit or implicit current models of deception? E.g., detection of features & analysis of responses in visual cortex – these systems are likely to be less plastic than other brain systems (although still experience-dependent for development). A limitation of such is that we view visual systems as unimodal,

and not much affected by emotional processing, whereas deception must be highly emotion-dependent, in many instances.

10. The strategy used by those who try to localize behaviors within brain regions usually is to search for a behavior that distinguishes action in brain regions – whereas what we are doing is starting with a behavior (or, a behavior + outcome) and looking for a corresponding brain region. What precedents do we have for this kind of behavior-to-brain region strategy?
11. What would an artificial deception agent look like? Change with the situation (context-dependent), corresponding change in behavior contingent on behavior of recipient.
12. How can we model the characteristic that deception frequently is a social interaction, and that the recipient's behavior may determine the behavior of the deceiver in a real-time manner?
13. What are the effects of learning to lie? Can these be demonstrated within relatively short periods of time (e.g., within a test session)?
14. What are the learning (or sensitization or habituation) effects that must occur within fMRI or other neuroimaging sessions? Using event-related rather than block designs controls for expectancy effects, but not for these various learning or learning-related effects.
15. What are the sources and effects of regional differences in blood flow in the brain? (that impact on our interpretations of BOLD fMRI & NIRS)
16. What are our cultural stories (folk psychology) regarding truth and lies, and how we value these in different situations? What are other cultural stories?
17. What might we learn about deception from instances of self-deception, such as Mass Psychogenic Illness (where people believe, for example, that they have been exposed to a toxin and get ill, even though there has been no exposure)?
18. What might be learned from instances of dissociative memories and personalities, where one "person" believes some things and the other, other things?
19. What use can we make of instances of deception among ourselves, such as the experiences of undercover agents, spies, selective sharing of information depending on classification rating; socially acceptable lies (e.g., about weight or age); lies to children from parents (Santa Claus) or other instances of power differentials?
20. What might we learn from deception successes, such as exposed spies, military deception operations, illegal entry into the U.S. that wasn't discovered initially, the Gulf of Tonkin, etc.?
21. How determinant are the needs of the receiver in detecting deception? Aren't we changing our criterion point depending on motivation – are we aware of this and how this changes across situations.
22. What are the important general receiver characteristics? That is, how does how you respond to me change the way I lie?
23. What are the ways lies are detected outside of high tech situations? E.g., those who are good gamblers. Amarillo Slim Preston says that he notes changes in patterns of behavior across short durations of time. . . . what other social situations involve lie-detecting?

24. How is our perception of a lie affected by psychological variables such as cognitive dissonance, negativity bias, positive affective forecasting (etc.) variables?
25. What are the conditioning effects in the responses used in polygraphs? Pavlovian conditioning began with analyses of autonomic responses – and since then, we have found that everything that squirts, wiggles or otherwise secretes, is conditionable. The implications of this is that the measures used in polygraph detection (for example) are likely to be fundamentally changed as a function of the individual’s conditioning history (in principled ways, but we may not know enough about the individuals to know what factors were operating). These may include EEG measures (e.g., Jennifer’s comments about the prisoners on death row). It may be that fMRI is reflecting the same conditioning histories (it would be parsimonious to assume so). We can do conditioning studies and track these effects (and take advantage of good real-time computational models to guide the research).
26. What are the effects of various mental “dysfunctioning” on our various measures of deception? E.g., Don Tucker’s analysis of depressives (found different ERNs depending on degree of depression, with mid-depressives showing the largest ERN and non-depressed and more-depressed, less ERN).
27. What can be learned from psychological “malingerers?”
28. What might we learn about attitudes towards, and assumptions about, deception from understanding why the British (and their journalists) are attacking Blair so much more than Americans are attacking Bush re finding WMD in Iraq?
29. If we had to classify social behaviors, what else would be in the X category with deception? If we had to classify emotion behaviors or cognitive behaviors, what else would be in the X category with deception? What other behaviors have such a likely conjunction of social, cognitive and emotive components?
30. We often assume deceit involves malice and intent to harm. But it is as often motivated by compassion and dedication to good (and God). How might deception behaviors be different depending on the underlying motivational system?
31. What if a better view of the “mind” is not cognition on one side and emotion on another, but emotion below and cognition emergent, or vice versa, or both in parallel throughout? What if the brain doesn’t distinguish between cognition and emotion, and this is separable only more downstream? What about reward centers and mechanisms? Where do these lie in relation to the others?
32. Researchers in neuroscience (Steve Maier) have proposed a model of stress which is that the stress response (including response mechanisms from brain to wound site) has co-opted the sickness/illness coping system. Perhaps the same can be said for depression co-opting the pain system. Can we imagine what system deception co-opted, given how prevalent deception is among nonhuman animals?
33. What is the consistency among the presumed measures of deception across individuals and situations?
34. If we are to construct a system for deception detection, how can we ensure that it “fails well?” (Stretch and sag before breaking, each component failure leaving the whole as unaffected as possible.)

35. Role of belief (including bogus pipeline effect)
36. Utility vs accuracy
37. Are there olfactory clues to deception? Pheromones? Maybe we could train good olfaction systems (e.g., dogs) to detect such cues.
38. Lying takes more mental memory and processing effort than truth telling, because we have to remember what we said when and where, whereas truth is generally less context and time-dependent. Could we use changes in contexts in which questions are asked to look for consistency across situations as indications of deception?
39. What are the differences between acting, role-playing, and deception?
40. Can we measure pupil size or other autonomic responses to subliminal stimuli as indices of intent to deceive?
41. How can we best characterize motivation in deception – money; personal gain; personal beliefs, etc.
42. There are some data that indicate that people with aphasia are better at detection of deception via visual cues; and that people who are achromatic are better at discriminating some visual features than normals. These sort of data indicate something like a process where if we take away the usual mode of access to information, we may be more effective at using secondary modes, perhaps because this removes expectancy or habituation effects, etc. Might this be useful in deception detection?\
43. What are sensory overloads on the maintenance of deceptive behaviors? How might we overload the system or overwhelm the senses and see how it effects deceptive behaviors?
44. What are the ethical considerations: false alarm rates, tampering, privacy, subject recourse or appeal. What should we expect on the basis of the fact that there is a significant potential for manipulation; fMRI is still rather a black art and outcome can be manipulated by settings, parameters, etc. This makes use of such systems vulnerable to legal challenge.
45. Might someone who wants to evade detection systems be able to temporarily fake a temporary physical illness or mental illness in order to get past deception detection systems (factitious disorders) and then once inside (the embassy, the hospital, the office, whatever) have access to secure systems? E.g., could a person apply a tMS coil to their own head and get bizarre EEGs temporarily and make use of that?
46. Are there olfactory clues to deception? Pheromones? If there are, could we get dogs to detect deception?
47. What are the effects of a jerk examiner in a polygraph situations?
48. Are there current cognitive models of truth and deception? Are there any good cognitive models that focus on a particular behavior like deception that are successful?
49. Is it possible to distinguish deception signatures from truthful when Ss are:
 - Believed to be guilty
 - Believed to have a high likelihood of being guilty
 - From a socially stigmatized group

50. How do events pre-examination matter to polygraph session? What about events during the examination?
51. What is the desired value-added criterion for judging the utility of a given method?

Some ideas:

1. Use cognitive dissonance methodology to distinguish lies from beliefs: Have subject either argue for something that is counter-belief and pay them (in which case they would state the argument with no change in belief structure) or argue for something similarly counter-belief and don't get paid for. In the first case, there should be more lying than in the second, because of the change in belief or attitude in the second case.
2. Add attentional stressors, anxiety and outcome burdens – make this high stakes lying.
3. Use animal models, especially to develop NIRS methodology and use of such with tMS.
4. Establish a research program in deception with “coupled imaging;” i.e., evaluating the constraints that one imaging modality places on analysis of another. (Don Tucker)
5. Use IAT methodology to uncover deception (has anyone done this?)
6. Involve people with background in animal learning/learning theory, and not just those with background in cognition and AI. In part, because this is a richer literature domain, and in part because these investigators are more familiar with the notion of integrated systems (e.g., emotion & memory, etc.).
7. Identify physiological baseline level of activity within the human brain (to enhance the interpretation of imaging techniques).
8. Since it is difficult to make laboratory studies sufficiently high-risk, we can at least manipulate level of risk (e.g., reduce it by varying degrees, since that is possible) and assess the effects?

From: "Mumford, Geoffrey" <gmumford@apa.org>
To: 'Michael Bennett' [REDACTED], 'Charles Bond' [REDACTED], 'Kent Crawford' <CRAWFOKS@osd.pentagon.mil>, 'John Darley' [REDACTED], 'Bella DePaulo' [REDACTED], 'Roy Freedle - alt' [REDACTED], 'Roy Freedle' [REDACTED], 'Tim Guilford' [REDACTED], 'Roy Godsen' [REDACTED], 'Doug Griffith' [REDACTED], 'Doug Griffith - alt1' [REDACTED], 'Robert Kinscherff' [REDACTED], 'Daniel Lassiter' [REDACTED], 'Robert Mitchell' [REDACTED], 'Andy Morgan' [REDACTED], 'Maureen O'Sullivan' [REDACTED], 'Richard Petty' [REDACTED], 'Daniel Povinelli' [REDACTED], 'Dan Povinelli - alt' [REDACTED], 'Richard Rogers' [REDACTED], 'Richard Shultz' [REDACTED], 'Roy Shuy' [REDACTED], 'Gary Strong' <gary.strong@dhs.gov>, 'Jennifer Vendemia' [REDACTED], 'James Wirtz' <jwirtz@nps.navy.mil>, 'Tom Zeffiro' [REDACTED]
Cc: 'Kirk Hubbard' [REDACTED], 'Scott Gerwehr' [REDACTED], 'NIMH-Susan' <SBrandon@mail.nih.gov>, "Mumford, Geoffrey" <gmumford@apa.org>
Subject: Deception Workshop - Details
[Confirmation note final.doc](#)

Dear Friends,

This letter is to confirm your participation in the workshop "The Science of Deception: Integration of Practice and Theory," to be held in Arlington VA July 17 and 18, 2003. We also want to provide you with further information about the meeting and to ask you to send us information.

Logistics

Location: The conference will be held at RAND's Washington DC headquarters. Full details for travel there can be found at <http://www.rand.org/locations/wo.directions/>

Hotel accommodations: If you are staying at the hotel, we have reserved a pre-paid room in your name at Embassy Suites located just two blocks from RAND at 1300 Jefferson Davis Highway in Arlington, VA. Telephone (703) 979-9799. For other details, please see: <http://www.embassysuitesdcmetro.com/crystalcity/>

Schedule: We will begin on Thursday the 17th at 9:00 AM (coffee and breakfast food will be available at the meeting room at 8:00 AM) and end that same day at about 6:00 PM; lunch will be provided onsite. We have arranged for the group to have dinner at a local restaurant (the Thaiphoon) the evening of the 17th and we hope that you can join us for that. The meeting the next day (July 18) will begin again with 8:00 AM coffee and breakfast (discussion to begin at 9:00 AM) and end at about 12:30 PM.

Travel arrangements & costs: If you have not already made travel arrangements APA will be pleased to help you make your travel arrangements via our on-site American Express Travel Office. The Amex staff can be reached at 1.800.925.2864. Transportation and hotel costs are being covered by the CIA; reimbursement procedures for costs not directly billed to the organizers will be described at the meeting.

Questions about logistics should be directed to Geoff (GMumford@apa.org)

Requests for information from you:

(1) A paragraph describing your background and contact information, and then one or two paragraphs describing the relevance of your background to deception detection, and/or questions or issues that you would like the group to consider about deception and deception detection. (An example of what we are looking for is included as Item 1 below.) We would prefer that you send this to us (GMumford@apa.org) before the meeting. We realize that some participants may not all be able or want to provide such information.

(2) There will be a limited amount of time for data presentations either to the whole group or during the break-out groups. If you have such presentations on powerpoint, please email the powerpoint file to Scott Gerwehr (gerwehr@RAND.org <mailto:gerwehr@RAND.org>). If you will need other media devices, please let us know. We are not scheduling more than about 5 minutes worth of any single presentation, unless the individual break-out groups request longer.

(3) A significant portion of the workshop will consist of small (about 10 people) discussion groups - the plan is to break out into four such groups twice. The discussions will focus on the four "scenarios" provided below. Would you indicate to us which two scenarios you are most interested in discussing? We can't promise that assignment but we would appreciate knowing now what your interest and preference might be.

Several of you have sent us pdf version of papers that you would like to share with the group. These will be attached in a separate email. We welcome the opportunity to pass additional papers on, if you will send them to us. If you don't have an electronic version and would like to provide copies of the papers at the meeting, please either mail a hard copy to Geoff Mumford at APA, or bring copies with you for distribution at the meeting.

Item 1:

Example of one-page bio and relevant questions/issues:

Scott Gerwehr, Associate Policy Analyst, RAND
RAND (Santa Monica)

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My professional training is in neuropsychology. During the past six years at RAND, my research has focused on the psychological dimensions of conflict: deception and counterdeception; interpersonal and strategic persuasion; indoctrination and radicalization; military psychological operations at all levels of war; risk communication; public and covert diplomacy; and tactical communications in law-enforcement. The settings for these research efforts have included aerospace operations, urban insurgency and conflict, confidence artistry, cults, computer network

operations, deceptive advertising, undercover law-enforcement operations, terrorism and counterterrorism, counterintelligence, and the foreign policy of states and non-state actors. SECRET clearance since 1997, TS/SCI since 1998.

Questions/issues to consider:

Foreign intelligence agencies are continually seeking to probe, penetrate, and compromise U.S. information infrastructure (including networks, hosts, and data in both public and private sector systems). The goals of these intruders may be intelligence collection, profit, military reconnaissance, psychological operation, or vandalism and destruction. Perimeter and exclusionary defenses (e.g., firewalls, passwords) have been unable to prevent these activities, often because these well-trained attackers are skilled in a variety of cyber-deception techniques.

Intruders employ an array of deceptive techniques, including:

- * Mimicking the general behavior patterns (e.g., time of day, volume of activity) of legitimate users in the systems they penetrate
- * Mimicking the language and idiom of legitimate, indigenous users
- * Disguising their communications as background noise
- * Disguising their harmful applications as innocuous ones
- * Diverting the attention of defenders by sacrificing lesser accomplishments (e.g., placing two trapdoors: a more and a less difficult-to-discover version)

There are a large number of variables which defenders might focus on; the classic framework includes variables in each of source, target, message, and context categories. For example:

- * Source: Is the intruder deliberate or hasty? Focused or opportunistic?
- * Target: Are defenders expecting to face deceptive intruders? Have they been trained in deception-detection?
- * Message: Is the script of mimicked responses thin or elaborate?
- * Context: Is the timeline short or long? How often are detected anomalies false positives?

Which ones contribute the most to the outcomes of successful deception? What defensive countermeasures will cost-effectively mitigate (or altogether ameliorate) the most adversary deceptions to the greatest degree? What are the performance functions of adversary deceptions? Do they taper gently or drop precipitously, and in what circumstances? (Obviously, these questions just scratch the surface.)

Item 2:

Scenarios:

#1 - Embassy Walk-In Phenomena

Throughout the world, individuals regularly walk into an American Embassy and state that they have valuable information regarding threats

to U.S. interests abroad or sensitive intelligence information. These "walk-ins" or "volunteers" will also phone in or send emails to U.S. embassies with offers of information.

Some walk-ins actually have valuable, sensitive information, some are mentally unstable, and some are "provocations," hoping to pique the interest of the CIA to identify Agency employees and /or the methods used by the Agency to handle walk-ins. Others simply wish to provide false and misleading information to the Agency, and still others may have useful information but are trying to peddle the information to multiple governments in the hope of reaping financial gain.

Determining who has legitimate information of value and who is engaging in a deception is clearly a critical issue. Constraints include limited time to interview the walk-in, variability in interviewer skill (sometimes the interviewer is an Embassy Security Officer, other times it is an Agency ops officer), or lack of face-to-face observation in the case of individuals calling in or writing email.

* What history of successes and failures do we have, and what can we learn from our own history (avoiding hindsight bias, if possible)? How can we analyze these situations using the procedures of decision-making analysis that have been used in the practice of medicine?

* What use can we make of instances of deception among ourselves, such as the experiences of undercover agents, spies, selective sharing of information depending on classification rating; socially acceptable lies (e.g., about weight or age); lies to children from parents (Santa Claus)?

* How does the current behavior of the U.S. embassy personnel (or whomever the officers are) impact on how people offer information? How can we take into account the characteristic that deception frequently is a social interaction, and that the recipient's behavior may determine the behavior of the deceiver in a real-time manner?

* How important are differential power and status between informer and officer?

* How does motive affect social negotiation?

* What are our cultural stories (folk psychology) regarding truth and lies, and how we value these in different situations? What are other cultural stories?

#2 - Law Enforcement Threat Assessment

Law enforcement, especially the FBI and Secret Service, receive threats by phone, letters, and email. Responding in terms of false positives and false negatives has significant impact in terms of public safety and expending resources. How can these types of threats be validated?

* What is the impact of our felt need to act secretly? In haste? How would our behavior be different if those needs were not present?

* How does motive affect social negotiation?

* What are the working definitions of deception and deception detection? Should these include spinning, withholding, false memories, trickery, plausible denial statements, and dissociative memories and personalities? What are the relationship of these to error & lapses of memory, self-deception, Mass Psychogenic Illness, and malingering?

- * Might someone who wants to evade detection systems be able to fake a temporary physical illness or mental illness in order to get past deception detection systems and then once inside (the embassy, the hospital, the office, whatever) have access to secure systems?
- * How important are differential power and status between informer and officer? What role might social stigmatizing play?
- * What similar situations do we have in other venues that can inform us about this (where else do we ask people to keep or divulge secrets? Separate themselves from home and family and country? Quickly size up another individual, etc.)

#3 - Law Enforcement Interrogation and Debriefing

Law enforcement routinely question witnesses and suspects regarding criminal activity. How do you tell if the individual is telling the truth, lying, or something in between? Acts of omission and acts of commission are both important to identify.

- * How do we find out if the informant has knowledge of which s/he is not aware?
- * How important are differential power and status between witness and officer?
- * What pharmacological agents are known to affect apparent truth-telling behavior?
- * What are mechanisms and processes of learning to lie? Can these be demonstrated within relatively short periods of time (e.g., within a polygraph test session)?
- * What are the ways lies are detected in legitimate pursuits, e.g., among those who are good gamblers? Amarillo Slim Preston says that he notes changes in patterns of behavior across short durations of time; what other social situations involve lie-detecting?
- * What are sensory overloads on the maintenance of deceptive behaviors? How might we overload the system or overwhelm the senses and see how it affects deceptive behaviors?
- * Lying takes more mental memory and processing effort than truth telling, because we have to remember what we said when and where, whereas truth is generally less context and time-dependent. Could we use changes in contexts in which questions are asked to look for consistency across situations as indications of deception?
- * What are the effects of a "jerk" examiner in a polygraph situations?

#4 - Intelligence gathering

Many government agencies, including but not limited to DOD, FBI, DOE, CIA, and the Department of Treasury, gather "intelligence" of one type of another. A high priority is how to evaluate the authenticity of both the source of information and the information itself. Issues that need to be addressed include whether the person is who s/he says s/he is, whether s/he has access to the information s/he purports to have, and whether the information accurate.

- * What history of successes and failures do we have, and what can we learn from our own history (avoiding hindsight bias, if possible)?

* What are the dimensions of truth? Lies, truth, something in between? How much truth is present in our everyday social world, and how does this vary as a function of culture? How much is truth valued (as compared to other valued behaviors) and again, how does this vary as a function of culture?

* Can we reasonably map types of lies, or conceptions of lies, to specific behaviors and to the likelihood of their occurrence to specific situations (e.g., lies about bombs in suitcases to airport security)? Once we do this, can we create categories and relationships among categories, and then test the validity of such across samples? Might it be possible to greatly increase the likelihood of success if we agree that different strategies are needed to different types of interactions? That is, to propose that the same methodology may not be appropriate for personnel selection as for surveillance or law enforcement or airport screening?

* What are the important general receiver characteristics? That is, how does how you respond to me change the way I lie?

* We often assume deceit involves malice and intent to harm. But it is as often motivated by compassion and dedication to good (and God). How might deception behaviors be different depending on the underlying motivational system?

* If we are to construct a system for deception detection, how can we ensure that it "fails well?" (I.e., that it might stretch and sag before breaking, each component failure leaving the whole as unaffected as possible.)

What are the relevant ethical and personal privacy issues that must be addressed?

P.S. In case the formatting of this message gets destroyed by my server on the way out, or yours on the way in, I'm attaching the text of this confirmation (in Word). If you see 2 attachments, it may be that my server has added a v-card so please just ignore it. If you have any trouble opening the Word file, please let me know. Thanks.

<<Confirmation note final.doc>>

Regards,

-geoff

Geoff Mumford, PhD
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The Science of Deception: Integration of Theory and Practice
Participants (academic, executive, organizing committee)
May 27, 2015

1. *Michael Bennett*, Consultant, Lovettsville VA.

I have experience as a principle investigator and project manager in a wide range of areas including cognitive aids for analysis and counterdeception, product and image security technology, steganography, imaging sensors, signal processing, communications receivers, direction finding, advanced technical collection systems, strategic planning, program evaluation, and budget planning and execution.

My work in the deception detection area began in 2000 while working for High Performance Technologies, Inc. where I conceived and managed an NRO Director's Innovation Initiative study investigating cognitive aids for counterdeception. Since then I have had the opportunity to be engaged in a number of intelligence community assignments related to counterdeception.

Bennett, M. (2001). Cognitive aids: A Key technology of the future for intelligence analysis. *ClearBrook Solutions, Inc.*

PRIVACY REDACTION

2. *Charles F. Bond Jr.*, Department of Psychology, Texas Christian University

Having been trained as an experimental social psychologist, I have published basic research articles on the psychology of deception. With human-subjects laboratory experiments, I have identified some factors that contribute to deception judgments - like false suspicions, expectancy violations, multiple audiences, and self-fulfilling prophecies. I have sketched an evolutionary approach to human deception and examined lie detection across cultures. With collaborators in 60 countries, I am currently investigating worldwide stereotypes about liars. Relevant publications:

Bond, C. F., Jr., Kahler, K. N., and Paolicelli, L. M. (1985). The miscommunication of deception: An adaptive perspective. *Journal of Experimental Social Psychology*, 21, 331-345.

Bond, C. F., Jr. and Fahey, W. E. (1987). False suspicion and the misperception of deceit. *British Journal of Social Psychology*, 26, 41-46.

Bond, C. F., Jr., and Robinson, M.A. (1988). The evolution of deception. *Journal of Nonverbal Behavior* (Special issue on deception), 12, 295-308.

Bond, C. F., Jr., Omar, A. S., Mahmoud, A., and Bonser, N. (1990). Lie detection across cultures. *Journal of Nonverbal Behavior*, 14, 189-204.

Bond, C. F., Jr., Berry, D. S., and Omar, A. (1994). The kernel of truth in judgments of deceptiveness. *Basic and Applied Social Psychology*, 15, 523-534.

Bond, C. F., Jr., Omar, A., Pitre, U., Lashley, B. R., Skaggs, L. , and Kirk, C.T. (1992). Fishy-looking liars: Deception judgment from expectancy violation. *Journal of Personality and Social Psychology*, 63, 969-977.

Bond, C. F., Jr., and Atoum, A. O. (2000). International deception. *Personality and Social Psychology Bulletin*, 26, 385-395.

Bond, C.F., Jr., and Rao, S.R. (In press). Lies Travel: Mendacity in a Mobile World. To appear in P.A. Granhag & Leif A. Strömwall (Eds.) Deception Detection in Forensic Contexts. Cambridge, U.K.: Cambridge University Press.

Bond, C.F., Jr., Thomas, B.J., and Paulson, R.M. (In press). Maintaining lies: The multiple-audience problem. *Journal of Experimental Social Psychology*.

Department of Psychology
Texas Christian University
PRIVACY REDACTION

3. *John M. Darley*, Warren Professor of Psychology, Princeton University
Research interests include social influence processes, bystander intervention in emergency situations, social comparison theory, the psychology of moral judgments, psychology and the law.

Department of Psychology
Green Hall
Princeton, NJ 08544-1010
PRIVACY REDACTION

4. *Bella DePaulo*, Visiting Professor of Psychology, University of California, Santa Barbara
I am a social psychologist and I have been studying the psychology of deceiving and detecting deceit for more than 20 years. Recently, my co-authors and I published a meta-analytic review of behavioral cues to deception. The review included a consideration of differences in cues to deception for different kinds of lies and different motivations for lying. Professor Charles Bond and I are currently working on a meta-analysis of accuracy and bias in the detection of deception. I have also studied lying in everyday life (e.g., frequency of telling lies, types of lies that are told, individual differences in rates of lying, lying to close and casual relationship partners), serious lies, and other-oriented (altruistic) lies. I am especially interested in the processes of deceiving and detecting deceit as they occur among people with no special training or equipment to help them.

DePaulo, B., Lindsay, J., Malone, B., Muhlenbruck, L., Charlton, K., & Cooper, H. (2003). Cues to deception. *Psychological Bulletin*, 129, 74-118.

Department of Psychology
University of California, Santa Barbara
PRIVACY REDACTION

PRIVACY REDACTION

5. Roy O. Freedle, senior associate in the Center for Assessment Design and Scoring at Educational Testing Service in Princeton, NJ.

Dr. Freedle has established a journal, *Discourse Processes: A Multidisciplinary Journal*. The journal provides a forum for the cross-fertilization of ideas of scholars working in the area from a variety of perspectives-psycholinguistics, sociolinguistics, educational psychology, computational linguistics, cross-cultural comparisons of communicative competence, the clinical interview, and related topics. He is also the editor of a series of books, *Discourse Processes: Advances in Research and Theory*.

PRIVACY REDACTION

6. Doug Griffith

In 2000, Griffith and colleagues completed a Director's Innovative Initiative for the National Reconnaissance Office entitled "Cognitive Aids for Countering Denial and Deception."

PRIVACY REDACTION

7. Robert Kinscherff, Massachusetts General Hospital; Harvard Medical School.

I am a forensic psychologist and attorney who currently administers a statewide system of court clinics for the Trial Court in Massachusetts. I also serve as Director of the Forensic Specialization Track at the Massachusetts School of Professional Psychology, and teach in areas of law and psychiatry at Boston University School of Law and Harvard Medical School. Areas of professional interest include physical and sexual violence risk assessment and management, processes of coercive persuasion, malingering and deception in forensic settings, stalking, and legal and ethical issues in professional practice.

PRIVACY REDACTION

PRIVACY REDACTION

8. *Eric L. Lang*, Senior Scientist, Defense Personnel Security Research Center

My professional training is in Social Psychology; I am cleared for TOP SECRET (TS) access. Since 2000, my work at the Defense Personnel Security Research Center (PERSEREC) has focused on research and recommendations for improving the personnel security systems of the Department of Defense and the intelligence community. I currently direct several projects that are exploring ways to improve investigative interviews of individuals and their workplace colleagues that are performed as part of a Single Scope Background Investigation-Periodic Review (SSBI-PR)—a requirement for continued TS access.

Eric L. Lang, Ph.D.
PERSEREC

PRIVACY REDACTION

LangEL@osd.pentagon.mil

9. *G. Daniel Lassiter*, Professor of Psychology, Ohio University

Research interests include the problem of how people come to organize and comprehend the information contained in another person's ongoing stream of behavior. The overall goal of Lassiter's work is to further illuminate the nature of the behavior perception process and at the same time establish its prominent role in a variety of psychological phenomena. Dr. Lassiter's interest in behavior perception has recently branched out into the study of decision-making in simulated juries.

Department of Psychology
Ohio University

PRIVACY REDACTION

10. *Robert W. Mitchell*, Professor of Psychology, Eastern Kentucky University

My training is in psychology (non-clinical) and ethology (animal behavior). My relevant research concerns observation of deception and concealment in canids and primates (including humans), as well as examination of the literature on deception to create and/or evaluate conceptual models concerning the deception's development and maintenance within interactive systems (even after a victim's suspicion of deceit). My research in deception is spurred by a primary interest in its implications for the deceiver's and victim's understanding of their own and others' mental states. A secondary interest is in the implications of deception for the evolution and development of signaling systems.

Mitchell, R. W. (1996). The psychology of human deception. *Social Research*, 63, 819-861.

Department of Psychology
Eastern Kentucky University
PRIVACY REDACTION

11. *Charles A. Morgan III*, Associate Professor, Yale University School of Medicine

Dr. Morgan is studying various aspects of high intensity military training and post-traumatic stress disorders. The neurobiology, phenomenology, clinical psychopharmacology, and natural history of these are considered. Recent work has explored the neuro-endocrine response to acute stress and the relationship of this to dissociation and military operational performance.

Yale University
School of Medicine

PRIVACY REDACTION

12. *Brett W. Pelham*, Visiting Senior Scientist, American Psychological Association

My training is in social psychology, and my research focuses on social cognition, including self-evaluation, person perception, and judgment and decision-making. My recent work on self-evaluation focuses on *implicit self-esteem* - that is people's unconscious beliefs and associations about the self. My students and I have recently shown that the positive associations most people have about themselves influence major life decisions. For example, women named Georgia and Virginia are disproportionately likely to move to the states of GA and VA, respectively. Our recent laboratory studies have suggested that the mechanism behind such effects is classical conditioning. For instance, when we subliminally paired a particular number (either 16 or 24) with people's names, people later reported much more favorable evaluations of a female target person who was wearing a jersey with this specific number on it. We are currently investigating how psychological threats may influence this process.

American Psychological Association
750 First Street NE
Washington DC 20002
(202) 336 5500
Bpelham@apa.org

13. *Maureen O'Sullivan*, Professor of Psychology, Department of Psychiatry, University of California San Francisco

O'Sullivan's research includes methods of finding expert lie detectors. Tests of thousands of people, from various lines of work (e.g., police, therapists), have identified

“experts.” The challenge is to figure out what might be special about these experts. For example, she is asking whether they especially attentive to nonverbal cues, decisions about deceptiveness in particular ways, or have personal experiences that distinguish them from others.

Department of Psychiatry
University of California at San Francisco

PRIVACY REDACTION

14. *Richard E. Petty*, Distinguished University Professor, Department of Psychology, The Ohio State University.

Research interests include the situational and individual difference factors responsible for changes in beliefs, attitudes, and behaviors. Much of his current work is aimed at examining the implications of the Elaboration Likelihood Model of persuasion for understanding prejudice, consumer choices, political and legal decisions, and health behaviors. Topics of special current interest include: understanding the role of meta-cognitive as well as implicit (unconscious) factors in persuasion and resistance to change; the effect of racial and ethnic prejudice and specific emotions on social judgment and behavior; and investigating how people correct their evaluations for various factors they think may have biased their judgments (such as stereotypes they hold or emotions they are experiencing).

Brinol, P. & Petty, R. E. (in press). Self-validation processes: The Role of thought confidence in persuasion. G. Haddock & G. Maio (Eds.), *Theoretical perspectives on attitudes for the 21st century*. Philadelphia, PA: Psychology Press.

Department of Psychology
The Ohio State University

PRIVACY REDACTION

15. *Daniel Povinelli*, Director, Cognitive Evaluation Center, University of Louisiana.

Povinelli, D.J. (2001). On the possibilities of detecting intentions prior to understanding them. In B. Malle, D. Baldwin, & L. Moses (eds.), *Intentionality: A Key to Human Understanding* (225-248). Cambridge, MA: MIT Press.

Povinelli, D.J., Bering, J., & Giambrone, S. (2000). Toward a science of other minds: Escaping the argument by analogy. *Cognitive Science*, 24,509-541.

PRIVACY REDACTION

PRIVACY REDACTION

16. *Roger W. Shuy*, Professor Emeritus, Department of Linguistics, Georgetown University.

Roger W. Shuy is Distinguished Research Professor of Linguistics Emeritus, Georgetown University, where he taught graduate courses in forensic linguistics, sociolinguistics and applied linguistics for thirty years. Since "retiring" and moving to Montana, he has continued to consult with attorneys on both criminal and civil law cases both nationally and internationally. He has published some 200 articles in academic journals and 30 books, the most recent of which are: *Language Crimes* (1996), *The Language of Confession, Interrogation and Deception* (1998), *Bureaucratic Language in Government and Business* (1998), and *Linguistic Battles in Trademark Disputes* (2002). He has conducted seminars and workshops on linguistic issues involved in undercover sting operations and police interrogation for the FBI, DEA, and the Organized Crime Task Force. He has given expert witness testimony at trial over fifty times in 26 US jurisdictions, before the US House of Representatives and US Senate, and, most recently, at the International Criminal Tribunal on Rwanda.
shuy@georgetown.edu

17. *Jennifer Vandemia*, Research Assistant Professor, Department of Psychology, University of South Carolina

I am a cognitive neuroscientist at the University of South Carolina who studies cognitive models of deception. I use High density ERPs, fMRI, and reaction time measures in a variety of paradigms designed to study deception across types of memory. I am currently funded by the Department of Defense Polygraph Institute, and am a reviewer at ISTS. I have been working for the past three years on designing a cognitive model of deception based on previous dependent measures of deception, the independent variables manipulated across deception paradigms, and existing models of deception.

Department of Psychology
University of South Carolina
Columbia, SC 29208

PRIVACY REDACTION

18. *John Yuille*, Department of Psychology, University of British Columbia

Professor Yuille's area of specialization is forensic psychology, with a particular interest is in the memory of victims, witnesses and suspects and on interviewing techniques. His work has focused on child abuse, trauma and memory, the assessment of the witness' credibility and credibility assessment, including fact-finding processes with judges. For the past 20 years, Professor Yuille has collaborated with psychologists, social workers, prosecutors and police in Canada, the United States, the United Kingdom and Germany to develop standardized procedures for investigative interviews and for credibility assessment. This work has culminated in the Step-Wise Interview, a procedure for interviewing children which has been adopted as the standard for child

abuse interviews in most provinces of Canada, several of the United States, the U.S. Army, and in England and Wales.

Department of Psychology
University of British Columbia

PRIVACY REDACTION

19. Thomas Zeffiro, Director, Center for Functional and Molecular Imaging, Georgetown University Medical Center.

Dr. Zeffuri;s research interests focus on the neural mechanisms of sensorimotor integration and reading. As a Senior Staff Fellow in the Intramural Research Program at the National Institutes of Health, he was actively involved in development of novel techniques for structural and functional brain imaging, focusing in the areas of language processing and developmental disorders. From 1994-1999, he served as the Medical Director of the medical imaging company Sensor Systems, Inc, supervising the development of the first commercial functional brain mapping system.

Center for the Study of learning
Georgetown University

PRIVACY REDACTION

Operations

Jon R. Morris, Research Methodologist, CIA

Dr. Morris' expertise is in applied mathematics, research methods, statistics, and computer simulation and modeling. Dr. Morris has experience in the Intelligence Community that includes working with National Collection Systems, Intelligence production issues, and the application of analytic methods to intelligence problems. His previous positions include Professor of Research Methods at the University of Minnesota, Senior Consultant at Lockheed Martin, Consultant Booz Allen, and Visiting Scholar, Analytic Methods, CIA.

PRIVACY REDACTION

Judy Philipson, Research & Analysis (CIA)

Herb, Operational Psychologist (CIA)

Alisa, Operational Psychologist (CIA)

John, Operational Psychologist (CIA)

Dave, Operational Psychologist (CIA)

Kathy Miritello, Counterintelligence (CIA)

Bill Anderson, Counterintelligence (CIA)

Dave Rosmarin, VIP Medical Analysis Center (CIA)

Scott Schumate, DOD civilian

Mike Capps, DOD civilian

Gary Hazlett, DOD military special ops psychology

Steve Band, FBI psychologist

Tony Pinnizzotto, FBI psychologist

Kristin Beyer, FBI psychologist

Jim, contractor to CIA (military special ops psychology background)

Bruce, contractor to CIA (military special ops psychology background)

Bob Mericsko, Senior Scientist, Intelligence Technology Innovation Center (CIA)

Mark Happel, Associate Technology Area Manager, MITRE Corporation

Executive/Federal

James A Griffin, Assistant Director for the Social and Behavioral Sciences in the Science Division of the Office of Science and Technology Policy

At OTSP, Dr. Griffin serves as an advisor in all areas relating to U.S. national social and behavioral science policy, including the funding of social and behavioral science research, the identification and implementation of effective educational practices and technologies, and the use of research knowledge to improve the health, educational attainment and social well-being of all Americans. Dr. Griffin comes from the National Institute on Early Childhood Development and Education, Office of Educational Research and Improvement, U.S. Department of Education, where he collaborated with the National Science Foundation and the National Institute of Child Health and Human Development for three years on the development and implementation the Interagency Education Research Initiative (IERI).

Gary W. Strong, Director, Behavioral Research and Biometrics, Science and Technology Directorate, U.S. Department of Homeland Security.

Dr. Strong currently is on detail from the National Science Foundation to the Department of Homeland Security to assist in establishing a new research organization in the Science and Technology Directorate. At NSF, Dr. Strong assisted with interagency coordination of national security and homeland security related programs and managed the computer science cluster of biology-related research programs and a large cross-agency information technology research program. Prior to this, Dr. Strong was on detail to the Defense Advanced Research Projects Agency to manage the Translingual Information Detection, Extraction and Summarization Program and co-manage the Bio:Info:Micro Program. While earlier serving on the faculty at Drexel University, he explores cooperation with neural network researchers in Russia and received funding in 1993 from the McDonnell Foundation to support these Russian scientists for two years. He was also involved in the evaluation of speech prostheses for people with dysarthria. He holds a Ph.D. jointly in Computer and Communication Sciences and in Anthropology.

Director, Behavioral Research and Biometrics
Science and Technology Directorate
U.S. Department of Homeland Security
Washington, DC

Organizers

Kirk Hubbard, Chief, Research & Analysis Branch, CIA

After 11 years of clinical work, mostly consulting in the field of medicine and surgery, I started working for the CIA as an operational psychologist. In general, this involves supporting covert operations in the area of recruiting and handling spies. I conducted cross-cultural psychological assessment for nine years throughout Asia, Africa, Europe, and the Middle East. In 2000, I started a Research & Analysis component within the Operational Assessment Division. Currently, we focus on issues such as cross-cultural assessment models (including psychometric and non-psychometric methodology), terrorism and counter-terrorism, detecting deception, motivation and social influence, computer modeling for predicting behavior, and other issues within the realm of the behavioral sciences. TS/SCI clearance since 1991.

Chief, Research & Analysis
Operational Assessment Division
Special Activities Group
Central Intelligence Agency

PRIVACY REDACTION

Susan Brandon, Program Officer, Division of Neuroscience & Basic Behavioral Science, National Institute of Mental Health

Dr. Brandon joined the National Institute of Mental Health as Program Officer for the Affect and Biobehavioral Regulation Program in 2003. Immediately prior to coming

to NIMH, Dr. Brandon spent two years as visiting Senior Scientist at the American Psychological Association. She was a member of the faculty of the Behavioral Neurosciences Area in the Department of Psychology at Yale University from 1985 to 2001. Her primary area of research is in computational models of learning and memory.

Behavioral Science Research Branch

DNBBS, NIMH

PRIVACY REDACTION

Sbrandon@mail.nih.gov

Geoff Mumford, Director of Science Policy, Public Policy Office, American Psychological Association.

In consultation with the Executive Director of the Science Directorate, Dr. Mumford oversees the legislative and regulatory science policy agenda for the American Psychological Association (APA). He leads the science policy staff in recommending policy positions, advocating for federal legislation and developing contacts with congressional and federal agency staff in support of scientific psychology and informed public policy-making. Before joining APA, Dr. Mumford had a post-doctoral fellowship in behavioral pharmacology at Johns Hopkins University School of Medicine and was Assistant Professor of Psychiatry and Behavioral Sciences in the Division of Behavioral Biology. His research focused on the behavioral pharmacology of substance abuse and the development of medications to treat alcohol dependence.

Scott Gerwehr, Associate Policy Analyst, RAND

With a background in neuropsychology, Gerwehr was part of a UCLA/Cedars-Sinai team on the Human Genome Project looking at genes responsible for neural development prior to going to RAND. During five years of employment at RAND, his research has focused on the psychological dimensions of conflict: deception and counterdeception; interpersonal and strategic persuasion; indoctrination and radicalization; military psychological operations (PSYOP) at all levels of war; risk communication; public and covert diplomacy; and tactical communications in law-enforcement. The settings for these research efforts have included aerospace operations, urban insurgency and conflict, confidence artistry, computer network operations (CNO), deceptive advertising, undercover law-enforcement operations, terrorism and counterterrorism, counterintelligence, and the foreign policy of states and non-state actors. SECRET clearance since 1997, TS/SCI since 1998.

PRIVACY REDACTION

Additional questions and issues offered:

(Robert Mitchell)

The consequences of suspecting deception in an honest person are intriguing and underexamined. My informal study of the phenomenon suggests that our methods for detecting deception can create the impression of deception where none exists based on presuppositions guiding interpretation, rather than evidence. Particularly impressive would be an analysis of court cases in which a DNA test (or some other relatively definitive test) exonerated a convicted person. Why was the person viewed to be guilty, even though innocent? What reasoning was employed to instill the perception of dishonesty?

The consequences of accepting a deceitful person as honest are also intriguing, but more well-studied, as in interviews of victims of con men and in histories of successful spies. Again, these studies suggest the presuppositions employed to interpret normal (non-deceptive) interactions can lead to inaccuracy. What evidence of deception was ignored by victims? What indications of honesty were accepted?

Also interesting is how intimate knowledge of an individual, and of an individual's culture, can influence which interpretive presuppositions are activated by either victim or deceiver to support interpretations of either honesty or deception.

My evaluation of the animal literature has led to my belief that animal deception is likely to be, at its most psychologically complicated, planned use of an animal's awareness of action-reaction regularities. However, deception by some animals may employ more complicated psychological understandings. Are there experimental methods to determine whether or not these animals employ such understandings? Or is it more useful to integrate behavioral and psychological knowledge about these animals to create a conceptually coherent interpretation?

My evaluation of the human literature has led to my belief in the hopelessness of finding any definitive sure-fire across-the-board method to detect deception in skilled human deceivers (or honesty in non-deceivers). Is a probabilistic method possible, appropriate, or at all useful?

(Robert Kinscherff)

What is the range of potential motivations for persons to act deceptively, and do different motivations tend to yield different methods, patterns or targets of attempted deception?

What is the range and types of behavior that are regarded as efforts at deception, and do we improve detection strategies and risk communications if there is a common "vocabulary" describing deceptive behaviors?

Research suggests that a strongly felt sense of confidence on the part of an interrogator, legal decision-maker or other "deception detector" that a subject is (or is not) acting deceptively can lead to errors in detecting deception. What strategies do adept deceivers use to encourage confidence in others that they are not being deceived? What errors do

persons make that encourage others to confidently decide that efforts at deception are being made, when actually no intentional effort to deceive is occurring? What role should subjective "instincts," "hunches" or certainty play in detection of deception, and how should interrogators and other "deception detectors" be trained in addressing their subjective experiences while attempting to detect deception?

Persons are often motivated to deceive because they view and understand the world in particular ways. For example, a defendant may malingering mental illness because of a belief that forensic hospitalization is preferable to incarceration. A person may deceive to gain access to potential targets because of a belief that those targeted are enemies whose actions warrant a violent attack. Once the likely motive to deceive is identified in particular cases, what are the most effective social and psychological strategies to undermine the basic world-views and beliefs that give rise to the motivation to deceive others? What are the differences between strategies that rely primarily on providing information (cognitive) and others that include emotional and behavioral elements (e.g., creating an intensely emotional relationship between subject and interrogator). What specific strategies have the most enduring results in shifting world-views and beliefs away from motivations to deceive others to achieve harmful results?

Does the age and developmental stage of the person attempting deception make a difference in detection? Interrogation? Are there developmentally specific strategies that can be relied upon?

Except in cases where the genuinely held belief is obviously a reflection of mental illness, are there reliable means to distinguish between persons who genuinely believe accurate information, and those who genuinely believe inaccurate information? What can we learn from the experiences of persons who genuinely believe inaccurate things (e.g., persons with personality disorders who distort, or persons with delusional disorders without bizarre content)? From the experiences of persons who are adept at creating the false impression of genuinely believing what they know to be false?

For persons trained in professions with various ethical codes and standards (e.g., physicians, psychologists, etc.), what situations may arise when either using deception or methods to detect deception that could create ethical conflicts? What considerations arise in potential use of methods that specifically invade privacy, undermine autonomy, or manipulate beliefs and emotions with varying degrees of intrusiveness or coercion?

(Bella DePaulo)

What data collection efforts would be most useful for addressing the questions central to the discussion groups?

Have any data been systematically collected and analyzed about embassy walk-ins or threats received by the FBI or Secret Service?

(Michael Bennett)

Does the present state of deception science support the development of practical tools and techniques for counterdeception?

What kinds of tools for counterdeception are needed?

How will these tools be validated?

How do we expect they will be used operationally?

(Brett Pelham)

Could we use our knowledge of people's affection for the letters in their own names to answer questions about people's identities. For instance, if a terrorist claims to be Geoff Mumford but I suspect that his real name is John Boothe, I should be able to find out which is his real name by determining which name serves as a more favorable conditioning stimulus in a subliminal classical conditioning paradigm. As another example, if a kidnapper leaves a note listing demands and instructions for dropping off a ransom, it might be possible to make some good guesses about the kidnapper's name by examining his or her preferential use of certain letters of the alphabet.

From: "Brandon, Susan (NIH/NIMH)" <sbrandon@mail.nih.gov>
To: "Scott Gerwehr" [REDACTED]; "Mumford, Geoffrey" <gmumford@apa.org>, "Kirk Hubbard (E-mail)" [REDACTED]
Subject: RE: rude shock

So, let me add my gratitude as well. You all were (are) great: could ask for more generous or gracious people to work with. One doesn't always get this lucky!

Kirk, I appreciated how Jim Mitchell kept saying (especially on the second day), "this is an empirical question; we need to collect data and do studies." I know that he was pointing people towards you and asking them to send proposals to you: was this a good outcome? I know that you were hoping for some practical suggestions and not "just" the inevitable scientific response of "we need more research." (For a scientist, you know, the worst case is having no further questions! That means that their research has deadended. . . . as always, the real prize is finding a good question.)

Anyway, am curious what you thought and whether this was how you envisioned the meeting.

Hope you all had a good weekend -- and yes, Scott, I'll take you up on your offer/threat. Gladly.

Susan

-----Original Message-----

From: Scott Gerwehr [REDACTED]
Sent: Saturday, July 19, 2003 8:19 PM
To: Mumford, Geoffrey
Cc: Brandon, Susan (NIH/NIMH); 'Kirk Hubbard'
Subject: Re: rude shock

Beloved Compatriots!

I strongly second Geoff's statement: I am so grateful to have had this chance to team up with you, and to have made a contribution to the community. Let me hasten to add that this is merely the beginning of our collaboration! (Note the wording: you have no choice ... you're stuck with me :-)

I have the pad with email addresses and am entering them into an Excel spreadsheet, which I will then send out to the participants (along with my profuse thanks!). Should be complete and reaching you shortly.

Happy Trails!

Scott

On Saturday, July 19, 2003, at 04:40 AM, Mumford, Geoffrey wrote:

> Dear Friends,

>

> It was a rude shock to have to cook my own breakfast this morning after
> lounging at the E-suites for the last two days but a dozen eggs from

> now
> I should have my rhythm back.
>
> Just a quick note of thanks for a wonderfully collegial experience both
> in the planning and the execution of a workshop that I thoroughly
> enjoyed.
>
> I'm also checking to see if someone picked up the email list (I forgot
> to). I thought it would be good to get a brief note of thanks and ask
> a
> couple of questions of the participants while everything is still fresh
> in their minds. We can probably reconstruct if need be but hopefully
> it
> went home with one of you or maybe is still sitting on a pad at RAND?
>
> Again thanks one and all.
> -geoff
>
>

Scott Gerwehr
RAND

PRIVACY REDACTION

gerwehr@ghost.rand.contractor.dss.smil.mil (S)

```
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  <key>to</key>
  <string>"Scott Gerwehr" &lt;gerwehr@rand.org&gt;, "Mumford, Geoffrey"
&lt;gmumford@apa.org&gt;, "Kirk Hubbard (E-mail)" &lt;kmhubbard@msn.com&gt;</string>
</dict>
</plist>
```

From: "kirk hubbard" [REDACTED]
To: sbrandon@mail.nih.gov, [REDACTED] gmumford@apa.org
Subject: RE: rude shock

Hello All,

Thank you all for the tremendous help in making this conference a reality. It was everything I had hoped for. Susan, I do want practical suggestions, but I didn't expect to get them during this conference. I wanted to get specific research ideas and initiate contracts to provide practical answers. This "Phase Two" comes next.

My only disappointment was that Scott managed to contain himself better than I had imagined. I fully expected Scott to get so spun up with excitement and enthusiasm that he would manifest some new clinical syndrome heretofore undocumented. But alas, Geoff may have provided some medication at the last moment!

Looking forward to receiving the email list.

Kirk

>From: "Brandon, Susan (NIH/NIMH)" <sbrandon@mail.nih.gov>
>To: 'Scott Gerwehr' [REDACTED] "Mumford, Geoffrey"
><gmumford@apa.org>, "Kirk Hubbard (E-mail)" [REDACTED]
>Subject: RE: rude shock
>Date: Mon, 21 Jul 2003 09:21:18 -0400
>
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>Sent: Saturday, July 19, 2003 8:19 PM
>To: Mumford, Geoffrey

>Cc: Brandon, Susan (NIH/NIMH); 'Kirk Hubbard'

>Subject: Re: rude shock

>

>

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>Scott

>

>On Saturday, July 19, 2003, at 04:40 AM, Mumford, Geoffrey wrote:

>

>> Dear Friends,

>>

>> It was a rude shock to have to cook my own breakfast this morning after
>> lounging at the E-suites for the last two days but a dozen eggs from
>> now

>> I should have my rhythm back.

>>

>> Just a quick note of thanks for a wonderfully collegial experience both
>> in the planning and the execution of a workshop that I thoroughly
>> enjoyed.

>>

>> I'm also checking to see if someone picked up the email list (I forgot
>> to). I thought it would be good to get a brief note of thanks and ask
>> a

>> couple of questions of the participants while everything is still fresh
>> in their minds. We can probably reconstruct if need be but hopefully
>> it

>> went home with one of you or maybe is still sitting on a pad at RAND?

>>

>> Again thanks one and all.

>> -geoff

>>

>>

>

>Scott Gerwehr

>RAND

>  PRIVACY REDACTION

>

>

>

>gerwehr@ghost.rand.contractor.dss.smil.mil (S)

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<http://join.msn.com/?page=features/junkmail>

```
<?xml version="1.0" encoding="UTF-8"?>
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  <key>to</key>
  <string>sbrandon@mail.nih.gov, gerwehr@rand.org, gmumford@apa.org</string>
</dict>
</plist>
```

#3 -- Law enforcement Interrogation and Debriefing

Eliciting information is an evolutionary-emergent process that develops based on the real-time situation and directed by the interrogator/debriefer

Characteristics of Interrogator^{1, 2}

- The performance of the interrogator more than any other variable determines the outcome of an exam
- Good interrogators are good at managing self-presentation, role-playing, and mirroring, and are open to disconfirmation.
- Standard IO tests and some personality measures (such as the 16PF) are used to assess correlations between personality and success in interrogation and debriefing
- Matching characteristics of the interviewer with interviewee does facilitate better information gathering,
 - However, it can actually lead to overconfidence in both parties
 - It is best to match an interrogator's strengths with a interviewee's weaknesses
 - The strategy is beneficial
 - But, given the gains, the time and effort of matching may not be worth it
 - Contrary view (Jessen): matching doesn't have much effect; better to have fewer than too many people.
- Introverts – experts open to disconfirmation
- How do interrogators correct for overconfidence in information received?
 - The interrogator does not make the validity assessment
- Secret service does well because they are trained to scan crowds and use nonverbal cues

Characteristics of the Interviewee

- Cultural Issues
 - Misunderstandings occur because we do not have an understanding of societal norms of conversation both verbal and non-verbal
- Philosophical motive to deceive
- Nihilism: how to assess deception among people who have no sense that their place in the world matters at all (that they have nothing to lose? No one to account to?)
- Political Ideology vs. religiosity
 - Individuals who believe that what they are doing is right will not have the same emotions as individuals who commit crimes
 - Our standard conceptualizations of guilt and other emotions will not work as a lever in these situations

¹ Ask Dan Lassiter about “the innocence project,” where 27% elicited a confession that was accurate.

² Ask Jessen about the English spies in Germany, who upon release said that they never gave up information and then later it was found that they did. When confronted with these facts, however, they remained convinced that they had never revealed anything.

- False confession
- Falsely held beliefs: How do you measure deception in people who do not believe they are being deceptive
 - Individuals with delusional disorders may believe the lies they tell; therefore, it will be difficult to detect when they are not telling the truth
 - A group to study may be individuals with non-bizarre delusional disorders
- Different physiological responses across cultures
 - Individuals across cultures may not find the same stimuli stressful
 - Individuals may biologically differ, for example hypertension in African Americans is higher than in any other demographic on Earth
 - Personality variables
 - Gender
 - Given that more women commit crimes, and more women are involved in terrorist activity than ever before, it is important to learn how women behave in the interrogation scenario
- Witness vs. suspect
 - It can be easier to get information out of a suspect than a witness because the witness is fearful

Situation Issues

- The interview situation is an emergent process that continually evolves
- The same interview process can elicit good information or bad information
 - How do investigators know when they have identified the good information?
 - A recurrent problem seems to be that an individual may be interrogated who does not care that the interrogator is aware of their deception
 - How can interrogators elicit information given this situation?
 - How can interrogators be sure that they have elicited good information?
- The system can be gamed
- The goals of the agency direct the nature of the interview
- Suggestion: stage the area to look as if there is lots of information at hand: have file cabinets and pinned maps, etc.

Technical Applications

- Eye movement: reflects cognitive overload of nonspecific type
- Thermal Imaging: The thermal effect does exist, but is driven by the generalized arousal mechanism that drives polygraph responses
- ERP: Recognition memory is the driving theoretical mechanism of the classical P300 effect. It is heavily impacted by characteristics of the stimuli, and there is evidence that certain individuals such as individuals with PTSD or convicted murderers do not produce a P300 related to recognition memory. However, the act of deception is built upon several cognitive processes each of which are related to portions of the ERP signal. Preparation to deceive is related to changes in the contingent negative variation, a waveform that occurs BEFORE the question of interest. Attention switching based on deception is related to changes in the P3a, an early waveform in the anterior region of the brain. Making the

decision to lie is related to a suppression in the P3b (similar to the classical P300), and re-evaluation of a deceptive response is related to changes in the late positive component.

- HRV: Heart rate variability. Polyvagal theory as a driving theoretical mechanism to explore different types of responders.
- In addition to these techniques other directions in detection of deception included: fMRI, pupillometry, exhaled breath, vibrometry, infrared, TMS

Where can science help?

- Develop a method for assessing good potential interrogators
- Formalize the situation characteristics that an interrogator “intuitively” understands
- Further investigate the conversational norms of other cultures to facilitate better cross cultural interview situations
- Determine a dictionary of gestures that are culturally specific
- Develop more accurate detection of deception measures
- Elucidate issues of inaccurate memory, false confession, and deception “without deception”
- Investigation of motivation (implicit attitude)
- Compare law enforcement successes in cultures where deception is permitted as part of the interview with successes in cultures where deception is not permitted as part of the interview.
- The interrogation situation is similar to situations found in the social dynamics models of developmental psychology, it may be advantageous to use those models to further elucidate the important variables
- Where is systematic error occurring in interrogations and how can we eliminate it?
- Create paradigms for measuring deception in people who do not believe they are being deceptive.
- Look at implicit measures of deception such as those created by classical conditioning paradigms.
- Consider situations where the usual cues are absent (cf. Secret Service that are good at nonverbal cues because, in a crowd, they can’t hear what people are saying): might some cues overshadow others and yet be least informative?
- Investigate cross-cultural variations in physiological measures of emotionality.
- Develop methods of inoculation against confirmation biases.
- Examine the belief systems of most people via their “folk psychology.” Use this to help identify and eliminate systematic sources of error.
- What are the effects of multiple versus single interrogators?
- What are the situational variables that elicit good information versus bad information – are there any such variables that act differentially?
- What do “spontaneous corrections” indicate re truthfulness?
- What impact do various emotions (guilt, fear) have on thinking through a lie?

#4 - Intelligence Gathering

Many government agencies, including but not limited to DOD, FBI, DOE, CIA, and the Department of Treasury, gather “intelligence” of one type of another. A high priority is how to evaluate the authenticity of both the source of information and the information itself. Issues that need to be addressed include whether the person is who s/he says s/he is, whether s/he has access to the information s/he purports to have, and whether the information accurate.

Background information:

Not much progression in the field in terms of methodology; continued use of relatively unsophisticated tools. The primary validation was to ask the question, “did the event occur?” But to simply ask this question, one loses other additional and important information. Intelligence only recently has developed an asset validation system. But still, individuals follow procedures oftentimes blindly and without critical assessment.

Current strategy is mostly to “question everything and everyone,” again without much critical think. Critical validation tool is still having redundant reports on a piece of information.

What kinds of deception are there?

- Lies told for self-serving reasons
- Lies told for other reasons, or to be altruistic
- Lies of omission and commission
- Bald-faced lies vs exaggerations
- Self-presentational lies (when liar cares about relationships with others)
- Instrumental lies: for a particular purpose
- Lying as acceptable in business negotiations; among politicians (where it is predicted that they will lie, although we tend to get upset when we find out that they actually do lie)

Characteristics of receivers:

“Everyone is always editing.”
The only good answer to “how do I look?” is “am I stupid?” The point is that it can make us feel worse to lie than to tell the truth.

Characteristics of liars:

No relationship between arousal and intent, but there is a relationship between arousal and fear of detection (1). Therefore if we set the situation up to be threatening, then a false positive is more likely.

High stakes vs low stakes: self-presentational issues are important in both instances, because it is consistently important for a liar to think that they are deceiving those around them.

There are a subset of people who apparently have a limited repertoire when anxious, who use lying as a defense strategy to deal with the anxiety. They appear to simply not have sufficient alternate strategies.

In World Values Survey, people in 35 out of 35 countries responded that they agreed with the statement that it is sometimes justifiable to lie in one's own self-interest. This had a positive correlation with educational level.

Problem with cross-cultural analyses is that lying means different things in different cultures, and perhaps also that in some social situations, rudeness outweighs deception as a prohibited behavior.

In the U.S., out of more than 500 trait terms, "liar" is rated as one of the most negative.

Research on auto salesmen: experienced auto salesmen best at deceiving observers about their intentions. They did not, however, consider that they were lying because it was viewed as sanctioned and occurring with good social support (2).

Liars need good social and verbal skills: children who are diagnosed as autistic are unable to lie effectively.

Familiarity has a powerful effect on judgment: we generally like and trust that which is familiar.

Indicators of deception:

Person uses multiple expulcation.

Less redundant detail (if telling the truth, more likely to provide these).

Likely to offer somatic and contextual descriptions (e.g., when I stabbed him, I could feel how the blade scraped against the ribs).

Story likely to be ABCDEF; if ask for more detail, get ABCDEF.

People who are good at lying look truthful when they are lying, and they look truthful when they are telling the truth (3).

No apparent relationship between lying and someone's ability to deal with classified information.

In psychotherapy, extent and details re lies only come out over time. Must assume that patient and agent is always withholding something.

Research questions:

What is the relationship between being a good liar and IQ?

How can we inoculate people to deal with instances where the person appears genuine, consistent and logical, and yet is still lying?

What are the relative advantages of asking about deception as a trait vs as an individual behavior? Someone might be viewed as highly trustworthy and yet lie for political or religious reasons, which are consistent with a view of that person as honorable.

What is the research on actors? On poker players? On magicians?

(3) Is the appearance of truthfulness unrelated to telling the truth? Is there some other characteristic about appearance that signals trustworthiness other than behavior?

Does the fact that lying appears to be ubiquitous and an important part of social interaction, and that we are very poor at detecting deception, an indication not that evolution has made us both good at lying and good at deceiving (the arms race), but that being good at deception is simply not important? Social functioning might in fact be enhanced by our willingness to be deceived.

How does deception vary as a function of positive or negative motivations?

Can we determine lying in an individual by a change in the pattern of social networking and interactions that that individual displays? Changes in patterns of friends? Lying is damaging to social networks, so if someone engaged in more deception than usual, this should force a change in that network. Apparently, this has been seen in retrospective analyses: can it be used prospectively?

What are the implications of the apparent fact that lying is ubiquitous in some sense, and yet about 90% of those who are tested for security clearances receive them?

A trait psychology view may not be useful: we don't want to know (in this scenario) how hard it is for someone to lie. What we want to know is whether this person is lying now. (Most psychological testing tries to measure the former.) However, it also is important to know how deception or truthfulness changes across time and situation.

How do receiver characteristics affect lying? What can the interviewer do to bring out a lie?

What is the role of humor in telling and detecting a lie?

Suggested strategies:

- (1) Set the situation up so that it is not threatening to the putative liar: this will decrease the likelihood of false positives.
- (2) Ask the person to write the story out and then tell it backwards: deceivers will do worse at this.
- (3) People who are not worried about their behavior or the interpretation of their behavior are the best liars. [Does this then conflict with item (1)?]
- (4) People who score high on Machiavellianism score high on likelihood of lying, and those who score highly on the question, "Do you care about what others think of you" also score highly.
- (5) People who interpret ambiguous scenarios as acceptable opportunities for cheating also more likely to predict lying (?).
- (6) People may be more likely to lie when the interviewer engages in posture mirroring; we know that this is also a way of creating a social bond between two people.
- (7) Take advantage of some of the transference and counter-transference strategies used by psychotherapists (establish rapport; there are no known cases where rapport wasn't a primary reason for success of an asset).
- (8) Use interviewer gender as an interviewer tool.
- (9) Remember that we believe what we want to believe: deception is in large part self-deception.

- (10) When rating deception, ask not only whether someone is lying but how confident the person is in making that judgment: sometimes the former is more accurate (in instances of close relationships).

Participants:

Robert Mitchell: animal deception, pretending, teasing

Mike Capps: DoD Polygraph Institute: tasked by law to do research on polygraph

Bob Mericsko: ITIC: basic research in deception

Eric Lang: PERSEREC; vetting in personal clearance and updating

Roy Freedle: Experience in cross-cultural miscomprehension in interview procedures (see his handout); content analysis program includes 1500 dimensions for text analysis (Freedle actually read the FBI meeting report)

Charlie Bond: two projects relevant: (1) 60 country survey about beliefs about deception (most common: a liar can't look you in the eye); (2) judgments of deception from behavior occurs with about 55% accuracy across considerable situational variability; sometimes this runs as high as 75% in a situation-dependent manner.

Dan Lassiter: perception of ongoing events; how do we evaluate confessional data in interrogations; how the method of presentation affects judgment: if confronted with a face via videotape, people are more likely to view the statement as being voluntary; people in general are no better than chance at distinguishing T/F confessions. His research varies from other deception research because his subjects are assuming that the person is trying and likely to be truthful, and that they are expressing a personal belief. It is generally believed that we can identify false statements.

Jim Mitchell: practical application and operation of deception; not looking for what is already in the literature or in meta-analyses. Wants to know if we are interviewing a terrorist, how can we tell if he is lying? Current research on confessions doesn't apply [because the terrorist is operating under different rules?]; the terrorist is ready to admit involvement but won't offer additional details about their actions and he has no interest in protecting his turf.

Bruce Jessen: Similarly to Jim Mitchell; also interested in relationship between two people in this interrogation situation and how this affects the outcome.

Maureen O'Sullivan: (1) Lead PI with Ekman on the Diogene Project, that went on for more than 15 years and involved some 12,000 [1200?] people: found 14 ultimate experts (these scored at least 80% on three deception tests) and 14 penultimate experts (scored high on 2/3 tests). In these cases, the people did least well on those tests with which they had least experience, so there is likely a strong learning effect operating. The investigators interviewed these people to determine their deception [detection?] strategies. Found that 80-90% of these individuals had unusual childhood experiences that might be understood as giving them experiences with having an outsider point of view, and aware of emotionality early in life. (2) The Boy Who Cried Wolf Effect: why

are people so bad at detecting deception? Perhaps because we make the fundamental attribution error: once we have decided that someone is truthful then we can't see them as deceptive; there is a *dispositional rebound effect*; it's hard to change one's view of a person from liar to nonliar because that's not being a nice person; (3) how can we train and whom should we train to defeat deception? Looks as if ability correlates positively with (a) high scores on general SAT, and (b) an interest in psychological phenomenon, and negatively with students who have had lots of casual sex and often lie to their friends. Good deceivers are like Olympic champions or Grand Masters in chess: they practice extensively.

Suggestion: find those people within an agency who have been proved to be good liars, and interview them for how they achieved the deception.

Bella DePaulo: Has been studying deception for 20 years. Some of the research includes diaries analyses, and a meta-analysis of more than 120 studies of 15 cues of deception (she presented those data; see also the Psych. Bulletin report)¹

Suggestion: [there was something here about motivation to deceive, and an implication that people might be better liars if they are not motivated to deceive – because the cues to deception relate to motivational indicators, I think.]

Gary Hazlett: From Fort Bragg: select people for special ops training. When in the field, ability to deceive and detect deception “pretty much stink.” Most successes are related to the other person's ignorance and stupidity, and most criminals are ignorant and stupid. Current interview methods appear to be using techniques from the 1940s; we've made no progress in this area since then. Perhaps it is a testimony to our society that we are so poor at deception detection and are not willing to use the forceful or unethical methods that other societies use (he noted that confessions under such conditions are known to be unreliable anyway). There is a need for rapid assessment, such as at Guantanamo Bay. Agree that if we had several years, then truth may rise to the level of evident but rapid methods are needed; let's leverage some of the methods we already know we are very good at. Another problem is that of training 19-20 year-olds to do interrogation: years of experience probably are needed to be good at this.

Andy (Charles) Morgan: research on realistic models of stress (men in special ops training; works with Hazlett). In general, as stress increases, accuracy and mental capabilities decrease – except for a small group of men (who can be identified prior on the basis of NP-Y). Has an opportunity to look at the Guilty Knowledge Test and see whether it works in high stress interrogation procedures. Also interested in instances where a person may not know what they know and the information that they have that may be valuable, appears innocuous.²

David Rosmarin (?): VP Medical: have tapes of world leaders (presumably, very practiced liars): should give them to Ekman's group and see if they can detect lies. He

¹ “Check Forgers,” by Klein & Montague.

² Model is blind sight experimental methodology from the 1960s.

evaluates murderers for insanity pleas or diminished capacity (the latter is most difficult). These evaluations may be 3-4 hours; also evaluates forced confessions and threat assessments (highly motivated liars).

Richard Petty: Studies social influence and persuasion, which he hadn't seen as related to deception until now. Found that a medium speed of talking is viewed as most credible (too fast is not credible), although there is a natural correlation between expertise and speed of talking.

Suggestion: to be believed, speak at a medium pace.

Also studies self-persuasion: what makes you believe your own thoughts? This is related to false confessions. If a thought comes to mind quickly, it is viewed as more credible (by our selves). Also found that if you make people write with either their dominant or nondominant hand, they are more likely to believe what they write if it is written with the dominant hand.

Suggestion: To make someone believe what they are writing, make them write it with their dominant hand; to protect them from believing what they are writing, make them write it with their nondominant hand.

Doug Griffith: works with Mike Bennett on cognitive demand effects and human information processing limits that make us vulnerable to deception. He has developed a list of aids (see paper); use of high tech in the Intelligence Community (IC) has been problematic.

Robert Kinscherff: applied forensics, detection of malingering and deception.

Povinelli: doesn't have much to offer unless apes start walking into embassies and offering information. . . . Has a general, theoretic comment: deception is a constituent part of human society and we have evolved to deceive (paternity, etc.); otherwise, why is deception so widespread and why else does it occur in other animals besides humans? The reason it is so difficult to detect is that there is an "arms race" operating here (as we get better at deceiving, we must get better at detecting deception) at the level of individuals that is recreated in tells and in intelligence situations: given that we have evolved to deceive ourselves and others suggests a battery of approaches.

[How good are we at detecting other forms of deception, of the sort that are vital to our survival, such as social deception; parents deceiving children; how much should deception be viewed as the information of the powerful to the less powerful, independently of veracity?]

Hollis Helms: Spent 30 years as director of ops; was an Arabist. Drafted the first counterintelligence draftees. Experienced countless numbers of walk-ins and has concluded that "we stink" at evaluation. The worse case scenario is telling such a person to "go away and write your story and then come back, because I don't have time for you right now." In this instance, we forfeit visual cues, spontaneity, etc. In interrogation,

information is elicited – it’s not forced out. Often the only inducement as money. People in embassies are likely to value the U.S., moms and apple pie, and have never been truly deceived by anyone before in their lives. Walk-ins are important because the most valuable people are not those whom we recruit or capture, but those who approach us. Is a continual issue of training the interrogators.

(Povinelli: the ability to detect deception is likely to be normally distributed: if we can identify those who are at the ends of the distribution, training may not be necessary.

O’Sullivan: Research indicates that even for those highly skilled at deception detection, training is still useful.)

Jennifer Vendemia: Interested in building a theory of deception as interactions of cognitive processes and motivations; measure these and relate them to imaging and TMS technologies; role of attention?

Gary Strong: At DHS in Science & Tech, on the research side. Has a bias for fundamental research and wants to build this to pass on to SARPA when that is up and running. (?) Interested in (1) determination of hostile intent with unobtrusive methods, and (2) in obtrusive determination of hostile intent. First level of these to be behavioral and not high tech; (3) detection of deception (as a lead for latter actions relating to border security); (4) behavioral research program to begin in FY ’05 on understanding the root causes of terrorism (including millennial and revivalist and fundamentalist American groups). Has a view that some concepts can be understood in terms of mechanisms like those operating in biology; sees parallels between cognitive processes and cellular mechanisms; wants to consider using these as models of social change.

Linda Demaine: current portfolio in counter deception and advertising bias in cyber space; perceptions in consume ads for drugs.

Kristen Beyer: Interested in providing an interview strategy.

Stephen Band: Spent 20 years undercover in domestic operations; following a series of tragedies involving undercover agents, Bureau has tried to understand the situations and create and encourage defection; what social influences are important: sees undercover work as “developing relationships and betraying relationships.”

Anthony Pinizzotto: Interested in crime scene evaluation and the detection of its psychological aspects for how these might be useful in interrogation; crime scenes sometimes are shaped to deceive people. Are there aspects of particular personalities that might lead people to be especially good or bad at deception? Also interested in “intuitive policing:” when cops make a very quick and accurate judgment about a situation, and it happens so fast that they can’t verbalize or otherwise describe the cues that they used. Evidence exists that this phenomenon is real, especially when there is a threat to violence. (Morgan asked, is there any assessment of cortisol levels under such situations? Ans: no. O’Sullivan noted that this is an instance of the rapid processing of myriad details, and that she is teaching a course on “reading the minds of mind readers.” Rosmarrin noted

that police, attorneys and therapists sometimes have to be mind readers; O'Sullivan responded that in fact some of their found good liars/detectors were therapists. These people were good at the tests that involved emotions but not those that involved crime. Mike Capp asked whether there were modeling effects with the cops; Tony said that he thought there are; these individuals have been exposed to expert interrogators.

Bill Anderson: Counter-intelligence. Interested in espionage: what drives someone to spy? And in deception detection: what makes someone susceptible to friendly nations and friends; how do we break down our stereotypes about liars?

Jon Morris: statistician

Mike Bennett: Advanced intell analytic tools; Application of magic to this question?³

Jim Griffin: Interested in deception broadly speaking; usefulness for personnel interviews; personal interview is now a requirement for a visa to the U.S.: how can we train people to do this and put them into place? In Singapore, he had to walk through a temperature detector (SARS): might this be a model for deception? (Comment from X: thermal imaging booths are already in use in airports; indicate high levels of stress.⁴ Ans: but will this distinguish between high level of stress and high level of fear of flying?) Those at OSTP are interested in fostering a dialogue between those in security and those in science, to break down problems and adopt empirical models. Noted that his work as a clinician with maltreated children indicated that pedophiles might be some of the most difficult to detect in terms of deception; like terrorists, they operate in networks and tune into appropriate behaviors dependent on the situation.

Suggestion: analysis of devices used by pedophiles as expert liars.

Tom Zeffiro: Interested in skill acquisition, mostly reading. But also looks at the neural mechanisms of deception (like Bob Mitchell), and is using perturbation via TMS to interfere with neural networks. Noted that there is a huge problem in medicine with malingering, especially in neurology: residents are supposedly taught how to determine malingering and yet no one is very good at this.

John: op psychologist at the CIA; interested especially in cross-cultural issues.

Carmel Rosal: Interesting in practical application of empirical findings.

Mark Happel: Interested in neural basis of deception; assumes that there is not one kind of deception and not one kind of lie, and that we will need multiple categories with perhaps different neural signatures for these categories; should take into account temporal parameters as we construct models of deception.

³ Barton Whalley has some comments on this notion.

⁴ I'm using X as a source when I'm not entirely sure of either the source or the fact!

Bret Pelham: Might consider making use of priming and conditioning techniques; these phenomena are among some of the most robust that are known to psychologists. Described his work on the known letter effect: we are drawn to places/people, etc., that have the same name as we.

Suggestion: Could use a name as a CS to assess unconscious motivations.

From: "kirk hubbard" [REDACTED]
To: "Geoffrey Mumford" <gmumford@apa.org>, "gerwehr" [REDACTED]
Cc: "SusanBrandon" <sbrandon@mail.nih.gov>
Subject: Re: All addresses working

You won't get any feedback from Mitchell or Jessen. They are doing special things to special people in special places, and generally are not available. I have to make a small apology for Bruce Jessen. He was a bit distracted at the conference. [REDACTED]
[REDACTED]

Andy Morgan works two days a week in my organization and I see him regularly. In fact we discussed some research projects he could do for us today. I'll prod him for formal input.

One of my staff, Carmel Rosal, intends to contact Petty this week about some proposed research she wants him to do. I'll mention he should provide input, as well.

O'Sullivan left me a phone message about some work we discussed at the conference (involving Ekman the grump!) She is on vacation or something and not available for email, she said.) FYI, I contacted Ekman who promptly replied.

Kirk

----- Original Message -----

From: Mumford, Geoffrey
Sent: Tuesday, August 05, 2003 10:30 AM
To: 'Scott Gerwehr'
Cc: Susan Brandon; Hubbard Kirk
Subject: RE: All addresses working

Colleagues,

I just wanted to compare notes on who we've received feedback from...I've forwarded all of it to you and my records indicate we've heard from:

Band
Bond
DePaulo
Freedle
Kinscherff
Lang
Morris
Pelham
Vendemia

But on the academic side not from:

Lassiter
Mitchell
Morgan
O'Sullivan
Petty
Povinelli

Is that in sync with your records?
-geoff

-----Original Message-----

From: Scott Gerwehr [REDACTED] PRIVACY REDACTION
Sent: Thursday, July 31, 2003 12:55 PM
To: Mumford, Geoffrey
Cc: Susan Brandon; Hubbard Kirk
Subject: All addresses working

As of just now I've gotten replies confirming all of the email addresses we have on our participant list. Very nice!

As for the tapes, I haven't yet had a chance to give a listen. I promise to do so shortly however, and will let you know what I can make of the cryptic muttering to be heard :-)

On Tuesday, July 29, 2003, at 06:03 AM, Mumford, Geoffrey wrote:

> Welcome home Scott!
>
> Those 4 addresses agree with the addresses I've used in correspondence
> with
> them...they may just be busy?
>
> I'd be curious to know if the tapes were audible when you get a chance
> to
> have (or have someone else have) a listen.
>
> The feedback we're getting suggests we need to do this again and
> again; so
> onward and upward!
>
> -geoff
>
> -----Original Message-----
> From: Scott Gerwehr [REDACTED] PRIVACY REDACTION
> Sent: Monday, July 28, 2003 2:03 PM

> To: Susan Brandon; Hubbard Kirk; gmumford@apa.org
> Subject: The prodigal rented mule hath returned!
>
>
> Good morning, my friends!
>
> I just wanted to let you know that I have returned to duty in Los
> Angeles and am combing through my emails now. I have received
> confirmations on our email list from every person save Michael Bennett,
> Jim Griffin, Robert Kinscherff, and Maureen O'Sullivan. Do any of you
> have a confirmed missive from them?
>
> And did I mention how much I adore collaborating with you, most
> excellent and stalwart comrades? What new adventure shall we undertake?
> Everest beckons!
>
> S
>

> Scott Gerwehr
> RAND
> [REDACTED]
> Santa Monica, CA 90407-2138
> [REDACTED]
>
> gerwehr@ghost.rand.contractor.dss.smil.mil (S)
>
>

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[REDACTED]
gerwehr@ghost.rand.contractor.dss.smil.mil (S)

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From: "Brandon, Susan (NIH/NIMH)" <sbrandon@mail.nih.gov>
To: "kirk hubbard" "PRIVACY REDACTION" "gerwehr" "SCOTT GERWEHR" "Geoffrey Mumford" <gmumford@apa.org>
Subject: RE: Susan's comments on deception papers from Scott

(In my defense -- or is it Scott's?): I am sitting here trying to visualize our various connections to various parts of the intellectual, political and social world (among the four of us) and can see quite a web and entanglement: we might actually have the whole place covered. I rather like that notion. Makes us quite a strong team (having all the bases covered).

Susan

-----Original Message-----

From: kirk hubbard
To: Brandon, Susan (NIH/NIMH); gerwehr; Geoffrey Mumford
Sent: 8/6/2003 8:03 PM
Subject: Re: Susan's comments on deception papers from Scott

Geoff, I smell trouble. I think Susan is being indoctrinated into a cult headed by Scott. The fiend really is trying to take over the world with his subversive thoughts! Kirk

----- Original Message -----

From: Brandon, Susan (NIH/NIMH)
Sent: Wednesday, August 06, 2003 5:13 PM
To: 'Scott Gerwehr'; Mumford, Geoffrey; Kirk Hubbard (E-mail)
Subject: Susan's comments on deception papers from Scott

Hi, friends -- just wanted to comment briefly on the conference proceedings that Scott sent to me, from the "Colloquium on Foreign Strategic Denial and Deception" (May 15-16 2003) that I just finished reading. It was quite interesting -- and had many parts applicable to interpersonal deception issues that our meeting was concerned with.

Plus some interesting accounts of 9/11, which I can now compare with the recently-released House and Senate Intelligence Committees report -- and a very thoughtful paper on the strategy of suicide bombing, which made me think differently about that phenomenon in some respects and I do like being surprised like that!

Another gem: Wirtz's "theory of surprise," and the notion that the weaker groups are "pushed into surprise strategies" as a function of being the weaker, and that surprise then works so well because the stronger agencies can't comprehend that anyone would be so desperate to actually try anything so extreme -- it was a great analysis of the interaction/dependence of deception with/on denial strategies and extant information.

But I could go on and on -- I am sending this to us all because it occurs to me that if we write something up from our meeting, we could incorporate other's ideas or papers (appropriately referenced and allowed, of course) in the proceedings, like we did for the FBI Academy meeting report -- to the extent that they are immediately applicable, etc.

I am off to the APA convention meetings in Toronto for a few days: I am hoping for no surprises there.

Be well,

Susan

-----Original Message-----

From: Scott Gerwehr [REDACTED]
Sent: Tuesday, August 05, 2003 12:11 AM
To: Mumford, Geoffrey
Cc: 'kirk hubbard'; Brandon, Susan (NIH/NIMH)
Subject: Re: Feedback on workshop

Splendid Colleagues!

If I am reading the tea leaves correctly, it would appear that Susan and Geoff can both meet (in person at best or on the phone at worst) on August 26th...yes?

If so, does any time that day work for you, Kirk?

S

On Monday, August 4, 2003, at 12:27 PM, Mumford, Geoffrey wrote:

>
>
> I too like this Faith-based initiative...August is going to slip
> through my
> fingers very quickly...I'm away August 7-12 and 14-25...so September
> may be
> more realistic...but I look forward to the in-person or virtual
reunion
> whenever we can pull it off.
>
> Susan's recent note refers to a Psych Bulletin article which painted a
> negative picture of conservatives for which we will probably pay
> dearly.
>
> If you're interested, see this link:
>
> <http://www.gopusa.com/rsc/> <<http://www.gopusa.com/rsc/>>
>
> Best,
> -geoff

>
> -----Original Message-----
> From: kirk hubbard [REDACTED] [PRIVACY REDACTION]
> Sent: Sunday, August 03, 2003 12:40 PM
> To: Geoffrey Mumford
> Cc: gerwehr; SusanBrandon
> Subject: Re: Feedback on workshop
>
>
> Greetings all. I would love to meet Faith and find out more about
> what she
> does. Maybe next time Scott is in town we can have a reunion lunch
> and
> invite her to join us? And we should get together, anyway, to discuss

> where
> we go from here on the deception. I definitely want to pursue this
> topic
> and should have a fair amount of FY04 money to do so if we can come up

> with
> a good plan. Perhaps my new deputy can ram rod the program!
>
> I can't be objective about Darpa--too many bad experiences. Then, of
> course, there's Adm Poindexter, convicted felon, running the place.
> But not
> for long--saw he was resigning in Saturday's paper.
>
> Kirk
>
>
> ----- Original Message -----
> From: Mumford, Geoffrey
> Sent: Thursday, July 31, 2003 5:38 PM
> To: 'Brandon, Susan (NIH/NIMH)'
> Cc: 'Scott Gerwehr'; kirk hubbard
> Subject: RE: Feedback on workshop
>
> Thanks Susan, I think Faith would be a neat addition. On a
> different topic...I liked this opinion piece in today's Post
> justifying the
> value of the DARPA "futures" research that's created so much recent
> controversy.
>
> <http://www.washingtonpost.com/wp-dyn/articles/A5696-2003Jul30.html>
>
> Not our research domain but its a familiar battle trying to get people

> to
> think outside the box and then watching hell break loose if they do.
> -geoff
>
>
>> -----Original Message-----
>> From: Brandon, Susan (NIH/NIMH) [SMTP:sbrandon@mail.nih.gov]
>> Sent: Thursday, July 31, 2003 5:14 PM

>> To: 'Scott Gerwehr'; kirk hubbard; Geoff Mumford (E-mail)
>> Subject: RE: Feedback on workshop
>>
>> Dear Friends -- Someone else who is eager to work on deception is
>> Faith
>> Mitchell, an anthropologist who is Deputy Director for Special
>> Projects
>> (Division of Behavioral and Social Sciences and Education) at the
>> National
>> Academies. She's great -- smart and quick and thoughtful. She also
>> has
>> access to lots of educated people and experience with getting reports

>> and
>> papers together quickly; her group did a project for DARPA related to
>> deterring terrorism, which was interesting.
>> Susan

>>
>> -----Original Message-----
>> From: Scott Gerwehr [REDACTED] PRIVACY REDACTION
>> Sent: Thursday, July 31, 2003 12:50 PM
>> To: kirk hubbard
>> Cc: Brandon, Susan (NIH/NIMH); gmumford@apa.org
>> Subject: Re: Feedback on workshop

>>
>>
>> Kirk,
>>
>> As your newly hired deputy I just want you to know that I'll run a
>> tight ship at the office until you return from Montana. Thy will be
>> done!
>>
>> And let me add my voice to the chorus of approbation for both Geoff's
>> email replies (tactful, constructive, engaging, eloquent!) and Susan
>> &
>> Geoff's note-taking! I am only now going through the session notes
>> and
>> I must say you've captured the essential elements masterfully. We
>> here
>> in Kirk's office truly appreciate your dedication and skill :-)
>>
>> Now then, I mustn't tarry. I must return to tirelessly ensuring that
>> Kirk's glorious vision is made a reality.

>>
>> Scott
>>
>> On Wednesday, July 30, 2003, at 02:57 PM, kirk hubbard wrote:

>>
>>> Greetings!
>>>
>>> I was out on Tues and will be out on Thurs and Fri to attend a
>>> workshop. I will respond to an earlier note from Susan to answer
>>> her
>>> questions. Sorry for the delay.
>>>
>>> Yes, Geoff's notes are very well crafted.

>>>
>>> Re: Mike Bennett is on contract to us, but not doing anything in
the
>>> area of deception. I think he got himself invited through Griffin?

>>> |
>>> see no need for him or Doug Griffith to attend future
>>> deception-related conferences, actually. It is not their background
>>> and they didn't add much. Hell, I wouldn't invite myself either,
>>> except for the opportunity to observe what a great team Geoff,
Susan,
>>> and Scott are. Thank you for all that you have done and continue to
>>> do.
>>>
>>> When do I need to pay APA for the expenses, Geoff. Or can I just
>>> take
>>> the money for my upcoming vacation to Montana?
>>>
>>> Kirk
>>>
>>>
>>>> From: "Brandon, Susan (NIH/NIMH)" <sbrandon@mail.nih.gov>
>>>> To: "'Mumford, Geoffrey'" <gmumford@apa.org>, 'Kirk Hubbard'
>>>> PRIVACY REDACTION 'Scott Gerwehr' PRIVACY REDACTION
>>>> Subject: RE: Feedback on workshop
>>>> Date: Wed, 30 Jul 2003 11:42:08 -0400
>>>>
>>>> This is good, as are Robert's contributions during meetings. He
>>>> promised to
>>>> come "to all our meetings," by the way! I am impressed with his
>>>> ability to
>>>> think beyond his world and still offer concrete ideas -- that is,
to
>>>> be
>>>> broad and then, specific!
>>>> As to Bennett: many people had that same suggestion, so we might
>>>> have
>>>> to
>>>> seriously consider it. . . . and he did say he would also
>>>> participate
>>>> in the
>>>> future, right?
>>>> Thanks for handling these emails, Geoff. Your notes back are just
>>>> right.
>>>> Susan
>>>>
>>>> -----Original Message-----
>>>> From: Mumford, Geoffrey [mailto:gmumford@apa.org]
>>>> Sent: Wednesday, July 30, 2003 7:50 AM
>>>> To: 'Kirk Hubbard'; 'Scott Gerwehr'; Brandon, Susan (NIH/NIMH)
>>>> Subject: FW: Feedback on workshop
>>>>
>>>>
>>>> And this from Robert...
>>>> -geoff
>>>>

>>>> -----Original Message-----
>>>> From: Mumford, Geoffrey
>>>> Sent: Wednesday, July 30, 2003 7:49 AM
>>>> To: 'Robert Kinscherff'
>>>> Subject: RE: Feedback on workshop
>>>>
>>>>
>>>> Hi Robert,
>>>>
>>>> Steve Behnke passed along your positive reflections on the workshop
>>>> before a
>>>> meeting we had yesterday and I was pleased to coincidentally
>>>> receive
>>>> this
>>>> feedback the same day. Thanks for some very constructive and
>>>> concrete
>>>> suggestions as to how we might proceed in future endeavors. I
>>>> think
>>>> as we
>>>> let some of the research questions soak-in the ops community will
>>>> be
>>>> in a
>>>> better position the next time around to provide some additional
>>>> detail.
>>>> Alternatively, they may pursue more intimate discussions with folks
>>>> they can
>>>> clear and then provide more detail too. In any case, with two data
>>>> points
>>>> under our belts, we are now doubly impressed with your ability to
>>>> provide
>>>> valuable contributions at these sorts of meetings and hope you'll
>>>> be
>>>> on-board with future activities. Thanks also for the suggestion
>>>> Lt.
>>>> Col.
>>>> Grossman...I'll have to look back at the participant list for the
>>>> FBI
>>>> conference to find the other, but good thought there too. Pulling
>>>> the guys
>>>> off the front lines really helps provide some reality checks for
>>>> the
>>>> researchers but also clearly stimulates new research ideas. Thanks
>>>> again,
>>>>
>>>> Best,
>>>> -geoff
>>>>

>>>> -----Original Message-----
>>>> From: Robert Kinscherff [REDACTED] [REDACTED]
>>>> Sent: Tuesday, July 29, 2003 5:46 PM
>>>> To: Mumford, Geoffrey
>>>> Subject: Re: Feedback on workshop
>>>>
>>>>
>>>> Hi Geoff,
>>>>

>>>> What I liked about the format of the meetings was that: (a) the
>>>> larger group
>>>> assemblies offered opportunities for people from a wide variety of
>>>> backgrounds
>>>> to offer comments, and (b) that the break-out into smaller groups
>>>> allowed
>>>> for
>>>> some more focused discussion on discrete topic areas.
>>>>
>>>> What I liked less about the format was the inescapable flip-side of
>>>> the
>>>> advantages: (a) in the larger group, it was more difficult for
>>>> people
>>>> to
>>>> take
>>>> the time to engage in more extended analysis of a problem or issue;
>>>> (b) in
>>>> the
>>>> larger group, it was easy to get side-tracked (although some of
>>>> these
>>>> diversions were also very informative); and (c) it was not always
>>>> clear to
>>>> me
>>>> how the assignments had been made to the smaller group, since some
>>>> folks
>>>> seemed
>>>> to say very little in the smaller groups when they had been more
>>>> talkative
>>>> in
>>>> the larger group.
>>>>
>>>> One of the impressions that I had was that it was hard to find the
>>>> "fit"
>>>> between the information that the psychologists/researchers might
>>>> have, and
>>>> the
>>>> needs of those from the law enforcement and intelligence
>>>> communities.
>>>> Their
>>>> inability to disclose operational details, or what they are already
>>>> doing,
>>>> or
>>>> what the limitations would be on their ability to act in particular
>>>> ways--often
>>>> left me with a sense that (a) they were already doing a lot of what
>>>> we might
>>>> have suggested (esp. the FBI folks), or (b) what the
>>>> psychologist/researchers
>>>> had to offer was just not detailed or focused enough to be
>>>> particularly
>>>> helpful
>>>> (esp. the CIA folks).
>>>>
>>>> For future meetings, I would suggest consideration of relatively
>>>> detailed
>>>> scenarios drawn up by those in the law enforcement and intelligence

>>>> communities
>>>> that they feel convey the substance of their challenges without
>>>> revealing
>>>> operational details. Specific questions about what psychologists
>>>> and
>>>> researchers might concretely have to offer in addressing these
>>>> challenges
>>>> might
>>>> be appended to the scenarios. These might be in the form of asking
>>>> what
>>>> behavioral science can offer in implementing very concrete
protocols
>>>> or
>>>> procedures for threat assessments, detecting deception during
>>>> interrogations,
>>>> etc. Then, smaller working groups of 5-7 people could be assigned
>>>> (depending
>>>> on interest, relevance of background, etc.) in an effort to
>>>> problem-solve in
>>>> a
>>>> very focused, concrete way and generate suggested procedures,
>>>> protocols,
>>>> etc.
>>>> Where there is little empirical information, this could be noted as
>>>> an "area
>>>> for future research" and the group instead attempt to achieve a
>>>> consensus
>>>> about
>>>> "best practices" under these scenarios or protocols.
>>>>
>>>> As for others who might be invited...It might be interesting to
>>>> include some
>>>> folks whose expertise includes the psychological dynamics of small
>>>> and large
>>>> groups whose members are being trained or encouraged to kill in
>>>> military or
>>>> quasi-military contexts. Lt. Colonel David Grossman is a former
>>>> Army
>>>> Ranger
>>>> and paratrooper who has published in this area, previously has
>>>> taught
>>>> psychology at West Point, and at last I heard, was a professor of
>>>> military
>>>> science at Arkansas State University. I also recall that there was
>>>> an Air
>>>> Force officer (who I dimly recall was also a psychologist?) with
>>>> specialization in this area who was at the first FBI/APA meeting
iat
>>>> Quantico,
>>>> although I cannot recall his name.
>>>>
>>>> Again, thanks for letting me tag along...
>>>>
>>>> Regards,
>>>>
>>>> Robert

>>>>
>>>>
>>>>
>>>>
>>>> Mumford, Geoffrey wrote:
>>>>
>>>>> Dear Colleagues,
>>>>>
>>>>> I'm following-up on our workshop to solicit some unstructured
>>>> feedback
>>>> from
>>>>> you as to: 1) What you liked or didn't like about the format of
the
>>>>> workshop? and; 2) Based on the range of subjects we covered, what
>>>> other
>>>>> research domains should have been represented and, specifically,
>>>> are there
>>>>> other researchers you would have recommended that we invite?
>>>>>
>>>>> Answering either or both questions will help us plan for future
>>>> workshops
>>>>> and also help us grow this network. Thanks again from all of us
>>>> for your
>>>>> willingness to participate.
>>>>>
>>>>> Please note that although fate intervened and prevented Drs. Shuy,
>>>> Darley
>>>>> and Yuille from joining us at the workshop, they very much want to
>>>> be
>>>>> involved in our ongoing dialogue so I've copied them here.
>>>>>
>>>>> Best,
>>>>> -geoff
>>>>>
>>>>> Geoff Mumford, PhD
>>>>> Director of Science Policy
>>>>> American Psychological Association
>>>>> 750 First Street, NE
>>>>> Washington, DC 20002-4242
>>>>> (202) 336-6067 phone
>>>>> (202) 336-6063 fax
>>>>> gmumford@apa.org
>>>>
>>>>
>>>>
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>>>>
>>>> _____
>> Scott Gerwehr
>> RAND
>> **PRIVACY REDACTION**
>> Santa Monica, CA 90407-2138
>> **PRIVACY REDACTION**

>> [REDACTED]
>> gerwehr@ghost.rand.contractor.dss.smil.mil (S)
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From: "Brandon, Susan (NIH/NIMH)" <sbrandon@mail.nih.gov>

To: "Kirk Hubbard (E-mail)" [REDACTED]; "Scott Gerwehr (E-mail)"

[REDACTED]; "Geoff Mumford (E-mail)" <GMumford@apa.org>; "Faith Mitchell (E-mail)"

[REDACTED]; "Chris Hartel (E-mail)" [REDACTED]

Subject: reminders & notes

[Kirk's list 26 Jan 03.doc](#)

Dear Friends,

Just a follow-up for our meeting yesterday. It was good to see you all! Below my short summary here (and assignments, as you will note), I am attaching an electronic version of the cultural-relevant questions that Kirk has asked us to consider.

Kirk, I trust that you will share these notes with Judy, Carmel, and Jon as you see fit.

Kind regards,

Susan

Notes on meeting of September 8, 2003

Kirk Hubbard's office

Kirk, Scott, Geoff, Susan; Faith Mitchell, Chris Hartel, Judy Philipson, Carmel Rosal, Jon Morris

Follow-up on July Deception workshop meeting:

Write a relatively small, relatively unannotated manual of best practices regarding deception detection, with contributions from workshop participants and others whom we might recruit for such; and/or

Edit a collection of papers (one-page) that offer best practice, evidence-based knowledge, and reactions to critical, frequently-asked questions about deception and deception detection. Follow-up: Scott, Susan, Geoff

Describe offshoot projects that are ongoing or planned, that happened as a result of the workshop. Follow-up: Kirk, Susan

Topics for further workshops:

Persuasion - at the level of the individual

Persuasion - at the level of a culture or group of people

✓ Deception - best practices of deception. Follow-up: Scott, Susan, Geoff.

Deception - matching best practices of deception with best practices of deception detection

√ Cross-cultural information useful to walk-in evaluations, asset recruitment, evaluation and management: what questions should be asked, given what knowledge is needed? What levels of knowledge are needed (e.g., knowledge of that culture; knowledge of how members of that culture view Americans). Follow-up: Faith, Chris, Kirk, Carmel, Geoff.

From: "Brandon, Susan (NIH/NIMH)" <sbrandon@mail.nih.gov>
To: "Scott Gerwehr (E-mail)" [REDACTED]
Cc: "Geoff Mumford (E-mail)" <GMumford@apa.org>
Subject: FW: Good vs. Bad Profiling, police intuition, data mining...

Dear Scott,

I thought you might be interested in this exchange; Tony is a cohort of Geoff's and mine from the FBI Academy (a clinical psychiatrist, priest and FBI agent, all in one). He was at the Deception (I) meeting in July. Bryan is another cohort (we don't know him quite as well) from the Institute of Justice; also a Ph.D. psychologist with a background in policing.

Of course, I am wondering not only if you are interested in listening, but if you are interested in talking and thinking about this with us. I know that you can't do Everything You Want, however, so please don't feel pressured. I am mostly sharing because I value your insights and opinions. And perhaps you know other folks at RAND that might be interested in this?

It was fun to have dinner with you on Tuesday. Where are you now? Back home?

How do Geoff and I start the "secret classification" application process?

It seems to me that our order of next steps, relevant to Deception II, might be to start getting the "small book" written up: to decide on a couple of key questions and send them around to folks, and perhaps have something in hand (or rather, in Kirk's hand) before we go back and ask for more money to do another meeting. What do you think about this? I meant to bring it up at dinner but we had more important things to talk about.

My younger son always claims that I ask too many questions. He is right.

Be well,

Susan

-----Original Message-----

From: Bryan Vila [mailto:vilab@OJP.USDOJ.GOV]
Sent: Thursday, September 11, 2003 9:00 AM
To: Brandon, Susan (NIH/NIMH)
Cc: GMumford@apa.org; Brett Chapman; Thomas Feucht; Akiva Liberman; Maggie Heisler; John Morgan
Subject: Good vs. Bad Profiling, police intuition, data mining...

Hi Susan,

It's great to hear from you [REDACTED]
[REDACTED]

This is an excellent idea that fits very well, I think, with a larger set of issues associated with "profiling". On the one hand, no one wants to accept the sloppy sorts of police work associated with, for example, substituting race as a marker for criminal propensity--what many call racial profiling. On the other hand, however, almost everyone can see the inefficiency

associated with strip-searching octagenarians in airport lines solely because their hip transplants set off the buzzer, or they get picked at random--I'd call this zero profiling or PC profiling.

In the rational middle ground between these two extremes lies a range of behavioral prediction that I think we very much need to study and improve upon in order to increase the efficiency of the police without reducing freedom. I'd bound one end of that range of prediction by empirically-based approaches such as the Behavioral Science Unit's behavioral profiling and data mining approaches such as the intelligence community and police agencies are using. The other end of the range of good profiling is police intuition.

Given that the ability to predict other people's behavior is one of the fundamental necessities of social living, it's no surprise that people can be very good at it. And people whose lives or livelihoods depend on it may be expected to be better at it than others--either because the jobs select for those who innately are better, or because they become better at it with practice, or both.

I think that finding ways to describe, understand, and improve upon what exceptionally talented street cops or investigators call "gut instincts" or police intuition is an important topic. I've ccd some of my staff and the two Assistant Directors here at NIJ who, respectively, handle social & behavioral science research and evaluation (Feucht) and science and technology (Morgan). After a back-and-forth on this e-mail, I'd like to put together a proposal to support a workshop such as you suggest.

What do you, Geoff, and Tony think about this? How about my NIJ colleagues?

Cheers,
Bryan

Bryan Vila, Ph.D.
Chief, Crime Control and Prevention Research Division
National Institute of Justice
U.S. Department of Justice
810 7th Street, NW
Washington, DC 20531

PRIVACY REDACTION

e-mail: vilab@ojp.usdoj.gov

>>> "Brandon, Susan (NIH/NIMH)" <sbrandon@mail.nih.gov> 9/10/03 16:46:20 >>>
Dear Bryan,

Tony Pinizzotto has prompted Geoff and I to think about a phenomenon that he refers to as "intuitive policing," where a police officer makes a quick and accurate judgment (usually in the midst of lots of action) and then later cannot easily verbalize what aspect of the situation led to that judgment. In his words,

"These observations were made so rapidly that the officer experienced an Ainstantaneous recognition@ of danger. However, he was unable to articulate these reasons to his fellow officers until after the incident was resolved."

This phenomenon appears to have some similarity to what psychologists are studying that goes by various names; I will attach two articles here, one by Damasio and colleagues and another by Ohman and colleagues. The interesting aspect of the Ohman work is that there is some encouragement to think that tuning in to "gut feelings" (the academic term for this!) is something that can be taught.

We were wondering if you would be interested in supporting a working group where we would bring together police officers, FBI people, psychological researchers and someone from your shop -- to discuss the phenomenon and what it might mean for police training. The topic is obviously (I think!) relevant to surveillance and deception detection -- we might even include one or two people who study gut feelings in deception. I have been advised that we might also want at least one person who does research in implicit cognition and stereotyping.

I am curious to hear what you think!

Hope this finds you well.

Kind regards,

Susan

Susan Brandon
NIMH

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  <key>subject</key>
  <string>FW: Good vs. Bad Profiling, police intuition, data mining...</string>
  <key>to</key>
  <string>"Scott Gerwehr (E-mail)" &lt;gerwehr@rand.org&gt;</string>
</dict>
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```

From: "Brandon, Susan (NIH/NIMH)" <sbrandon@mail.nih.gov>
To: "Kirk Hubbard (E-mail)" [REDACTED] [REDACTED]
Cc: "Scott Gerwehr (E-mail)" <gerwehr@rand.org>, "Geoff Mumford (E-mail)" <GMumford@apa.org>, "Faith Mitchell (E-mail)" [REDACTED]
Subject: solving 50% of the problem

Dear Kirk,

I have been thinking about the issue of cross-cultural understanding that your unit faces for quite awhile, and keep being impressed with how difficult a problem it is! There are so many countries and ethnicities and cultures -- and places like NYC where one can go two blocks and be an a whole other world. I don't know how your people could ever know enough about a foreign country -- without themselves being a former native of that country.

But it occurs to me that when one of your people has the opportunity to gain an asset (or when we try to know if a walk-in is telling the truth), that the interactions between your person and the possible recruit are two-way, and that the perceptions of your person (of themselves, the world in general, and the potential asset) are as powerfully at play as the culture from which the potential asset comes. And your people are a (potentially) known quantity. If I worked for you, and I knew lots about my own prejudices, attitudes, beliefs, cognitive style, fears, assumptions about others, values, strengths and weaknesses, then I would be far more effective than if I weren't well-schooled in these things. Also, if I knew what I knew about the foreign cultures -- what are my biases? etc. -- then I would be far more effective than not. Some of these aspects of myself (as your employee) would be captured via standard personality tests, I am sure, but many would not: many attitudes and beliefs -- the lens through which we see the world -- are implicit and can be measured only via implicit tests. And, standardized tests aren't going to assess my beliefs about the foreign culture, which will vary (of course) with the culture.

Of course, these kinds of measures are very intrusive, so they would have to be made without judgment: for example, no matter how sexist the test shows a person to be, it is OK: better that they know they are than that they don't.

These are very hard things to measure: it's like trying to see the air, really. I am copying Faith (besides the usual suspects) because I should think that cultural anthropologists must face the same issue of how to get around their own cultural stereotypes when encountering another culture.

It would also be useful to know what the average Iraqi (for example) thinks of Americans: what "misperceptions" do they have? This is a critical question, and might be more important than almost anything else one would want to know about a particular culture, because these beliefs would so determine their interactions with us. (I'd put this on your list of questions.)

So, you guys probably do all this already. . . . I am sure this won't be the last time I waste your time -- and probably it's not the first time. But I have long decided that sometimes it's wise to risk appearing foolish.

Susan

From: "kirk hubbard" [REDACTED]
To: gmumford@apa.org, susan_Brandon@ostp.eop.gov, [REDACTED]
Subject: RE: FW: staying another day for good science?

Unless somebody takes money from my budget, I can handle the extra \$7K for the Group 2 folks. I will add this to Scott's existing deception contract.

I wish I could buy everyone lunch with my office funds but while they have no problem wasting money here, they just won't allow reimbursement for a lousy lunch.

My office director would not even reimburse me for circa \$100 bucks for CIA logo t-shirts and ball caps for Marty Seligman's five kids! He's helped out alot over the past four years so I thought that was the least I could do. But no, has to come out of my own pocket! And people wonder why I am so cynical!

Kirk

>From: "Mumford, Geoffrey" <gmumford@apa.org>
>To: "Oval Office Susan" <susan_Brandon@ostp.eop.gov>,"Scott Gerwehr"
[REDACTED],"Kirk Hubbard" [REDACTED]
>Subject: FW: staying another day for good science?
>Date: Tue, 30 Mar 2004 08:33:52 -0500
>
>Friends,
>So now it looks like with the addition of 6 individuals who are likely to
>come from Group 2...we'd add another ~\$1800 (at the outside) for travel, so
>maybe closer to a \$7K total?
>
>John Allen - \$234
>Steve Kosslyn - \$278
>Daniel Langleben - \$567
>Christopher Patrick - \$256
>Don Tucker - \$446
>Thomas Zeffiro - local, free!
><?xml:namespace prefix = o ns = "urn:schemas-microsoft-com:office:office"
>/>
>
>I believe we still have invitations outstanding to Richard J. Davidson and
>Mark Frank, is that correct Susan?
>
>
>
><?xml:namespace prefix = st1 ns =
>"urn:schemas-microsoft-com:office:smarttags" />
>
>
>
>
>
>-----Original Message-----
>From: Mumford, Geoffrey
>Sent: Wednesday, March 24, 2004 5:25 PM

>To: 'Brandon, Susan'; Scott Gerwehr
>Cc: kirk hubbard
>Subject: RE: staying another day for good science?
>
>
>Hey Gang, sorry, Susan reminded me that Group 2 wouldn't be in town yet so
>their travel costs have to be figured in and I hadn't done that...so let me
>try and cost that part out tomorrow morning and get back to
>everyone...sorry that in my haste I just assumed that like Fruitpie the
>magician we'd just make everyone magically appear.
>-geoff

>
>-----Original Message-----
>From: Brandon, Susan [mailto:Susan_Brandon@ostp.eop.gov]
>Sent: Wednesday, March 24, 2004 5:09 PM
>To: Scott Gerwehr; Mumford, Geoffrey
>Cc: kirk hubbard
>Subject: RE: staying another day for good science?

>
>
>Scott, the group at present is smaller (about 10). So, perhaps you can
>wait at least until tomorrow and we will try to have a firm list, and see
>if the additional folks (from Group 2) can be brought in.
>
>But the plan otherwise sounds wonderful. The site of the Intuition meeting
>is Arlington, so perhaps the RAND facilities would be a good idea.

>
>Susan

>
>-----Original Message-----
>From: Scott Gerwehr [REDACTED]
>Sent: Wednesday, March 24, 2004 4:55 PM
>To: Mumford, Geoffrey
>Cc: kirk hubbard; Brandon, Susan
>Subject: Re: staying another day for good science?

>
>
>
>I would love to do the hosting and catering at RAND!

>
>
>Just to be clear: we're talking about ~ 40-50 people all day on June 24?
>Plus breakfast and lunch? As for hotel rooms, we should probably just
>extend existing room reservations by one day, rather than try to move
>people, yes?

>
>
>My plan is to book the same facilities we had at the last conference, have
>food catered in, and all audio/video support ready for whatever we need. It
>will take me 24 hours to book and confirm... so if I've gotten any of the
>above wrong let me know ASAP.

>
>
>What a pleasure!
>
>S

>
>
>
>Scott Gerwehr
>
>RAND
>
> **PRIVACY REDACTION**
>
>Santa Monica, CA 90407-2138
>
> **PRIVACY REDACTION**
>
> **PRIVACY REDACTION**
>
>gerwehr@ghost.rand.contractor.dss.smil.mil (S)
>
>
>
>On Mar 24, 2004, at 12:55 PM, Mumford, Geoffrey wrote:
>
>
>RAND would be fabulous and another possibility for that size group is our
>APA Board room which I have reserved just in case;) But I'm open to any and
>all suggestions.
>
>-geoff
>
>
>
>
>-----Original Message-----
>
>From: kirk hubbard **PRIVACY REDACTION**
>
>Sent: Wednesday, March 24, 2004 3:50 PM
>
>To: Susan_Brandon@ostp.eop.gov; Mumford, Geoffrey
>
>Cc: **SCOTT GERWEHR**
>
>Subject: RE: staying another day for good science?
>
>
>
>Thanks for the info Geoff. If we are only talking about \$5-6K, I think the
>
>best way would be to add a task and \$5K to Scott's contract. What about the
>
>conference room? Would you conduct this at Rand Hq?
>
>
>This sounds better and better. I get to rub shoulders with friends and
>
>luminaries and don't have to do a damn thing to help out! Kind of like the
>

>last conference we had!
>
>
>Best to all,
>
>
>Kirk
>
>
>
>From: "Brandon, Susan" <Susan_Brandon@ostp.eop.gov>
>
>To: "Mumford, Geoffrey" <gmumford@apa.org>, "kirk hubbard"
>
><kmhubbard@msn.com>
>
>CC: <gerwehr@RAND.org>
>
>Subject: RE: staying another day for good science?
>
>Date: Wed, 24 Mar 2004 15:30:09 -0500
>
>
>What about those C rations that I hear about? And camping out (it will
>
>be late June) --
>
>
>When the money stuff is more or less decided, Geoff and I will send a
>
>note out to the Group 2 list folks: is there anyone else you think
>
>might/should be there, too?
>
>
>Susan
>
>
>-----Original Message-----
>
>From: Mumford, Geoffrey [mailto:gmumford@apa.org]
>
>Sent: Wednesday, March 24, 2004 3:24 PM
>
>To: kirk hubbard
>
>Cc: Brandon, Susan; gerwehr@RAND.org
>
>Subject: RE: staying another day for good science?
>
>
>
>Hi Kirk,
>
>
>To answer the latter questions. NIJ and FBI Academy are the

>
>co-sponsors. Yes, the third day folks would be a subset of those from
>
>our Intuitive Policing workshop and a few add-ons as indicated in the
>
>Group1/Group2 designations from Susan's note. Cost would run around 20
>
>room-nights (~\$3000) if everyone comes (with some minimalistic meals,
>
>breakfast gruel, ramen noodles for lunch, and a power bar for dinner
>
>around \$20 bucks total) or something a little higher end probably around
>
>\$1500/\$2000 for meals for the group. That's a guess, I could come up
>
>with actual numbers by tomorrow. -geoff

>
>
>-----Original Message-----

>
>From: kirk hubbard [REDACTED]
>
>Sent: Wednesday, March 24, 2004 3:15 PM
>
>To: Mumford, Geoffrey
>
>Cc: Susan_Brandon@ostp.eop.gov; gerwehr@RAND.org
>
>Subject: RE: staying another day for good science?

>
>
>Excellent ideas from both Geoff and Scott. Neither would require much
>
>effort on my part. (I know I am sounding very lazy and unprofessional,
>
>but
>
>I have to do battle with the bureaucracy on a daily basis--it is like
>
>trying
>
>to get rid of ants in your house. As soon as you rid them from one
>
>area,
>
>they appear someplace else!)
>
>
>I have a couple of questions. Who is the current sponsor of the
>
>conference,
>
>ie paying for it? Would just a select group of people be invited to
>
>attend

>
>the third day? And what is your best guess as to the total cost of a
>
>third
>
>day.
>
>
>Kirk
>
>
>
>From: "Mumford, Geoffrey" <gmumford@apa.org>
>
>To: "kirk hubbard" **PRIVACY REDACTION**
>
>CC: <Susan_Brandon@ostp.eop.gov>, **SCOTT GERWEHR**
>
>Subject: RE: staying another day for good science?
>
>Date: Wed, 24 Mar 2004 12:17:47 -0500
>
>
>Hi Kirk,
>
>
>I'm really fine with carrying the balance for however long it takes...I
>
>wonder if it would be easier the second time around (I just don't want
>
>to
>
>create headaches for you), but going to an alternate source is fine
>
>too.
>
>
>The DoJ uses a contractor at the Institute for Law and Justice...I
>
>wonder
>
>if transferring funds to them as an existing government contractor
>
>might
>
>offer an additional option. I could put whoever is interested in
>
>funding
>
>that day in touch with our DoJ contacts.
>
>-geoff
>
>
>-----Original Message-----
>

>From: kirk hubbard [REDACTED]
>
>Sent: Wednesday, March 24, 2004 12:06 PM
>
>To: Susan_Brandon@ostp.eop.gov; [REDACTED]
>
>Cc: Mumford, Geoffrey
>
>Subject: RE: staying another day for good science?
>
>
>
>Hi Susan, Pretty impressive bunch of people! I think I would like to
>
>attend just to rub shoulders with them. I would be happy to support a
>
>third day....if I didn't have to do anything to transfer money. I have
>
>
>the money,
>
>but figuring out how to get it to people not on specific contracts is a
>
>pain. Witness the problems we had with reimbursing APA.
>
>
>I would try Bob or Gary for starters, but I will talk to our finance
>
>folks to determine if there isn't an easier way to handle this. I
>
>doubt it, though. If it isn't "routine" people just scratch their
>
>heads around this place.
>
>
>Kirk
>
>
>
>From: "Brandon, Susan" <Susan_Brandon@ostp.eop.gov>
>
>To: [REDACTED] [REDACTED]
>
>CC: <GMumford@apa.org>
>
>Subject: staying another day for good science?
>
>Date: Wed, 24 Mar 2004 09:16:20 -0500
>
>
>March 23, 2004
>
>
>
>
>Dear Kirk and Scott,

>
>
>
>
>As you know, Geoff and I are part of the "advisory group" for the
>
>meeting to be held June 22 & 23, 2004 (in Arlington, VA), that is
>
>bringing some interesting people together to discuss behaviors based
>
>on what is sometimes called "intuitive knowledge" (see attached --
>
>you have both seen this already). Several of these individuals also
>
>have data and expertise relevant to the broad domain of deception.
>
>These people are listed below (Group 1).
>
>
>
>
>We are wondering if (1) if your office would like to provide support
>
>to extend these individual's visit for an additional day, to give us
>
>an opportunity to talk with them about deception and deception
>
>detection; this would mostly likely mean room and board for an
>
>additional day or two, and (2) whether you would like to invite some
>
>
>additional folks in for that conversation.
>
>
>
>
>There are several researchers in the area of social and/or emotion
>
>processing that we know that might be interested in such a meeting -
>
>of course, whether schedules permit is another matter. These people
>
>are listed below as Group 2. They are all U.S. residents, which
>
>would make them less expensive to move around: would you like to
>
>consider inviting these people, or others, to the proposed one-day
>
>meeting?
>
>
>
>
>The UK folks need to know soon whether to plan to extend their stay,
>

>so this is something that we would need to decide on without too much
>
>
>time to deliberate.
>
>
>
>
>Let us know your thoughts: we could also ask Bob Meriscko and/or Gary
>
>
>Strong (DHS). Some of the people in Group 2 are being supported by
>
>the ITIC and DARPA folks -- however, these are mostly behavioral
>
>sorts, so we thought we should see if either of you are interested
>
>first, before we check with them.
>
>
>
>
>Susan (& Geoff)
>
>
>
>
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>
>
>
>
>
>Group 1 (already part of the "Intuition" meeting):
>
>
>
>
>John Pearse, New Scotland Yard, UK
>
>
>Dr. Pearse is a Detective Superintendent (pro active operations) in
>
>the Anti Terrorist Branch at New Scotland Yard. He is a member of the
>
>
>British Psychological Society, an associate fellow of the Division of
>
>
>Forensic Psychology and he is a Chartered Psychologist. He is an
>
>Honorary Lecturer at the Institute of Psychiatry, University of
>
>London, and has been employed as a consultant forensic psychologist
>
>by the

>
>National Police Training College. His published work is primarily
>
>in
>
>the field of police interviewing and the legal, psychological and
>
>social issues associated with the detention, treatment and welfare of
>
>
>persons arrested by the police. He has developed a unique framework,
>
>the Police Interviewing Analysis Framework (PIAF) that succeeded in
>
>measuring 'oppressive' police interviewing tactics. Current research
>
>projects include (1) assessing the role of participants within the
>
>police suspect interview scenario, and (2) an examination of the
>
>dynamics and effectiveness of police interviews with terrorist
>
>suspects.
>
>
>A forthcoming multi agency project that seeks to examine the
>
>effectiveness of the use of micro facial expressions as a means of
>
>detecting inappropriate responses within a law enforcement
>
>environment is directly relevant to the subject matter under
>
>discussion. This represents an opportunity to create an empirical
>
>study to examine the work of Ekman (1985) on the detection of deceit.
>
>
>
>
>Aldert Vrij, Professor of Social Psychology, University of
>
>Portsmouth, UK
>
>
>Dr. Vrij is a Professor of Social Psychology in the Department of
>
>Psychology. His main fields of interest are social and criminal
>
>psychology. His research interests are deception, police officers'
>
>shooting behaviour, interviewing suspects, interviewing children, and
>
>
>ethnic prejudice. Most of his research deals with deception. He
>

>investigates both nonverbal correlates of deception and verbal
>
>correlates of deception, and has received research grants from ESRC,
>
>Leverhulme Trust and Dutch Ministry of Justice. Dr. Silke has
>
>published more than 190 articles and 5 books. His recent book
>
>'Detecting lies and
>
>deceit: The psychology of lying and its implications for professional
>
>practice' (Chichester: John Wiley & Sons, published 2000) is the
>
>first
>
>book which incorporates research on both nonverbal and verbal cues to
>
>deception.
>
>
>
>
>Ray Hyman, Professor Emeritus, University of Oregon (Psychology)
>
>
>Professor Hyman has a long history of research in the
>
>area of deception detection.
>
>
>
>
>Andrew Silke, Home Office, UK
>
>
>Dr. Silke is a forensic psychologist who has worked both in academia
>
>and for government. He has published extensively on terrorists and
>
>terrorism in journals, books and the popular press, and his most
>
>recent book on the subject was Terrorism Research: Trends,
>
>Achievements, Failures (2003). He is an Honorary Senior Research
>
>Associate of the Centre for the Study of Terrorism and Political
>
>Violence at the University of St. Andrews and is a Fellow of the
>
>University of Leicester. His work has taken him to Northern Ireland,
>
>
>
>the Middle East and Latin America. He is a member of the
>
>International Association for Counter-terrorism and Security

>
>Professionals and serves on the United Nations Roster of Terrorism
>
>Experts.
>
>
>
>
>Martha Davis, John Jay College of Criminal Justice, The City
>
>University of New York
>
>
>Dr. Davis is conducts nonverbal and verbal analyses of deception in
>
>criminal suspect videotapes, and research on nonverbal
>
>communication
>
>in various contexts such as psychotherapy.
>
>
>
>
>Emma Barrett, University of Birmingham, UK
>
>
>Ms. Barrett has worked for over a decade with UK law enforcement
>
>agencies and government departments, and is currently employed as a
>
>
>Behavioural Science Advisor with the UK government. In addition to
>
>various work-related projects, Emma is also carrying out research on
>
>the development of investigator expertise, in conjunction with
>
>several UK police forces, as part of a PhD at the University of
>
>Birmingham, UK. The focus of this research is the cognitive
>
>mechanisms underlying investigative situation assessment, the process
>
>
>by which investigators make sense of information available during
>
>complex criminal investigations. Her other research interests include
>
>
>interview strategies for informants and suspects and issues relating
>
>to the psychology of terrorism.
>
>
>

>
>Group 2 (possible additions):
>
>
>
>
>John J. B. Allen, University of Arizona
>
>
>John Allen's research interests are in the use of psychophysiological
>
>
>measures to understand "psychologically interesting phenomena,"
>
>including assessment of deception and malingering.
>
>
>
>
>John Cacioppo, University of Chicago (current NIMH; on Center grant
>
>in
>
>BE-A)
>
>
>John Cacioppo is a social neuroscientist who uses multi-level
>
>integrative analyses that span molar and molecular levels of analysis
>
>
>in order to provide an understanding of social processes and
>
>behavior. [John was on the NRC Committee that eventually developed
>
>the NAS polygraph report.]
>
>
>
>
>Simon Baron-Cohen, Developmental Psychopathology, University of
>
>Cambridge in the Departments of Experimental Psychology and
>
>Psychiatry
>
>
>Simon Baron-Cohen research interests are on autism spectrum
>
>conditions at the psychological, diagnostic, and neuroscientific
>
>levels.
>
>
>
>

>Richard J. Davidson, University of Wisconsin
>
>
>Richie Davidson's research focuses on cortical and subcortical
>
>substrates of emotion and affective disorders, including depression
>
>and anxiety. He uses quantitative electrophysiology, positron
>
>emission tomography and functional magnetic resonance imaging to make
>
>
>inferences about patterns of regional brain function.
>
>
>
>
>Mark Frank, Department of Communications, Rutgers University
>
>
>Mark Frank's research is on nonverbal communication, with a focus on
>
>understanding the complexities of facial expressions and deception in
>
>
>meaningful real world settings. [Works with Paul Ekman & Maureen
>
>O'Sullivan]
>
>
>
>
>Steven Kosslyn, Harvard University
>
>
>Steve Kosslyn's research includes the neural substrate underlying
>
>visual mental imagery, visual display design, the neural bases of
>
>deception and the neural bases of individual differences in
>
>information processing abilities and in "cognitive style."
>
>
>
>
>Daniel D. Langleben, University of Pennsylvania
>
>
>Daniel Langleben's research focuses on the use of fMRI as a
>
>diagnostic tool (including for ADHD)
>
>
>See Langleben D, Schroeder L, Maldjian J, Gur R, McDonald S, Ragland,
>

>
>JD, O'Brien CP, Childress AR. (2002). Brain activity during
>
>simulated
>
>deception: An event-related functional magnetic resonance study.
>
>Neuroimage, 15, 727-732.
>
>
>
>
>Christopher J. Patrick, Department of Psychology, University of
>
>Minnesota
>
>
>Christopher Patrick's research is concerned with investigating basic
>
>emotional and cognitive processes, and the role of affect in
>
>psychological disorders, through the use of psychophysiological and
>
>behavioral measures. He focuses on the clinical phenomena of
>
>psychopathy, antisocial behavior, substance abuse, and pathological
>
>anxiety. He has a particular interest in paradigms and measures that
>
>
>
>permit inferences about underlying brain systems involved in
>
>processing and reacting to emotional stimuli.
>
>
>
>
>Don Tucker, Chief Scientist, Electrocial Geodesics Inc.
>
>
>Don Tucker has developed the use of dense array methods
>
>to study brain electrical activity and the neural mechanisms of
>
>motivation and emotion.
>
>
>
>
>Jennifer Vendemia, Department of Psychology, University of South
>
>Carolina
>
>
>Jennifer Vendemia's research is on cognitive models of deception. She
>

>
>uses high density ERPs, fMRI, and reaction time measures in a variety
>
>
>of paradigms designed to study deception across types of memory.
>
>
>
>Thomas Zeffiro, Director, Center for Functional and Molecular
>
>Imaging, Georgetown University.
>
>
>Tom Zeffiro's research is on the development of novel techniques for
>
>structural and functional brain imaging, with a focus on the areas of
>
>language processing and developmental disorders. He is currently
>
>investigating deception using neural and other biological imaging
>
>tools.

><< IPT3Invitation032304.doc >>

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>
><< winmail.dat >>

Is your PC infected? Get a FREE online computer virus scan from McAfee/AE Security. <http://clinic.mcafee.com/clinic/ibuy/campaign.asp?cid=3963>

```
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<!DOCTYPE plist PUBLIC "-//Apple//DTD PLIST 1.0//EN" "http://www.apple.com/DTDs/PropertyList-1.0.dtd">
<plist version="1.0">
<dict>
  <key>date-sent</key>
  <real>1080660663</real>
  <key>flags</key>
  <integer>33815681</integer>
  <key>sender</key>
  <string>"kirk hubbard" <span style="background-color: black; color: black; display: inline-block; width: 150px; height: 1em; vertical-align: middle;">PRIVACY REDACTION></string>
  <key>subject</key>
  <string>RE: FW: staying another day for good science?</string>
  <key>to</key>
  <string>gmumford@apa.org, susan_Brandon@ostp.eop.gov <span style="background-color: black; color: black; display: inline-block; width: 100px; height: 1em; vertical-align: middle;">SCOTT GERWEHR>
</dict>
</plist>
```


Subject: RE: preliminary agenda for meeting on June 24, 2004
From: "Brandon, Susan" <Susan_Brandon@ostp.eop.gov>
To: "Emma Barrett" <ecgbarrett@btinternet.com>
Cc: <gerwehr@rand.org>, <kmhubbard@msn.com>

Emma, I am sorry to have missed your calls. It would have been nice to talk with you --

This meeting is unclassified, and a good majority of the participants do not have any level of clearance. (Nor do I, although I am in the process of getting such.) However, there are people there who do, and they might appreciate an opportunity to speak with you about these issues. I am not sure how to "orchestrate" such a conversation; I do not want to create uneasy or uncomfortable divisions in the group according to level of clearance. But perhaps there is a way to talk that will fit easily enough into the ongoing activities.

I am copying this note to Scott Gerwehr from RAND, who is the primary sponsor for the June 24th meeting via a project he is doing for the CIA, and Kirk Hubbard, who is the CIA person Scott is working with. They both have a significant interest in your work and in deception, and both have secret+ clearance levels. Perhaps they can think with you about how to talk effectively.

I look forward to meeting you.

Kind regards,

Susan

-----Original Message-----

From: Emma Barrett [mailto:ecgbarrett@btinternet.com]
Sent: Friday, June 11, 2004 12:20 PM
To: Brandon, Susan
Subject: Re: preliminary agenda for meeting on June 24, 2004

Dear Susan,

I'm sorry I missed you a couple of times earlier this week. I just wanted to let you know that I am, of course, happy to say a few words at the workshop about 'operational challenges' but I will not be able to go into any great detail about our work because of the sensitive nature of what we do. I can, however, give a general idea of the types of situation in which we think being able to deceive effectively is important, and highlight some areas where we would like to see more research. Would this be ok?

Secondly, it would be helpful to know whether the non-law enforcement participants have any level of security clearance, because if they do I might be able to get authority to be a little more forthcoming.

Looking forward to meeting you soon,

APA_0220996-00001

Kind regards,

Emma

----- Original Message -----

From: Brandon, Susan

To: jallen@u.arizona.edu ; langlebe@mail.med.upenn.edu ; dtucker@egi.com ; taz@georgetown.edu ; c.lum@neu.edu ; **Diana Fishbein** sbb2@georgetown.edu ; John.Pearse@met.police.uk ; aldert.vrij@port.ac.uk ; Andrew Silke MADAVIS95@aol.com **PRIVACY REDACTION**; Gary.Strong@dhs.gov ; Charles.Morgan@yale.edu ; kcolwell@uttyler.edu ; e_c.barrett@virgin.net

cc: **Kirk Hubbard** ; **Scott Gerwehr** GMumford@apa.org ; Brandon, Susan

Sent: Wednesday, June 02, 2004 10:18 PM

Subject: preliminary agenda for meeting on June 24, 2004

Dear Friends,

I have been helping to construct an agenda for the meeting on June 24, 2004, and it is copied below (and attached). A pdf file that describes a meeting on deception detection held last summer also is attached.

If you have comments or concerns, you are welcome to direct them to me. I look forward to the meeting.

Kind regards,

Susan

Susan E. Brandon, Ph.D.

Asst. Director Social, Behavioral & Educational Sciences

Office of Science and Technology Policy

Executive Office of the President

202 456 6130

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Interpersonal Deception: Integration of Theory and Practice

June 24, 2004

RAND

1200 South Hayes Street

Fourth Floor Executive Conference Room
Arlington, Virginia 22202-5050

Background for the meeting

This meeting follows “The Science of Deception: Integration of Theory and Practice,” held here in the Washington DC area in July 2003. A description of that meeting is attached.

The goal of the meeting

The goals of this meeting are to (1) describe what is known about effective interpersonal deception based on sound science, and (2) create a research agenda for further empirical analyses.

The topic of the meeting

The topic of “interpersonal deception” follows from the fact that although there is a long and robust record of scientific investigation into detecting interpersonal deception (e.g., De Paulo et al, 2003; Vrij, 2000; Zuckerman et al, 1981; Ekman & Friesen, 1969), there is less on how to conduct effective interpersonal deception. How to deceive (on an interpersonal level) is the topic of this meeting.

Important questions include: What are the most effective methods for deceiving? What are the key personal and environmental variables for success or failure? What factors shorten/prolong or amplify the effect of deception? We would also like to consider the points offered on pages 13-15 of the note from the 2003 meeting on “how to deceive effectively.”

We are hoping that participants who want to present findings from their work or professional experience consider framing their briefings in the context of some of the canonical interpersonal deception scenarios: guilty suspect being questioned by police, employee lying to a boss on an important matter, smuggler trying to get through Customs, adulterer attempting to deceive spouse, con artist scamming a mark, etc. The findings can thus be expressed in terms of how to coach someone to deceive their way through a scenario, which is quite a different approach than any research has offered before (save in stage magic). It also immediately sets up interesting questions, such as: Do powerful deception methods beat effective detection methods? Are deception methods equally applicable against bosses, spouses, inquisitive cops, etc or do the principles governing each situation differ (obviously, the details will differ, but the principles too?)

Given the small size of the group, and the high level of expertise present, this meeting will be relatively informal. A preliminary agenda is offered below.

The three groups described below are organized roughly by topic. The agenda invites each person in these groups to offer a short description of their research that is germane to the topic of deception as described. Each “presentation” should be limited to 15-20 minutes; it is hoped that the discussion will focus on the more specific topic of interpersonal deception.

If these groups and topics do not appear reasonable to the participants, please let us know and we will “regroup” and move people around, etc. If we have not included you as a “data presenter,” this means that your primary role is as discussant but if you would like to make a presentation, you are welcome to do so and we will include you in one of the groups.

Agenda

9:00 – 9:30: Welcome remarks & introductions

9:30 – 10:00: Project on Interpersonal Deceptive Practices: Scott Gerwehr, RAND

10:00 – 12:00 Interpersonal deception & deception detection: operational challenges

Emma Barrett, UK

John Pearse, UK

Andy Morgan, CIA

Aldert Vrij, University of Portsmouth

Cynthia Lum, Northeastern University

12:00 – 1:00: Lunch (to be provided)

1:00 – 2:30: Technological advances; behavioral challenges

Daniel Langleben, University of Pennsylvania

Don Tucker: Electrical Geodesics

Thomas Zeffiro, Georgetown University

2:30 – 5:00: Empirical & ethical challenges

Kevin Colwell, Sam Houston State University

Martha Davis, John Jay College

Diana Fischbein, RTI

Andrew Silke, UK

5:00 – 6:00: General discussion; summary

Subject: Update
From: "Mumford, Geoffrey" <gmumford@apa.org>
To: "kirk hubbard" [REDACTED], "Andy Morgan"
[REDACTED], "Carmel Rosal" [REDACTED], "Dave Watterson"
[REDACTED], "gerwehr" [REDACTED], Geoff Maruyama"
[REDACTED], "Judy Philipson" [REDACTED], "Kirk (GOV) Kennedy"
<Kirk.Kennedy@cifa.mil>, "Jon Morris" [REDACTED], "Nicole O'Brien"
[REDACTED], "Scott Shumate" [REDACTED], "Shana Levin"
[REDACTED]
Cc: [REDACTED] BEVERLY KOLOIAN, [REDACTED] MICHELE ORLO, [REDACTED] [REDACTED]

Hi Kirk,

Belated thanks for your note and update...sounds like your settling in nicely...always nice to know your locked and loaded and ready for bear. I thought you and many of those copied here would be interested to know that APA grabbed the bull by the horns and released this Task Force Report today: <http://www.apa.org/releases/pens0705.html>

I also wanted to semi-publicly acknowledge your personal contribution as well as those of K2 and Andy Morgan in getting this effort off the ground over a year ago. Your views were well represented by very carefully selected Task Force members (Scott Shumate among them).

I was pleased to help staff the Task Force and Susan serving as an Observer (note she has returned to NIMH, at least temporarily) helped craft some language related to research and I hope we can take advantage of the reorganization of the National Intelligence Program, with its new emphasis on human intelligence, to find a welcoming home for more psychological science.

The timing is a little awkward with yesterday's publication of a New Yorker article on the role of psychiatrists and psychologists (and others) at Gitmo. Not sure if they are allowed to ship the New Yorker to [REDACTED] but we can fax you a copy if you like. Some of Andy's data are referenced and Jim Mitchell is quoted.

In any case, I hope this finds you well and that you are as pleased as we are with the report.

All the Best,
-geoff

From: kirk hubbard [REDACTED]

Sent: Thursday, June 16, 2005 8:54 PM

To: Andy Morgan; Carmel Rosal; Dave Watterson; Mumford, Geoffrey; gerwehr; Geoff Maruyama; Judy Philipson; Kirk (GOV) Kennedy; Jon Morris; Nicole O'Brien; Scott Shumate; Shana Levin; Susan Brandon

Cc: BEVERLY KOLOIAN MICHELE ORLO PRIVACY REDACTION
PRIVACY REDACTION

Subject:

Hello All!

We are sort of moved in and yesterday I got the computer back up and running (Okay, Nicole, I had someone do it for me). Our home phone number is [REDACTED] and below is the rest of the info. I created the LLC for tax purposes and now I do some consulting work for Mitchell Jessen & Associates. Most of you know who Jim and Bruce are, I think. Mostly I can do this from my "home office" (read: deck over-looking the lake and mountains) but they just sent me a bunch of hi-tech computer stuff so, sadly, I guess they actually expect me to do some real work! I went to DC last week for a meeting and next week I'll be in Spokane for three days (that's where Jim and Bruce's company is headquartered). But mostly I'll telecommute from here.

PRIVACY REDACTION

We have seen two bears on our property so far. One very large Mama black bear and another black bear that appears to be about a year old (I'm estimating the yearling weighs about 100 lbs.) Lots of deer, squirrels, rabbits (so much for having a garden), and birds, including a pair of great horned owls, eagles, and osprey.

Yes--I bought a pick-up truck, a chain saw, and logging boots to complete my [REDACTED] Woodsman ensemble. Of course, I already had the obligatory collection of weapons.

I hope all of you are well and will correspond with me periodically. You have all been wonderful friends and co-workers.

Regards, Kirk

Kirk M. Hubbard, Ph.D.

[REDACTED]
PRIVACY REDACTION

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Ethics and National Security Forum
July 20, 2004
APA Boardroom
12:00-2:00

- I. Steve Behnke: welcome and introductions; opening remarks:
- a. 4 goals of this meeting:
- 1) Identify the ethical issues in the use of psychology in national security-related investigations;
 - 2) Discuss how APA and other professional and scientific organizations can serve as a resource for psychologists and mental health professionals who participate in these investigations;
 - 3) Identify resources (e.g., journal articles that deal with relevant ethical issues, individuals with interest or expertise)
 - 4) Determine whether ongoing contacts among the group would be useful (e.g., more meetings, workshops, journal articles or newsletters)
- b. 9/11 and Abu Ghraib have brought to our attention important ethical issues facing mental health professionals
- we want to figure out how good the fit is between the materials that guide or ethical questions and what professionals are actually doing in national security investigations
 - we want to prevent two possible negative consequences of a poor fit: professionals avoid this kind of work or split off from their national organizations
 - how do we balance the concerns of national security with those of privacy, truthfulness, informed consent, etc.?
- II. Discussion
- Steve Band (SB): FBI Academy Conference reached similar conclusions that there is need to have this discussion, looked at scenario-based activities
 - Robert Fein (RF): at that workshop, we concluded that the ethics code was indeed a poor fit
 - Mike Gelles (MG): question of what defines critical information; we consult, we don't do interrogations; psychologists get pulled into a process where our expertise is demanded, but how do we define our competence? Wrote article to define boundaries, create thoughtful parameters in which we could operate

- Scott Schumate (SS): we are put in difficult positions of balancing demands with ethical codes; behavioral scientists feel a great deal of personal responsibility and pressure in these situations b/c of the high stakes
- Anthony Pinizzotto (AP): are we talking about absolute or relative ethics?
- Andy Morgan: there are areas in which we have competence from our training and other areas where we have no training, yet we are pressured to offer consultation and opinions
- MG: it's important to remember the client is the interrogator, not the interrogatee – these are not patients
- Robert Phillips: we have a different agenda that we do in the normal role of clinician/patient; in that context, aren't we really struggling with conflicts of conscience?
- SS: there's a continuum of coercion from benign to not at all benign, depending on how high the stakes are
- Jeffrey Janofsky (JJ): we have some duties as forensic examiners; under normal circumstances, we identify ourselves and who we are working for – none of those rules apply to an interrogation scenario
- Melvin Gravitz: govt. agencies have increasingly sought our consultation since 9/11, and we have a responsibility to provide credible, ethical consultation; I did a survey of all the APA ethics codes to date, and up until the current code, it was very clear and the first obligation is to the individual client – only now is there some indication of an exception to that rule
- Andy Morgan (AM): we are supposed to do no harm, but the reality is that we do do harm (e.g., providing expert testimony for the prosecution, which influences the decision to use the death penalty)
- Kirk Hubbard (KH): the current code does not apply at all the national security investigation situations – it's not mental health we're concerned with, but national security; we are supposed to exploit and manipulate the interrogatees to gain crucial information
- RF: we have very little data to assess risk; who can we talk to for help/guidance on these issues – is there a community of people to talk to?
- SB: in civil commitment cases, people are routinely involuntarily restrained and medicated; while these decisions fall short of torture, they do take away personal liberty and we make these decisions everyday
- AP: the whole issue of ethics is not well-defined; the research needed to clarify can't be done b/c it's unethical according to APA code
- Mel Gravitz: if there a second 9/11, I am certain that the attitudes of the public will be very different from the day before – that's an idea for a study
- Robert Kinscherff (RK): as always, the devil is in the details; at what point does deception move from a useful to an unethical one (e.g., Al Qaeda document about resisting interrogation)

- MG: should we discuss how far psychologists should go? Instead of talking about rules and guidelines, let's talk boundaries; interrogation is a law enforcement function in which the govt. agent is my client
- AM: how do we check our own behavior so that we know that we're responding to data and not to some authority figure? (e.g., Milgram's results could not be replicated when he was identified as from the University at Bridgeport instead of Yale)
- SS: sometimes you can't consult a forum or community of colleagues, because the work is classified
- JJ: if you take the point of view that your client in the interrogator, are there no boundaries on what you can ethically do to the interrogatee? We have some duty to the detainees, albeit not the same duties as we have to a normal client
- AM: anecdote about police drugging a man's coffee who was in his truck and had killed his wife – the drug could easily have killed the man if given at the wrong dosage, etc., but the ER doctor did it anyway to help the police
- MG: not only is competence in the culture important, but also competence in the law enforcement or intelligence agency the psychologist is working in
- RP: but you're not there as a clinician, you're there as an expert in human behavior
- KH: since torture is illegal, there's no issue there; beyond that, we have no ethical duty to the interrogatee
- MG: should psychologists conduct interrogations?
- KH: sure, why not?
- JJ: are psychologists bound when not in that capacity, such as when they are in a military position unrelated to their training as a psychologist? You can't just drop your ethical guidelines when you take off your "psychologist hat"
- Mel Gravitz: can you be both a psychologist and the other role at the same time?
- AP: I don't think there's any separate code of ethics for different roles – either you are acting ethically or you are not
- JJ: is it in psychologists' interest to have a code that allows overt deception and coercion?
- AM: there's already a role for coercive activity (e.g., detaining someone to prevent them from abusing a child)
- JJ: our duty is to the patient and the effect of their actions on their own lives
- Steve Behnke: there are exceptions to each rule in the code, where some other value or goal trumps another
- RK: but what is it that we think we know about human behavior in this context? The answer should inform our code of ethics
- SS: we know a lot

- AM: there are many other examples of the ethics code not being a good fit with a certain area of work, such as military psychologists and APA's gay and lesbian policy
- Steve Behnke: what resources are you aware of as you struggle with these issues?
- Mel Gravitz: the first approach, as set down in the APA code, would be to discuss the problem with a colleague
- RF: I would not turn to APA, b/c I wouldn't presume APA to have the interest or the expertise to help on scientific or practice issues
- Russ Newman: there's many other ethical issues that practitioners face beyond these issues
- SS: what about getting clearance for APA board and committee members
- KH: or putting psychologists with clearance on boards and committees
- KH: we can't have a one-size-fits-all code of ethics, it needs to evolve as others have evolved (e.g., DSM)

III. Steve Behnke: thank you all for coming, please feel free to contact me; good luck to ApA in your work revising ethics code and keep us posted

February 28, 2002
FBI Academy
Quantico, Virginia

COUNTERING TERRORISM:

Integration of Practice and Theory

An Invitational Conference



AMERICAN
PSYCHOLOGICAL
ASSOCIATION



2000-2010
DECADE
of BEHAVIOR

*Countering Terrorism: Integration of
Practice and Theory*

An Invitational Conference

FBI Academy, Quantico, Virginia

February 28, 2002

Sponsored by:

Behavioral Science Unit, FBI Academy

Science Directorate, American Psychological Association

*University of Pennsylvania, School of Arts & Sciences
and the Solomon Asch Center for the Study of Ethnopolitical Conflict*

Decade of Behavior Initiative

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Preface

The movement from idea to actuality often involves the cooperation of many individuals. This action becomes more complicated when it occurs within a bureaucracy. It was during a meeting of members of the FBI's Behavioral Science Unit (BSU) and members of the American Psychological Association, two large and complex bureaucracies, when the idea of an invitational conference on countering terrorism was born. The excitement of bringing together highly qualified law enforcement officers with various terrorism experts and academics was palpable.

As exciting as the idea was, so was it daunting. The practical decisions of whom to invite, what to discuss, where and when to convene were difficult to make. The decision to hold the conference at the FBI Training Academy in Quantico, VA, during the week of February 24 was easy. Time and place were decided upon for the practical reason of availability of space. However, restricting the list of invitees to only sixty individuals from among the numerous experts in law enforcement and civilian populations was most formidable. We recognize there are other individuals with excellent credentials, experience and expertise, whose presence would have added much to the results of the conference. Time, space and availability restricted the number of invitations. We are most grateful to the invitees who accepted our request to participate.

From conference conception to convocation, only ten weeks remained to orchestrate the various components of a successful conference: initiate and complete the reams of paperwork to hold a conference at the FBI Academy, obtain necessary clearances and permissions, create scenarios for discussions, invite participants, arrange transportation, prepare special menus, and design graphics. This could not have been completed without the assistance of many individuals and groups. We are most grateful to all who shared in this endeavor. They include supervisors and support staff of the American Psychological Association, the Decade of Behavior initiative, the University of Pennsylvania, School of Arts and Sciences, the Solomon Asch Center for the Study of Ethnopolitical Conflict, and the FBI's Training Division and Behavioral Science Unit.

A special note of thanks is extended to the FBI's Training Division, specifically, the BSU's training technicians and interns; graphic design artists; maintenance workers; and food service personnel. Our gratitude also is extended to members of the FBI's National Center for the Analysis of Violent Crime Unit for their assistance in the preparation of the conference as well as their active participation in the conference.

The financial support and guidance of the Solomon Asch Center for the Study of Ethnopolitical Conflict at the University of Pennsylvania was vital to our bringing together the diverse group of people whose expertise contributed to the conference and to this report. For the original idea of having this conference, and for full participation and guidance all along the way, we thank Professor Ian Lustick, Professor of Political Science

and Merriam Term Chair in Political Science at the University of Pennsylvania, and Brendan O’Leary, Professor of Political Science and Chair of the Department of Government at the London School of Economics and Political Science and Co-Director of the Solomon Asch Center.

During these meetings, individual and collective expertise worked together to answer the questions posed by the scenarios. Results were two-fold. Answers, suggestions, and theories were applied to questions, issues, and scenarios. Additional questions – simple and complex – were raised. As with all good research, the conference offered few complete answers and raised important questions. We look to the immediate future to address these compelling questions and challenges.

While the content of this report reflects the observations and views of the participants in this conference, the opinions expressed do not necessarily represent the positions of the FBI Academy or the APA. The authors accept full responsibility for the ways the observations and views are expressed in these pages.

Finally, it is with a deep sense of gratitude and admiration that we dedicate this work and our continuing efforts in counter terrorism to the men and women who continue to risk their lives on a daily basis keeping our Nation free and the American people safe.

Anthony J. Pinizzotto, PhD
Federal Bureau of Investigation
Behavioral Science Unit

Susan E. Brandon, Ph.D.
American Psychological Association
Senior Scientist

Geoffrey K. Mumford, PhD
American Psychological Association
Director of Science Policy

September 24, 2002

Introduction: Countering Terrorism: Integration of Practice and Theory

On February 28, 2002, more than 70 academic scholars and researchers, and personnel from justice, intelligence and law enforcement agencies, met at the FBI Academy in Quantico, Virginia, for an invitational conference on “Countering Terrorism: Integration of Practice and Theory.” The meeting was sponsored by the FBI Academy’s Behavioral Science Unit, the School of Arts and Sciences and the Solomon Asch Center for Study of Ethnopolitical Conflict at the University of Pennsylvania, and the American Psychological Association.

The participants, roughly half academic scholars and researchers and half law enforcement personnel, dispersed into seven small groups to discuss scenarios that had been developed before the conference by the FBI. These scenarios described some of the current problems that the FBI, other law enforcement agencies and intelligence agencies are facing as they try to discover cadres of terrorists or those who harbor them, as well as deter support for terrorism by individuals, designated groups, and communities. Two hours of scenario discussions were followed by two hours of small group discussions centered on questions that had been developed before the conference by the academic researchers and scholars. These questions were about stereotyping and ethnopolitical conflict, risk perception and communication, education regarding fundamentalism in all religious traditions, analysis of intelligence data, and strategies to deal with bioterrorism. The whole group convened for a final meeting where issues and concerns raised in the small groups were described and further analyzed. Conversations continued at a dinner provided in the large atrium meeting room at the Academy. The proceedings and recommendations offered by the various discussion groups, after review by the members of the individual groups, are the substance of this document.

The ten or so discussants in each small group were likely to be:

- Scholars or researchers from psychology or political science or medical science,
- An attorney with expertise in immigration laws,
- Someone from the Office of Science and Technology Policy or from the National Academy of Sciences or the National Science Foundation,
- A member of a training or operational unit of the FBI,
- Personnel from the CIA, the U.S. Secret Service, the National Security Agency, the Department of Defense, the U.S. Marine Corps, or the State Department,
- Someone on staff at the Office of Homeland Security or the new Transportation Security Administration,
- Officers from the New Mexico State or Stafford or Arlington, VA, Washington, DC, Philadelphia, PA or New York City Police or Sheriff’s Departments.

Each participant was able to offer a different point of view and a different expertise on the issues raised by the scenarios and the questions. The juxtaposition of

people whose expertise lies largely in theory with those whose expertise lies largely in practice, allowed each to expand on what they already knew and to be informed by the view of the other. The conversations were reported to be alternatively lively and sobering, informative and probing, and consistently collegial and respectful.

National and local government offices and agencies have received a large volume of information and offers of assistance from Americans across the country, as well as concerned individuals from other nations. One of the challenges has been how to collect this information and organize people in order to take advantage of all that is offered, to get relevant expertise to the people who are at the forefront of counter-terrorism efforts, and to let the experience of those who are on the front lines inform the research and inquiries of the scholars. This conference was viewed as one way to accomplish this kind of interaction.

Executive Summary

Three broad themes emerged from the discussions. These were:

- Efficient and effective collection and dispersal of information,
- Development and maintenance of working relationships among various communities and law enforcement personnel, and
- Effective communication with targeted people or groups that are important to effective counter-terrorist strategies.

Information exchange. The volume of incoming information to local police and local and regional FBI offices has greatly increased since September 11. The impact of this increase is exacerbated by the unwillingness of law enforcement to ignore any of it, given the perceived risk that some vital piece of information will escape notice, and the felt need on the part of individual officers and agents not to be the person who let a critical piece of information go unnoticed. Thus, triage procedures have changed, concurrently with the increase in volume, without opportunities for planning and evaluation, and without a significant increase in the number of personnel available to receive and vet the information.

The social sciences have developed highly efficient methods for processing large volumes of data that can be useful even at the level of a local police station – these include data mining and decision tree techniques (Appendices 5 and 6). However, these need to be tailored to the unique cultures in which they would be used, and their development and implementation requires a cooperative effort on the part of those who have developed these systems and those who will use them. The value of such systems – that they can provide complete records that can be easily searched for target items, that they offer a method of protecting the confidentiality of sources, that they can be queried for changes in patterns of incoming data, that they can be tailored to sound alarms when targeted items appear, while keeping the false alarm rate low – must be demonstrated to the users, while assuring the user that he or she still will have the opportunity to make a final judgment as to action.

There also are systems being developed and evaluated for the coordination and effective communication among local responders, such as law enforcement, fire departments and local health facilities, state-wide and national agents such as the INS, National Guard, Department of Energy, FEMA, and the Department of Defense, and allies that are outside the United States (Appendix 2). These also need to be made available to local responders.

Concern was expressed at the lack of effective information sharing among these groups, especially between those at the local level and those at the statewide and national levels. The issue of the protection of the confidentiality of sources, while providing important information to those who need it most, is an issue that social scientists can investigate for the development of effective models that take into account human information processing and cognitive limitations and capabilities.

Relationships with key communities. Triage is made more difficult in instances where law enforcement has little ongoing relationship with communities that have been targeted both by law enforcement and by the American public in general to be most likely to harbor terrorists, which are the Arab-American and Muslim-American communities, especially those with significant proportions of immigrants. The argument was made that a focus on such communities may be short-sighted (because such a focus will drive terrorists either further underground or to seek refuge in other communities); however, it is prudent and effective for both the FBI and local police to establish and maintain good working relationships with such communities. Specific steps towards that end were offered in terms of the characteristics of those chosen to approach the community, how these people should approach and interact with it, and what kinds of information should be solicited and offered. Some consideration was given to the appropriateness of community policing models (Appendix 3) in this effort. Law enforcement should be informed by previous, similar situations that have occurred in other countries, such as the interactions of England with Irish terrorist networks and of Israel with Palestinian terrorist networks.

Other “communities” which are or should be involved in triage efforts are universities; professional groups such as those involving teachers, physicians, and clinical psychologists (especially, the American Psychological Association); and other social service and community agencies. Operating procedures for how law enforcement might interact with these communities were provided; in some cases, issues of jurisdiction, confidentiality, and civil liberties were considered.

Strategies were offered for how law enforcement can make most effective use of the media to deliver messages to the public, especially in view of the human tendency towards negativity bias (Appendix 8). Guidelines were offered for how to maximize the effectiveness of the “speakers” and how to assess the status of the “listeners.” It was recognized that the media serves an important role in providing critical commentary, and that law enforcement can take advantage of this function as well by offering more evidence of incidents that were avoided by effective intelligence and of the protection of the citizenry from hate crimes, and by being more open about failures that occurred and instances where expertise was not immediately available (for example, in the instances of the anthrax mail-delivery attacks).

Interrogation/interview techniques. Suggestions were offered on how to most effectively interview community members who may have information relating to individuals who are involved in terrorist networks, either within or outside the United States. Special focus was given to instances where these people are recent immigrants. The impact on the Arab-American and Muslim-American communities of changes in laws relating to immigration procedures and attorney/client interactions, of the incarceration of individuals who may have information relating to terrorist networks but are themselves not terrorists, and of other actions taken by the Department of Justice, were described. These were recognized as posing additional obstacles for the creation

and/or maintenance of effective relationships between law enforcement and these communities, which cannot be ignored.

Specific strategies were offered for the evaluation of, and interactions with, community members and those who are held as suspects or who might serve as assets. The group recognized that the current tendency to view Arab-American and Muslim-American men as especially suspect is shortsighted and ineffective. Social scientists have investigated and described the situational and behavioral characteristics of individuals who are likely to be vulnerable to joining and supporting terrorist networks, especially here in the United States. The applicability of these characteristics to international terrorism is part of ongoing investigations within the social sciences.

Conclusions and recommendations. This conference highlighted both the current distance between the academic/scholarship community and law enforcement and intelligence communities, and the extent to which these two groups can greatly inform each other. Law enforcement and intelligence personnel have the hard data that can shape the course of social science in areas such as decision making, risk determination and communication, communication analysis, characterization of terrorist and other extremist networks, analyses of deception, predictors of fault lines within immigrant groups, and information management and communication. The social scientists have tools that have been developed, evaluated, and already shown to be highly effective for communicating to the general public, developing triage procedures, predicting individuals at risk for membership in terrorist networks, enhancing community relations, dealing with large volumes of information, and so on.

The format of the conference was a fundamental determinant of its effectiveness. It was generally agreed that the problems needed to be stated by those in practice; thus, having law enforcement create the scenarios that served as the focus of the discussion groups was vital. It also was agreed that creative solutions and strategies came out of the opportunity for relatively small groups of people from both practice and theory to sit at the same table and just talk about issues within and without their immediate expertise. In some ways, the format made no one the perfect expert, so that particular skills may not have been taken advantage of. However, the small-group, focused discussions avoided the lecture format of an academic conference and forced the academics to think and speak in concrete terms. It also allowed the law enforcement personnel to ask questions that provided a way for the academics to offer evidence of the scholarship and research that is available and can be used. It provided both groups with some practice at speaking in a common language and applying old techniques to new problems. It was recommended that further meetings maintain the same format, even while perhaps addressing different issues and inviting different people.

It is vital to the health of both law enforcement and the social sciences that the distance between these two groups, broadly-defined, not increase to the point that common points of reference, language, and concerns cannot be found. One outcome of September 11 was to heighten the awareness of the social sciences community to the need for their active engagement in programs of national security. The events of that day

also made our vulnerabilities transparent and indicated the strengths and weaknesses of current law enforcement and intelligence practices. It is opportune for both sides, such as were part of this conference, to take advantage of the momentum provided by the September 11 attacks.

The interaction of good people who came with a wide variety of experience and expertise provided a unique opportunity for the kinds of creative thinking that is so critical to how America will protect its citizens from the immediate and long-term effects of the terrorism that it certainly faces in this 21st century.

Scenario 1: A trustworthy local businessman reports suspicious activity by an apparently Middle Eastern neighbor.

A citizen contacts a detective in a small east coast city. The detective knows the caller to be a trustworthy local businessman. He reports suspicious activity by a neighbor who moved into a rental residence nearby. The neighbor appears Middle Eastern. The neighbor claims to be a student at the local university; however, he is noticed to be absent from the residence for weeks at a time. The caller engaged the neighbor in conversation and learned that although he claimed to be enrolled in an International Studies program at the University, he was very vague and clearly did not recognize the names of the most prominent professors within that program. The neighbor has observed three other Middle Eastern males intermittently staying at the neighbor's home, sometimes when his neighbor is not there.

Problem: This scenario was viewed as quite typical of the many that have come through local police and FBI offices since 9/11. The problem is how to develop an effective triage system that helps officers or agents handle the large volume of incoming information while assuring that important details are not overlooked.

Strategies: Make use of data gathering/vetting systems already in use in other situations, such as in the medical and legal professions. These are designed to (1) process all incoming information and then sound an alert when a targeted item appears, and (2) show changes in patterns of data flow that would not be seen by the casual, part-time observer (an individual on duty at any particular time would see only that part of the incoming data, whereas the artificial system sees it all). The pattern of change in incoming data might be informative, in addition to targeted items.

For example, one such system already in use searches through large volumes of text for specific words or phrases. When it finds a targeted item, an alarm is sounded. An important aspect of this system is that it will find text that means the same without using the same words. For example, if a target search specifies "racketeering," one will get documents that mention racketeering, but also documents that mention "unlawful conspiracies."¹ Also, the data are kept in files that can be re-searched for words or meanings that are of interest at some later date, to look for similar instances, as well as to allow for the generation of graphs and other descriptors to evaluate changes in the pattern of incoming information.

Further information is provided in Appendix 1 (Information Evaluation Systems).

Problem: What predictor variables do we have for the identification of potential terrorists?

¹ Example provided by Herbert L. Roitblat at www.dolphinsearch.com.

Strategies: We might consider using the information that is known about the men who attacked New York and Washington on 9/11. For example, it appears that the men who attacked on 9/11 had not maintained their family relationships, perhaps in order to ensure good cover. Thus, the presence or absence of family relationships might be used as predictors of membership in terrorist networks. Such information also might be useful in the interrogation and identification of suspects.

Problem: What should be the standard operating procedure for dealing with local universities that might have students who are either under suspicion or know others who are?

Strategies:

► Short-term standard operating procedures should include:

- Find a way of ensuring minimal adverse impact. A student or a professor – or any university employee – could be put at risk if he or she is approached by a law enforcement officer in a manner that is obvious to their coworkers. There also is risk involved in simply asking a professor about a student (or vice versa). One way to minimize such impact is to ask about an entire class or an entire department, so that individuals are not singled out (even if the law enforcement agent only wants to know about one or two individuals).
- The officer or agent should assess whether their procedure passes a “60 Minutes” test. That is, would their approach be an embarrassment either to them or their department if it were exposed to the general public?
- Decide in advance if the person being sought is a suspect or a citizen who might be able to help, and modify the approach and advance accordingly.
- Be prepared to offer assurances that if a person is willing to come forward with information, they will not be penalized for doing so with prosecution for minor violations (including minor visa violations).
- Assure the individual that if they request legal representation, this will not be viewed as an admission of guilt, nor will they subsequently be viewed as uncooperative.
- Offer an assurance that the law enforcement agent is bound by law and is not the kind of police that immigrant populations are likely to have encountered in their countries of origin.

► Recognize that an academic culture is, by nature, more likely to value its openness and willingness to talk than other communities. Attempts to be secretive likely will be viewed as evidence of ignorance of the university culture (and might expose an undercover agent), and would be viewed as contrary to the open nature of the university culture. Therefore, the long-term strategy of planting individuals in the university to

serve as information conduits was rejected because the cost of discovery of such individuals would, in the long run, greatly outweigh their usefulness in the short-term.

► A better strategy would be one that recognizes that the university culture welcomes diversity and talking. Local law enforcement might participate in various lectures, discussion groups, classes, and social events that are open to the public and also are attended by members of the university. This would increase the perception of law enforcement as part of the community, rather than outside it. Law enforcement agents that like to talk, as well as listen, would be best suited for such an assignment.

Implications for practice, training, and research

Social scientists need to evaluate the implications of the current concerted focus on Muslim- and Arab-Americans as potential threats, where these are the primary characteristics that trigger responses of faster and greater scrutiny. We are making assumptions about which terrorists are on the basis of essentially indiscriminate characteristics (most Muslim- and Arab-Americans are not terrorists).

There are two dangers of using the trait rather than behavioral indicators. One is that people will be unduly and inappropriately targeted. The other is that we will miss terrorists who are operating in other religious and ethnic communities. This focus also brings up issues of discriminatory practices and whether such a focus is occurring because of an underlying racism. Would the current strategies (community surveillance, etc.) be possible were the 19 terrorists of 9/11 Caucasian rather than Middle Eastern (e.g., what if they were part of the IRA)?

Scenario 2a: A woman contacts her therapist about a friend of her son's "martyrdom mission."

A woman contacts her psychologist from whom she has been receiving therapy for the past year for bouts with depression. She reports that she has just learned that a friend of her 19-year-old son appears to be recruiting her son for a martyrdom mission. This friend has voiced some fundamental Islamic beliefs that are very anti-American. The woman has overheard worrisome conversations between her son and his friend but had tried to discount their significance until her son revealed today that he was asked to become a Martyr for an unspecified attack against the United States. He is very concerned that his friend is involved in something that may be planned for the near future. They are afraid to report this to the police because her son has a juvenile record and he is somewhat anti-American himself. They are naturalized citizens of the United States after having moved here from Iran many years ago.

Problem: This situation is not covered explicitly by the American Psychological Association's (APA's) Ethical Principles of Psychologists and Code of Conduct. Pertinent portions of this Code are as follows:

5.05 Disclosures.

(a) Psychologists disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law for a valid purpose, such as (1) to provide needed professional services to the patient or the individual or organizational client, (2) to obtain appropriate professional consultations, (3) to protect the patient or client or others from harm, or (4) to obtain payment for services, in which instance disclosure is limited to the minimum that is necessary to achieve the purpose.

8.01 Familiarity With Ethics Code.

Psychologists have an obligation to be familiar with this Ethics Code, other applicable ethics codes, and their application to psychologists' work. Lack of awareness or misunderstanding of an ethical standard is not itself a defense to a charge of unethical conduct.

8.02 Confronting Ethical Issues.

When a psychologist is uncertain whether a particular situation or course of action would violate this Ethics Code, the psychologist ordinarily consults with other psychologists knowledgeable about ethical issues, with state or national psychology ethics committees, or with other appropriate authorities in order to choose a proper response.

Comments (Robert Kinscherff, Director of forensic training at the Law and Psychiatry Service of the Massachusetts General Hospital; senior forensic psychologist for the

Boston Juvenile Court Clinic; member of the faculty of Harvard Medical School, communication to Susan Brandon, May 5, 2002):

I do not believe that the Ethics Code explicitly mentions mandated reporting of child abuse, elder abuse, etc. Rather, the Code handles it by obligating psychologists to be aware of and to utilize whenever appropriate or mandated the exceptions to confidentiality found in the law. This is partly because most of the relevant law is state law and these laws governing confidentiality and permitted/mandated exceptions to confidentiality differ in their specific details. The law that permits or requires a psychologist to break confidentiality in order to protect third parties from potential violence is the closest body of law to the scenario. However, this law contemplates that it is the client/patient who poses the serious threat of harm to a third party; it does not contemplate violation of the confidentiality of the client/patient if the client/patient is not the source of the risk of harm.

There is no specific mention of national-security related issues in the Code, and I am unaware of any APA policy document or guidelines document that refers to national security issues as they might arise in the practice of psychology.

The Code as currently worded would actually permit breaking of confidentiality despite the patient's/client's wishes in the "national security risk from a third party" scenario BUT ONLY IF there were applicable state or federal law that MANDATED the breaking of confidentiality or PERMITTED the breaking of confidentiality in order to protect the client/patient or others (see, for example, 5.05(3) which permits disclosure to protect others if mandated or permitted by law).

Problem: Where might a psychologist help, such as by providing telephone numbers for tip lines, going to the police with the client, etc.? Are there rules for such actions?

(Kinscherff:) There are no written rules for these steps. However, each of these steps [referred to above] presumes that the patient/client will be taking the affirmative actions, not the psychologist. The psychologist would only be acting in a supportive role by providing information (telephone number) or support (going to the police with the client). This situation is not unlike those situations in which a client/patient may disclose being victimized by domestic violence; the psychologist might help the client/patient access further supports by locating shelter services or other related services, or might support the client/patient by going with them to file a police report regarding the domestic violence. In either case, the psychologist is not violating the confidentiality of the professional communications without the consent of the patient/client.

Strategies: Seek guidance from the American Psychological Association and state psychological associations to consider:

- Including statements regarding information related to national security in its code of ethics;
- Broadening training programs to include instruction on how to deal with such situations, and
- Teaching clinicians and clinical students how to become familiar with various law enforcement agencies and rules, and how to deal with third parties such as probation officers.

Problem: What information about the family might be useful to law enforcement agencies?

Strategies: The woman and her son appear amenable to approach by law enforcement for several reasons. First, both are naturalized citizens of the United States and have lived in this country for many years. Second, the mother being in therapy suggests a significant degree of acculturation of the family. Third, the fact that the son approached his mother with his fears about his friend indicates that the son regards his mother as a confidant and perhaps an authority figure.

Implications for practice, training and research:

This scenario highlights the fact that law enforcement may be in situations that challenge current views of confidentiality. It would be useful to look at the literature regarding precedents with organized crime.

Investigation is needed that compares the development and maintenance of informants in counter-terrorism efforts with the support of informants in other contexts, such as organized crime and narcotics.

One might ask how the appropriate response of the psychologist would be changed by a reduction in the age of the child (e.g., from 19 to 15), or by the assumption that the community in which the family lives is rural or middle America, where Christian fundamentalist groups are known to be more likely to have strong support.

There is a need for the American Psychological Association and state psychological associations to develop an ethical code for practitioners for instances where a client may have information relevant to terrorism (similar to other mandates that already exist, such as those for instances of abuse of children and the elderly and a client's intention to harm himself or another person). Such instances are peculiar because they involve third-party harm. Psychologists need to be trained for what behaviors to look for, and how to report information to law enforcement while protecting the client and their family and community. This may include some kinds of cross-cultural training. The APA may have to work with legislatures and licensing boards regarding some of these issues. Similar training and issues of confidentiality need to be considered for the training of clergy, teachers, and physicians.

Scenario 2b: A Palestinian reports to the FBI that a recent suicide bombing in Israel was committed by his brother.

A young man walks into a local FBI office and claims to be from Palestine. He reports that the recent suicide bombing in Israel that is being widely reported in the international media was committed by his brother. The reporting person is conflicted about his desire to stay in the United States, his need to return to his family, and his previous thoughts about becoming a martyr for the Palestinian cause. His work permit expires in one week, and his family expects him to come home. He has met a young woman who is a U.S. citizen, a devout Muslim, and will not leave her close-knit family here in the United States. He doesn't want to abandon his family or raise any suspicion from them. Both he and his brother previously talked about becoming martyrs but they decided against it. Apparently, his brother lied to him or changed his mind. He is dedicated to his family and has many friends and associates at home.

Part of the investigation will be attempting to discern the young man's reasons for contacting the FBI.

Problem: What information should be sought from such an individual?

Strategies: Additional information should be sought about this individual's particular background:

- What are the social and economic circumstances of his family in Palestine?
- What part of Palestine does he come from, and, if he is religious, to what religion and sect does he belong?
- Does or has any other member of his family resided in the United States?
- Why did he leave Palestine?
- Are there pro-American forces in his local community (such as a local Imam)?

Problem: How to determine whether the person should be developed as an asset, either via being encouraged to go back to Palestine, or by staying in the United States.

Strategies: This scenario was described by law enforcement personnel as a perfect opportunity to open up the young man and work on developing his trust as a potential asset. However, a contrary view was offered. The following comments were offered by Brendan O'Leary, Professor of Political Science and Chair of the Department of Government at the London School of Economics and Political Science, Visiting Professor at the University of Pennsylvania, Department of Political Science, and Co-Director of the Solomon Asch Institute (communication with Susan Brandon, April 29, 2002):

The scenario is highly implausible. If I were a police/intelligence officer in the scenario I would assume it was an attempt to penetrate the FBI by outsiders, rather than an opportunity for the FBI. Even if this initial surmise proved false, I

would assume that anyone with this level of cross-pressures would, in any case, be unlikely to be stable. He would therefore merely, in my view, be useful for obtaining useful information about past activities. People in his position do not, in general, sell family and friends down the river just for a green card.

General comments: The Irish in Britain were subject to heavy surveillance and organizational penetration after bombings in Guildford and Birmingham in the mid-1970s. Police arrested, and judges and juries convicted, the wrong people in both cases -- creating terrible miscarriages of justice, which was very bad for the UK's reputation and did not help in counter-terrorism. Thereafter the Irish in Britain were highly suspicious of the police and reluctant to help. Just as importantly, from the mid-1970s the IRA rarely used operatives from amongst the locally born or historically established Irish in Britain. They preferred to use sleepers or active service units -- who were under strict instructions to avoid contact with the social and other organizations of the Irish in Britain. In this way they generally avoided capture and were highly effective in the early 1990s. Their one surprise tactic was the occasional use of southern rather than northern Irish operatives.

By analogy, smart members of al-Qaeda would stay away from Arab- and Muslim-American civil organizations – and, by analogy, extensive penetration of their organizations by the FBI and others may often be pointless and possibly counter-productive from the point of view of obtaining spontaneous and voluntary intelligence.

Implications for practice, training and research:

Research on cult recruitment in this country may be particularly relevant to questions of how future terrorists become involved in these groups and which factors may predict a movement towards proximate violence.² Law enforcement personnel emphasized that our models of criminal behavior most often presume that culprits want to escape capture and stay alive, whereas these martyrdom paradigms do not meet those characteristics. Thus, research on cult recruitment should also include data collected from outside the United States, in particular, Israel, where substantial information has been collected about the situations of Palestinian suicide bombers.³

Social psychology research, based largely on the study of domestic cult groups, suggests that strong ethnic identity may not lead to separatism if there also is a strong American (superordinate) identity. Does this apply to groups outside the United States as well?

² See, for example, Pinizzotto, A. J. (1996). Deviant social groups: Investigations should use objective, verifiable criteria. *Law and Order*, 44(10), 75-80.

³ See, for example, McCauley, C. (in press). Understanding the 9/11 perpetrators: crazy, lost in hate, or martyred? In N. Matuszak (Ed.), *History behind the headlines*, Vol. 5. Farmington Place, MI: Gale Publishing Group.

Scenario 2c: A teacher tells an officer about her student's father who talks about killing himself "like the people who flew planes into buildings."

An off-duty law enforcement officer received a call from his neighbor who is a teacher at a local private elementary school. Today a ten-year-old boy student told her that he was worried about his father killing himself "like the people who flew planes into the buildings." The student asked if this school would put his father's picture on the wall if that happened. The boy claimed that the picture of his friend's older brother was placed on the wall in his previous school when he died a Martyr. The boy was recently enrolled in this elementary school after moving from a foreign country. The boy also revealed that his father is very strict and usually questions him every day after school about whom he talked to and what they talked about. His father has been away for several days and is expected home tomorrow or the next day. (What if the "foreign country" were _____?)

Problem: A rapid response is required in order to do risk assessment. This assumes that the local law enforcement has a good relationship with the FBI. And, whereas there is likely to be an arranged vehicle for information sharing in large cities, this may not be the case for small cities or towns.

Strategies: This is an instance where systems that are designed to facilitate communication across agencies (groups, services, locales) are needed. Such systems have been designed and are currently being evaluated. If no such system is available, and if local law enforcement has no standing relationship with the FBI, it is suggested that the strategies offered for Scenario 3a, which describe some rules to follow for collection of information from members of a Muslim community, would be useful. If the father and family came from another "foreign country," such as Indonesia, these rules would have to be modified according to the local customs of that country.

Problem: This scenario is similar to Scenario 2a in that it raises the question of how persons in positions of some confidence should provide information to law enforcement. Here, the question is what should rise to the level of reporting for teachers and social services?

Strategies: It was suggested that the APA might develop guidelines for such reporting, and offer these to other agencies (school systems, social services), where appropriate.

Problem: How can intelligence or law enforcement agencies share information and still protect their source?

Strategies: It was agreed that this has been and remains a primary problem for intelligence gathering agencies. The problem may be of even more concern to the FBI in the immediate future than it has been in the past, because of the increased efforts that

recently have been mandated within the Bureau regarding the management of secret intelligence information.

Implications for practice, training and research:

The social and behavioral sciences can aid in understanding this kind of person in more depth – his motivations and possible behaviors – and making such information available to law enforcement in a manner that would allow them to use the information without violating civil rights or resorting to profiling or stereotyping.

Risk assessments rely on data about baselines of normal behavior within populations, so that abnormal behavior may be clearly distinguished, but there are few data about violence, for example, in Arab- and Muslim-American populations. In order to conduct timely, appropriate risk assessments, law enforcement must have access to information on minority communities, what their experiences suggest in terms of motivations and behavior, and effective engagement with these communities and their citizens.

It was generally agreed that previous attempts to offer alternative models of information management to intelligence agencies and/or law enforcement have been viewed as unworkable, and that this problem deserves additional attention on the part of social scientists who deal with artificial intelligence networks, modeling of information systems, human cognition, and human perception under conditions of stress and duress. Such work is currently underway. Notably, such a system would have to be created and evaluated with the full partnership of those agencies that need and might use such a system.

If multiple agencies (law enforcement, child protective services) become involved with a family, clearly there is a need for some level of collaboration or at least communication to avoid inadvertent, negative effects on the family and any investigation underway.

Scenario 3a: Without links to the local Muslim community, police receive an anonymous call about a conversation in a local mosque about plans to attack an American city.

A city police department of a medium size U.S. city received an anonymous telephone call to their published but non-emergency number. The caller reported overhearing a conversation that took place in a local mosque regarding a plan to attack an American city. The caller identified the mosque but did not provide the names or indicate if he knew the people having the conversation. However, he expressed his confidence that the individuals having this conversation hate the United States and have the ability to commit a terrorist act. No law enforcement agency has any confidential source within the mosque and the police department does not have a confidential source or cooperating witness within the Islamic community. At least one concern of the police department is how to develop assets or informants within this community.

Problem and general comment: The issue of the relationship between law enforcement and the Muslim- and Arab-American communities was central to the conference. In some sense, the issue posed by this question goes to the heart of the strategy of terrorism, which is to alienate a people from its government.

Strategies: Discussions of the relationship between law enforcement and these particular communities focused on how these two entities view each other and what each perceives the usefulness of the other to be. Law enforcement agencies tend to view these communities as relative unknowns and in terms of what information they can provide that is relevant to terrorist activities or persons. Whereas people within these communities sometimes view law enforcement as threatening – especially those who are more recent immigrants – generally, they have a positive view of the local police and identify with the larger American public.

For law enforcement to function more effectively with these groups for information-gathering purposes, the following recommendations were made:

► Law enforcement should create a mechanism to meet regularly with the community. The Community Affairs Officer of the New York City Police Department was viewed as a good model. (See also Appendix 3, “Community Policing Models.”) The law enforcement contact here should not be in a rotational assignment, but should be a long-term resident of the larger community. It may be less important that this officer be a member of the targeted community than that he or she be viewed as a member of the larger community because it is the larger community with which people in the targeted community identify. For example, if the targeted community members are Muslim-Americans in Staten Island, the contact need not be a Muslim-American living in Staten Island as much as a New Yorker because members of the targeted community identify themselves as New Yorkers. Ideally, as well, the law enforcement contact should feel personal commitment and identify with this *larger community*, either because they grew up there or because they have family members within the community.

► The need is to establish a specifically trained group of local and/or state law enforcement officers who have the mission (and the resources) to learn about Islamic cultures and to establish the kinds of relationships that foster mutual trust, cooperation, and regard – as well as the sharing of potentially useful/vital information. Depending on the locale and circumstances, these officers would also attend to specific groups operating in their jurisdictions that are thought to be at risk for supporting or fomenting acts of international or domestic terrorism.

► The immediate goals would be to develop the relevant kinds of expertise, begin addressing a current climate of mistrust between law enforcement and many persons from the Islamic world, and begin effective collaboration among relevant federal and local law enforcement agencies operating within the same jurisdictions.

► Given that the FBI may not have the opportunity to develop such long-term and close relationships with targeted communities, it needs to adopt alternative strategies. These might include:

- Increasing the number of citizens academies, where local FBI personnel hold a series of classes and discussion groups to which community leaders (corporate, civic, religious) are invited. These academies offer the FBI a way of describing its role and its needs to the community, and helping the community identify with law enforcement.

The Boston FBI Office instituted a Citizen's Academy in the spring of 1998, bringing together prominent civic, business, education, and financial leaders for seminars.

- Being invited by local law enforcement (such as Community Affairs Officer or the local beat cop) to speak to community gatherings such as those that are in churches, schools, and sports events.
- Speaking at educational institutions, not just to provide information, but also to be open about seeking information and help, and to explain the problems and needs of law enforcement. People like to be asked to help.

In October 1998, the Boston FBI Office adopted South Boston's Patrick F. Gavin Middle School. The FBI's Adopt-A-School Program is a 16-week Junior Special Agent and Mentoring Program that provides a youth program in which targeted sixth-grade students are counseled, instructed, and mentored by Boston FBI employees, with the intent of raising levels of expectation, improvement of school performance, and instilling a respect for law enforcement.

- Partnering with personnel from Immigration and Naturalization Service (INS) and from local law enforcement to meet regularly with immigrants in the local community. The FBI contact – who ideally would be assigned to these duties for

an extended period of time – would help explain the laws and regulations to these new members of the community and would come to be viewed as a resource rather than only as a police agent whose presence signals trouble.

- Consider using a strategy that was viewed as successful in NYC with the Muslim-American community who became distrustful after learning of apparent harassment of African Americans in housing projects. NYPD engaged in a series of role-playing exercises with Muslim-American youth in local mosques where the youth played the part of the police and the police, the youth.

► The contact person should know the important cultural rules of the targeted community, especially those that involve forms of greetings and the rules around social interactions. This might involve training officers to distinguish among Muslim cultures and religious groups. However, whereas the contact person should be sensitive to the religious and social mores of the targeted community, they should not view members of the targeted community as anything but fellow Americans, and they should avoid labels and interactions that signal otherwise.

It should not be assumed that information about the Muslim- and Arab-American communities must be provided by members of those communities. In some sense, an intimate knowledge of a culture takes many years to acquire. However, much can be learned about the history and culture of one group of people from those who are scholars of the group (e.g., social anthropologists, historians) even though they may not be members of it. This certainly can be the case if the need is to know basic rules of social interaction and etiquette.⁴ Any scholar of Arab or Muslim history would know how to recommend avoiding some of the errors already made (e.g., the use of terms like “evil,” “crusade” and more recently the Attorney General’s use of the Responsible Collaborator Program [“collaborator” translated into Arabic comes close to meaning “traitor”]).

► Both the police and the FBI should develop relationships with social agencies whose primary functions are not law enforcement, such as the PTA, mental health agencies, child welfare agencies, and agencies that help the homeless. These agencies are not usually concerned with inter-group conflicts and tensions; however, as preexisting entities and because their members and constituents are located within the community, they can be used as vehicles for getting the law enforcement/FBI agenda out to the community.

► Law enforcement should try to understand the fault lines within a community. That is, when there is a crisis, who is likely to be perceived as vulnerable or culpable? If these

⁴ The important point was made that if the stated goal is to try to understand the terrorists of 9/11 as apparent members of Arab and/or Muslim communities, that assimilated Muslim- and Arab-Americans (much less Christian Arab-Americans, which are the majority) do not “understand” Osama bin Laden any better than non-Arab scholars of (for example), militant Islamic movements. The Islamic terrorist community is the Islamic terrorist community, not the Muslim community nor the Arab community, much less the Arab-American community. Islamic terrorist communities have more in common with other terrorist movements, such as the Tamil Liberation Tigers, than they do with Muslim-Americans.

individuals are identified solely on the basis of race, class or sex, then the community is more likely to view the response on the part of law enforcement as being unjust and unfair.

- ▶ The FBI and other law enforcement should be open about errors and mistakes that are made in interactions with community members, and offer as much explanation as possible, on an individual basis. They should not rely on media coverage for this.
- ▶ If information is sought from a community member, the following guidelines are recommended:
 - When law enforcement agents approach community members for information, they should be as transparent as possible about their needs and what they are looking for.
 - Similarly, law enforcement agents must be clear to the members of the community what the laws are, and changes in laws must be stated clearly and loudly as soon as they occur, even if these new laws are likely to further alienate the community members (because secrecy alienates them even more).
 - When practicable, interviewing community members should be done in a neutral location, not in the person's home and not in FBI or police headquarters.
 - When appropriate, law enforcement agents interviewing members of the ethnic group associated with the terrorist acts should inform those individuals that they can have an attorney or trusted community leader present (and if the person decides to do so, this should not be viewed as evidence of guilt).
 - Law enforcement agents should know that if they ask most immigrants if anyone in their family is known to have minor immigration violations, most people will answer, "yes" if they are being honest. This immediately creates a problem: The agent may not be able to ignore this information, and the community member risks informing on family members for activities not related to terrorism and may as well be put in legal jeopardy themselves. Given the high incidence of minor visa infractions within many recent immigrant communities, it is recommended that the Department of Justice consider developing policies that facilitate acquiring relevant terrorism information from people who know others or who themselves have minor visa difficulties.
 - Law enforcement agents who are interacting with community members should be cognizant of information (including rumors) that the community has about past apparent grievances (e.g., a case where a man who is viewed as having killed an Arab-American is known to be living free in Israel). Even if no action is taken to address the grievance, at least the agents will be seen as aware of the problems and concerns of the community.

► Interactions with targeted communities should not be just to gain information, but also to reiterate and provide evidence that law enforcement is there to protect members of the community from attack by other citizens. Behavioral scientists have documented the general human tendency to take more notice of bad things happening than of nothing bad happening, or even of good things happening. It is important that law enforcement and other government agents help to identify examples where citizens and law enforcement personnel have engaged in exemplary behaviors which demonstrate their good will to members of the community that may be feeling alienated. These examples could be shared with community leaders and the media. It was noted that in therapeutic settings, psychiatrists and psychologists sometimes reveal something personal about themselves to patients as a way of engendering trust. Law enforcement might use the same strategy by sharing some of their own personal experiences with community members, as a way of building rapport.

► The actions by President Bush and Secretary Powell to declare solidarity with Muslim-Americans have been viewed as very positive. Certain government officials and media representatives have asked the Muslim-American community to be proactive on the part of Islam and educate the rest of America about the peaceful nature of Islam. Targeted communities themselves have made concerted efforts to speak out via public speeches, visiting local community functions, websites, letters, and word of mouth.⁵ It should be recognized, however, that:

- There is some tension created by such community action: the community is self-labeling itself as separate, which further heightens its sense of alienation from the larger American community with which it has (perhaps more so before 9/11) identified; and

⁵ The view of some segments of the Muslim- and Arab-American communities is that their relationship with law enforcement has been damaged by incidents that occurred after September 11. Importantly, these incidents are not seen as inevitable outcomes of 9/11 by members of that community, but rather, as apparently arbitrary results of policy decisions made by the Department of Justice and the Bush Administration. Among the events that have been most troubling to some of these individuals are (a) by September 15, the INS was granted the right to detain people without charges from 24 to 48 hours or indefinitely if there were extenuating circumstances; (b) On September 21, 2001, an internal memo was issued by Chief Immigration Judge Michel Creppy stating that the Attorney General had implemented additional security procedures for certain cases in the Immigration Court. It stated that these procedures require Immigration Judges to close the hearing to the public. Thus, special hearings were created that were outside the usual legal system, and which could be neither confirmed nor denied in instances where a family member, attorney or other concerned citizen inquired; these people also were not allowed to attend these hearings; (c) the Patriot Act was passed, whereby people can be held for up to seven days without being charged, or indefinitely if they are suspected of being even connected to a terrorist – this effectively expanded the definition of who was considered a terrorist; (d) the Bureau of Prisons passed regulations stating that it can eavesdrop on client-attorney conversations; current laws already allowed this without statutory standard; (e) the INS passed a rule that even if someone is cleared of charges, it may hold them without being charged during an INS appeal; (f) the Attorney General announced that the Department of Justice wanted to interview 5000 Muslim-Americans across the country; (g) at the end of the day, so to speak, a Muslim-American offering information to the FBI or other law enforcement agencies was perceived by many other members of that community as just as likely to end up in jail as to walk away.

- Many Arab-Americans are not Muslims and that those types of public requests reflect the fact that the speakers do not have an appreciation for the diversity of most Arab-American communities.
- ▶ There is some risk in the manner in which people from the Muslim- and Arab-American communities appear to have been targeted for intensive and continued scrutiny. The critical characteristics of the profile of a terrorist have been made out to be gender (male), age (young), and ethnicity (apparently Arab, or at least, not Caucasian), but of course, these are not discriminating factors at all (most people with these characteristics are not terrorists). It should be recognized that there also is a real danger of ignoring other people who do not have these characteristics, who may actively support or participate in terrorist acts and are able to escape detection because they do not fit the prevailing profile. It is advised that profiles be based on behaviors as well as traits, and that every effort should be taken to reduce false positive and false negative hits that would result from using them. A concerted focus on Muslim- and Arab-Americans may be shortsighted.
- ▶ Finally, previous instances of law enforcement/community interactions have shown the following:
- Victimization within these communities is likely to breed solidarity. In the current context, the short-term indefinite detention policy can be predicted to seed long-term discontent.
 - Law enforcement personnel may suffer an image problem as a result of the way that new immigrants perceive law enforcement in their country of origin. If they are accustomed to rough treatment back home, they may assume they will be treated the same way here. It also is likely that any intimidation tactics used here will pale by comparison to what they may have been exposed to in their country of origin, so such tactics will likely backfire.
 - Most Muslim religious organizations in the U.S. view themselves as Americans: Richard Reid's mosque was cooperative with the police not because they were antagonistic towards Reid, but because the mosque leaders wanted to maintain a good public image.
 - It is useful to recognize that the openness of American society is our strength, not just our vulnerability, and that this openness generates great loyalty among Americans who come from very closed and heterogeneous societies.
- ▶ Evaluate the generality of models based on similar situations, such as those that come from organized crime and community policing. (Examples of such models are described in Appendix 3, "Community Policing Models").

Implications for practice, training and research:

It would be useful to develop a program to assess just how isolated any group (club, mosque, etc.) is, because isolation is more likely to encourage anti-American behaviors. We could ask, for example, about the percentage of people who speak English, who work in other than ethnic employment, whose children go to public schools, or who live in mixed neighborhoods. This might be accomplished within a context of providing both incentives and opportunities for integration or assimilation. Assimilation strategies could include free English lessons, informal contact with government (including law enforcement) organizations, improved neighborhood patrols and schools, and so on. The extent to which a particular group took advantage of such opportunities would be a way of measuring whether assimilation is valued.

It may be strategic to consider the implications of how counter-terrorism measures are framed. If we operate under a war model, then certain things follow:

- Community policing models may not be appropriate for dealing with targeted communities, because these models assume a criminal justice view, where targeted individuals are criminals.
- The enemy is a large group or collection of groups, unified by some ideology.
- A suspension of civil liberties of certain groups is sure to occur.
- Civil liberties for the populace at large are sure to be affected.
- We have to deal with the question of a war between whom? Who are the “good” and who are the “bad”?
- We have framed counter-terrorism as a political issue (rather than a criminal one) in large part because of the immensity of the threat (especially considering the possibility of weapons of mass destruction), but also because of the amount of resources we are allocating. The latter illustrates a tautology: It must be war because we are acting like it is.
- In some respects, counter-terrorism efforts may be considered similar to the American war on drugs. Both are amorphous and ill-defined, and the enemy is often unseen. Both are asymmetric, in that one side must use guerilla tactics because the other had greater military strength. Both have been politicized, which probably make them more difficult to win. That is, we have been inconsistent in the war on drugs (e.g., trading with drug cartels for strategic purposes in Nicaragua). On other respects, these are different. Terrorism reflects the larger political problem of how America is viewed by the rest of the world.
- Evaluate the generality of models based on similar situations, such as those that come from organized crime and community policing.

- Use the data we have about the men who attacked New York and Washington on 9/11, as well as about Timothy McVeigh. Who knew these men? Who knew their plans? If such people are identified, why did they not contact law enforcement?

Scenario 3b: Law enforcement must evaluate hoax terrorist threats. They also must construct media statements about possible threats and false alarms.

Investigators arrest an individual that has made several anonymous terrorist threats directed toward a city facility. Substantial investigative and security enhancements have occurred during the course of these threats. No financial or specific demands were ever made but sufficient credibility was attributed to the caller's threats to generate a significant investigative and security response, as well as a public notification and closing of several city facilities. The subject was arrested at a public telephone in the act of making his third related threat. It has been determined that he never intended nor had the ability to carry out the events he threatened. Investigators involved in the case have established rapport with the subject, and he has agreed to be interviewed. The subject denies any history of mental illness or mental health treatment. City officials are asking for law enforcement input to developing plans to prevent future hoax terrorist threats. The responses to these threats have generated major media interest and daily reporting.

Problem: What are the likely motivations and behavioral issues that can be usefully explored with the person here?

Strategies: Judgments about how to view this situation should include:

- Assessment of the person's perception of disadvantage and their explanatory ideology or worldview;
- Whether the person has a facilitating social network that may move them into real action;
- If they have immigrant status, determination of their fear of deportation;
- Determination of their connection to their family either here or abroad;
- Determination of the what social groups the individual associates with; if the individual has a previous record, where and when were they incarcerated?

Problem: City officials are asking for law enforcement input to developing plans to prevent future hoax terrorist threats. What kind of plan is most effective?

Strategies: A hoax threat can be identified as a hoax only to the extent that city officials have information from law enforcement so as to adequately evaluate the situation. Direct channels of communication should be established between city officials, law enforcement and the media before an event occurs. A standard operating procedure for how to evaluate the threat and how to alert the public via the media should be established.

The evaluation of incoming information is an issue here. The suggestions offered earlier with regard to Scenario 1 might be useful.

The decision-making methodology described in Appendix 6 (Decision Trees) offers a way of standardizing the responses to threats across agencies, and a way of understanding how decisions to take a threat seriously or not, are made. Thus, this

method also allows for a systematic evaluation of threat assessment after the fact, so that modifications in the decision-making process can occur on a regular basis as necessary.

Problem: What specific recommendations can be made regarding media releases, given that these threats have generated major media interest and daily reporting?

Strategies:

► It is important to decide how messages to the public should be *framed*. Part of framing is to decide whether to focus on risks and vigilance or on prevention, and then to frame information in one format or the other. That is, do you want people to be vigilant and on guard, or do you want them to be calm and behave as usual? Different levels of instruction to the public can be within one context or the other, but which frame is used should be recognized by those who construct the framing and be apparent to those who read the messages.

► In interactions with the public and the media, law enforcement can point to events that have been prevented in the past to make clear that conflict resolution strategies are in place and are being successful, to reinforce their continued success. The public can be persuaded with dramatic, personalized accounts of how attacks have been thwarted (drama is a way to load a message with an emotional account, which greatly affects processing and retention of information).

► In interactions with the public and the media, law enforcement should distinguish between prevented events and lack of action. That is, if conflict resolution is successful, then bad things don't happen.

► Risk perception and communication is a function of both the speaker and the listener. What both the listeners and the speakers know and believe should be assessed before any message is delivered, so that it can be framed within those contexts.

Recommendations for the speakers:

- Identify your valued outcomes (e.g., to make sure that the public is properly alert for people whose activities might indicate some terrorist actions, and specification of what priority this outcome holds).
- Identify the contributing processes (e.g., making people alert will be a function of previous history, such as degree of exposure and proximity to the events of 9/11; degree of loss associated with such events; time since such events; what previous such calls to action have been taken; cultural differences among the public audience; cultural differences between the speaker and the public audience).

- Identify the relevant experts (e.g., engage experts in communication rather than public officials who command attention because of their position; let the message reflect those with the best estimates of risk or likelihood of terrorist activities in that community).
- Know what the beliefs, uncertainties, and controversies are among those who are speaking. Seldom do even the experts all agree. Disagreements must be aired and, sometimes, be part of the communication. If there is no expertise, it is important to acknowledge this (for example, this might have been a better strategy at the beginnings of the anthrax incidents).
- Be as consistent as possible – with the caveat that it is better to admit mistakes than to ignore them.
- Find an independent audience to listen to the message and evaluate it for comprehensibility and efficacy.

Points to know about an audience:

- Current beliefs are the basis for future understanding. For example, in an analysis of how best to communicate with the public in the event of tap water contamination, it was found that many people thought that simply running the tap for a long time would be sufficient to rid the water of pathogens, and that in the event of water contamination, only cold tap water needed to be boiled. Thus, an effective speaker will know what the audience already knows and believes.
- People have limited cognitive capacity. For example, they are better understanding a scale on one dimension than on two; they will remember a set of instructions better if each step is associated with the letters of a familiar word. Thus, keep the message simple.
- People use robust but imperfect heuristics. For example, most people think that there is some significant chance that they will win a state-wide or multi-state-wide lottery, even though the odds are extremely low (and this is explicitly stated); people think that if they get two heads in a row when they toss a coin, it is more likely that the next coin toss will result in tails. This belief will affect what people think about the likelihood of future events, such as more terrorist attacks here in the United States: the longer since 9/11, the less likely more attacks are likely to be considered possible.
- Some concepts are inherently difficult. Low probability concepts are difficult (as can be seen from the lottery example above). Random probability concepts are difficult (as can be seen from the coin toss example above). Cumulative risk, verbal qualifiers (such as “likely”), and experientially unfamiliar events also are inherently difficult to understand. Avoid these concepts in delivering a message, or anchor them in concepts that are well understood already.

- Emotions both confound and support the understanding of risk. Information that is coded within the context of emotions is likely to be remembered well, but not accurately. Important aspects of the information will be lost or overshadowed as a function of the emotional loading. The emotions that are most likely to be elicited as a function of this country's recent experiences with terrorism are fear (direct and indirect effects of terrorism), frustration (with oneself as well as with authorities), mourning, solidarity, and reflection (about oneself and society). Consider the emotional content of the message, and whether it should be used to increase the salience of the general message even though it will decrease understanding of the details of the message.⁶

Implications for practice, training and research:

Research on the motivations of people who make vacuous threats is needed. Some of this already exists within the U.S. Secret Service agency, which investigates more than 2000 cases involving threats or threatening behavior towards the President or another protectee each year, and where fewer than 2.5% of such cases result in arrest.⁷ These data could be used to provide behavioral profiles of the individuals that make terrorist-related threats, which then could be made available to local law enforcement. This kind of research could build on the model provided by previous instances of interactions between the Secret Service and law enforcement that provided law enforcement and justice systems with guides for forensic decision-making in areas of targeted violence.

⁶ These analyses of risk perception and communication come from a presentation of one of the Conference participants, Professor Baruch Fischhoff, Department of Social and Decision Sciences, Carnegie Mellon University, to the American Association for the Advancement of Science, titled "Science and Technology in a Vulnerable World: Rethinking Our Roles." The Omni Shoreham Hotel, Washington D.C., April 11-12, 2002.

⁷ Coggins, M., Reddy Pynchon, M., & Dvoskin, J. (1998). Integrating research and practice in federal law enforcement: Secret Service applications of behavioral science expertise to protect the President. *Behavioral Sciences and the Law*, 16, 51-70.

Scenario 4: Three persons are arrested near a nuclear power plant; two refuse to talk and the third (who recently traveled to Indonesia, Yemen and Germany) will talk.

Three individuals were arrested for trespassing near a nuclear power plant after having been observed by plant security photographing and sketching the facility. The three individuals have been separated and interviewed individually. Two individuals appear to have limited English language skills. They have asked for an attorney and refuse to talk with police. The third person has signed a waiver of Miranda and is fluent in English. He has offered weak explanations about their purpose. A passport issued in Saudi Arabia has been found along with information that he has traveled to Indonesia, Yemen and Germany in the past two months. His interaction with investigators indicates he is willing to keep talking to find out as much as he can about what the investigators know and what his associates may have said.

Problem: How do we work out issues of jurisdiction? For example, here, should the Nuclear Regulatory Commission and the Immigration and Naturalization Service (INS) be contacted immediately, as well as the FBI?

Strategies: It is recommended that agencies find a way to assure the necessary levels of security clearance for front line responders who may need access to critical information. The efforts by the FBI and CIA to create avenues of information exchange with local police do not necessarily fit into the operating systems already in place. For example, police officers may seek to protect their source of information, which means that they cannot divulge their sources. This in turn means that the information coming from those individuals cannot be adequately evaluated by anyone except those officers. Although the FBI and the CIA have created system “tear lines,” below which unclassified information can be freely exchanged, and “liaison officers” who can help evaluate information, these may not have had much impact on the operating structure of most local police departments.

Strategies: It may be appropriate that local police stations are instructed to contact their regional FBI office, as well as the Department of Homeland Security.

Problem: How do we ensure that local law enforcement has access to all the necessary languages needed to interrogate people in their own languages, as well as monitor what these individuals might be saying to each other?

Strategies: A similar challenge exists in the medical profession. Physicians in the Washington, DC area have a number to call that gives them access to 165 languages. The same could be made available to police departments across the country. In this way, a set of instructions about what law enforcement should ask of individuals engaged in such suspicious behaviors could be made available.

Problem: How can we be sure that the procedures that we develop for security do not also threaten individual rights, one of the hallmarks of the American justice system?

Strategies: Given the current laws of the United States, we could not detain people based on the evidence given here. The INS could hold them only for as long as it would take to establish their identity (which implies that the INS investigation should be instigated immediately). In order to protect individual rights, we must ask the question of whether we are creating procedures that will be evaluated as protecting our tradition of freedom only if they work to deter terrorists. If people such as those in the scenario turn out to be innocent, however, will these procedures mean that we are violating human rights?

Problem: How do we best interrogate such individuals?

Strategies: Conference participants suggested that effective practices on the part of the interrogation team could include:

- Fingerprinting the drawings to assess where they were pointing and then ask the suspects why they were pointing to those spots.
- Using interrogators who are disarming and good at getting others to talk. Personality is very important in the interrogator. It may be that an American simply could not develop sufficient rapport with a foreign visitor.
- Exploring as many situational variables as possible: if a vehicle was used, was it rented and were credit cards used? If so, what names do these cards carry and do the individuals reside at the associated addresses?
- Watching for denials and inconsistencies. In order to look for inconsistencies, it is advisable to make transcripts and then have someone analyze them later.
- Noting the order of events as they are described. The truth is likely to be less chronological than lying.⁸
- Knowing that the best strategy for a terrorist is to not discuss details because details can be checked; thus, they may not have been given details, or even if they have, they probably have been advised to stick to one brief story. Innocent people, however, are likely to tell a lot of details.

⁸ Does lying look different in a different language? Psychologists have collected data on this question, but they are limited in scope and the number of different languages investigated. (Some of these studies are briefly described in Appendix 4, “Psychological evaluations of deception.”) These studies indicate that people are good at detecting lying in people using a different language and coming from another culture. It is possible to indicate lying across cultures by using gestures and to make people more likely to think that you are lying by engaging in weird nonverbal behaviors, such as arm raising, head tilting, and staring.

- Checking the travel itinerary. Did the others go to those countries as well, and were any of them detained at any point?
- Knowing that even in a well-trained person, being in the moment can take a person off balance. Thus, it would be effective to implement interrogation strategies soon after an arrest is made, when the person is most surprised and emotionally charged. Delay will make it more likely that the person will have time to construct a reasonable lie and practice it.

Implications for practice, training and research:

There is a need to create, simulate and evaluate an infrastructure for the people who will be responsible in emergency situations. This requires:

- Identification of who those people are (often, these are police or fire departments, since they are local);
- Setting up clean lines of authority and communication before the crisis occurs;
- Creating communication lines that are independent of the general public so that emergency workers can communicate even while cell phones are jammed, and on the other hand, create ways for family members to contact each other even when cell phone lines are jammed;
- Using what social scientists already know about how best to communicate information to the public: information should be as comprehensive and accurate as possible, including admission of ignorance. It should be provided in recognition that people inflate perceived dangers of disease, overestimate problems initially and do not think in terms of long-term outcomes, especially when under pressure to act quickly. However, people also adapt to situations that are initially viewed as intolerable, in relatively short amounts of time (e.g., how we have adapted to the high rates of automobile accidents in the U.S. and the high possibility of sudden death from heart attacks);
- Increasing the capacity for treatment of potential disease at local health facilities apart from quarantine (during the anthrax incidents in 2001 and 2002, many people did not want to leave the hospital because they felt safe there, thus crowding the medical facilities);
- Anticipating that there is a greater danger of imposing a useless quarantine than of failing to impose an adequate quarantine, because official agents are afraid of appearing careless or callous. This makes it likely that those who make the

decision will be viewed as incompetent. It also increases risk, because of the “escape behaviors” that will occur when a quarantine is imposed.⁹

- Making mental health professionals available for both the victims of the disease and their caretakers;
- Offering people coping strategies, such as gas masks, filters, hand washing information that they can employ at no or little cost and with current technology. These messages should be framed in terms of benefits, rather than risks; including bioterrorist events in public education, along with other health information.
- Taking advantage of large gatherings of people (e.g., football games) to offer inoculations;
- Making various vaccines and prophylactic medications available to the public now to avert panic and give people a sense of control.

There is a need to develop rules for law enforcement in emergency situations as well. These will include decisions as to whether law enforcement should be instructed to shoot people who try to force their way into or out of quarantine areas subsequent to a biological attack, and what constitutional rights (no loss of life and no loss of property) and civil liberties should be ignored and under what circumstances (e.g., being in a situation where one has to let some people die in order to save a larger group).

The Office of Homeland Security might consider making links to social service agencies, as well as to the other groups with which it is already associated, to devise some appropriate strategies.

⁹Comments here were that in the event of an evacuation plan, most people will not follow the plan if it means they cannot go find their family and that “the average guy is not going to stay put if it means that he would be failing to protect his family.” A report also was offered of an event at B’nai B’rith Hospital in Washington, DC, during the 2001-2002 anthrax threats. A quarantine imposed because of a red Jell-O box found with a note saying, “anthrax.” People tried to escape and there was a lot of trauma, even though the threat turned out to be a hoax. In fact, since humans are not a vector for anthrax, the medically correct response would have been to let everyone go home.

Scenario 5: Improvised explosive device material is found in an apartment. The only witness to activity there is an alcoholic in withdrawal.

Fire and rescue personnel respond to an explosion and subsequent fire in an apartment building near an industrial section of the city. Arson investigators determine the cause and origin to be detonation of an improvised explosive device (IED) in a backpack near or on the one deceased victim. Investigators found evidence that the detonated IED, and other unrecovered IED's, were constructed in the apartment. Documents have also been recovered that indicate that the resident of the apartment recently received inpatient treatment at a mental health facility in a neighboring state. A neighborhood canvas located one witness who observed several males in their early- to mid-20's carrying backpacks leave the residence yesterday. The witness could not further describe the individuals, stating that he only observed the people for a short period of time and did not pay close attention to them. Their automobile may have been parked on the street but the witness cannot be certain. The witness lives on the street and is in alcohol withdrawal, having been unable to obtain alcohol in the past 48 hours.

Problem: How can law enforcement facilitate good reporting from individual citizens, including those who might usually provide unreliable information (e.g., distressed homeless persons, people who were inebriated when they saw the event)?

Strategies: Memories often exhibit what is called “state dependency.” That is, if an event is perceived while someone is under the influence of a drug (e.g., alcohol), then it is remembered better if the recall occurs under the same state (that is, while drinking). A similar effect sometimes has been found to operate for moods – that is, memories also are recalled better if the person is in the same mood they were in when they acquired the memory. This poses a potential problem for effectively interviewing people with histories of the abuse of alcohol or other drugs.

Problem: Can we identify the likely characteristics of suicide bombers in the Middle East at present, ask how many of the same characteristics (especially, support structures) might or do exist in the United States, and use these characteristics to identify people who might be considered at risk? Similarly, can we use what is known about the men who engaged in the attacks on the United States on 9/11, to offer a likely description of such a terrorist?

Strategies: *Data mining techniques* might be useful here. The data mining technique is useful when someone is confronted with a huge collection of individual items (e.g., telephone call narratives, case histories, medical histories, indices of aberrant behavior) and needs these items be prioritized according to which should be pursued thoroughly. It also allows the user to find patterns of behavior that are almost impossible for the human observer to perceive. Importantly, then, this is not just a technique that is faster than a human. It is a technique that allows a human to view aspects of a large data set that they

otherwise would not be able to see, and to discover interesting associations among data in the database.¹⁰ (Some examples of this technique are in Appendix 5, “Data Mining Methodology.”)

Problem: How can law enforcement create standard operating procedures that could be provided to local and regional offices to use when an event like that described in the scenario occurs?

Strategies: Most real-life decisions involve multiple decision stages – that is, a sequence of actions that are taken over time. Each action results in some consequence, which then affects the next action. During the past 30 years, decision researchers have learned a great deal about the basic principles of multistage decisions, which are represented in terms of a *decision tree*. (An example of a decision tree is provided in Appendix 4, Decision Tree Methodology.) The creation of a decision tree requires the collaboration of a technical advisor with those who are the recipients of the incoming information (and will use the decision tree). However, once such a tree is established, using it requires relatively little technical skill, so that it can be broadly applied.

It is important to note that decision trees, like data mining techniques, serve only to report to the user, who then makes a final decision regarding action and follow-up. It is important also to recognize that the use of these techniques can be effective while maintaining much of the privacy of the person or persons who supplied the information, thereby not violating civil liberties of the populace at large and protecting important sources of information.

Implications for practice, training and research

This scenario is an instance where it appears as if the social sciences have the necessary and useful tools, and law enforcement and intelligence have the data. Research is needed on how to:

- Provide social scientists with the data without compromising security, and
- Implement these research tools within the local and national cultures of law enforcement and intelligence agencies.

Social scientists in Israel have collected data pertinent to the Palestinian suicide bombers.¹¹ Research in the United States is needed to understand whether similar conditions exist in this country, and whether such conditions might develop in the future. Research also is needed as to whether the 19 attackers of September 11 shared characteristics with the Palestinian suicide bombers.

¹⁰ Data mining comes from analyses of self-organizing map (SOM) networks, one of the most important network architectures developed during the 1980s. The main function of SOM networks is to map the input data from an n-dimensional space to a lower dimensional (usually one or two-dimensional) plot while maintaining the original topological relations. Therefore, it can be viewed as an analog of factor analysis.

¹¹ McCauley, C. (in press). Understanding the 9/11 perpetrators: crazy, lost in hate, or martyred? In N. Matuszak (Ed.), *History behind the headlines*, Vol. 5. Farmington Place, MI: Gale Publishing Group.

Scenario 6 (a-c): How can law enforcement build effective ties to local Muslim communities, and what can these communities do to mobilize their members to speak out against terrorism?

(a) FBI behavioral specialists have been requested to provide a local police department and field office with specific recommendations to improve trust and cooperation within their large Muslim community. There already have been two incidents of violent retaliation against members of the Muslim community. These incidents, a homicide and violent physical assault, remain unsolved. Both incidents are being actively investigated by the FBI and local police, yet there is very limited cooperation from the victims' families and the community.

(b) The wealthier families and the Imam of a moderate Muslim mosque are discussing ways to attract and keep youth involved in religious and community activities. Many of the community's young people have latched onto other charismatic speakers in mosques who preach a strident, yet more hopeful sense of rules and order to the basic interpretation of the Koran.

The families and the moderate Imam are wondering what is the best way to mobilize the international Muslim community to speak out against abuses of the Koran and negative perceptions of mainstream Islam. They are also wondering how the mainstream Muslim community might help in deterring the development of extremist ideas in mosques.

During this period of time, threats have been made to moderate and mainstream Muslims. They are being accused of "watering down" the Koran. Several of the moderates within the Muslim community received various damage to their cars and homes.

(c) Members of the Muslim community are being harassed and victimized but are reluctant to report these crimes to the police. In regards to community policing issues, what strategies can the police use to build effective communications between the Muslim community and the local, state, and federal agencies? Do the strategies depend on the gender, age, and education of the community members?

Discussion notes regarding Scenarios 6a, b and c are presented together because of the similarity of the remarks.

Problem: What can the FBI do to enhance its image with the public in general and with the Arab-American and Muslim-American communities in particular?

Strategies: Ideally, good relationships with local communities are established before the community becomes a focal point for investigation or for protection against hate crimes. It is important to note that a long history of a good relationship between law enforcement

and specific communities can be negated almost instantaneously with some real or perceived breach of faith on the part of law enforcement. In a real sense, law enforcement seldom gets a second chance, once such a misunderstanding occurs.

Description of a training program for law enforcement agencies is provided in Appendix 7, “Training Guide for Hate Crime Program.”

Outreach initiatives should include:

► Providing information:

- Information should be as accurate as possible, and the manner of presentation should be as consistent as possible.
- If erroneous information is provided, this should be admitted and corrected as soon as possible.
- Law enforcement’s tendency to offer “no comment” in response to inquiry is almost always taken as evidence that it is trying to hide something from the community. An alternative response should be crafted, that is individually suited to the particular issue at hand.
- It also can be effective to admit mistakes, in order to provide a basis for asking for help. The effectiveness of such a strategy may be related to the fact that it gives the public a perception that it is an active partner in the process, and not just an entity that is acted on.
- It should be recognized that humans have what is called a negativity bias. That is, they are more affected by bad things happening than by good things happening. The psychological distance is even greater between bad things happening and nothing happening (examples of “Psychological Evaluations of Negativity Bias” are given in Appendix 8). This means that information about the protections or other service that the FBI and other law enforcement has provided will not be counted as much or remembered as well as what is done poorly. It would be useful to reiterate successes as often as possible, both when they occur and when failures occur.

► Knowing and understanding the perspective of the community towards law enforcement and other U.S. government agencies. From the political perspective, there appears to be a significant tendency for the actions of U.S. government agencies to be affected by political contributions. Here, this means (to the Arab-American and Muslim-American communities) that some groups which should have been shut down after 9/11 were not, whereas those with less political clout were. In discussions with these communities, law enforcement should be aware of these controversial points and show sensitivity towards their negative impact.

- ▶ The community can be contacted via local organizations and groups, including schools.
- ▶ Ideally, law enforcement develops a regular and ongoing outreach initiative, rather than an erratic one that appears to be responding only to the crisis of the moment. The model of the beat cop is a good one, although this may be precluded for personnel who are rotational.
- ▶ The lack of FBI presence in most communities – unlike the police – means that people interpret its presence as “bad news,” rather than as potentially helpful or protective. This means that the FBI might best work with local law enforcement in communities where it otherwise is not often present.
- ▶ Law enforcement should know that whatever side they embrace, that side might have its credibility with the larger community compromised. This is a cost of law enforcement engaging in a public partnership with a community group, which should be considered before such a strategy is used. Ideally, the potential for such compromise would be determined before the partnership is considered or made public.
- ▶ There was some consensus that the relations with FBI are the good, and that mistrust is limited to a fairly narrow segment of the Arab-American population. The FBI should consider taking advantage of, and nurturing relationships with, the majority of Arab-Americans who are willing to trust the FBI and other law enforcement agencies. These people also are those from whom agents can be recruited.
- ▶ See also discussion of Scenarios 1 and 3a.

Problem: What might be the expected impact of the long-term detention policies of various suspects on the relationship of the Arab-American and Muslim-American communities with law enforcement?

Strategies: Victimization within the Arab-American community is likely to breed solidarity. In the current context, use of the indefinite detention policy can be predicted to seed long-term discontent.

Problem: What can law enforcement and intelligence do to discourage Americans from joining fundamentalist groups with anti-government agenda?

Strategies: It was recommended that law enforcement conduct information campaigns that emphasize the:

- Disapproval and even condemnation of such movements by respected Muslim leaders and theologians (thus reducing the cognitive dissonance caused by opposing or reporting terrorists).

- Number of Arabs and Muslims who died in the WTC, Pentagon, and other Islamic terrorist attacks (other than the terrorists themselves, of course, thus emphasizing in-group solidarity).
- Backlash against the larger communities from which the terrorists come, making their lives more difficult.
- The greater probability of success of nonviolent strategies for influencing government policy and public opinion (reciprocity norms).

Problem: How likely is it that Muslim-American and Arab-American communities will be assimilated into mainstream American culture, especially as the number of individuals in these communities grows?

Strategies: Muslims do not need to do much assimilating to get along in U.S. society because Americans expect very little in the way of conforming behavior. However, Arabs living in America may feel like they are living in enemy territory because of the way the United States has positioned itself in the Arab-Israeli conflict. This may serve to produce conflicts within Arab-Americans who see the United States at war with their country, and will make it increasingly difficult for law enforcement to enlist the aid of these communities in counter-terrorism efforts.

Implications for practice, training and research:

Additional research is needed on the extent to which religion was important to the actions of the 19 men who attacked on 9/11, as opposed to the social, economic, political and historical conditions that are characteristic of the countries from which they came.

Additional research is needed on the variations of the practice of fundamental Islam as a function of world region: for example, do the same conditions exist in India and Indonesia, which also contain large Muslim populations?

As much as possible, this research must be longitudinal, so as to avoid making conclusions based on only a recent or current analyses of the situation, given that the social, economic and political conditions of many regions of the world are changing at a fast rate. To this end, historians and political scientists must be engaged in the research endeavor.

Scenario 7: Effective interview strategies for relatives, friends, or acquaintances of terrorists or suicide bombers.

Officers and agents are sent overseas to interview relatives, friends, and/or acquaintances of terrorists and/or suicide bombers. Identify interview strategies to be utilized with Middle Eastern women, children, and/or relatives of terrorists (e.g., nonverbal behaviors, cultural practices, communication styles, gender differences, etc.). Do these strategies differ depending on the outcome of the terrorist acts (e.g., attempted terrorist acts vs. accomplished suicide terrorist, etc.)?

Problem: How can we ensure that we have access to reliable information in cases where the sources of information are overseas?

Strategies: In instances of collecting information from sources that are overseas:

- ▶ There should be a mechanism for dealing with the turnover of overseas personnel; for example, have overlap from one Legal Attaché to the next so that the next person gets the benefit of the prior appointee there and can meet people through that person.¹²
- ▶ Overseas agents should be aware of the fact that the United States is viewed as a country that cooperates based on a particular situation (like the current terrorism situation) but disappears when its issue is resolved. Middle Eastern countries have a moderate feeling of betrayal when someone comes in and out of their country for short-term goals.
- ▶ Law enforcement agents who operate overseas should be prepared for encountering more closed societies than in the United States.
- ▶ Law enforcement agents should be aware that the expertise of “knowing how to investigate” (which the FBI has) is different than “knowing about a specific country” (which the FBI may not have).
- ▶ Law enforcement agents should be aware that we are establishing relationships with other countries now (because of American counter-terrorism efforts) that would otherwise not exist, and this raises additional questions such as to what extent can we trust agencies with whom we otherwise would not share information, and how can we maintain some control over information that is shared?

¹² One conference participant noted that, in the United States, with its varied ethnic communities, there are likely to be people who would be willing (or could be effectively encouraged) to take on an important position like this for extended periods of time. In the USAF, there are many who desire to remain at particular overseas locations, sometimes because of marriage, but also sometimes because they embrace the culture. He recalled comments about the Army's catastrophic rotation policies during portions of the Vietnam War--just as platoon and company commanders became seasoned and effective (and earned this badge or that ribbon), they were replaced by "green" commanders.

Problem: How should such interviews be conducted?

Strategies:

► Before the interview:

- When practicable, interviewing community members should be done in a neutral location; alternatively, one can change the environment depending on the goal of the interview: if the person is considered a suspect, provide an uncomfortable environment; if the goal is to gain information about a specified third party, or general information about unknown persons, provide a comfortable environment.
- Call before coming to the individual's home, and avoid going to their place of work if possible.
- Avoid going to a person's home in the dark.
- Be a plain clothed agent, with a discreet but clearly identifiable badge, so that neighbors or coworkers don't know what is happening.
- Know the rules and nuances of the culture of the person being interviewed, especially of rules that are differentiated on the basis of gender. Understand what important nonverbal behaviors exist for that particular culture. For example, what is the personal space allowed between strangers, between friends, or between men and women?
- Know the attitudes of that person's community as expressed verbally. One person's "suicide bomber" is another person's "martyr."

► The course of the interview:

- Avoid expressing one's own bias (e.g., sympathy or distress) until it is determined how the community members feel about the person who is being interviewed or about whom information is being sought. Recognize that emotions may be complex: the family members of the men who attacked New York and Washington on 9/11 were likely to feel both anguish and pride. In some respects, the greater the grief, the greater the need to take pride (in order to support and justify the loss).
- Begin with whole family present, and then see if any individual member appears to want to provide more information, apart from the family;

- Understand that most people who are being interviewed want to help, despite what group they apparently belong to;
- If people think that they are part of a screening process, rather than being treated as a friendly source, they are less likely to cooperate.
- Be fully briefed before the interview, with relevant data from FBI, CIA, INS, etc., and with data from various sources cross-referenced.

► Information to be sought and given via interviews:

- Whether the person who perpetrated the attack was considered part of the family – i.e., in touch with the family;
- Whether the person felt as if they had alternative behaviors available to them, or did they feel stuck in that pursuit?
- How does the family regards this person? Are they proud, or ashamed? Do they distance themselves from the person?
- Sometimes it may be useful to remind the party, or at least offer for their consideration, the possibility that they may be being used by the larger cause.

► Have experts (including anthropologists, State Department) put together a DO's and DON'T's bullet point sheet describing these rules. Provide these to local law enforcement agencies, not just FBI or other regional agencies.

Problem: What are the best tactics of finding terrorists?

Strategies: Long-term, there are three possibilities: accidental discovery, interrogating or screening an entire community (as the British did with the IRA), or detaining entire communities (as the Americans did for the Japanese). Corresponding to the latter two, law enforcement runs the risk of “frying the little fish and losing the big fish” (there may be some parallel with anti-drug campaigns).

Both screening and detention run the risk of alienating the very people that are needed to help. The paradox is that the more you treat a certain group as a stereotype, the more they will conform to that stereotype. The British found that with the IRA, when someone was harassed, jailed, or killed, there was a corresponding increase in sympathy for the IRA from the community commensurate with the extent of the event.

Implications for practice, training and research

There is an increasing number of methods for detecting lies that appear to be cross-cultural. These include using facial expressions as clues to deception¹³ and establishing a baseline behavior of which the interviewee is unaware, changes in which can then be used to assess the truthfulness of responses to set questions.¹⁴ These methods need to be evaluated in the situations in which law enforcement and intelligence agencies encounter potential informants.

Data on the differences between those who are willing to risk their lives for a political or moral ideology and those who are not, are available by review of combat training protocols and the men and women who go through them. Rather than view the suicide bomber as a relatively aberrant person, we might consider that he or she has much in common with members of the armed forces that agree to put themselves in positions of great risk – and especially with individuals who have engaged in activities that were viewed as highly lethal. What can these people tell us about their motivations, fears, and support groups that were important to their behaviors? How might their behaviors be investigated so as to provide an understanding of the differences between the hero/martyr and the soldier who is not willing to put himself or herself at such risk?

¹³ Ekman, P., & Friesen, W. (1975). *Unmasking the face: A guide to recognizing emotions from facial clues*. NY: Prentice-Hall; Ekman, P. & Friesen, W. (1978). *The Facial Action Coding System*. Palo Alto, CA: Consulting Psychologists Press.

¹⁴ Sokolov, E. N; Cacioppo, J. T. (1997). Orienting and defense reflexes: Vector coding the cardiac response. Lang, P. J. & Simons, R. F. (Eds.); et al. , *Attention and orienting: Sensory and motivational processes*, pp. 1-22. Mahwah, NJ: Erlbaum.

Additional issues for practice, training and research

There were many questions and issues raised either in discussions that were tangential to the scenario focus sessions, or in the plenary session that occurred at the end of the conference day. These included:

Can we characterize the relationship between culture and religion for the Saudis and Palestinians in the same manner as we do for that relationship among Americans?

How can we make use of someone who has family or other close contacts with terrorist groups?

How can law enforcement most effectively deal with the various culturally determined attitudes about women that might be found in Muslim-American communities? How might this limit or affect the efficacy of women officers?

How should response on the part of the teacher and law enforcement (in the instance of scenario 2c) depend on the country of origin of the child? How might we educate people both to know more about countries from which terrorists are likely to emerge, or – given the international characteristics of such – to look for indices that cross cultural boundaries?

How can we document the experiences and views of recent Arab- and Muslim-American immigrants?

How might law enforcement might make use of the U.S.A. Freedom Corps?

How can we document the integration practices and outcomes in European communities?

How can we document how Arab- and Muslim-American communities deal with crime within their communities?

What happens to people (psychologically and socially) when they inform on someone in their own community?

Does admitting vulnerability engender trust? How can law enforcement agents use this strategy, if it is effective, without compromising important information?

What are the effects of the U.S. policy position towards Israel on the Arab-American community?

What is the role of misogyny in fundamental religious groups (especially, fundamental Islam)?

How do terrorists cope with multiple, and perhaps quite conflicting, motivations? The empirical evidence suggests that, like soldiers, they may be troubled by the acts of violence they feel necessary to their cause.

Some cultures are explored more than others, some almost not at all. Cross-cultural research needs to increase, but with attention as to how it grows and what cultures become better understood in comparison to the parent cultures in which most psychologists reside.

A phenomenon that may be grossly under explored by psychology is diaspora or "long-distance" nationalism. Long-distance nationalism provides funding for a number of violent (as well as non-violent and charitable) organizations, both with and without contributors' knowledge.

How will the strategies the FBI and police utilize to build effective communication between the Muslim- and Arab-American communities and the local, state, and federal agencies, depend on the gender, age, and education of the community members, or the gender, age and education of the law enforcement agent?

Where within the United States might there be conditions that would support suicide bomb attacks of the sort that are part of the conflict between the Palestinians and Israelis?

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Appendix 1: Information Management and Evaluation

Information Management and Evaluation Systems – an example

The words that people use in communication are ill suited to standard word-based search engines. Frequently, new uses are invented for old words, ambiguous terms are used (the word “strike,” for example, has more than 80 definitions), and multiple words are used to refer to the same idea. People also constantly categorize, but these categories are unstable both from individual to individual and from time to time, depending on the user’s needs and interests. In short, human language is *fuzzy* and it requires *fuzzy tools* to deal with its meaning.

The problem is that most knowledge management tools are based not on how people use words, but on a symbolic approach to documents, where each word in a document is a symbol with a discrete and specific meaning. As a result, document retrieval systems that depend on the presence of exact words fail to retrieve relevant documents.

Biomimetic information management systems provide those fuzzy tools by using neural networks and other soft-computing techniques that emulate the way biological brains work. These systems also are self-organizing and do not require the laborious construction of rigid, expensive, prestructured rule bases. The result is an ad hoc categorization system that adapts itself to the intelligence problem at hand. *The technology learns the meanings of words from the documents it indexes and can recognize the relevance of particular words or phrases based on their meaning.* For example, if an investigator wants to search a document for the word “undercover,” the system will not only indicate each place that the word “undercover” is used but also will find phrases such as “secret agent” or “covert operative.” These systems are independent of the language in which the documents being searched are written.

Kintsch, W. & Keenan, J. (1973). Reading rate and retention as a function of the number of propositions in the base structure of sentences. *Cognitive Psychology*, 5, 257-274.

Barsalou, L. W. (1987) The instability of graded structure: Implications for the nature of concepts. In U. Neisser (Editor), *Concepts and conceptual development*, (pp. 101-140), Cambridge: Cambridge University Press.

Roitblat, H. L. & Henning, M. J. (1992) *Connectionist investigations in language*. International Congress of Psychology, Brussels, July, 1992, and Roitblat, H. L. (2001) Biomimetic Systems for Information Retrieval. In M. E. Williams (Ed.) *Proceedings of the 22nd National Online Meeting* (pp. 423-430). Medford NJ: Information Today.

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Appendix 2: Communications Technologies

Domestic Emergency Response Information System

One of the most critical problems in emergency response is the lack of interoperable communications. No authority exists to arbitrate the choice of communications systems across different community agencies (e.g., police, fire, or medical) or the choice of systems across the same agency in neighboring jurisdictions. This problem is compounded where support components (e.g., National Guard or military units that may be charged with civil support) are involved.

The Domestic Emergency Response Information System is a set of interoperable communications technologies designed to support emergency responses among multiple organizations under crisis conditions. Space and Naval Warfare Systems Command Center (SSC) – San Diego has been charged by Office of the Assistant Secretary of Defense with testing this system. The tests will include scenario development and the establishment and maintenance of agency liaisons. To this end, SSC is working with a consortium of private industry participants to develop scenarios that are relevant, realistic, and appropriate to the information needs of the sponsor. This is being accomplished by soliciting the input and approval of representatives from each participating agency, as well as related stakeholders (e.g., city government).

The most difficult dimension of the evaluation of the introduction of new technologies into group settings is social. These settings can be complex, especially when they involve life-critical missions; such settings typically have well-defined procedures and values that must be respected. The challenge is to evaluate system performance in terms of support to an existing context, as well as to project changes to that context that might be enabled by system use. Effective evaluation must establish credibility and the buy in of agencies that typically are not the subject of technology testing efforts. It must ensure that required data can be collected from conditions embedded in an otherwise free-flowing timeline. It must accommodate the impact of technologies on operating concepts; i.e., address the impact of new systems on current task procedures and social interactions, and make that impact explicit. Finally, it must ensure that data are collected in such a way that results may be compared with other similar testing efforts.

The Domestic Emergency Response Information System is being developed under the sponsorship of several companies by SCC – San Diego: murrays@spawar.navy.mil.

Appendix 3: Community Policing Models

Models of Community Policing

A series of strategies begun in the early to mid-1990s in Boston to address violence among youth and the illicit gun market are given credit for greatly reducing homicides, especially among the youth. The plan relied on:

- The police generally adopting an active presence in the community within a community policing model rather than a reactive model in which police simply rode around in their cars and responded to emergency calls.
- Creation of a specific group of officers into an anti-gang unit that was specially trained to rely on street intelligence gathered by uniformed officers, and develop their own sources of information within the (mostly) inner city area of Boston where gangs were thriving.
- Creating relationships with persons who lived in the community in order to address an existing sense that the police were hostile and more of an "occupying force" in the neighborhood and less of a balanced and fair law enforcement presence; and
- Creating relationships with federal law enforcement agencies to coordinate activities focused upon suppression of gang-related criminal activities. The end result of this way of conducting police business substantially contributed to the activities of others in the community in creating the so-called "Boston Miracle," the effective suppression of very high rates of gang-related homicides and other gang-related crime between about 1987 and 1998.¹⁵ Boston, New York City and other municipalities developed and implemented this model.

Another model is the National Institute of Justice's *Crime Prevention Through Environmental Design* (CPTED). CPTED emphasizes a problem-solving approach to crime prevention as well as a close cooperation between police and residents in reducing both crime and fear of crime. Police, citizens, and government have a role to play: police on foot patrol in neighborhoods and working with community groups; residents working together to improve neighborhood appearance and deter criminals; government using building codes and inspection power to increase environmental security and discourage drug use and other criminal activities. The basic principles of CPTED include target hardening (controlling access to neighborhoods and buildings and conducting surveillance on specific areas to reduce opportunities for crime to occur) and territorial reinforcement (increasing the sense of security in settings where people live and work through activities that encourage informal control of the environment).

¹⁵ The number of homicides dropped from 152 in 1990 to 59 in 1996, and there was a 29-month period that ended in 1998 when there were no teenage homicides.

Most *community policing models* include the decentralization of police services, the collaboration of police departments with other city agencies (such as parks or utility departments) to resolve problems, and regular police-citizen dialogues about perceived problems.

Appendix 4: Psychology of Deception

Psychological Evaluations of Deception

Bond, Charles F. Jr; Atoum, Adnan Omar (2000). International deception. *Personality & Social Psychology Bulletin*. Vol. 26(3), 385-395.

This article describes three studies of international deception. Americans, Jordanians, and Indians were videotaped while lying and telling the truth, and the resulting tapes were judged for deception by other Americans, Jordanians, and Indians. *The results showed that lies could be detected across cultures.* They were detected across cultures that shared a language and across cultures that did not, and by illiterates as well as by university students. Perceivers showed no general tendency to judge persons from other countries as deceptive; in fact, they often judged foreigners to be more truthful than compatriots. There was, however, some evidence for a language-based ethnocentrism when perceivers are judging the deceptiveness of a series of people from the same multilingual culture.

Bond, Charles F; Berry, Diane S; Omar, Adnan (1994). The kernel of truth in judgments of deceptiveness. *Basic & Applied Social Psychology*. Vol. 15(4), 523-534.

This article describes an investigation of the relationship between appearance-based impressions of honesty and individuals' willingness to engage in deceptive behaviors. Neutral-expression photographs were taken of 133 study participants, and these photographs were judged by other participants for whether the person looked honest or dishonest. The study participants then were provided with an opportunity to engage in deceptive behavior. Participants who were rated as looking dishonest by the third parties (via the photographs), were more likely to volunteer to participate in research that was described as requiring deception than were participants who were perceived to look honest. *The results suggested that naive judgments of deception are more accurate than has been supposed.*

Bond, Charles F; Omar, Adnan; Pitre, Urvashi; Lashley, Brian R; et al. (1992). Fishy-looking liars: Deception judgment from expectancy violation. *Journal of Personality & Social Psychology*. Vol. 63(6), 969-977.

To explain how people judge that others are lying, the expectancy-violation model is proposed. According to this model, deception is perceived from nonverbal behavior that violates normative expectation. To test the model, three experiments were conducted, two in the United States and one in India. In each experiment, people described acquaintances while exhibiting weird nonverbal behaviors, such as arm raising, head tilting, and staring. Other people watched the videotapes of the descriptions and made deception judgments. Consistent with the expectancy-violation model, *both American undergraduates and Indian illiterates inferred deception from weird behaviors, even when the people were telling the truth.*

Appendix 5: Data Mining

Data Mining Methodology is a way of looking through large amounts of information to find particular bits of information. The “looking through” can be done by computer. Once the computer finds what it is looking for, it will sound an alarm or alert a human operator, who can then judge whether the item is what was wanted. Also useful is the fact that this methodology allows for a record of the search process, so that patterns of object or item occurrence can be stored and graphed. This pattern-creation is an aspect of the methodology that humans simply cannot perform on their own because of the very large amount of information that must be processed simultaneously.

The methodology has been developed largely by businesses to help with marketing, but it has also been useful to the medical profession and has real potential to law enforcement and intelligence operations.

Shaw, Michael J; Subramaniam, Chandrasekar; Tan, Gek Woo; Welge, Michael E. (2001). Knowledge management and data mining for marketing. *Decision Support Systems*. Vol. 31(1) 127-137.

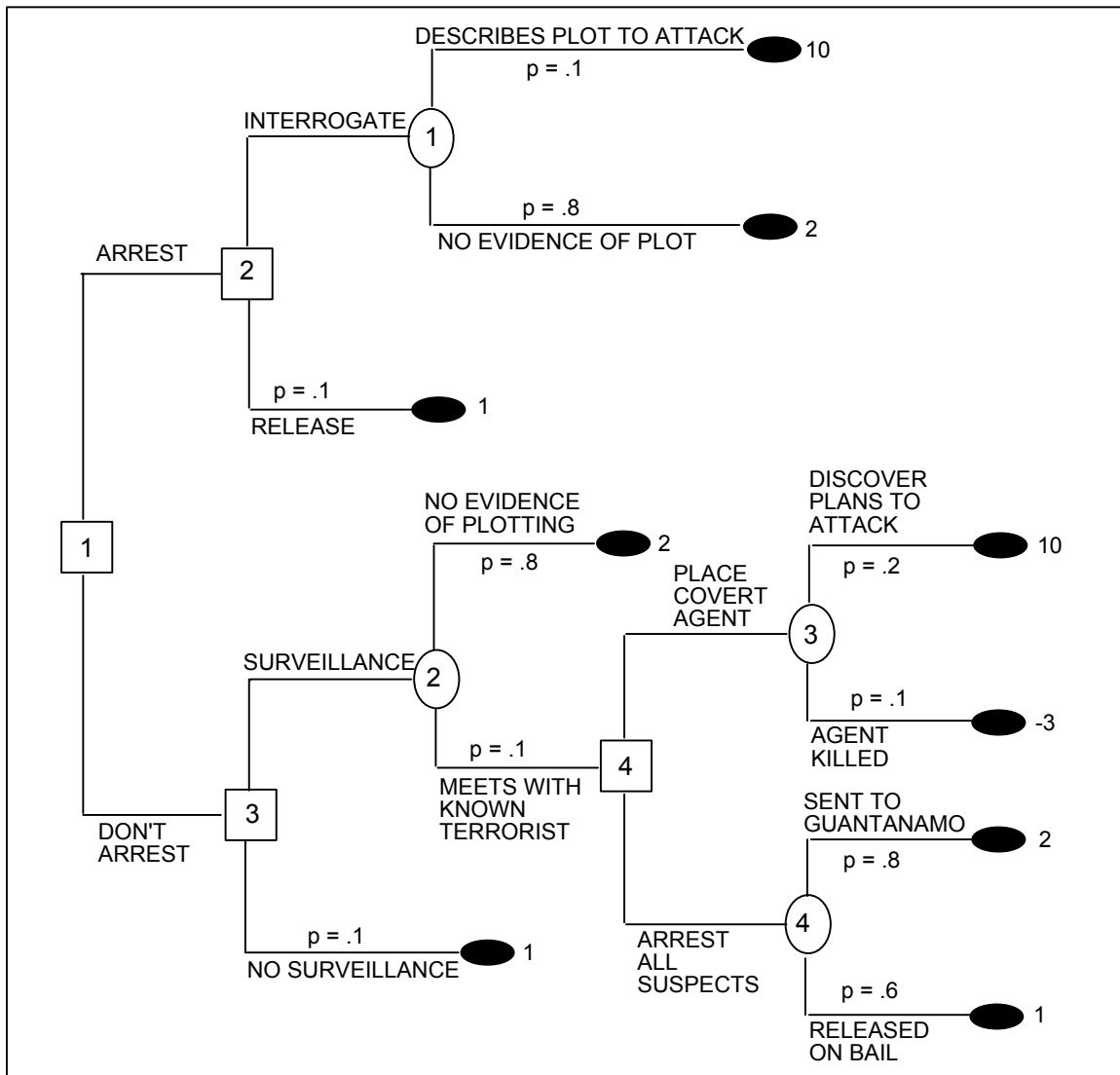
Due to the proliferation of information systems and technology, businesses increasingly have the capability to accumulate huge amounts of customer data in large databases. However, much of the useful marketing insights into customer characteristics and their purchase patterns are largely hidden and untapped. A systematic methodology that uses data mining and knowledge management techniques is proposed to manage the marketing knowledge and support marketing decisions. This methodology can be the basis for enhancing customer relationship management.

Dennis, Charles; Marsland, David; Cockett, Tony. Data mining for shopping centers--Customer knowledge-management framework (2001). *Journal of Knowledge Management*. Vol. 5(4), 368-374.

The question was what specific attributes of shopping centers were most associated with spending for subgroups of shoppers. About 300 shoppers at six shopping centers were interviewed. They were asked for comparative ratings of the shopping center where the interview took place, as well as of the one where they shopped the most (or next most) for non-food shopping. Participants also rated the importance of 38 attributes, provided estimates of travel distance and time to each shopping center, and gave details such as monthly spending at each center. Conventional demographic variables were examined (females vs. males, upper vs. lower socioeconomic groups, higher vs. lower income groups, older vs. younger shoppers, and shoppers traveling by car vs. those traveling by public transport). Data mining (cluster analysis) identified two subgroups of consumers sharing particular needs and wants: those for whom service was important, and those for whom particular shops were important. These two subgroups differed in terms of high vs. low spending. These results demonstrate that data mining from a simple dataset can identify high-spending target consumers. Aspects of customer knowledge management for shopping centers are considered.

Appendix 6: Decision Trees

Decision Tree Methodology: Decision trees can be used to help make decisions. The idea is to concretely identify the choice points and map the sequence of decisions from beginning to end. The advantage is that how a decision is made is made explicit, and others can use the decision tree if faced with the same questions.

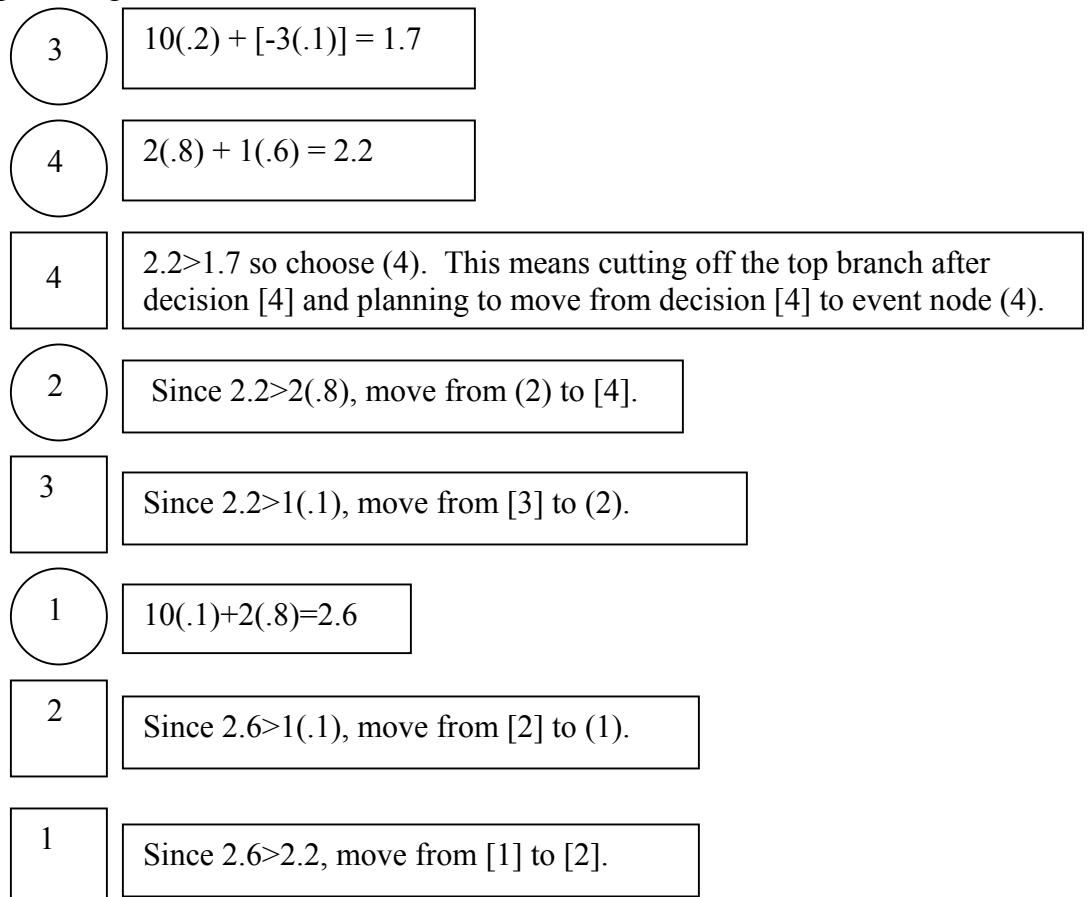


A decision tree is started with a decision that must be made: whether or not to arrest a suspect. A square (representing this decision) is drawn on the left hand side of the paper. From this box, lines are drawn out towards the right for each possible solution, and the solutions are written along those lines. At the end of each line, the results are considered. If the result is outside the decision-maker's control – that is, if nature makes the next move – then a circle is drawn at the end of the line. If the result is another decision, a square is drawn. If there is a final consequence, a solid dot is drawn.

(Decision trees, continued)

The procedure for choosing a decision strategy from a decision tree is called *backward induction analysis*. This analysis can be summarized as follows: First, each terminal node (marked by the black dot) is assigned a number that represents the worth or utility of the final consequence to the decision maker. For example, at the top of the figure above, the consequence of “describes plot to attack” is given a high value of 10; at the bottom right hand corner, the consequence of “released on bail” is given a low value of 1. Second, each event node (the circles) is assigned a sum that represents the expected utility of the node. This is the weighted average utility of the event node – for node (1) for example, this is the consequence of “describing a plot to attack” multiplied by the likelihood of that outcome (p) which is estimated at 1/10 or 0.1, or $10 \cdot 0.1 = 1.0$, plus the consequence of “no evidence of plot” multiplied by the likelihood of that outcome (p) which is estimated at 8/10 or 0.8, or $2 \cdot 0.8 = 2.6$, that is, $[10(.1) + 2(.8) = 2.6]$. Finally, each decision node is assigned a number that is the maximum value of the nodes that branch out from it. Thus, for decision [2], since $2.6 > 1(.1)$, at decision point [2], “interrogate” is the best choice.

Working from right to left, these calculations are:



The value of decision trees are (1) the choices are made very explicit; (2) each choice is explicitly evaluated in terms of the importance of its outcome and the probability of that outcome; (3) how a decision will be made – or was made – can be communicated to another person. As with any technique or tool suggested here, decision trees can be used to guide decisions, not make them. The final decision is left up to the operator.

Appendix 7: Training Guide for Hate Crime Training Program

Training Guide for Hate Crime: Data Collection. *Summary Reporting System, National Incident-Based Reporting System (1997)*. U.S. Department of Justice, Federal Bureau of Investigation: Criminal Justice Information Services Division.

The material in this training guide is intended to assist law enforcement agencies in establishing a hate crime training program for their personnel. It was written in response to the Hate Crime Statistics Act of 1990 and the amended Hate Crime Statistics Act of 1994, which mandated that the Attorney General establish guidelines and collect data about hate crimes as part of the FBI's Uniform Crime Reporting.

Three learning modules are presented, intended for use in instruction of law enforcement personnel on hate crime variables. Learning Module One: "The Social Psychology of Prejudice," is an introduction to the social psychology of prejudice, and instructs the student to look at the relationship of bias to stereotypical beliefs, prejudicial attitudes, and discriminatory behavior. Learning Module Two: "Bias-Motivated Crimes – Definitions & Procedures," provides definitions of the terms law enforcement personnel need to know in dealing with hate crimes. The module describes a two-tier review process, whereby incident is reviewed both by the responding officer and by a second officer or unit with greater expertise in hate crime incidents. Learning Module Three: "Case Study Exercises of Possible Bias-Related Crimes," gives the student officer an opportunity to apply their knowledge of hate crime to hypothetical cases.

Appendix 8: Psychology of Bias

Psychological Evaluations of Negativity Bias: psychologists have discovered that there is a tendency for humans to give greater weight to negative events than positive events. This should be considered when public officials are trying to communicate strategies for protecting against attacks or coping with the outcomes of attacks.

Rozin, Paul; Royzman, Edward B. Negativity bias, negativity dominance, and contagion (2001). *Personality & Social Psychology Review*. Vol. 5(4), 296-320.

These investigators found that *there is a general bias, based on both innate predispositions and experience, in animals and humans, to give greater weight to negative events or attributes*. This is evident in four ways: (a) negative potency (negative entities are stronger than the equivalent positive entities), (b) steeper negative gradients (the negativity of negative events grows more rapidly with approach to them in space or time than does the positivity of positive events), (c) negativity dominance (combinations of negative and positive entities yield evaluations that are more negative than the algebraic sum of individual subjective evaluations would predict), and (d) negative differentiation (negative entities are more varied, yield more complex conceptual representations, and engage a wider response repertoire). The authors review this taxonomy, with emphasis on negativity dominance, including literary, historical, religious, and cultural sources, as well as the psychological literatures on learning, attention, impression formation, contagion, moral judgment, development, and memory. They suggest that one feature of negative events that make them dominant is that negative entities are more “contagious” than positive entities.

Stewart, Dennis D. Stereotypes, negativity bias, and the discussion of unshared information in decision-making groups (1998). *Small Group Research*, Vol. 29(6), 643-668.

These investigators examined how stereotypic expectancies and the negativity bias (the tendency to use negative information more than positive information) made groups less likely to overlook unshared information. In the first study, 51 university students were asked to rate applicants in terms of the likelihood of hiring, likelihood of success, likelihood of promotion, starting salary of the applicant, and the amount of effort that the applicant would put into the position by examining application materials and interview notes compiled by the researchers for either a male or female applicant. Results indicated that a stereotype was activated and resulted in individuals rating a male applicant higher than a female applicant for a masculine gender-typed position. In the second study, groups (rather than individuals) assessed the same information as in the first study. No effects for stereotypic expectancies were found in the group decision-making task, but *the negativity bias was found to increase the discussion of both shared and unshared information*.

August 12, 2005

Leonard S. Rubenstein, JD
Executive Director
Physicians for Human Rights

PRIVACY REDACTION

Dear Mr. Rubenstein,

Thank you for your letter of July 15. The American Psychological Association very much appreciates the care that you have taken in reading and responding to the Report of the APA Task Force on Psychological Ethics and National Security.

You remark in your letter that "certain types of consultations by psychologists on interrogation may be quite benign." Your remark suggests that the issue is not *whether* psychologists may participate in interrogation processes, but rather *how* they may do so in an ethical manner. The APA agrees, and feels strongly that as experts in human behavior, psychologists have important contributions to make in gathering information that can be used in our nation's defense and to protect innocent life. At the same time psychologists must act within strict ethical guidelines, and APA welcomes and appreciates Physicians for Human Rights' contribution to our thinking about the ethics that govern psychologists' involvement in these activities.

It is very important to place our exchange in the context of the Task Force recommendation, that APA "View the work of this Task Force as an initial step in addressing the very complicated and challenging ethical dilemmas that confront psychologists working in national security-related activities." As part of this ongoing process, the Task Force has recommended that a commentary on the Report be written, and that the commentary contain illustrative examples. The Task Force felt that such a commentary was critical in addressing many of the precise issues that you raise in your letter. As an example, your letter indicates that the Task Force Report does not "address the ethical implications in any concrete way" of interventions that "can and have caused very severe and long-lasting harm to detainees." I would respectfully suggest that the Report, if properly understood and applied, speaks directly to and prohibits psychologists' involvement in *any* activity that can cause severe and long-lasting harm. As another example, you indicate that by virtue of the Report's wording, psychologists "can easily become enlisted in supporting interrogation techniques that violate domestic and international human rights law, and amount to torture or cruel treatment, because military authorities incorrectly claim that the techniques are authorized and legal." Again, I would respectfully suggest that the Report, if properly understood and applied, speaks directly to and prohibits psychologists' involvement in *any* activity that constitutes torture or that violates domestic law, and that a military authority

indicating that such activities are legal would not thereby make participation for a psychologist ethical.

At this juncture, I think it is vitally important that APA continue its work in this area, with the input of groups such as Physicians for Human Rights. I believe that the commentary, with examples, will speak directly to most if not all of the concerns you raise in your letter, by illustrating how the Report is to be applied in actual practice. We welcome your further thinking on these issues and I will ensure that your materials, including your July 15 letter, are provided to the group writing the commentary.

Sincerely,

Stephen Behnke, JD, PhD
Director, Ethics Office
American Psychological Association

Ronald F. Levant, Ed.D, M.B.A., ABPP, President
Stephen Behnke, J.D., Ph.D., Director of Ethics
Page 1 of 5

July 15, 2005

Ronald F. Levant, Ed.D, M.B.A., ABPP, President
Stephen Behnke, J.D., Ph.D., Director of Ethics
American Psychological Association
750 First Street, NE
Washington, DC 20002

Dear Drs. Levant and Behnke:

I am writing to express the concerns of Physicians for Human Rights regarding the Report of the Presidential Task Force on Psychological Ethics and National Security. We would be pleased to discuss these concerns face to face.

Physicians for Human Rights has had a decades-long interest in the engagement of the skills of health professionals, including those of psychologists, to protect human rights, including the guarantee against torture and cruel treatment. We administer a large network of psychologists, social workers and physicians who volunteer their time to evaluate candidates for asylum in the United States. PHR has also led an international process that established the UN Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (Istanbul Protocol), which provides international standards for medical assessments of allegations of torture.

We have also been deeply concerned with health professionals' involvement, voluntarily or under severe pressure, in the violation of human rights. For many years, PHR has documented torture and the problem of health professional complicity in it. You may be familiar with the report of an international working group PHR assembled, along with colleagues from the University of Cape Town, on the conflicts encountered when health professionals are under pressure to use their skills to serve state interests at the expense of human rights. The report is entitled *Dual Loyalty and Human Rights in Health Professional Practice: Proposed Guidelines and Institutional Mechanisms*.¹

It is against this background of work that we reviewed the Task Force report. We welcome its reaffirmation of the 1985 joint statement with the American Psychiatric Association against torture, its repeated statement of opposition to torture and cruel, inhuman and degrading treatment and its assertion that ethical obligations contained in the APA Principles of Ethics and Code of Conduct attach regardless of the role psychologists play. Experience over past decades, however, has demonstrated that in the absence of more specific guidance tailored to the roles health professionals play, and the pressures on them to serve custodians and interrogators, these general statements are insufficient. What is needed is very specific guidance to operationalize, from an ethical and human rights standpoint, the prohibition on torture and cruel treatment. This can only be done, we believe, by articulating specific restrictions on permissible involvement by psychologists in interrogation, according to accepted international human rights standards, as the United Nations has done with respect to all medical personnel in its Principles of Medical Ethics relevant to the Role of Health Personnel, particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, adopted by the General Assembly in 1982. In failing to do this, the report falls short and does not provide the guidance needed to prevent psychologists' involvement, either voluntarily or under pressure, in abusive interrogations.

¹ Available at http://www.phrusa.org/healthrights/dual_loyalty.html

1. The report does not take account of, nor issue prohibitions on, participation in highly coercive interrogation.

While we understand that the charge of the Task Force was to write general guidance rather than to consider the conduct of U.S. forces during the past three and a half years, we believe it should have specifically addressed problematic interrogation techniques, and their ethical and human rights implications, for which psychologists' skills have been sought. While certain types of consultation by psychologists on interrogation may be quite benign, such as advice on developing rapport with detainees, many are not. In the interest of reducing resistance of detainees to disgorging information, interrogators may call upon psychologists to help them exploit an individual's vulnerabilities, create severe stress and discomfort, increase fear and anxiety, disrupt normal patterns of life, humiliate the detainee, isolate the person for long periods of time, and otherwise to weaken the detainee's resistance to talking through attacks on the senses or personality of the individual. As Physicians for Human Rights demonstrated in chapter IV of its 100-page report *Break Them Down: Systematic Use of Psychological Torture by the United States*,² these kinds of interventions can and have caused very severe and long-lasting harm to detainees, including PTSD. Supporting these techniques in any manner whatsoever undercuts psychologists' commitment not to use their skills to avoid harming people (Principle A and Code 3.04) or exploit people they evaluate (Code 3.08). The Task Force does not acknowledge these purposes nor address their ethical implications in any concrete way.

This omission is not merely theoretical. While the Task Force was not an investigative body, its work should have specifically taken into account the ethical and human rights implications of coercive interrogation practices used by U.S. forces that relied on psychological expertise. It is now well established that at varying times and places over the past three years authorized interrogation techniques included forms of psychological torture (as defined in U.S.³ and international law) such as long-term isolation, threats, exploitation of phobias, inducement of fear including through the use of dogs, severe humiliation including sexual humiliation, and sleep deprivation. Physicians for Human Rights documented the use of these techniques as well as the policies that permitted them in *Break them Down*. Just this week, a report by Lt. Gen. Randall Schmidt reviewing allegations by the FBI of abuse at Guantanamo, acknowledged the *authorized* use of sleep deprivation, long term isolation, sensory overstimulation (loud music), sexual humiliation, and military dogs against detainees.⁴ General Schmidt cites an instance of a psychologist who was part of a Behavioral Science Consultation Team in connection with the use of a military dog in an interrogation – and who may have been under pressure to participate on the grounds that these are authorized and approved techniques.

The Task Force never addresses the ethical and human rights implications for psychologists posed by the use of these techniques, which have been used in every theater, much less establishes firm rules about how to respond to requests or demands for consultation, advice, monitoring, observation or participation in them.

The key to addressing both of these problems is to establish firm limitations on what psychologists can do in such circumstances, as the UN Principles do, beyond general statements about not participating in torture and cruel, inhuman or degrading treatment. Clear lines are especially important in view of the isolated settings in which interrogations take place, the absence of opportunities for guidance, and the pressures to conform to the requests of interrogators for whom psychologists consult. We believe the appropriate ethical stance, which flows both from the APA's ethical principles and code and the UN Principles' guidance not to participate in interrogations that are harmful and in violation of international standards, is an explicit and

² Available at http://www.phrusa.org/research/torture/pdf/psych_torture.pdf.

³ The imposition of severe mental pain or suffering is defined in American criminal law to mean the prolonged mental harm caused by or resulting from threats to the detainee or another person of imminent death or the infliction of severe physical pain or suffering, and "procedures calculated to disrupt profoundly the senses or the personality." 18 U.S.C. §2340.

⁴ Army Regulation 15-6: Final Report. Investigation into FBI Allegations of Detainee Abuse at Guantanamo Bay, Cuba Detention Facility.

unambiguous requirement that psychologists *not plan, advise interrogators regarding, monitor, observe or participate in any interrogation that involves the use of coercion, stress, degradation, threats, isolation, imposition of fear, humiliation, sensory deprivation or over stimulation, sleep deprivation, exploitation of phobias, physical harm (e.g. stress positions) or other techniques that have been shown to cause harm to an individual.* This position, moreover, is consistent with the Geneva Conventions' provisions on prisoners of war, which prohibits any form of coercion in the effort to secure information.

By not establishing this requirement, and also by continually affirming the legitimacy of involvement in interrogation, the Task Force does not resolve whether psychologists can participate in exploiting vulnerabilities of a detainee, increasing stress, and other very harmful and exploitive techniques. The Task Force recognizes the powerlessness of and high stress on detainees that can lead to harm to detainees, but advises psychologists only to be "mindful of" these factors rather than mandating non-participation in such circumstances.

Elsewhere the Task Force asserts that one "central role" of psychologists is to assure that interrogations are "safe." As the World Medical Association established thirty years ago, this is not an ethically appropriate role. In the first place, psychologists are not empowered to restrain interrogators. More importantly, the idea that health professionals have a role in assuring safety in interrogation is fraught with contradictions. Far from assuring safety, participation can involve psychologists in the calibration of pressure and harm, and even encourage interrogators to ratchet up pressure on the detainee until the health professional says "stop." Moreover, the involvement of a psychologist on an interrogation team can confer a stamp of approval on highly coercive techniques, and provide a defense to psychological torture that "the doctor said it was OK." In other words, participation in the guise of protection can facilitate the use of more aggressive and illegal techniques rather than restraining them.

2. The report does not require psychologists to adhere to international human rights and humanitarian law regardless of the interpretation of that law by military authorities.

As noted above, the United States has a law criminalizing interrogation techniques such as threats of death or severe pain or suffering as well as procedures "designed to disrupt profoundly the senses of the personality" and which cause severe harm to individuals. The Geneva Conventions on Prisoners of War prohibits the use of "any form of coercion" on a prisoner of war to secure information from him/her. The Convention Against Torture, which the United States has ratified, prohibits torture and cruel, inhuman or degrading treatment to individuals in its custody overseas. Interpretations by entities that apply the Convention Against Torture, including the U.S. Department of State, have concluded that coercive techniques such as sleep deprivation, long-term isolation, severe humiliation, threats of death and severe harm amount to torture or cruel treatment.

The Justice and Defense Departments have, however, reinterpreted many of these laws to permit highly coercive psychological techniques, even in circumstances where the State Department has condemned their use as unlawful when employed by other governments. They decline to apply the Geneva Conventions to detainees at Guantanamo and assert that the Torture Convention's prohibitions on cruel and inhuman treatment do not legally apply extra-territorially. They have not applied the criminal law against psychological torture. The result is that psychologists can easily become enlisted in supporting interrogation techniques that violate domestic and international human rights law, and amount to torture or cruel treatment, because military authorities incorrectly claim that the techniques are authorized and legal.⁵ Psychologists advising or in the

⁵ The report of General Schmidt provides an apt illustration. A detainee was held in segregation for 160 days, had 48 to 54 days of consecutive interrogation sessions lasting 18 to 20 hours each, during which at various times he was led around by a leash tied to his chains, had a thong placed on his head, was forced to wear a bra, received insults directed to his mother and sister, and required to stand naked in front of a female interrogator. The report found that these acts, even in combination, were degrading and abusive but "legally permissible" and did not amount to inhumane treatment. Army Regulation 15-6: Final Report. Investigation into FBI Allegations of Detainee Abuse at Guantanamo Bay, Cuba Detention Facility, p. 20.

employ of military interrogation therefore need firm guidance to follow international and domestic law and need to be advised not to defer on the opinions of the military about what behavior is permissible under law.

The Task Force does not take adequate account of this problem. Far from demanding adherence to international laws against coercion, torture, and cruel treatment, the Task Force suggests deference to interrogators and military officials on the interpretation of the law. In section III, recommendation 4 the Task Force refers to the obligation to follow military rules and regulations, and treats them as incorporating “texts that are fundamental to the treatment of individuals.” In other words, it invites the inference that the government’s interpretations of human rights and humanitarian law are correct. The statement later in the section that psychologists need not follow the law when in conflict with basic principles of human rights is not particularly helpful to line psychologists when the military claims to have incorporated those principles in rules and regulations the Task Force says psychologists are bound to follow.

Psychologists need not become experts in the law, but they should have clear expectations to follow international and domestic human rights standards regardless of the view of military interrogators. In particular, psychologists should be expected to adhere to:

- The Geneva Conventions’ prohibition against the use of any form of coercion against prisoners of war.
- The prohibition under U.S. criminal law of engaging in or supporting techniques of interrogation that involve threats of harm or that are designed to severely disrupt the senses or the personality.
- Requirements of confidentiality of medical records as provided under international law.
- The Uniform Code of Military Justice.
- The provisions of the UN Principles of Medical Ethics relevant to the Role of Health Personnel, particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment that prohibit engaging in any professional relationship with prisoners or detainees the purpose of which is not solely to evaluate, protect or improve their physical and mental health.

3. The Task Force does not adequately protect confidentiality.

The Task Force recognizes an important ethical principle – the protection of confidentiality – but undermines it by permitting disclosure of detainee health or mental health-related information for any “necessary” purpose. Given that interrogators seek every advantage in knowledge of a detainee, it is difficult to conceive of a situation where any record, or any knowledge of a detainee, would not be considered necessary by an interrogator. Moreover, the Task Force doesn’t address who decides the question of necessity. Thus while on the surface the Task Force seems to reaffirm an important principle, it leaves the door open to undermining it. It is telling that this section does not even make reference to APA ethics code 4.05, concerning the protection of confidentiality.

Access to medical records for non-therapeutic purposes should not be permitted unless there is a compelling safety concern and the disclosure has been reviewed and approved by the treating physician or medical director. Even then, discretion consistent with general rules of confidentiality apply.

Conclusion

Although the report does not state whether psychologists were involved, the fact that the techniques were used as part of a Special Interrogation Plan “in an effort to establish complete control and create the perception of futility and reduce his resistance to interrogation” suggests that they may well have been.

Ronald F. Levant, Ed.D, M.B.A., ABPP, President
Stephen Behnke, J.D., Ph.D., Director of Ethics
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We appreciate the Task Force's efforts to clarify ethical obligations of psychologists. To be effective, however, they must more directly address the techniques of interrogation used, rely more squarely on international human rights standards, and draw clear lines about non-participation.

We would be pleased to meet with you to discuss these concerns.

Sincerely,

A handwritten signature in black ink, appearing to read "Leon Rubenstein". The signature is written in a cursive style with a large initial "L" and "R".

Leonard S. Rubenstein

Where do people get stuck?

Interrogation

RF: understanding other persons/cultures—shifting to human behavior. Emerging areas—interrogation a headline; shape a generation of psychologist: who realm of human behavior as it affects national security. Broader way

GK: What guidance for p. where client is organization but interacting with individuals—

- 1) what is our responsibility as psychologists;
- 2) What type of ethical rationals (normative vs. utilitarian)
- 3) Individuals vs. greater good

NT: culture and ethnicity: framing considerations for ethnicity and culture

JA: What kind of data can be collected—here is where we can use strength as psychologists—data (don't have it and can't get it) Establish identifying area where relevant data can be collected.

MW: Training and advice—look beyond US National Security; much bigger the US military thing

MG: The more ambiguous the threat, the more ambiguous the problem—blurring as convenience. **Who is the client:**

LJ: perception of self as doctor “keeps me grounded”

MG: Indirect assessments become even more confusing—embedded in interrogation are many different roles.

GK: Where is primary obligation? Insurance eval: Owe individual rigorous, thoughtful, accurate evaluation Ethical obligation is to retain professional integrity. Staying with in constraints of system.

BL: Basic assumptions that an interrogation implies harm: “nonsense” An interrogation is a conversation. Why not use skills as psychologist to improve interrogation? Need to look at what is harmful. Contextually related Have helped to inflict harm in interest of greater good. Start **BASIC**. Question of allegiance. Diagram—where do ethics of APA/DOD overlap. Probably lots of overlap and not much area of conflict.

MG: Police agencies have been getting consultation on interrogation for decades

RN: Roles—is there an application of knowledge, practices, and principles of psychology? What is the actual activity.

MB: Illegal behavior is absolute—never illegal behavior: Geneva Conventions, DOD regulations **Grey area**: Legal, but may not be legal

JA: Are there places psychologists don't go?

MB: Psychologists are a “safety check”—greatly reduce likelihood of

JA: What is scope of action?

SS: **Define “involvement”**

MB: **Boundary of competence**.

SS: Threat is real, present—issues will not go away: We need information. How do we professionalize it, to learn how to get the best information under circumstances?

Embrace: We need to address issues: Humane Treatment

JA: Whatever we develop, we develop for whole world.

LJ: in “terror” orgation: how to interview, how to talk to, to increase likelihood that person will give information without anyone being harmed.

MG: Provide insight into individual—do not interrogate—offering expertise on how best to elicit accurate and reliable information. Insight based on behavior—need for accurate information

- A. Competence is critical, built upon professional expertise largely unique to psychologists;**
- B. APA Ethics applies;**
- C. Nothing illegal;**
- D. Importance of clarifying role and who is the client**

Safe,. Effective, legal, ethical

MW: Is there an exploitation of vulnerability? (**)

SS: It is coercive

- 1. What are the range of roles in interrogation related activities**
- 2. Notion of exploitation/interrogations;**
- 3. role of ethnicity and culture;**
- 4. differ in assessment with superiors re: value of target,**
- 5. guidance for junior colleagues.**
- 6. addressing inappropriate behavior**
- 7. Use of medical information**
- 8. Context—young, inexperienced interrogators**

MB:

BL: Front page test

NT:

JA: We are manipulable

SS: What is effective?

LJ: Use of medical information/records at Abu Ghraib/GTMO

MB: Don't want complete "cut off" of medical information from interrogations: **What does the Geneva Convention say about this?**

NT: Effects on interrogators

GK: **Not a static picture**; (Abu Ghraib, Guantanamo Bay, Afghanistan); don't know accuracy of data

1. Psychologists have a valuable role to play in "valuable and appropriate"
2. Should psychologists be involved in gather information for national defense
3. Psychologists should work as consultant to organization and not interrogate (role and function)
4. Safe, legal, ethical, and effective

SS: We are scientists, and don't know what is effective

MB: Research into effectiveness

MG: Information that can be corroborated—information that is useful and reliable

MB: safe, legal, ethical, and effective—safety and well-being of both prisoners and custodians

MG: Do not change your role

Not considered the ethical or appropriate

Issues are complex and evolving. Psychologists are sensitive to the possibility, in certain circumstances, of the extreme harms that may come from the inappropriate use of psychology. Note that accounts in the media have not always accurately depicted circumstances surrounding the role of mental health professionals in national security-related activities. In addition, such circumstances are constantly evolving, so that the ethical questions and challenges are not static.

The APA Ethics Code states that psychologists “are aware of their professional and scientific responsibilities to society and to the specific communities in which they work.” (Principle B) Psychologists have a valuable and ethical role to assist in gathering information that can be used in our Nation’s and other nations’ defense. A central role for psychologists working in the area of national security related investigations is to assist to ensure that all processes are safe, legal, and ethical for all participants in the process.

The Ethical Principles of Psychologist and Code of Conduct (2002) applies to psychologists across a range of behaviors. Whether the APA Ethics Code applies is not dependent upon a psychologist serving in a health care provider role. In virtually all instances, the relevant question will not be whether the APA Ethics code applies, but rather how the APA Ethics Code applies.

The Preamble to the APA Ethics Code states “Psychologists respect and protect civil and human rights.”

Psychologists do not condone or participate in torture and have a responsibility to report acts of torture that they become aware of to the appropriate authorities.

Psychologists do not engage in behaviors that violate the law of the United States. Psychologists involved in national security-related activities follow all applicable rules and regulations that govern their roles. Over the course of the United States involvement in numerous locations, such as Afghanistan, Iraq, and Cuba, such rules and regulations have been significantly developed and refined. Psychologists have an ethical responsibility to be informed of, familiar with, and follow the most recent applicable regulations and rule.

Psychologists are aware of their competencies. Psychologists do not act beyond their competence, except in unusual circumstances., such as set for in the Ethical Principles of Psychologists and Code of Conduct, standard 2.02, Providing Services in Emergencies.

Psychologists are aware of their role and clarify their role in situations where the nature of their professional identity and professional function may be ambiguous. Psychologists have a special responsibility to clarify their role in situations where individuals may have an incorrect impression that the psychologists are serving in a health care provider role.

Psychologists clarify (to whom?) the identity of their client. Psychologists retain ethical obligations to individuals who are not their clients and seek consultation to clarify these obligations.

Psychologists who may serve in the role of supporting an interrogation do not use health care related information except for the purpose of promoting or safeguarding an individual's safety and well-being. "...for the detriment of an individual's safety and well-being." JM: Psychologists consider the ways that certain settings may place individuals in considerable positions of disadvantage.. RF:

Sensitivity to ethical issues

Vital to give psychologists at the beginning of their careers ethical guidance,

Difficult to draw the line. Where is the line: the complexity of the issues and scenarios do not lend themselves to drawing a clear line, because very difficult to identify all the variables. Many police psychologists who work with law enforcement who support interrogation activities.

May not need to go into parameters...

Seek consultation (Preamble)

Q. Ethnic and cultural aspects—sensitivity to cultural aspects—Principle E.

Evolving field—new questions will arise, need to have ways for people to consider—not static

Searching for the pathway.

Consult in interrogation process—not

BL:

MW: Articles 32 and 35

Add: Psychologists working in these areas become familiar with documents related to such as: 1) 2) 3) 4)

BA: **Examples...**

Offered, not

Confidential—allowed for free and open discussion about the issues.

AOD: Role of human rights standards in an ethical code

Agree that respect for human rights is critical

Complicated, difficult, sensitive issue—

Vigorous discussion and disagreement

Vote taken, record reflects group, will abide by decision of group. One disagreement and one abstention.

- I. Psychologists never engage in, support, condone, or in any manner facilitate torture or other cruel, inhuman, or degrading treatment at any time, at any place, for any reason. There is never a justification for any of these acts. These acts are always unethical. And psychologists have an ethical obligation to report any such acts to the authorities.**

- II. The positions of the Associations are remarkably similar.**

- III. Psychologists have a positive and ethical contribution to make to society, when they do so within strict ethical limits.**
 - “Competing interests”
 - Gelles
 - Experts in human behavior
 - Safe, legal, ethical and effective
 - Active ethics program
 - Sex and the slippery slope
 - Ethics code always applies—psychologist can never “opt out”

- I. We know that each year, a certain number of mental health professionals who conduct therapy will become sexually involved with their patients. Does that mean that we should stop mental health professionals from doing therapy? Of course not. What it means is that we should have: first, bright lines that make clear—this behavior is not ethical; second, training for beginning professionals in how to stay out of those situations; and third, a very active ethics adjudication program that will sanction any mental health professional who engages in that behavior. Don't allow fear of the bad to prevent you from providing the good. (add Gelles as follow-up)**
- II. There are competing interests. On the one hand is the ethical mandate “Do no harm.” On the other hand is a competing ethical mandate to serve society. As experts in human behavior, psychologists serve society by assisting to gather information that will protect innocent life. Consider when a child is abducted and a suspect is in custody. It would be unethical not to contribute our expertise to assist investigators in locating that child. Whenever psychologists provide their expertise in this manner they abide by the other, competing, ethical mandate to do no harm. We always abide by both ethical mandates: Do no harm and contribute our expertise for the good of society. They are both always present.**

Very consistent with our approach. Commissioned Officers have a duty to prevent, stop, and/or report violations of the law, to include torture.

This may be inconsistent with current policy, depending on the definitions used. This could seemingly prevent the disclosure of an injury/illness that would increase the danger to a detainee. We took a more thoughtful approach, in my opinion. In addition, this can be (and has been) carried to an extreme, in cases where medical personnel would not share identifying information that was contained in a medical record.

This obviously would prevent pre-conviction use of psychiatrists supporting lawful interrogation of criminal suspects. OK. This is the Police Psychologist full employment act.

Miriam Websters: “serving or intended to coerce. Coerce: To restrain or dominate by force. To compel to an act or choice. To bring about by force or threat.” We did not use the word, coercive, mostly, in my opinion, because it can become very hard to define. ANY questioning of a subject under custody has a coercive flavor to it, whether or not force is used. If we hold someone by force, i.e., in physical detention, then are we by definition coercive?

Although this may seem to clarify, it says that coercive interrogation INCLUDES ...what about coercive methods that are not listed here? Is this list exhaustive? By getting into a laundry list, they raise more problems than they solve. I think we have a more thoughtful approach, in that we use the internationally agreed upon terminology, and then will let individual examples be made in our forthcoming examples, and will let specific cases be decided by the ethics board, or by licensing boards.

The American Psychological Association is clear and resolute: there is never a justification for a psychologist's involvement in torture.

In its discussing of the Presidential Task Force on Psychological Ethics and National Security at its August 2005 meeting, the Council of Representatives requested the Ethics Committee to “review the discrepancy between the language of the Introduction and Applicability section of the *Ethical Principles of Psychologists and Code of Conduct* and Ethical Standard 1.02.” Council further requested that based upon this review, the Ethics Committee “make a recommendation to the Board of Directors concerning adding the words ‘in keeping with basic principles of human rights’ to Ethical Standard 1.02.” Finally, “Council requests that this process move forward as expeditiously as reasonably possible, recognizing that a proposed amendment to the *Ethical Principles of Psychologists and Code of Conduct* will be subject to the review procedures required by Association Rule 30-8, Standards and Guidelines, and final Council action.”

The Introduction and Applicability section of the Ethics Code states “If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to this Ethics Code and take steps to resolve the conflict in a responsible manner. If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing authority *in keeping with basic principles of human rights.*” (emphasis added)

The phrase “in keeping with basic principles of human rights” is not included in the enforceable provision, Standard 1.02, “Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority,” which states simply “If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict. If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing legal authority.”

The Ethics Committee has carefully reviewed Council's request and believes, as explained below, that policies adopted by the Council of Representatives, the Board of Directors, and the Ethics Committee make APA's position clear and provide sufficient guidance to members at the immediate present time. Accordingly, the Ethics Committee respectfully recommends that the Committee be given more time to engage in a process that will allow a fuller understanding of the questions and concerns that gave rise to this proposed change, a deeper consideration of whether the proposed change is the best way to address the underlying considerations, and more extensive examination of the impact adding such language to the enforceable section of the Ethics Code may have.

By adding the phrase “in keeping with basic principles of human rights,” APA would make clear that human rights are critical in any decision regarding a conflict between ethics and law. The Ethics Committee notes that the language of the PENS Task Force Report (the first of the twelve statements) does not allow any exceptions—the language is absolute, stating unequivocally that it is never permissible for psychologists to engage in, direct, support, facilitate, or offer training in torture or other cruel, inhuman, or degrading

treatment. The Ethics Committee determined that this statement was an appropriate interpretation and application of the Ethics Code, and the Board adopted this statement (along with the other statements in the PENS Report) as APA policy. Following Committee and Board action, the Council of Representatives passed an item stating that that there are no exceptional circumstances whatsoever, whether induced by a state of war or a threat of war, internal political instability or any other public emergency, that may be invoked as a justification for torture, including the invocation of laws, regulations, or orders.

The Council of Representatives took other action on the PENS report, which included endorsing a Task Force recommendation that a casebook/commentary with illustrative examples be written. Council directed that the PENS Task Force and the Ethics Committee collaborate on this casebook/commentary, and that a period of open comment on the Task Force report be offered, to help outline and define questions about the report. The Ethics Committee believes that the comment period and the process of writing the casebook/commentary will significantly aid the Committee in understanding what issues psychologists working in this area confront, and so provide the Committee with an enhanced understanding of how best to address any potential shortcomings in the Ethics Code.

The Ethics Committee further noted that adding aspects of aspirational parts of the Ethics Code to enforceable parts can be more complex than expected and may lead to unanticipated results. For example, while "basic principles of human rights" may appear to have a clear meaning when applied to the current discussion of national security-related activities, it may not be as clear when applied in Standard 1.02 to conflicts with law in other contexts, especially given that the APA has yet to define what constitutes "basic principles of human rights." Defining these principles will be an essential first step if this language is to be included in an enforceable standard, so that psychologists have adequate notice about what activities the Ethics Code prohibits.

During this discussion and when previously reviewing and approving the PENS report, the Ethics Committee considered whether complaints about national-security related issues can be adequately addressed. The Ethics Committee's endorsement of the PENS statements provides an official interpretation of several provisions in the current Ethics Code. The Ethics Committee believes that there are clear provisions in the Ethics Code to sanction psychologists who engage in, direct, support, facilitate, or offer training in torture or other cruel, inhuman, or degrading treatment.

The Ethics Committee wants to give this proposed change the attention and consideration that comes with a full examination of the Ethics Code, with broad participation from the entire association and ample opportunity for reflection, comment, and feedback, before making a recommendation concerning the proposed change. The Committee also wants to benefit from the processes that are currently underway, so that it may review what comments are submitted regarding the PENS Task Force report and what specific examples the Task Force report commentary addresses. The Committee believes that by

benefiting from these processes it will be in the best position to serve the APA well with a considered, thoughtful, and constructive recommendation.

BOARD OF SCIENTIFIC AFFAIRS
Unapproved Draft Minutes
October 26-28, 2001

Members Present: Morton A. Gernsbacher, PhD (Chair), Nancy Ator, PhD, Mahzarin Banaji, PhD, Jacquelynne Eccles, PhD, Harry Reis, PhD, Neal Schmitt, PhD, Neil Schneiderman, PhD

Members Not Present: Barbara Andersen, PhD, Alan Kazdin, PhD

Liaisons, Observers, and Visitors: Laura Barbanel, EdD* (Board of Directors); Charles Brewer, PhD* (Board of Directors); Tom Burdenski* (Science Student Council Liaison); Steve Drigotas, PhD* (APA Science Policy Fellow); Ruth Fassinger, PhD* (Division 17 Liaison); Raymond Fowler, PhD* (CEO); William Howell, PhD* (Board of Convention Affairs); Faye Johnson* (TOPPS Liaison); Ron Levant, EdD* (Board of Directors); Bruce Overmier, PhD* (Board of Directors Liaison); Nathan Perry, PhD* (Board of Directors Liaison); Denise Sloan, PhD* (Division 12, Section 3 Liaison); Andrea Solarz, PhD* (Division 27 Liaison); Brian Wilcox, PhD* (Board of Convention Affairs); Frank Worrell, PhD (Division 16 Liaison); Philip Zimbardo, PhD* (APA President-Elect)

Staff: Kurt Salzinger, PhD; Merry Bullock, PhD; Suzanne Wandersman; Sophia Birdas*; Demetrice Blanger-Utley; Susan Brandon, PhD; Marianne Ernesto*; Lara Frumkin, PhD*; Virginia Holt; Heather Kelly, PhD*; Pat Kobor*; Diane Maranto*; Pat Miyamoto*; Geoffrey Mumford, PhD*; Sangy Panicker, PhD*; Melinda Shors*; Karen Studwell, JD*; LaTonya Wesley*; Karen Yairi*

(* denotes partial attendance)

Item 1 Board Business

BSA approved the minutes from the March 23-25, 2001 meeting. The board selected Dr. Harry Reis to serve as chair for 2002. Dr. Jacquelynne Eccles volunteered to write an article about the October BSA meeting for the *Psychological Science Agenda*.

Item 2 Board of Directors and Council of Representatives Actions

The board received as information Board of Directors actions taken since the March 2001 meeting. The Board of Directors had discussed the controversy regarding a manuscript submitted to the *American Psychologist* and voted to create a working group to review and make recommendations to the Board of Directors regarding the role and function of the *American Psychologist* and the editorial review process.

The Board of Directors decided that the CARE Guidelines for the Use of Animals in Behavioral Projects in Schools would be disseminated to divisions and state associations for review.

The Board of Directors authorized the production and dissemination of the remaining six videos as part of the CARE video series project.

BSA Retreat

BSA members had decided to set aside some time during its meeting to discuss issues related to scientific psychology and consider possible future activities and initiatives.

High School Students: The liaison from TOPSS, Faye Johnson, suggested that certificates for excellence in high school psychology be distributed under the Decade of Behavior program. BSA members liked this idea and asked Science Directorate staff to quickly implement this proposal.

Museum: The liaison from TOPSS also suggested activities related to the psychology exhibit touring museums. She noted the importance of having a psychology exhibit in all science museums and suggested the creation of a “cookbook” for museums on how to put together an exhibit on psychology. The “cookbook” could be shared with psychology departments so they could help oversee the development of an exhibit at their local science museums. Other museum activities suggested were to contact psychologists at science museums and others who do research in science museums to advocate for better labeling of exhibits with behavioral phenomena as psychology.

Graduate Students: Dr. Reis discussed the decrease in graduate school applications and enrollment that is being experienced by academic institutions. It was suggested that APA should gather better demographic data on graduate students in general, and specifically information on quality (e.g., GRE) categorized by sub-discipline area.

The board also discussed the lack of interest by students in research and science. Graduate programs see many students drop out when they learn how much research is expected. BSA members suggested that APA also gather data on attrition. Dr. Schneiderman suggested using the training grant model as a way of tracking students. Psychology departments could be asked to gather this data. A board member thought that the APA accreditation office was beginning to require these kinds of data. Another board member recommended working with COGDOP in gathering these kinds of data.

Board members continued to discuss the lack of interest by students in research and science. BSA members agreed that the field needs to do a better job in selling behavioral science to students and in showcasing how research helps people and how students who want to help can do so through science. This kind of information could be used to recruit undergraduates into graduate programs. BSA also discussed the need for students to understand how practice and research can work together. A board member noted that the Academy of Clinical Psychological Sciences (a group of 39 research-oriented departments and about 10 research internship sites) struggle to find a way to include clinical research in training and internship programs. It was suggested that BSA establish a liaison relationship with this group.

Scientist Issues: Dr. Salzinger asked BSA members for their reaction to his idea of having a “Feel the Pulse” group of about 100 scientists who could provide advice and consultation by email to the Executive Director of the Science Directorate. Board members liked this idea and provided some suggestions. The group of 100 scientists should represent different constituencies. Board members liked the idea of having non-members be part of this group, as well as APA members. They recommended that representation be included from divisions whose memberships are dwindling and from divisions that are not typically considered science divisions. To put together a list of non-members for this group, staff should look at a broad list, including previous APA members, university faculty who wouldn’t typically join APA, and other academic venues such as medical schools, business schools and public health schools.

The Board suggested that APA should work toward getting a psychologist nominated for the Nobel Prize.

Publications: Board members suggested that APA should solicit an article on the involvement of psychology in military and national interest issues since WWII.

Membership: BSA discussed membership retention and recruitment issues and agreed that it is crucial to develop advertising and recruitment material that clearly shows the value to the individual member. BSA members agreed that better advertising of the full text access to all APA journals for a minimal cost was needed. BSA noted that the present form seems unclear regarding the value and procedures for acquiring free text journal access. Pat Miyamoto visited with BSA and clarified prices and access possibilities. BSA members reiterated their support of the 25% dues reduction for science members. The board stressed the importance of directed advertising to researchers on the benefits APA membership. The marketing material needs to clearly state the personal relevance of membership.

Board members developed the following list of ideas that they want APA to seriously consider for membership retention and recruitment:

- Give members of organizations who can take advantage of the dual dues membership a reduction in fees or free online access to APA journals for one year.
- Send membership information to universities at the beginning of each academic year so that faculty can encourage graduate students to join.
- Develop a mechanism to allow faculty to give a free APA membership to one graduate student a year. The cost to the faculty member could be free or a reduced rate.
- Include in the membership marketing materials for researchers these five important points—online access to journals; 25% dues reduction; reorganization of the APA convention; reduced rates to the Advanced Training Institutes (ATI); and the opportunity to belong to a division.
- Use the BSA chair’s name in recruitment.

Diversity: BSA asked staff to arrange a meeting with CEMA at the spring consolidated meetings to discuss strategies for increasing diversity and ways to implement the conclusions of the CEMRRAT report.

Federal Agency Awards

BSA members followed up on the discussion of federal agency awards that was begun at the March 2001 meeting. The board agreed that the idea of presenting awards to federal agency staff was a good one and should begin in 2002. The award could be presented during a BSA meeting and the awardees would be invited to attend the group dinner with the board members. Nominations for this award would be solicited from divisions, other APA boards and committees, and scientific society members of the Federation.

BSA members asked staff to begin soliciting nominations now so that the board could review nominations at the March 2002 meeting and present the awards during the October 2002 meeting. BSA asked staff to draft a solicitation letter and email it to the board for their review.

The board suggested that three awards be given each year with a possibly greater number in the first year. A possible name for this award could be Outstanding Research Service Award.

Item 3 Cross Cutting Agenda Items

BSA reviewed the following cross cutting agenda items:

CC-1 Guidelines on Cross Cultural Education and Training, Research, Organizational Change, and Practice for Psychologists

BSA reviewed the revised document, “Guidelines on Cross Cultural Education and Training, Research, Organizational Change, and Practice for Psychologists.” The board discussed how the document had improved since the last version although there was disappointment that earlier comments about broadening the scope were not addressed. However, board members still didn’t see a solid scientific base to support the statements made in the document and especially noted the absence of a solid social psychology base. BSA members agreed that the goals of the document were of high importance and that it is imperative to provide broad review including social psychologists. In addition, the document needs to address how the guidelines would be implemented. The Board agreed to endorse the aspirations of the document but agreed that the contents require further work. The board recognized the need for diversity in both practice and research and saw this document as one contribution to this effort. Board members specifically recommended that the document should incorporate the contributions of social psychologists who study prejudice and ethnicity; and that the document should further explore the issues of race, culture, and ethnicity.

CC-2 Turnaround Time for Council Business Items

BSA supported substitute motion III, originated by CSFC in March 2001.

CC-3 Better Articulation Between the Council of Representatives and Its Board and Committee Structure

BSA discussed Council new business item #58J, which asks Council to instruct CSFC to develop a system of assigning each member of Council to be a monitor to APA boards and committees. The Board supported recommendations to increase communication and informational exchange and voted to support the motion with some minor changes. BSA recommended that the liaisons from Council serve a two-year term instead of a one-year term. BSA members believed that extending the term would allow a better understanding of the issues that are being handled by that particular board or committee. In addition, BSA members recommended that the group of liaisons represent the diversity of the discipline (science, practice, education, and public interest).

CC-4 APAGS Member of the Board of Directors and Council

BSA discussed the proposal to include a member of the American Psychological Association of Graduate Students (APAGS) on the Board of Directors as a full voting member and supported the concept of such a proposal. Board members believed that involving students at this level of governance was a good idea.

CC-5A Call for Questions to the President Elect Candidates

BSA members decided to submit the following question to President elect candidates running in the 2002 elections:

“What specific psychological science initiatives would you promote during your presidential year?”

Item CC-10 Report of the Task Force on Membership Recruitment and Retention

See BSA agenda item 34 for minute.

Item 4 Research Regulations and Institutional Review Boards

BSA discussed the issues related to research regulation and discussed actions to be taken to inform the research community about strategies to ensure that the conduct of behavioral research is not unnecessarily hampered. BSA reviewed a letter from Dr. Ed Diener regarding his concerns with IRBs imposing increasing regulations for behavioral research. BSA members also reviewed emails from Drs. Nora Newcombe and Tom Borkovec outlining their concerns on this same issue. The Board also had a copy of the Interim Accreditation Standards and Procedures of the Association for the Accreditation of Human Research Protection Programs (AAHRPP) to review and provide comment.

The AAHRPP standards and procedures will be used on site visits to ensure all research involving human participants will be carried out ethically and safely.

Science Directorate staff provided BSA members with a summary of federal agency and national association activity in the area of regulation of research with human participants and a brief list follows:

- (a) The National Bioethics Advisory Commission released a report on *Ethical and Policy Issues in Research Involving Human Participants*.
- (b) Congressional legislation on human research subject protection has been introduced.
- (c) When the Public Health Service (PHS) policy on instruction in the responsible conduct of research will go into effect, education requirements will be extended to most federally funded research.
- (d) The accreditation of human research review programs is being planned. A goal is to simplify the assurance process and certify IRB personnel.
- (e) The National Human Research Protections Advisory Committee was formed to provide expert advice to the Secretary of HHS.

In response to the board's recommendation that staff develop a brochure directed to IRB members that would focus on behavioral and social science research, staff provided board members with an outline of topics for such a brochure. Board members agreed that the outline was a good beginning and recommended that this information be placed in a booklet that could be used by both IRB members and researchers. The publication could be a handbook that could also be used by university legal departments. The Board of Scientific Affairs agreed that the development and dissemination of a booklet or handbook for IRBs and researchers be a top priority project for Science Directorate staff.

Item 5 Update on BSA Advisory Group on Research with Human Participants

BSA reviewed the list of experts who can provide advice when needed to Science Directorate staff on regulatory and/or ethical issues relating to research with human participants. BSA members suggested enlarging the list to include psychologists in business schools, social psychologists, cognitive psychologists, psychologists who do web based research, and psychologists who do research with fMRI, substance abuse, secondary analysis, and use the population of prison inmates.

BSA members also suggested tapping into the group of individuals who attended the invitation only convention meeting of division representatives to discuss problems with IRBs.

Dr. Eccles suggested that staff check to see what DBASSE is developing on the issue of research with human participants.

BSA members also commended staff for the excellent letter sent to Dr. Eric Meslin, Executive Director, National Bioethics Advisory Commission (NBAC)

commenting on the draft of the NBAC report on *Ethical and Policy Issues in Research Involving Human Participants*.

Item 6 Issues Related to the Journals and Publications Area

Dr. Reis asked that the board discuss the issue of changes being published in journals but not reflected in the original entries in PsycINFO and other databases. He cited the example of a recent retraction in *JPSP* of a paper published by Dr. Karen Ruggiero. The retraction was published and was noted in the 2000 PsycINFO, but the article was not deleted from the PsycINFO database and the retraction was not noted by search procedures that didn't include the newer corrected record. Science Directorate staff contacted staff in the Publications and Communications Office and collected information on PsycINFO policy and procedure and shared this information with BSA members.

Dr. Reis demonstrated that if you do a search on PsycINFO and restrict the time frame, you do not get the retraction for the Ruggiero article. His time restricted PsycINFO search retrieved only the article with no mention of a retraction. Dr. Reis is concerned that if the article is not totally retracted from PsycINFO, then it still can be considered credible research.

BSA members recommended that a retraction be linked to all mentions of the original article. BSA members also recommended that the abstract to the original article be linked to a statement that says this article is invalid and should not be included in the literature. They also suggested using the retraction in the bibliography. Another suggestion from BSA was to send to libraries a sticky note sheet that could be affixed to the paper version of the article so paper readers will know the article is invalid. This sticky note sheet could also be used for errata. BSA members recommended that APA try to get other databases to do the same with their retractions and errata.

Discussion focused on other science data resources and it was noted that medicine also does not print retractions or errors. BSA suggested that staff lobby to change this. Dr. Gernsbacher agreed to write an article on the Medline policy of not updating conclusions based on false data.

Dr. Banaji asked that the board discuss APA's policy regarding the placement of published and prepublished papers on the web. The Board decided to send an item to the Publications and Communications (P&C) Board requesting consideration of the change in policy be that authors can present the final version of their published paper.

Item 7 Update and Plans for Advanced Training Institutes Program

BSA reviewed the plans for the June 2002 ATI on fMRI at Massachusetts General Hospital and reviewed the plans for the June 2002 ATI on Longitudinal Methods.

Board members agreed that first priority for placement in the ATIs should be given to applicants who are APA members. This selection criterion could be advertised

and could possibly become a benefit of membership. Individuals who are interested in the ATI could be encouraged to become APA members at the same time they are applying for the ATI.

Board members agreed that the registration rates should be increased. Staff provided two examples of tuition options and BSA members voted to endorse an option where non-member rates are proportionately higher than member rates; e.g., member rate would be \$250 and the nonmember rate would be \$500 for faculty, and an analogous spread for students.

When considering applicants, staff should not be constrained by disciplinary boundaries but consider if the applicant can use the information being taught at the ATI in his/her psychological science research relevant work.

BSA discussed the following topics for future ATIs:

- ◆ Techniques for Experimental social psychology—(suggested Drs. Richard Gonzales and James Jackson, University of Michigan) (consult with Dr. Eccles)
- ◆ Cutting Edge Cognitive Measures in Social Psychology
- ◆ How to Do Web Based Experiments
- ◆ Techniques for studying Implicit Memory
- ◆ Advanced advanced fMRI
- ◆ Longitudinal data sets: (a) Mining the NICHD Data Set and (b) other analogous data sets
- ◆ Genetics: Science Directorate staff had been trying to get in touch with Dr. John Hewitt regarding the Advisory Group on Genetics and their primary task of developing an ATI on Genetics a week before the BSA meeting. Dr. Gernsbacher reported that it was possible to provide Dr. Hewitt with additional information and that staff should contact Dr. Hewitt again.

Item 8 Academic Enhancement Initiative

BSA received information on the status of the Academic Enhancement Initiative.

Item 9 Outside Representatives

BSA appointed Dr. Neal Johnson for another 3-year term as liaison to AAAS. His second term will begin 2002.

BSA reviewed the status of Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC) and was reminded that BSA appointed Dr. Nancy Ator for another 3-year term as APA liaison that will begin in 2002.

BSA approved the appointment of Dr. Roger K.R. Thompson for a 3-year term as liaison to National Association for Biomedical Research (NABR) to begin immediately.

Staff asked the board to evaluate the importance of having a liaison to the organizations on the list provided in the agenda book and to suggest additional organizations that should have APA liaisons. Dr. Ator suggested that College on Problems of Drug Dependence (CPDD) be removed from the list because psychologists are very involved in the organization so APA doesn't need to feel like it needs to protect the interests of psychologists. BSA asked staff to gather information about the International Test Commission (ITC) so they can evaluate its importance at the next meeting. The board decided to remove the Joint Committee on Standards for the Evaluation of Educational Programs and Projects from the list. BSA recommended that the Society for Neuroscience remain on the list so that the board can be informed of its projects and activities by the liaison. BSA recommended that staff check into the possibility of appointing a liaison to Association for the Accreditation of Human Research Protection Programs (AAHRP) and to the Center for Advanced Study in the Behavioral Sciences.

Staff will contact BSA by email to get additional organizations that might be added to the list and include them in the March 2002 outside organizations agenda item so that the board can decide what organizations to add or delete.

Item 10 BSA Sponsored Programs at the 2002 Convention

BSA approved the request from CARE for one convention hour.

BSA members agreed that the Neal Miller Lecture should be scheduled during the plenary cluster and directed staff to draft a memo to the Board of Convention Affairs (BCA) offering BSA assistance in helping to schedule the Neal Miller Lecture during the plenary cluster.

BSA rank ordered the following individuals for the Neal Miller Lecture for the 2002 APA Convention:

Elizabeth Gould, Princeton
Bruce McEwen, Rockefeller
Sue Carter, Illinois, Chicago
Christopher Coe
Michael Meany
Klaus Miczek

Item 11 Annual APA Convention – Plans for 2002

BSA reviewed the plans for the restructuring of the APA Convention. Dr. Gernsbacher informed the board about the cluster groups that will be planning part of the convention program.

Drs. William Howell and Brian Wilcox, from the Board of Convention Affairs (BCA), met with BSA to discuss the placement of the Master Lecturers during the

convention. BSA supported the placement of the Master Lecturers during the plenary time of the convention. BSA members strongly urged BCA to review the placement of the Master Lecturers with Science Directorate staff and BSA members to minimize any conflict among speakers within the plenary time frame.

Item 12 Report from Executive Director for Science

Dr. Kurt Salzinger, Executive Director for Science, reported on several initiatives and activities that are being developed in the Science Directorate. Examples of some of the activities include: (a) divisional involvement in suggesting names and/or information about terrorism and its aftermath from a scientific point of view; (b) volunteering scientific psychological services at various government agencies such as the FBI, Secret Service, State Department, and Federal Aviation Administration; and (c) encouraging researchers to write op-ed pieces for local or national newspapers.

Item 13 Science Advocacy Update

Staff in the Public Policy Office (PPO) presented a briefing of their activities to the board. From the aftermath to the September 11 events to the current budget picture to advocacy events and agency highlights, BSA members were briefed on PPO activities since the March meeting.

Item 14 Advisory Group on Conducting Research on the Internet

BSA received an update on the formation of the Advisory Group on Conducting Research on the Internet. Dr. Banaji briefed the board on the make-up of the group and the upcoming meeting, December 8-9, 2001.

Item 15 Update on Decade of Behavior

BSA received an update on the activities of the Decade of Behavior since the March 2001 BSA meeting. The Decade of Behavior Advisory Committee is scheduled to meet November 2-3, 2001.

Item 16 International Issues Update

BSA received an update on several activities being pursued through the US National Committee for the International Union of Psychological Science (IUPsyS) to which APA nominates members.

Item 17 APA Presidential Initiatives

Dr. Philip Zimbardo met with BSA and requested their feedback on one of his presidential initiatives that involves putting together a compendium of psychological research that makes a difference. BSA members suggested that the full APA membership be invited to submit discoveries in addition to divisions through an ad in the *Monitor*. To

be considered for the compendium, standards should be set for what constitutes a finding or discovery. One standard could be the evidence of replication. BSA members suggested that the effects of an entire program of research on a certain topic could be considered.

He would like Divisions each to send one entry for ways in which people have been made happier, healthier, more prosperous, or “better” by research. He is looking for a measurable effect in the dependent variable, and ideally for research that has been replicated and operationalized to real world solutions.

BSA noted that translational research at NIMH is underway.

Item 18 Master Lecture Series

BSA received an update on the Master Lecture Series. The 2002 speakers will be Drs. Steven Porges, Peter Bentler, Lyn Abramson and Lauren Alloy, and Anne Peplau. BSA met with representatives from the Board of Convention Affairs to discuss the scheduling of the Master Lecture series. See minute for agenda item 11.

Item 19 APA Distinguished Scientist Lecturer Program

BSA received an update on the APA Distinguished Scientist Lecturer Program. The 2002 speakers will be Drs. John Cacioppo, Megan Gunnar, and Joseph LeDoux.

Item 20 CARE Young Investigator Award

BSA discussed the concept of a BSA/CARE Young Investigator Award. CARE asked BSA to approve in principle the development of an "honorary" BSA/CARE award, that would be presented to a young investigator for outstanding research using animals. The board noted that one of the Distinguished Scientific Awards for an Early Career Contribution to Psychology is in the area of animal learning and behavior, comparative. BSA members were concerned that the proposed BSA/CARE award would be redundant with the Early Career Award.

BSA members would like CARE to further develop the proposal for this award, including the justification for the award, how it is unique, and how it differs from the early career award. Board members suggested that CARE might consider linking this award to a joint effort with one or more Divisions (e.g; 3, 6, 25, 28). BSA also suggested changing the word "Young" to the word "New" in the proposed title for this award.

Item 21 Derivative Works as Psychological Tests

BSA reviewed the statement, “Use of Subsets of Items from Published Instruments: Implications for Test Users for Educational Training, Research, and Practice.” The board found the current version of the statement had responded to BSA’s previous remarks and had no further comments.

Item 22 Task Force on Psychological Testing on the Internet

BSA received an update on the Task Force on Psychological Testing on the Internet that will meet December 8-9, 2001.

Item 23 Update on Task Force on Statistical Inference

BSA received an update on the activities of the Task Force on Statistical Inference. The Task Force had a session at the 2001 APA Convention and met with authors of methodology and statistics text books and text book publishers during the APA Convention.

Item 24 Minutes from the CARE and CPTA Meetings

BSA received copies of the minutes from the March and September, 2001 meetings of CARE and CPTA.

Item 25 Update and Follow Up on Ad Hoc Group on Psychology in the Workplace

BSA reviewed the recommendations generated by the Ad Hoc Group on Psychology in the Workplace and had some additional suggestions:

--Add to point #2 *Inform the public, policymakers, business leaders, etc. about psychology's contribution to the workplace* the idea of finding psychology PhD individuals who are at high levels in corporations to find out what their needs are;

--Broaden the discussion to include other divisions (e.g., health, women, clinical)

--If research is done in the workplace, there may be a need to educate a university Institutional Review Board (IRB) on what's involved in doing psychological research in the workplace. A workshop or brochure could be developed.

--Collaborations with state associations to inform industry leaders about applied psychology contributions could be initiated

--A topic area of particular interest might be an analysis of compensation programs

Item 26 APA Summer Science Institute

BSA received an update on the Summer Science Institute that took place June 2001 at the University of Colorado at Boulder.

Item 27 Update on Scientific Conferences Program

BSA received an update on the Scientific Conferences Program.

Item 28 Update on Psychology Exhibition

BSA received an update on the Psychology Exhibition program. The smaller psychology exhibition is touring the country with stops at the Reuben H. Fleet Science Center in San Diego through January 4, 2002 and then travel to the Science Museum of Virginia in Richmond in February 2002.

Item 29 Occupational Health Psychology Curriculum Development Project

BSA received an update on APA's cooperative agreement with the National Institute for Occupational Safety and Health (NIOSH) to fund the development of graduate-level curricula in occupational health psychology (OHP).

A meeting is being planned for faculty from each of the universities and other experts with APA and NIOSH staff in November to discuss the direction of the field.

Item 30 Targeted Nominations Statement for 2002

BSA revised its targeted nominations statement that is included in the "2002 Call for Nominations" as follows:

Board of Scientific Affairs (BSA)
3 to be elected for a 3 year term, 1/2003-1/2005

The Board of Scientific Affairs (BSA) encourages nominations from distinguished scientists and is particularly interested in receiving nominations from scientists in the following areas:

- Psychopharmacology/Addictions/Experimental Analysis of Behavior
- Cognition/Perception/Memory/Learning
- Workplace/Industrial/Organizational

Item 31 Nominations to the Committee on Psychological Tests and Assessment

BSA selected the following individuals to serve three-year terms on CPTA:

Achilles Bardo, PhD
Jerry Sweet, PhD
Rebecca Zwick, PhD

Item 32 Nominees for Committee on Animal Research and Ethics (CARE) and the Committee on Scientific Awards (COSA)

CARE: BSA selected the following individuals to serve three-year terms on

Mark Galizio, PhD
Lisa Savage, PhD

BSA reviewed the list of COSA nominees who have agreed to serve if asked and suggested a ranking of individuals. This ranking will be shared with the Awards Committee by email when they will decide whom they would like to appoint to the committee.

Item 33 Speaker Recommendations for 28th International Congress of Psychology

BSA members submitted nominations for speakers for the 28th International Congress of Psychology that will be held in Beijing, China, August 8-13, 2004.

Item 34 Recommendation from the Task Force on Membership, Retention, and Recruitment

BSA found the report of the Task Force on Membership, Retention, and Recruitment a helpful first step in generating ideas to retain and recruit members to APA. BSA members were skeptical that a scientific psychology leadership conference was the most effective way of achieving membership goals. Board members decided to discuss more dramatic actions that the association could take to achieve these goals.

- One idea to recruit scientist members would be to offer free access to full text journals on the web.
- Offer a reduced dues fee to members who recruit new members
- One idea for retaining scientist members would be to produce a fact sheet briefly describing the value of APA's public policy office. For example, listing the actions taken by the public policy office and the results these actions have on an individual member may help members see the benefit of their membership (e.g., report or legislative language, agency research funding increases).
- Provide newer members with information about what they can get for their APA membership—a journal, career development, attend convention for an opportunity to meet others in your same area, etc.
- Create an institutional membership category: Universities have budgets for all faculty to be members of professional organizations and providing a group rate for a psychology department might increase membership.
- Encourage faculty to inform students of the importance of becoming an APA member as part of the training program.

- Encourage the Membership Committee to recommend the continuation of the dual dues membership discount for scientists.

Item 35 Work Group to Study Equity Between Divisions and Affiliates of the Numbers of Members and Representation on Council (#58)

BSA supported the notion of having a group meet to study the equity between divisions and affiliates in seeking recognition in APA, provided that information is gathered from appropriate sources within APA. Those sources could include consultation with members of the Board of Directors, other governance groups, divisions, and current Council members who can provide background information prior to the meeting so that meeting participants can be fully informed. Information could be gathered by email, regular mail, and conference calls.

BSA understands the importance of this issue but recognizes the timing may not be the best because issues of representation have recently been extensively considered by Council.

Item 36 Primary Care Psychology

BSA discussed the Council new business item requesting that APA seek to include psychologists in the designation of primary health care providers in all relevant federal, state, and local regulations, and in federal funding programs designated for primary care practitioners. The Board endorsed the main motion with the understanding that action is already being taken in pursuit of this goal.

Item 37 Elections and Nominations for the Board of Directors - New Business Item #53

The Board of Scientific Affairs supported the substitute main motion requesting that candidates for the Board of Directors be provided the opportunity to submit a statement of 500 words or less when they return their questionnaire indicating interest in nomination. BSA members noted that the evaluation component of this motion is important.

Item 38 APA Working Group on Children's Mental Health

BSA received an update on the status and activities of the APA Working Group on Children's Mental Health.

Item 39 Changes in Association Rules Regarding the Promulgation of Guidelines

BSA reviewed the new business item from Council requesting that a temporary moratorium be placed on the promulgation of any guidelines now in process and being proposed by an APA Board or Committee or by any APA Division until the "Administrative Procedures for Review and Approval of Division Guidelines" is

complete, until *Criteria for Practice Guideline Development and Evaluation* have been adopted by Council, and until BEA can complete work on a template for evaluating proposed education or training guidelines. The main motion also proposes that guidelines documents must be approved and promulgated only as APA policy, removing the possibility for guidelines to be approved and promulgated solely as the policy of a particular Division.

BSA members voiced concern over the possible narrow scope of this proposal because of the important guidelines that have already been developed by scientists on a board, committee, or within divisions, the future guidelines that may need to be developed, and the current guidelines that will need to be updated. BSA would like to work with BPA as it develops its substitute motion for this new business item.

Other Discussions:

Dr. Ray Fowler met with BSA members to brief them on the financial status of the organization. Dr. Fowler said that the association may experience large deficits this year and in the next two to three years so some program cuts and other plans will be taken to keep the deficits manageable. Staff layoffs are not part of the plan.

Drs. Ron Levant and Laura Barbanel informed BSA about the Board of Directors newly created Subcommittee on Terrorism. The subcommittee is working with Senator Kennedy's office to include psychology in the bioterrorism bill being considered in Congress. The subcommittee also is working to have a top-level psychologist advisor be named to the Office on Homeland Security. Drs. Levant and Barbanel asked BSA members for suggestions on research findings that would be appropriate for the subcommittee to share with government officials like findings on resiliency research.

In executive session, Dr. Gernsbacher briefed the BSA members on the APA Working Group on the *American Psychologist*.

IV. BOARD OF DIRECTORS

Activities of the Board of Directors Subcommittee on APA's Response to Terrorism

Issue

At its December 7-9, 2001 meeting, the Board of Directors took emergency action and adopted the Resolution on Terrorism (Exhibit 1). The Board is also allocated 3 of its 2002 convention hours for a Symposium (2 hours) and Town Hall Meeting (1 hour) on Psychology Responds to the Threat and Impact of Terrorism sponsored by the APA Board of Directors Subcommittee on Psychology's Response to Terrorism.

In the wake of the events of September 11, 2001, the Board of Directors created a Subcommittee on APA's Response to Terrorism. Subcommittee members are Ronald F. Levant, EdD, Laura Barbanel, EdD, and Nathan W. Perry, PhD. APA staff working on the Subcommittee comes from all directorates, with the Science Directorate as the lead.

The Subcommittee has continued to collect names of experts in terrorism and areas related to it. Staff are beginning to categorize the names and have been sending out some of them in response to a few inquiries. The Decade of Behavior has expressed an interest in having a congressional briefing and together with the Public Policy Office, we are beginning to investigate the means of doing that on the subject of terrorism. We have visited with the Behavioral Sciences Unit of the FBI Academy and in response to their request we are bringing psychologist experts to them for discussion of various problems such as how to interrogate suspects and the like.

Implementation Plan

None.

Fiscal Implications

None.

Main Motion

None.

Exhibits

1. Resolution on Terrorism

Kurt Salzinger
Science Directorate

Henry Tomes
Public Interest Directorate

Dear Colleague:

In the past few months, we've been approached by people in government wanting to discuss the ethics of psychological techniques being used in government investigations. The tempo of those discussions increased after the Abu Ghraib abuses came to light and stimulated a great deal of interest in the ethics of psychology as a tool in national security investigations.

APA staff met internally at the end of May to plan a lunch meeting to bring a group of people together in a very low-key way to identify what the issues are. The purpose of the meeting would not be to assess what has occurred nor to have any type of investigative component whatsoever; rather, the purpose would be to bring together people with an interest in the ethical aspects of investigations, to identify what the important questions are, and then to assess how well our current ethics policies help psychologists who do this work sort out appropriate from inappropriate uses of psychology. Our Ethics Director, Steve Behnke, believes the adjudication process should not be used as a mechanism to put people on notice about what is acceptable behavior for psychologists conducting national security investigations--but that we should find out from individuals involved in the work what the salient issues are, and then if more or better guidance is needed, engage in discussions about how best to provide such guidance (e.g., ethics consultations).

Steve wants to take a forward looking, positive approach, in which we convey a sensitivity to and appreciation of the important work psychologists are doing in the national security arena, and in a supportive way offer our assistance in helping them navigate through thorny ethical dilemmas, if they feel that need (his informal conversations with people in the field suggest the need is there).

We've set up a lunch meeting here at APA HQ scheduled for July 20th from 12:00-2:00 in our Board Room so that we can start talking about what role we and other professional associations can play as convening authorities for a broader discussion (we'll also have reps from FBI, CIA, DoD, RAND, OSTP etc...). I was hoping you and/or Steve Nelson might be interested in joining us (we're trying to limit participation to behavioral scientists for the time being and in the spirit of keeping this a low-key activity until we sort out what we want to do, I'd appreciate it if you could limit distribution of this to staff on a need-to-know basis).

Ethical Principles of Psychologists and Code of Conduct
Chronology of Revision Following Adoption of 1992 Ethics Code
Revised December 2002

1. Sept 1991. Ethics Committee's nonconfidential minutes show that they "accepted the "Subcommittee's recommendation that there be an ongoing process of revision." (Agenda Item #2, Paragraph 1)
2. Feb 1992. Council received the statement: "The Ethics Committee has also agreed to continue an ongoing process of considering revision ideas." (Agenda Item # 3, Paragraph 5)
3. Aug 1992. On the recommendation of the Board of Directors and the Ethics Committee, Council voted to adopt the March 11, 1992, draft of the APA ethics code, subject to the amendments adopted by Council at this convention session. (Agenda Item # 8) [See Entry # 11.]
4. Aug 1992. Council received a new business item (submitted by Milton Schwebel, Ph.D.) suggesting that the Ethical Principles be recognized "as a living document" and proposes that "through a subcommittee of the EC, the need for revision of the EPs be ascertained on a continuous basis and be reported to Council on an annual basis for such action as Council may deem appropriate." (Agenda Item 30b) [See Entry # 10.]
5. Sept 1992. Memo from Stanley E. Jones, Ph.D., to Council stated that the futures list and 22 amendments remaining from the August 1992 Council meeting would be referred to the Ethics Committee, which will "determine a mechanism for tracking suggestions for future revision of the code." (C/R 2/93 Agenda Item # 36, Exhibit 1)
6. Nov 1992. Ethics Committee developed a plan for tune-up and major revisions of Ethics Code. (Agenda Item # 7) Ad Hoc Policy and Education Committee (PEC) established as of March 1993 with its mission stated as " coordination of the ethical principles revisions and developing and planning educational policy and programs." (Agenda Item # 8)
7. Dec 1992. Plan was presented to the Board of Directors (Agenda Item # 5)
8. Dec 1992. Policy and Education Task Force (predecessor to the PEC) reviewed and revised revision action plan (1/6/93). (Agenda Item # 24)
9. January 26, 1993. Mailing from Ethics Office to boards and committees, state associations, state boards, and divisions providing copy of revision plan (revised 1/6/93) and requesting a designated consultant from each group.
10. Feb 1993. B/D voted to recommend that Council reject the motion (stated in # 4, above) noting that the EC's plan already includes a provision for reporting to Council at least annually the status of revision efforts. (Agenda Item # 5)
11. Feb 1993. Council voted, on recommendation of B/D and EC, to defeat motion proposing the establishment of an ongoing ethical principle revision subcommittee. (Agenda Item # 5) Each of the 22 amendments not taken up at Council's August meeting was withdrawn by the originator. (Agenda Item # 4, Paragraph 6)
Council received as information a status report on the implementation of the new Ethics Code and

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- future Ethical Principles revisions. (Agenda Item # 36)
12. March 1993. Call for comments ran in "Briefly" section of March 1993 Monitor.
 13. April 1993. EC accepted PETF's modification (1/6/93) to revision plan (Agenda Item # 8) and submitted 22 amendments withdrawn from Council consideration to PEC for next revision. (Agenda Item # 6)
 14. May 1993. PEC developed criteria for inclusion/exclusion of items for consideration in tune-up revision. Reviewed comments received to that point (#55, including 22 amendments carried from 8/92 Council, 25 items from the futures list, and 7 new comments), discussed role of consultants. Comprehensive minutes were distributed as noted below. (Agenda Item #6)
 15. May 1993. Second request for consultants mailed.
 16. June 1, 1993. First mailing to designated consultants. Packet contained letter explaining role of consultants and asking for input, PEC May 1993 minutes, copy of revision plan, criteria for inclusion/exclusion, criteria for model standard, comments on Code, review of comments, synopses of 22 amendments, and structure for submitting comments.
 17. Aug 1993. Council received information on the process of considering revisions to the 1992 Ethics Code being undertaken by the PEC, including the minutes of their May 1993 meeting. (Agenda Item # 42)
 18. Oct 1993. PEC reviewed comments received since last meeting (56 - 66), revised criteria for inclusion/exclusion, recommended to EC revision of four standards. (Agenda Item # 3)
 19. Nov 1993. EC reviewed PEC's recommendations and recommended that scheduled consideration of revision by Council be delayed by one year (from early 1995 to early 1996) and provided a rationale for not proceeding immediately. See Paragraph 2 for discussion of whether an actual change in the Code is required at a specific time. (Agenda Item # 11)
 20. Dec 1993. B/D received information on the status of a possible "tune-up" revision to the Ethics Code being coordinated by the EC Ad Hoc Policy and Education Committee.(Agenda Item # 56)
 21. December 21, 1993. Second mailing from Ethics Office to designated consultants. Packet contained PEC and EC recommendations on revision, list of comments, copies of comments received since last PEC meeting, review of comments, revision plan, and lists of consultants. New consultants also received the earlier mailing.
 22. Feb 1994. Council received information on the revision. (Agenda Item # 54)
 23. March 1994. EC received information on status of revision. (Agenda Item # 15)
 24. April 1994. Second call for comments ran in "Briefly" section of April Monitor.
 25. Oct 1994. PEC reviewed comments received since last meeting (67 - 88) and recommended to EC

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"that a tune-up revision not be undertaken at this time, and that the process of the next major revision proceed." The PEC also recommended "that the Council of Representatives make the final decision regarding whether a tune-up revision proceed at this time." (Agenda Items 4A - 4F and 5)

26. Oct 1994. EC reviewed the PEC's recommendation and back-up materials and unanimously voted to support the motion as presented (see above). The Committee deferred action regarding proposed changes if the tune-up proceeds. If that occurs, the EC will review proposals at its March 1995 meeting. (Agenda Item # 9)
27. December 1, 1994. Mailing to designated consultants. Packet included cover memo with "book" of the following enclosures: EC draft minute re the tune-up (10/94), PEC draft minute re the revision 10/94), PEC recommendations (with back-up), and comments received since the last mailing.
28. Dec 1994. B/D voted to endorse the EC's recommendation that the Council "endorse continuing with the next major revision of the "Ethical Principles of Psychologists and Code of Conduct" and not proceeding with the tune-up revision."
29. Feb 1995. On the recommendation of the Board of Directors and the Ethics Committee, Council endorsed continuing with the next major revision of the "Ethical Principles of Psychologists and Code of Conduct" and not proceeding with the tune-up revision. (Agenda Item # 5)
30. March 20, 1995. With the Council action in February 1995, work on the tune-up revision was concluded and designated consultants were informed that their task was completed.
31. March 20, 1995. As a first step in the major revision process, the PEC mailed a survey on possible revision methods to Council, the Board of Directors, boards and committees, divisions, state and provincial associations, licensure boards and other relevant groups. The survey was also published in the May 1995 *Monitor*.
32. July 1995. PEC wrote a recommendation (based on the results of the methodology survey) to the EC on the method for next revision of the Ethics Code. [Original draft of recommendation, 7/16/96; revised 8/22/95] (Agenda Item # 4)
33. July 1995. EC adopted a plan for the next Ethics Code revision based on the recommendation of the PEC. (Agenda Item # 5)
34. Aug 1995. B/D received an information update on the conclusion of the tune-up revision and the progress of the methodology survey regarding possible revision methods. (Agenda Item # 12)
35. Aug 1995. Council received an information item on the decision by the Board and EC to proceed with the next major revision and not to proceed with the tune-up revision. The item also contained information on the PEC's survey regarding possible revision methods. (Agenda Item # 33)
36. Nov 1995. The EC revised its plan and timeline for the next revision of the Ethics Code and approved a mission statement for the Ethics Code Task Force (ECTF) as well as a call for nominations. The EC planned for a first meeting of the ECTF in the fall of 1996. (Agenda Item # 7)

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37. Dec 1995. B/D recommended that the Council designate contingency funds to support the proposal by the EC for one meeting of the ECTF in 1996. (Agenda Item # 37)
38. Jan. 1996. The EC sunset the PEC and designated its funding to the Ethics Code Task Force for an initial meeting in the fall of 1996.
39. Feb 1996. Council received an information item on the EC's plan for the next major review of the Ethics Code. (Agenda Item # 50)
40. Mar 1996. EC voted to request funding for three meetings of the ECTF and completion of the critical incident study in 1997. (Agenda Item # 12)
41. March 1996. A call for nominations to a task force to revise the Association's Ethics Code ran in the *APA Monitor* and was distributed in an information item to the Board of Directors, Council of Representatives, and Boards and Committees.
42. June 1996. The Board of Directors approved a continuation of the Ethics Code Task Force and approved funding for a single meeting in the fall of 1997 delaying the original plan by one year as a result of budgetary constraints.
43. July 1996. EC received as information an item from the B/D affirming the budgetary decision to delay ECTF activities by one year. Accordingly, the EC delayed the appointment of ECTF members to its November meeting. (Agenda Item 5)
44. Aug 1996. Council received as information an item detailing the Board's budgetary decision to delay ECTF activities by one year providing funding for a single meeting in 1997.
45. Nov 1996. Consolidated Committees received as information a request from the EC for additional nominees to the ECTF.
46. Nov 1996. The EC appointed a nine-member task force, which would also have representatives from the Board of Directors and the Council of Representatives. In addition, the EC voted to include a representative from APAGS .
47. Dec 1996. B/D received an information item on the EC's appointment of nine ECTF members.
48. Feb 1997. At the request of the EC, Dorothy W. Cantor, Psy.D., APA President, appointed representatives from the Board of Directors and the Council of Representatives to the ECTF.
49. Feb 1997. B/D received an information item reporting on the appointment of representatives from the B/D and Council to the ECTF.
50. Feb 1997. Council received an information item reporting the EC's appointment of members of the ECTF and the appointment of representatives to the ECTF from the Board, Council and APAGS.
51. March 1997. Following the March EC meeting, the Chair of the EC appointed a representative from the Committee to the ECTF.

52. June 1997. B/D voted to approve a motion changing the structure of the ECTF so that the “liaisons” from the Board, Council, and APAGS would be voting members of the task force. This motion was later changed to a recommendation (following the determination that the Board did not have authority to require the action).
53. July 1997. EC received the Board’s recommendation on the change of voting status and requested an opportunity to for discussion between the Board and Committee before acting on the recommendation. (Agenda Item # 21)
54. Aug 1997. EC voted (by mail) to change the status of “liaisons” from nonvoting to voting members of the ECTF.
55. Aug 1997. BD received an information item and a supplemental memo stating that by mail vote, the EC agreed to change the voting status of the “liaisons” to the ECTF in response to the Board’s strong recommendation.
56. Aug 1997. Council received an information update on the question of voting status for “liaisons” to the ECTF and on the membership of the group. They also received a supplemental item reporting the change of voting status for “liaisons.”
57. Oct 1997. The ECTF met for the first time. Highlights of the meeting included review of the Ethics Committee’s plan for revision of the Ethics Code, discussion of a plan for information gathering, and the establishment of process to be used by the ECTF to accomplish its mission. The task force drafted a “Call for Comments” on the 1992 Ethics Code, which first ran in the *APA Monitor* in January 1998 and continued each month through August 1998.
58. Nov 1997. EC voted to request that the BD provide additional funding for two additional meetings (a total of three meetings for the year) of the ECTF in 1998 with the funding to come from the Board’s contingency fund. (Agenda Item # 7)
59. Dec 1997. BD received the EC’s request for funding for two additional meetings in 1998 and voted to recommend that Council allocate funds for one additional meeting of the ECTF in 1998 and funding for additional staff.
60. Feb 1998. Council voted to approve the budget with funds for one additional meeting of the ECTF in 1998 and funding for additional staff.
61. Feb 1998. Celia B. Fisher, Ph.D., Chair, ECTF, and Brian L. Wilcox, Ph.D., presented an overview of ECTF activities at the plenary session of the Council of Representatives.
62. March 1998. The EC voted to revise the ECTF mission statement in response to recommendations formulated at the October ECTF meeting. The ECTF’s mission is to implement the Ethics Committee’s plan for the new review of the Ethics Code, to regularly report to the Ethics Committee regarding revision processes, and to submit to the Ethics Committee a proposed revision of the Ethics Code.

63. March 1998. The ECTF met for the second time. Highlights of the meeting included review of collected comments on the Ethics Code, consideration of purpose and format of the Ethics Code, and implementation of the ECTF's information gathering plan. In addition, the ECTF received as information from the Ethics Committee (March 1998), the revised ECTF mission statement to eliminate the distinction between determining the need for revision and beginning work on the revision and to eliminate the use of focus groups to solicit opinions on style and format.
64. April 1998. The ECTF's critical incident survey was mailed to 3000 members. Responses were received from 311 members and 5 students. Of the total responses, 194 were presented to the ECTF. Responses not presented were eliminated if the response did not contain a critical incident, contained confidential information, or was illegible. The 194 responses contained a total of 270 separate incidents.
65. Aug 1998. The ECTF held a 50-minute discussion session with audience participation at the 106th Annual Convention. The focus of the discussion was ethics enforcement activity. In addition, 500 copies of the critical incident survey were distributed to students at the convention.
66. Oct 1998. The ECTF met for a third time. Highlights of the meeting included consideration of a working format to use when drafting ethical standards, review of critical incidents received in response to the critical incident survey, development and modeling of the ethical standard drafting process, and strategic planning of goals and activities for 1999.
67. Nov 1998. EC voted to request funding for an additional ECTF meeting in 2000 and subsequent years through completion of the Code revision (planned for 2002).
68. Dec 1998. BD received the EC's request for funding for an additional ECTF meeting in 2000 and subsequent years and deferred the item to the June 1999 meeting.
69. Feb 1999. ECTF (represented by Gerald Koocher on behalf of Celia B. Fisher and Brian L. Wilcox who were unable to attend) provided the plenary session of Council with an update on the activities of the revision. In addition Council received a written information item including budget requests by the EC on behalf of the ECTF.
70. Apr 1999. The ECTF met for the fourth time. Highlights of the meeting included review of comments received, refinement of criteria for revising and writing standards, and creation of a first draft of the enforceable standards, which was provided to the Board, Council, and boards and committees.
71. June 1999. BD considered the EC's request for funding for a third meeting of the ECTF in 2000. (This item had been deferred from the Dec 1998 meeting.) and passed a budget subject to Council approval in August, which included a third meeting of the ECTF in 2000.
72. July 1999. The July/August issue of the *APA Monitor* published an article providing members with information about proposed revisions to the enforceable standards based on the ECTF's April 1999 draft and invited members' comments on the proposed changes.
73. July 1999. EC received an information regarding recent actions by the ECTF. In addition, the EC

received a request for review of Revision Draft 1.

74. Aug 1999. Council passed the 2000 Budget, which included funds for three meetings of the ECTF in 2000.
75. Aug 1999. ECTF held a 50-minute open discussion session at the APA convention. Celia B. Fisher presented a synopsis of the activities of the ECTF to date and invited audience feedback on the changes proposed in the July/August *Monitor* article and comments on any aspects of the current (1992) Code.
76. Oct 1999. The ECTF met for a fifth time. Highlights of the meeting including reviewing comments that had been received in response to the article about the revision published in the July/August *Monitor*, comments that had been received from divisions (in response to an invitation from Celia B. Fisher) and all other submitted comments. In response to this feedback, the ECTF completed most of a second draft of the enforceable standards of the Code.
77. Nov 1999. The ECTF held a conference call to conclude the unfinished work on the Draft 2 of the enforceable standards. Minutes of the conference call, which included Draft 2 were provided to the Board, Council, and boards and committees.
78. Dec 1999. BD received an information update item including changes to the ECTF membership based on a resignation and a new appointment from APAGS.
79. Feb 2000. BD received an information update including a copy of Draft 2 and a change to the membership based on a new appointment from the EC.
80. Feb 2000. Council received an information update including a copy of Draft 2 and changes to the membership based on a resignation and new appointments from APAGS and the EC.
81. March 2000. The ECTF met for a sixth time. Highlights of the meeting included reviewing comments received since the October 1999 meeting and distribution of Draft 2. In response to this feedback and comments, the ECTF completed a third draft, including a revised introduction, preamble, and general principles. Based on completion of Draft 3, the ECTF decided to not to meet in June 2000.
82. March 2000. Boards and committees (spring consolidated meetings) received an information update on recent actions by the ECTF, including a copy of Draft 2.
83. March/April 2000. EC received an information update on actions by the ECTF and a request for review of the proposed revision schedule. The EC voted unanimously “that the members of the Ethics Committee authorize the Chair to approve final changes to the draft of the Ethics Code being prepared for submission to the Board of Directors and for publication for comment and general distribution.”
84. April/May 2000. The ECTF requested feedback from the EC, legal counsel, and BD members on Revision Draft 3. The ECTF also requested suggestions from Rhea Farberman (Public Communications Office) on how to involve the public in the revision process.

85. June 2000. BD received an information update including Draft 3 and a memo indicating the President's intention to address the draft and provide the requested feedback at the October 2000 retreat.
86. July 2000. EC received an information update and a request for comprehensive review of Ethics Code Revision Draft 3.
87. July/August 2000. ECTF published an article in the APA Monitor highlighting the ongoing work of the revision.
88. Aug. 2000. Council received an information update on actions by the ECTF including Revision Draft 3. Council voted to approve a resolution requiring that the ECTF be expanded to include one seat for a person with a clinical background in Police & Public Safety Psychology, Correctional Psychology, or Military Psychology. (Agenda Item # 16)
89. Sept. and Oct. 2000. Consolidated Meetings received an information update on actions by the ECTF including Revision Draft 3.
90. Sept. 2000. Ethics Committee at its retreat meeting selected Dennis J. Grill, Ph.D., to serve on the ECTF representing the constituency of policy and public safety psychology, correctional psychology, or military psychology.
91. Oct. 2000. Board of Directors met with ECTF Chair to discuss and provide feedback on Ethics Code Revision Draft 3.
92. Oct. 2000. ECTF met for the seventh time, reviewed and incorporated feedback from Oct Board meeting, and all comments from individuals and groups. ECTF produced Revision Draft 4 for approval by the EC and Board for publication for comment in *APA Monitor*, February 2001 and for posting on the APA web site in February 2001.
93. Nov. 2000. Ethics Committee met and selected Mary H. Quigley, JD, to serve as public member on the ECTF, replacing Peter Appleby who passed away in May 2000. Ms. Quigley's term begins January 1, 2001. (Agenda Item # 12)
94. Dec. 2000. Board of Directors met and approved Draft 4 of the revision of the Ethics Code for publication for comment in the APA Monitor, February 2001, and for posting on the APA web site in February 2001. (Agenda Item # 3)
95. Jan. 2001. Three ECTF members and the Director of the Ethics Office attended Division Leadership Conference and encouraged divisions to submit comments on draft Code.
96. Feb. 2001. Board of Directors received an information item with the Monitor presentation of the draft for comment, encouragement to submit comments, and a statement that Celia B. Fisher would be available to meet with the Board to discuss their feedback.

Board of Directors also received a supplemental agenda item requesting contingency funding for a

one time meeting with concerned practitioners. The Board took the following action:
The Board voted to reject the request that the Board allocate \$11,700 from the Board's 2001 contingency funds to support a 2-day meeting of five members of the Ethics Code Task Force and eight representatives of practicing psychologists to address practice issues in the February 2001 Ethics Code Draft and to direct that the Chair of the ECTF select the representatives from the ECTF and chair the meeting.

The Board appointed a subcommittee of the Board (Gerald P. Koocher, PhD, Katherine Nordal, PhD, and Ruth Ullmann Paige, PhD) and Russ Newman, PhD, JD, to meet with Judith P. Steward, PhD, and other members of Division 42 regarding their concerns. The Board asked that the group meet during the upcoming Council meeting, if possible.

97. Feb. 2001. Council of Representatives received an information item with the statement that copies of the Monitor presentation of the draft for comment would be provided at the meeting and encouragement to submit comments.
98. March 2001. Spring Consolidated Meeting groups received an action item requesting feedback on the February 2001 Published Draft. A separate request for feedback with the Consolidated item and attachments was provided to the P & C Board, which did not participate in the Spring meeting.
99. June 2001. ECTF met and considered all comments from individuals and groups received since publishing the draft in the February 2001 *APA Monitor* and posting on the APA web site on February 1, 2001. In response to this feedback, the ECTF created Draft 5, which was posted on the web site in early August with a request for comments. ECTF recommended to the EC that consideration of an urgent need for an interim revision be discontinued because the current revision is so close to completion.
100. July 2001. EC received an update on ECTF progress on the revision (including the minutes with a copy of Draft 5) and voted to accept the ECTF's recommendation that consideration of the urgent need for an interim revision be discontinued.
101. August 2001. Council received an update on the progress of the revision (including the minutes with a copy of Draft 5).
102. August 2001. The Board received an update on the progress of the revision (including the minutes with a copy of Draft 5).
103. Sept. 2001. Fall Consolidated Meetings (first round) received an information item, which included Draft 5 as an exhibit to the Council item and a memo encouraging feedback from boards and committees on Draft 5. September Consolidated Meetings did not take place and groups conducted their business by conference call.
104. Oct. 2001. Fall Consolidated Meetings (second round) received an information item, which included Draft 5 as an exhibit to the Council item and a memo encouraging feedback from boards and committees on Draft 5. A separate request was sent to the P & C Board, which does not meet during Consolidated meetings.

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105. Oct. 2001. ECTF met via conference call and considered all comments from individuals and groups received since the posting of Draft 5 on the APA web site on August 10, 2001. In response to this feedback, the ECTF created Draft 6, which was posted on the web site in early December with a request for comments.
106. Nov. 2001. EC met and reviewed Draft 6 of the revised Ethics Code. The EC prepared and submitted a comment for consideration by the ECTF at its April 2002 meeting. In addition, the EC voted to continue the ECTF in 2002.
107. Dec. 2001. The Board received an update on the progress of the revision (including the minutes with a copy of Draft 6) and a copy of a memo requesting feedback on that draft.
108. Feb. 2002. The Board received an update on the progress of the revision including the information that a redline comparison of the 92 Ethics Code and Draft 6 was available through a link on the Ethics Code Revision page.
109. Feb. 2002. The Council received an update on the progress of the revision (including the minutes of the October 2001 ECTF meeting with a copy of Draft 6) and a copy of the memo requesting feedback on the draft. In addition, Council received a copy of the redline comparison of the 92 Ethics Code and Draft 6 as a supplemental exhibit.
110. March 2002. Consolidated Committee meetings received an update on the progress of the revision (including the agenda item that was provided to Council in February) and a copy of the memo requesting feedback on Draft 6.
111. April 2002. ECTF met and considered all comments received from groups and individuals since the posting of Draft 6 on the web site in early December 2001. In response to this feedback, the ECTF created Draft 7, which was scheduled to be sent to the Ethics Committee in May, the Board in June, and Council for a vote of approval in August 2002.
112. May 2002. Draft 7 conveyed by the Director of the Ethics Office to the Ethics Committee with a request for a vote of approval to send forward to the Board of Directors in June and the Council in August. EC voted to approve draft and send to Board with a request that the Board “forward the draft to the Council of Representatives with a recommendation for approval in August 2002.”
113. June 2002. Board voted to “approve Revision Draft 7 of the Ethical Principles of Psychologists and Code of Conduct and forward the draft to the Council of Representatives with a recommendation for approval in August 2002.”
114. Aug. 2002. Council voted to adopt Draft 7 of the revised Ethics Code with seven amendments added during discussion of the draft and an effective date of June 1, 2003.
115. Sept. 2002. Ethics Committee voted the following motion:
With great appreciation for five years of hard and diligent work, and with special recognition to the Chair, Celia Fisher, Ph.D., the Ethics Committee hereby declares that with the passage of the 2002 Ethics Code by the APA Council of Representatives in August 2002, the mission of the Ethics Code Task Force (ECTF) has been fulfilled, and now moves that the ECTF come to an end as an ad hoc task force of the Ethics Committee.

116. Dec. 2002. The Board received an update on steps taken to complete the revision following adoption of the 2002 Ethics Code by Council in August. These included posting the Code on the APA web site on Oct. 11, 2002 and posting a comparison of the 1992 and 2002 Codes with related tables of standard numbers and titles on October 30, 2002 as well as publishing the 2002 Ethics Code in the December 2002 issue of the American Psychologist.
117. Feb. 2003. Council received an update on steps taken to complete the revision as provided to the Board in December 2002.

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Jones, Stanley E.

From: ARTHUR KOVACS
Sent: Wednesday, September 27, 2000 10:32 AM
To: CELIA FISHER
Subject: Draft #3

Dear Celia:

True to my word, I have completed working my way through Draft #3 generated by your task force, and I am sending you extensive suggestions for your consideration. I am enclosing a text file of our almost final work product.

Christie Morehead - who helped me immensely - and I will confer for one last edit and polish on Friday eve, and then we will fax final copy to the Ethics Office over the weekend, line-numbered and all.

Please let me know if this comes through OK and if you can read the attached file with your word processor. LET ME KNOW THE FAX NUMBER OF THE ETHICS OFFICE. And if you have any comments about what I am commending to you, I would certainly value your opinion.

Arthur

To: Celia Fisher, Ph.D., Chair, APA Ethics Revision Task Force
From: Arthur L. Kovacs, Ph.D. and Christie Morehead, Psy.D., J.D.
Subject: Comments on Draft 3, Proposed Revisions to the APA Ethics Code

We are writing what follows in response to the Task Force's invitation for public comments on its proposed Draft 3. The first author of the document that follows was given a copy of the draft as a Member at Large of the Board of Directors of APA's Division of Psychologists in Independent Practice. At the August APA convention, he made a commitment to his Board that he was prepared to accept responsibility for preparing a response that would, he hoped, meet the needs of psychologists in practice.

In order to make what has turned out to be a comprehensive and thoughtful evaluation of the draft, Dr. Kovacs recruited the participation of the second author. Dr. Christie Morehead recently completed her doctoral education as a psychologist after a 10 year career as a practicing attorney. She, too, has an abiding interest in the ethics of the profession for which she has sought training and which now provides her her professional identity.

We have done, we are sure, what no other of your commentators probably has been willing to do in response to your request. We have spent the time required to parse your work product line by line, word by word. You will find on our reply to you that we are suggesting a very large number of amendments to your draft. We believe they are important and that they will be useful to you as you move to formulate a proposed final draft.

We also believe that our proposed changes will increase the clarity and precision of the document and will better serve those who believe in the worth of clear and enforceable ethical principles while at the same time markedly reduce the risks that our constituents face from zealous plaintiffs' attorneys and from overzealous psychology board investigators and administrative law judges.

In arriving at our recommendations, we were guided by several considerations. Among these were:

An attempt to eliminate redundancies

A desire to improve overall organization of the document

A commitment to clear up ambiguities and to improve precision of expression

A zealous interest in correcting bad grammar

An attempt to be modest and circumspect by eliminating high flown, idealistic, but essentially meaningless rhetoric

An unremitting desire to make sure that the text created provided better protection to our constituents from having to be subject to inappropriate and harmful possible interpretations by plaintiffs' attorneys or by non-psychologist state psychology board investigators and/or administrative law judges

A willingness to borrow language, definitions, and principles as appropriate from the ethics code of the American Bar Association, a group, of course, more than any other whose members are sensitive to the containment of unreasonable and unnecessary litigation risks

We commend our work to you, and we look forward to your response. In the text that follows, we have indicated our proposed amendments to Draft 3 of the proposed Ethics Code as follows:

Deletions are indicated with brackets thus -- [are the responsibility of]

Additions are indicated by capital letters thus -- IN THE CASE OF DUAL RELATIONSHIPS

"Below is a draft revision of the APA Ethics Code. This draft is preliminary to a draft that will be published for comment in the APA Monitor, currently planned for early 2001. The task of revision is ongoing, and is part of a critical self-evaluation. This is a working draft, tentative and subject to change.

The Ethics Code Task Force will meet to consider comments on the following draft in October 2000, so that a revised draft of the Ethics Code can be published in the APA Monitor for member comment in early 2001 following approval by the Board of Directors and Ethics Committee. In order to ensure that any feedback on this draft is given timely consideration, please forward comments to the Ethics office, American Psychological

Association, 750 First Street, NE, Washington, DC 20002, no later than September 1, 2000.

APA Ethics Code, Revision Draft 3
March 31, 2000

INTRODUCTION AND APPLICABILITY

The American Psychological Association's (APA's) Ethical Principles of Psychologists and Code of Conduct (hereinafter referred to as the Ethics Code) consists of an Introduction, a Preamble, five General Principles (A - E), and specific Ethical Standards. The Introduction discusses the intent, organization, procedural considerations, and scope of application of the Ethics Code. The Preamble and General Principles are aspirational goals to guide psychologists toward the highest ideals of psychology. Although the Preamble and General Principles are not themselves enforceable rules, they should be considered by psychologists in arriving at an ethical course of action and may be considered by ethics bodies in interpreting the Ethical Standards. The Ethical Standards [set forth enforceable] DO PRESENT rules for THE SCIENTIFIC AND PROFESSIONAL conduct [as] OF psychologists, WHICH RULES ARE ENFORCEABLE AS SET FORTH IN THIS ETHICS CODE. [Most of the Ethical Standards are written broadly, in order to apply to psychologists in varied roles, although the application of an Ethical Standard may vary depending on the context. The Ethical Standards are not exhaustive. The fact that a given conduct is not specifically addressed by the Ethics Code does not mean that it is necessarily either ethical or unethical.]

This Ethics Code applies only to [psychologists' work-related activities, that is,] activities that are part of the psychologists' scientific and professional functions, [or that are psychological in nature.] INCLUDING WITHOUT LIMITATION [It includes] the clinical or counseling practice of psychology, research, teaching, supervision of trainees, development of assessment instruments, conducting assessments, educational counseling, organizational AND OTHER FORMS OF PROFESSIONAL consulting, forensic activities, [social intervention,] AND administration. [and other activities as well. This code applies to these work related activities across a variety of contexts, such as in person, postal, and telephonic communication and internet and other electronic communications.] These work-related activities [can] SHALL be distinguished from the purely private conduct of a psychologist, [which] [ordinarily] is not within the purview of the Ethics Code.

Membership in the APA commits members to adhere to the APA Ethics Code and to the rules and procedures used to [implement] ENFORCE it.

The procedures for filing, investigating, and resolving complaints of unethical conduct are described in the current Rules and Procedures of the APA Ethics Committee. APA may impose sanctions on its members for violations of the Ethics Code, including termination of APA membership, and may notify other bodies of its actions. Actions that violate the Ethics Code may also lead to the imposition of sanctions on psychologists or students whether or not they are APA members by bodies other than APA, including state psychological associations, other professional groups, psychology boards, other state or federal agencies, and payors for health services. In addition, the APA Bylaws provide that APA may take action against a member after his or her conviction of a felony, expulsion or suspension from an affiliated state psychological association, or suspension or loss of licensure

[The Ethics Code is intended to provide standards of professional conduct that can be applied by the APA and by other bodies that choose to adopt them. Whether or not a psychologist has violated the Ethics Code does not by itself determine whether he or she is legally liable in a court action, whether a contract is enforceable, or whether other legal consequences occur. These results are based on legal rather than ethical rules. However, compliance with or violation of the Ethics Code may be admissible as evidence in some legal proceedings, depending on the circumstances.] VIOLATION OF THIS ETHICS CODE, HOWEVER, SHOULD NOT GIVE RISE TO A CAUSE OF ACTION NOR SHOULD IT CREATE ANY PRESUMPTION THAT A LEGAL DUTY HAS BEEN BREACHED. THIS ETHICS CODE IS DESIGNED TO PROVIDE GUIDANCE TO PSYCHOLOGISTS AND TO PROVIDE A STRUCTURE FOR REGULATING CONDUCT THROUGH DISCIPLINARY AGENCIES. IT IS NOT DESIGNED TO BE A BASIS FOR CIVIL LIABILITY. NOTHING IN THIS ETHICS CODE SHOULD BE DEEMED TO AUGMENT ANY SUBSTANTIVE LEGAL DUTY OF PSYCHOLOGISTS OR THE EXTRA-DISCIPLINARY CONSEQUENCES OF VIOLATING SUCH DUTY.

In the process of making decisions regarding their professional behavior, AND IN ADDITION TO APPLICABLE LAWS AND PSYCHOLOGY BOARD REGULATIONS, psychologists must consider this Ethics Code[, in addition to applicable laws and psychology board regulations]. If the Ethics Code establishes a higher standard of conduct than is required by APPLICABLE law, psychologists [must] SHALL ENDEAVOR TO meet the higher ethical standard. NOTWITHSTANDING THE PROVISIONS OF THE FOREGOING SENTENCE, A PSYCHOLOGIST SHALL HAVE NO LEGAL LIABILITY SO LONG AS THE PSYCHOLOGIST'S CONDUCT COMPLIES WITH APPLICABLE LAW. If the Ethics Code standard appears to conflict with the requirements of law, A PSYCHOLOGIST SHALL NOT BE SUBJECT TO ANY ENFORCEMENT ACTION UNDER THIS ETHICS CODE SO LONG AS THE PSYCHOLOGIST'S CONDUCT COMPLIES WITH APPLICABLE LAW. [then psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict in a responsible manner.] If neither law nor the Ethics Code resolves an issue, psychologists should consider other professional materials¹ and the dictates of their own conscience, as well as seek consultation with others within the field when this is practical.

History and effective date.

This version of the APA Ethics Code was adopted by the American Psychological Association's Council of Representatives during its meeting, _____, and is effective beginning _____. Inquiries concerning the substance or interpretation of the APA Ethics Code should be addressed to the Director, Office of Ethics, American Psychological Association, 750 First Street, NE, Washington, DC 20002-4242.

This Code will be used to adjudicate complaints brought concerning alleged conduct occurring on or after the effective date. Complaints regarding conduct occurring prior to the effective date will be adjudicated on the basis of the version of the Code that was in effect at the time the conduct occurred, except that no provisions repealed in June 1989, will be enforced even if an earlier version contains the provision. The Ethics Code will undergo continuing review and study for future revisions; comments on the Code may be sent to the above address.

The APA has previously published its Ethical Standards as follows: American Psychological Association. (1953). Ethical standards of psychologists. Washington, DC: Author.

American Psychological Association. (1959). Ethical standards of psychologists. *American Psychologist*, 14, 279- 282.

American Psychological Association. (1963). Ethical standards of psychologists. *American Psychologist*, 18, 56-60.
American Psychological Association. (1968). Ethical standards of psychologists. *American Psychologist*, 23, 357-361.
American Psychological Association. (1977, March). Ethical standards of psychologists. *APA Monitor*, 22-23.
American Psychological Association. (1979). Ethical standards of psychologists. Washington, DC: Author.
American Psychological Association. (1981). Ethical principles of psychologists. *American Psychologist*, 36, 633-638.
American Psychological Association. (1990). Ethical principles of psychologists (Amended June 2, 1989). *American Psychologist*, 45, 390-395.
Request copies of the APA's Ethical Principles of Psychologists and Code of Conduct from the APA Order Department, 750 First Street, NE, Washington, DC 20002-4242, or phone (202) 336-5510.

PREAMBLE

[Psychologists are committed to increasing knowledge of behavior and people's understanding of themselves and others and to the utilization of such knowledge to improve the condition of both the individual and society. In doing so, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist, and expert witness. This Ethics Code provides a common set of values upon which psychologists build their professional and scientific work.]

This Code is intended to provide both the general principles and the decision rules to cover most situations encountered by psychologists. It has as its goals the welfare and protection of the individuals and groups with whom psychologists work and the education of members, students, and the public regarding ethical standards of the discipline.

[The development of a dynamic] THIS DOCUMENT IS ALSO INTENDED TO HELP PSYCHOLOGISTS DEVELOP A set of ethical standards for [a psychologist's] THEIR work-related conduct [requires a] AND TO MAKE personal commitments to a lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues, as appropriate; and to ENCOURAGE PSYCHOLOGISTS TO consult with others, as needed, concerning ethical problems. [Each psychologist supplements, but does not violate, the Ethics Code's values and rules on the basis of guidance drawn from personal values, culture, and experience.] THE ETHICS CODE DOES NOT, HOWEVER, EXHAUST THE MORAL AND ETHICAL CONSIDERATIONS THAT

SHOULD INFORM A PSYCHOLOGIST, FOR NO WORTHWHILE HUMAN ACTIVITY CAN BE COMPLETELY DEFINED BY CODIFIED RULES. THE ETHICS CODE SIMPLY PROVIDES A FRAMEWORK FOR THE ETHICAL CONDUCT OF PSYCHOLOGISTS.

THE STANDARDS OF ETHICAL CONDUCT ARE RULES OF REASON. THEY SHOULD BE INTERPRETED WITH REFERENCE TO THE PSYCHOLOGICAL ACTIVITIES BEING CONDUCTED. SOME OF THE STANDARDS ARE IMPERATIVES, CAST IN THE TERMS "SHALL" OR "SHALL NOT." THESE DEFINE PROPER CONDUCT FOR PURPOSES OF ENFORCEMENT UNDER THIS ETHICS CODE. OTHERS, GENERALLY CAST IN THE TERM "MAY" ARE PERMISSIVE AND DEFINE AREAS UNDER THE ETHICS CODE IN WHICH THE PSYCHOLOGIST HAS PROFESSIONAL DISCRETION. NO ENFORCEMENT ACTION SHOULD BE

TAKEN WHEN THE PSYCHOLOGIST CHOOSES NOT TO ACT OR ACTS WITHIN THE BOUNDS OF

SUCH DISCRETION. OTHER STANDARDS DEFINE THE NATURE OF RELATIONSHIPS BETWEEN THE PSYCHOLOGIST AND OTHERS. THE STANDARDS ARE THUS PARTLY

OBLIGATORY AND DISCIPLINARY AND PARTLY CONSTITUTIVE AND DESCRIPTIVE IN THAT THEY DEFINE A PSYCHOLOGISTS' PROFESSIONAL ROLE. MANY PROVISIONS USE THE TERM "SHOULD." SUCH PROVISIONS DO NOT ADD OBLIGATIONS, BUT PROVIDE GUIDANCE FOR THE CONDUCT OF PSYCHOLOGICAL ACTIVITIES IN COMPLIANCE WITH THE ETHICS CODE.

THE FOLLOWING TERMS USED IN THIS ETHICS CODE SHALL HAVE THE MEANINGS SET FORTH BELOW:

"BELIEF" OR "BELIEVES" DENOTES THAT THE PSYCHOLOGIST INVOLVED ACTUALLY SUPPOSED THE FACT IN QUESTION TO BE TRUE.

"FRAUD" OR "FRAUDULENT" DENOTES CONDUCT HAVING A PURPOSE TO DECEIVE AND NOT MERELY NEGLIGENT MISREPRESENTATION OR FAILURE TO APPRISE ANOTHER OF RELEVANT INFORMATION.

"KNOWINGLY," "KNOWN," OR "KNOWS" DENOTES ACTUAL KNOWLEDGE OF THE FACT IN QUESTION.

"REASONABLE" OR "REASONABLY" WHEN USED IN RELATION TO CONDUCT BY A PSYCHOLOGIST DENOTES THE CONDUCT OF A REASONABLY PRUDENT AND COMPETENT PSYCHOLOGIST.

"REASONABLE BELIEF," OR "REASONABLY BELIEVES" WHEN USED IN REFERENCE TO A PSYCHOLOGIST DENOTES THAT THE PSYCHOLOGIST BELIEVES THE MATTER IN QUESTION AND THAT THE CIRCUMSTANCES ARE SUCH THAT THE BELIEF IS REASONABLE.

"REASONABLY SHOULD KNOW" WHEN USED IN REFERENCE TO A PSYCHOLOGIST DENOTES THAT A PSYCHOLOGIST OF REASONABLE PRUDENCE AND COMPETENCE WOULD ASCERTAIN THE MATTER IN QUESTION.

"SUBSTANTIAL" WHEN USED IN REFERENCE TO DEGREE OR EXTENT DENOTES A MATERIAL MATTER OF CLEAR AND WEIGHTY IMPORTANCE.

PRINCIPLE A: BENEFICENCE AND NON-MALEFICENCE

Psychologists SHOULD strive to have a positive effect on those with whom they work, while taking care to do no harm. By thoughtful and prudent conduct, psychologists SHOULD aspire to maximize the benefits of their work and to prevent or minimize harm to others through acts of commission or omission in their professional behavior. In their [professional] actions AS PSYCHOLOGISTS, psychologists weigh the welfare and rights of their patients or clients, students, supervisees, human research participants, and other affected persons, and the welfare of animal subjects of research. PSYCHOLOGISTS SHOULD NOT EXPLOIT PERSONS OVER WHOM THEY HAVE SUPERVISORY, EVALUATIVE, OR OTHER AUTHORITY SUCH AS STUDENTS, SUPERVISEES, EMPLOYEES, RESEARCH PARTICIPANTS, AND CLIENTS AND PATIENTS.

PRINCIPLE B: FIDELITY AND SOCIAL RESPONSIBILITY

Psychologists SHOULD establish relationships of loyalty and trust with those with whom they work. In the course of their work, psychologists [are] SHOULD BE aware of their professional and scientific responsibilities to the PROFESSION, TO THE community, and TO society. Psychologists [uphold professional standards of conduct,] SHOULD clarify their professional roles and obligations, SHOULD accept appropriate responsibility for their behavior, and SHOULD avoid conflicts of interests. Psychologists SHOULD consult with, refer to, or cooperate with other professionals and institutions to the extent needed to serve the best interests of their

students, research participants, patients, clients, or other recipients of their services. [Psychologists' moral standards and conduct are personal matters to the same degree as is true for any other person, except as psychologists' conduct may compromise their professional responsibilities or reduce the public's trust in psychology and psychologists.] Psychologists [are] SHOULD BE concerned about the ethical compliance of their colleagues' scientific and professional conduct.

PRINCIPLE C: INTEGRITY

Psychologists SHOULD seek to promote accuracy, honesty, and truthfulness in the science, teaching, and practice of psychology. [In these activities psychologists do not steal, cheat, or engage in fraud, subterfuge, or intentional misrepresentation of fact. In relationships involving legitimate expectations of trust, psychologists are candid and forthright. In their work, psychologists strive to keep their promises and to avoid bad-faith excuses, unwise or unclear commitments, and conflicts of interest.] In situations in which deception may be ethically justifiable, [to maximize benefits and minimize harm] PURSUANT TO THIS ETHICS CODE, psychologist [have a serious obligation to] SHOULD consider the need for, the possible consequences of, and their responsibility to correct any resulting mistrust or other harmful effects that arise from the use of such techniques.

PRINCIPLE D: JUSTICE

Psychologists SHOULD strive to conduct their work in a fair manner, taking into account issues of equality, impartiality, and proportionality. They SHOULD recognize that fairness and justice requires that all persons are entitled to benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists. Psychologists SHOULD BE AWARE [exercise careful judgment and take appropriate precautions to ensure that] OF their potential biases, the boundaries of their competence, and the limitations of their expertise SO AS NOT TO CONTRIBUTE UNKNOWINGLY TO [do not lead to or condone] unjust [or discriminatory] practices.

PRINCIPLE E: RESPECT FOR PEOPLE'S RIGHTS AND DIGNITY

Psychologists SHOULD [accord appropriate] respect [to] the fundamental rights, dignity, and worth of all people. [They accept as fundamental the belief that each person should be treated as an end in him/herself, not as an object or a means to an end.] They SHOULD respect the rights of individuals to privacy, confidentiality, self-determination, and autonomy, AND SHOULD BE cognizant of the fact that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision-making. Psychologists [are] SHOULD BE aware of and respect cultural, individual, and role differences, including those due to age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, and socioeconomic status and adapt their methods to the needs of different populations. Psychologists SHOULD try to eliminate the effect on their work of biases based on those factors, and they do not knowingly participate in or condone activities that are [prejudicial] UNJUST.

PRINCIPLE F: POTENTIAL FOR CONFLICT

If the demands of an organization with which psychologists are affiliated conflict with this Ethics Code, psychologists SHOULD clarify the nature of the conflict, make known their commitment to the Ethics Code, and

to the extent REASONABLY PRACTICABLE, SHOULD seek to resolve the conflict in a way that permits the fullest adherence to the Ethics Code.

ETHICAL STANDARDS

1. RESOLVING ETHICAL ISSUES

1.01 Misuse of Psychologists' Influence.

Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence.

1.02 Misuse of Psychologists' Work.

(a) Psychologists do not participate in activities [in which it appears likely that their skills or data will be misused or misrepresented by others, unless corrective mechanisms are available] WHEN PSYCHOLOGISTS REASONABLY SHOULD KNOW THAT THERE IS A SUBSTANTIAL LIKELIHOOD OF MATERIAL MISUSE OR MATERIAL MISREPRESENTATION OF THE PSYCHOLOGISTS' WORK. (See also Standard 11.07, Truthfulness and Candor.)

(b) If psychologists learn of MATERIAL misuse or MATERIAL misrepresentation of their work, they take reasonable steps to correct or minimize [the] SUCH misuse or misrepresentation.

1.03 Relationship of Ethics and Law.

[If psychologists' ethical responsibilities conflict with law, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict in a responsible manner.]

In the process of making decisions regarding their professional behavior, psychologists must consider this Ethics Code[,] in addition to applicable laws and psychology board regulations. [If the Ethics Code establishes a higher standard of conduct than is required by law, psychologists must meet the higher ethical standard. If the Ethics Code standard appears to conflict with the requirements of law, then psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict in a responsible manner.] If neither law, PSYCHOLOGY BOARD REGULATIONS, nor the Ethics Code resolves an issue, psychologists should consider other professional materials¹ and the dictates of their own conscience, as well as seek consultation with others within the field when this is practical.

1.04 Conflicts Between Ethics and Organizational Demands.

If the demands of an organization OR WORK SETTING with which psychologists are affiliated conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and to the extent REASONABLY PRACTICABLE, seek to resolve the conflict in a way that permits the fullest adherence to the Ethics Code.

1.05 Informal Resolution of Ethical Violations.

When psychologists REASONABLY believe that there has been an ethical violation by another psychologist, AND ALSO REASONABLY BELIEVE THAT INFORMAL RESOLUTION IS POSSIBLE AND DOES NOT VIOLATE ANY APPLICABLE RIGHTS TO CONFIDENTIALITY, [they] PSYCHOLOGISTS MAKE REASONABLE EFFORTS [attempt]

to resolve the issue by bringing it to the attention of that individual.[
if an informal resolution appears appropriate and the intervention does not
violate any confidentiality rights that may be involved.]

1.06 Reporting Ethical Violations.

If an apparent ethical violation is not appropriate for informal resolution
under Standard 1.05 or is not resolved properly in that fashion,
[psychologists take further action appropriate to the situation, unless
such action conflicts with confidentiality rights in ways that cannot be
resolved. Such action might include referral to state or national
committees on professional ethics, to state licensing boards, or to the
appropriate institutional authorities.] A PSYCHOLOGIST SHALL INFORM THE
APPROPRIATE PROFESSIONAL AUTHORITY. THIS STANDARD 1.06 DOES NOT REQUIRE
DISCLOSURE OF INFORMATION OTHERWISE PROTECTED BY APPLICABLE RIGHTS TO
CONFIDENTIALITY.

1.07 Cooperating With Ethics Committees.

Psychologists SHOULD cooperate in ethics investigations, proceedings, and
resulting requirements of the APA or any affiliated state psychological
association to which they belong. In doing so, they SHOULD make reasonable
efforts to resolve any issues as to confidentiality. [Failure to cooperate
is itself an ethics violation.]

1.08 Improper Complaints.

Psychologists do not KNOWINGLY file or encourage the filing of ethics
complaints that THEY REASONABLY SHOULD KNOW are frivolous.[and are
intended to harm the respondent rather than address an ethical violation.]

1.09 Unfair Discrimination Against Complainants and Respondents

Psychologists do not TAKE ANY ADVERSE ACTIONS AGAINST OTHER PERSONS [deny
persons employment, advancement, admissions to academic or other programs,
tenure, or promotion, based] solely [upon] ON THE BASIS OF [their] SUCH
OTHER PERSONS having made[,] or their being the subject of an ethics
complaint. This does not preclude taking action based upon the outcome of
such proceedings[or consideration of other appropriate information].

2. COMPETENCE

2.01 Boundaries of Competence.

(a) Psychologists SHOULD provide services, teach, and conduct research
[only] within the boundaries of their competence[,based on their
appropriate] AS HAVE REASONABLY BEEN ESTABLISHED BY THEIR education,
training, supervised experience, consultation, study, or professional
experience.

(b) EXCEPT AS PROVIDED IN STANDARD 2.02, [W] where differences such as age,
gender, race, ethnicity, national origin, religion, sexual orientation,
disability, language, or socioeconomic status [significantly] MAY
SUBSTANTIALLY affect psychologists' work concerning particular individuals
or groups, psychologists SHOULD have or SHOULD obtain the training,
experience, consultation, or supervision REASONABLY necessary to ensure the
competence of their services, or they SHOULD make appropriate referrals,
[except as provided in Standard 2.02, Providing Services in Emergencies or
to Underserved Populations.]

(c) Psychologists planning to provide services, teach, or conduct research

involving areas, techniques, or technologies new to them SHOULD undertake [appropriate] education, training, supervised experience, consultation, study, or professional experience REASONABLY NECESSARY FOR THE ACTIVITY.

(d) In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless SHOULD take reasonable steps to ensure the competence of their work [and to protect patients, clients, students, research participants, and others from harm].

2.02 Providing Services in Emergencies or to Under-Served Populations. When a psychologist is asked to provide services to [individuals] POTENTIAL CONSUMERS for whom [appropriate mental health] services are not OTHERWISE available and WHICH SERVICES ARE BEYOND THE BOUNDARIES OF THE PSYCHOLOGIST'S COMPETENCE AS DEFINED IN STANDARD 2.01 (a), [for which the psychologist has not [had the time to obtain the competence necessary], the psychologist may NEVERTHELESS provide such services in order to ensure that services are not denied[.]. IN SUCH AN EVENT, [however,] the psychologist should advise [the individual] CONSUMERS of the limitations [in services due to lack of training] OF THE PSYCHOLOGIST'S COMPETENCE and EITHER (1) refer [the individual] SUCH CONSUMERS to an appropriately trained provider as soon as possible, or (2) make a reasonable effort to obtain the necessary competence.

2.03 Maintaining Expertise.

Psychologists SHOULD maintain a reasonable level of knowledge of current scientific and professional information in their fields of activity[,]and undertake ongoing efforts to maintain competence in the skills they use.

[2.04 Basis for Scientific and Professional Judgments.

Psychologists' scientific or professional judgments and endeavors must have a reliable basis in the knowledge and experience of the discipline.] THIS IS SO VAGUE AS TO BE MEANINGLESS.

2.05 Delegation of Work to Others and Use of Interpreters.

Psychologists who delegate work to employees, supervisees, [and] OR research and teaching assistants or who use the services of others, such as interpreters, take reasonable steps to authorize only those responsibilities that such persons can be REASONABLY expected to perform competently [on the basis of their education, training, or experience, either independently or with the level of supervision being provided] and take reasonable steps to see that such persons perform services competently. (See also Standards 2.02, Providing Services in Emergencies or to Underserved Populations; 4.01 Maintaining Confidentiality; 9.01, Bases for Assessment; 9.03, Informed Consent in Assessments; 9.06, Use of Assessment in General and With Diverse Populations; and 9.08, Unqualified Persons.)

2.06 Personal Problems and Conflicts.

(a) Psychologists refrain from undertaking an activity when they know or REASONABLY should know that THERE IS A SUBSTANTIAL LIKELIHOOD THAT their personal problems [are likely to] MAY PREVENT THEM FROM PERFORMING THEIR PSYCHOLOGICAL RESPONSIBILITIES IN A COMPETENT MANNER. [lead to harm to a patient, client, colleague, student, research participant, or other person to whom they may owe a professional or scientific obligation.]

(b) When psychologists become aware of personal problems that may interfere with [their performing work-related duties adequately] THE COMPETENT PERFORMANCE OF THEIR PSYCHOLOGICAL RESPONSIBILITIES, they take [appropriate] REASONABLE measures, such as obtaining professional consultation or assistance[, and] TO determine whether they should limit, suspend, or terminate [their work-related duties] SUCH RESPONSIBILITIES.

3. HUMAN RELATIONS

3.02 Honesty.

[In their interactions with others,] EXCEPT AS REQUIRED BY STANDARD 4.01, psychologists' COMMUNICATIONS REGARDING [provide truthful descriptions of] their work-related activities [and describe honestly and fairly] DO NOT KNOWINGLY CONTAIN FALSE STATEMENTS OR FAIL TO DISCLOSE MATERIAL INFORMATION REGARDING the basis for their [opinions] FINDINGS OR RECOMMENDATIONS. (See also Standards 1.01, Misuse of Psychologist's Influence; 5.01, Avoidance of False or Deceptive Statements; 6.07, Accuracy in Reports to Payors and Funding Sources; 7.02, Descriptions of Education and Training Programs; 8.11, Plagiarism; and 11.07, Truthfulness and Candor.)

3.01 Professional and Scientific Relationship.

WHEN [P]psychologists provide diagnostic, therapeutic, teaching, research, supervisory, consultative, forensic, or other psychological services, THEY DO SO only AFTER CLARIFYING FOR THE CONSUMERS OF THEIR ACTIVITIES [in the context of a defined] THE NATURE OF THEIR professional or scientific relationship or role. (See also Standard 11.03, Forensic Opinions.)

3.11 Informed Consent.

(a) EXCEPT AS PROVIDED BY LAW OR AS OTHERWISE PROVIDED IN THIS ETHICS CODE, PSYCHOLOGISTS OBTAIN THE INFORMED CONSENT OF PERSONS WHO ARE THE CONSUMERS OF THEIR PSYCHOLOGICAL ACTIVITIES WHETHER THOSE ACTIVITIES ARE CONDUCTED [When psychologists provide assessment, psychotherapy, or counseling or conduct research with an individual] in person, or via electronic media or other forms of communication. [, they obtain the informed consent of that individual using] SUCH INFORMED CONSENT SHALL USE language that is reasonably understandable to THOSE PERSONS [that person except when conducting such activities without consent is mandated or prescribed by law or governmental regulation or as otherwise provided in this Ethics Code] . The content of informed consent will vary depending on many circumstances; however, informed consent [generally implies] REQUIRES AT A MINIMUM that the personS WHO ARE THE OBJECTS OF THE PSYCHOLOGICAL ACTIVITY (1) [has] HAVE the LEGAL capacity to consent, (2) [has] HAVE been provided information concerning participation in the activity that reasonably might affect [his or her]THEIR willingness to participate including limits of confidentiality and monetary or other costs or reimbursements, and (3) [is] ARE aware of the [voluntary] nature of participation and [has] HAVE freely and without undue influence expressed consent. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; 10.01, Informed Consent to Psychotherapy; and 11.02, Informed Consent for Forensic Services.)

(b) For persons who are legally incapable of giving informed consent, psychologists nevertheless (1) provide an [appropriate] explanation

REASONABLY SHAPED BY THE CAPACITIES OF THE PERSON OR PERSONS WHO ARE THE OBJECT OF THE PSYCHOLOGISTS' ACTIVITIES, (2) TO THE EXTENT REASONABLY PRACTICABLE, seek [the individual's assent] SUCH PERSONS' UNDERSTANDING AND PERMISSION, (3) consider such persons' preferences and best interests, and (4) obtain [appropriate permission] CONSENT from a legally authorized person, [if] TO THE EXTENT THAT such substitute consent is permitted or required by law. When consent by a legally authorized person is not required by law, psychologists [provide an appropriate mechanism for protecting] TAKE REASONABLE STEPS TO PROTECT the [individual's'] rights and welfare OF THOSE CONSUMERS LEGALLY INCAPABLE OF GIVING INFORMED CONSENT.

(c) When obtaining informed consent, psychologists make reasonable efforts to answer [individual's] questions, to avoid apparent misunderstandings, and when possible to address those misunderstandings that occur. IF PSYCHOLOGISTS ARE PRECLUDED BY LAW OR BY ORGANIZATIONAL POLICY FROM DISCLOSING INFORMATION REGARDING THE PSYCHOLOGISTS' ACTIVITIES OR FINDINGS TO PARTICULAR INDIVIDUALS OR GROUPS, PSYCHOLOGISTS INFORM SUCH INDIVIDUALS OR GROUPS OF THESE LIMITATIONS ON DISCLOSURE AS A PART OF THE CONSENT PROCEDURE.

(d) Psychologists [appropriately] document THEIR EFFORTS TO SECURE consent AND ALSO DOCUMENT THE OUTCOME OF SUCH EFFORTS. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; 10.01, Informed Consent to Psychotherapy; and 11.02, Informed Consent for Forensic Services.)

[3.03 Unfair Discrimination.

In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.] SET FORTH IN STATUTES

[3.04 Sexual Harassment.

Psychologists do not engage in sexual harassment. Sexual harassment is sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with the psychologist's activities or roles as a psychologist, and that either: (1) is unwelcome, is offensive, or creates a hostile workplace or educational environment, and the psychologist knows or is told this; or (2) is sufficiently severe or intense to be abusive to a reasonable person in the context. Sexual harassment can consist of a single intense or severe act or of multiple persistent or pervasive acts. (See also Standard 1.09, Unfair Discrimination Against Complainants and Respondents.)] SET FORTH IN STATUTES

[3.05 Other Harassment.

Psychologists do not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact in their work based on factors such as those persons' age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, or socioeconomic status.] SET FORTH IN STATUTES

[3.06 Avoiding Harm.

Psychologists take reasonable steps to avoid harming their patients or clients, research participants, students, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable.] ALREADY TAKEN UP ABOVE

3.07 Multiple Relationships.

(a) A PSYCHOLOGIST REFRAINS FROM ENTERING INTO A MULTIPLE RELATIONSHIP IF THE MULTIPLE RELATIONSHIP COULD (1) REASONABLY BE EXPECTED TO IMPAIR THE PSYCHOLOGIST'S ABILITY TO PERFORM COMPETENTLY THOSE PSYCHOLOGICAL ACTIVITIES REQUIRED BY THE RELATIONSHIP OR (2) COULD REASONABLY BE EXPECTED TO RISK EXPLOITATION OR HARM TO PERSON OR PERSONS WITH WHOM THE RELATIONSHIP EXISTS.

(b) SUCH POTENTIALLY HARMFUL multiple relationshipS MAY occur[s] when a psychologist AS PSYCHOLOGIST is in a [professional role] WORKING RELATIONSHIP with a person and IS NOW, OR REASONABLY MAY IN THE FUTURE, (1) [at the same time is] BE in another [role] CONCURRENT RELATIONSHIP with the same person, OR (2) [at the same time] is in a relationship with a person closely associated with or related to the person with whom [they have] THE PSYCHOLOGIST HAS A [the professional] relationship AS PSYCHOLOGIST. [, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person.]

[Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm as described below may not be unethical.]

[A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist's objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.]

(C)(b) Whenever [feasible] REASONABLY PRACTICABLE, a psychologist refrains from taking on [a professional role] PSYCHOLOGICAL RESPONSIBILITIES when prior personal, scientific, professional, legal, financial, or other relationships could reasonably be expected to impair the psychologist's objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.

(D)(c) If a psychologist KNOWS [becomes aware] that a potentially harmful multiple relationship has arisen, the psychologist MAKES REASONABLE EFFORTS [attempts] to MITIGATE THE POTENTIAL HARM [resolve it] with due regard for the welfare of the affected person.

[3.09 Exploitative Relationships.

Psychologists do not exploit persons over whom they have supervisory, evaluative, or other authority such as students, supervisees, employees, research participants, and clients or patients. (See also Standards 10.05-10.08 regarding sexual involvement with clients or patients.)] SET FORTH ABOVE

3.08 Third-Party Requests for Services.

(a) When a psychologist agrees to provide services to a person or entity at the request of a third party, the psychologist AT THE OUTSET OF THE SERVICE clarifies to the extent [feasible] REASONABLY PRACTICABLE[, at the outset

of the service,] the nature of the relationship with each party. This clarification includes the role of the psychologist (such as therapist, organizational consultant, diagnostician, or expert witness), the probable uses of the services provided or the information obtained, and the fact that there may be limits to confidentiality. (See also Standard 4.02, Discussing the Limits of Confidentiality.)

(b) If there is a foreseeable risk of the psychologist's being called upon to perform conflicting roles because of the involvement of a third party, the psychologist clarifies the nature and direction of his or her responsibilities, keeps all parties [appropriately] REASONABLY informed as matters develop, and MAKES REASONABLE EFFORTS TO resolve[s] the situation in accordance with this Ethics Code. (See also Standards 3.07, Multiple Relationships, and 11.04, Clarification of Role.)

3.10 Consultations and Referrals.

[(a) Psychologists arrange for appropriate consultations and referrals based principally on the best interests of their patients or clients, with appropriate consent, and subject to other relevant considerations, including applicable law and contractual obligations. (See also Standards 4.02, Discussing the Limits of Confidentiality, and 4.06, Consultations.)] REDUNDANT WITH PRINCIPLES STATED

[(b)] When indicated IN THE EXERCISE OF REASONABLE PSYCHOLOGICAL JUDGMENT and WITH THE CONSENT OF THE PERSON OR PERSONS TO WHOM PSYCHOLOGICAL ACTIVITIES ARE BEING PROVIDED, [professionally appropriate,] psychologists MAY RECOMMEND COOPERATION WITH OR MAY THEMSELVES cooperate with other professionals in order to serve the[ir patients or clients effectively and appropriately] THE RECIPIENTS OF THEIR ACTIVITIES IN A MORE COMPREHENSIVE OR EFFECTIVE FASHION.

[3.12 Describing the Nature and Results of Psychological Services.

(a) When psychologists provide program evaluation, supervision, teaching, consultation, research, or other psychological services to a group or an organization, they use language that is reasonably understandable to the recipients of those services to provide appropriate information beforehand about the nature of such services. (See also Standard 9.11, Explaining Assessment Results.)] COVERED BY INFORMED CONSENT

[(b) If psychologists will be precluded by law or by organizational roles from providing such information to particular individuals or groups, they so inform those individuals or groups at the outset of the service.] COVERED BY INFORMED CONSENT

4. PRIVACY AND CONFIDENTIALITY

4.01 Maintaining Confidentiality.

Psychologists [have a primary obligation] SHALL [and] take reasonable precautions to protect the confidentiality rights of those with whom they work or consult, [recognizing that] AS SUCH RIGHTS TO confidentiality may be established by law, institutional rules, or AS ARE IN ACCORD WITH RECOGNIZED professional or scientific [relationships] STANDARDS. (See also Standard 2.05, Delegation of Work to Others and Use of Interpreters.)

4.02 Discussing the Limits of Confidentiality.

(a) Psychologists discuss with persons (including, to the extent [feasible]

REASONABLY PRACTICABLE, persons who are legally incapable of giving informed consent and their legal representatives) and organizations with whom they establish a scientific or professional relationship (1) the [relevant] APPLICABLE limitations [on] TO confidentiality, (2) the REASONABLY foreseeable uses of the information generated through [their services] THE PSYCHOLOGISTS' ACTIVITIES, and (3) the limitations on confidentiality when information is communicated or services provided by electronic or broadcast transmission. (See also Standard 3.11, Informed Consent.)

[(b) Unless it is not feasible or is contraindicated, the discussion of confidentiality occurs at the outset of the relationship and thereafter as new circumstances may warrant.]

(B) THE DISCUSSION OF CONFIDENTIALITY SHALL OCCUR AT THE OUTSET OF THE ESTABLISHMENT OF A PSYCHOLOGICAL RELATIONSHIP UNLESS THIS IS NOT REASONABLY PRACTICABLE OR IN THE REASONABLE JUDGMENT OF THE PSYCHOLOGIST IS CONTRAINDICATED. SUCH DISCUSSION ALSO MAY GO ON THEREAFTER AS NEW CIRCUMSTANCES MAY WARRANT.

[(c) Psychologists offering services, products, or information via electronic media inform users of the risks to privacy and limitations on confidentiality.]

4.03 Recording.

Psychologists obtain permission before recording the voice or image of individuals to whom they provide services. (See also Standards 8.03, Informed Consent for Recording Voice and Images in Research; 8.05, Dispensing with Informed Consent; 8.07, Deception in Research).

4.04 Minimizing Intrusions on Privacy AND STANDARDS FOR CONFIDENTIALITY IN RECORD KEEPING.

[(a)] Psychologists include in written and oral reports, consultations, and the like, only RECORD information germane to the purpose for which the communication is made. PSYCHOLOGISTS MAINTAIN APPROPRIATE CONFIDENTIALITY IN CREATING, STORING, ACCESSING, TRANSFERRING, AND DISPOSING OF RECORDS UNDER THEIR CONTROL, WHETHER SUCH RECORDS ARE WRITTEN, AUTOMATED, OR ARCHIVED IN ANY OTHER MEDIUM.

[(b) Psychologists discuss confidential information obtained in clinical or consulting relationships, or evaluative data concerning patients, individual or organizational clients, students, research participants, supervisees, and employees, only for appropriate scientific or professional purposes and only with persons clearly concerned with such matters.]
REDUNDANT - 4.07

4.05 Disclosures.

(a) Psychologists disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law for a valid purpose, such as (1) to provide needed professional services to the patient or the individual or organizational client, (2) to obtain [appropriate] professional consultations, (3) to protect the patient or client or others from harm, or (4) to obtain payment for services from a client or patient. [, in which instance] ANY disclosure MADE PURSUANT TO THIS STANDARD 4.05 SHALL BE [is] limited to the minimum that is necessary

to achieve the RELEVANT purpose. (See Also Standard 6.05(f), Fees and Financial Arrangements.)

(b) UNLESS OTHERWISE PROHIBITED BY LAW, [P]psychologists also may disclose confidential information with the [appropriate] consent of the patient or the individual or organizational client (or of another legally authorized person on behalf of the patient or client).[, unless prohibited by law.]

4.06 Consultations.

When consulting with colleagues, (1) psychologists do not [share] DISCLOSE confidential information that reasonably could lead to the identification of a patient, client, research participant, or other person or organization with whom they have a confidential relationship unless they have obtained the prior consent of the person or organization or the disclosure cannot be avoided, and (2) they [share] DISCLOSE information only to the extent REASONABLY necessary to achieve the purposes of the consultation. (See also Standard 4.01, Maintaining Confidentiality.)

4.07 Use of Confidential Information for Didactic or Other Purposes.

(a) Psychologists do not disclose in their writings, lectures, or other public [media] COMMUNICATIONS, confidential, personally identifiable information THAT THEY OBTAINED DURING THE COURSE OF THEIR WORK concerning their patients, individual or organizational clients, students, research participants, or other recipients of their [services] PSYCHOLOGICAL ACTIVITIES[that they obtained during the course of their work], unless the information is REASONABLY disguised or the person or organization has consented in writing, or unless there is other ethical or legal authorization for doing so.

5. ADVERTISING AND OTHER PUBLIC REPRESENTATIONS

5.01 Avoidance of False or Deceptive Statements.

[(a)] Psychologists [do] SHALL not KNOWINGLY make public statements that are IN ANY MATERIAL RESPECT false, deceptive, misleading, or fraudulent, concerning their QUALIFICATIONS, THEIR research, practice, CONSULTING or other [work] PSYCHOLOGICAL activities, THE OUTCOMES OF THOSE ACTIVITIES, or those of persons or organizations with which they are affiliated. Public statements include but are not limited to paid or unpaid advertising, product endorsements, grant and credentialing applications, brochures, printed matter, directory listings, personal resumes or curriculum vitae, interviews or comments for use in media such as print, electronic, or broadcast, statements in legal proceedings, lectures and public oral presentations, and published materials. (See also Standard 3.02, Honesty.)

[(b)] Psychologists do not make false, deceptive, misleading, or fraudulent statements concerning (1) their services; (2) the scientific or clinical basis for, or results or degree of success of, their services; (3) their fees; or (4) their research findings.]

[(c)] Psychologists do not make false, deceptive, misleading, or fraudulent statements concerning (1) their training, experience, or competence; (2) their academic degrees; (3) their credentials; (4) their institutional or association affiliations; or their (5) publications.]

NEW 5.02 ANNOUNCEMENTS OF DEGREES

[(d)] Psychologists claim as credentials for their psychological work[.]

only THOSE degrees that (1) were earned from a regionally accredited educational institution or (2) were the basis for psychology licensure by the state in which they practice. (See also Standards 8.07, Deception in Research, and 8.08, Debriefing.)

5.02 Statements by Others.

(a) Psychologists who engage others to create or place public statements that promote their professional practice, products, or activities retain professional responsibility for such statements.

(b) Psychologists make reasonable efforts to prevent others whom they do not control (such as employers, publishers, sponsors, organizational clients, and representatives of the print or broadcast media) from making deceptive statements concerning psychologists' practice or professional or scientific activities.

(c) If psychologists learn of deceptive statements about their work made by others, psychologists make reasonable efforts to correct such statements.

(d) Psychologists do not compensate employees of press, radio, television, or other communication media in return for publicity in a news item.

(e) A paid advertisement relating to psychologists' activities must be identified or clearly recognizable as such.

5.03 Descriptions of Workshops and Nondegree-Granting Educational Programs.

To the degree to which they MAY BE ABLE TO exercise control, psychologists responsible for announcements, catalogs, brochures, or advertisements describing workshops, seminars, or other non-degree-granting educational programs TAKE REASONABLE STEPS TO ensure that they accurately describe the audience for which the program is intended, the educational objectives, the presenters, and the fees involved.

5.04 Media Presentations.

When psychologists provide public advice or comment, they take reasonable precautions to ensure that (1) the statements are based on [appropriate] APPLICABLE psychological literature or practice, (2) the statements are otherwise consistent with this Ethics Code, and (3) the PSYCHOLOGISTS TAKE REASONABLE STEPS TO INSURE THAT THE recipients of the information [are not encouraged to infer] ARE INFORMED that a PSYCHOLOGICAL relationship has NOT been established with them personally. (See also Standard 2.04, Basis for Scientific and Professional Judgments.)

5.05 Testimonials.

Psychologists do not solicit testimonials from current [psychotherapy clients or patients or other persons] RECIPIENTS OF THEIR PSYCHOLOGICAL ACTIVITIES who because of their particular circumstances are vulnerable to undue influence.

5.06 In-Person Solicitation.

[Psychologists do not engage, directly or through agents, in uninvited in-person solicitation of business from actual or potential psychotherapy patients or clients or other persons who because of their particular circumstances are vulnerable to undue influence. However, this prohibition does not preclude: (1) attempting to implement appropriate collateral

contacts for the purpose of benefiting an already engaged therapy patient or (2) providing disaster outreach services.]
A PSYCHOLOGIST SHALL NOT BY IN PERSON SOLICITATION OR THROUGH DIRECT CONTACT VIA ELECTRONIC MEDIA OFFER TO PROVIDE PSYCHOLOGICAL ACTIVITIES TO PERSONS OR GROUPS WITH WHOM THE PSYCHOLOGIST HAS NO PRIOR PSYCHOLOGICAL RELATIONSHIP WHEN A SIGNIFICANT MOTIVE FOR THE PSYCHOLOGIST'S ATTEMPTING TO DO SO IS PECUNIARY GAIN. TAKEN FROM ABA CODE

6. RECORD KEEPING AND FEES

6.01 Documentation of Professional and Scientific Work and Maintenance of Records.

(a) Psychologists [appropriately] create, maintain, disseminate, store, retain, and dispose of SUCH records and data relating to their professional and scientific work AS ARE REASONABLY NECESSARY [in order] to (1) facilitate provision of services later by them or by other professionals, (2) ensure accountability, (3) meet institutional requirements, (4) ensure accuracy of billing and payments, and (5) ensure accordance with law, all in a manner that permits compliance with the requirement of this Ethics Code. (See Also Standard 4.01, Maintaining Confidentiality.)

[(b) When psychologists have reason to believe that records of their professional services will be used in legal proceedings involving recipients of or participants in their work, they have a responsibility to create and maintain documentation in the kind of detail and quality that would be consistent with reasonable judicial scrutiny, which may be higher than the normative standard for general practice.] THIS HAS NO LEGAL OR PRACTICAL MEANING

[6.02 Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work.]

(B)(a) Psychologists TAKE REASONABLE STEPS TO PROTECT THE [maintain appropriate] confidentiality RIGHTS OF THE PERSONS TO WHOM THEY PROVIDE PSYCHOLOGICAL ACTIVITIES in creating, storing, accessing, transferring, and disposing of records under their control, (whether [these] SUCH RECORDS are written, automated, or EXIST in any other medium). (See also Standard 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.)

[(b) If confidential information concerning recipients of psychological services is entered into databases or systems of records available to persons whose access has not been consented to by the recipient, psychologists use coding or other techniques to avoid the inclusion of personal identifiers.] UNNECESSARILY REDUNDANT

[(c) A psychologist makes plans in advance to facilitate the appropriate transfer and to protect the confidentiality of records and data in the event of the psychologist's death, incapacity, or withdrawal from the position or practice.] PUT IN BELOW AS 10.09

[6.03 Availability of Records and Data.

Recognizing that ownership of records and data is governed by legal principles or contractual obligations, psychologists take reasonable and

lawful steps so that records and data remain available to the extent needed to serve the best interests of patients, individual or organizational clients, research participants, or appropriate others.] COVERED IN 6.01(a)

6.04 Withholding Records for Nonpayment.

Psychologists may not withhold records under their control that are requested and needed for a patient's or client's [emergency] treatment solely because payment has not been received.] TO 10.09(c)

6.05 Fees and Financial Arrangements.

(a) As early as is REASONABLY PRACTICABLE in a [professional or scientific] PSYCHOLOGICAL relationship, the psychologist and the patient, client, or other [appropriate] recipient of psychological [services] ACTIVITIES reach an agreement specifying the compensation and the billing arrangements.

(b) Psychologists CHARGE FEES [do not exploit recipients of services or payors with respect to fees] THAT ARE REASONABLE IN LIGHT OF ALL THE CIRCUMSTANCES OF THE PSYCHOLOGICAL RELATIONSHIP. THE CIRCUMSTANCES TO BE CONSIDERED IN DETERMINING THE REASONABLENESS OF A FEE INCLUDE BUT ARE NOT LIMITED TO:

- 1) THE FINANCIAL CIRCUMSTANCES OF THE RECIPIENT;
- 2) THE LENGTH OF TIME AND FREQUENCY OF CONTACT REQUIRED, THE SEVERITY OF THE PROBLEMS FOR WHICH THE RECIPIENT IS SEEKING THE PSYCHOLOGIST'S ASSISTANCE, THE DIFFICULTY OF THE PSYCHOLOGICAL ACTIVITIES INVOLVED, AND THE SKILL REQUISITE TO PERFORM THE PSYCHOLOGICAL ACTIVITIES PROPERLY;
- 3) THE LIKELIHOOD THAT THE ACCEPTANCE OF THE PARTICULAR PSYCHOLOGICAL RELATIONSHIP WILL PRECLUDE OTHER PSYCHOLOGICAL ACTIVITY BY THE PSYCHOLOGIST;
- 4) THE FEE CUSTOMARILY CHARGED IN THE LOCALITY FOR SIMILAR PSYCHOLOGICAL ACTIVITIES;
- 5) THE TIME LIMITATIONS IMPOSED BY THE RECIPIENT OF THE PSYCHOLOGICAL ACTIVITIES, OR BY THE CIRCUMSTANCES;
- 6) THE NATURE AND PROBABLY LENGTH OF THE PSYCHOLOGICAL RELATIONSHIP WITH THE RECIPIENT OF THE PSYCHOLOGIST'S ACTIVITIES; AND
- 7) THE EXPERTISE, REPUTATION AND ABILITY OF THE PSYCHOLOGIST OR PSYCHOLOGISTS PERFORMING THE PSYCHOLOGICAL ACTIVITIES.

[(c) Psychologists' fee practices are consistent with law.] WE DO NOT HAVE TO TELL PSYCHOLOGISTS THAT THEY MUST OBEY THE LAW.

(d) Psychologists do not misrepresent their fees.

[(e) If limitations to services can be anticipated because of limitations in financing, this is discussed with the patient, client, or other appropriate recipient of services as early as is REASONABLY PRACTICABLE. (See also Standards 10.09, Interruption of Services, and 10.10, Terminating the Professional Relationship.)]

(E) IF THE PSYCHOLOGIST KNOWS OR HAS REASON TO BELIEVE THAT THE PSYCHOLOGICAL ACTIVITIES REQUIRED WITH RESPECT TO A PARTICULAR PSYCHOLOGICAL RELATIONSHIP MAY BE LIMITED BY THE ABILITY OF THE RECIPIENT OF SUCH ACTIVITIES TO PAY, THE PSYCHOLOGIST ADVISES THE RECIPIENT OF SUCH LIMITATIONS AS EARLY IN THE RELATIONSHIP AS IS REASONABLY PRACTICABLE.

[(f) If the patient, client, or other recipient of services does not pay

for services as agreed, and if the psychologist wishes to use collection agencies or legal measures to collect the fees, the psychologist first informs the person that such measures will be taken and provides that person an opportunity to make prompt payment. (See also Standards 6.04, Withholding Records for Nonpayment, and 10.01, Informed Consent to Psychotherapy.)]

(f) A PSYCHOLOGIST SHALL NOT USE A COLLECTION AGENCY OR INSTITUTE CIVIL ACTION TO COLLECT DELINQUENT FEES FOR PSYCHOLOGICAL ACTIVITIES UNLESS THE PSYCHOLOGIST HAS FIRST (1) NOTIFIED THE RECIPIENT OF SUCH PSYCHOLOGICAL ACTIVITIES OF THE PSYCHOLOGIST'S INTENTION TO TAKE SUCH MEASURES TO COLLECT THE DELINQUENT FEES AND (2) PROVIDED A REASONABLE TIME FOR THE RECIPIENT TO PAY THE DELINQUENT FEES.

6.06 Barter With Patients or Clients.

Psychologists [ordinarily refrain from] MAY ONLY accept[ing] goods, services, or other nonmonetary remuneration from patients, [or] clients, OR OTHER RECIPIENTS OF PSYCHOLOGICAL ACTIVITIES [in return for psychological services] SO LONG AS SUCH ACCEPTANCE DOES NOT RESULT IN A VIOLATION OF STANDARD 3.07, MULTIPLE RELATIONSHIPS. [because such arrangements create inherent potential for conflicts, exploitation, and distortion of the professional relationship. A psychologist may participate in bartering only if (1) it is not clinically contraindicated, and (2) the relationship is not exploitative. (See also Standards 3.07, Multiple Relationships, and 6.05, Fees and Financial Arrangements.)]

6.07 Accuracy in Reports to Payors and Funding Sources.

In their reports to payors for services or sources of research funding, psychologists [accurately state] SHALL NOT KNOWINGLY MAKE A MATERIAL MISREPRESENTATION WITH RESPECT TO the nature of the service provided or research conducted, the fees, charges, or payments, and where applicable, the identity of the provider, the findings, and the diagnosis. (See also Standards 4.01, Maintaining Confidentiality; 4.04, Minimizing Intrusions on Privacy; and 4.05, Disclosures.)

6.08 Referrals and Fees.

(A) When a psychologist pays, receives payment from, or divides fees with another professional, other than in an employer-employee relationship, the payment to each is based SOLELY on the PSYCHOLOGICAL ACTIVITIES [services] provided. [(clinical, consultative, administrative, or other) and is not based on the referral itself]. (See also Standard 3.10, Consultations and Referrals.)

(B) A PSYCHOLOGIST SHALL NOT GIVE ANYTHING OF VALUE TO A PERSON FOR RECOMMENDING THE PSYCHOLOGIST'S PSYCHOLOGICAL ACTIVITIES, EXCEPT THAT A PSYCHOLOGIST MAY (1) PAY THE REASONABLE COSTS OF ADVERTISEMENTS OR COMMUNICATIONS PERMITTED BY THIS ETHICS CODE; (2) PAY THE CHARGES OF A NOT-FOR-PROFIT PSYCHOLOGICAL REFERRAL SERVICE OR PSYCHOLOGICAL SERVICE ORGANIZATION; OR (3) PAY FOR THE PURCHASE OF A PSYCHOLOGY PRACTICE.

7. TEACHING AND TRAINING SUPERVISION

7.01 Design of Education and Training Programs.

(a) Psychologists who are responsible for education and training programs take reasonable steps to ensure that the programs are designed to provide the [appropriate] knowledge and [proper] experiences[, and] REASONABLY REQUIRED to meet the STATED [requirements for licensure, certification, or other] goals [for which claims are made by] OF the program. (See also Standard 5.03, Descriptions of Workshops and Nondegree-Granting Educational Programs.)

7.02 Descriptions of Education and Training Programs.

(a) Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including participation in required course- or program-related counseling, psychotherapy, or experiential groups), training goals and objectives, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties.

(b) Psychologists['] DO NOT KNOWINGLY MAKE MATERIAL MISREPRESENTATIONS OR OMIT MATERIAL INFORMATION IN THEIR course outlines [are accurate and not misleading, particularly regarding the subject matter to be covered], THEIR STATED bases for evaluating progress, and the nature of course experiences. (See also Standard 5.01, Avoidance of False or Deceptive Statements.)

7.03 [Accuracy and Objectivity in Teaching] REQUIRING DISCLOSURES OF PERSONAL INFORMATION BY STUDENTS.

[(a) When engaged in teaching or training, psychologists present psychological information accurately and with a reasonable degree of objectivity. (See also Standard 2.03, Maintaining Expertise.)] THIS SECTION IS REDUNDANT WITH STANDARD 2.01

[(b) When engaged in teaching or training, psychologists make reasonable efforts to avoid engaging in conduct that is personally demeaning to students or supervisees. (See also Standard 3.05, Other Harassment.)] THIS SECTION IS REDUNDANT WITH STANDARD 3.05

[(c)] Psychologists do not require students to disclose personal information, either orally or in writing, which students might reasonably be expected to find to be embarrassing or upsetting to disclose. Such information includes but is not limited to sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, and spouses.

7.04 Mandatory Individual or Group Therapy.

(a) In programs that require mandatory individual or group therapy, faculty responsible for evaluating students' academic performance do not themselves provide that therapy. (See also Standard 3.07, Multiple Relationships.)

(b) When individual or group therapy is a program or course requirement, students are allowed the option of selecting a comparable experience outside the program.

7.05 Assessing Student and Supervisee Performance.

(a) In academic and supervisory relationships, psychologists TAKE REASONABLE STEPS TO establish[,] AND TO IMPLEMENT A MECHANISM [an appropriate process] for providing feedback to students and supervisees.

PSYCHOLOGISTS SHALL COMMUNICATE THE NATURE AND TERMS OF THE EVALUATION MECHANISM TO ITS RECIPIENTS AT THE OUTSET OF THE RELATIONSHIP.

(b) Psychologists evaluate students and supervisees ONLY on the basis of their actual performance on [relevant and] established program requirements WHICH THEMSELVES SHALL HAVE BEEN COMMUNICATED TO STUDENTS AND SUPERVISEES AT THE OUTSET OF THE RELATIONSHIP.

[7.06 Sexual Relationships with Students and Supervisees. Psychologists do not engage in sexual relationships with students or supervisees in training who are in their department or over whom the psychologist has or is likely to have evaluative authority.] COVERED IN STANDARD 3.07

8. RESEARCH AND PUBLICATION

8.01 Institutional Approval.

Psychologists obtain [from host institutions or organizations appropriate] approval FROM HOST INSTITUTIONS OR ORGANIZATIONS prior to conducting research[, and they provide accurate information] PSYCHOLOGISTS DO NOT MAKE MATERIAL MISREPRESENTATIONS OR KNOWINGLY OMIT MATERIAL INFORMATION CONCERNING [about] their research proposals. They conduct the research in accordance with the approved research protocol.

8.02 Informed Consent to Research.

(a) When obtaining informed consent as required in Standard 3.11, psychologists inform participants about (1) the purpose of the research, expected duration, and procedures; (2) their right to decline to participate and to withdraw from the research once participation has begun; (3) the foreseeable consequences of declining or withdrawing; (4) reasonably foreseeable factors that may be expected to influence their willingness to participate such as potential risks, discomfort, or adverse effects; (5) any prospective research benefits; (6) limitations on confidentiality; (7) incentives for participation, (8) other aspects about which the prospective participants inquire; and (9) whom to contact for questions about the research and research participants' rights. (See Standards 8.05, Dispensing with Informed Consent, and 8.07, Deception in Research, for exceptions to this standard.)

(b) AT THE OUTSET OF THE RESEARCH, [P]psychologists conducting clinical research involving the use of experimental treatments[,] clarify to the participant [at the outset of the research] (1) the experimental nature of the treatment, (2) the services that will or will not be available to the control group(s) if appropriate, (3) the means by which assignment to treatment and control groups will be made, (4) and available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun.

8.03 Informed Consent for Recording Voice and Images in Research.

Psychologists obtain informed consent from research participants prior to recording their voice or image, unless the research involves simply naturalistic observations in public places, and it is not anticipated that the recording will be used in a manner that could cause personal

identification or harm. (See also Standard 8.07, Deception in Research.)

8.04 Student and Subordinate Research Participants.

(a) When psychologists conduct research with individuals such as students or subordinates, psychologists [take special care to] SHALL protect the prospective participants from ANY adverse consequences WHICH MIGHT RESULT FROM THEIR [of] declining or withdrawing from participation.

(b) When research participation is a course requirement or opportunity for extra credit, the prospective participant [is] SHALL BE given the choice of equitable alternative activities.

8.05 Dispensing With Informed Consent.

Psychologists may dispense with informed consent only where permitted by law, applicable regulations and institutional review board requirements or where: (1) research is conducted in commonly accepted educational settings and involves the study of normal educational practices, instructional strategies, or effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods and that would not reasonably be assumed to create distress or harm; or (2) research involving only anonymous questionnaires, naturalistic observations, or certain kinds of archival research for which participants can not be identified and for which disclosure of the participants' responses would not place them at risk of criminal or civil liability or be damaging to the participants' financial standing, employability, or reputation or that would not reasonably be assumed to create distress or harm.

8.06 Offering Inducements for Research Participants.

(a) In offering professional [services] PSYCHOLOGICAL ACTIVITIES as an inducement to obtain research participants, psychologists make clear the nature of the [services] ACTIVITIES, as well as the risks, obligations, and limitations. (See also Standard 6.06, Barter With Patients or Clients.)

(b) Psychologists do not offer [excessive or inappropriate] financial or other inducements to obtain research [participants] PARTICIPATION OF A SORT THAT A REASONABLY PRUDENT PSYCHOLOGIST WOULD CONSIDERED COERCIVE. [, particularly when they might tend to coerce participation.]

8.07 Deception in Research.

(a) Psychologists do not conduct a study involving deception unless [they] A REASONABLY PRUDENT PSYCHOLOGIST WOULD [have] determine[d] that the use of deceptive techniques is justified by the study's prospective scientific, educational, or applied value and that effective alternative procedures that do not use deception are not REASONABLY PRACTICABLE.

(b) Psychologists [never deceive] DO NOT MATERIALLY MISREPRESENT OR FAIL TO DISCLOSE MATERIAL INFORMATION TO research participants [about significant aspects] that would affect their willingness to participate, such as physical risks, discomfort, or unpleasant emotional experiences.

(c) Any other deception that is an integral feature of the design and conduct of an experiment must be explained to participants as early as is REASONABLY PRACTICABLE, preferably at the conclusion of their participation, but no later than at the conclusion of the research. (See also Standard 8.08, Debriefing.)

(d) When REASONABLY PRACTICABLE, participants should be permitted to withdraw their data upon debriefing.

8.08 Debriefing.

(a) Psychologists provide a prompt opportunity for participants to obtain [appropriate] MATERIAL information about the nature, results, and conclusions of the research, and psychologists TAKE REASONABLE STEPS [attempt] to correct any misconceptions that participants may have.

(b) If scientific or humane values justify delaying or withholding this information, psychologists take reasonable measures to reduce the risk of harm.

(c) When a psychologist [becomes aware] KNOWS that research procedures have had a harmful impact on the individual participant, the psychologist takes reasonable steps to ameliorate the harm.

8.09 Care and Use of Animals in Research.

[(a)]Psychologists who conduct research involving animals DO SO IN COMPLIANCE WITH APA'S GUIDELINES FOR ETHICAL CONDUCT IN THE CARE AND USE OF ANIMALS.[treat them humanely.

(b) Psychologists acquire, care for, use, and dispose of animals in compliance with current federal, state, and local laws and regulations, and with professional standards.

(c) Psychologists trained in research methods and experienced in the care of laboratory animals supervise all procedures involving animals and are responsible for ensuring appropriate consideration of their comfort, health, and humane treatment.

(d) Psychologists ensure that all individuals using animals under their supervision have received instruction in research methods and in the care, maintenance, and handling of the species being used, to the extent appropriate to their role.

(e) Responsibilities and activities of individuals assisting in a research project are consistent with their respective competencies.

(f) Psychologists make reasonable efforts to minimize the discomfort, infection, illness, and pain of animal subjects.

(g) A procedure subjecting animals to pain, stress, or privation is used only when an alternative procedure is unavailable and the goal is justified by its prospective scientific, educational, or applied value.

(h) Surgical procedures are performed under appropriate anesthesia; techniques to avoid infection and minimize pain are followed during and after surgery.

(i) When it is appropriate that the animal's life be terminated, it is done rapidly, with an effort to minimize pain, and in accordance with accepted procedures.] WHY ENUMERATE THE PRINCIPLES ABOVE WHEN THERE IS A PERFECTLY GOOD SPECIALIZED DOCUMENT ON THE ETHICS OF THE CARE AND USE OF ANIMALS?

8.10 Reporting of Results.

(a) Psychologists do not KNOWINGLY MAKE A MATERIAL MISREPRESENTATION OR FAIL TO DISCLOSE MATERIAL INFORMATION IN REPORTING THE [fabricate data or falsify] THE results [in] OF THEIR RESEARCH [their publications].

(b) If psychologists discover significant errors in their published data, they take reasonable steps to correct such errors in a correction, retraction, erratum, or other appropriate publication means.

8.11 Plagiarism.

Psychologists do not present substantial portions or elements of another's work or data as their own, even if the other work or data source is cited occasionally.

8.12 Publication Credit.

(a) Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have contributed.

(b) Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institutional position, such as department chair, does not justify authorship credit. Minor contributions to the research or to the writing for publications MAY BE [are appropriately] acknowledged[, such as] in footnotes or in an introductory statement.

(c) A student is listed as principal author on any multiple-authored article that is substantially based on the student's dissertation or thesis when to do so accurately reflects the relative scientific or professional contributions of the individuals involved. Faculty advisors discuss publication credit with students as early as REASONABLY PRACTICABLE and throughout the research and publication process [as appropriate].

8.13 Duplicate Publication of Data.

Psychologists do not publish, as original data, data that have been previously published. This does not preclude republishing data when they are accompanied by proper acknowledgment.

8.14 Sharing Data.

After research results are published, psychologists make reasonable attempts to provide information to other competent professionals who seek to verify the substantive claims through reanalysis, provided that the confidentiality of the participants can be protected and unless legal rights concerning proprietary data preclude their release. This does not preclude psychologists from requiring that such individuals or groups be responsible for costs associated with the provision of such information.

9. ASSESSMENT

9.01 Bases for Assessments.

Psychologists' BASE THEIR assessments, recommendations, reports, and diagnostic or evaluative statements [are based] on SUCH information and techniques AS A REASONABLY PRUDENT PSYCHOLOGIST WOULD USE UNDER THE CIRCUMSTANCES [sufficient to provide appropriate substantiation for their findings]. (See also Standard 11.03, Forensic Opinions.)

9.02 Competent Use of Assessments.

Psychologists who develop, administer, score, interpret, or use psychological assessment techniques, interviews, tests, or instruments SHOULD CONDUCT SUCH ACTIVITIES IN A GOOD FAITH MANNER [do so in a manner] and for purposes that are [appropriate in light of the research on or evidence of the usefulness and proper] REASONABLY SUPPORTED BY PUBLISHED RESEARCH CONCERNING THE USE AND application of [the techniques] SUCH PSYCHOLOGICAL TOOLS.

9.03 Informed Consent In MANDATED Assessments.

[(a) Psychologists obtain informed consent for assessments, evaluations, or diagnostic services, as described in Standard 3.11, Informed Consent, except when testing is mandated by law or governmental regulation or when testing is conducted as a routine educational activity.] REDUNDANT WITH 3.11.

[(b)] Psychologists inform persons for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed.

9.04 Release of Test Data.

(a) Psychologists may release test data, including raw responses and raw scores, ONLY to A PERSON OR PERSONS COMPETENT TO USE THAT TEST DATA AND ONLY WITH THE CONSENT OF THE PERSON TESTED OR HIS/HER LEGALLY CONSTITUTED REPRESENTATIVE[another qualified professional based on a client release]. Psychologists SHOULD refrain from releasing test data to persons who are not qualified to use such information, except (1) as required by [statute or court order] APPLICABLE LAW or (2) AS REASONABLY REQUESTED BY THE PERSON TESTED [to an attorney or court based on a client release or (3) to the patient or client as appropriate]. (See also Standards 1.03, Relationship of Ethics and Law, and 2.01, Boundaries of Competence.)

9.05 Test Construction.

Psychologists who develop and conduct research with tests and other assessment techniques use [appropriate] REASONABLE AND CUSTOMARY psychometric procedures and [current] scientific or professional knowledge [for] REGARDING test design, standardization, validation, reduction or elimination of bias, and recommendations for use.

9.06 Use of Assessment in General and With Diverse Populations.

[(a) Psychologists who administer, score, interpret, or use assessment techniques are familiar with the reliability, validation, and related standardization or outcome studies of, and proper applications and uses of, the techniques they use.] REDUNDANT WITH 2.01(a)

(A)(b) When appropriate tests for diverse populations have not been developed, psychologists who utilize existing standardized tests may adapt the administration and interpretation procedures only if the adaptations have a reliable basis in the knowledge and experience of the discipline. Psychologists must document any such adaptation and clarify its impact on the reliability and validity of their findings.

(B)(c) Psychologists use assessment methods in a manner [appropriate] THAT

TAKE INTO ACCOUNT [to] an individual's language preference and competence and cultural background.

[(d) Psychologists using the services of an interpreter take reasonable steps to use interpreters who have been adequately trained, obtain informed consent from the client to use that interpreter, ensure that confidentiality of test results and test security are maintained, and discuss any limitations on the reliability and validity of data obtained. (See also Standards 4.01 Maintaining Confidentiality; 9.01, Bases for Assessment; 9.03, Informed Consent in Assessments; and 9.08, Unqualified Persons.)] REDUNDANT WITH 2.05

9.07 Interpreting Assessment Results.

When interpreting assessment results, including automated interpretations, psychologists EXERCISE REASONABLE CARE IN CONSIDERING THE EFFECT OF [take into account the] various test factors[, test taking abilities, and other characteristics of the person being assessed, such as] INCLUDING BUT NOT LIMITED TO situational, personal, linguistic, and cultural VARIABLES [differences,] that might affect [psychologists' judgments or reduce] the accuracy of their interpretations. [They indicate] PSYCHOLOGISTS EXERCISE REASONABLE CARE IN NOTING any significant reservations they have about the accuracy or limitations of their interpretations. (See also Standards 2.01 b and c, Boundaries of Competence, and 3.03, Unfair Discrimination.)

9.08 Unqualified Persons.

Psychologists do not FACILITATE [promote] the use of psychological assessment techniques by [unqualified] persons WHO ARE NOT COMPETENT IN THEIR USE EXCEPT WHEN SUCH USE IS CONDUCTED FOR TRAINING PURPOSES AND UNDER THE SUPERVISION OF A COMPETENT PSYCHOLOGIST. (See also Standard 2.05, Delegation of Work to Others and Use of Interpreters.)

[9.09 Obsolete Tests and Outdated Test Results. COVERED BY 2.01 WHICH SETS FORTH BOUNDARIES OF COMPETENCE

(a) Psychologists do not base their assessment or intervention decisions or recommendations on data or test results that are outdated for the current purpose.

(b) Similarly, psychologists do not base such decisions or recommendations on tests and measures that are obsolete and not useful for the current purpose.]

9.10 Test Scoring and Interpretation Services.

(a) Psychologists who offer assessment or scoring services to other professionals [accurately describe] EXERCISE REASONABLE CARE IN DESCRIBING the purpose, norms, validity, reliability, and applications of the ASSESSMENT procedures and any [special] SIGNIFICANT qualifications [applicable to] REQUIRED FOR their use.

(b) Psychologists select scoring and interpretation services (including automated services) on the basis of evidence of the validity of the program and procedures [as well as on other appropriate considerations]. (See also Standard 2.01 b and c, Boundaries of Competence.)

(c) Psychologists EXERCISE REASONABLE CARE [retain appropriate responsibility for] AND RETAIN PROFESSIONAL RESPONSIBILITY FOR the

[appropriate] application, interpretation, and use of assessment instruments, whether they score and interpret such tests themselves or use automated or other services.

9.11 Explaining Assessment Results.

Regardless of whether the scoring and interpretation are done by the psychologist, by [employees or assistants] THEIR DELEGATES, or by automated or other outside services, psychologists EXERCISE REASONABLE CARE IN COMMUNICATING ASSESSMENT RESULTS [take reasonable steps to ensure that appropriate explanations of results are given,] unless (1) the nature of the PSYCHOLOGICAL relationship PREVENTS [precludes provision of] THE PSYCHOLOGIST FROM DELIVERING an explanation of results (such as in some organizational consulting, pre-employment or security screenings, and forensic evaluations), and (2) this fact has been [clearly] explained in advance to the person being assessed.

9.12 Maintaining Test Security.

Psychologists make reasonable efforts to maintain the integrity and security of tests and other assessment techniques consistent with law, contractual obligations, and in a manner that permits compliance with the requirements of this Ethics Code. (See also Standards 1.03, Relationship of Ethics and Law, and 9.04, Release of Test Data.)

10. THERAPY

10.01 InformING[ed Consent to] Psychotherapy PATIENTS OR CLIENTS ABOUT SUPERVISORY RELATIONSHIPS.

[(a) When obtaining informed consent to therapy as required in Standard 3.11, Informed Consent, psychologists inform clients or patients as early as is REASONABLY PRACTICABLE in the therapeutic relationship about appropriate information, such as the nature and anticipated course of therapy, fees, involvement of third parties, and confidentiality. (See also Standards 4.02, Discussing the Limits of Confidentiality; and 6.05, Fees and Financial Arrangements.)

(b) Prior to providing treatment for which generally recognized standards do not yet exist, psychologists inform their clients/patients of the experimental nature of the treatment and the voluntary nature of their participation. (See also Standards 2.01d, Boundaries of Competence, and 3.11, Informed Consent.)] REDUNDANT TO 3.11

[(c) When the psychologist's work with clients or patients will be supervised, the information provided in obtaining informed consent includes that fact, and the name of the supervisor, when the supervisor has legal responsibility for the case.] THIS IS COLLAPSED INTO THE PARAGRAPH BELOW

[(B)(d)] When the therapist [is in training] IS BEING SUPERVISED AS A PART OF HIS OR HER TRAINING AND LEGAL RESPONSIBILITY FOR CARE RESIDES WITH A SUPERVISOR, the client or patient, AS PART OF THE INFORMED CONSENT PROCEDURE is informed of that fact AND IS GIVEN THE NAME OF THE SUPERVISOR.

[10.02 Couple and Family Relationships.

(a) When a psychologist agrees to provide services to several persons who have a relationship (such as husband and wife or parents and children), the psychologist attempts to clarify at the outset (1) which of the individuals are patients or clients and (2) the relationship the psychologist will have

with each person. This clarification includes the role of the psychologist and the probable uses of the services provided or the information obtained. (See also Standard 4.02, Discussing the Limits of Confidentiality.)] REDUNDANT TO 4.02

[(b) As soon as it becomes apparent that the psychologist may be called on to perform potentially conflicting roles (such as marital counselor to husband and wife, and then witness for one party in a divorce proceeding), the psychologist attempts to clarify and adjust, or withdraw from, roles appropriately. (See also Standard 11.04, Clarification of Role, under Forensic Activities.)] REDUNDANT TO 3.07

10.03 Group Therapy.

When a psychologist provides GROUP THERAPEUTIC services [to several persons in a group setting] the psychologist [attempts to] MUST COMPLY WITH THE REQUIREMENTS OF SECTION 4.02, LIMITS OF CONFIDENTIALITY AND SHOULD ATTEMPT TO clarify at the outset EXPECTATIONS FOR THE KEEPING OF CONFIDENTIALITY BY THE MEMBERS OF THE GROUP [the roles and responsibilities of all parties and the limits of confidentiality].

10.04 Providing [Mental Health Services] PSYCHOTHERAPEUTIC OR COUNSELING SERVICES to Those Served by Others.

In deciding whether to offer or provide PSYCHOTHERAPY OR COUNSELING [services] to those WHOM THE PSYCHOLOGIST KNOWS ARE already receiving [mental health] SUCH services elsewhere, [psychologists carefully consider the treatment issues and the potential patient's or client's welfare. T] the psychologist SHOULD discuss these issues with the patient or client, or another legally authorized person on behalf of the client[, in order to minimize the risk of confusion and conflict], MAY consult[s] with the other service providers when [appropriate] LEGALLY AUTHORIZED TO DO SO, and SHOULD proceed[s] with REASONABLE caution and sensitivity to [the] POTENTIAL therapeutic issues ARISING FROM THE PREEXISTING OR COEXISTING RELATIONSHIP.

10.05 Sexual Intimacies With Current Therapy Patients or Therapy Clients. Psychologists do not engage in sexual intimacies with current patients or clients.

10.06 Sexual Intimacies with Relatives of Current Psychotherapy Clients or Psychotherapy Patients.

Psychologists do not engage in sexual intimacies with parents, guardians, spouses, partners, offspring, or siblings of current PSYCHOtherapy patients. Psychologists do not terminate therapy to circumvent this rule.

10.07 Therapy With Former Sexual Partners.

Psychologists do not accept as PSYCHOtherapy patients or clients persons with whom they have engaged in sexual intimacies.

10.08 Sexual Intimacies With Former Therapy Patients or Therapy Clients.

(a) Psychologists do not engage in sexual intimacies with a former therapy patient or client for at least two years after cessation or termination of therapy.

(b) Because sexual intimacies with a former therapy patient or client are so frequently harmful to the patient or client, and because such intimacies

undermine public confidence in the psychology profession and thereby deter the public's use of needed services, psychologists do not engage in sexual intimacies with former therapy patients and therapy clients even after a two-year interval except in the most unusual circumstances. The psychologist who engages in such activity after the two years following cessation or termination of therapy and of having no sexual contact with a former client or patient bears the burden of demonstrating that there has been no exploitation, in light of all relevant factors, including (1) the amount of time that has passed since therapy terminated, (2) the nature, duration, and intensity of the therapy, (3) the circumstances of termination, (4) the patient's or client's personal history, (5) the patient's or client's current mental status, (6) the likelihood of adverse impact on the patient or client, and (7) any statements or actions made by the therapist during the course of therapy suggesting or inviting the possibility of a post-termination sexual or romantic relationship with the patient or client. (See also Standard 3.07, Multiple Relationships.)

10.09 Interruption of Services AND TRANSFER OF RECORDS.

(a) Psychologists make reasonable efforts to plan for facilitating care in the event that psychological services are interrupted by factors such as the psychologist's illness, death, unavailability, or relocation or by the client's relocation or financial limitations. PSYCHOLOGISTS MAY NOT WITHHOLD RECORDS UNDER THEIR CONTROL THAT ARE REQUESTED AND NEEDED FOR A PATIENT'S OR CLIENT'S TREATMENT SOLELY BECUASE PAYMENT HAS NOT BEEN RECEIVED. (See also Standard 6.02c, Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work.)

(B) A PSYCHOLOGIST MAKES PLANS IN ADVANCE TO FACILITATE THE APPROPRIATE TRANSFER AND TO PROTECT THE CONFIDENTIALITY OF RECORDS AND DATA IN THE EVENT OF THE PSYCHOLOGIST'S DEATH, INCAPACITY, OR WITHDRAWAL FROM THE POSITION OR PRACTICE.

(C)(b) When entering into employment or contractual relationships, psychologists [provide for orderly and appropriate resolution] TAKE REASONABLE STEPS TO FACILITATE TRANSFER of responsibility for patient or client care in the event that the employment or contractual relationship ends, with paramount consideration given to the welfare of the patient or client.

10.10 Terminating the Professional Relationship.

[(a) Psychologists do not abandon patients or clients. (See also Standard 6.05e, Fees and Financial Arrangements.)] (A) PSYCHOLOGISTS STRIVE TO AVOID THE PREMATURE INTERRUPTION OR TERMINATION OF PSYCHOLOGICAL ACTIVITIES THAT A REASONABLE AND PRUDENT PSYCHOLOGIST, TAKING INTO ACCOUNT ALL THE CIRCUMSTANCES, WOULD CONCLUDE WERE BENEFICIAL TO THE RECIPIENTS.

(b) Psychologists MAY terminate a [professional] A PSYCHOTHERAPEUTIC OR COUNSELING relationship when IN THE EXERCISE OF THE PROFESSIONAL JUDGMENT OF A REASONABLE AND PRUDENT PSYCHOLOGIST, TAKING INTO ACCOUNT ALL THE CIRCUMSTANCES, IT WOULD BE REASONABLE TO DO SO. [It becomes reasonably clear] SUCH CIRCUMSTANCES INCLUDE BUT ARE NOT LIMITED TO WHETHER THE PATIENT OR CLIENT CONTINUES TO NEED [that the patient or client no longer

needs] the service, WHETHER HE OR SHE is not benefiting, or WHETHER HE OR SHE is being harmed by continued service.

(c) Psychologists may terminate a professional relationship when threatened or otherwise endangered by the patient or client or ANOTHER PERSON WITH WHOM THE PATIENT OR CLIENT HAS A SIGNIFICANT RELATIONSHIP [the patient's or client's family member].

(d) EXCEPT WHERE PREVENTED FROM DOING SO BY THE CONDUCT OF THE PATIENT OR CLIENT, [P]prior to termination [for whatever reason, except where precluded by the patient's or client's conduct,] the psychologist discusses WITH the patient['s] or client['s] THE LATTER'S views and needs AND provides [appropriate] REASONABLE pretermination counseling. [,] IN ADDITION, UPON REQUEST OF THE CLIENT OR IF INDICATED IN THE EXERCISE OF THE PSYCHOLOGIST'S REASONABLE PROFESSIONAL JUDGMENT HE OR SHE DETERMINES THAT THE PATIENT OR CLIENT SHOULD CONTINUE SERVICE WITH SOME OTHER [suggests] alternative service provider[s as appropriate, and], THE PSYCHOLOGIST takes [other] reasonable steps to facilitate transfer of responsibility. [to another provider if the patient or client needs one immediately].

11.0 FORENSIC ACTIVITIES

Forensic [services] ACTIVITIES SHALL MEAN assessments, interviews, consultations, testimony or other psychological [services] ACTIVITIES [specifically performed] when THOSE ACTIVITIES OF THE PSYCHOLOGIST WERE REQUESTED FOR THE EXPRESS PURPOSE OF BEING OFFERED AS EVIDENCE OR IN CONSULTATION ABOUT [, psychologists can be reasonably expected to know there is a substantial possibility that their work, opinions or testimony may be offered as evidence in] a legal, administrative, or adjudicative proceeding or a similar forensic context.

11.01 Forensic Competence.

(a) WHEN CALLED UPON TO PERFORM FORENSIC ACTIVITIES, [P]psychologists SHOULD TAKE REASONABLE STEPS TO base their forensic work on a reasonable level of knowledge and understanding of the [professional and legal] THEIR bases for participation in THE PARTICULAR legal proceeding(s). (See also Standards 1.01, Misuse of Psychologists' Influence; 2.01, Boundaries of Competence; 2.03, Maintaining Expertise; 2.04, Basis for Scientific and Professional Judgments; 2.05, Delegation of Work to Others and Use of Interpreters; and 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.)

[(b)Psychologists base their forensic work on appropriate knowledge of and competence in the areas underlying such work, including specialized knowledge concerning special populations and topics. (See also Standard 9.06, Use of Assessment in General and With Diverse Populations.)]
REDUNDANT TO OTHER STANDARDS RE: PROFESSIONAL COMPETENCE - E. G., 2.01

11.02 Informed Consent for Forensic Services.

[(a) When obtaining informed consent to forensic services as required in Standard 3.11, psychologists inform the person from whom consent is requested about the purposes of evaluations, the nature of procedures to be employed, the potential use of the results, the party who has employed the psychologist, and the limits of confidentiality which may exist. (See also Standards 3.06, Avoiding Harm; 3.08, Third Party Requests for Services; and

3. 12, Describing the Nature and Results of Psychological Services.))
REDUNDANT TO 3.01

[(b)] When an evaluation is court ordered, the psychologist informs the individual as appropriate and the individual's legal representative of the nature of the anticipated forensic service before proceeding. If the individual or legal representative objects to a court ordered evaluation or service, the psychologist notifies the court that issued the order[and responds as directed]. (See also Standard 3.11, Informed Consent.)

[11.03 Forensic Opinions

[(a)] Except as noted in (b) and (c), below, psychologists provide forensic opinions of the psychological characteristics of an individual only after they have conducted an examination of the individual adequate to support their statements or conclusions. (See also Standard 9.01, Bases for Assessments.)

(b) When, despite reasonable efforts, such an examination is not REASONABLY PRACTICABLE psychologists document this, clarify the impact of their limited information on the reliability and validity of their reports and testimony, and appropriately limit the nature and extent of their conclusions or recommendations. (See also Standards 2.01, Boundaries of Competence and 9.07, Interpreting Assessment Results.)

(c) When an individual examination is not warranted or necessary for the opinion, psychologists explain this in their conclusions and recommendations.] COVERED IN GENERAL PRINCIPLES OF 2.01, 9.01, AND 9.07

[11.04 Clarification of Role.

Psychologists ordinarily avoid performing multiple and potentially conflicting roles in forensic matters. When psychologists are called on to serve in more than one role in a legal proceeding, for example, as consultant or expert for one party or for the court and as a fact witness, they clarify role expectations and the extent of confidentiality in advance to the extent REASONABLY PRACTICABLE, and thereafter as changes occur, in order to avoid compromising their professional judgment and objectivity and in order to avoid misleading others regarding their role. (See also Standards 3.06, Avoiding Harm, and 3.07, Multiple Relationships.)
REDUNDANT TO 3.07 AND ASSIGNS A POTENTIAL RESPONSIBILITY TO PSYCHOLOGISTS TO BRING MATTERS UP IN TESTIMONY AS A CASE EVOLVES WHEN THEY HAVE NO CONTROL OVER WHAT THEY WILL BE ASKED.

11.05 Prior Relationships.

A prior professional relationship with a party does not preclude psychologists from testifying as fact witnesses or from testifying to their services to the extent permitted by applicable law. Psychologists appropriately take into account ways in which the prior relationship might affect their professional objectivity or opinions and disclose the potential conflict to the relevant parties. WE DO NOT KNOW WHAT TO SAY ABOUT THIS ONE. IT SEEMS TO CONTRADICT 3.07. ITS PURPOSE IS UNCLEAR. DO YOU PEOPLE EVEN UNDERSTAND IT?

11.06 Compliance With Law and Rules.

(a) In performing forensic [roles] ACTIVITIES, psychologists [are] SHALL BE reasonably familiar with the rules governing [their roles (e.g., federal and state rules of evidence)] THOSE ACTIVITIES. IF IN THE PERFORMANCE OF

FORENSIC ACTIVITIES A CONFLICT ARISES BETWEEN LEGAL REQUIREMENTS AND THE REQUIREMENTS OF THIS ETHICS CODE [Psychologists are aware of the occasionally competing demands placed upon them by these principles and the requirements of the court system, and attempt to resolve these conflicts by making known their commitment to this Ethics Code and] PSYCHOLOGISTS taking REASONABLE steps to resolve the conflict in a responsible manner. Such steps may include, but are not limited to, obtaining the consultation of fellow forensic professionals, obtaining the advice of independent counsel, and conferring directly with the legal representative(s) involved. If the conflict is unresolvable via such means, the psychologist may adhere to the requirements of the court. (See also Standards 1.03, Relationship of Ethics and Law and 2.01, Boundaries of Competence.)

(b) WHEN REQUIRED IN THE PERFORMANCE OF THEIR FORENSIC ACTIVITIES, [P]sychologists in their capacities as forensic experts or consultants maintain current knowledge of the APPLICABLE rights of parties in THE PARTICULAR legal proceedings [to whom] FOR WHICH they ARE provid[e]ING services (e.g., 5th amendment rights and attorney-client privilege) and take reasonable steps to avoid diminishing these. (See also Standard 2.01, Boundaries of Competence.)

[11.07 Truthfulness and Candor.

(a) In forensic testimony and reports, psychologists testify truthfully, honestly, and candidly and, consistent with applicable legal procedures, describe fairly the bases for their testimony and conclusions.

(b) To avoid misleading, psychologists acknowledge the limits of their data or conclusions.] REDUNDANT WITH 3.02

Footnote 1

Professional materials that are most helpful in this regard are guidelines and standards that have been adopted or endorsed by professional psychological organizations. Such guidelines and standards, whether adopted by the American Psychological Association (APA) or its Divisions, are not enforceable as such by this Ethics Code, but are of educative value to psychologists, courts, and professional bodies. Such materials include, but are not limited to, the APA's General Guidelines for Providers of Psychological Services (1987), , Guidelines for Providers of Psychological Services to Ethnic, Linguistic, and Culturally Diverse Populations (1990), Record Keeping Guidelines (1993), Guidelines for Child Custody Evaluations in Divorce Proceedings (1994), Guidelines for Ethical Conduct in the Care and Use of Animals (1996), Guidelines for the Evaluation of Dementia and Age-Related Cognitive Decline (1998), Guidelines for Psychological Evaluations in Child Protection Matters (1998), Standards for Educational and Psychological Testing (1999), and Publication Manual of the American Psychological Association (4th ed., 1994).

Science Policy Update for Council of Representatives January 2003

Fiscal Year 2003 Budget

As of January 21, 2003, the House and Senate were still working to approve the remaining eleven appropriations bills, including the bill that funds the National Institutes of Health, before the end of the month. The government is currently being funded at last year's levels through a continuing resolution that will expire on January 31. As Congress left office last year, the final 15% increase of \$3.6 billion for NIH was included in the proposed FY03 Labor, Health and Human Services, and Education appropriations bill that would meet the bipartisan goal of doubling the NIH budget. On January 8, however, the Senate and House leadership agreed to cut the overall Labor-HHS-Education bill by \$2.7 billion, putting NIH funding and other programs at risk. The House version of the bill includes a \$689 million cut to the proposed \$3.6 billion increase for NIH, reducing the increase to 13% over FY02 funding. Other public health and education programs, however, will be faced with even greater cuts during the last minute rush to complete the FY03 funding bills before the President introduces his FY04 budget in February.

New Congress and New Homeland Security Department Take Shape

The November election resulted in a dramatic shift in the balance of power for the new 108th Congress, with the Senate (as well as the House of Representatives) now under Republican control. Further changes are expected with the resignation of Sen. Trent Lott (R-Miss) as Senate majority leader and the election of Senator Bill Frist (R-Tenn) to replace him. Along with these structural changes will come changes in public policy with broad implications for psychology.

A certain level of disruption accompanies every election. But a change in majority party complicates matters further, because committee chairs and the political balance of membership, along with committee staff, and budgets, shift as a result. A lame duck session--(the name given to a post-election Congress when members may have lost their seats and so have no real power left)--often produces little of substance but offers a chance to begin sorting out changes and re-examining issues that were too controversial before the election. For example, what had appeared to be a doomed legislative proposal, the Homeland Security bill, regained new life in mid-November. The labor disputes that had clouded negotiations on the bill cleared and it was passed and signed into law.

Now the real challenges begin. If anyone thought the newly authorized Transportation Security Administration was a behemoth, it will certainly be dwarfed by the amalgam of 22 agencies that will comprise the new Department of Homeland Security (DHS). Although the authorizing legislation will serve as a blueprint, construction delays and cost over-runs are likely. And questions of who will oversee the completion of the project and how it will be funded will add new wrinkles to the already complex process of sorting out a legislative agenda for the 108th Congress.

Many of the agencies to be folded into DHS have been authorized and funded by different--and competing--congressional committees. This has raised concerns that the DHS Secretary (Gov. Tom Ridge's confirmation as secretary was still pending at deadline) would spend most of the time answering inquiries from every corner of Capitol Hill. A streamlined proposal, whispered by many and formalized by the Gilmore Commission recommended that two new committees, one to authorize funds and one to appropriate funds, be created in each chamber of Congress. Although that proposal has stimulated controversy, at least on authorizing matters, it appears to be taking hold. The House has formed a Select Committee on Homeland Security, to be chaired by Rep. Christopher Cox (R-Calif.) and populated by the chairs of other committees with oversight of agencies being subsumed into DHS. The current plan calls for the replacement of the select committee by a standing committee in the 109th Congress. In the Senate, primary jurisdiction for DHS has been deeded to the Governmental Affairs Committee to be chaired by Sen. Susan Collins (R-Maine). Still undecided is how the appropriators will deal with funding allocations for DHS, as many subcommittees in both chambers will make a case for holding onto the purse strings of programs that have been in their charge.

Those issues aside, there remains a question of funding, especially given that the 107th Congress adjourned having completed only two of the 13 annual appropriations bills for 2003. Adding yet another appropriations bill that melds a \$38 billion budget is awkward but also has to be viewed in the context of fiscal conservatism that comes, by fiat, with a change to a Republican majority. That fiscal tone was all but guaranteed when Sen. Don Nickles (R-Okla.) becomes chair of the Senate Budget Committee.

Most agree that homeland security deserves to be the number one priority. However, with the increasing pressure on a Republican Congress (in a Republican administration) to stick to agreed upon budget limits and with a stated goal of making the 2001 tax cut permanent, other discretionary spending has to give. The question is from where?

Implementing the DHS plan is likely to be an iterative process, evolving over several years, as was the case with the creation of the Department of Defense. It is, after all, the largest transformation of government in modern times. During the reorganization, there are likely to be both gains and losses for psychology. Since DHS will house somewhere between 170,000 and 200,000 employees, some number of psychologists in government service will probably be affected. In addition, new budget priorities will likely affect agencies that provide funding for mental health services, as well as agencies that support psychological research.

But, as the intent of the legislation is to integrate several governmental divisions into a coherent whole, we should all move the field of psychology to become part of that effort. The Administration and Congress are pulling together a new vision for homeland security, and so should we. It is incumbent upon all of us--scientists, providers and educators--to be thinking creatively about how and where we can fit into and advance the critical mission of DHS. To this end, APA's Public Policy Office will continue to engage Congressional and federal agency staff directly on those issues and will continue to meet

regularly with the staff of the Office of Homeland Security during the transition to department status. Please let us hear from you by e-mailing. We would be pleased to incorporate your ideas into those discussions.

Other Activities Related to Homeland Security

President Zimbardo Meets With National Security Council Staff

In the wake of September 11th, the Science Directorate and Science PPO have been proactive in developing collaborative relationships with federal agencies and panels tasked with addressing terrorism issues, to ensure the involvement of behavioral scientists with expertise in these areas. On June 11th, APA President Philip G. Zimbardo joined Senior Scientist Susan Brandon and PPO's Heather Kelly for an initial meeting with two senior staff members in the National Security Council's (NSC's) Office of Combating Terrorism. NSC staff were well-versed in and very supportive of behavioral research and its relevance to national security issues, and asked APA to: provide lists of researchers and "one-pagers" on work germane to counter-terrorism efforts; facilitate interactions between NSC staff, U.S. psychologists and those in other countries with specific expertise; and collaborate on a small conference focusing on communications issues related to terrorism.

Congress Takes Steps to Create Department of Homeland Security

For much of July Congress worked to craft legislation that would create a federal Department of Homeland Security. Because the proposed department would meld or reorganize the functions of 22 other government departments/agencies just about every Congressional Committee felt the need to hold oversight hearings on the functions under its jurisdiction including the administration and funding of research relevant to the Department's mission. See the full slate of hearings at:
<http://www.apa.org/ppo/issues/sterrorismhearings.html>.

When one provision of the President's plan called for transferring certain public health preparedness functions to the new department from the Department of Health and Human Services, APA joined over two dozen other public health organizations in protesting the transfer because of the likelihood that it would lead to inefficiencies and distract from the on-going efforts to prevent and treat chronic health conditions. The letter can be viewed at: <http://www.apa.org/ppo/issues/securityclnltr.html>

In addition, APA staff worked closely with the Consortium of Social Science Associations, the office of Rep. Brian Baird (D-WA), and House Science Committee staff to outline the role of behavioral and social science research in the new department. Although, the House bill did not include specific language on behavioral research. The House Select Committee on Homeland Security did include Rep. Baird's mental health provision in its version that can be viewed at:
<http://www.house.gov/baird/prhomesec.htm>.

APA Hosts Meeting With FBI Behavioral Science Unit

On October 1st, the Science Policy Office hosted a meeting between leaders of the behavioral and social science research community and the FBI's Behavioral Science Unit (BSU). The planning dinner was convened as a follow-up to a successful half-day colloquium entitled, "The Role of Human Factors in Homeland Security" at the annual meeting of the Human Factors and Ergonomics Society (HFES) in Baltimore. The overall purpose of these and other meetings APA has held in conjunction with FBI Academy staff is to help facilitate their interaction with a range of behavioral scientists to help guide the FBI as it begins re-orienting to a domestic terrorism agenda. A full summary of the meeting can be viewed at:

<http://www.apa.org/ppo/issues/fbimeeting.html>

APA President Sternberg Visits the CIA

On December 12, APA Senior Scientist Susan Brandon and Science Policy Director Geoff Mumford arranged for Robert Sternberg, PhD, President of APA, to provide a presentation on intelligence and cognitive assessment to a group of psychologists from the Intelligence Community who are directly involved in operations. As most of our readers know Dr. Sternberg, is the IBM Professor of Psychology and Education, Department of Psychology, Yale University and Director, Center for the Psychology of Abilities, Competencies, and Expertise (PACE). Dr. Sternberg addressed cross-cultural assessment issues and summarized his research on successful intelligence. The Central Intelligence Agency hosted the presentation. To view Dr. Sternberg's Powerpoint presentation see: <http://www2.apa.org/ppo/psych.ppt>

APA Staff Invited To "Teach" At The FBI Academy

Since the terrorist attacks on 9/11 and the anthrax incidents in the autumn of 2001, APA Science/Science Public Policy has been gathering and offering the resources of psychological science to counter-terrorism efforts across the United States. Staff in these offices have attended workshops and meetings, held conferences and Congressional briefings, and created resource files that describe the multitude of psychological researchers whose expertise is germane to such efforts. It has been heartening to see how generous our community is with its time, energy and skills.

The challenge is to share this expertise with those who might make use of it. How can "first responders" make their problems and concerns known to psychological researchers and theorists? How can such researchers translate their findings into the kind of concrete, operational tactics that police, medics and fire fighters are likely to need on a daily basis?

Geoffrey Mumford, Director APA Science Policy, and Susan Brandon, APA Science Senior Scientist, have begun a project that offers a unique opportunity to listen to the concerns and questions of police from across the United States. They have been invited by FBI Agents and faculty from the FBI's National Academy in Quantico VA to visit several ongoing classes and discuss behavioral science with the Academy students. The National Academy, currently in its 211th session, was instituted "to support, promote and enhance the personal and professional development of experienced law enforcement officers by providing relevant education and training and to increase their information

networks in order to prepare them for increasingly complex and dynamic leadership roles in the law enforcement community” (FBI National Academy General Instructions, Feb. 27 2002). There are about 500 law enforcement personnel who take courses at the National Academy during an 11-week semester; three such sessions are held each year.

Mumford and Brandon already met with one class on November 22. They invited Deborah Frisch, PhD, a decision scientist from the National Science Foundation, also to attend the class. Dr. Frisch started the class off with a scenario about the Washington sniper incidents that illustrated human decision-making behaviors. The discussion then was opened up to more general concerns. Some of the questions posed were:

- How to predict panic in populations under assault, and how to normalize community behavior in a crisis.
- How to understand the terrorist mindset so as to be able to predict the selection of terrorist targets.
- Why some cops leak information to media knowing that it may harm an investigation.
- The negative impact of media in high profile law enforcement investigations.
- How to communicate information that the public wants during a crisis in a way that cannot be used to the detriment of the investigation.
- How to articulate the needs of the police to focus limited resources on likely suspects without appearing to apply profiling techniques.
- How to deal with police anxiety, which sometimes make it difficult for police to serve as a calming influence for the public.
- The American cultural preoccupation with assigning blame.

On January 21, Brandon and Mumford arranged another meeting to include Bryan Vila, PhD, the Director of the Crime Control and Prevention Research Division at the National Institute of Justice out to the FBI Academy yesterday to talk about future collaborations with the Behavioral Sciences Unit. BSU had invited APA member Ellen Scrivner, PhD (a detailee from the Dept. of Justice working on counter-terrorism). Dr. Vila has an interesting background as a former Marine, a police officer in South Central LA, head of Micronesia's Bureau of Investigation, and an emergency preparedness coordinator for the Dept. of Interior. He has a doctorate in human ecology and worked as an academic at UC Irvine and the University of Wyoming before taking his present position.

One goal of the meeting was to talk about continued collaboration via guest appearances at the National Academy classes. . Brandon, Mumford and Vila will meet with another Academy class on February 24. As a testament to Dr. Brandon’s dedication to this and related counter-terrorism efforts, she negotiated with her new employer (the National Institute on Mental Health) to continue collaborating with APA as we move forward. A second goal was to discuss possibilities for a follow-up to last February's conference and Dr. Vila has authored a draft proposal seeking NIJ funds for a follow-on conference this summer.

Longer-range ideas include the possibility of following a model the FBI uses with chaplains to connect more psychologists to field office operations. The goal would be link each of the 56 FBI field offices across the US with a point-person-psychologist in the

event the local office has an issue that a psychologist(s) could help with. Because of the range of issues psychologists might be expected to cover...we suggested that it might be best to consider trying to put together some sort of local advisory team (to the extent that's possible in a given geographic area) that might consist of practioners and scientists/academicians.

Meeting with Transportation Security Administration

Geoff Mumford and APA member Peter Hancock, PhD, (Provost Distinguished Research Professor, University of Central Florida) met with Paul Paulski, the Chief of Staff of TSA's new Chief Technology Officer on January 15th. The meeting was an effort to set the stage for his appearance at the National Research Council's Committee on Human Factors (CoHF) the following day. CoHF had scheduled presentations from Jim Griffin, PhD, Assistant Director of Social Behavioral and Economic Sciences at the White House Office of Science and Technology Policy and Tom Sanquist, PhD, a psychologist doing maritime security research for Batelle in Seattle.

During the NRC meeting Mumford suggested that the Committee help TSA think about broadening the scope of their advisory committee (following a suggestion Kurt Salzinger delivered in writing to the TSA Undersecretary last February) and to propose a study to help TSA define a research agenda. The latter will include some of the important personnel issues that Elizabeth Kolmstetter (the APA member who headed the TSA personnel recruitment, selection, and training program) discussed at the Personnel Testing Council of Metropolitan Washington on January 8th.

Department of Defense and Veterans Administration

Defense Testimony

On June 13th, PPO tapped George Mason University psychology professor Stephen Zaccaro to present APA's testimony before the Senate Appropriations Subcommittee on Defense. Zaccaro, a psychological researcher who studies leadership, leader development and team effectiveness in military contexts, made a strong case for behavioral science funding within the Department of Defense. In particular, Zaccaro emphasized the need to provide a stable funding stream for behavioral research sponsored by the Army Research Institute, Office of Naval Research, and Air Force Office of Scientific Research. Senator Daniel K. Inouye (D-HI), Chairman of the Subcommittee, promised to follow up on APA concerns about Navy and Air Force cuts in applied, behavioral research programs.

Zaccaro's written testimony on behalf of APA can be viewed at:

<http://www.apa.org/ppo/issues/zaccarotest.html>

APA Urges Continued, Strong Support For Behavioral Research At DoD

On October 23rd, President Bush signed into law the annual appropriations bill funding the Department of Defense (DoD) for FY03. For the first time, DoD will meet a science community goal by designating 3% of its overall agency budget for the Science & Technology line, which includes all basic research. Even more importantly for behavioral research, the report accompanying the funding bill includes APA-drafted language urging

DoD to fully fund all behavioral research sponsored by the military laboratories. To view this report language see:

<http://www.apa.org/ppo/issues/dodrptlang03.html>

Because the appropriations process has dragged into the current fiscal year, APA policy staff are already working at ensuring appropriate support for behavioral research in the FY04 DoD budget. To read the Coalition for National Security Research (CNSR) letter (signed by APA and others) to DoD urging continued, strong commitment to basic and applied research within the agency go to:

<http://www.apa.org/ppo/issues/cnsrletterfy04.html>

VA Appoints New Chief of Research and Development

In December, Secretary of Veterans Affairs Anthony J. Principi announced the appointment of Nelda P. Wray, MD, as the new Chief of Research and Development for the Department of Veterans Affairs (VA), replacing the retiring John R. Feussner, MD. Wray has served as chief of general medicine at the Houston VA Medical Center and as a professor and the chief of health services research at the Baylor College of Medicine. Board certified in internal medicine and pulmonary medicine, Wray has conducted research showing that patients with osteoarthritis of the knee who underwent placebo arthroscopic surgery were just as likely to report pain relief as those who received the real procedure. In her new role, Wray will oversee the research programs at 115 VA medical centers. PPO staff Heather Kelly will invite a group of APA members who conduct research within the VA to meet with Dr. Wray this spring.

Education

APA Holds Briefing on Early Head Start Research Findings

Psychologists have played a key role in the Head Start program since its inception. On June 28th, APA co-sponsored a congressional briefing on the Early Head Start Impact Study featuring Windy Hill, Associate Commissioner of the Head Start Bureau. The briefing highlighted current research on Early Head Start, which serves low-income children under three. The findings revealed a consistent pattern of small but significant positive effects on variables ranging from positive parental discipline strategies to children's receptive vocabulary, together attesting to the program's value. The other speakers were Drs. Rachel Chazan Cohen, Helen Raikes, John M. Love, Ellen Kisker, and Tammy Mann, with APA's Daniel Dodgen, PhD, serving as moderator. The event was co-sponsored by the House Education and the Workforce Committee. Copies of the report, Making a Difference in the Lives of Infants and Toddlers and Their Families: The Impacts of Early Head Start, can be found online at:

http://www.acf.dhhs.gov/programs/core/ongoing_research/ehs/ehs_reports.html.

OERI Reauthorization Clears Senate HELP Committee

APA's Science and Education policy staff, working with the American Educational Research Association and other groups, met with members of the Senate Health, Education, Labor, and Pensions Committee the beginning of September to encourage completion of legislation reauthorizing the Office of Educational Research and

Improvement. While the full House passed its OERI bill in April, the Senate HELP Committee was without a draft bill until mid-September. Once drafted, however, the Committee was quick to approve their version of OERI reauthorization on September 25th. Congressional staff from the Senate HELP and House Education and Workforce Committee spent the past few weeks ironing out the differences between the House and Senate bills in hopes that both chambers could approve a final bill before adjourning in October. More information about OERI and our advocacy efforts can be found at: <http://www.apa.org/ppo/issues/einfouupdate.html#oeri>

National Institutes of Health

NIH Director Meets With Norman Anderson

On January 17th, APA's new CEO Norman Anderson and representatives of the Science Directorate and Public Policy Office, met privately with Dr. Elias Zerhouni. In a free-ranging discussion, Dr. Zerhouni emphasized that behavioral and social science research has emerged as a priority in his "roadmap" discussions of NIH priorities. This may lead to increased visibility and funding for some aspects of behavioral science on top of the increase of 13-15 percent that NIH is likely to receive for FY 2003.

In a broader meeting, representatives of fourteen behavioral and social science groups had met with the Director previously on October 31st who at that time had been on the job for about seven months. It was the first time a permanent NIH Director had sat down with behavioral and social science organizational representatives since the directorship of Bernadine Healy, MD, in 1992. APA's Executive Director for Science Kurt Salzinger and Division 7's Deborah Phillips (representing the Society for Research in Child Development) were among the science leaders who spoke with Zerhouni about such important topics as research training, basic research, and restructuring NIH. A full summary of the meeting is available at: <http://www.apa.org/ppo/issues/zerhouni.html>

Senate Spending Bill Includes APA-Recommended NIH Report Language

The U.S. Senate recently reported its version of the federal spending bill that funds the National Institutes of Health for Fiscal Year 2003. Members of the APA Science Policy staff spend a lot of time each spring talking to congressional staff, encouraging the placement of language in the report that accompanies the spending bill. "Report language" highlights certain programs of funding and encourages the institutes to continue or focus on certain lines of research. While this language does not have the force of law, and cannot therefore be considered "directive," it serves as a congressional vote of confidence or interest-so the NIH institutes and centers pay close attention to it. We are especially thankful to Senators Daniel Inouye (D-HI), Arlen Specter (R-PA) and Tom Harkin (D-IA) for their interest and assistance. The report language is available at: <http://www.apa.org/ppo/issues/fy2003rptlang.html>

Institute Of Medicine Now Studying NIH Reorganization

A new Institute of Medicine (IoM) committee charged with studying the structure of NIH and making recommendations to the U.S. Senate held its first meeting on July 30th. The

study is being conducted with NIH funds, but began as a result of a congressional request. The panel includes psychologist Alan Leshner, Ph.D., former director of the National Institute of Drug Abuse and now head of the American Association for the Advancement of Science. Other behavioral scientists on the panel include psychiatrist Ken Wells, M.D. of UCLA and Martha Hill, Ph.D., R.N., Dean of Nursing at Johns Hopkins University. The full roster appears at: <http://www4.nas.edu/webcr.nsf/CommitteeDisplay/BLSX-K-01-05-A?OpenDocument>
The study is expected to last 15 months. The following questions will be addressed:

1. Are there general principles by which NIH should be organized?
 2. Does the current structure reflect these principles, or should NIH be restructured?
 3. If restructuring is recommended, what should the new structure be?
 4. How will the proposed new structure improve NIH's ability to conduct biomedical research and training, and accommodate organizational growth in the future?
 5. How would the proposed new structure overcome current weaknesses, and what new problems might it introduce? For a more detailed description of this first meeting see: <http://www.apa.org/ppo/issues/spinaugust.html>
- Additional meetings were held in September and November.

Capitol Hill Briefing Focuses On Behavioral Research At NIH

Under the sponsorship of the Decade of Behavior, the APA, American Psychological Society, and the Federation of Behavioral, Psychological and Cognitive Sciences cooperated to produce a congressional briefing titled, "Behavior and Health: New Research, New Hope." Featured scientists included Tim Baker, PhD, of the University of Wisconsin-Madison who described his research on smoking cessation and relapse; James Gold, PhD., of the Maryland Psychiatric Research Center who discussed the basic research and clinical partnership that is leading to new insight about schizophrenia and attention; and Terrance Albrecht, PhD, of the University of South Florida who described her research on patient accrual to cancer clinical trials.

The briefing was moderated by Jessie Gruman, Director of the Washington-based Center for the Advancement of Health. Raynard Kington, Director of the NIH Office of Behavioral and Social Sciences Research (OBSSR) told the audience of 65 congressional staff and other interested guests how OBSSR works to coordinate and add value to the behavioral and social sciences research funded by the NIH institutes. A summary of the briefing can be found at: <http://www.apa.org/ppo/issues/capbrief92502.html>

NIMH Holds Workshop On Training Geriatric Mental Health Researchers

On October 28-29th, NIMH's Aging Research Consortium held a workshop to discuss the growing need for training more geriatric mental health researchers. With an exploding older population, the supply of service providers as well as researchers to advance the science is being outpaced by demand for those with training in geriatric mental health. Increased support for training geriatric mental health researchers is one avenue being explored to increase the flow of researchers into the workforce pipeline. Participants included both psychiatrists and psychologists, discussing how NIMH could best encourage clinicians to begin and maintain a research track in geriatric mental health.

APA members attending the workshop included: former APA President Norman Abeles, PhD, Michigan State University; Steven Zarit, PhD, Penn State University; Margaret Gatz, PhD, University of Southern California; Forrest Scogin, Jr., PhD, of University of Alabama and Chair-elect of the APA Committee on Aging. They highlighted the need for increased NIMH support for predoctoral training in basic and clinical geriatric psychology, an increase in sites for training of geriatric mental health, and growing programs that facilitate collaboration between the arts and science psychology departments and psychologists based in medical centers.

APA's Minority Aging Network in Psychology (MANIP) was highlighted as one way to increase the pool of ethnic minority researchers in the field of gerontology. The weeklong MANIP Summer Institute on Aging is available to undergraduate junior and seniors, as well as first- and second-year graduate students in the field of psychology. More information on MANIP, which is supported by a grant from the National Institute on Aging, can be found at:
<http://www.apa.org/mfp/aprogram.html>.

National Children's Study Holds Planning Meeting

On December 16-18, the National Children's Study (NCS) convened a meeting of its Federal Advisory Committee, 22 working groups, and consumer and scientific organizations to discuss the progress being made on the study's design and the development of several core hypotheses. Earlier this year, the working groups submitted approximately 50 proposed hypotheses to the Advisory Committee. The approved core hypotheses are organized around five cross-disciplinary themes, which are framed in terms of outcomes and will be augmented by future hypotheses developed by the working groups. As of now, the general priority outcomes are: 1) pregnancy; 2) altered neurobehavioral development; 3) injury; 4) asthma; 5) and obesity.

Duane Alexander, M.D., Director of the National Institute of Child Health and Human Development, added that these areas are by no means final and will be augmented by behavioral, developmental, and women's health outcomes. APA and other social and behavioral science organizations have expressed concern over the lack of inclusion of behavioral outcomes and the availability of funding for the study, which will cost over \$100 million a year during its peak enrollment by FY06. The NCS will examine the effects of environmental influences on the health and development of more than 100,000 children across the United States, following them from before birth until age 21. More information on the study is available online at:
<http://www.nationalchildrensstudy.gov>.

Sostek Updates Coalition on Peer Review at NIH

Peer review of behavioral and social science grant applications at the National Institutes of Health (NIH) is in very good shape, according to Anita Miller Sostek of NIH's Center for Scientific Review (CSR). Dr. Sostek, a developmental psychologist who was recently named Director of CSR's Division of Clinical and Population Studies, spoke in early December to a coalition of behavioral and social science advocacy organizations in which

APA is an active member (the Coalition for the Advancement of Health Through Behavioral and Social Sciences Research).

Most of the review of behavioral and social science grants is done in one of the five Integrated Review Groups (IRGs) within Dr. Sostek's division: (1) Social Sciences, Nursing, Epidemiology and Methods; (2) Risk, Prevention and Health Behavior; (3) Behavioral and Biobehavioral Processes; (4) Surgery, Radiology and Bioengineering; and (5) Brain Disorders and Clinical Neuroscience. IRGs are groups of related study sections. Additional information links can be found below.

Behavioral and social science study sections at NIH were reorganized in 1999, with the participation of many psychologists inside and outside the NIH. Dr. Sostek said that the process of reorganizing improved communication among the behavioral and social scientists at NIH and helped increase their influence within that organization. The painstaking process through which study sections were reorganized also led to improved grant review, as measured by CSR evaluations of grant applicants and study section members. Dr. Sostek credited NIH's Peer Review Oversight Group, which directed the reorganization, as well as the Advisory Council for the Center for Scientific Review (which included psychologists Karen Matthews and Leonard Epstein) for these improvements. She noted that, in addition, the NIH Office of Behavioral and Social Sciences Research has nurtured the teamwork that developed during the study section reorganization.

Dr. Sostek and her colleagues at CSR believe they have a good set of study sections but will continue to re-evaluate and tinker as problems arise. The goals are to make sure there is consistency in the review process and that the study sections are responsive and adaptive to changes in science. According to CSR records, there are about 46,000 grant applications a year. CSR reviews about 35,000 of them (the rest are reviewed by the institutes or returned for one reason or another).

About half of the applicants request review by a particular IRG. Dr. Sostek commented that the CSR staff "won't let anyone hurt themselves," and that she and her colleagues will contact applicants to suggest a better fit if the requested IRG is not appropriate. There is a lot of interchange and discussion among the study section administrators to make sure the grants end up in the right place. Dr. Sostek pointed out that all of the study section members are listed on the website for the three most recent rounds of review, and that scientists should certainly recognize some of the names in the review committees that are appropriate for their grant.

Dr. Sostek encouraged the behavioral and social scientific societies to nurture a culture of service within their disciplines. Scientists should feel it's important to serve on study sections and that their service is highly valued.

There are many resources for scientists on the Center for Scientific Review's web page. Information on review policy can be found at:
<http://www.csr.nih.gov/review/policy.asp>.

Information about how scientists are chosen for study section membership, and the assignment of grants to study sections, can be found at:

<http://www.csr.nih.gov/EVENTS/bestpractices.htm>.

Study section rosters can be found at:

<http://www.csr.nih.gov/Committees/rosterindex.asp>.

APA Joins Forces With Coalitions For Fiscal Year 2003 Funding Advocacy

When Congress returned to Washington in September, there were rumors that the House appropriators would begin working on legislation to fund the Departments of Labor, Health and Human Services, and Education for FY03. The Senate Appropriations Committee completed its draft in July, which included a 3.6 billion increase for the National Institutes of Health. Coalitions of health care organizations and professional societies joined together to advocate for federal support for the National Institutes of Health as well as funding for mental health services by sending letters to key appropriators in the House.

The Friends of NICHD sent a letter to Chairman Ralph Regula (R-OH) of the House Appropriations Subcommittee on Labor, Health and Human Services, and Education.

<http://www.apa.org/ppo/issues/friendsignon.html>

The Mental Health Liaison Group sent the following letter to Chairman Bill Young (R-FL), Chairman of the House Appropriations Committee urging adequate funding for research as well as vital mental health services programs.

<http://www.apa.org/ppo/issues/mhlgsignon.html>

Three NIH Institute Directors to Speak at Convention

Three new (2 fairly new and one brand new) NIH Directors have agreed to share the stage at APA Convention in Toronto this summer. Drs. Insel, Li and Volkow are expected to provide their perspectives on the importance of behavioral and psychological research to the missions of NIMH, NIAAA and NIDA respectively. Please mark your calendars now for this important event: August 8, from 10:00-12:00.

National Science Foundation

National Science Foundation Funding For 2003 And Beyond

Congress has been very active on bills that will set priorities and establish funding guidelines for the National Science Foundation in FY03 and perhaps three to five years beyond. The House Science Committee passed an authorization bill (H.R. 4664, the "Investing in America's Future Act of 2002") that encourages substantial increases for NSF and a significant investment in the behavioral and social sciences. The Senate bill (S. 2817) was even more ambitious, setting a five-year path to doubling the NSF research budget. PPO's Heather Kelly invited representatives of the science community to a July 31st meeting with Senator George Allen's (R-VA) staff from the Subcommittee responsible for NSF oversight. The group urged the Senator and his colleagues to "mark up" the bill and move it to the Senate for a full vote when Congress returned in

September. On November 15, the bill passed both chambers of Congress and was signed into law on December 19th. To view the bill, see:
http://www.nsf.gov/od/lpa/congress/107/final_authorization_language.pdf

House NSF Funding Bill Includes Science Of Learning Centers

On October 9th, the House Appropriations Committee reported out a bill (H.R. 5605) funding a number of federal agencies, including the National Science Foundation. Because Congress adjourned without acting on many of the remaining spending bills for 2003, it's likely that NSF funding will be rolled into an omnibus appropriations bill sometime in January. One piece of exciting news is that APA's recommended language in support of NSF's new Science of Learning Centers made it into the report accompanying the House bill, almost verbatim. The House Appropriations Committee "...recognizes that investment in basic, multidisciplinary research on learning is crucial to both successful educational reform and effective workforce development. In this regard, the Committee's recommendation includes support for the NSF Science of Learning Centers. This program is intended to build collaborative research communities of scientists, educators, community groups, and industry capable of addressing fundamental questions in learning and then integrating these results into ongoing federal education reform initiatives..."

Planning Underway For NSF Learning/Cognition Workshop

Learning and cognition are integral to much of the science currently supported by the NSF. This is evident from Foundation-wide initiatives such as "Knowledge and Distributed Intelligence" that included "Learning and Intelligent Systems," and "Learning for the 21st Century Workforce". Support for learning is also evident from the nature of the individual research projects supported within each of the NSF Directorates. However, NSF support for the basic science of animal learning and cognition, traditionally based in the Directorate for Biological Sciences (Division of Integrative Biology & Neuroscience, Animal Behavior Program), has virtually ceased.

APA Senior Scientist, Susan Brandon, PhD, is working with members of the animal learning/cognition community in preparing a proposal for a workshop at the NSF to address this issue. The goal of the workshop would be to highlight research in fundamental processes of learning and cognition to NSF personnel, and to illustrate how the fundamental research is important and vital to the kinds of research involving learning that is already supported by NSF. The proposed one-day workshop would accomplish this by inviting representative researchers to NSF to offer brief descriptions of their investigations. The morning session would focus primarily on fundamental process research, and the afternoon session would focus primarily on instances of how this research feeds forward into the broader domain of research on learning and cognition. Whereas NSF personnel are the primary target group, it is expected that the researchers would also benefit from the opportunity to learn how to best present their science to the various NSF Program and Divisional Directors that it is hoped will participate. Dr. Brandon is soliciting input from Program and Division staff within the four NSF Directorates that have demonstrated a current/historical interest in learning and cognition research

Scientific Advisory Panels

Psychologists Nominated for Key Advisory Positions

Science Policy staff regularly look for opportunities to nominate psychologists to participate in consultative or advisory fora that are likely to influence agency programs and/or policy decisions. On July 12th, the Institute of Medicine's Board on Neuroscience and Behavioral Health announced the roster for a study entitled "Responding to the Psychological Consequences of Terrorism." We were pleased to see that one of our nominees, Gerard A. Jacobs, Ph.D. (Director of the National Disaster Mental Health Institute at the University of South Dakota) will be serving on the panel. As Dr. Jacobs is the only psychologist participating in the study to date, we will take advantage of an early August comment period to reassert our interest in seeing greater representation of psychological scientists on that panel. For more information on the study goals and objectives see:

<http://www.iom.edu/IOM/IOMHome.nsf/Pages/NBH+Psychological+Consequences+of+Terrorism>

In addition, Science Policy staff worked with the Practice Directorate to nominate a slate of prominent clinicians and prevention researchers for the Agency for Healthcare Research and Quality's U.S. Preventive Services Task Force. Tracy Orleans, Ph.D., a Senior Scientist at the Robert Wood Johnson Foundation is currently the only psychologist serving on the Task Force. For more information on the Task Force see: <http://www.ahrq.gov/clinic/uspstfix.htm>

Earlier this year, the Secretary of Health and Human Services dissolved his Advisory Committee on Genetic Testing and replaced it with a new committee called the Secretary's Advisory Committee on Genetics, Health, and Society. Because psychology is included as one of the core competencies the Secretary is to consider in constructing the roster for the new Committee we want to be sure to nominate psychologists whose research background is relevant to the scope of the Committee's charge. In consultation with the APA Working Group on Genetics Research Issues Science Policy Staff submitted a slate of nominees to fill those slots in mid-November. To view charter see: <http://www.omhrc.gov/OMH/WhatsNew/2pgwhatsnew/2002-4.pdf>.

A separate slate of nominees was developed in consultation with APA's Director of Research Ethics, Dr. Sangeeta Panicker to fill vacant slots on a newly chartered Secretary's Advisory Committee on Human Research Protections (SACHRP). SACHRP, chartered on October 1 replaces and expands the scope of the now defunct National Human Research Protection Advisory Committee (NHRPAC). To view charter see: <http://ohrp.osophs.dhhs.gov/sachrp/charter.pdf>.

Although no behavioral scientists were appointed to SACGHS, Celia Fisher, PhD was appointed to SACHRP. She has chaired both the APA Ethics Code Revisions Task Force and the Society for Research in Child Development's Committee for the Ethical Conduct in Child Development Research. And when bioethicist Jonathan Moreno's

resigned in protest from SACHRP another psychologist, Susan Weiner, was named to fill that opening.

Human Research Protections Advisory Committee Holds Quarterly Meeting

On July 30th and 31st, NHRPAC convened its quarterly meeting in Washington to discuss issues related to regulations that seek to protect human subjects who participate in research. Several NHRPAC working groups presented progress reports on issues such as decisional incapacity, informed consent, mental retardation and developmental disabilities, research with incarcerated persons and research issues with regards to children.

Of particular interest, the Children's Workgroup is drafting a guidance document that can be used by the Office of Human Research Protections to clarify the section of federal regulations that governs research with children, (45 CFR 46 subpart D). The workgroup is focussing its current efforts on the interpretation of "minimal risk" and "minor increase over minimal risk." The guidance is meant to assist Institutional Review Boards (IRBs) and investigators in their interpretation of these concepts. The guidance will include case studies to provide examples of what constitutes minimal risk in survey research and other behavioral research paradigms that have been difficult for IRBs to integrate with the traditional interpretation of risk. More information on NHRPAC and its activities can be found at: <http://ohrp.osophs.dhhs.gov/nhrpac/nhrpac.htm>

Advisory Council Politics

There have been several popular press accounts alleging the politicization of the science advisory appointments process. In response to these allegations we are providing information to the staff of Members of Congress who have also expressed concern.

In addition, on September 18, 2002, Rep. Eddie Bernice Johnson, the Ranking Democrat on the Research Subcommittee of the House Science Committee, sent a letter to David M. Walker, Comptroller General of the United States, U.S. General Accounting Office (GAO) requesting an investigation on this general issue. GAO has agreed to investigate and Ross Campbell, a Senior Analyst with the Natural Resources and Environment Team at GAO will be the analyst in charge. They will be in the "design phase" for approximately 2 months learning more about the issue and determining the scope and methodology they will use. They've defined 3 researchable questions that will guide the investigation:

- 1) What is the role of advisory councils government-wide in helping shape policies and regulations?
- 2) What policies and procedures are in place to ensure that advisory councils provide balanced advice?
- 3) Are there any improvements to be made in those policies and procedures?

If you or your colleagues have information that you think would aid this investigation please contact Ross via email (campbellr@gao.gov).

Further, we think its important that we inform members about the issue. To accomplish this, a news article about it has been written and will appear in the February issue of the *Monitor on Psychology*. Finally, we have been in touch with other science organizations in Washington to discuss the possibility of a joint response from the science community on the issue. We will continue to strategize about the most appropriate APA response.

Substance Abuse

Barriers To Tobacco Cessation

On October 24th, APA partnered with the Center for the Advancement of Health (CFAH) in providing testimony before the Cessation Subcommittee of the Interagency Committee on Smoking and Health. APA member Jessie Gruman, PhD, the President and Executive Director of CFAH, delivered the testimony on behalf of both organizations focusing on patients who need more intensive interventions to quit. Dr. Gruman's testimony was preceded by that of fellow APA member Jack Henningfield, PhD, who discussed a number of research issues relevant to successful tobacco cessation. We are grateful to APA's Assistant Executive Director for Professional Development, Geoff Reed, Ph.D., for his editorial assistance in drafting the testimony. It is our hope that this will seed a broader science-practice initiative to involve more practitioners in tobacco cessation efforts.

Notice of the Regional Hearing can be found at:

<http://www.apa.org/ppo/issues/smokecess.html>

To read Dr. Gruman's testimony go to:

<http://www.apa.org/ppo/issues/grumantest.html>

To read Dr. Henningfield's testimony go to:

<http://www.apa.org/ppo/issues/henningfieldtest.html>

Conference On Abuse Liability Assessment Of CNS Drugs

On October 28-29, APA's Science Policy staff partnered with the College on Problems of Drug Dependence and nine other scientific and professional organizations to co-sponsor a conference on the "Abuse Liability Assessment of CNS Drugs". The Conference brought together representatives from the academic scientific community, government agencies, and the pharmaceutical industry to discuss the state of the science used in Scheduling drugs according to the Controlled Substances Act. Much of that research has been conducted in the domain of psychopharmacology and so it was not surprising that many of the presentations, editorial, and expert commentary during the conference came from within the APA membership. Seven background papers presented during the conference led to lively discussion by the participants and will be published in an upcoming supplement to the journal *Drug and Alcohol Dependence*.

That behavioral scientists hold a pivotal role in this research was evident by the number of APA members involved. Former NIDA Director Charles R. "Bob" Schuster and Chris-Ellyn Johanson coordinated the organization of the meeting and edited the background papers along with APA member Dorothy Hatsukami. Jack Henningfield, James Woods, and James Zacny were among the APA members serving as a panel of experts providing commentary during the discussions. Nancy Ator, Roland Griffiths, George Bigelow and

Robert Balster authored three of the seven background papers. Maxine Stitzer and Mary E. “Betsy” McCaul represented the Society for Research on Nicotine and Tobacco and the Research Society on Alcoholism respectively and Bill Woolverton and Harriet de Wit represented APA’s Division 28. Dr. Stitzer, who also represents Division 28 on APA’s Council of Representatives, wrote a summary of the proceedings, which can be viewed here: <http://www.apa.org/ppo/issues/drugliability.html>

SAMHSA Treatment Improvement Protocol Panel

During the latter half of October, Science Policy staff worked with the leadership of Division 50 to forward a slate of Consensus Panel nominees for a Treatment Improvement Protocol (TIP) under development by the Center for Substance Abuse Treatment (CSAT) at the Substance Abuse and Mental Health Services Administration (SAMHSA). This TIP will focus on Substance Abuse Treatment and Trauma and will be developed across two in-person meetings in DC and a series of virtual meetings across 2003. Selection of Consensus Panel members was to be completed by mid-November. For additional background, view the PDF version of the program: <http://www.apa.org/ppo/issues/TIP%20Prospectus.pdf>.

APA Comments on Buprenorphine Guidelines

It’s rare that new pharmacotherapies for the treatment of drug dependence actually make it to market, so it was very exciting to see buprenorphine gain FDA approval for the treatment of opiate dependence in office-based settings. On December 10, the Substance Abuse and Mental Health Services Administration (SAMHSA) held a joint press conference with representatives of the Drug Enforcement Agency and the National Institute on Drug Abuse to debut the new medication. During the press conference, Mr. Odis Rivers, heroin-dependent for 30 years, provided a touching and impassioned account of his life, including the impact that APA member Bob Schuster had on him during buprenorphine treatment. He closed with a tribute to Bob saying, “Wayne State and Dr. Robert Schuster had been a tremendous, tremendous part of my life.” For additional information, see the SAMHSA website:

http://www.samhsa.gov/news/click_bupe.html

Many APA members have contributed to our understanding of this medication via preclinical and clinical psychopharmacology research as well as research demonstrating the importance of combining behavioral and psychosocial interventions in the treatment of opiate dependence. That story will be told in an upcoming edition of the APA Monitor. In December, Science Policy Staff were invited to review SAMHSA’s Buprenorphine Clinical Treatment Guidelines, and this provided an opportunity for another successful science/practice translation activity. We are grateful to Geoff Reed, PhD, APA Practice Directorate’s Assistant Executive Director for Professional Development; Division 50 President, Rudy Vuchinich, PhD; and Division 50 member Reid Hester, PhD, for their help in facilitating/conducting the review. The guidelines should now reflect, at multiple points, opportunities for physicians to access appropriately trained psychologists as treatment referral resources (a point we tried to address as buprenorphine legislation was under consideration). In addition, APA’s College of Professional Psychology and State

Advocacy staff have expressed their willingness to help SAMHSA continue outreach to APA members interested in patient referral. Click here for additional background on buprenorphine:
<http://apa.org/ppo/issues/buprepsa.html>

Congratulations To APA's Science Policy Fellow

APA's Science PPO office is pleased to announce that Tamara Jackson, PhD, will be serving as APA's 2002-2003 Science Policy Fellow in the White House Office of Science and Technology Policy. Tamara is currently finishing her year as an APA Congressional Fellow in the office of Senator Jeff Bingaman (D-NM), where she has worked on a childhood obesity hearing and legislation, women's health legislation, and a variety of issues related to HIV/AIDS, among other projects. Dr. Jackson received her bachelor's degree from Vanderbilt University in 1993, completed her doctorate in clinical psychology from Kent State University in 1999, and conducted community research on health promotion while a Yale University pre-doctoral intern and post-doctoral fellow. Dr. Jackson will be an excellent representative of behavioral science in the White House. For information on APA's Congressional and Science Policy Fellowship Programs, including applications for the 2003-2004 positions, please see:
<http://www.apa.org/ppo/funding/homepage.html>

Election Reform Law Calls For Human Factors Research

Whether or not you were pleased with the outcome of the mid-term elections, some good news emerged for election reform last month. On October 16, the Senate passed the "Help America Vote Act" (H.R. 3295) and the President signed it into law on October 29. The explanatory text that accompanies the bill (H. Rept. 107-730, Sec. 243) calls for a report on human factors research "...including usability engineering and human-computer and human-machine interaction which feasibly could be applied to voting products and systems design to ensure the usability and accuracy of voting products and systems...". The report clearly reflects testimony delivered by APA Fellow, David Woods, PhD, before the Committee on House Administration on May 24, 2001. Dr. Woods was asked to testify after a Congressional Research Service staff member had heard his presentation at a Decade of Behavior briefing on election reform elsewhere on Capitol Hill in March and recommended him as a witness to the Committee staff. Dr. Woods was the only psychological scientist to testify on election reform and it is heartening when an advocacy effort like this comes to fruition. We hope it encourages science advocacy within the broader APA membership.

Sender: Deutsch, Robin [REDACTED]
Sent: Sunday, October 14, 2007 8:52:05 PM
Recipient: Dixon, Pat </O=APA/OU=DC/CN=RECIPIENTS/CN=PAG>
Subject: FW: S complaint against L

Robin M. Deutsch, Ph.D.
Director of Forensic Services
Children and the Law Program
Department of Psychiatry
Massachusetts General Hospital
388 Commonwealth Avenue
Boston, MA 02215

Assistant Clinical Professor of Psychology
Harvard Medical School

[REDACTED]

From: Deutsch, Robin
Sent: Sun 10/14/2007 10:46 AM
To: [REDACTED] PAT DIXON
Subject: S complaint against L

Dear Pat:

I have reviewed the files on this case. The information that we currently have and the allegations are extremely concerning. I agree that we should open a preliminary investigation and ask Dr. L to explain his role in interrogations in general, and specifically of the two mentioned detainees. And we should ask Dr. S when she learned of these behaviors and what other action, if any, she took.

Robin

Robin M. Deutsch, Ph.D.
Director of Forensic Services
Children and the Law Program
Department of Psychiatry
Massachusetts General Hospital
388 Commonwealth Avenue
Boston, MA 02215

Assistant Clinical Professor of Psychology
Harvard Medical School

[REDACTED]

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APA_0281323

SEP 05 2006

ALICE LOWE SHAW, PH.D.
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CONFIDENTIAL

8/30/06

Dear staff,

I want to file an ethics complaint regarding Dr. John Leso. He is licensed in the state of New York.

I have been educated about some of his duties while working at Guantanamo Detention Center, which have, in my opinion, been abusive, cruel and a violation of psychologist's ethical principles.

Sincerely,

Alice Lowe Shaw, Ph.D.

You can email me at:

PRIVACY REDACTION

2



AMERICAN
PSYCHOLOGICAL
ASSOCIATION

September 13, 2006

CONFIDENTIAL

Alice Lowe Shaw, PhD
PRIVACY REDACTION

Dear Dr. Alice Lowe Shaw:

This is to acknowledge your inquiry received September 5, 2006 indicating your intent to file a complaint against Dr. John F. Leso.

We are enclosing an Ethics Complaint Packet that includes all of the following:

- **Ethics Complaint Form.** You must fill this out to register a formal complaint. Please be sure to sign each of the required releases at the end of the form. If these are not signed or you have omitted other required information, we will return the complaint form to you for completion. We will only begin review after all required sections of the complaint form have been completed.
- **APA Ethics Committee Rules and Procedures.** The Overview provides helpful information about the complaint process.
- **APA Ethics Code.** Both the 1992 and the 2002 Ethics Codes are enclosed for your reference. For behaviors that occurred prior to June 1, 2003, please only refer to the 1992 Ethics Code. For behaviors that occurred after June 1, 2003, please only refer to the 2002 Ethics Code. If there are behaviors that spanned both before and after June 1, 2003, both Ethics Codes may apply.
- **Information for Individuals Filing APA Ethics Complaints.** This information helps you to better understand the complaint process and assists you in preparing materials you plan to submit.

Once your completed complaint form is received, we will determine whether it is within the time limits for filing. Time limits for filing are important. Please review section 8 of the enclosed information sheet. If there is a problem with time limits, you will be informed.

Filing a complaint with us may or may not be the best option for you to pursue your objectives. The enclosed information sheet discusses alternatives and pros and cons of filing your complaint with us.

We await your response.

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Washington, DC 20002-4242
(202) 336-5500
(202) 336-6123 TDD

A

3

Web: www.apa.org



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APA_0299793

Sincerely,

Jennifer Royster (ell)

Jennifer Royster
Ethics Coordinator

JMR:ell

Enclosures

Complaint Form

Ethics Code 1992 & 2002

Rules and Procedures 2001

Information for Individuals Filing APA Ethics Complaints

3A

October 23, 2006

CONFIDENTIAL

As I wrote in my initial complaint regarding Dr. John Leso, I do not know Dr. Leso personally. However, I have been informed of some of his actions while he has served as the Chairman of the Behavioral Science Consultation Team (BSCT) at Guantanamo Bay Detention Center. Because much of what transpires at Guantanamo Detention Center is confidential, I have had access to only some details, which I read in several reports, including the Final Report Investigation into FBI Allegations of Detainee Abuse at Guantanamo Bay, Cuba. (I obtained this document on the Department of Defense's web site). Dr. Leso, reportedly, helped establish procedures for interrogating detainees, and presided at interrogation sessions. The dates that I encountered for these activities fell within the Ethical Guidelines of the 1992 procedures. The dates of actions listed in the document mentioned above were in the fall of 2002. The ethical principles violated concern 1.09 (respecting others), and 1.14 (avoiding harm). I don't know if Dr. Leso attempted to confront the military authorities regarding human rights violations (1.02). Since he helped to devise the interrogation techniques, I assume he did not feel there was a problem with the methods, which included: 12/6/2002: "The (Muslim) subject...was forced to wear a woman's bra and had a thong placed on his head during the...interrogation." 12/17/2002: "The subject...was told that his mother and sister were whores." 12/20/2002: "An interrogator tied a leash to the subject...chains, led him around the room, and forced him to perform a series of dog tricks. 12/20/2002, "An interrogator forced the subject...to dance with a male interrogator." Furthermore, a growling, threatening dog was used in the interrogation of a subject known to be afraid of dogs.

4

A (2)

OCT 26 2006

APA_0299793

Because of the classified nature of activities at Guantanamo, I don't know if Dr. Leso is still supervising interrogations there.

I do not like to single out one individual for ethical violations, when he is part of a chain of command allowing such activities. However, I am ashamed and disgusted that psychologists are performing actions like these, and believe that I must start somewhere in addressing my profound concerns.

Thank-you for your consideration,

A handwritten signature in cursive script, appearing to read "Alice Lowe Shaw, Ph.D.", written in dark ink.

Alice Lowe Shaw, Ph.D.

4A

OCT 26 2006

ETHICS COMPLAINT FORM
APA ETHICS OFFICE

CONFIDENTIAL

OCT 26 2008

Please type or print in ink. The document entitled "Information for Individuals Filing APA Ethics Complaints" which is included as part of the Ethics Complaint Packet may assist you in completing this form.

1. Person Making Complaint: Alice Love Show PhD

Address: **PRIVACY REDACTION**

Phone: **PRIVACY REDACTION**

2. Member(s) Against Whom You Are Complaining: _____

Dr. John Leso

Address: **PRIVACY REDACTION**

Phone: **PRIVACY REDACTION**

3. Please specify as accurately as possible the earliest date and the most recent date of the alleged unethical behavior:

4. Have you discussed this situation with the psychologist(s) you are complaining about? _____ Yes _____ No

5. Are you a member of the American Psychological Association?

Yes _____ No

6. Have you filed a complaint with any other organization(s)?

Yes _____ No

If you answered Yes, please indicate below where else you have filed and the date:

- State Licensing Board New York
- _____ State Psychology Association Ethics Committee _____
- _____ Civil suit (e.g., malpractice) _____
- _____ Grievance Committee _____
- _____ Other _____

{Please describe the status of these complaint(s) in Item #7}

4-1

OCT 26 2008

7. Please help us to understand your complaint by providing the following information typed or printed (in ink) on separate paper:

- (a) A **concise**, one paragraph summary of the nature of the alleged ethical misconduct;
- (b) A detailed description of the alleged misconduct, specifying as accurately as possible the dates and:
 - (i) the sequence of events leading up to the behavior,
 - (ii) a complete account of the behavior and the Ethical Standards you believe have been violated,
 - (iii) any relevant information about what happened after the behavior occurred,
 - (iv) the status of any other complaints you have filed and any other steps you have taken to address this situation.

I have not heard back from New York State Licensing Board.

RELEASES

8. I hereby give the member(s) against whom I am making this complaint permission to give the APA Ethics Committee any confidential information regarding me, including any records of our interactions, and to answer all questions the Committee may have concerning such information.

Signature: Alvin Sauer Ph.D. Date: 10/23/06

9. I hereby give the APA Ethics Committee permission to send to the member(s) against whom I am making this complaint copies of any materials submitted by me or on my behalf concerning this complaint.

Signature: Alvin Sauer Ph.D. Date: 10/23/06

10. I hereby waive any right to subpoena from APA or its agents, for the purposes of private civil litigation, any documents or information concerning this matter.

Signature: Alvin Sauer Ph.D. Date: 10/23/06

****** IMPORTANT ******

Please sign each of the releases without modification. We will only process your complaint form if these releases are complete. If they are incomplete, processing of your complaint will be delayed while we return this form to you for your signature.

Date revised: August 14, 1996

4-2
OCT 26 2006

Please return completed form to:
APA Ethics Office, 750 First Street, NE, Washington, DC 20002



AMERICAN
PSYCHOLOGICAL
ASSOCIATION

October 11, 2007

CONFIDENTIAL MEMORANDUM

To: Robin M. Deutsch, Ph.D., Chair

From: Patricia Dixon, Investigator PSD

Re: The Shaw complaint against Leso

Robin, this matter is ready to determine cause for action.

Dr. Shaw alleges that Dr. Leso may have been involved with the inhumane treatment of individuals during interrogations. We have also obtained information from the public domain that will be added to the file suggesting that Dr. Leso may have participated in specific interrogations that involved the inhuman treatment of detainees. I don't think that we have enough information to make a determination in this matter. I would therefore recommend that we open a preliminary investigation and ask Dr. Leso to explain in detail his role in interrogations and specifically his role during the interrogations of Mohammed al-Qahtani (see doc. #6-2) and Mohammed al-Khatani. An excerpt from the book entitled "Oath Betrayed" by Steven H. Miles, M.D. regarding al-Qahtani is below.

"In 2002, a BSCT psychologist, John Leso, monitored the interrogation of Mohammed al-Qahtani. The fifty-day diary gives a detailed chronology of the application of isolation, sleep deprivation, humiliation, masking, head shaving, shackling, threatening with a dog, and so on. The log shows regular monitoring by medics, who, at one point, intravenously administered nearly three bags of medical saline while the prisoner was tied to a chair. When Mr. al-Qahtani asked to be allowed to urinate, he was told to urinate in his pants. He was treated twice, including at least one hospitalization, for a slow heart rate caused by hypothermia that was intentionally induced by means of air conditioning...It was FBI agents, not medical personnel, who complained about this life-threatening treatment."

I would also like to ask Dr. Shaw when she learned of the behaviors. Once we have this information, we will hopefully have a better understanding of what occurred.

What do you think? If you have any other questions you would like to pose, please let me know. Please advise me of your recommendation as soon as possible. Thank you.

Case type: C5/C10

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Your Last Name Search Results for John Leso

MemRec Database Online			
Leso, John F		PRIVACY REDACTION	
Address		Telephone	
John F Leso, PhD PRIVACY REDACTION Address Updated as of: 12/6/2004 Exclude from Mailings: No Address is Bad: No		Home Phone: Business Phone: PRIVACY REDACTION Facsimile: Email:	
Membership Status		Membership Elect Dates	
Member		Affiliate Since 1987 Member Since 1996	
Divisions			
30 - Member - Society for Psychological Hypnosis			
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1



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Dr John F Leso

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 - Geographical Distribution
- ETHICS
 - Ethical Principles & Code of Conduct
 - Rules & Procedures

Member Election Date(s): 1996

Address:
PRIVACY REDACTION

Date of Birth: **PRIVACY REDACTION**

Highest Degree: PhD , 1995, SUNY Albany (NY) Degree Major Field: Couns Psychol

Major Field: Couns Psychol

Employment History: Clin Psychologist , Army Med Dept , US Army 1995 -

Divisional Affiliation: Member of Division(s): 30

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MemRec Database Online			
Shaw, Alice Lowe		PRIVACY REDACTION	
Address		Telephone	
Alice Lowe Shaw, PhD PRIVACY REDACTION Address Updated as of: 8/10/1992 Exclude from Mailings: No Address is Bad: No		Home Phone: PRIVACY REDACTION Business Phone: PRIVACY REDACTION Facsimile: Email: PRIVACY REDACTION	
Membership Status		Membership Elect Dates	
Member		Affiliate Since 1992 Member Since 1995	
Divisions			
39 - Member - Psychoanalysis			
Membership Number:	PRIVACY REDACTION	Record Last Changed On:	9/9/2006
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MEMBER SEARCH

Member's biosketch

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Alice Lowe Shaw, PhD.

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- ETHICS
 - [Ethical Principles & Code of Conduct](#)
 - [Rules & Procedures](#)

Member Election Date(s): 1995

Address: **PRIVACY REDACTION**

Home Phone: **PRIVACY REDACTION**

Email: **PRIVACY REDACTION**

Highest Degree: PhD, 1988, California Inst of Integral Studies (CA) Degree

Major Field: Clin Psychol

Psychological Area(s) of Interest: Geron/Geropsychol, Parent-Child Interactn

Major Field: Clin Psychol

State(s) of Licensure: CA ; Private Practice

Employment History: Cnslt. Psychiatrist Rypins House , Progress Fdn 1994 -
; Psychother , Priv Prac , 1994 -

Divisional Affiliation: Member of Division(s): 39

Survey Recency Date: **PRIVACY REDACTION**

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1-3

SEP 05 2006

ALICE LOWE SHAW, PH.D.
PRIVACY REDACTION

CONFIDENTIAL

8/30/06

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Sincerely,

Alice Lowe Shaw, Ph.D.

You can email me at:

PRIVACY REDACTION

2



AMERICAN
PSYCHOLOGICAL
ASSOCIATION

September 13, 2006

CONFIDENTIAL

Alice Lowe Shaw, PhD

PRIVACY REDACTION

Dear Dr. Alice Lowe Shaw:

This is to acknowledge your inquiry received September 5, 2006 indicating your intent to file a complaint against Dr. John F. Leso.

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- Ethics Complaint Form. You must fill this out to register a formal complaint. Please be sure to sign each of the required releases at the end of the form. If these are not signed or you have omitted other required information, we will return the complaint form to you for completion. We will only begin review after all required sections of the complaint form have been completed.
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- APA Ethics Code. Both the 1992 and the 2002 Ethics Codes are enclosed for your reference. For behaviors that occurred prior to June 1, 2003, please only refer to the 1992 Ethics Code. For behaviors that occurred after June 1, 2003, please only refer to the 2002 Ethics Code. If there are behaviors that spanned both before and after June 1, 2003, both Ethics Codes may apply.
- Information for Individuals Filing APA Ethics Complaints. This information helps you to better understand the complaint process and assists you in preparing materials you plan to submit.

Once your completed complaint form is received, we will determine whether it is within the time limits for filing. Time limits for filing are important. Please review section 8 of the enclosed information sheet. If there is a problem with time limits, you will be informed.

Filing a complaint with us may or may not be the best option for you to pursue your objectives. The enclosed information sheet discusses alternatives and pros and cons of filing your complaint with us.

We await your response.

750 First Street, NE
Washington, DC 20002-4242
(202) 336-5500
(202) 336-6123 TDD

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Web: www.apa.org



Please Recycle

APA_0300176

Sincerely,

Jennifer Royster (ell)

Jennifer Royster
Ethics Coordinator

JMR:ell

Enclosures

Complaint Form

Ethics Code 1992 & 2002

Rules and Procedures 2001

Information for Individuals Filing APA Ethics Complaints

3A

October 23, 2006

CONFIDENTIAL

As I wrote in my initial complaint regarding Dr. John Leso, I do not know Dr. Leso personally. However, I have been informed of some of his actions while he has served as the Chairman of the Behavioral Science Consultation Team (BSCT) at Guantanamo Bay Detention Center. Because much of what transpires at Guantanamo Detention Center is confidential, I have had access to only some details, which I read in several reports, including the Final Report Investigation into FBI Allegations of Detainee Abuse at Guantanamo Bay, Cuba. (I obtained this document on the Department of Defense's web site). Dr. Leso, reportedly, helped establish procedures for interrogating detainees, and presided at interrogation sessions. The dates that I encountered for these activities fell within the Ethical Guidelines of the 1992 procedures. The dates of actions listed in the document mentioned above were in the fall of 2002. The ethical principles violated concern 1.09 (respecting others), and 1.14 (avoiding harm). I don't know if Dr. Leso attempted to confront the military authorities regarding human rights violations (1.02). Since he helped to devise the interrogation techniques, I assume he did not feel there was a problem with the methods, which included: 12/6/2002: "The (Muslim) subject...was forced to wear a woman's bra and had a thong placed on his head during the...interrogation." 12/17/2002: "The subject...was told that his mother and sister were whores." 12/20/2002: "An interrogator tied a leash to the subject...chains, led him around the room, and forced him to perform a series of dog tricks. 12/20/2002, "An interrogator forced the subject...to dance with a male interrogator." Furthermore, a growling, threatening dog was used in the interrogation of a subject known to be afraid of dogs.

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OCT 26 2006

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Because of the classified nature of activities at Guantanamo, I don't know if Dr. Leso is still supervising interrogations there.

I do not like to single out one individual for ethical violations, when he is part of a chain of command allowing such activities. However, I am ashamed and disgusted that psychologists are performing actions like these, and believe that I must start somewhere in addressing my profound concerns.

Thank-you for your consideration,



Alice Lowe Shaw, Ph.D.

4A

OCT 26 2005

ETHICS COMPLAINT FORM
APA ETHICS OFFICE

CONFIDENTIAL

OCT 26 2008

Please type or print in ink. The document entitled "Information for Individuals Filing APA Ethics Complaints" which is included as part of the Ethics Complaint Packet may assist you in completing this form.

1. Person Making Complaint: Alice Lowe Shaw PhD

Address: **PRIVACY REDACTION**

Phone: **PRIVACY REDACTION**

2. Member(s) Against Whom You Are Complaining: _____

Dr. John Leso

Address: **PRIVACY REDACTION**

Phone: **PRIVACY REDACTION**

3. Please specify as accurately as possible the earliest date and the most recent date of the alleged unethical behavior:

4. Have you discussed this situation with the psychologist(s) you are complaining about? _____ Yes _____ No

5. Are you a member of the American Psychological Association?

Yes _____ No

6. Have you filed a complaint with any other organization(s)?

Yes _____ No

If you answered Yes, please indicate below where else you have filed and the date:

- State Licensing Board New York
- _____ State Psychology Association Ethics Committee _____
- _____ Civil suit (e.g., malpractice) _____
- _____ Grievance Committee _____
- _____ Other _____

{Please describe the status of these complaint(s) in Item #7}

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OCT 26 2008

7. Please help us to understand your complaint by providing the following information typed or printed (in ink) on separate paper:

- (a) A **concise**, one paragraph summary of the nature of the alleged ethical misconduct;
- (b) A detailed description of the alleged misconduct, specifying as accurately as possible the dates and:
 - (i) the sequence of events leading up to the behavior,
 - (ii) a complete account of the behavior and the Ethical Standards you believe have been violated,
 - (iii) any relevant information about what happened after the behavior occurred,
 - (iv) the status of any other complaints you have filed and any other steps you have taken to address this situation.

I have not heard back from New York State Licensing Board.

RELEASES

8. I hereby give the member(s) against whom I am making this complaint permission to give the APA Ethics Committee any confidential information regarding me, including any records of our interactions, and to answer all questions the Committee may have concerning such information.

Signature: *Alvin Stan Ph.D.* Date: *10/23/06*

9. I hereby give the APA Ethics Committee permission to send to the member(s) against whom I am making this complaint copies of any materials submitted by me or on my behalf concerning this complaint.

Signature: *Alvin Stan Ph.D.* Date: *10/23/06*

10. I hereby waive any right to subpoena from APA or its agents, for the purposes of private civil litigation, any documents or information concerning this matter.

Signature: *Alvin Stan Ph.D.* Date: *10/23/06*

****** IMPORTANT ******

Please sign each of the releases without modification. We will only process your complaint form if these releases are complete. If they are incomplete, processing of your complaint will be delayed while we return this form to you for your signature.

Date revised: August 14, 1996

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OCT 26 2006

Please return completed form to:
APA Ethics Office, 750 First Street, NE, Washington, DC 20002



AMERICAN
PSYCHOLOGICAL
ASSOCIATION

November 27, 2006

CONFIDENTIAL

Alice Lowe Shaw, Ph.D.
PRIVACY REDACTION

Dear Dr. Shaw:

This is to acknowledge the receipt of the form regarding your ethics complaint against Dr. John Leso. While reviewing your complaint, it was noted that you did not provide detailed responses to numbers 7(a) and 7(b) on page 2 of the complaint form. I am writing to confirm that you do not have any more information relevant to these questions, and to request that if you do have further information, you please provide it to the Ethics Office on or before January 4, 2007.

In addition, please provide copies of any documents that you are aware of which support the alleged misconduct in your complaint. Please note that relevant portions of documents should be highlighted.

If you have any questions, please let me know. We may answer procedural questions by telephone; however, specific questions regarding your complaint must be made in writing.

Thank you for your cooperation.

Sincerely,

A handwritten signature in cursive script that reads "Patricia Dixon".

Patricia Dixon
Board and Investigative Officer
Office of Ethics

750 First Street, NE
Washington, DC 20002-4242
(202) 336-5500
(202) 336-6123 TDD

Web: www.apa.org

CONFIDENTIAL

December 12, 2006

DEC 13 2006

This is a response to the letter you sent me on November 27, 2006, regarding the ethics complaint I filed against Dr. John Leso. Although I provided detailed information about the questions asked in 7a and b of the Ethics Complaint Form, in the letter I sent you on October 23 of this year, the material was apparently not in the form you prefer. So, I will restate the information in outline form.

7a. Dr. John Leso, as the Chairman of the Behavioral Science Consultation Team (BSCT) at Guantanamo Bay Detention Center, helped establish procedures for interrogating detainees, and presided at interrogation sessions in which cruel, degrading and disrespectful treatment of these individuals occurred, as documented in Department of Defense reports (attached), as well as referred to in Steven Miles' book: Oath Betrayed: Torture, medical complicity, and the War on Terror.

7b.

- (i) Dr. Leso chaired a Behavioral Science Consultation Team which guided coercive interrogations at Guantanamo Bay Cuba.
- (ii) The dates of actions listed in the document mentioned above were in the fall of 2002. The ethical principles violated concern 1.09 (respecting others) and 1.14 (avoiding harm). I don't know if Dr. Leso attempted to confront the military authorities regarding human rights violations (1.02). Since he helped to devise the interrogation techniques, I assume he did not feel there was a problem with the methods, which included: "The (Muslim) subject... was forced to wear a woman's bra and had a thong (skimpy women's underpants) placed on his head during the... interrogation." 12/17/2002: "The subject... was told that his mother and sister were whores." 12/20/2002: "An interrogator forced the subject... to dance with a male interrogator." Furthermore, a growling, threatening dog was used in the interrogation of a subject known to be afraid of dogs.
- (iii) The after effects of the interrogation methods used under Dr. Leso's supervision have been documented in several sources, including an article by Adam Zagorin and Michael Duffy in *The Nation*, entitled "Inside the Interrogation of Detainee 063", 6/12/2005; as well as an Amnesty International report on 9/7/2006 about Mr. Al-Dossari, quoted by Stephen Soldtz in *Counterpunch*; and from an interrogation log, printed by Time Magazine www.time.com/time/2006/log/log.pdf. The following consequences have been documented: FBI agents found Mr. Al-Qahtani was "subjected to intense isolation for over three months" and, as a result, "was evidencing behavior consistent with extreme psychological trauma (talking to non existent people, reporting hearing voices, crouching in a cell covered with a sheet for hours on end)." The log referenced above described Mr. Al-Qahtani as wishing to commit suicide. Furthermore, Mr. Al-Qahtani was hospitalized during his interrogation for conditions that threatened his life, i.e. his body was subjected to rapid changes in temperature, and Dr. (Major) Leso failed to intervene to

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stop such treatment, thus facilitating dangerous consequences for Mr. Al-Qahtani, necessitating hospitalization.

- (iv) The ethics complaint I filed with the State of New York (state of licensure for Dr. Leso) was resolved in that I was informed that the State of New York could only investigate cases when the alleged actions were performed in New York. The investigator did tell me, however, that she thought the actions were deplorable, and she was sorry she couldn't do anything about it.

Finally, to see the treatment of these individuals as disrespectful is obvious. To see the treatment as damaging may need explicit reference to the work of Amnesty International, Human Rights Watch, and many authors, including Dr. Steven Miles, and Alfred McCoy. In: A Question of Torture, McCoy stated (p.53), "...psychological torture afforded intelligence agencies everywhere an additional advantage: leaving none of the usual signs, the practice easily eluded even the strictest of human-rights protections." A justice for the European Human Rights Commission wrote about the effects of interrogation techniques similar to those used at Guantanamo (McCoy p.158): "Through 'subtle techniques developed in multidisciplinary laboratories which claim to be scientific' there are now 'new forms of suffering that have little in common with the physical pain caused by conventional torture.' In effect, 'torture no longer presupposes violence.' These modern methods can, without any physical violence, bring about 'the disintegration of an individual's personality, the shattering of his mental and psychological equilibrium and the crushing of his will.'...the judge was 'sure that the use of these carefully chosen and measured techniques must have caused...extremely intense physical, mental and psychological suffering, inevitably covered by the strictest definition of torture.'"

I hope you can now proceed with this investigation.

Sincerely,



Alice Lowe Shaw, Ph.D.

6A
DEC 18 2005

[T]he presence of a psychologist did not prevent the interrogation of so-called 20th hijacker Mohammed al-Khatani at Guantánamo from turning brutal. Khatani was stripped naked, isolated, given intravenous fluids and forced to urinate on himself, and exercised to exhaustion during interrogations that lasted 18 to 20 hours a day for 48 of 54 days.

Part of the plan was to humiliate Khatani and submit him to extreme psychological stress. He became exhausted, disoriented and hopeless. He was called a homosexual, forced to wear a mask and dance, and leashed and made to perform dog tricks. Interrogators hung pictures of fitness models on his neck and had a female interrogator "invade his personal space," according to the unredacted interrogation log obtained by Salon.

To help break down Khatani's psyche, the interrogation team included a psychologist, Maj. John Leso, a member of the military's Behavioral Science Consultation Teams, called BSCTs. The teams are a newly minted tool in the "war on terror." They include psychologists who are supposed to help interrogators break down resistance and pry loose useful information.

Former Guantánamo commander Maj. Gen. Geoffrey Miller called the teams "essential in developing interrogation strategies" in a September 2003 internal military report.

At various points during the questioning of Khatani, Leso's BSCT operators instructed interrogators to keep the prisoner awake, force him to stop staring at a wall, and advised on the effectiveness of techniques. "BSCT observed that detainee does not like it when the interrogator points out his nonverbal responses," reads an entry in the log from Dec. 29, 2002. (Emphasis added.)

http://minorjive.typepad.com/hungryblues/2006/07/torture_experts.html

In the earlier attachment of the interrogation log, Leso is referred to as "MAJ L (BSCT)".

He is present at the Nov. 23 and Nov. 27 interrogation sessions, at least.

1000: Control puts detainee in swivel chair at MAJ L's suggestion to keep him awake and stop him from fixing his eyes on one spot in booth. [pg. 12 of the interrogation document]

<http://www.time.com/time/magazine/article/0,9171,1071284,00.html?internalid=AM2>

Each day--and sometimes every hour--is shaped around standard Army interrogation techniques, with code names like Fear Up/Harsh, Pride/Ego Down, the Futility Approach and the Circumstantial Evidence Theme. Each day, the interrogators seem to be trying to find those that work best.... They play on his emotions, saying he should talk if he ever wants to see his family or friends or homeland again....

Over the next month, the interrogators experiment with other tactics. They strip-search him and briefly make him stand nude. They tell him to bark like a dog and growl at pictures of terrorists. They hang pictures of scantily clad women around his neck. A female interrogator so annoys al-Qahtani that he tells his captors he wants to commit suicide and asks for a crayon to write a will....

A year ago, a senior FBI counterterrorism official wrote the Pentagon complaining of abuses that FBI agents said they witnessed at the naval base. The agents reported seeing or hearing of "highly aggressive interrogation techniques." The letter singles out the treatment of al-Qahtani in September and October of 2002--before the log obtained by TIME begins--saying a dog was used "in an aggressive manner to intimidate Detainee #63." The FBI letter said al-Qahtani had been "subjected to intense isolation for over

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three months" and "was evidencing behavior consistent with extreme psychological trauma (talking to non existent people, reporting hearing voices, crouching in a cell covered with a sheet for hours on end)."

From another article:

Physician and bioethicist Steven Miles has reported the participation of BSCT psychologist Maj. John Leso in the brutal and prolonged interrogation of Mohammed al-Qahtani. (See also the detailed interrogation log on al-Qahtani, referred to as Detainee 063.) During al-Qahtani's interrogation he was subjected to extreme cold to the point where his heart slowed and he was hospitalized (he was then warmed up and again subjected to extreme cold), he was injected with several bags of saline solution while being strapped to a table until he urinated on himself, and he was forced to bark like a dog; we are not told what was done to him to get him to bark.
(<http://www.zmag.org/content/showarticle.cfm?ItemID=10903>)

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DEC 18 2006

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Army Regulation 15-6: Final Report

Investigation into FBI Allegations of Detainee Abuse at Guantanamo Bay, Cuba Detention Facility

EXECUTIVE SUMMARY

Detention and interrogation operations at Joint Task Force Guantanamo (JTF-GTMO) cover a three-year period and over 24,000 interrogations. This AR 15-6 investigation found only three interrogation acts in violation of interrogation techniques authorized by Army Field Manual 34-52 and DoD guidance. The AR 15-6 also found that the Commander of JTF-GTMO failed to monitor the interrogation of one high value detainee in late 2002. The AR 15-6 found that the interrogation of this same high value detainee resulted in degrading and abusive treatment but did not rise to the level of being inhumane treatment. Finally, the AR 15-6 found that the communication of a threat to another high value detainee was in violation of SECDEF guidance and the UCMJ. The AR 15-6 found no evidence of torture or inhumane treatment at JTF-GTMO.

INTRODUCTION

In June 2004, the Federal Bureau of Investigation (FBI) began an internal investigation to determine if any of its personnel had observed mistreatment or aggressive behavior towards detainees at Guantanamo Bay, Cuba (GTMO). On 9 Jul 04, the FBI – Inspection Division (INSD), sent an e-mail message to all FBI personnel who had served in any capacity at GTMO. The e-mail stated in relevant part:

“You have been identified as having conducted an assignment at GTMO, Cuba since 9/11/2001. The Inspection Division has been tasked with contacting those employees who have served in any capacity at GTMO and obtain information regarding the treatment of detainees. Employees should immediately respond to the following:

- 1) Employees who observed aggressive treatment, which was not consistent with Bureau interview policy guidelines, should respond via e-mail for purposes of a follow-up interview.
- 2) Employees who worked at GTMO and observed no aggressive treatment of detainees should respond via an EC documenting a negative response...”

The above e-mail message was sent by INSD to 493 FBI personnel who had served in GTMO between 9 Sep 01 and 9 Jul 04. INSD received 434 total

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responses, and 26 agents stated that they had observed aggressive treatment of detainees at GTMO.

In response to FBI agent allegations of aggressive interrogation techniques at Joint Task Force Guantanamo Bay (JTF-GTMO) Cuba, that were disclosed in Dec 04 as a result of FOIA releases, General (GEN) Bantz J. Craddock, Commander United States Southern Command (USSOUTHCOM), ordered an AR 15-6 investigation and appointed Brigadier General (BG) John T. Furlow, United States Army South Deputy Commander for Support, as the investigating officer. BG Furlow was directed to address the following allegations:

- a. That military interrogators improperly used military working dogs during interrogation sessions to threaten detainees, or for some other purpose;
- b. That military interrogators improperly used duct tape to cover a detainee's mouth and head;
- c. That DoD interrogators improperly impersonated FBI agents and Department of State officers during the interrogation of detainees;
- d. That, on several occasions, DoD interrogators improperly played loud music and yelled loudly at detainees;
- e. That military personnel improperly interfered with FBI interrogators in the performance of their FBI duties;
- f. That military interrogators improperly used sleep deprivation against detainees;
- g. That military interrogators improperly chained detainees and placed them in a fetal position on the floor, and denied them food and water for long periods of time;
- h. That military interrogators improperly used extremes of heat and cold during their interrogation of detainees.

Subsequent to the initial appointment, GEN Craddock directed BG Furlow to investigate two additional allegations concerning a female military interrogator performing a "lap dance" on a detainee and the use of faux "menstrual blood" during an interrogation. Finally, the appointment letter directed BG Furlow to not limit himself to the listed allegations.

On 28 Feb 05, after two months of investigation, BG Furlow advised GEN Craddock that he needed to interview officers senior in grade to himself. On 28 Feb 05 GEN Craddock appointed Lieutenant General (Lt Gen) Randall M. Schmidt, United States Southern Command Air Forces Commander, Davis-

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Monthan AFB, AZ, as the senior investigating officer. This report reflects the combined findings and conclusions of the initial investigative efforts and the combined investigative efforts of both BG Furlow and Lt Gen Schmidt.

After submission of the AR15-6 Report of Investigation on 1 Apr 05, CDR USSOUTHCOM directed on 5 May 2005 that the investigation be reopened to consider memos dated 11 Dec 04 and 24 Dec 04, that had recently been discovered, regarding the subject of the second Special Interrogation Plan. Prior to completion of the follow-up, CDR USSOUTHCOM directed on 2 Jun 05 that the investigation should also address new allegations made by the subject of the first Special Interrogation Plan.

SCOPE OF REVIEW

This investigation was directed and accomplished under the "informal procedures" provisions of Army Regulation 15-6, Procedures for Investigating Officers and Boards of Officers, dated 30 Sep 96, (AR 15-6). This AR 15-6 investigation centered on alleged abuses occurring during interrogation operations. This AR 15-6 found incidents of abuse during detention operations; all of which were appropriately addressed by the command. The investigation team conducted a comprehensive review of thousands of documents and statements pertaining to any allegations of abuse occurring at GTMO, to include the complete medical records of the subjects of the first and second Special Interrogation Plan. The team interviewed 30 FBI agents, conducted interviews of over 100 personnel from 6 Jan 05 to 24 Mar 05 and had access to hundreds of interviews conducted by several recent investigations. These interviews included personnel assigned to GTMO, USSOUTHCOM, and OSD during the tenure of JTFs 160, 170, and GTMO. It included nine DIA personnel, including every Joint Intelligence Group Chief and every Intelligence Control Element Chief. It included 76 DoD personnel, to include every General Officer who commanded Joint Task Force 160, Joint Task Force 170 and Joint Task Force GTMO. DoD personnel interviewed also included personnel who served as interrogators at GTMO and instructors at the US Army Intelligence School and Center. During the course of the investigation, the team visited Birmingham, AL; Chicago, IL; Ft Bragg, NC; Ft Devens, MA; Ft Huachuca, AZ; GTMO (twice); Los Angeles, CA; Miami, FL; and Washington D.C. (five times).

The investigation team attempted to determine if the allegations alleged by the FBI, in fact, occurred. During the course of the follow up investigation the AR15-6 also considered allegations raised specifically by detainees the subject of the first and second Special Interrogation Plans. The investigating team applied a preponderance standard of proof consistent with the guidance contained in AR15-6. The team also applied guidance contained in FM 34-52, CDR USSOUTHCOM, and SECDEF memorandums authorizing special interrogation techniques in deciding if a particular interrogation approach fell properly within an authorized technique. In those cases in which the team concluded that the

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allegation had in fact occurred, the team then considered whether the incident was in compliance with interrogation techniques that were approved either at the time of the incident or subsequent to the incident. In those cases where it was determined the allegation occurred and to have not been an authorized technique, the team then reviewed whether disciplinary action had already been taken and the propriety of that action. On 28 Mar 05, GEN Craddock, as the investigation appointing authority, asked Lt Gen Schmidt to determine accountability for those substantiated violations that had no command action taken.

The team did not review the legal validity of the various interrogation techniques outlined in Army Field Manual 34-52, or those approved by the Secretary of Defense.

BACKGROUND

On 7 Mar 05 Vice Admiral A.T. Church, III submitted his final report of detention operations and detainee interrogation techniques in the Global War on Terror to the Secretary of Defense. (hereinafter "Church Report") ~~That report included a thorough background discussion of detainee operations at GTMO. Our investigation independently researched the genesis and adjustments to policy and interrogation techniques from the origination of GTMO to the present. Our independently derived findings regarding the development and adjustments to policy and interrogation techniques are identical to the Church report. Therefore, I have adopted relevant portions of the Church report to show the development of permissible interrogation techniques.~~

Interrogation operations at GTMO began in January 2002. Initially interrogators relied upon the interrogation techniques contained in FM 34-52. These techniques were ineffective against detainees who had received interrogation resistance training. On 11 Oct 2002, Major General Michael E. Dunlavey, the Commander of Joint Task Force (JTF) 170, the intelligence task force at GTMO, requested that the CDR USSOUTHCOM, GEN James T. Hill, approve 19 counter resistance techniques that were not specifically listed in FM 34-52. The techniques were broken down into Categories I, II, and III, with the third category containing the most aggressive techniques. On 25 Oct 02 CDR USSOUTHCOM forwarded the request to the Chairman of the Joint Chiefs of Staff, General Richard B. Myers. On 2 Dec 02, the Secretary of Defense approved the use of all Category I and II techniques, but only one of the Category III techniques (which authorized mild, non-injurious physical contact such as grabbing, poking in the chest with a finger, and light pushing). In the approval memorandum, the SECDEF approved the techniques for use by CDR USSOUTHCOM, who subsequently verbally delegated the authority to approve and apply these techniques to CDR JTF-GTMO.

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~~On 15 Jan 03, SECDEF rescinded his approval of all Category II techniques and the one Category III technique leaving only Category I techniques in effect. The SECDEF memo permitted use of Category II and III techniques only with SECDEF approval. No approval was requested or granted.~~

~~On 16 Apr 03, the Secretary of Defense issued a new policy accepting 24 techniques, most of which were taken directly from or closely resembled those in FM 34-52. The Secretary's guidance remains in effect today. This policy memorandum placed several requirements on CDR USSOUTHCOM. First, it required all detainees to continue to be treated humanely. Second, it required SECDEF notification prior to the implementation of any of the following aggressive interrogation techniques: Incentive/Removal of Incentive; Pride and Ego Down; Mutt and Jeff; and Isolation. Third, it specifically limited the use of these aggressive techniques to circumstances required by "military necessity." The memorandum did not attempt to define the parameters of "humane treatment" or "military necessity."~~

The CDR USSOUTHCOM issued a memorandum on 2 Jun 03 providing further guidance on the implementation of the 16 Apr 03 SECDEF approved techniques. This guidance provided that prior to the use of any of the specified aggressive techniques, the JTF Commander would submit the request in writing to CDR USSOUTHCOM for submission to SECDEF. The guidance also stated that "specific implementation guidance with respect to techniques A-Q is provided in Army Field Manual 34-52. Further implementation guidance with respect to techniques R-X will need to be developed by the appropriate authority." GTMO standard operating procedure on interrogations provides guidance for interrogations.

In addition, the CDR USSOUTHCOM guidance provided the following clarification to the SECDEF's 16 Apr 03 memorandum: **(quoting)**

- (a) Reference Technique B, the Working Group was most concerned about removal of the Koran from a detainee—something we no longer do. Because providing incentives (e.g., McDonald's Fish Sandwiches or cigarettes) is an integral part of interrogations, you will notify me in writing when the provided incentive would exceed that contemplated by interrogation doctrine contained in Army FM 34-52, or when the interrogators intend to remove an incentive from a detainee;
- (b) Reference Techniques I and O, you will notify me in writing when use of these standard interrogation techniques goes beyond the doctrinal application described in Army FM 34-52. When use of the technique is consistent with FM 34-52, you do not need to notify me;
- (c) I define "sleep deprivation", referenced in Technique V, as keeping a detainee awake for more than 16 hrs, or allowing a detainee to rest

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~~briefly and then repeatedly awakening him, not to exceed four days in succession;~~

- (d) ~~Reference Technique X, I do not consider the use of maximum-security units as isolation. A detainee placed in a maximum-security unit is segregated, but not truly isolated;~~
- (e) I define the "least intrusive method" as the technique that has the least impact on a detainee's standard of treatment, while evoking the desired response from the detainee during interrogations;
- (f) Except in the case of Techniques B, I, O, and X, I have determined that the first O-6/GG-15 in the chain of command or supervision, is the "appropriate specified senior approval authority," unless approval authority is withheld from that individual by higher authority.

Lastly, I have told the Secretary of Defense his 16 April guidance applies to all interagency elements assigned or attached to JTF GTMO. **(end quote)**

~~There have been over 24,000 interrogation sessions at GTMO since the beginning of interrogation operations.~~

FINDINGS

GENERAL DETAINEE POPULATION

Allegation: That DoD interrogators improperly impersonated FBI agents or Department of State officers during the interrogation of detainees.

Finding #1: On several occasions in 2003 various DoD interrogators impersonated agents of the FBI and the Department of State.

Technique: Authorized: FM 34-52 (p. 3-13); Category I technique approved by SECDEF – Deceiving interrogator identity

Discussion: The Chief of the Special Interrogation Team directed two interrogators to pose as US State Department representatives during an interrogation. In addition another interrogator posed as an FBI agent on one occasion. This impersonation came to the attention of the Senior Supervisory Agent (SSA) of the FBI at Guantanamo Bay when several other agents advised him that detainees were complaining during interviews that the FBI had already asked them the same questions. The SSA approached the Joint Interrogation Group (JIG) Chief, with his agents' concerns. According to the SSA, the JIG Chief did not contest the FBI agents' accusations. In fact, the JIG Chief knew of at least one military interrogator who had impersonated an FBI agent. After the

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meeting, the JIG Chief agreed to stop the practice of DoD interrogators impersonating FBI agents without prior FBI approval. The SSA made it clear to the investigation team that he did not believe the impersonation interfered with FBI operations and was pleased with the JIG Chief's rapid and thorough response to the situation.

Organizational response: Immediately stopped the practice.

Recommendation #1: *The allegation should be closed. The technique, while authorized, was undermining the inter-agency working relationship. No additional corrective action is necessary or appropriate.*

Allegation: That a female military interrogator performed a "lap dance" on a detainee during an interrogation. I have expanded this allegation to "That female military interrogators performed acts designed to take advantage of their gender in relation to Muslim males."

Finding #2a: On one occasion between October 2002 and January 2003, a female interrogator put perfume on a detainee by touching the detainee on his arm with her hand;

Technique: Authorized: FM 34-52 (p. 3-11); Category III technique approved by SECDEF – Mild, non-injurious physical touching

Discussion: a. On at least one occasion in late 2002, a female interrogator rubbed perfume on a detainee. The Interrogation Control Element (ICE) Chief stated that he specifically directed the interrogator to go to the PX and purchase rose oil with the intent of rubbing a portion of the perfume on the detainee's arm to distract the detainee. The interrogator admitted to using this approach with a detainee. At the time of the event the detainee responded by attempting to bite the interrogator and lost his balance, fell out of his chair, and chipped his tooth. He received immediate and appropriate medical attention and did not suffer permanent injury.

Organizational response: a. The interrogator was not disciplined for rubbing perfume on a detainee since this was an authorized technique.

Finding #2b: During the month of March 2003, a female interrogator approached a detainee from behind, rubbed against his back, leaned over the detainee touching him on his knee and shoulder and whispered in his ear that his situation was futile, and ran her fingers through his hair.

Technique: Authorized: FM 34-52 technique – Futility – Act used to highlight futility of the detainee's situation.

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Discussion: b. On 17 Apr 03, An interrogation supervisor supervised a female interrogator as she interrogated a detainee with her BDU top off¹, and subsequently the interrogator ran her fingers through the detainee's hair. The interrogator also approached the detainee from behind, touched him on his knee and shoulder, leaned over him, and placed her face near the side of his in an effort to create stress and break his concentration during interrogation.

Organizational response: b. The interrogation supervisor was given a written letter of admonishment for failure to document the techniques to be implemented by the interrogator prior to the interrogation. There is no evidence that either activity ever occurred again.

Recommendation #2: Command action was effective and sufficient with respect to the individual interrogators. AR 15-6 recommends that the approval authority for the use of gender coercion as futility technique be withheld to the JTF GTMO-CG.

Allegation: That a female military interrogator wiped "menstrual blood" on a detainee during an interrogation.

Finding #3: In March 2003, a female interrogator told a detainee that red ink on her hand was menstrual blood and then wiped her hand on the detainee's arm.

Technique: Authorized: FM 34-52 technique ~~Futility~~ act used to highlight futility of the detainee's situation

Discussion: The female interrogator is no longer in military service and has declined to be interviewed. According to a former ICE Deputy the incident occurred when a detainee spat in the interrogator's face. According to the former ICE Deputy, the interrogator left the interrogation room and was crying outside the booth. She developed a plan to psychologically get back at him. She touched the detainee on his shoulder, showed him the red ink on her hand and said; by the way, I am menstruating. The detainee threw himself on the floor and started banging his head. This technique was not in an approved interrogation plan.

Organizational response: The ICE Deputy verbally reprimanded the interrogator for this incident. No formal disciplinary action was taken. There is no evidence that this happened again.

Recommendation #3: Command action was inadequate with respect to the individual interrogator. The interrogator should have been formally admonished or reprimanded for using a technique that was not approved in advance. Advance approval ensures that retaliatory techniques are not

¹ It was common practice at GTMO to conduct interrogations in a t-shirt with the BDU top removed because of the heat and humidity.

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employed on impulse. Considering the lapse in time, recommend this allegation be closed.

Allegation: That DoD interrogators improperly played loud music and yelled loudly at detainees.

Finding #4: On numerous occasions between July 2002 and October 2004, detainees were yelled at or subjected to loud music during interrogation.

Technique: Authorized: FM 34-52 technique – Incentive and Futility – acts used as reward for cooperating or to create futility if not cooperating.

Discussion: Almost every interviewee stated that yelling and the use of loud music were used for interrogations at GTMO. On a few occasions, detainees were left alone in the interrogation booth for an indefinite period of time while loud music played and strobe lights flashed. The vast majority of yelling and music was accomplished with interrogators in the room. The volume of the music was never loud enough to cause any physical injury. Interrogators stated that cultural music would be played as an incentive. Futility technique included the playing of Metallica, Britney Spears, and Rap music.

Organizational response: None.

Recommendation #4: The allegation should be closed. Recommend JTF-GTMO develop specific guidance on the length of time that a detainee may be subjected to futility music. Placement of a detainee in the interrogation booth and subjecting him to loud music and strobe lights should be limited and conducted within clearly prescribed limits.

Allegation: That military interrogators improperly used extremes of heat and cold during their interrogation of detainees.

Finding #5: On several occasions during 2002 and 2003, interrogators would adjust the air conditioner to make the detainee uncomfortable.

Technique: Unauthorized prior to 16 Apr 03: SECDEF did not approve exposure to cold in his 2 Dec 02 list of approved techniques

Technique: Authorized after 16 Apr 03: SECDEF approved technique. This technique was officially permitted under 16 Apr 03 SECDEF Memorandum – Environmental Manipulation

Discussion: Two FBI agents indicated that they were aware of DoD interrogators using temperature adjustment as an interrogation technique. Many interviewees, FBI agents and military interrogators, believed the hot climate at GTMO and the detainee's comfort in a hot climate caused a differing in opinions

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regarding the use of the air conditioning units in the interrogation booths. There were several individuals who were interviewed who acknowledged that certain military interrogators would adjust the air conditioning down (cool) in an attempt to make the detainee uncomfortable for the interrogation. Several witnesses indicated that the practice of adjusting the temperature ceased when CDR JTF-GTMO directed that the practice no longer be employed. ~~The current GTMO SOP still permits interrogators to adjust the temperature.~~ In addition, one interrogator supervisor stated that detainees were interrogated at Camp X-Ray, where the "booths" were not air-conditioned, to make the detainees uncomfortable.

Organizational response: No disciplinary action required.

Recommendation #5: *The allegation should be closed.*

Allegation: That military interrogators improperly used sleep deprivation against detainees.

Finding #6: ~~During 2003 and 2004 some detainees were subjected to cell moves every few hours to disrupt sleep patterns and lower the ability to resist interrogation.~~ Each case differed as to length and frequency of the cell moves.

Technique: Unauthorized prior to 2 Dec 02 and between 15 Jan 03 and 16 Apr 03: Neither sleep disruption or deprivation is an authorized FM 34-52 technique

Technique: Authorized between 2 Dec 02 and 15 Jan 03 and after 16 Apr 03: The exact parameters of this technique remained undefined until 2 Jun 03 when CDR USSOUTHCOM established clear guidance on the use of sleep adjustment. His guidance prohibited the practice of keeping a detainee awake for "more than 16 hours or allowing a detainee to rest briefly and then repeatedly awakening him, not to exceed four days in succession."

Discussion: Only one FBI agent alleged sleep deprivation; his complaint was that an individual was subjected to 16 hours of interrogation followed by four-hour breaks. He says he was told about these sessions by DoD interrogators and they implied that these 16 hour interrogations were repeated on a 20 hour cycle, but he did not know for certain what in fact occurred. The FBI agent was at GTMO from 2 Jun 03 to 17 Jul 03. Under CDR USSOUTHCOM's 2 Jun 03 guidance, 16 hour interrogations were permitted and do not constitute sleep deprivation if done on a 24 hour cycle. During the course of the investigation of the FBI allegation, the AR 15-6 did conduct a review of the interrogation records to see if there was any evidence that corroborated this allegation. While not directly supporting the FBI's allegation, records indicated that some interrogators recommended detainees for the "frequent flyer program." A current GTMO interrogation analyst indicated that this was a program in effect throughout 2003

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and until March 2004 to move detainees every few hours from one cell to another to disrupt their sleep. Documentation on one detainee indicated that he was subjected to this practice as recently as March 2004.

Organizational response: None. Current JTF-GTMO Commander terminated the frequent flyer cell movement program upon his arrival in March 04.

Recommendation #6: The allegation should be closed. Recommend USSOUTHCOM clarify policy on sleep deprivation.

Allegation: That military interrogators improperly used duct tape to cover a detainee's mouth and head.

Finding #7: Sometime in October 2002 duct tape was used to "quiet" a detainee.

Technique: Unauthorized

Discussion: In his testimony, the ICE Chief testified that he had a situation in which a detainee was screaming resistance messages and potentially provoking a riot. At the time of the incident there were 10 detainees in the interrogation section and the ICE Chief was concerned about losing control of the situation. He directed the MPs to quiet the detainee down. The MP mentioned that he had duct tape. The ICE Chief says he ultimately approved the use of duct tape to quiet the detainee. The MP then placed a single strand of duct tape around the detainee's mouth. The single strand proved ineffective because the detainee was soon yelling again. This time the MPs wrapped a single strand of duct tape around the mouth and head of the detainee. The detainee removed the duct tape again. Fed up and concerned that the detainee's yelling might cause a riot in the interrogation trailer, The ICE Chief ordered the MPs to wrap the duct tape twice around the head and mouth and three times under the chin and around the top of the detainee's head. According to an FBI agent, he and another FBI agent were approached by the ICE Chief who was laughing and told the agents that they needed to see something. When the first agent went to the interrogation room he saw that the detainee's head had been wrapped in duct tape over his beard and his hair. An interrogator testified that another interrogator admitted to him that he had duct taped the head of a detainee. According to the first agent, the ICE Chief said the interrogator wrapped the detainee's head with duct tape because the detainee refused to stop "chanting" passages from the Koran.

Organizational response: The JTF-170 JAG testified that she became aware of the incident and personally counseled the ICE Chief. The counseling session consisted of a verbal admonishment.² The ICE Chief did not receive any formal

² While the ICE Chief testified that he was counseled by the JTF-GTMO Commander this is not possible. The Commander in question did not arrive until the month following the event. The previous Commander has no recollection of the event.

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discipline action. We have no evidence that duct tape was ever used again on a detainee.

Recommendation #7: Command action was inadequate with respect to the ICE Chief. He should be formally admonished or reprimanded for directing an inappropriate restraint to be used on a detainee.

Allegation: That military interrogators improperly chained detainees and placed them in a fetal position on the floor

Finding #8: On at least two occasions between February 2002 and February 2003, two detainees were "short shackled" to the eye-bolt on the floor in the interrogation room.

Technique: Unauthorized.

Discussion: Two FBI agents each stated that they witnessed a detainee in an interrogation room that had been "short shackled" to the floor. Short shackling is the process by which the detainee's hand restraints are connected directly to an eyebolt in the floor requiring the detainee to either crouch very low or lay in a fetal position on the floor. The FBI agents indicated that each of the detainees was clothed. ~~Another FBI agent stated she witnessed a detainee short shackled and lying in his own excrement.~~ The AR 15-6 was unable to find any documentation, testimony, or other evidence corroborating the third agent's recollection, to this allegation or her email allegation that one of the detainees had pulled his hair out while short shackled. We also found that 'short shackling' was initially authorized as a force protection measure during the in processing of detainees.³

Organizational response: None. JTF-GTMO has implemented SOPs that prohibit short shackling.

Recommendation #8: The allegation should be closed. The AR 15-6 was not able to find any evidence to adequately assign responsibility for these actions. This practice is now specifically prohibited by current GTMO interrogation policy.

Allegation: That military personnel improperly interfered with FBI interrogators in the performance of their FBI duties.

Finding #9: We discovered no evidence to support this allegation.

³ During the course of a site visit to GTMO several detention operations personnel indicated that they understood that short shackling was permitted in the early days of GTMO as a force protection measure. They all stated that it was no longer authorized as either a detention measure or during interrogations.

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Discussion: This allegation stems from an FBI agent objections to a proposed Special Interrogation Plan. The dispute resulted in a DoD official being rude to the FBI agent. The team did not find any evidence of "interference" with FBI interrogations that extended beyond the dispute over which techniques worked best in interrogation. During the infancy of interrogation operations at GTMO, it was obvious that the different investigative agencies had different interrogation objectives. Law enforcement agencies were primarily interested in interviews that would produce voluntary confessions that would be admissible in U.S. Federal District Courts. Conversely, DoD interrogators were interested in actionable intelligence and thus had greater latitude on the techniques used during the interrogations. These different goals created friction.

Recommendation #9: *The allegation should be closed.*

Allegation: That military interrogators denied detainees food and water for long periods of time.

Finding #10: We discovered no evidence to support the allegation that the detainees were denied food and water.

Discussion: This allegation stems from the statement of an FBI Agent. She reports two incidents of observing two detainees in "the fetal position and lying on the floor of interview rooms." And that there were was no "evidence of any food or water." The Agent admits in her statement that she made an assumption that the detainees were denied food and water based solely upon their appearance. The Agent was unable to provide any specific information as to the day she made these observations to permit additional proof or assignment of responsibility.

Recommendation #10: *The allegation should be closed.*

SPECIAL INTERROGATION PLANS

During the course of interrogations certain detainees exhibited refined resistance techniques to interrogations. These detainees were suspected to possess significant current intelligence regarding planned future terrorist attacks against the United States. For these reasons Special Interrogation Plans were proposed and approved for the detainees. A total of two Special Interrogation Plans were carried out. They are referred to herein as the "First Special Interrogation Plan" and the "Second Special Interrogation Plan".

THE FIRST SPECIAL INTERROGATION PLAN

On 23 Nov 02 interrogators initiated the first Special Interrogation Plan. The interrogation plan was designed to counter resistance techniques of the subject

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of the first Special Interrogation Plan. The memo authorizing the techniques for this interrogation was signed by SECDEF on 2 Dec 02. These techniques supplemented techniques already permitted under the provisions of FM 34-52.

Allegation: That military interrogators improperly used military working dogs (MWD) during interrogation sessions to threaten detainees, or for some other purpose.

Finding #11a: On one occasion in October 2002 a military working dog was brought into the interrogation room and directed to growl, bark, and show his teeth at the subject of the first Special Interrogation Plan.

Technique: Unauthorized prior to 12 Nov 02.

Discussion: a. October 2002 incident: GTMO records indicate that on 01 Oct 02, the Commander of JTF-170 requested Joint Detention Operations Group (JDOG) support for interrogation operations to interrogate the subject of the first Special Interrogation Plan. The dog was requested to assist in the movement of the subject of the first Special Interrogation Plan between Camp X-ray and the GTMO Naval Brig to "discourage the detainee from attempting to escape." The interrogation plan (IP) indicates that the interrogation would begin on the 2nd or 3rd of October 2002. One FBI agent in his statement recalls the MWD being used on or about 05 Oct 02. He indicated that the events were notable for several reasons. He had recently purchased a German Shepard and wanted to get some "tips" from the dog handlers. The FBI agent noticed that there were two working dog teams (one Navy and one Army) present for the interrogation of the subject of the first Special Interrogation Plan. Finally, the FBI agent recalled that he and his partner left the observation room when the MWD was introduced into the interrogation room. The FBI agent's partner corroborates this statement.

In addition an interrogator indicated that she recalled a MWD being brought into the interrogation room during interrogation of the subject of the first Special Interrogation Plan at Camp X-ray, between 02-10 Oct 02. She stated that the dogs were used only "briefly." She stated that the use of the dog was documented on the IP and approved by the ICE Chief and CDR, JTF-GTMO

Finding #11b: In November 2002 a military working dog was brought into the interrogation room and directed to growl, bark, and show his teeth at the subject of the first Special Interrogation Plan.

Technique: Authorized: SECDEF approved the use of Category I and II techniques for the subject of the first Special Interrogation Plan. Category II technique permits the use of dogs to exploit "individual phobias" during interrogations.

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Discussion: b. An interrogator testified that the MWD was in the booth on one occasion for the subject of the first Special Interrogation Plan. He testified that he was approached by another interrogator and discussed the use of a MWD in an interrogation session. Specifically, the first interrogator stated that the second interrogator told him that a MWD was brought into the doorway of the interrogation room and ordered by the dog handler to growl, show teeth and bark at the detainee. In addition a psychologist assigned to the Behavioral Science Consultation Team (BSCT) for JTF-170/JTF-GTMO witnessed the use of a MWD named "Zeus" during a military interrogation of the subject of the first Special Interrogation Plan during the November 2002 time period. In his interview, the ICE Chief acknowledged that an MWD had entered the interrogation room of the subject of the first Special Interrogation Plan under the authority of a "special IP" for the subject of the first Special Interrogation Plan. The unsigned but approved interrogation plan for the subject of the first Special Interrogation Plan is from 12 Nov 02. (Church p. 115) It indicates dogs will only be used in interrogation if approved in writing, in advance. Both JTF-GTMO Commanders who were in charge during the execution of the special interrogation plan deny that they authorized the use of MWDs in the interrogation room.

Organizational response: a. and b. None. Current SOPs expressly prohibit the use of MWDs in the interrogation room. There is no evidence that this has ever happened again.

Recommendation #11: *The allegation should be closed. While the ICE Chief was aware of and condoned the first use of the MWD, additional corrective action is not necessary. The event occurred on two occasions and was expressly approved after the first occasion for this detainee. This practice is now specifically prohibited by current GTMO interrogation policy.*

Allegation: That a female military interrogator performed a "lap dance" on a detainee during an interrogation. I have expanded this allegation to "That female military interrogators performed acts designed to take advantage of their gender in relation to Muslim males."

Finding #12a: On 21 and 23 Dec 02, MPs held down a detainee while a female interrogator straddled the detainee without placing weight on the detainee;

Technique: Authorized: FM 34-52 technique – Futility – Act used to highlight futility of the detainee's situation.

Finding #12b: On 04 Dec 02, a female interrogator massaged the detainee's back and neck over his clothing;

Technique: Authorized: FM 34-52 technique – Futility – Act used to highlight futility of the detainee's situation.

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Finding #12c: On various occasions between October 2002 and January 2003, a female interrogator invaded the private space of a detainee to disrupt his concentration during interrogation;

Technique: Authorized: FM 34-52 technique – Futility – act used to highlight futility of the detainee’s situation.

Discussion: Interrogation logs and MFRs for the subject of the first Special Interrogation Plan document that on both 21 and 23 Dec 02, a female interrogator straddled, without putting any weight on the detainee, the subject of the first Special Interrogation Plan while he was being held down by MPs. During these incidents a female interrogator would tell the detainee about the deaths of fellow Al-Qaeda members. During the straddling, the detainee would attempt to raise and bend his legs to prevent the interrogator from straddling him and prayed loudly. Interrogation MFRs also indicate that on 04 Dec 02, a female interrogator began to enter the personal space of the subject of the first Special Interrogation Plan, touch him, and ultimately massage his back while whispering or speaking near his ear. Throughout this event, the subject of the first Special Interrogation Plan prayed, swore at the interrogator that she was going to Hell, and attempted to get away from her. The female interrogator admitted in her interview that she personally prepared portions of the MFRs of the the subject of the first Special Interrogation Plan interrogations. She asserts that she had permission to employ all these techniques. We have found no evidence of a lap dance ever occurring.

Organizational response: No disciplinary action taken. The ICE Chief approved these techniques at the time.

Recommendation #12: *The allegation should be closed. No command action is necessary with respect to the individual interrogators. Their supervisor acknowledged that he approved the approaches at the time of the interrogation. AR 15-6 recommends that the approval authority for the use of gender coercion as futility technique be withheld to the JTF GTMO-CG.*

Allegation: That DoD interrogators improperly played loud music and yelled loudly at detainees.

Finding #13: On numerous occasions between November 2002 and 15 Jan 03, the subject of the first Special Interrogation Plan was yelled at or subjected to loud music during interrogation.

Technique: Authorized: FM 34-52 technique – Incentive and Futility – acts used as reward for cooperating or to create futility in not cooperating.

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Discussion: See above discussion for Finding #4.

Organizational response: No disciplinary action required; technique authorized.

Recommendation #13: *The allegation should be closed. Recommend JTF-GTMO develop specific guidance on the length of time that a detainee may be subjected to futility music. Placement of a detainee in the interrogation booth and subjecting him to loud music and strobe lights should be limited and conducted within clearly prescribed limits.*

Allegation: That military interrogators improperly used extremes of heat and cold during their interrogation of detainees.

Finding #14: On several occasions between November 2002 and January 2003 interrogators would adjust the air conditioner to make the subject of the first Special Interrogation Plan uncomfortable.

Technique: Unauthorized prior to 16 Apr 03: SECDEF did not approve exposure to cold in his 2 Dec 02 list of approved techniques

Discussion. There are no medical entries indicating the subject of the first Special Interrogation Plan ever experienced medical problems related to low body temperature. The subject of the first Special Interrogation Plan's medical records do indicate that he did have a body temperature between 95 and 97 degrees twice. The subject of the first Special Interrogation Plan's medical records do indicate that from 7-9 Dec 02 he was hospitalized for observation after an episode of bradycardia. He was released within forty-eight hours, after the bradycardia resolved without intervention and he maintained stable hemodynamics.⁴ He experienced a second episode of bradycardia in Feb 03.

Organizational response: None

Recommendation #14: *The allegation should be closed.*

Allegation: That military interrogators improperly used sleep deprivation against detainees.

Finding #15: From 23 Nov 02 to 16 Jan 03, the subject of the first Special Interrogation Plan was interrogated for 18-20 hours per day for 48 of the 54 days, with the opportunity for a minimum of four hours rest per day.

Technique: Authorized: SECDEF approved technique. This technique was officially permitted under 2 Dec 02 SECDEF Memorandum – The use of 20-hour interrogations

⁴ Bradycardia is a relatively slow heart; hemo dynamics are mechanics of blood circulation.

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Discussion: SECDEF approved 20 hour interrogations for every 24-hour cycle for the subject of the first Special Interrogation Plan on 12 Nov 02. Later, CDR USSOUTHCOM formalized the definition of sleep deprivation in his 02 Jun 03 memorandum "promulgating" SECDEF's interrogation techniques of 16 Apr 03. He defined sleep deprivation as keeping a detainee awake for more than 16 hours, or allowing a detainee to rest briefly and then repeatedly awakening him, not to exceed four days in succession.

Organizational response: None. This was an authorized interrogation technique approved by SECDEF.

Recommendation #15: *The allegation should be closed. Recommend USSOUTHCOM clarify policy on sleep deprivation.*

Additional Allegations, Re: The subject of the first Special Interrogation Plan: In addition to the FBI allegations addressed above, the following additional interrogation techniques (not all inclusive) were used in the interrogation of the subject of the first Special Interrogation Plan. Each act is documented in the interrogation MFRs maintained on the subject of the first Special Interrogation Plan.

Finding #16a: That the subject of the first Special Interrogation Plan was separated from the general population from 8 Aug 02 to 15 Jan 03.

Technique: Unauthorized prior to 12 Nov 02: SECDEF did not approve movement of detainee to an "isolation facility" for interrogation purposes prior to approval of Category II techniques for the subject of the first Special Interrogation Plan on 12 Nov 02.

Technique: Authorized after 12 Nov 02:

Discussion: The subject of the first Special Interrogation Plan was never isolated from human contact. The subject of the first Special Interrogation Plan was however placed in an "isolation facility" where he was separated from the general detainee population from 8 Aug 02 to 15 Jan 03. The subject of the first Special Interrogation Plan routinely had contact with interrogators and MPs while in the "isolation facility." The SECDEF did not define "isolation facility" when he approved the use of an "isolation facility" for up to 30 days with additional isolation beyond 30 days requiring CDR JTF-GTMO approval on 12 Nov 02. Prior to the SECDEF's approval, placement in an "isolation facility" was not an authorized interrogation technique.

Organizational response to Additional Allegations, Re: The subject of the first Special Interrogation Plan. None taken.

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Eight Techniques Below: Authorized: FM 34-52 technique – Ego down and Futility.

Finding #16b: On 06 Dec 02, the subject of the first Special Interrogation Plan was forced to wear a woman's bra and had a thong placed on his head during the course of the interrogation.

Finding #16c: On 17 Dec 02, the subject of the first Special Interrogation Plan was told that his mother and sister were whores.

Finding #16d: On 17 Dec 02, the subject of the first Special Interrogation Plan was told that he was a homosexual, had homosexual tendencies, and that other detainees had found out about these tendencies

Finding #16e: On 20 Dec 02, an interrogator tied a leash to the subject of the first Special Interrogation Plan's chains, led him around the room, and forced him to perform a series of dog tricks.

Finding #16f: On 20 Dec 02, an interrogator forced the subject of the first Special Interrogation Plan to dance with a male interrogator.

Finding #16g: On several occasions in Dec 02, the subject of the first Special Interrogation Plan was subject to strip searches.⁵ These searches, conducted by the prison guards during interrogation, were done as a control measure on direction of the interrogators.

Finding #16h: On one occasion in Dec 02, the subject of the first Special Interrogation Plan was forced to stand naked for five minutes with females present. This incident occurred during the course of a strip search.

Finding #16i: On three occasions in Nov 02 and Dec 02, the subject of the first Special Interrogation Plan was prevented from praying during interrogation

Finding #16j: Once in Nov 02, the subject of the first Special Interrogation Plan became upset when two Korans were put on a TV, as a control measure during interrogation, and in Dec 02 when an interrogator got up on the desk in front of the subject of the first Special Interrogation Plan and squatted down in front of the subject of the first Special Interrogation Plan in an aggressive manner and unintentionally squatted over the detainee's Koran.

Finding #16k: On seventeen occasions, between 13 Dec 02 and 14 Jan 03, interrogators, during interrogations, poured water over the subject of the first Special Interrogation Plan head.

⁵ The subject of the first Special Interrogation Plan alleges that he was subject to "cavity searches." During the course of interrogation, the subject of the first Special Interrogation Plan was strip searched. The AR 15-6 was unable to determine the scope of these strip searches.

Discussion: the subject of the first Special Interrogation Plan was a high value detainee that ultimately provided extremely valuable intelligence. His ability to resist months of standard interrogation in the summer of 2002 was the genesis for the request to have authority to employ additional counter resistance interrogation techniques. The techniques used against the subject of the first Special Interrogation Plan were done in an effort to establish complete control and create the perception of futility and reduce his resistance to interrogation. For example, this included the use of strip searches, the control of prayer, the forced wearing of a woman's bra, and other techniques noted above. It is clear based upon the completeness of the interrogation logs that the interrogation team believed that they were acting within existing guidance. Despite the fact that the AR 15-6 concluded that every technique employed against the subject of the first Special Interrogation Plan was legally permissible under the existing guidance, the AR 15-6 finds that the creative, aggressive, and persistent interrogation of the subject of the first Special Interrogation Plan resulted in the cumulative effect being degrading and abusive treatment. Particularly troubling is the combined impact of the 160 days of segregation from other detainees, 48 of 54 consecutive days of 18 to 20-hour interrogations, and the creative application of authorized interrogation techniques. Requiring the subject of the first Special Interrogation Plan to be led around by a leash tied to his chains, placing a thong on his head, wearing a bra, insulting his mother and sister, being forced to stand naked in front of a female interrogator for five minutes, and using strip searches as an interrogation technique the AR 15-6 found to be abusive and degrading, particularly when done in the context of the 48 days of intense and long interrogations.⁶ While this treatment did not rise to the level of prohibited inhumane treatment the JTF-GTMO CDR was responsible for the interrogation of the subject of the first Special Interrogation Plan and had a responsibility to provide strategic guidance to the interrogation team. He failed to monitor the interrogation and exercise commander discretion by placing limits on the application of otherwise authorized techniques and approaches used in that interrogation. The Commander stated he was unaware of the specific details or impacts of the techniques on the detainee for this important interrogation. His failure to supervise the interrogation of the subject of the first Special Interrogation Plan allowed subordinates to make creative decisions in an environment requiring extremely tight controls⁷.

Recommendation #16: The Commander JTF-GTMO should be held accountable for failing to supervise the interrogation of the subject of the first Special Interrogation Plan and should be admonished for that failure.

⁶ The AR 15-6 found no evidence that the subject of the first Special Interrogation Plan was ever physically assaulted. His medical records show no evidence of any physical assaults. A medical examination completed on the subject of the first Special Interrogation Plan on 16 Jan 03 found no medical conditions of note.

⁷ The JTF-GTMO Commander's testimony that he was unaware of the creative approaches taken in the interrogation is inconsistent with his 21 Jan 03 letter to CDR USSOUTHCOM in which he asserts that the CJTF approved the interrogation plan in place and it was followed "relentlessly by the command."

Allegation: In addition to the allegations above, the AR 15-6 also considered additional allegations raised specifically by the subject of the first Special Interrogation Plan.

Finding #17: The AR 15-6 was unable to corroborate the subject of the first Special Interrogation Plan's allegations to the point of concluding that they had occurred by a preponderance of the evidence. Specific findings include:

The AR 15-6 did find that the subject of the first Special Interrogation Plan was required to stand for periods of time which he may have interpreted as forced positions.

There is evidence that the subject of the first Special Interrogation Plan regularly had water poured on his head. The interrogation logs indicate that this was done as a control measure only.

There is no evidence that the subject of the first Special Interrogation Plan was subjected to humiliation intentionally directed at his religion. It is however possible that the subject of the first Special Interrogation Plan interpreted many of the interrogation techniques employed to be religious humiliation.

The AR 15-6 found no evidence that the subject of the first Special Interrogation Plan was threatened with homosexual rape. He was told on 17 Dec 02 that he was a homosexual but not threatened in any manner.

There is no evidence, to include entries in his medical records, that either occurred regarding the subject of the first Special Interrogation Plan or any other detainee.

Discussion: In reaching conclusions on the treatment of the subject of the first Special Interrogation Plan the AR 15-6 relied heavily on the interrogations logs. The level of specificity of the logs strongly supports their credibility regarding the interrogation of the subject of the first Special Interrogation Plan and thus they carried considerable weight on the findings.

Recommendation #17: The allegation should be closed

THE SECOND SPECIAL INTERROGATION PLAN

In July 03 interrogators initiated a request for approval of a Special Interrogation Plan for a detainee. This plan was approved by SECDEF on 13 Aug 03. Interrogation logs indicate that the techniques were never implemented because the subject of the second special interrogation plan began to cooperate prior to the approval.

In addition to the interrogation logs, the AR 15-6 also considered allegations of abuse raised by the subject of the second special interrogation, himself. Specifically, after months of cooperation with interrogators, on 11 Dec 04, the subject of the second special interrogation notified his interrogator that he had been "subject to torture" by past interrogators during the months of July to October 2003.⁸

Allegation: That military interrogators improperly used extremes of heat and cold during their interrogation of detainees.

Finding #18: During the summer of 2003, interrogators would adjust the air conditioner to make the subject of the second special interrogation uncomfortable.

Technique: Authorized: SECDEF approved technique. This technique was officially permitted under 16 Apr 03 SECDEF Memorandum – Environmental Manipulation.

Discussion: The interrogation logs of the subject of the second Special Interrogation Plan indicate that on at least two occasions on 10 and 11 Jul 03 the air conditioner was turned off to heat up the room. In addition the subject of the second special interrogation alleges that on repeated occasions from Jul 03 to Oct 03, he was subjected to placement in a room referred to as the "freezer."

Organizational response: No disciplinary action required. Environmental manipulation was expressly permitted in the 16 Apr 03 SECDEF Memorandum. There is no evidence in the medical records of the subject of the second special interrogation being treated for hypothermia or any other condition related to extreme exposure.

Recommendation #18: The allegation should be closed.

Allegation: The subject of the second special interrogation alleges that female military interrogators removed their BDU tops and rubbed themselves against the detainee, fondled his genitalia, and made lewd sexual comments, noises, and gestures.

⁸ He reported these allegations to an interrogator. The interrogator was a member of the interrogation team at the time of the report. The interrogator reported the allegations to her supervisor. Shortly after being advised of the alleged abuse, the supervisor interviewed the subject of the second special interrogation, with the interrogator present, regarding the allegations. Based upon this interview, and notes taken by the interrogator, the supervisor prepared an 11 Dec 04 MFR addressed to JTF – GTMO JIG & ICE. The supervisor forwarded his MFR to the JTF – GTMO JIG. The JIG then forwarded the complaint to the JAG for processing IAW normal GTMO procedures for investigating allegations of abuse. The JAG by email on 22 Dec 04 tasked the JDOG, the JIG, and the JMG with a review of the complaint summarized in the 11 Dec 04 MFR and directed them to provide any relevant information. The internal GTMO investigation was never completed.

1 Apr 05 (Amended 9 Jun 05)

Finding #19: The AR 15-6 was unable to corroborate the allegations to the point of concluding that they had occurred by a preponderance of the evidence.

Discussion: The interrogation logs for the subject of the second special interrogation indicate that on a number of occasions female interrogators used their status as females to distract the subject of the second special interrogation during the interrogation but there is nothing to corroborate the allegation of the subject of the second special interrogation.

Organizational response: No disciplinary action taken.

Recommendation #19: *The allegation should be closed.*

Allegation: The subject of the second Special Interrogation Plan alleges that in late summer of 2003 he was hit by guards and an interrogator "very hard" and "with all their strength" he was hit "all over."

Finding #20: The AR 15-6 was unable to corroborate the allegations to the point of concluding that they had occurred by a preponderance of the evidence.

Discussion: The interrogation logs contain no reference to any physical violence against the subject of the second Special Interrogation Plan. His medical records indicate that in August 2003 the subject of the second special interrogation reported "rib contusions" from an altercation with MPs when moved between camps. During this examination the physician also noted an "edema of the lower lip" and a "small laceration" on his head. There are no other medical entries of any other physical injuries. There are no indications of swelling or contusions to support a conclusion that the subject of the second special interrogation was hit "very hard all over."

Organizational response: No disciplinary action taken. The allegation was not substantiated.

Recommendation #20: *The allegation should be closed. There is no evidence to support the subject of the second special interrogation's allegation of physical abuse.*

Allegation: A DoD interrogator improperly impersonated a Navy Captain assigned to the White House.

Finding #21: The Special Team Chief impersonated a USN Captain assigned to the White House during interrogation of the subject of the second special interrogation.

Technique: Authorized: This technique is permitted under FM 34-52 – Deception.

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Discussion: On 2 Aug 03 the Special Team Chief presented himself to the subject of the second special interrogation dressed as a Captain in the USN and indicated he was from the White House in an effort to convince the subject of the second special interrogation that he needed to cooperate with his interrogators. The Special Team Chief presented a letter to the subject of the second special interrogation, which indicated that because of the subject of the second special interrogation's lack of cooperation, U.S. authorities in conjunction with authorities from the country of origin of the subject of the second Special Interrogation Plan would interrogate the mother of the subject of the second Special Interrogation Plan. The letter further indicated that if his mother was uncooperative she would be detained and transferred to U.S. custody at GTMO for long term detention. While the JTF-GTMO Commander acknowledges that he was aware of the intent by the interrogator to wear Captain's rank and purport to be from the White House, he stated that he was not aware of the intention to convey a threat or the plan to use a fictitious letter.

Organizational response: None taken.

Recommendation #21: *The allegation should be closed. No further action necessary.*

Allegation: That Military interrogators threatened the subject of the second special interrogation and his family.

Finding #22: The Special Team Chief threatened the subject of the second special interrogation and his family in July, August and September 2003.

Technique: Unauthorized: This technique was rejected by SECDEF on 2 Dec 2002

Discussion: During the interrogation of the subject of the second special interrogation, a masked interrogator was used to interrogate the subject of the second special interrogation⁹. On 17 Jul 03 the masked interrogator told that he had a dream about the subject of the second special interrogation dying. Specifically he told the subject of the second special interrogation that in the dream he "saw four detainees that were chained together at the feet. They dug a hole that was six-feet long, six-feet deep, and four-feet wide. Then he observed the detainees throw a plain, pine casket with the detainee's identification number painted in orange lowered into the ground." The masked interrogator told the detainee that his dream meant that he was never going to leave GTMO unless he started to talk, that he would indeed die here from old age and be buried on "Christian... sovereign American soil." On 20 Jul 03 the masked interrogator, "Mr.

⁹ The interrogator was a DoD interrogator who was masked so as to preserve the identity of the interrogator. This was done in case the interrogation team wanted to use that interrogator later in another role.

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X", told the subject of the second Special Interrogation Plan that his family was "incarcerated." On 2 Aug 03, the Special Team Chief, while impersonating a USN Captain from the White House, told the subject of the second special interrogation that he had a letter indicating that the subject of the second special interrogation's family had been captured by the United States and that they were in danger.¹⁰ He went on to tell the subject of the second special interrogation that if he wanted to help his family he should tell them everything they wanted to know. The MFR dated 02 Aug 03 indicates that the subject of the second special interrogation had a messenger that day there to "deliver a message to him". The MFR goes on to state:

"That message was simple: Interrogator's colleagues are sick of hearing the same lies over and over and are seriously considering washing their hands of him. Once they do so, he will disappear and never be heard from again. Interrogator assured detainee again to use his imagination to think of the worst possible scenario he could end up in. He told Detainee that beatings and physical pain are not the worst thing in the world. After all, after being beaten for a while, humans tend to disconnect the mind from the body and make it through. However, there are worse things than physical pain. Interrogator assured Detainee that, eventually, he will talk, because everyone does. But until then, he will very soon disappear down a very dark hole. His very existence will become erased. His electronic files will be deleted from the computer, his paper files will be packed up and filed away, and his existence will be forgotten by all. No one will know what happened to him and, eventually, no one will care."

Finally, interrogator MFRs dated 08 Sep 03 indicate that the subject of the second special interrogation wanted to see "Captain Collins" and that they "understood that detainee had made an important decision and that the interrogator was anxious to hear what Detainee had to say. Detainee stated he understood and will wait for interrogator's [Captain Collins] return and that the subject of the second Special Interrogation Plan "...was not willing to continue to protect others to the detriment of himself and his family."

In investigating the actions above, the AR 15-6 focused on the threat made by the Special Team Chief.¹¹ When questioned about the threats to the subject of the second special interrogation, the Special Team Chief indicated that prior to the "threat" to detainee the subject of the second special interrogation he cleared the proposal and the letter with the senior judge advocate who approved the technique as a "deception." As written the letter does contain a threat to detain the subject of the second special interrogation's mother but does not contain any threat on her life or that of her family. The SJA indicated in his initial interview

¹⁰ The actual content of the letter simply indicates that his mother will be taken into custody and questioned.

¹¹ Mr. X's dream story does not rise to the level of a threat. It appears to be a staged prelude to the direct threat made by the Special Team Chief.

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that he did not recall the letter. He subsequently elected to exercise his Article 31 rights and declined to answer direct questions about the letter and the threats. The Special Team Chief also indicated that both JIG Chiefs in charge during the promulgation of the Special Interrogation Plan¹² were also aware of the threat letter. The first JIG Chief has retired and was unwilling to cooperate with this investigation. The second JIG Chief indicated under oath that he was unaware of the interrogation events discussed above. He recognizes, that read in conjunction with each other, they indicate a threat. He believes that the Commander of JTF-GTMO was not aware of the threat since the second JIG Chief was not aware of the threat. The second JIG Chief stated that they had weekly meetings with the Commander to discuss interrogations but they would not have covered this level of detail in that meeting. Neither he nor the Commander read interrogation MFRs on a regular basis. Finally, the Commander denies any knowledge of the existence of the threat or the letter. He does not recall ever discussing the issue of threats with the interrogators. He is aware that this is a prohibited practice and would not have permitted it if he had been aware of the plan.

Taken as a whole, it appears that the decision to threaten the subject of the second Special Interrogation Plan was made by the Special Team Chief. He claims that he cleared the plan with the senior judge advocate but not with his supervisors. Considering the actual content of the letter, it is reasonable to conclude that the JAG advised that the letter was a proper deception and therefore additional approval was not required. The Special Team Chief knew that under FM 34-52 deception did not require additional approval.

Despite the fact that the letter may be a proper deception technique under FM 34-52, the interrogation logs clearly indicate that the interrogation went well beyond the "threat to detain" made in the letter, and in fact was a threat to the subject of the second special interrogation and his family that violated the UCMJ, Article 134 Communicating a threat.

Organizational Response: None taken.

Recommendation #22: While the threats do not rise to the level of torture as defined under U.S. law, the facts support a conclusion that the Special Team Chief violated the UCMJ, Article 134, by communicating a threat. Recommend his current commander discipline the Special Team Chief.

¹² The first JIG Chief was in charge during the approval process for the second Special Interrogation Plan and then rotated out of JTF-GTMO. The second JIG Chief was in charge during the execution of the second Special Interrogation Plan

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SUMMARY OF FINDINGS

The findings above fall into three categories: Techniques that were authorized throughout the interrogation periods; techniques that were never authorized and finally, techniques that were originally unauthorized, and then subsequently authorized. The summary below only outlines the latter two categories of techniques to address whether the findings violated the UCMJ, international law, U.S. Law, regulations or directives.

Techniques that were never authorized: AR 15-6 determined the following acts were NEVER authorized under any interrogation guidance:

- a) On at least two occasions between February 2002 and February 2003, two detainees were "short shackled" to the eye-bolt on the floor in the interrogation room;
- b) Sometime in October 2002 duct tape was used to "quiet" a detainee.
- c) Military interrogators threatened the subject of the second special interrogation and his family;

Techniques that became authorized after the fact: AR 15-6 determined the following acts were initially not authorized under existing interrogation guidance but later authorized as an approved technique.

- a) On several occasions during 2002 and 2003, interrogators would adjust the air conditioner to make the detainees, to include the subject of the first Special Interrogation Plan, uncomfortable. This technique is now permitted under the SECDEF 16 Apr 03 guidance.
- b) On several occasions prior to 2 Dec 02 and between 15 Jan 03 and 16 Apr 03 interrogators had detainees moved from one cell to another every few hours to disrupt sleep patterns and lower the ability to resist interrogation. This technique is now permitted under the SECDEF 16 Apr 03 guidance.
- c) In October 2002 a Military Working Dog was brought into the interrogation room during the course of interrogation of the subject of the first Special Interrogation Plan and directed to growl, bark, and show his teeth at the detainee. This technique is subsequently approved for the interrogation of the subject of the first Special Interrogation Plan by SECDEF on 12 Nov 02.
- d) The subject of the first Special Interrogation Plan was separated from other detainees in an isolation facility away from the general population from 8 Aug 02 to 12 Nov 02. This technique was subsequently approved

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for the interrogation of the subject of the first Special Interrogation Plan by SECDEF on 12 Nov 02.

In each of the incidents above the violations can best be characterized as violations of policy. The SECDEF's subsequent approval of each of the techniques clearly establishes the ultimate legitimacy of that technique and thus additional corrective action is not necessary.

Additional Matters: In addition to findings outlined above it is important to document some additional findings:

- a) The team found no evidence that any detainee at GTMO was improperly documented or unaccounted for at any time. Every agency interviewee clearly indicated that they never knew of any "ghost detainees" at GTMO;
- b) Several past interrogators at GTMO declined to be interviewed. In the case of personnel who are currently in a civilian status we had extremely limited authority to compel the individuals to cooperate with this investigation; of particular note was former SGT Erik Saar who has written a book into "activities" at GTMO. Despite repeated requests he declined to be interviewed;
- c) During the course of this investigation, JTF-GTMO CG investigated and took action for personal misconduct of senior DoD personnel on GTMO. These allegations were reviewed and it was determined that they were not relevant to this investigation, and did not rise to a level to suggest a leadership environment with any impact on interrogation or detainee operations.

ADDITIONAL RECOMMENDATIONS

This AR15-6 recommends consideration of the following:

- a) **Recommendation #23** Recommend a policy-level review and determination of the status and treatment of all detainees, when not classified as EPWs. This review needs to particularly focus on the definitions of humane treatment, military necessity, and proper employment of interrogation techniques. (e.g. boundaries or extremes);
- b) **Recommendation #24** Recommend study of the DoD authorized interrogation techniques to establish a framework for evaluating their cumulative impact in relation to the obligation to treat detainees humanely;

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- c) **Recommendation #25** Recommend a reevaluation of the DoD and Inter-agency interrogation training consistent with the new realities of the requirements of the global war on terror;
- d) **Recommendation #26** Recommend a policy-level determination on role of Military Police in "setting the conditions" for intelligence gathering and interrogation of detainees at both the tactical level and strategic level facilities;
- e) **Recommendation #27** Recommend an Inter-Agency policy review to establish "standards" for interrogations when multiple agencies and interrogation objectives are involved. Particular emphasis should be placed on setting policy for who has priority as the lead agency, the specific boundaries for the authorized techniques in cases with multiple agencies involved, a central "data-base" for all intelligence gathered at a detention facility, and procedures for record keeping to include historical, litigation support, lessons learned, and successful/unsuccessful intelligence gathering techniques.

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AMERICAN
PSYCHOLOGICAL
ASSOCIATION

February 28, 2007

CONFIDENTIAL

Alice Lowe Shaw, Ph.D.
PRIVACY REDACTION

Dear Dr. Shaw:

This is a follow-up regarding your complaint against John F. Leso, PhD. Thank you for your letter and other documentation received on December 18, 2006. For your information, your complaint form is complete and filed as of October 26, 2006. (Rules regarding time limits for filing are found in Part II, Section 5.3 of the Rules and Procedures.) I wanted to let you know that your complaint is in the process of being reviewed but that the review may take additional time. We will contact when the review is complete.

Thank you for your cooperation and continued patience in this matter.

Sincerely,

A handwritten signature in cursive script that reads "Patricia Dixon".

Patricia Dixon
Board and Investigative Officer
Office of Ethics

750 First Street, NE
Washington, DC 20002-4242
(202) 336-5500
(202) 336-6123 TDD



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ALICE LOWE SHAW, PH.D.
PRIVACY REDACTION

CONFIDENTIAL

SEP 4 2007

8/30/07

Dear Ms. Dixon,

I was informed that an ethics complaint I made regarding Dr. John Leso, had been filed as of 10/26/2006.

I have not heard anything further about the proceedings of this complaint & review.

Please notify me of your progress.

Thank-you,

Alice Lowe Shaw Ph.D.

You can email me if you wish:

PRIVACY REDACTION

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INTERROGATION LOG
DETAINEE 063

23 November 2002

- 0225: The detainee arrives at the interrogation booth at Camp X-Ray. His hood is removed and he is bolted to the floor. SGT A and SGT R are the interrogators. A DoD linguist and MAJ L (BSCT) are present.
- 0235: Session begins. The detainee refuses to look at SGT A "due to his religion. This is a rapport building session.
- 0240: Detainee states he's on hunger strike. SGT A explains the affects of a hunger strike on the body. SGT A runs "love of brothers in Cuba" approach.
- 0320: The detainee refused to answer whether he wanted water. SGT R explained with emphasis that not answering disrespects SGT A and embarrasses him. The detainee said no, he didn't want water. The detainee continues to say he's on hunger strike.
- 0345: The detainee dozed off during a break. SGT R woke him up.
- 0355: SGT R wakes up detainee again.
- 0450: Interrogators take a break. Detainee goes to the bathroom.
- 0520: Interrogation resumes. The detainee refuses food and water.
- 0540: SGT A begins 9/11 theme. The detainee asks to pray and is refused.
- 0550: Detainee drinks _ bottle of water and states after this he is on strike, he refuses food.
- 0620: Interrogators take break to discuss theme.
- 0630: Interrogation resumes. SGT A continues with 9/11 theme.
- 0700: SGT R emphasized his frustration over detainees refusal to speak. SGT R denies detainees request to pray.
- 0707: Detainee requests to go to the bathroom.
- 0720: Detainee returns from bathroom break. He refuses a meal and states he is on hunger strike.
- 0725: Detainee states he will eat meal, but after that he's going on hunger strike, one hand is uncuffed to allow him to eat.
- 0755: Detainee finishes meal and states again he is going on hunger strike. The detainee ate the entire MRE plus an extra cereal bar.
- 0800: SGT A continues with 9/11 theme.
- 0830: Detainee given 2 hours of rest. Interrogations will resume at 1030.
- 0835: Observations - Detainee attempts to control the interrogation by complaining about his treatment, his mental illness, and his separation from his brothers in Cuba. When shown articles of 9/11, the detainee looked at pictures attentively. The detainee was repeatedly told that he is a man, and part of being a man is accepting responsibility for your actions. Whenever the detainee said that "it is God's will for him to be sitting in front of me, having to acknowledge and accept responsibility for his actions. The detainee went as far as to state that his religion forbids him to even speak to a woman.

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- 1035: The detainee is awakened and secured in chair. The interrogators are ENS C and IS1 E. A DoD linguist is present. The detainee is offered to use the restroom. The detainee is taken to the bathroom. The detainee then was staring at the floor for several minutes. When ENS C asked "what is on your mind" the detainee looked at the interrogator and began talking a lot about how unfair his situation was.
- 1110: The detainee asked if it was time to pray and was told not yet. The detainee then began asking what month it is. When not given an answer he persisted and then became quiet for about 10 minutes and then began again to engage in some conversation.
- 1135: The detainee began to shut down and not respond. He said that he would not speak at all.
- 1205: Break
- 1220: Interrogators returned and told the detainee it would be 20 minutes and then time to pray.
- 1240: Detainee given opportunity to pray.
- 1300: Lunch. Detainee refused to eat. At first he said he would eat, but then said that he was mentally not well and had only agreed because he was not thinking clearly.
- 1345: Detainee was shown 9/11 video. The detainee did watch without exhibiting any emotion. The detainee averted eyes from the photos of the hijackers.
- 1420: Read names of captured and killed AQ. The detainee stared off but was listening and closed his eyes when he heard some of the names of the dead.
- 1500: Break
- 1515: The detainee engaged in conversation regarding family and dreams. He asked why the interrogator was causing him pain talking of family and things he could not have. The detainee began to cry.
- 1530: Detainee requested and was given a bathroom break. Detainee returned hardened.
- 1700: Detainee spoke and said it has been a hard long day, also that he is on a hunger and talking strike.
- 1730: Detainee is offered food and water. He stated he was on a hunger strike. Food and water was provided anyway and placed next to him.
- 1800: Manchester Document was presented to the detainee. The detainee reacted when the description of an AQ operative was brought up.
- 1810: Detainee was asked if he would like to go the bathroom and if he wanted to nap.
- 1820: Circumstantial evidence was explained to the detainee. The Detainee stared at all of the documents and was visibly shaken. He seemed disturbed that the AQ leadership was talking, the detainee didn't say anything but he was making noticeable facial expressions.
- 1840: Detainee was told that he failed in his mission to the United States and in the Jihad in Afghanistan he again showed a facial response of failure.
- 1900: Break
- 1910: Returned from break.
- 1920: The detainee started speaking when told about the Koran and being judged by Allah and that leaders of AQ twisted the words. The detainee spoke very emotionally. SGT B asked to explain how this came about. Why he is the only

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one holding on and everyone else is speaking . SGT B stated "don't worry about a military judge worry about Allah, the Koran doesn't say kill the innocent. Make things right, repent."

1930: Detainee cried. He wants to be taken back to Delta and he will talk. He was told that he had to earn his way back to Delta.

1945: Break

1950: Returned from break. SGT B told the detainee "I want to help and I won't let anything bad happen to you." Detainee became unresponsive.

2030: Break. Detainee used restroom and was allowed to sleep.

2145: Return from break. Detainee awakened and taken to restroom then secured in chair.

2215: Detainee unresponsive.

2400: Activities concluded for the day and detainee allowed to sleep.

24 November 2002

- 0400: SGT R and SGT A begin session. SGT R wakes 063. He is taken to the bathroom and walked around for 5 minutes to wake him up. SGT A greets 063. Detainee asks to perform sunrise prayer. SGT A tells him the sun hasn't come up yet and that she will allow prayer later. SGT A offers water, but detainee refuses. Detainee asks when Ramadan will begin, SGT A says she'll talk about that later. SGT A tells detainee that he is on hunger strike, so how would Ramadan make a difference? SGT A asks detainee what would be different if it was Ramadan, detainee states he doesn't know how to answer the question, and detainee becomes unresponsive.
- 0415: SGT A begins by showing pictures of 19 hijackers and making remarks about what they may have been like, especially the young ones. Detainee won't look at pictures. SGT A asks why detainee won't look at pictures detainee won't answer, SGT A is using the circumstantial evidence theme.
- 0430: Detainee nods off. SGT R explains that falling asleep is wrong.
- 0430: Detainee states that he won't look at pictures because the people in the pictures don't pertain to his case, and because he's striking from interrogations.
- 0440: Detainee states he won't participate in interrogations until he returns to Cuba with his brothers, and until we stop this injustice. SGT R explains that he has no right to talk of injustice.
- 0445: Detainee engages in conversation with SGT A over the evidence. Detainee states that the (U.S.) shouldn't glue the hijackers to him. SGT A states that the evidence does that.
- 0450: Detainee wants to know if SGT A wants interrogation questions answered. SGT A states she doesn't need an answer. The detainee seems disheartened by her response.
- 0450: SGT A is fusing the Level of Guilt Theme with the Evidence. The Detainee is not speaking, but appears to be listening carefully. SGT A is pointing out the little mistakes the detainee made that lead to the evidence that "glue the detainee to hijackers". The detainee becomes unresponsive.
- 0457: SGT R advises detainee not to sleep.

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- 0509: SGT R advises detainee not to sleep.
- 0520: SGT R makes the detainee stand up and sit down 3 times. SGT R explains sleeping and not paying attention will not be tolerated. SGT A explains that his continued silence, while evidence builds against him hurts no one but him.
- 0545: Detainee continues to be unresponsive. SGT A continues to point out the mistakes that stopped him from entering Orlando, and the connections the detainee has with the hijackers.
- 0550: SGT R makes the detainee stand up 3 times and tells him to pay attention.
- 0602: SGT A is telling a story about an owl (Rapport Story). The detainee interrupts and states he wants to pray. SGT R advises detainee that SGT A decides when he prays. SGT R also explains that interrupting is rude.
- 0605: Detainee again asks to pray. SGT R says no.
- 0620: Detainee states he wants to pray. SGT R explains that he must respectfully ask SGT A for prayer time, the detainee does so and SGT A allows prayer.
- 0635: SGT A begins "Muslims in America Theme". Detainee is unresponsive
- 0702: SGT A briefly covers the Manchester Document, saying that his actions and answers during interrogations follow the resistance techniques in the document "It's just another piece of evidence."
- 0705: SGT R makes detainee stand up 3 times, and tells the detainee to pay attention. SGT R gives 5 minutes of instruction on the proper way to show respect to SGT A.
- 0708: SGT A talks about "Brothers in Cuba". Detainee remains unresponsive.
- 0800: SGT A offers meal to detainee. The detainee refuses. SGT R explains that refusal to eat is unproductive. SGT A offers 30 minutes rest. The detainee refuses. Interrogators had Corpsman check the detainee's vital signs. The detainee has not taken fluids for over 24 hours. Corpsman states vital signs are good. The detainee still refuses to speak a word.
- 0820: SGT R removes food from table and tells the detainee he missed his chance. SGT R explains that the detainee's refusal to eat hurts only him. SGT R will not loose any sleep over it.
- 0830: SGT A uses "Level of Guilt" approach.
- 0840: SGT R has the detainee stand for 10 minutes to stretch and avoid sleeping.
- 0900: SGT A asks the detainee if he wants to pray and sleep. The detainee says yes. SGT A says you have to drink water. The detainee says no. SGT R gives detainee 1 more chance. The detainee says no. SGT R empties water on floor and tells the detainee "you had your chance". The Corpsman then checks the detainee's vital signs, they are OK.
- 0925: SGT A discusses levels of guilt and sin.
- 0930: SGT A talks about the embarrassment of using a weak cover story and mixes in the "You can make this stop" approach. The detainee remains unresponsive.
- 0930: CAPT W advises SGT R that the Corpsman can administer IV fluids once Capt W and the Doctor on duty are notified and agree to it.
- 0940: SGT A begins September 11 approach.
- 0945: Detainee showed visible signs of interest when SGT A states "all will be revealed on judgment day".
- 0955: The detainee demands to go to the bathroom. SGT R states he will not go until he

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- asks properly. The detainee says "please may I go to the bathroom?". SGT A allows him.
- 1000: SGT R asks how the detainee will act on judgment day. Will he be proud, will he beg forgiveness or will he remain silent like a coward, just as he's doing now. The detainee appeared to be thinking about what SGT R said.
- 1023: SGT A begins "Good Muslim" approach.
- 1215: ENS C and ISI E entered booth. Detainee was not very responsive.
- 1230: Detainee is offered a fish sandwich, French fries, coke and a yogurt parfait. Request was made to unhand cuff detainee, but there was no key. Detainee did not eat.
- 1240: Detainee was unhand cuffed and interrogation team ate in front of him. Detainee's nose turned red when his judgment was questioned. In the past, this has indicated that he was getting upset.
- 1320: Strap was hung from ceiling in anticipation of the doctor's arrival.
- 1330: Detainee was asked if he wanted water. Detainee understands that in order to pray, he must drink water.
- 1340: Vitals were checked
- 1345: Detainee was searched
- 1355: Detainee stated, "I think now we are in Ramadan."
- 1405: Detainee agreed to drink water in return for being allowed to pray.
- 1440: Interrogators reentered room and discussion ensues about returning to his brothers in Cuba. Detainee became somewhat upset and claimed that the treatment he was receiving was illegal. "Evidence of guilt" was reinforced and detainee was introduced to the implications of conspiracy to commit crimes. Detainee was questioned about a statement he made the previous day, "I was only doing what God wanted me to do." Detainee asked several times if he really said that. When pressed on the issue, detainee stated that he wanted a normal life that what happened was between him and God. Lead interrogator pointed out to detainee that he could be a messenger for God and his cause. Detainee became visibly anxious.
- 1545: Detainee was silent and unresponsive. He averted his eyes when the 9/11 video was playing. Control interrogation initiated a "judgment day approach." Detainee's facial expressions indicated some responsiveness to the approach.
- 1630: Detainee was allowed to sleep. Detainee was told that he would be awoken and could pray if he drank water.
- 1745: Detainee awoken and given opportunity to pray and use the restroom. Detainee refused to drink water and consequently was not allowed to pray.
- 1800: Medical personnel checked vital signs and determined that detainee needed to be hydrated.
- 1810: Detainee was given two bags of fluids. Detainee stated that he did not want an IV and that he was in control of his body. SGT M asserted that he was in control and that detainee has no choice but to cooperate.
- 1845: Medical doctor arrives to evaluate detainee to ensure he is physically able to continue. Detainee stated that he wanted to sign a form or a release stating that he did not want any medications. The doctor explained that no such form exists. Detainee was informed that we would not let him die.

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- 1900: Detainee was told that he had been abandoned by Al-Qaida and that he should stop trying to protect them.
- 1915: Detainee used restroom and prayed.
- 1930: Detainee seemed disturbed that everybody was talking and that he was left here all alone.
- 2000: Detainee was offered food and told that he has already missed five meals.
- 2020: Detainee's vital signs were checked and it was determined that he was in good condition.
- 2030: Detainee was offered anonymity in exchange for his cooperation. SGT M reminded detainee about false statements that he made in the past.
- 2045: Detainee was asked if his allegiance to Al-Qaida was greater than his allegiance to God. SGT M emphasized that detainee has choices and that detainee was responsible for his current condition.
- 2100: Discussion turned to the Koran. SGT M asked detainee to show him in the Koran where it authorizes the use of terrorism.
- 2115: Detainee said he was cold and the AC was turned off.
- 2205: Detainee used restroom and asked if he wanted food or water.
- 2315: Medical personnel checked vitals signs. All vital signs were normal.
- 2330: Detainee began to cry.
- 2400: Pressure wrap was put on detainee's feet to combat the swelling. Detainee was put to bed.

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- 0400: Woke detainee and corpsman took vitals. Corpsman advised SGT R that detainee must take oral liquids within one hour or detainee will be given IV solution. SGT R provided SGT A with a bottle of powdered Tang mixed with water in order to provide electrolytes. SGT A advised detainee that he must drink bottle or he'll get another IV. She offered the incentive of morning prayer if he drank. Detainee refused. SGT A began with a "your mission" approach. SGT A asks detainee "what do you think is God's mission for you", "you have a mission to share God's message." Detainee was unresponsive.
- 0440: SGT A again advised detainee that he must drink or get an IV.
- 0445: Corpsman tried several times to get IV into the detainee without success. The corpsman stated that the detainee's dehydration was causing his veins to roll in his arm. The corpsman succeeded in getting a IV in the top of the hand but the IV stopped flowing. The corpsman retried the IV in the hand but was unsuccessful. The doctor was called to make a trip to perform an assessment.
- 0600: To follow up on "Gods message", SGT R showed 9-11 DVD. SGT R stood behind detainee and whispered in his ear, "What is God telling you right now? Your 19 friends died in a fireball and you weren't with them. Was that God's choice? Is it God's will that you stay alive to tell us about his message?" At that point, detainee threw his head back and butted SGT R in the eye. The 2 MPs in the room wrestled detainee to the ground to regain control. SGT R crouched over detainee and the detainee attempted to spit on him. SGT R stated "Go ahead and

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- spit on me. It won't change anything. You're still here. I'm still talking to you, and you won't leave until you've given Gods message." Detainee is put in chair.
- 0630: SGT A showed circumstantial evidence and told detainee repeatedly that she won't go away and neither will the evidence.
- 0645: Doctor attempted to put in IV and was unsuccessful. The doctor left to get more supplies.
- 0700: SGT A continued circumstantial evidence theme.
- 0705: Assessment – His reaction to SGT R was a combination of his guilt (possibly at not participating in the attack), his continuous interrogation, and his obvious hatred of SGT R. He was told after the episode that it proves he's not as weak and mentally ill as he wants us to believe.
- 0730: Doctor arrived and ran an IV by putting in a temporary shunt to allow continuous IV.
- 0745: SGT A ran the "already captured and talking" approach. When SGT R entered the booth the detainee reached for the IV. The guard stopped him and he reached again. The guards stopped him and cuffed his hands to the chair so he couldn't reach the IV. The detainee bent over and bit the IV tube completely in two. The guards strapped him to a stretcher and the corpsman attached a new IV. The detainee struggled through the entire process, but could no longer reach the IV.
- 0900: SGT A resumed the previous approach.
- 0915: Detainee requested to go to the bathroom but was given an opportunity to use a bottle instead. He was told he will not be unstrapped.
- 0940: Detainee was given three and one-half bags of IV. He started moaning and told the MPs he's willing to talk so he can urinate. SGT A entered the booth and asked the following questions: Who do you work for? (Detainee answered: Al Qaida), Who was your leader? (Detainee answered: Usama bin Laden), Why did you go to Orlando? (Detainee answered: I wasn't told the mission), Who was meeting you? (Detainee answered: I don't know), Who was with you on the plane? (Detainee answered: I was by myself). SGT R told detainee he was wasting SGT R's time. Detainee told SGT A he was willing to drink.
- 1000: Detainee again said he has to go to bathroom. SGT R said he can go in the bottle. Detainee said he wanted to go to the bathroom because it's more comfortable. SGT R said "You've ruined all trust, you can either go in the bottle or in your pants." Detainee goes in his pants. SGT A continued approach.
- 1030: Assessment – Detainee has a greater deal of animosity toward SGT R. He is beginning to understand the futility of his situation. He has to understand that his antics will not stop the interrogation at all. We feel he is slowly realizing that he will not outlast the battle of wills. He is much closer to compliance and cooperation now than at the beginning of the operation.
- 1110: Interrogation team entered the booth; ENS C (Lead), IS1 E (Control), and a female DOD linguist. Lead attempted to engage detainee in conversation but detainee was unresponsive.
- 1115: Detainee requested to use the restroom. When offered a bottle he said that he wanted to go outside. Control told him he could not, he would have to use the bottle. Detainee agreed. As preparations were being made control was talking about his behavior and how to get off the gurney, detainee urinated in his pants.

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- 1130: Lead began talking with detainee. Detainee began moaning and turning his head from right to left.
- 1140: Detainee in clear voice said that he needed to use the restroom. He engaged in clear and articulate conversation about getting off the gurney.
- 1200: Detainee said that he would eat.
- 1210: Detainee released from gurney and sat in chair. He ate two bites of meal and said it was enough. Control said he promised to eat the whole meal. Detainee ate the whole MRE.
- 1235: Detainee taken to restroom. He was told to empty himself completely. Detainee then washed and changed clothing.
- 1250: Detainee was given an opportunity to pray.
- 1320: Interrogation team entered room and detainee engaged in conversation regarding his statement about being Al Qaida. He said that he was mad at the guards and under much pressure.
- 1335: Detainee requested a second MRE as he was still hungry. He said he would end the hunger strike to stop the IVs. Lead kept small talk going.
- 1340: Detainee began crying hard spontaneously.
- 1350: Detainee said that when he came to Orlando he was turned away due to a visa problem. He said that he was coming on his own and was not Al Qaida. He said he did not know Usama bin Laden. He said "I don't know what God wants." Lead talked about the oath to Usama bin Laden and the detainee sat in silence listening intently. He said he knows nothing about Usama bin Laden.
- 1420: Detainee requested a third MRE. He was given an MRE and drank half a bottle of water. Detainee slowly engaged less and less while he ate. Detainee became evasive on most simple of requests.
- 1445: Detainee said "After I ate I feel better and will not talk."
- 1500: Detainee stated "You are working with the devil. You can take me back to my brothers. I will not eat anymore. I will not drink anymore and I am not going to talk anymore."
- 1505: Detainee began crying and praying.
- 1520: Detainee began talking about his situation. He continued to engage but much less.
- 1543: Break
- 1605: Resumed with detainee engaging very little.
- 1715: Team exited for a break. Control returned and began 9-11 theme.
- 1735: Detainee given opportunity to pray. He wanted to check if the sun was down himself but was refused.
- 1745: Control re-entered and continued 9-11 theme until relieved. Detainee did not speak but was actively listening and viewed all photos.
- 1800: Third shift commenced interrogating detainee.
- 1805: Detainee claimed he was innocent and that everything was just a coincidence.
- 1807: Detainee claimed that he admitted to be Al-Qaida because of the intense psychological pressure
- 1815: Detainee asserted his innocence and expressed remorse over the terrorist attacks
- 1820: Circumstantial evidence theme
- 1840: 9/11 video

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- 1850: SGT B takes over interrogation and goes over the Manchester Document
- 1900: GWOT theme
- 1915: Detainee asked about Ramadan
- 1935: SGT M continues GWOT theme
- 1945: Break. Detainee refused both food and water.
- 2000: Detainee began to cry while watching 9/11 video
- 2100: Detainee claimed to have been pressured into making a confession
- 2130: Detainee requested to go back to Cuba
- 2135: Detainee refused to talk about his mission, the one that was between him and God.
- 2150: Detainee went to the restroom
- 2205: Manchester Document – security plans
- 2230: Futility and self-inflicted suffering
- 2320: Detainee refused food and water
- 2400: Detainee was checked by medical personnel and was allowed to rest

26 November 2002

- 0400: SGT R wakes detainee- MPs take detainee to bathroom- he is searched and cuffed to chair. Detainee takes a couple sips of water. SGT A advises detainee that a bottle of water is much easier than a bag.
- 0405: SGT A begins by quoting a verse from Qoran. Detainee is awake, but completely unresponsive.
- 0425: SGT A uses “ Manchester Document” theme, explains to detainee how he uses interrogation resistance techniques. Detainee is unresponsive; he has yet to speak a word. SGT R makes detainee stand up to avoid sleeping.
- 0430: SGT R states that because he (SGT R) is such a kind-hearted guy, he’ll let detainee sit down, but detainee will stand again if he falls asleep.
- 0440: SGT R makes detainee stand again to avoid sleep.
- 0445: SGT A explains how detainee is not mentally sick, he simply feels guilty.
- 0457: SGT R allows detainee to sit down.
- 0505: SGT A tells detainee that no one feels sorry for him; he has brought this on himself. Detainee takes two sips of water. Corpsman checks vitals. Guards take detainee on walk to wake him up. Detainee has not spoken a word.
- 0515: Detainee is returned to chair. SGT A gives Arabic greeting detainee returns it. Detainee says he’s mentally sick. SGT A explains to everyone in room how detainee is using Al-Qaida handbook. Corpsman rechecks vitals.
- 0545: Detainee is stood up for 2 minutes to avoid sleep.
- 0550: SGT R makes detainee stand up to avoid sleep for two minutes.
- 0555: SGT R makes detainee stand up to avoid sleep.
- 0620: SGT A allows detainee to sit down. SGT R explains the difference between his will and God’s will. Detainee asks to pray. SGT A says, “You can pray after you drink water” Detainee says he is fasting. SGT A doesn’t allow prayer.
- 0630: Detainee begins to chant. SGT R says, “If you continue to chant, I’ll turn on the music” Detainee stops chanting.
- 0645: interrogators take a break. Corpsman states we need to elevate left hand to alleviate swelling. Hand is cuffed above hand with a soft strap. No tension is on

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- the arm. Detainee states he doesn't want his hand tied up. "I will take responsibility for my hand" SGT A states "I'm glad you are taking responsibility for your hand. Not drinking caused the swelling."
- 0700: SGT A covers circumstantial evidence theme.
- 0730: SGT R covers detainee's personal failures.
- 0745: Doctor gives detainee checkup -- vitals are good -- shunt is cleaned -- swelling in hand has gone down.
- 0800: SGT A covers "What we know" theme.
- 0820: SGT R covers "Failures" with more emphasis.
- 0850: SGT A allows detainee to sleep for 30 minutes. Detainee has spoken very little through the session and keeps falling asleep. The 30 minutes may help him engage a little more. After a brief discussion, interrogators decided to let detainee sleep until 1000 hoping to improve participation.
- 1005: SGT R wakes up detainee. Detainee goes to bathroom and is searched.
- 1010: SGT A gives "Futility" approach.
- 1045: SGT R runs a harsh pride & ego down approach. ENS C (as rehearsed earlier) comes in and asks SGT R what he is doing. ENS C says "Don't talk to him like that, he's a human being." SGT R says "Human beings don't kill 3000 people" and storms out.
- 1100: Second shift interrogation team enters booth -- ENS C (lead) and IS1 E (control). Lead begins speaking to detainee but the detainee looks down and away.
- 1130: Detainee continues the silent conduct. Lead leaves and control instructs detainee to stand for ten minutes to stretch and wake up.
- 1150: Lead re-enters but subject continues not to engage in conversation. Lead runs "Circumstantial Evidence" theme. Medical checks detainee's circulation.
- 1245: Detainee offered food and water. Detainee refuses. Team ate outside of detainee's presence.
- 1330: Control enters and offers water. Detainee says he is fasting due to Ramadan. Detainee requested to pray and was told he could only pray if he drinks water. Detainee continues to refuse water but exchanges in dialogue with control. Detainee was allowed 10 minutes to pray. Medical removes shunt from arm.
- 1400: Lead continues to try to engage detainee in conversation. Detainee unresponsive.
- 1600: Detainee laid down with feet elevated due to swelling of feet. Detainee slept for 45 minutes.
- 1720: Detainee told it is time for prayer but he must drink water first. Detainee took one sip but was told he must drink it all. Detainee refused to drink water.
- 1800: SGT B began interrogation. Detainee refused to speak. Muslims in America theme was introduced.
- 1805: Levels of guilt was introduced.
- 1810: Detainee refused food and water
- 1835: SGT M takes over the interrogation. P&E down was employed (ie You look like hell. Do you want to see me everyday and pray on the floor where you urinated?)
- 1845: Manchester Document/Futility- The Al-Qaida training manual was written by somebody who never went through an interrogation.

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- 1850: Why doesn't Usama bin Laden use his children, or why does he not participate in suicide missions? Al-Qaida is falling apart theme/futility. SGT M reviewed with detainee the slips that he made.
- 1905: Manchester Document theme/futility
- 1930: P&E down
- 1940: SGT B takes over interrogation
- 2010: Detainee drinks a bottle of water and is allowed to pray. Comparison is made between idol worship and swearing Bay'a to Usama bin Laden.
- 2100: Detainee uses the latrine, walks around outside, and does knee bends to get the blood circulating. Medical check. Detainee checked out medically
- 2110: Muslims in America theme
- 2200: SGT M takes over interrogation
- 2230: Manchester Document theme/futility - Did you see how quickly the United States took over Afghanistan and how quickly the Jihadist fled the country or surrendered.
- 2235: Detainee became very uncomfortable with SGT M's hand on his shoulder and tried to move it. Detainee seemed very disgusted at SGT M
- 2300: Detainee proclaims his innocence and requested that SGT M stop talking about Islam. (ie Usama bin Laden raped Islam. UBL hijacked Islam) Detainee stated, "If you interrogate me in the right way and the right position... you might find some answers.
- 2308: Detainee claimed that the interrogations are based on malice, hate, and jealousy. He said, "The treatment is wild and animalistic. Everybody has limits. Once those limits are crossed, what is somebody suppose to do?"
- 2310: Detainee said, "If I told the truth, everybody would get mad. If you interrogated me correctly... maybe if you rested and I rested... One interrogator after another... God and his angels see what is happening."
- 2315: Detainee was on the verge of breaking
- 2339: Detainee shut down and medical personnel check detainee. Detainee used the restroom
- 2400: Interrogation ended. Medical check. Detainee was walked around the room for five minutes before going to bed to get his blood circulating. Detainee's feet were elevated to reduce swelling in his feet.

27 November 2002

- 0400: SGT R (control) wakes detainee. Detainee goes to bathroom. MPs walk detainee around to wake him up and get fluids from IV to move. His feet have swollen due to excess fluid. SGT A (lead) begins Manchester Document.
- 0415: Detainee asked to pray at sunrise. Lead told him that he must drink _ bottle of water. Detainee held his hands up and readily accepted the water.
- 0510: Lead started playing 9-11 video. Detainee asked to go to bathroom half way through the video. Lead told him he would have to wait because she thinks he just asks for bathroom breaks just to get a mental break. Detainee did not ask to go to bathroom again.

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- 0610: Video over. Detainee prayed and taken to bathroom. Detainee stated he was constipated. Corpsman states detainee is impacted and needs to drink three bottles of water or the detainee will be given an enema.
- 0640: Control explains the enema procedure. Control begins circumstantial evidence theme with "you're a failure approach". Detainee's body language indicated he was becoming angry. Control nicknames detainee "Mo".
- 0800: Doctor checks vitals - O.K. Lead starts Saudi Government theme and Al Qaida falling apart and talking theme. Lead covers circumstantial evidence theme in soft but stern voice. Detainee appears to be listening to lead.
- 0905: Detainee goes to bathroom and is walked around to stay awake.
- 0925: Lead starts "failure" approach with Al Qaida falling apart theme.
- 1000: Control puts detainee in swivel chair at MAJ L's suggestion to keep him awake and stop him from fixing his eyes on one spot in booth. Detainee struggled with MP when MP moved chair. Control used "onion" analogy to explain how detainee's control over his life is being stripped away. Control gives detainee three facts: we are hunting down Al Qaida every day, we will not stop until they are captured or killed, we control every aspect of your life. Detainee did not speak but became very angry with control.
- 1100: Detainee awakened and taken to the restroom.
- 1200: Interrogation team entered booth. ENS C (lead), IS1 E (control) and a female DOD linguist. Lead made polite conversation but detainee did not engage. Detainee asked for prayer. Was told it was not time yet. Detainee was offered water but refused. Detainee said he was fasting.
- 1225: Team brought in a home cooked Arab meal and offered to detainee. Detainee declined to eat and team ate in front of him.
- 1245: Detainee asked for prayer. He was told he would have to drink water. Detainee took a small drink and was told he would have to take the whole bottle. He finished the bottle and was allowed to pray.
- 1315: Detainee taken to bathroom. He stated that he made a small bowel movement.
- 1340: Detainee asked to eat and was offered the homemade meal. Control entered room and displayed agitation that detainee was now eating (a rehearsed event).
- 1400: Lead and detainee engaged in small talk about prayer.
- 1415: Medical visited detainee regarding constipation. Detainee was offered a suppository rub but he refused, saying he wanted an oral stool softener.
- 1440: Detainee asked to use the bathroom and was taken.
- 1500: Lead began speaking with detainee about prayer and Islam.
- 1600: Detainee complained of pain in head, and was offered a nap.
- 1715: Detainee was taken to bathroom.
- 1725: Interrogators offered to let detainee pray.
- 1800: SGT B began interrogation by talking about the numerous slip-ups that detainee has made since returning to Camp X-Ray.
- 1845: Detainee requested water and drank _ bottle
- 1900: Detainee used latrine and exercised.
- 1915: Interrogation team discussed the irony of Usama bin Laden choosing the name Al-Qaida (The Base) for his organization. Interrogation team took the position that God and the Koran should be the base and the foundation in everybody's life.

9-11

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- 2000: SGT M took over interrogation. Detainee became very agitated and yelled at SGT M for about five minutes. Detainee was restrained. SGT M continually stated that UBL's mission was unrighteous and misguided and continually asked detainee who he worked for in Al-Qaida.
- 2030: Detainee drank water and went to the latrine.
- 2110: 9/11 Video was played for detainee. He became very agitated and violent. He tried to kick the DVD player and assault SGT M. MP had to restrain detainee. SGT M agitated detainee by grasping his shoulder and asking him the following two questions:
- Who did you work for in Al-Qaida?
 - What was Al-Qaida doing in America?
- 2130: Detainee was sent to the restroom, but tried to resist.
- 2140: Detainee refused stool softener medication.
- 2145: SGT M initiated the Al-Qaida Falling Apart theme.
- 2200: SGT B continued with Al-Qaida Falling Apart theme and introduced detainee to the victims of 9/11. At this point, SGT B was very firm with detainee and took the moral high ground. SGT B expressed his disgust for detainee and accused detainee of being "unclean" because of his malicious intentions and desires to kill innocent men, women, and children. Detainee took great offense to being accused of being unclean and accused SGT B of not knowing what a harsh word he used.
- 2245: Detainee went to the latrine and exercised
- 2300: Detainee took the stool softener medication
- 2315: SGT M took over the interrogation.
- 2320: Detainee requested that SGT M stop saying that the Al-Qaida raped the Koran. He also said, "God is not Al-Qaida and the Koran cannot be raped."
- 2325: SGT M read several passages out of the Koran that condemned Al-Qaida.
- 2342: Detainee spit on SGT M after SGT M said, "This was the reason (referring to the attacks of September 11) of your miserable existence; to go to the United States and kill innocent people." Detainee also accused SGT M of working with the Jinn.
- 2350: Detainee proclaimed his innocence
- 2400: Medical personnel check detainee's vital signs. Detainee went to sleep.

28 November 2002

- 0400: SGT R (control) woke detainee up. Detainee drank _ bottle of water, goes to bathroom and walks. Corpsman checks vitals. Detainee's feet appear more swollen than yesterday. Detainee refused aspirin (offered to help reduce swelling). SGT A (lead) asks detainee about the kicking and spitting incident the night before. Lead explains how detainee has no control.
- 0415: Lead begins Al Qaida falling apart theme, goes into pride and ego down. Detainee was repeatedly shown picture of Bin Al Shibh and asked why Bin Al Shibh's life was viewed as being more valuable than his. Detainee told that Bin Al Shibh was viewed as a future leader. Lead wondered out loud why Bin Al Shibh is better than detainee, if Saudis are supposed to be better than Yemenis.

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- Detainee was told he should show Bin Al Shibh respect because he is better than detainee.
- 0530: Lead began asking about detainee's family and asking what happened in his household that produced a terrorist. Lead also talked about pictures of 9-11 victims on the wall, focusing on children. Detainee still won't look at lead. Detainee was told that if God keeps track of your sins, he would have millions so he should not be concerned about something as small as looking at a woman.
- 0615: Detainee told that he would be going to the bathroom. He said he didn't have to go, but was told that he would go because we wanted him to.
- 0630: When control entered booth, detainee stated in English "Excuse me sergeant, I want to pray." Control said "Have you earned prayer? I know you have a lot to ask forgiveness for, but I already told you that you have to earn it." Detainee says "Please, I want to pray here" (pointing to floor next to his chair). Control responds no.
- 0635: Detainee placed in swivel chair. As control talked about victims' pictures on wall, MPs rolled detainee to each picture. Particular attention was paid to the children. Control asked "Are these the faces of evil?" Detainee struggled with MPs during his stay in swivel chair. Detainee gets explanation of use of enema - seems embarrassed.
- 0700: Control gives Arabic lesson to detainee. Control writes the Arabic words for "liar", "coward", and "failure" on the wall. Control asks detainee "are you a liar? Are you a failure? Are you a coward? Yes you are." Detainee seemed surprised at control's knowledge of Arabic. Control did this in response to detainee's earlier use of english. Detainee said nothing during this session but showed apparent signs of anger toward the theme.
- 0740: Control takes break. Medical shows up and checks vitals. Detainee takes walk. Control asks in Arabic "how are you Mohammed?" Detainee responds in arabic "not bad".
- 0800: Lead begins session, returning to Al Qaida falling apart. Asks detainee why Bin Al Shibh is better than him.
- 1041: After revisiting words written on the wall by control, detainee said (paraphrased) "You are using those words against me and they are hurting me. There's no need to say those things to me. No man would accept those words."
- 1125: Detainee awakened.
- 1150: Interrogation team entered the booth. ENS C (lead), IS1 E (control), and a female DOD linguist. Lead made small talk about family. Detainee non-responsive.
- 1205: Took pictures of 9-11 victims down.
- 1220: Offered water for prayer. At first detainee rejected but then accepted.
- 1240: Bathroom break.
- 1300: Subject was given cheeseburger and MRE. He had some worry if the burger was O.K. for him to eat, he finally decided it was.
- 1330: Detainee spoke with lead for a period of time but then began whining so lead left.
- 1400: Taken to bathroom and walked 10 minutes.
- 1430: Control entered room and started 9-11 theme. Detainee professed his innocence. Theme was switched to circumstantial evidence.

9-13

SECRET ORCON

- 1500: Detainee asked for bathroom break and was refused as he was using it as a ploy to interrupt interrogation.
- 1515: Detainee taken to bathroom and walked 10 minutes.
- 1540: Control re-entered, continued circumstantial evidence, then switched to 9-11.
- 1645: Detainee requested prayer. He was told it was not time.
- 1700: Detainee was told it was time for prayer and was offered water. Detainee refused the water. Detainee was then taken to the bathroom and walked 10 minutes. He then said he wanted prayer and would drink. He was told that he could have the water, however the time for prayer had passed.
- 1750: Detainee exercised and refused food and water. SGT B began interrogation
- 1840: Detainee refused food and water
- 1900: Detainee went to the latrine
- 1945: SGT M took over interrogation
- 2000: Detainee went to the latrine and drank two bottles of water to avoid get an enema
- 2020: Detainee exercised by doing knee bends. SGT M implemented SPC P's "Mohammad the Slave" theme. Detainee stated that he is God's slave. Circumstantial evidence theme.
- 2100: Detainee exercised and used the latrine
- 2115: Interrogation team left detainee to watch 9/11 video
- 2200: SGT M taped pictures of the 9/11 victims on detainee's body
- 2305: Detainee proclaimed his innocence and said he would pass a polygraph test.
- 2230: Detainee went to the latrine
- 2340: Detainee exercised
- 2350: Medical check
- 2400: Detainee drank one bottle of water, used the latrine, and went to bed.

29 November 2002

- 0400: New linguist assigned to team. SGT R (control) wakes detainee. Corpsman advises detainee he need to drink three bottles of water of get an enema. After some resistance, detainee drinks one and a half bottles of water. Detainee walks for 15 minutes. SGT A (lead) begins approach.
- 0415: Run Manchester document theme and muslims in America.
- 0600: Detainee does not ask for anything, but waits for control to enter room and asks to pray. Drinks one half bottle of water.
- 0610: Detainee taken to bathroom and exercised.
- 0645: Control begins Arabic lesson. Explains detainee is a student and control is teacher. Detainee drinks one bottle of water.
- 0730: Doctor checks detainee. Tells detainee that if detainee doesn't have a bowel movement, detainee will get an enema. Doctor says detainee's feet look better.
- 0745: Control continues student/teacher approach.
- 0800: Control asks detainee, "are you a liar?" Detainee replies no. Control, "Then why did you tell me you've never been to the U.S.? Here's the proof." Controls shows circumstantial evidence of visit. Control tells detainee that he will show detainee how to embrace the truth. Detainee did not say anything else but paid

9-14

SECRET ORCON

- close attention to control. Control gave commands at random times to stand and sit. Detainee complied.
- 0915: Detainee taken to bathroom. Lead begins pride and ego down approach.
- 1000: Detainee taken to bathroom. Base communication workers arrive to install command post phone lines, so detainee could not be walked.
- 1010: Lead resumes approach. Detainee began to fall asleep and was told to stand. When guard tried to teach detainee where to stand, detainee pushed guard. Other guards entered room and regained control. Detainee tried to complain, but lead told detainee that he might as well be speaking an alien language because no one wants to hear what he says.
- 1040: Lead laughed at detainee and this seemed to infuriate the detainee. Detainee told he must realize he has no control.
- 1100: Detainee used the latrine
- 1125: 2nd Shift entered the booth. Detainee would not engage in conversation but would make eye contact.
- 1200: Detainee prayed, walked, and used latrine
- 1220: Detainee refused lunch and stated that he was on a food and water strike
- 1320: Detainee used latrine and checked by medical
- 1440: Detainee exercised and used latrine. Detainee asked for a nap and was refused.
- 1500: Interrogators entered the room
- 1550: Detainee was given the chance to use latrine
- 1648: Detainee was offered prayer time if he would drink water. Detainee refused water
- 1650: Detainee used latrine and exercised
- 1700: Detainee returned to booth
- 1725: Detainee refused MRE.
- 1755: Interrogation session ended
- 1800: Shift 3 began interrogation
- 1920: Detainee refused food
- 1935: Detainee used latrine
- 1940: Detainee exercised
- 2100: Detainee used latrine
- 2105: Detainee refused food and water
- 2145: Detainee exercised
- 2400: Detainee refused water and was checked by medical personnel. Medical personnel indicated that detainee is getting very close to being dehydrated. Detainee complained of being dizzy and having a headache. Detainee went to bed.

30 November 2002

- 0402: First shift begins. Detainee awakened and sent to bathroom. Corpsman checked detainees vitals and determined that if the detainee didn't drink any water he would need an IV.
- 0415: Detainee refused water.
- 0420: Interrogation began with lead running pride and ego down. Enforced control of detainee approach.
- 0530: Detainee refuses water, IV is started. Detainee offers no resistance.

9-15

SECRET ORCON

- 0540: Detainee taken to bathroom. While in bathroom, "My shame causes me to look at the floor" was written on the floor in the interrogation booth.
- 0600: Detainee given another IV bag. Lead suggested the detainee elected this procedure because he wants people to feel sorry for him. Detainee stated that he didn't choose IV. Lead stated that he did because he wasn't drinking water.
- 0715: Detainee taken to bathroom.
- 0740: Interrogator began showing pictures of places in Saudi Arabia informing the detainee that he will never see these places again. Detainee gave indications he was near tears, then composed himself.
- 0830: Interrogator began 9-11 theme. Talked about innocent children victims. Detainee stated that he didn't believe the person who wrote the information about the victims. Detainee made to wear sign that stated "I am going to hell because I am full of hate"
- 0915: Detainee taken to bathroom. Detainee received another IV bag. Shown 9-11 video. Detainee protested about the music on the video.
- 1000: Detainee taken to bathroom and walked. Detainee given another IV bag.
- 1030: Interrogator continued 9-11 theme with volume turned up high.
- 1105: First shift ended.
- 1115: Second shift began.
- 1140: Detainee taken to bathroom and exercised, allowed to wash hands and pray.
- 1220: Detainee offered food and water. Detainee rejected the MRE and waited until the lead had started eating to say that he was now ready to eat. The lead did not give the detainee the MRE because he had rejected the food when it was offered and would not allow the detainee to manipulate the situation. Detainee then told lead not to bring food anymore.
- 1330: Detainee given 1-1/2 hour nap
- 1500: Detainee woken and taken to bathroom. Detainee was shown video of UBL laughing about the hijackers not knowing their mission. Detainee recounted cover story about buying used cars in the U.S. again.
- 1635: Break. Detainee continued cover story about buying used cars in the U.S. but was caught denying information he had just spoken about knowing A. T.
- 1750: Detainee taken to bathroom and exercised.
- 1925: Detainee used the latrine. Third shift started by asserting control over the detainee by making him exercise.
- 2020: Detainee refused food and water
- 2035: Detainee refused water
- 2040: Medical evaluation determined an enema was necessary.
- 2045: Detainee received an enema and had his first bowel movement in many days
- 2100: Detainee exercised.
- 2200: Detainee ate one complete MRE and drank 1/3 bottle of water
- 2300: Detainee used latrine
- 2345: 3rd Shift ended

01 December 2002

9-16

SECRET ORCON

- 0400: Detainee awakened and sent to bathroom. Corpsman checked detainee's feet for swelling and wraps feet to avoid irritation from cuffs. Detainee exercised for 10 minutes.
- 0420: Detainee eats MRE and drinks water.
- 0445: Interrogator begins circumstantial evidence theme. Detainee made consistent eye contact, but did not speak.
- 0600: Detainee taken to bathroom and exercised. Detainee asked guards to pray when control left the room. Control told detainee that he could not ask anyone other than the interrogator for anything.
- 0630: Interrogator continues circumstantial evidence theme.
- 0745: Detainee stated that he is on strike from food and water again. Corpsman administers IV. Detainee's head is restrained by MP to prevent detainee from biting the IV.
- 0900: Detainee asked to have IV removed – denied. Detainee given one hour nap.
- 1000: Detainee taken to bathroom.
- 1101: Second shift began. Detainee taken to bathroom and exercised.
- 1115: Interrogation began. Detainee mostly unresponsive during discussion of 9-11 victims. Detainee asked for prayer and was denied since it wasn't time.
- 1200: Detainee taken to bathroom and exercised. Offered water and prayer time. Detainee drank one full bottle and prayed.
- 1240: Detainee ate one MRE and drank one half bottle of water.
- 1300: Detainee taken to bathroom and exercised. Doctor checked vitals – O.K.
- 1400: Detainee taken to bathroom and exercised.
- 1450: Detainee taken to bathroom and exercised.
- 1615: Detainee taken to bathroom and walked for 10 minutes.
- 1715: Detainee taken to bathroom and walked for 10 minutes. Detainee drank one bottle of water and prayed.
- 1800: Interrogation began. Detainee offered food and water, detainee refused. Detainee stated that his treatment was making him forget things. Detainee was questioned about his cover story and continued to deny knowing A. T.
- 1930: Detainee taken to latrine and exercised. Control started circumstantial evidence theme centering on the 9-11 hijackers. Detainee stated that if he had been with that group on that day, he would have been the pilot.
- 2115: Detainee taken to latrine and exercised. Control started talking about the Koran and the detainee became angry saying that the interrogator didn't know anything about the Koran.
- 2230: Detainee taken to latrine and exercised. Control compared the Manchester document to the teachings of the Koran. Detainee remained quiet.
- 2400: Third shift ended.

02 December 2002

- 0400: First shift begins. Detainee taken to bathroom and exercised.
- 0425: Lead began session. Detainee complained that guards were not nice.
- 0530: Detainee offered water – refused. Lead continued with circumstantial evidence theme.

9-17

SECRET ORCON

- 0630: Detainee taken to bathroom and exercised. Control started session with Arabic lesson and explained how Saudis go to Bahrain for alcohol and prostitutes. Continues we are in control approach.
- 0800: Detainee taken to bathroom and offered water.
- 0900: Detainee woken up and offered MRE - refused.
- 0910: Lead cleaned detainee's face and combed hair and beard. Showed 9-11 video.
- 1000: Lead and control explained that detainee has no control.
- 1030: Control began "birthday party" and placed party hat on detainee. Detainee offered birthday cake - refused. Interrogators and guards sing "God bless America". Detainee became very angry.
- 1100: Second shift began. Detainee taken to bathroom and exercised for ten minutes.
- 1115: Control began talking to detainee to calm him.
- 1145: Lead enter booth and began talking to detainee. Detainee unresponsive.
- 1215: Detainee offered water and prayer. Detainee refused. Detainee taken to bathroom and exercised for ten minutes.
- 1230: Detainee offered food and declined, then reconsidered and asked to eat. Detainee ate one MRE after the interrogators decided to allow him to eat if he asked nicely.
- 1330: Detainee taken to bathroom and exercised ten minutes. Detainee unresponsive.
- 1500: Detainee taken to bathroom and exercised ten minutes. Lead runs approach about holes in cover story.
- 1600: Detainee taken to bathroom and exercised ten minutes. Lead continues approach and detainee tries to negotiate by saying that he will talk if he is returned to his brothers in Cuba.
- 1715: Detainee drank one bottle of water and prayed.
- 1730: Detainee taken to bathroom and exercised.
- 1800: Third Shift began interrogation with Al-Qaida Falling Apart theme. Detainee ate one Hostess Cupcake with interrogation team.
- 1845: SGT M began took over interrogation
- 1850: Detainee exercised
- 1940: Detainee ate one full MRE and drank _ bottle of water
- 1950: SGT B employed Circumstantial Evidence theme.
- 2010: Detainee exercised
- 2015: SGT M took over interrogation
- 2035: Interrogation team took a break
- 2100: Detainee exercised
- 2115: Detainee finished exercising
- 2120: SGT B employed Manchester Document, focusing on the beating and killing of hostages.
- 2135: SGT M took over interrogation and employed Futility and Saudi Government Left him themes
- 2200: Detainee began to tell his cover story again after SGT M questioned asked him about his future and what it would be like living in jail for the rest of his life. Detainee had been silent all night; therefore he was allowed to retell certain parts of his story again. Detainee provided more general information about alleged contacts in Saudi Arabia. Detainee was evasive about his family and would only request that Saudi Government ministries be contacted to verify his story.

9-18

SECRET ORCON

Detainee appeared nervous when asked if he had connections to Saudi royal family.

- 2300: SGT B questioned detainee extensively about his business plan. It became readily apparent that he knows very little about business and international trade.
- 2345: SGT M questioned detainee about his family. Detainee was very evasive and refused to provide anything other than his family's PO box. BSCT observation indicated that detainee was lying during entire exchange.
- 000: Detainee used latrine and went to bed.

03 December 2002

- 0400: Lead woke detainee up and sent him to the bathroom. Detainee was exercised.
- 0425: Lead began session with circumstantial evidence theme and "you are a failure" approach.
- 0615: Detainee drank water and was sent to the bathroom and exercised.
- 0630: Control began session on circumstantial evidence theme with "you have no control" approach. Detainee was attentive but unresponsive.
- 0800: Detainee taken to bathroom. Refused meal stating that he is fasting.
- 0830: Lead and control started "tell the truth" approach using circumstantial evidence theme.
- 0930: Interrogators gave class to new MPs in view of detainee stating the resistance training, clouded thinking, series of mistakes, and attempts to gain control that the detainee has exhibited. Interrogators ran puppet show satirizing the detainee's involvement with Al Qaida.
- 1040: Detainee was given a nap.
- 1100: Detainee awakened, taken to the bathroom, and exercised 10 minutes.
- 1120: 2nd shift interrogation team entered booth, ENS C, (Lead), IS1 E (Control) and a female DOD linguist. Discussion was aimed at calming detainee down as he was upset. Detainee was mostly unresponsive.
- 1210: Detainee given head break and 10 minutes exercise.
- 1225: Detainee was offered water and refused. He was refused "Salat."
- 1235: Detainee offered lunch and refused.
- 1330: Detainee given head break and 10 minute exercise.
- 1440: Detainee given head break and 10 minute exercise.
- 1550: Detainee given head break and 10 minute exercise.
- 1600: Detainee placed down for nap.
- 1900: Detainee asked for bathroom break, granted.
- 2000: Phase 1B begins. Detainee awakened and told he is being taken back to Cuba, hooded, and loaded into ambulance. Ambulance drove a few feet and detainee was taken out and into a different interrogation booth. ENS S lead interrogator with a female DOD linguist. ENS S was in civilian clothes and ran an approach to plant seeds in the detainee's mind on how to end the interrogations. The approach centered around how Al Qaida had destroyed Islam and the detainee's life had been spared because it was now his jihad to tell the world about how 9-11 was wrong, and help rebuild Islam.

9-19

JOHN F. LESO, Ph.D.

Please send correspondence to:
PRIVACY REDACTION

December 2, 2008

CONFIDENTIAL

Ms. Patricia Dixon
Office of Ethics
American Psychological Association
750 First Street, NE
Washington, DC 20002-4242

JAN 2 2008

Dear Ms. Dixon:

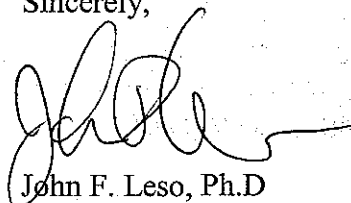
This responds to your letter of July 31, 2008, requesting additional information relating to the ethics complaint filed by Alice Lowe Shaw.

As I indicated in my prior response, I am precluded by law from commenting upon any matters relating to the interrogation of detainees. As a result of that limitation, I am not able to provide any additional information concerning the statement from the June 2008 US Senate Armed Services Committee hearing.

I would note that within the documents that you furnished, there is only one comment that is attributed to me. That statement on page 2 indicates that I spoke out against the possible consideration of the use of "Harsh techniques." This is consistent with the findings expressed by The Army Surgeon General, Lieutenant General Eric Schoemaker, in his letter to you of March 25, 2008. He stated that the records of my military duties had been reviewed by two senior Army psychologists who "found no evidence that [I] had behaved in an unethical manner or harmed anyone in any way. In fact, the information from those who served with him suggests that Dr. Leso worked diligently to protect the safety of the detainees."

I regret that I am unable to provide you the requested information. I believe that an objective review of the available information clearly establishes that I did not violate the APA Ethics Code and that the allegations made by Dr. Shaw do not provide a basis for the APA Ethics Committee to open a formal ethics case review.

Sincerely,



John F. Leso, Ph.D

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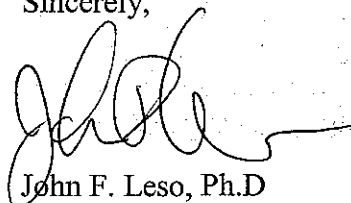
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Sincerely,



John F. Leso, Ph.D

Summary of Selected Counter-Terrorism Initiatives By the National Academies

December 18, 2001

S&T Agenda for Countering Terrorism

This project is aimed at helping the federal government, and more specifically the Director of the Office of Science and Technology Policy, Dr. Jack Marburger, to use effectively the nation's and the world's scientific and technical community in a timely response to the threat of catastrophic terrorism. A committee of distinguished scientists and engineers with supporting panels will help to develop an integrated science and technology program plan and research strategy. Phase 1 of the project will in six months: (1) prepare a carefully delineated typology or taxonomy for the application of science and technology for combating terrorism, (2) prepare research agendas in seven key areas (biological; chemical; nuclear and radiological; information technology, computers, and telecommunications; transportation; energy facilities, buildings, and fixed infrastructure; and behavioral, social and institutional issues), and (3) examine a series of cross-cutting issues. Phase 2 will review key government research programs and provide recommendations for building improved interagency capabilities and coordination. A final report will be produced by September 11, 2002. (\$2 million - \$1 million from the Academies and \$1 million expected from federal agencies and foundations)

Near-term Assistance for the U.S. Government

On urgent topics where the government needs immediate assistance, the Academies are inviting scientific experts to meet with government representatives in one-day meetings. Although no written reports are produced and no formal Academy advice is provided, the dialogue is very beneficial to federal agencies, including the inter-agency Technical Support Working Group (TSWG) on counter-terrorism. Recent examples include a meeting for the U.S. Postal Service on sanitizing the mail (11/14/01); a meeting for the Dept. of Justice on how to open the anthrax-infected letter to Senator Leahy (12/7/01); a meeting on human factors for the FAA's sky marshall program (12/5-6); a meeting on biological and chemical *forensics* for TSWG (12/11); and a meeting on biological and chemical *decontamination* for TSWG (12/14). (approximately \$30 thousand per meeting; treated as project initiation activities)

Combating Terrorism: Prioritizing Vulnerabilities and Developing Mitigation Strategies

The National Academy of Engineering will undertake a 12-month project to identify, assess, and prioritize vulnerabilities to the nation's vital infrastructures posed by global terrorism, and outline strategies (technologies, policies) to mitigate priority vulnerabilities in a manner consistent with a free, open, and prosperous society. Using various fact-finding, forecasting, consensus-building, and risk analysis techniques, the project committee will seek to integrate expert knowledge of the nature of modern terrorism (motives, capabilities, sociology, psychology), terrorist weapons and delivery systems, and the vulnerabilities of vital infrastructures to measure and rank order the myriad terrorist threats to the nation. (supported by NAE)

International Collaborative Activities with Foreign Counterparts to Reduce Near-Term Threats and Long-term Root Causes of Terrorism

Priority activities include:

- Cooperation on Preventing Terrorists from Obtaining Nuclear Materials in Russia, which will include two projects. The first will be a joint effort with the Russian Academy of Sciences to produce a "white paper" assessing the steps that can be taken immediately by the two governments to reduce the risks that nuclear weapons or materials could fall into the hands of terrorists. Working together, the two academies will also identify an agenda for longer-term U.S.-Russian cooperation, including continuing inter-academy attention to problems that may arise and how they might be overcome. The second project will examine the problems that will be faced by economically stressed Russian institutions in maintaining and operating recently installed physical security and accounting systems for protection of plutonium and highly enriched uranium within the framework of cooperative projects when financial support is no longer available from the United States and will assess approaches to ensuring the long-term sustainability of the systems. (\$150,000 from the MacArthur Foundation and further support expected from the Nuclear Threat Initiative foundation);
- Continuing of the U.S.-Russian Inter Academy Project on conflicts in multiethnic societies (support sought from foundations and partial support up to \$200,000 from NRC funds if needed);
- InterAcademy meetings on both a bilateral basis with scientists Pakistan, Iran, and other Moslem nations and on a multi-lateral basis through the InterAcademy Panel (support sought from foundations and partial support of approximately \$100,000 from NRC funds if needed);
- Planning meeting for a study on building the capability of foreign affairs and development agencies to help in reducing the risk of terrorism, a study that would complement NRC report on "The Pervasive Role of Science, Technology, and Health in Foreign Policy: Imperatives for the State Department" (\$35,000 in program initiation funds);
- Continuation of the joint US-Russian InterAcademy Project on high-impact terrorism (supported by the Carnegie Foundation).
- Cooperative Research in Russia on Dangerous Pathogens. This project provides for two two-week familiarization visits each year by three or four American investigators (including young investigators) to elected Russian research institutes that had formerly participated in the Soviet biological warfare program. Each year these visits are followed by individually-tailored visits of one to three months to the institutes by three or four of the investigators who are interested in pursuing joint civilian research activities in collaboration with Russian colleagues. These projects provide a mechanism for gaining regular access to the facilities and specialists and thereby promote transparency. They also provide opportunities for Russian scientists who might otherwise look to countries with hostile intentions for support. At the same

time, cooperative research helps develop technologies that will be useful in public health, agriculture, and counter-terrorism activities in Russia and the United States.

Preliminary Evaluation of US Industrial Vulnerabilities and Near-term Protective Measures

Evaluations by the appropriate NRC boards in cooperation with volunteers to identify vulnerabilities in key industries, e.g. chemical and energy industries, and short and intermediate term S&T measures that might lessen this vulnerability or reduce the consequences of strikes to key infrastructure. The Board on Chemical Sciences and Technology met with chemical industry representatives on this topic on 12/9/01 and with federal agencies on 12/10/01. Other boards will meet with relevant industries in the weeks ahead. (\$30,000 in project initiation funds)

An Assessment of Naval Forces' Defense capabilities Against Chemical and Biological Warfare Threats

At the request of the Chief of Naval Operations, the Naval Studies Board in conducting a study to: (1) examine existing and potential chemical and biological warfare threats to naval force operations in littoral regions and deep ocean regions of the world; (2) examine and project chemical and biological defense technologies, tactics, and procedures; (3) evaluate R&D and identify priorities for providing naval forces with needed capabilities; and (4) examine testing and evaluation procedures (in conjunction with training procedures) for ensuring adequate defensive capabilities. It is anticipated that a published report will be available by July 2002.

Improving Cybersecurity Research in the United States

A study by the Computer Science and Telecommunications Board will be conducted to determine the extent and nature of current federal research in cybersecurity and to identify areas of research that are not adequately supported. (\$129,000 from NRC funds and a matching amount expected from the National Science Foundation)

Information and Security: Enhancing Information Management and Data Mining Capabilities for Combating Terrorism while Protecting Civil Liberties

A planning meeting for a study is being organized by the Computer Science and Technology Board (CSTB). The study would consider research opportunities in data mining as well as ways to minimize the privacy and civil liberties implications of anticipated increased collection and integration of personally identifiable information. (\$40,000 in project initiation funds)

Issues Affecting Universities Arising out of Terrorism Events: Workshop on Implications for Research, Scientific Communication, and Foreign Students

A workshop is being held on December 13 and 14. Topics such as visa and foreign student tracking policies will be reviewed by representative of major research universities. Also discussed will be whether sufficient protections can be achieved to

avoid the diversion of biological agents from research facilities into terrorism. The implications of possible restrictions on biomedical research, scientific communication, and on graduate student participation will be discussed. (\$60,000 in project initiation funds)

Improving Research Standards and Practices to Prevent Misuse of Biotechnology Research

A study will review the current rules, regulations, and institutional arrangements and processes in the United States that provide oversight of research on dangerous biological pathogens, including within government laboratories, universities and other research institutions, and industry. The review would focus on how choices are made about which research is and is not appropriate, and how information about relevant ongoing research is collected and shared. It will consider, but not be limited to, the "biosafety" practices that govern the conduct of research and the handling and transport of materials. It will also assess the adequacy of current U.S. rules, regulations, and institutional arrangements and processes to prevent the destructive application of dangerous biological pathogens. It will recommend changes in these practices that could improve U.S. capacity to prevent the destructive application of dangerous biological pathogens while still enabling the conduct of legitimate research. (funded by the Sloan Foundation)

Communicating to Local Governments and Private Citizens about Preparedness for Terrorism Events

A meeting requested by Dr. Marburger will be held in January to plan how better to link federal and state governments on S&T policy, including for combating terrorism. Science representatives of each of the states will attend. (\$30,000 in program initiation funds)

Public Health Initiatives

The Institute of Medicine will conduct new activities as well as capitalizing on work currently on progress to develop and communicate anti-terrorism strategies based on public health principles. The goal is to provide guidance on specific issues of national, local and individual concern, within the framework of a comprehensive strategy to assure the health of the public in the 21st century. Priority (near term) activities include:

- A series of workshops under the Forum of Emerging Infections. The first was held on November 27/28 and addressed Biological Threats and Terrorism: Assessing Science and Response Capabilities. The second will focus on Antibiotic resistance and its implications for counter-terrorism responses.
- A comprehensive study of the safety and efficacy of anthrax vaccines will be released in February. Completion of this Department of Defense funded study was accelerated in response to the current need to make decisions regarding manufacture and use of anthrax vaccine.
- On November 5th, the IOM Council issued a Statement on Vaccine Development, assessing the country's capacity to develop, produce and store vaccines. The recommendations include creation of a National Vaccine Authority.

- The 1992 IOM report on Emerging Infectious Diseases is being updated and expanded. The committee will include an extensive discussion of issues related to bioterrorism. The report will be issued in early 2003.
- A committee report providing a vision for assuring public health in the 21st century will be issued in the spring of 2002. It will provide a framework for integrating investments and activities related to counter-terrorism into the overall public and private sector infrastructure to assure public health.

Agricultural Bioterrorism

The Board on Agriculture and Natural Resources is conducting a study to evaluate the ability of the U.S., to deter, prevent, detect, thwart, respond to and recover from an intentional biological attack against the nation's food and fiber supply. The report is expected in summer 2002. (funded by the USDA)

What Terrorists Value

The Division of Behavioral, Social Sciences, and Education will conduct a study on what high profile terrorists groups value (especially the groups that caused the attack on September 11) with the goal of understanding how better to deter and defeat them. (\$500,000 funded by DOD)

Assessment of Technologies Deployed to Improve Aviation Security

This study by the National Materials Advisory Board (NMAB) sponsored by the Federal Aviation Administration, is assessing the operational performance of passenger screening, explosives detection systems and hardened cargo containers in airports and compare that performance to their performance in laboratory testing, with a focus on ways to deploy these systems more effectively to improve aviation security. The Committee plans a second status report in early 2001 and a third and final report in the fall of 2002 that will examine a technology development strategy for aviation security.

Assessment of Practicality of Pulsed Fast Neutron Analysis for Aviation Security

This National Materials Advisory Board study, sponsored by the Federal Aviation Administration, is assessing the practicality of pulsed fast neutron analysis (PFNA) for detecting explosives and other contraband in cargo and passenger baggage in an airport. The capabilities of PFNA are compared with the capabilities of explosives-detection equipment currently available for deployment and with the expected future development of current equipment. The Committee plans publication of their findings early in 2002.

Advanced Energetic Materials and Manufacturing Technologies

This study by the Board on Manufacturing and Engineering Design is investigating and assessing the manufacturing technologies required to scale up and produce bulk quantities of advanced energetics and suggest opportunities and strategies for government investment. Although these new materials are more difficult to manufacture

when compared to standard explosives, they are equally difficult to detect using current systems. The study is sponsored by the Department of Defense.

Materials and Manufacturing Processes for Advanced Sensors

This study by the Board on Manufacturing and Engineering Design is examining potential technologies for detect-to-warn systems for biological agents. Their charge is to review the DTRA-specified requirements for these systems and identify those requirements that will especially drive the detection concepts and architectures - e.g., less than one minute detection times, continuous operations with attendant implications for consumables and their costs - and understand to what extent, if any, these, or related, parameters (e.g., detection sensitivities), may be relaxed. The committee is also considering examples of representative operational scenarios or architectures (to be provided by the sponsor), which will be invaluable in putting these system requirements and tradeoffs in context.

Current Additional Specific Board-Based Activities

Support for Transportation Security Research (TRB)

The Transportation Research Board administers two cooperative research programs, one for state departments of transportation and one for the public transportation industry. \$2 million allocated from the Transit Cooperative Research Program to provide flexible, on-going rapid response research on transportation issues related to emergency incident prevention, preparedness, response, and recovery, paying particular attention to potential terrorist threats. Consultants have been selected and work is expected to get underway in early 2002. The National Cooperative Highway Research Program is currently supporting the development of manuals for vulnerability assessments and emergency response planning and is expected to program significant funding next year for security related research.

Standing Technical Committee on Critical Infrastructure Protection (TRB)

TRB maintains approximately 200 standing technical committee that support information dissemination activities in transportation. The Committee on Critical Infrastructure Protection, which was established two years ago, facilitates the dissemination of state-of-the practice and state-of-the-art information on infrastructure security and protection and encourages research in this field. It sponsors TRB's website on security and has organized security sessions at TRB's Annual Meeting.

Survey on Vulnerability Assessment (TRB)

TRB is conducting, in cooperation with the American Association of State Highway and Transportation Officials, a survey of states to determine whether and to what extent they have addressed infrastructure planning and security in their planning efforts.

TRB Annual Meeting (TRB)

TRB's Annual Meeting is one of the largest gatherings of transportation professionals in the world. The January 2002 meeting will include over 30 security and recovery related

sessions. An overview session will involve the DOT modal administrators and the Deputy Secretary and cover a dozen topics, from port and waterway security issues to aviation safety.

Transportation Associations --Information Sharing (TRB)

TRB organized a meeting of a number of transportation associations to share information about the security issues they are confronting and the activities under way. The group will meet again in three months.

Redundancies in Transportation Systems (TRB)

A planning meeting will be held to examine multi-modal transportation infrastructure redundancy to enhance defense against terrorist disruption. (\$30,000 in program initiation funds).

Emergency Evacuation in Metropolitan Areas: Barriers and Opportunities (TRB)

A planning meeting will be held to discuss technical and institutional barriers to improved metropolitan-wide evacuation and emergency response. (\$28,000 in program initiation funds).

Vulnerability of the Electric Power Transmission and Distribution System to Terrorism (BEES)

A planning meeting will be held to discuss reducing the impact of terrorist attacks on the electric transmission and distribution system. (\$40,000 in program initiation funds).

Safety of Our Nation's Water Supplies (WSTB)

A series of activities will be held to discuss safety of the short term security and longer term research initiatives relevant to water supply safety from terrorist attacks. (\$14,000 in NRC funds).

Forum on How Natural Disaster Research Can Inform the Response to Terrorism (NDR)

The Natural Disasters Roundtable (NDR) will conduct a two-day workshop to develop thoughts on how responses to natural disasters might be applied to threats provided by terrorism. Topics to be considered could include engineering design, promoting public awareness and understanding, evacuation planning, recovery planning, utilization of technology to detect and monitor public health risks, public health system needs, and mental health consequences. (\$30,000 in NRC funds)

Interdisciplinary Vulnerabilities for Critical Infrastructure Protection (BICE)

A one-day workshop was held on October 31st to help develop methodologies to analyze interdependent vulnerabilities. The Board on Infrastructure and the Constructed Environment is developing a workshop series to address these problems.

Improving Cybersecurity Research in the United States (CSTB) (\$229K)

A study will be conducted to determine the extent and nature of current federal research in cybersecurity and to identify areas of research that are not adequately supported (\$129,000 from the Academies and a similar amount expected from the National Science Foundation)

Chemical Stockpile Activities (BAST)

The Board on Army Science and Technology has conducted a fast-track review of proposed process changes for the *expedited* disposal of the chemical weapons stockpile inventory. Letter reports are being provided to the Army within the month. (funded by the Army)

A second BAST activity is an examination of the state of the stockpile as delivered to disposal facilities and the effects of stockpile condition on processing, handling, monitoring and stakeholder reaction. (funded by the Army)

A third activity is an evaluation of process changes for alternative technology at the Aberdeen Bulk-Only Chemical Agent Disposal Facility. (funded by the Army)

Forum on Terrorism (Committee on Law and Justice) (DBASSE)

As part of the Academies' investment in 'root-cause' analysis of terrorism, the Forum will discuss relevant social science tools to summarize the knowledge base on terrorism. The objective would be to improve understanding of the current situation, giving rise to terrorism both in the United States and in the Muslim world. A series of workshops and commissioned papers will examine such topics as:

- Understanding International Terrorism with emphasis upon research from political science and sociology.
- A more specific contextual examination of terrorism in the Middle East
- Organizational analysis and terrorism
- A profile of terrorists
- Recent uses of profiling and their application to combating terrorism
- Money laundering
- Collective behavior of populations under the threat of danger

(\$30,000 in planning initiation funds)

General Education of the Media and Public on Terrorism Vulnerabilities and Responses

On 12/6/01, the Academies and the Foundation for American Communications (FACS) co-sponsored a Conference for News Executives ["Terror and Homeland Defense: Bringing the Stories Home"] at the Reserve Officers Association. Approximately 50 media representatives attended. Successive speakers provided the context for terrorism (Anthony Cordesman, Senior Fellow at CSIS), a framework for analysis and evaluation of threats and responses (Bill Wulf, NAE), assessment of the real risk of terrorism (Baruch Fischhoff, Carnegie-Mellon University), and Discussions of explicit threat modalities and responses (bio, nuclear, cyber, infrastructure).

Cybersecurity and Authentication Technologies (CSTB)

The computer Science and Telecommunications Board has issued a letter report synthesizing a decade of work on cybersecurity, focusing on issue identification and practical guidance. CSTB's Committee to Study Authentication Technologies and Their Implications for Privacy has undertaken to develop a brief, interim report addressing issues associated with the concept of national identification systems. The resulting pamphlet will be ready in the winter.

Chemistry and National Security (BCST)

The Board on Chemical Sciences and Technology is holding a workshop in January on Chemistry and national security."

Mathematics and Homeland Security (BMS)

The Board on Mathematical Sciences is holding a workshop in April on mathematical topics relevant for homeland security, including pattern recognition and data mining, epidemiological modeling, voice and image recognition.

Brandon, Susan

From: band [REDACTED]
Sent: Wednesday, December 19, 2001 9:53 PM
To: Brandon, Susan
Subject: Re: current planning

Dear Susan, Message received... looking forward to talking to you on Thursday, 12/20/2001. Did you brief Kurt about the Seligman meeting? Traditionally, the Bureau's part in conferences has been to provide selected guests airfare, accommodations at the Academy and food via our food service while at the Academy. I'm not clear on Ian's press agenda... one thing for sure is he can't talk on behalf of the Bureau or the other government agencies that may participate. Would he be representing himself, U. Penn, APA??? If he demonstrates any intentional or unintentional bias (IE. liberal or conservative agenda) he may inadvertently damage the objectivity and discretion sought by this type of gathering; and, cause last minute cancellations on the part of the intelligence folks?... I could be wrong but... Between you & me, I'd rather see APA's Science Directorate come out front (with the media) on this rather than Ian. Just food for thought. Speak with you soon. Best regards, steve

"Brandon, Susan" wrote:

> Dear Steve,
>
> After talking with you and Ian yesterday, it seems to me that our best move
> forward is to convene a good group of 15-20 people at the Academy sometime
> late January/early February (i.e., essentially as soon as we can get enough
> people together) and follow a format that you and I talked about, which is
> to invite targeted people and perhaps suggest a general topic, and then ask
> each person to create a 10-15 presentation of their own work around that
> topic. There might be four panels, with lots of coffee breaks and lunch
> time to encourage people to speak individually. We can work out these
> details; I like the idea of people around the table in two layers, where the
> members of the layers shift around a little or a lot. We might also
> include a dinner gathering but that would be somewhere in Washington.
>
> The goal of this meeting would be first to engage people from the FBI and
> CIA and wherever (this is your call; I assume that you might invite a number
> of people from these agencies equal to the number of academics that are
> there) in conversations that are informed by the data of social scientists
> (and perhaps historians). A second goal would be to see if this group, or
> some subset of it, would like to convene the kind of policy/press more high
> profile meeting that Ian originally was asking for. A third goal would be
> to let the press (and maybe, indirectly, policy people) know that this kind
> of interaction is happening. This would happen via the media capabilities
> of the Academy (perhaps opportunity for individual academicians to be
> interviewed before and/or after the meeting). A fourth goal would be to
> assess whether we would like to convene some or part of this group, or a
> similar group, again in April (when there may be APA money to help pay).
>
> This strategy takes advantage of the fact that even perhaps in January and
> February, we may be able to get very good people to come without honoraria
> because of the appeal of this rather novel situation. I have some sense
> that we should seize the day here.
>

> Now the problem in a sense returns to that of funding. Ian says that this
> format is high profile enough that he thinks he could come up with about
> \$10K. We would need airfare/train fare, one night (and perhaps, two) hotel
> accommodations for people who come from some distance, and the cost of a
> dinner (perhaps). I am good at getting cheap airfare (via online Orbitz,
> etc.). We might calculate \$150/night for hotels (at least). What do you
> think the FBI can provide for costs? I will try to work out a specific
> budget tomorrow, so we can be more concrete.
>
> In broad strokes, there are about 20 people on my "list of favorites"
> (although presumably not more than 15 or so will come; this is not counting
> recorders and facilitators such as myself and perhaps one or two others here
> from APA). They fall into categories of (1) risk perception, (2)
> stereotyping and prejudice, and (3) hate crimes/conflict resolution. There
> are some that can speak about Islam and the Muslim American community as
> well - this group will probably be shaped further by Ian and Brendan.
>
> I am sending this note to you now so that perhaps when we talk tomorrow, we
> can be as specific as possible. I would be glad to send over the putative
> list of speakers, as well - would like first to review it again with Kurt
> Salzinger here at APA. (There would be about 50% at least who are
> psychologists, and then the others are political scientists,
> anthropologists, economists, and other fuzzy social psychologists).
>
> It seems to me that we are all in agreement, now, about who in general to
> invite, the one-day format for this first meeting, how public we might be,
> and the tentative goals. I am excited and pleased about this progress! As
> soon as possible (which really means perhaps by Friday) I would like to make
> initial contacts with people to check availability - in several instances,
> this will actually be a second contact because I have talked with some
> already about the game plan, but only in very general terms.
> Would you like to try to arrange a conference call with Ian tomorrow? We
> are probably making good enough progress not to need to do that. (But if
> so, what times are good? I am in my office all day tomorrow.) But perhaps
> it would be good to have Cynthia involved again, so that I can be better
> informed about how it would work with the press, to give the APA people as
> much detail as they will need. Also, I need to know about whether you and
> your's have any funding available or do we need to try to do this only with
> U.Penn. money (which will probably just mean fewer people or people who are
> more local, which of course would be not the first choice).
>
> Shall stop here and wait to talk with you again tomorrow.
>
> Susan
>
> Susan E. Brandon
> Senior Scientist
> Science Directorate
> American Psychological Association
>
> 750 First Street NE
> Washington DC 20002-4242
> 202 336 5925
> 202 336 5953 (fax)
> SBrandon@apa.org

January 15, 2003

We had a luncheon meeting yesterday with two staff of the CIA's Operational Assessment Division (Kirk Hubbard, Chief, Research & Analysis Branch and one of his staff, professional Judy) to follow-up on our Sternberg meeting and talk about possible longer-term interactions. Kirk Hubbard was one of two CIA people that attended the California/Stanford meetings -- at our suggestion -- that Beutler, Bongar and Zimbardo put together last October, as a first step in setting up a California Center for Disaster Psychology & Terrorism. His group also is the one that Bob Sternberg spoke with a couple of weeks ago.

As a result of some internal efforts on the part of Hubbard and his colleagues at the CIA, this unit is trying to operate less insularly and construct ways in which they can regularly interact with the "outside world" of academic/research. They currently retain a 3-member paid advisory group consisting of 3 APA members: Joe Matarazzo, Ron Fox, and Mel Gravitz meeting on average once a month, now in their second year of service. But those folks have a very clinical orientation and Kirk and Judy would be interested in expanding the input they receive to include broader perspectives on science. In describing the scope and cost of the FBI conference, they said they'd be interested in conducting similar sorts of meetings perhaps on a somewhat smaller scale (like the Stanford conference) and have a budget that easily could support several such events each year. They also have a 500-seat auditorium at Langley HQ that they can routinely fill with employees and they'd be interested in developing a speaker series. As a follow-up to discussions they've already had with Phil Z., they plan to invite him to lead off that activity to discuss hate. We immediately thought of several other high profile members who would be of interest covering a variety of subjects.

We dropped by your office to introduce you but you were out so we'll have to save introductions for a future meeting. We did find Merry, Marianne, Diane, and had a brief chat with all of them. Marianne and Diane's portfolio of activities are of direct relevance and of great interest to them. I have no doubt that we have many members doing various sorts of basic and applied research that would also be of interest to them so it looks like a good opportunity to form a partnership. As with the FBI interactions, we see such partnerships as mutually beneficial: not only do we get to help APA members offer their expertise as needed, but the researchers are challenged by new and interesting questions. Our experience also has been that, despite the history of distance between academia and places like the FBI and CIA, many academics jump at the opportunity to be of service, an attitude no doubt formed by 9/11.

We have learned to err on the side of caution, and so should add here that whereas the fact of such interactions between APA members and the CIA can be general knowledge (we put a note about Bob Sternberg's visit there in SPIN and PSA), the specifics of the people working there -- their interests and roles -- might best be kept among those of us mentioned in and addressed by this note.

Geoff and Susan

On June 11, 2002, staff from the American Psychological Association (APA) and the President of APA met with Jeff Jones and Linda Flohr of the Office of Combating Terrorism of the National Security Council (NSC). At that meeting, the NSC group expressed concern about how to best communicate with the public, the media, and various infrastructure agencies regarding the level of risk or security alerts that now are part of our life here in the United States, and how to do this while both maintaining credibility with those who receive these messages and avoiding threat fatigue among those whom must react to these messages.

It appeared to us that it would be useful for APA to collect two or three social scientists with expertise in the area of risk perception, risk communication and decision-making sciences, and bring them to this NSC Office to speak informally about these issues. Ideally, staff at the NSC would pose several questions ahead of time for the social scientists to consider, and these would serve as the main focus of the discussions. However, it has been our experience that the best progress is made when there is simply time for talking and listening, on both sides.

The format of the meeting is one that the APA Science Policy Office has used in meetings with members of Congress, Congressional staff, and staff at the Office of Homeland Security and the FBI Academy. A one-day version of such a meeting ("Countering Terrorism: Integration of Practice and Theory") of scholars and researchers in the social sciences and law enforcement and intelligence agency personnel (as well as policy-makers) was held on February 28, 2002, at the FBI Academy. A description of this meeting is at <http://www.apa.org/monitor/jun02/improving.html> contained >.

The people that should be useful to the NSC might include:

Baruch Fischhoff: University Professor, Engineering and Public Policy and Social and Decision Sciences, Carnegie Mellon University. Baruch Fischhoff specializes in human judgment and decision-making. In his work, he attempts to address simultaneously issues of basic and applied interest. He has recently examined a variety of issues directly relevant to risk perception in the post 9/11 era including perceived risk/benefit of anthrax and other immunizations and risks associated with water borne illnesses.

Eldar Shafir: Professor of Psychology and Public Affairs, Department of Psychology and the Woodrow Wilson School of Public and International Affairs. Eldar Shafir's work is on descriptive analyses of inference, judgment, and decision making, and on issues related to behavioral economics. His research focuses primarily on how people make judgments and decisions in situations of conflict and uncertainty. What strategies do people employ in arriving at their decisions? Do these strategies lead to systematic biases and predictable errors? And what do these tell us about the way the mind processes the relevant information?

Philip E. Tetlock: Professor of Psychology, Department of Psychology, The Ohio State University. Philip Tetlock's research is in accountability and value conflict, taboo trade-offs, concepts of good judgment; world politics; styles of reasoning in groups and individuals; alternative functionalist metaphors for judging judgment; political or politicized psychology.

Paul Slovic: Professor of Cognitive and Social Psychology. Paul Slovic studies judgment and decision processes with an emphasis on decision making under conditions of risk. His work examines fundamental issues such as the influence of affect on judgments and decisions. He also studies the factors that underlie perceptions of risk and attempts to assess the important of these perceptions for the management of risk in society.

Linda Flohr has advised us that The Rendon Group often advises her office on issues of risk perception and communication and decision-making. A two- or three-hour meeting that includes members of The Rendon Group, social scientists of the sort listed above, staff of the APA Policy Office, and personnel from the Office of Combating Terrorism of the NSC, might be useful for each participant. A meeting of this sort is what we would like to arrange.

Notes for PSAC meeting 25 Jan. 02

Description of visiting Sr. Scientist position

Activities with FBI Academy

Asked to contact - Steve Band

After initial visit with APA staff, arranged for three additional visits: two with political scientists (Decade of Behavior), and one with two psychologists.

Observations: (1) that people there were sequestered from ongoing social/behavioral science; (2) that any problem-solving task (independent of history), benefits from a mixture of perspectives and interactions among thoughtful people who can listen well; (3) that the visiting academics are peculiarly disadvantaged by having to "just talk" (must research a new methodology for more effective exchange of information: scenarios, simulations, virtual realities, etc.); that we should not just assume that this is a problem that can't be at least somewhat mitigated.

Now are planning one-day "conference."

Have an unusual event, perhaps, in that it does not appear to be in the history and culture of law enforcement (that is, at least, the FBI) to have these kinds of engaged discussions (perhaps unlike the CIA, etc.). It also is a possible advantage that the academics/scholars will talk with real front-line officers, and that the latter will provide the scenarios.

Professional Standards Advisory Committee
Agenda
25 January 2002

- 9:00 Introduce Susan Brandon to PSAC members (and sign secrecy agreement)
- 9:05 Introduce new Chief, Behavioral Assessment Branch
- 9:10 Brief Dr. Brandon on Operational Assessment Division (OAD) overall mission and the purpose of PSAC
- 9:25 Invite Dr. Brandon to brief PSAC on her role in APA
- 9:40 Open discussion on collaborative efforts between OAD, PSAC, and APA
- 10:00 Break
- 10:00 Presentation of research findings in cross-cultural assessment of personality. Jim Mitchell
- 12:00 Lunch
- 1:15 Next steps for the Assessment Workshop. Ron Fox
- 1:45 Meeting schedule and future agenda items

Brandon, Susan

From: ronald [REDACTED] RONALD FOX
Sent: Monday, January 21, 2002 4:16 PM
To: Kirk Hubbard; JOSEPH MATARAZZO; Jim Mitchell; MEL GRAVITZ
sbrandon@apa.org
Subject: Re: Jan 25 PSAC Agenda

The agenda looks fine to me. Joe and I will be coming from DC and still need to find a ride or figure out the best way to get back and forth. We will be staying at the Monarch Hotel at 2401 M Street, NW and need to be back in time for a meeting at 4:00 that afternoon.

Is it possible or reasonable for Mel to think about picking us up at the hotel or some other place so we could ride out together? What say you Mel? Or might we grab a ride with Susan Brandon? What say you Susan?

ron

----- Original Message -----

From: Kirk Hubbard [REDACTED] PRIVACY REDACTION
To: ronald [REDACTED] RONALD FOX; JOSEPH MATARAZZO [REDACTED]
JOSEPH MATARAZZO; Jim Mitchell [REDACTED] PRIVACY REDACTION
Sent: Sunday, January 20, 2002 12:33 PM
Subject: Jan 25 PSAC Agenda

Gentlemen; Attached is the proposed agenda for Friday, Jan 25. Please advise should you wish to add something. Look forward to seeing all of you.

Kirk

Brandon, Susan

To: Kirk Hubbard
Subject: RE: Thank you for the invitation

Dear Kirk,

I would like to talk more with you about what I and APA might do that would be useful to your group. Since I am fairly sure that my schedule is more flexible than your's, I will let you suggest a time and place. I am determined to find the right path to your office (and have collected some data that should help me with this!) so I am quite willing to drive out there again.

I am waiting to hear from Ron about the project that he was working on with Kurt here at APA. It has been handed over to me, so to speak, but I am unsure where it's at. Ron and I hope to talk next week. It is very good that you and your group will be part of the Feb. 28 meeting. Much of what is important to that is, I think, having an opportunity for multiple perspectives to meet each other. It will be interesting to see how well that part of it works out. I know that being able to wear different hats gets better with practice -- how well we do on the 28th will probably just depend on how many hats the various participants have worn in the past.

Susan

-----Original Message-----

From: Kirk Hubbard [REDACTED]
Sent: Wednesday, January 30, 2002 7:59 PM
To: Brandon, Susan
Subject: Re: Thank you for the invitation

I also enjoyed the opportunity to meet with you. Let me know when you have more time and we'll get together again--either at my place or yours.

No need to send me the article. If you and Joe find it appropriate, I can't imagine having any concerns myself. I find it amusing, however, that DeMay is not an APA member! Interesting, but perhaps not relevant.

Look forward to seeing you on Feb 28 if not before. I have been in contact with Steve Band and his group at the FBI, and am submitting some ideas to them.

Regards, Kirk

----- Original Message -----

From: Brandon, Susan
Sent: Monday, January 28, 2002 8:15 AM
To: [REDACTED]
Subject: Thank you for the invitation

Dear Kirk -- I appreciated the opportunity to meet some of your group and was sorry to have to leave early. My apologies again for making us arrive late (mapquest, maps and advice from taxi drivers all to the contrary). I am waiting to get some more specific information from Ron Fox on how APA can be useful to some of your efforts. Whatever you might want to tell me, I welcome.

Joe Matarazzo called me on Sunday and reiterated some concerns about the article that Terry DeMay has written about his work -- this is the article

that I have proposed be considered for publication in the APA Monitor. I have already talked to our editors here, and they are willing to consider such an article; I got the final, approved article from Terry only on Sunday. My reading of the article is that it is focused on what Medical Services does for employment selection and support, very much in the spirit of Employment Assistance Programs. There doesn't appear to be any real overlap with the work of your group.

Joe asked me to fax a copy of the article to him, which I am glad to do. I will assume that it is appropriate for him to read it, as he is another member of APA (longstanding and well-regarded) and it is reasonable for me, as a staff at APA, to seek the advice of such people. I of course don't have any reason not to send you a copy as well, unless that will be problematic. I will wait to hear from you about this.

Thanks again,
Susan

Susan E. Brandon
Senior Scientist
Science Directorate
American Psychological Association

750 First Street NE
Washington DC 20002-4242
202 336 5925
202 336 5953 (fax)
SBrandon@apa.org

Brandon, Susan

To: ronald
Subject: RE: Jan 25 PSAC Agenda

Dear Ron -- Just want to tell you again how I appreciated your patience and generosity last Friday! I hope the remainder of the meeting went well; I was sorry to have to leave early.

Joe called me on Sunday to ask about the article that Terry DeMay is writing for the APA Monitor (I got a copy of the final version of this on Sunday, after seeing an earlier version that Terry brought to my office for me to see). As far as I can tell, there is really no overlap between the work that he describes and the kinds of issues raised at our Friday meeting. However, Joe asked that I fax him a copy of the article, which I agreed to do. Let me know if you have any other advice for me about this.

Kind regards,
Susan

-----Original Message-----

From: ronald [REDACTED]
Sent: Tuesday, January 22, 2002 2:16 PM
To: Brandon, Susan; 'Kirk Hubbard'; [REDACTED]; Joe Matarazzo; Jim Mitchell; [REDACTED]; Mel Gravitz
Subject: Re: Jan 25 PSAC Agenda

Susan will pick Joe and I up at 8 am at the hotel on Friday morning. However, she will not be able to give us a lift back. Now all we need is a return trip ride, and arrangements re how to get ourselves into the place!

ron

----- Original Message -----

From: Brandon, Susan <SBrandon@apa.org>
To: 'Kirk Hubbard' [REDACTED]; ronald [REDACTED]; [REDACTED]; Joe Matarazzo; Jim Mitchell [REDACTED]; [REDACTED]; Mel Gravitz; Brandon, Susan <SBrandon@apa.org>
Sent: Tuesday, January 22, 2002 6:08 AM
Subject: RE: Jan 25 PSAC Agenda

> I would be glad to give rides on Friday -- I live in the District. Let me
> know when and whom.
> Kirk -- The agenda attachment didn't come through for me; would you mind
> sending it again?
> I look forward to meeting you all.
> Susan
>

> > -----Original Message-----

> > **From:** Kirk Hubbard [REDACTED]
> > **Sent:** Monday, January 21, 2002 6:15 PM
> > **To:** ronald; [REDACTED]; Joe Matarazzo; Jim Mitchell; [REDACTED]; Mel Gravitz;
> > sbrandon@apa.org
> > **Subject:** Re: Jan 25 PSAC Agenda
> >

> > Greetings all. I'll defer to Mel and Susan re whether either of them
can

> > pick Ron and Joe up.. Ron and Joe can always take a taxi, but it
probably

> > would be easier if Mel or Susan could pick them up. When are Ron and
Joe

> > arriving in DC?

> >

> > FYI, my home phone is [REDACTED] should anyone need it.

>>
>> Susan--attached is the agenda.
>>
>> Look forward to a fruitful meeting on Friday.
>>
>> Best regards, Kirk
>>
>>
>> ----- Original Message -----
>> From: ronald
>> Sent: Monday, January 21, 2002 1:12 PM
>> To: Kirk Hubbard; [REDACTED] Joe Matarazzo [REDACTED]; Jim Mitchell; [REDACTED] Mel Gravitz [REDACTED];
>> sbrandon@apa.org
>> Subject: Re: Jan 25 PSAC Agenda
>>
>> The agenda looks fine to me. Joe and I will be coming from DC and
>> still need to find a ride or figure out the best way to get back and
>> forth. We will be staying at the Monarch Hotel at 2401 M Street, NW and
>> need to be back in time for a meeting at 4:00 that afternoon.
>>
>> Is it possible or reasonable for Mel to think about picking us up at
>> the hotel or some other place so we could ride out together? What say
you
>> Mel? Or might we grab a ride with Susan Brandon? What say you Susan?
>>
>> ron
>>
>> ----- Original Message -----
>> From: Kirk Hubbard [REDACTED] PRIVACY REDACTION [REDACTED]
>> To: ronald [REDACTED] PRIVACY REDACTION [REDACTED]; [REDACTED] Joe Matarazzo [REDACTED]
>> [REDACTED] PRIVACY REDACTION [REDACTED]; Jim Mitchell [REDACTED] PRIVACY REDACTION [REDACTED]
[REDACTED] Sent: Sunday, January 20, 2002 12:33 PM
>> Subject: Jan 25 PSAC Agenda
>>
>> Gentlemen; Attached is the proposed agenda for Friday, Jan
>> 25. Please advise should you wish to add something. Look forward to
>> seeing all of you.
>>
>> Kirk
>>
>>
>> << File: PSAC agenda Jan 25.doc >>

From: Mumford, Geoffrey [gmumford@apa.org]
Sent: Thursday, July 10, 2003 9:09 AM
To: Brandon, Susan (NIH/NIMH)
Subject: FW: Info for you

Susan,

See below about Jessen.
-geoff

-----Original Message-----

From: kirk hubbard [REDACTED] **PRIVACY REDACTION**
Sent: Thursday, July 03, 2003 10:53 AM
To: gmumford@apa.org
Subject: Info for you

Hi Geoff,

Would you like my bio in an attachment or simply in the text of a note?

I have forwarded your note on details of the conference to the ops people. I hope they respond soon. There will be three ops people who are under cover and will not be able to provide any info. They will use their first names only.

Jim Mitchell and Bruce Jessen are contractors but also would prefer not to submit bio information. Full names are fine, though. Special people doing special things. You will really like them--great guys. I would like them both to be in the first (Embassy walk-in) and third (interrogation/debriefing) scenario groups, if at all possible, along with myself and Judy Philipson. Judy is on vacation and will not be able to respond until July 14. If you can't accommodate all four of us, put me in some other group. But those are the best groups for Jim, Bruce, and Judy.

Thanks, Kirk

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Breakout Session #4

Intelligence Gathering

18 July 2003

Types of Lies

- Suggested types:
 - altruistic / malevolent
 - omission / commission
 - cover-up / wishful thinking
 - bald-faced lie / exaggeration / understatement
- Self presentational perspective
 - Care about what others think
 - Instrumental – leads to punishment
 - Damage reputation
 - Land in prison
 - Are these different?
- Lie – deliberately try to convince someone about something that you do not yourself believe

Response Repertoire

- Some people have a limited repertoire of responses
 - These people will lie even when it is against their own best interest

What makes a good liar?

- 2 signs of lying:
 - Double exculpation: giving two excuses for the same action
 - a backup excuse in case the first one isn't convincing
 - Lack of detail
 - Skeletal stories without detail are not convincing
- But – if more detail is more convincing, wouldn't a good liar take advantage of this?
- Some believe that asking subjects to retell a story in reverse chronological order will trip up many liars

Cultural Influences

- Some cultures don't worry about lying
- Some personalities don't worry about lying
- Univ of Michigan World Value Survey (on www):
 - Is it ever okay to lie in your own interest?
 - More education – more likely to think lying is okay
 - Survey may be problematic, due to lack of def'n of lying
- Do most cultures treat self-serving liars as bad?
 - Incest is pretty universally viewed as bad.
 - Some cultures view lying as okay (at least sometimes)

Professions and Liars

- Experienced sales persons
 - But they don't think of themselves as liars
 - “sanctioned stretching of the truth”
 - Good liars don't seem to think that they are lying
 - Not known if salespersons can effectively lie outside of selling
 - Not known to what extent IQ is a factor
- Others: poker players, magicians

What are we trying to do?

- A duality exists here:
 - Evaluating whether a specific statement is a lie
 - Evaluating whether a person is a liar (untrustworthy)
- Why are we concerned about detecting deception?
 - Aren't we more concerned about reality?
 - What kinds of lying are we really concerned about?
 - Is fear of detection the crucial aspect?
 - Is withholding info lying? Is editing / summarization lying?

Receiver Effects

- Intelligence gathering and psychotherapy
 - There are very few situations in which someone will just listen to everything you say
 - There has been a lot of study into the nature of transference between therapist and patient
 - How to elicit info
 - As trust builds, you get more info
 - Key to determining truth is long term linkage
- Posture mirroring as a way of creating a social bond between interviewer and subject
- Telling the truth may be painful or difficult
 - The only good answer to “how do I look?” is “Am I stupid?”

Susceptibility to Lying

- The more you care about what other people think of you, the more likely you are to lie
- Willingness to rationalize
 - Stealing and cheating
 - Book (\$30) out of print, copy in library
 - Failure to return book = \$10 penalty
 - If book not returned, is this stealing?
 - If answer is no, correlated with cheating

Intuition

- If something is bothering you, but you just can't put your finger on it, don't ignore it
- Key is recognizing the right cues

Evaluating Deceptiveness

- Sometimes indirect questions (how do you feel about this?) does a better job of getting at accurate evaluations of truthfulness than direct questions (is he lying?)

Confidence in Sources

- Simple familiarity makes people much more confident in the person
- Confidence bias
- Doubles are very dangerous because they are trusted

Miscellaneous

- What are the ethical aspects of approaches to deception detection in intelligence gathering?
 - Sharing evaluations of truthfulness between organizations
 - Blacklisting?
- What is the role of humor in telling or detecting a lie?

Summary of Suggestions

- Set up situations that are not threatening
- Retell story backwards
- Look for people too willing to rationalize
- Look for people who care too much what others think of them
- Examine skills of psychotherapists
- Consider using indirect questions/measures of deception

Brandon, Susan

From: band [REDACTED] [REDACTED]
Sent: Tuesday, January 15, 2002 8:20 PM
To: Brandon, Susan
Subject: Re: note I sent out

Dear Susan,

Glad you thought the Seligman format was a winner... I too think the format it has merit; great minds think alike! Looking forward to seeing you (APA) guys as soon after Tony is back to work. We'll be in touch. Best regards, steve

"Brandon, Susan" wrote:

> Steve --

>

> Just wanted to send you a copy of the note that I sent out today. Will
> attach it below.

>

> The paper from the "Seligman conference" was quite interesting. I liked the
> format and the development of very concrete notions and suggestions. There
> were many creative ideas -- that was exciting. It seems as if trying to
> write something in a similar format would be a worthy goal for our meeting;
> perhaps if we can tell people at little ahead of time of this goal, that
> would help them form their own comments as well as give them time to think
> of more good ideas!

>

> Geoff Mumford said he would like to come out and talk about format and etc.
> with us, if his schedule allows. I will wait to hear from you re Tony's
> schedule. I am free except for next Friday (the 25th); hopefully Tony's
> health will be good long before that. I have suffered from sinus infections
> in the past, so he has my sympathy.

>

> Susan

>

> (here is the note:)

>

> Dear Friends,

>

> We now have a date for our meeting at the FBI Academy: Thursday,
> February 28, 2002. This will be a full-day meeting (starting at about 9 AM
> and ending at about 5 PM, with continued discussions at dinner for those who
> wish to stay). As indicated, travel and hotel accommodations will be
> provided for those who need them. The FBI Academy is in Quantico, Virginia,
> which is about a 40-minute drive from downtown Washington D.C.

>

> My apologies that we could not provide this date earlier (and that
> it is later than initially indicated). I apologize even more to those of
> you who may not be able to attend on that day and might have been able to do
> so had you been given more notice.

>

> I am hoping that you will accommodate my short-comings and that you
> will be able to come. If the only way that you can come is to attend part
> of the meeting, please know that partial participation is preferable to
> none.

>

> As the roster of participants develops, Ian Lustick and Brendan

> O'Leary (from U. Penn.), faculty from the FBI Academy and I will designate
> what is most likely to be four to five panels, each focused on a particular
> topic. We will leave lots of time for discussions, both organized and
> individual. I will send all these details to you as soon as I have them -
> hoping for your creative suggestions and contributions. Since this meeting
> is virtually without precedence, at least for those of us here at the
> American Psychological Association, we are especially free to make it as
> close to an ideal form as possible.
>
> Please call me or email me with any questions you might have. My
> thanks to all of you for your patience and interest in this project.
>
> Susan
>
> Susan E. Brandon
> Senior Scientist
> Science Directorate
> American Psychological Association
>
> 750 First Street NE
> Washington DC 20002-4242
> 202 336 5925
> 202 336 5953 (fax)
> SBrandon@apa.org

Brandon, Susan

From: band [REDACTED] PRIVACY REDACTION
Sent: Thursday, January 17, 2002 11:14 PM
To: Brandon, Susan
Subject: Re: FW: Suggestions and revised agenda

Dear Susan,

You are right... that is some lively discussion. My reaction: I'm a bit disappointed in the view that law enforcement types are basically a bunch of knuckle draggers whose purpose in life is to arrest culprits and not prevent criminal acts due to some conspiracy theory about how preventing crime would reduce our operating budgets! and, if that weren't enough... we would not benefit from academic discussions for a wide variety of reasons etc, etc, etc... Don't get me wrong, I'm not steaming over this, I'm finding it amusing. I come from the same organization that took a beating in a little Texas town called Waco. Some of the criticism on the heels (no pun intended) of that horror was that scholars & academics should have been vigorously engaged & consulted to assist with strategies that may have assisted a different outcome. None the less, I in my chosen profession have taken on an oath and extreme challenge: to protect and defend the Constitution of the United States against its enemies. I agree, doing this in a democracy is, at times, quite complex so I look for partners in this challenge; and so for this I turn to you. The leaders of my company want desperately to prevent the next terrorist act from occurring, we want to hear from scholars and academics with highly creative (and lawful) strategies based on intellectual theory (or whatever) to accomplish this goal; I want to hear how political psychology, ethno-cultural-spiritual theory, geo-political scientists think about terrorists and how to disrupt, demoralize and defeat them; and, importantly, how to defend freedom in a free society. I want to walk into a room surrounded by academics and scholars who are so 'bright' I have to wear sunglasses... and I want to hang on their every word... because in their wisdom, there might just be something we didn't think to do. All that said, the lack of high level security clearances may prohibit my associates from sharing very sensitive information with those who are not so cleared. That is why the Seligman format worked so well... there was no expectation on the part of the Seligman group that we would even communicate with them... yet, they spoke and we listened and gained valuable assistance from them. By the way, it was discomfoting to read the e-mail traffic between you and Seligman. I think my gut feeling about not releasing his product outside of its intended audience was on-point and... it may have discomfoted him to learn that Kirk did. I'll be lucky if Seligman ever talks to me again! None the less, I still think his format is a potential winner. Small breakout groups prompted to address specific interests also sounds like a winner. Additionally, some of the invited might have an area they personally believe is important to offer; they should be given the opportunity to present to the plenary session. I look forward to your next visit. A new security procedure requires a fax be sent to the security posts; This has been done. You and your associates do not need a letter. Do have some picture ID if requested to display some and remember, my name is your point of contact.

Regards, steve

PS. [REDACTED] PRIVACY REDACTION
[REDACTED]

"Brandon, Susan" wrote:

Steve -- You will see that we have been having some lively debate here about the format of our meeting (as well as about the Seligman paper, which I did not send on). What do you think of Donald's idea? He is a very creative person.

Susan

> -----Original Message-----

> From: Donald A. Norman [REDACTED]

> Sent: Thursday, January 17, 2002 12:05 PM

> To: 'Brandon, Susan'; 'Baruch Fischhoff'

> Cc: 'Mumford, Geoffrey'; 'Bullock, Merry'; 'Brendan O'Leary (E-mail)';

> 'Ian Lustick (E-mail)'; 'Donald A. Norman (E-mail)'

> Subject: Suggestions and revised agenda

>

> Let me make some suggestions, including a radical revision of the
> planned meeting structure.

>

> I asked some of my fellow CSTB people - and more importantly, CSTB staff
> (<http://www.cstb.org>) what they thought the secret was to getting good
> communication between academics and field workers, and the answer I got
> was something like this:

>

> A one day meeting where everyone gives their set talks is not very
> useful. The only way CSTB has found to be successful is where a
> relatively small number of people from each community sit down in a
> conference room for several days to have detailed conversations on what
> the issues really are and how one can develop intelligent plans of
> actions. Otherwise, you get set talks and posturing.

>

> Academics have very different concerns than field people. Academics
> look for fundamentals, for reasons, for principles. Field people need
> to solve the immediate pressing issues and get on with the next problem.
> They don't have time for reflection.

>

> One thing CSTB has discovered over the years is that law enforcement is
> about catching the culprits. It is NOT about prevention. Academics are
> mostly about prevention. Law enforcement is often prohibited from doing
> the observations required to detect something before it happens. And
> they are rewarded for catching bad guys, not for preventing incidents.
> A cynical view (mine) is that if law enforcement was successful at
> preventing all incidents, their budgets would be cut, because government
> would assume they weren't needed. Whatever the reason, they are

> rewarded for catching folks after the fact, and so they want to know how
> to do this quickly and efficiently. A secondary problem is that they
> can't just catch the bad guys -- they also have to collect the kind of
> information that law courts require, and in the manner that is
> permitted. This restricts their activities and also means they
> sometimes cannot act when otherwise they would have wished to. (Note
> that from the civil liberties perspective, this is considered a good
> thing, even if from the law enforcement perspective it is bad. As is
> usual, there are multiple points of view and complex tradeoffs involved
> in living in an open democracy. A democracy is the correct place to
> live, but it isn't very effective at preventing crime and catching
> terrorists.)
>
>
> Academic theories are seldom relevant. Law enforcement doesn't want
> reasons -- they want methods.
>
> Scenarios can be useful. I am still trying to get permission to reveal
> the scenarios we have developed (although, personally our scenarios are
> laughable -- they are being done by amateurs -- us.)
>
> ---
>
> I worry that the format that is being described for our meeting will not
> be fruitful. Here is what Susan sent me:
> ----
> "The general format is perhaps four panels, with 3-5 people on each. The
> categories at present are judgement, decision-making and risk
> communication; stereotyping, bias production and ethnic prejudice;
> human credulity; conflict resolution; hate crimes; Muslim-American
> community. "
> -----
> I predict this is useless.
>
> What in earth could I say to an FBI person about any of those topics?
> These are academic topics, where we discuss the wonderful research we
> have done. They are bored.
>
> They will talk about particular cases they have faced and threats they
> are worried about -- these will not fit any of the categories above.
>
> Real crimes don't fit those neat categories. Real crimes cut across
> categories. We need to have the FBI give us a few scenarios that
> really worry them -- don't worry, they are allowed to talk.
>
> Then we should ask them -- "what kind of help do you think the social

- > and behavioral sciences might offer?" Their responses are not apt to
- > be satisfactory, but if we start off with common themes and some
- > education of what they think might be useful, we have a better start.
- >
- > I recommend the day be structured like this.
- >
- > 1. A brief intro.
- >
- > 2. The FBI folks present us with one or two scenarios (we would have to
- > tell them now that we want this). We spend enough time to flesh them
- > out and understand the magnitude.
- >
- > 3. They give us a wish list.
- >
- > 4. We now divide up into several small groups (four?), but with mixed
- > representation - each group meant to be cross-disciplinary, and each
- > group with someone from the FBI. Each group discuss the scenario and
- > discuss what the social and behavioral community can add or do to help.
- >
- > 5. We return to a full meeting to reflect upon lessons learned and to
- > discuss future steps.
- >
- > Don

Brandon, Susan

From: Mumford, Geoffrey
Sent: Wednesday, January 09, 2002 7:52 AM
To: [REDACTED] Steve Band
Cc: Brandon, Susan
Subject: RE: Info from the National Research Council
Hi Steve,

Sorry about the attachment problem, I've faxed the material to you instead (I used [REDACTED] hope that's right?). I'm pleased to hear that the Seligman meeting produced useful information and respect the need to use the information discreetly.

I'm hopeful, as you are, that the planned conference will likewise produce something useful...any closer to confirming a date? It's clear that there is a great deal of interest from the external scientific community so we're ready to move as soon as you are.

Yes, I know Dave Schroeder well and we chatted about the FAM screening just the other day. He is certainly on our side and will advocate for human factors to the extent anyone is willing to listen.

We're sending a note of congratulations to John Magaw today affirming our interest in serving as a scientific resource as he builds the TSA. I hope you'll be able to say something nice about us if he calls to say "who are these pests?"

Thanks for staying in touch and please let me know if you have any questions about the materials I faxed.

Best,
-geoff

-----Original Message-----

From: band [REDACTED] [REDACTED]
Sent: Tuesday, January 08, 2002 10:11 PM
To: Mumford, Geoffrey
Subject: Re: Info from the National Research Council

Hi Geoff, I couldn't read the attached file(s) you e-mailed. Seligman's 'gathering' produced an extraordinary document that is being channeled on high (very high)... I did not get the impression from Seligman that it was intended for wide distribution or readership... some of the national strategies and supportive statements proposed by 'the gathering' are pretty intense; the authors may want their involvement to remain discrete. I intend to show Susan the write-up at our next meeting, but not provide a copy. If you are interested in viewing its contents you certainly may do so in-person with her. I believe a similar document of tremendous value could be produced at the conference we are planning. The format and contents of Seligman's write-up could serve as a model for future products; it is for this reason it would be of value for Susan to review (discretely). Regarding FAA and Air Marshal selection issues... you may (or may not?) be aware there is a Dr. Schrader (phonetic spelling) who is overseeing the psych. testing and screening for all fed. air marshal candidates. I think he's located in Oklahoma City... he might be in a position to advocate the human factors point of view if so convinced(?). Wishing you a Happy & Healthy New Year. Hope to see you again soon. Best regards, steve

"Mumford, Geoffrey" wrote:

> Hi Steve,
>
> I've attached the text of two memos that the NRC Committee on Human Factors
> generated as follow-up to its meeting last month; one addresses questions
> raised by the FAA on selection and deployment of Federal Air Marshals; the
> other argues for the inclusion of human factors expertise across most of the
> panels examining the counter-terrorist agenda and provides the names of
> nominees for those panels. Please let me know if you have trouble with the
> attachments.
>
> In addition, I'll forward an interesting note I received from one of the
> guru's of info-tech (Don Norman) who is serving on the counter-terrorism
> panel dealing with that issue.
>
> Lastly, susan mentioned that you might be able to provide a summary of the
> Seligman gathering...is that yet available?
>
> Best for the New Year!
> -geoff
>
>
>
> Geoff Mumford, PhD
> Director of Science Policy
> American Psychological Association
> 750 First Street, NE
> Washington, DC 20002-4242
> (202) 336-6067 phone
> (202) 336-6063 fax
> gmumford@apa.org
>
> -----
>
> Part 1.2 Type: application/ms-tnef
> Encoding: base64

Hi all,

Here is the latest version of my letter. Thanks to John and Nina for helpful comments. I'd like to send it out this morning, but please let me know, before I do if there are any glaring errors.

Steven

Dear Dr. Koocher,

It has been more than a month since last we spoke, and during that time almost 1500 people (most of them members of the APA) have signed a petition "against psychologist's participation in the interrogation of enemy combatants." The Divisions of Social Justice have circulated a proposal to change the ethics code to bring it in line with internationally recognized principles of human rights, and Physicians for Human Rights has suggested that the APA bring "their ethical policies regarding interrogation in step with the American Medical Association and the American Psychiatric Association, and explicitly prohibit psychologists from participating in interrogations."

You are already familiar, from our debate on Democracy Now, with my position on these matters, but let me reiterate my two part stance: a) that the American Psychological Association ethics code must be written in a way that makes it clear that it is unethical for psychologists to participate, advise, guide, or train others to participate in interrogations at interrogation centers such as Guantánamo and Abu Ghraib, which operate outside of national or international law and which have been condemned as sites of torture by international human rights monitoring government and non-governmental agencies, and b) that since the current United States Administration and the military services have reinterpreted the definition of torture, cruel and inhumane practices in a way that permits many internationally condemned practices of physical and psychological abuse, psychologists need a clearly articulated ethical principle, like other health professionals, which simply prohibits them from "weakening the physical or mental condition of a human being, without therapeutic justification." (World Medical Association)

Since we spoke, too, it has also been widely reported that the 60% of your appointees to the PENS task force had direct ties to the military, whereas membership in the APA's Division of Military Psychology stands at 396 out of a total APA membership of 77,500 or about 1/2 of 1%. One of your appointees, Morgan Banks, is "command Psychologist and Chief of the Psychological Applications Directorate of the U.S. Army Special Operations Command (USASOC)." According to his biographical statement, he "provides the only Army training for psychologists in...interrogation support, and behavioral profiling." You selected him for a committee to determine the application of Ethics to current military interrogations, even though he is not a member of the APA and even

though he is, apparently, directly involved in the practices that spurred the creation of the PENS task force review.

I know that the Council of Representatives will be meeting next week to discuss the issues raised by psychologists' participation in interrogations at Guantánamo and elsewhere, and to decide on what, if any, changes should be implemented in the ethics code as a result of alleged psychologist participation in abusive interrogation practices. You have announced that there will be a single guest speaker addressing the Council: Army Surgeon General Kevin C. Kiley. And further, that General Kiley will only respond to questions vetted in advance.

I am sure that you are aware that on April 13, 2005, General Kiley issued a report on medical operations at Guantánamo and Abu Ghraib, with particular emphasis on the role and functioning of what have come to be called BSCTs. He recommended at that time that wherever possible, senior psychologists should be used exclusively for those teams and he described their role as follows: "[Psychologists are to] check the medical history of detainees with a focus on depression, delusional behaviors, manifestations of stress, and "what are their buttons." [Psychologists] will greatly assist [interrogators] with: obtaining more accurate intelligence information, knowing how to gain better rapport with the detainees, and also knowing when to push or not to push harder in pursuit of intelligence information." *

According to the PENS task force report, this recommendation is in direct violation of the ethics code (the use of medical records for purposes other than treatment). And, for those of us who believe that the PENS task force did not go far enough, this report demonstrates precisely why we need to strengthen and clarify the ethics code. The Surgeon General's report and the PENS report both recommend putting psychologists in the position of assessors of the level of coercion and stress applied to a detainee. This is not a role for a medical or mental health professional, dedicated as we are to the humane treatment of individuals and bound as we are by the ethical injunction to "do no harm." And especially now, when the centers of such interrogations are the subject of condemnation, not only by the United Nations, the European Union, and International Human Rights organizations, but by the Supreme Court of the United States

Thus, your extending the sole invitation to address the Council to the author of the problematic military code strikes me as continuing a practice of stacking the deck in favor of a military interpretation of the role of psychologists, even when this conflicts with the history of ethical principles which have governed the behavior of health professionals for millennia.

Which brings me to the point of this letter. The Council will be meeting to make vital decisions

concerning psychologists' behavior in very difficult times and circumstances. This important process, to decide appropriate emendations to our ethics code, is not well-served by presenting Council members with a one-sided picture. Therefore, I am requesting that, in the interest of a true examination of the issues, you consider inviting a speaker with an opposing point of view to speak alongside or in addition to General Kiley. I am requesting, too, that you encourage a lively discussion of the issues, by opening the floor to questions from the Council members.

If you are open to this suggestion, I could think of a number of wise, reasonable representatives of the alternative position who could contribute usefully to the Council discussion. I know that Leonard Rubenstein, Executive Director of Physicians for Human Rights, has offered to speak alongside the General. Dr. Rubenstein and General Kiley have debated these issues in public before and from all reports the conversation was polite, informative and lively. Apparently, you have rejected Dr. Rubenstein's offer. I would ask you to reconsider.

Another excellent choice would be Philip Zimbardo, Professor Emeritus at Stanford, and former president of the APA. I don't know if Dr. Zimbardo is planning to attend the convention, or if he would be willing to speak on a panel with General Kiley, but his commentary on the PENS task force report, invited by Stephen Behnke, is a clear, well-reasoned and persuasive alternative perspective.

I hope you give consideration to this proposal. It would show that the Administration of the APA is interested in a full and fair debate of these important issues; in contrast to all appearances that the the APA Administration is simply looking to rubber stamp the position of the current United States administration and it's military services.

Sincerely,
Steven Reisner, Ph.D.

*SOURCE: "FINAL REPORT: ASSESSMENT OF MEDICAL OPERATIONS... ~OFFICE OF THE SURGEON GENERAL OF THE ARMY. 13 APRIL 2005")

Sender: Olivia Moorehead-Slaughter **PRIVACY REDACTION**
Sent: Friday, June 03, 2005 5:25:49 PM
Recipient: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Subject: email

Larry and Gerry,

Your comments are very well taken. I actually did not mean to imply "open" in its broadest sense. My intention was to convey that I think that we should consider including other observers who are not members of the Task Force but who would have an interest in this matter as well as some possible contribution to make to our deliberations. I absolutely agree that the press should not be a part of these meetings. Additionally, the parties in the room will be "known entities" who have been approved to be there. I like you want this discussion to proceed in an environment of safety and collegiality.

As always, thanks for your feedback.

Olivia

Sender: Gilfoyle, Nathalie </O=APA/OU=DC/CN=RECIPIENTS/CN=NPG>
Sent: Saturday, August 13, 2005 10:19:27 AM
Recipient: Behnke, Stephen <sbehnke@apa.org>
Subject: RE: ResponsetoRonLevant.pdf

I worry about that definition in terms of giving those who think any discomfort is unethical something to shoot at and thus would rather save that for the commentary., But perhaps we are at the point where we have to put it out there. dunno

From: Behnke, Stephen
Sent: Saturday, August 13, 2005 9:29 AM
To: Gilfoyle, Nathalie
Subject: RE: ResponsetoRonLevant.pdf

yeah--I think so. I'm going to run that definition by Morgan, but if before Monday COB we can send these folks a very positive, supportive message, I think we'll be in good shape.

-----Original Message-----

From: Gilfoyle, Nathalie
Sent: Saturday, August 13, 2005 9:28 AM
To: Behnke, Stephen
Subject: RE: ResponsetoRonLevant.pdf

Thanks ...not bad.

From: Behnke, Stephen
Sent: Saturday, August 13, 2005 9:24 AM
To: Gilfoyle, Nathalie
Subject: FW: ResponsetoRonLevant.pdf

-----Original Message-----

From: Ronald F. Levant, Ed.D., M.B.A., ABPP **PRIVACY REDACTION**
Sent: Saturday, August 13, 2005 8:12 AM
To: Behnke, Stephen; Farberman, Rhea K.; Strassburger, Judith
Cc: 'Ronald F. Levant, Ed.D., M.B.A., ABPP'
Subject: FW: ResponsetoRonLevant.pdf

Steve and all: I see no problem here except that they need to be educated about what the APA Ethics Comm can do (5th bullet). Since they indicate this is being widely distributed we should have a response and ask them to distribute that

From: Eileen R. Borris **PRIVACY REDACTION**
Sent: Friday, August 12, 2005 11:51 PM
To: **Ronald Levant**
Subject: ResponsetoRonLevant.pdf

Dear Ron,

Sorry for the delay in getting a response back to you. Our executive committee wanted to send you a thoughtful reply.

Sincerely,
Dr. Eileen R. Borris - President Division 48

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Thursday, April 28, 2005 10:30:35 AM
Recipient: 'Olivia Moorehead-Slaughter' **PRIVACY REDACTION**
Subject: Task Force

Hi Olivia,

Very nice message last night, & it got through!

I wonder whether it might be good to get the ball rolling, so to speak, by inviting a more substantive discussion. One place to begin might be to invite Mike Gelles to comment on his article (Tab 11), and to ask whether the article represents his current thinking. If not, could he update the group on what he might say differently, or how he might think about these issues differently? You also might want to mention to the group that Mike is mentioned in newspaper articles that are included in the readings (Tabs 17 and 26).

Okay, I am off to Arkansas for an Ethics Workshop!

Steve

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Monday, September 16, 2002 8:14:01 AM
Recipient: Carliner, Deborah <DCarliner@apa.org>
Subject: RE: Nathalie

Hi Debbie,

I think I'll send Nathalie a message, and ask if, having seen the tape, she has any questions about the case, which we'd be happy to answer/clarify. Feels a bit odd to ask for/set up a meeting without knowing whether Nathalie feels the need to discuss further--

Steve

-----Original Message-----

Carliner, Deborah
Sunday, September 15, 2002 10:11 PM
Behnke, Stephen
RE: Nathalie

Now that she's seen the tape, I think it would be helpful to discuss with her her thoughts.

-----Original Message-----

Behnke, Stephen
Thursday, September 12, 2002 11:50 PM
Carliner, Deborah
RE: Nathalie

Thanks, Debbie--I will be sure to remember to ask.

Nathalie, by the way, will ask me what the meeting is for--what should I tell her?

Steve

-----Original Message-----

From: Carliner, Deborah
To: Behnke, Stephen
Sent: 9/12/02 5:14 PM
Subject: Nathalie

Since I suggested it as you were leaving, I thought it could easily have slipped your mind. Could we meet with Nathalie some time on Tuesday to talk about Gelles. If she can't do it then, I will be here Thursday even though you will not be.

See you on Tuesday.

Debbie

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Thursday, August 15, 2002 2:01:44 PM
Recipient: Carliner, Deborah <DCarliner@apa.org>
Subject: Investigation

Debbie,

As Ethics Director, I hope that everyone in the office cares about and takes their work seriously.

However, I want to be clear that your behavior is unacceptable. I am further troubled by your reply to my message of last Friday. The only "decision" that has yet been made in the case, if it can be called a decision at all, is for the case to go forward to the Committee as planned. That you would state your "absence is being taken advantage of" and that I am engaged in a "rush to judgment" gives me serious concern about your present ability to handle this case in an objective manner.

As I said in my last message, I will decide on the appropriate response and inform you of that before your return.

Steve

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Friday, August 09, 2002 12:53:30 PM
Recipient: Honaker, Michael <mhonaker@apa.org>
Subject: FW:

Mike,

This is Debbie Carliner's response. I intend to speak with Ish about my response when he returns next week.

Steve

-----Original Message-----

Carliner, Deborah

Friday, August 09, 2002 12:42 PM

Behnke, Stephen

Late Wednesday night, I read your email that you were going to speak to Peter about closing the case. When I couldn't get you on Thursday morning, I called Peter to find out his thoughts about the case. He was not there. You called me back and we had the only conversation on the matter that you and I have had. Peter called me back after we spoke and I told him I had been calling to learn his thoughts. In the course of our conversation, I told him my perceptions.

As you know, I care about my work - this case as well as all my others. I feel tremendous responsibility for my work. As you also know from numerous conversations, I do not let go lightly my involvement in any of my cases, from the initial investigations to the responses to the independent adjudication panels.

I have taken an unpaid leave of absence because APA was in a budget crunch. I am not getting anything out of this leave. I feel that my absence is being taken advantage of both in how the Gelles case is being handled and in your rush to judgment.

Debbie

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Friday, August 09, 2002 9:35:53 AM
Recipient: Carliner, Deborah <DCarliner@apa.org>
Subject: Investigation

Debbie,

Yesterday late afternoon I spoke with Peter Mayfield. Peter informed me that you had spoken with him on yesterday as well, to give reasons why charges on a particular case should not be dropped.

On Tuesday I informed you that, in your absence, I was the acting investigator on this case.

During our Thursday morning conversation I informed you about the status of the case, as I said I would do before you went on leave. In that Thursday conversation I indicated that I would need to consider further whether certain charges would be dropped in light of a legal memo. I told you that I understood and appreciated your differing opinion, but that I had further thinking to do about this matter and would make a decision. I told you that I would inform you of that decision. At no point in our conversation did you indicate that you had spoken with, or wished to speak with, the Monitor. At no point during the day did you inform me that you had made or intended to make a call to discuss with the Monitor these very issues.

I find that you would contact the Monitor to discuss the handling of a case, without informing me, when I explicitly told you that I was acting investigator on the case, that I was contact with the Monitor, and that I was actively in the process of making a determination about how the case should be handled, very troubling.

I will need to consider the most appropriate response and will inform you of that before you return from your leave.

I expect that you will have no further contact with anyone regarding this case until you and I have discussed this matter and I have indicated it is appropriate for you to do so.

Steve

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Tuesday, August 06, 2002 11:54:38 AM
Recipient: Carliner, Deborah <DCarliner@apa.org>
Cc: Childress-Beatty, Lindsay <LChildress-Beatty@apa.org>
Subject: Gelles

Debbie,

I have given Lindsay's memorandum on the Gelles case a great deal of thought. The memo, it seems, is quite clear that certain charges are legally unsupportable. Those that remain have at very best thin factual support; none appear to have the required preponderance of evidence in its favor.

As acting investigator in your absence, I am going to contact the monitor, Peter Mayfield, to ask that he review Lindsay's memo and determine whether he believes the committee can reasonably find a violation. I will ask that Peter prepare a memo for the file on this question, and will let you know as soon as he responds.

Steve

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Monday, August 05, 2002 3:21:08 PM
Recipient: Jones, Stanley E. <sjones@apa.org>; Childress-Beatty, Lindsay <LChildress-Beatty@apa.org>
Subject: RE: Legal analysis of Gelles case

PRIVILEGED AND CONFIDENTIAL

There is no charge which, in my opinion, can be proven by a preponderance of the evidence.

There are charges for which a reasonable person might agree an allegation should be raised and examined.

But to say that the bar has been raised is quite a different matter than to say the horse could jump over it. I think a reasonable person could argue that a very few specific charges merit the bar being placed on the posts.

On the record before us, the horse don't jump.

-----Original Message-----

From: Jones, Stanley E.
Sent: Monday, August 05, 2002 3:11 PM
To: Behnke, Stephen; Childress-Beatty, Lindsay
Subject: RE: Legal analysis of Gelles case

Hmm, let's see: my line was "must conclude that the matter MAY be closed."

In a few minutes, I'll be out for a while....

Lindsay alluded to the form of the EC policy and my comment about the usual practice being for the investigator to call it to the monitor's attention. There are three issues here: how is it called to the monitor's attention, what does the monitor conclude, and what discretion does the investigator if the monitor recommends closing.

So let's say legal counsel's memo goes to the monitor with a request that the monitor review it regarding the policy. One option is to let the investigator transmit it, vs the director, vs the director with a fairly strong statement of some sort. Let's assume the monitor recommends close. The only way the investigator can not close is to NOT agree that the Committee cannot reasonably find a violation. I think that requires the investigator to argue that the EC CAN reasonably find a violation (of at least one charge). To do so here requires that the evidence be presented that would prove a violation by a preponderance of the evidence.

I have not reviewed Lindsay's memo or the file: can any charge be proven?

It's a little worrisome that the monitor compliments Debbie on her handling of the case. I think the bias and omissions were pretty obvious.

Stan

-----Original Message-----

From: Behnke, Stephen
To: Jones, Stanley E.; Childress-Beatty, Lindsay
Sent: 8/5/02 2:42 PM
Subject: RE: Legal analysis of Gelles case

Stan, you use the word "must" conclude. Are you saying that, in such an instance, the investigator would have no discretion? If that were the case, I would have an added measure of comfort as Director of the Office in directing the investigator to close the case.

-----Original Message-----

From: Jones, Stanley E.
Sent: Monday, August 05, 2002 2:39 PM
To: Behnke, Stephen; Childress-Beatty, Lindsay
Subject: RE: Legal analysis of Gelles case

Yes, hydrogen!

When I hear the phrase "appropriate for," I only think in terms of whether it is in the ball park in terms of the general issue (e.g. is it in the purview of ethics to address informed consent). The Committee has often gotten matters in which they could not reasonably find a violation.

Lindsay characterized several as involving factual questions. I believe that most are in the form of disputes in the record that the Committee cannot prove the allegations in the in that by a preponderance of the evidence. I have not reviewed each of these, but if that is true, is it not one that the investigator must conclude may be closed under the policy?

Stan

-----Original Message-----

From: Behnke, Stephen
To: Jones, Stanley E.; Childress-Beatty, Lindsay
Sent: 8/5/02 2:25 PM
Subject: RE: Legal analysis of Gelles case

PRIVILEGED AND CONFIDENTIAL

One unprecedented but technically okay method: replace the investigator and monitor with the Director and Chair (they are the designees for such) and then make the review to close. If the chair is not persuaded, so be it. Or replace only the investigator.

This strikes me as the equivalent of a nuclear bomb. If we need such, so be it. Stan, please tell me. Do you think this case is appropriate for ethics committee review? By appropriate, I mean that a reasonable committee could find violations by a preponderance of the evidence.

-----Original Message-----

From: Jones, Stanley E.
Sent: Monday, August 05, 2002 2:15 PM
To: Behnke, Stephen; Childress-Beatty, Lindsay
Subject: RE: Legal analysis of Gelles case

I'd get your plan clear before involving the Chair. This is a bit difficult for me to advise on, since I have no feel for the composition of the EC at this point.

One unprecedented but technically okay method: replace the investigator and monitor with the Director and Chair (they are the designees for such) and then make the review to close. If the chair is not persuaded, so be it. Or replace only the investigator.

I don't think this is an area worth pursuing in this matter, but by procedural flaw, I am referring to the fact that the designee of the Chair (the former Chair - Robert - who was deputized to continue on this matter after completion of his term) did not agree to all the charges.

He did not say, "I agree to 5.01c if Steve does." He asked for input. (See doc 33.) There is no record that he agreed to that charge, nor that he would have agreed had the feedback of "Steve-the-Chair" been supportive of the charge. Steve-the-Chair received a partial record and did not agree to the charge. Instead of providing the feedback to Robert, the investigator called the Chair, and convinced him that the necessary information was there for the charge. The investigator then proceeded with all the charges. While you can argue that it is okay to get individual charges approved by different chairs/designees, I think it is better to get them all approved by one person. (I have raised a similar issue when the investigator has voted that cause is not met, and the chair and vicechair are the ones who must agree to the charges.)

Stan

-----Original Message-----

From: Behnke, Stephen
To: Jones, Stanley E.; Childress-Beatty, Lindsay
Sent: 8/5/02 1:55 PM
Subject: RE: Legal analysis of Gelles case

PRIVILEGED AND CONFIDENTIAL

Hmmm. I can see no procedural flaw in opening the case, and given the investigator involved I doubt there was one.

Stan, what were I to give the chair a call involve him in this conversation?

Steve

-----Original Message-----

From: Jones, Stanley E.
Sent: Monday, August 05, 2002 1:48 PM
To: Behnke, Stephen; Childress-Beatty, Lindsay
Subject: RE: Legal analysis of Gelles case

PRIVILEGED AND CONFIDENTIAL

Many directions here.....

I don't think anyone would argue against such a Director action (but you never know), but the usual process in the past when the problem was in a logical/factual (i.e. merits) flaw was for legal counsel to point out to the Committee why voting a violation was wrong/indefensible/unwise/unfair, etc. I'm not saying that there is not a way to do it by Director action, just that we had always managed to avoid a direct, "you can't rule on this one because of staff/legal counsel views of the merits." Also, in a previous version of the rules, there was an avenue for closing without committee review (1985/91 Rules 7.31 "Closure by the Chair and Administrative Officer"). This was rolled into the cause for action determination (the exceptions in Part V Section 5.5), and it was realized, particularly in matters in which there had been no PI, that there was still a need for closing without EC review. Since the Committee was very busy in those years, they voted the policy to allow the monitor and investigator to close a matter.

The precedent for staff closing a matter without any committee action/policy has been related to jurisdiction or procedural flaw. The classic example here is discovery that the member had in fact resigned

due to nonpayment of dues and had been incorrectly barred/and or assumed not to have resigned.

Since this is a complicated matter, it offers possibilities as well as problems. For example, was the process of opening (did I comment on that before, Steve?) sufficiently flawed to warrant "unopening" based on a procedural flaw (is there any precedent for that - more often we would simply close such a matter with EC vote if needed) and then to reconsider cause for action? Is that really practical without changing the investigator?

Stan

-----Original Message-----

From: Behnke, Stephen

To: Childress-Beatty, Lindsay; Jones, Stanley E.

Sent: 8/5/02 1:20 PM

Subject: RE: Legal analysis of Gelles case

PRIVILEGED AND CONFIDENTIAL

I am very mixed on this case. On the one hand, it raises an interesting and provocative issue, about the role of psychologists in investigations. On the other, I am not at all sure that the Ethics Committee is the proper venue for this issue to be addressed.

Lindsay's memo conveys a deep skepticism about the case, and the Ethics Committee will read the memo. I could exercise my authority as Director, and say the case cannot go forward. As discussed below, that is an avenue not without its complexities. As an alternative, I could insist that, pursuant to legal counsel's review, certain charges be dropped--I don't think there is any question Lindsay/I have that authority. Then, the remaining charges would go to the Committee. Certainly I would want to call to the readers' attention the legal memo.

Perhaps one place to start is to have the Monitor read Lindsay's memo, and make a recommendation about whether the case should be closed.

Thoughts?

Steve

-----Original Message-----

From: Childress-Beatty, Lindsay

Sent: Monday, August 05, 2002 1:08 PM

To: Jones, Stanley E.

Cc: Behnke, Stephen

Subject: RE: Legal analysis of Gelles case

Stan - Thanks again for your comments. On the recharging - I was under the impression that the information on the covert taping came after the charge letter was sent. (We may want to consider my amending my memo slightly due to this error.) Thanks also for clarifying when a recharge can and cannot happen.

This "policy question" issue is a difficult one. One could argue that the Director always has discretion (and that investigators always act on his behalf) or that the rule because passed by the EC must be followed and the investigator only has final say. In this case, it may be a tough one! Hopefully this can all be resolved without deciding this question.

Lindsay

-----Original Message-----

From: Jones, Stanley E.

Sent: Monday, August 05, 2002 12:25 PM

To: Childress-Beatty, Lindsay

Cc: Behnke, Stephen

Subject: RE: Legal analysis of Gelles case

Legally Privileged & Confidential

Very nice review. I say that with total objectivity and not because I agree with your conclusions!

Two issues that I do not believe are relevant to the bottom line, but might be in other matters.

You suggested that he could not be recharged with 8.03 regarding the covert taping. The information regarding authorization for the covert taping and his having raised the issue was submitted during the PI (see 18F). Since he did (and this was not, therefore, information discovered during the investigation of the charges brought in the later charge letter), I agree that there could be no recharge under a different standard regarding that behavior. Had he submitted this after the charge letter was sent, it would open the possibility of a recharge under Part V Section 6.1.3, "Issuance of New Charge Letter to Conform to Evidence Discovered During Investigation."

Regarding the statement that "Whether this charge should go forward to the Committee becomes a policy question for the Ethics Office." I agree that this is an accurate statement as far as it goes, but would note that it is not just a matter of office policy. Once a case is opened, it must be closed under the rules. Here the question is whether it can be closed without going to the Committee (I assume; if it goes to the EC, they can simply vote to close it). The most likely Committee policy for such a matter is titled "Closing Cases Without Committee Review" and states "The Committee adopted a nonconfidential policy that a monitor may recommend that a case be dismissed at any point during the investigation if the monitor believes that the Committee cannot reasonably find a violation. If the investigator agrees, the matter will be closed. If the case is closed, the monitor and investigator may issue an educative letter. If the investigator does not agree to close the case, the case will continue and be resolved by the Committee. 97-03-CF-13."

I assume this policy has not been changed recently. The actual practice was for the investigator to point out this option to the monitor. Here, "cannot reasonably find" might include the factual judgments that left these are charges to still be reviewed.

Stan

-----Original Message-----

From: Childress-Beatty, Lindsay

To: Jones, Stanley E.

Sent: 8/5/02 9:54 AM

Subject: FW: Legal analysis of Gelles case

Stan - Steve aksed me to send this to you. Lindsay

> -----Original Message-----
>From: Childress-Beatty, Lindsay
>Sent: Friday, August 02, 2002 2:34 PM
>To: Behnke, Stephen; Carliner, Deborah
>Cc: Gilfoyle, Nathalie
>Subject: Legal analysis of Gelles case
>
>Steve and Debbie - Here is my legal analysis of the various charges
>against Gelles. I think some of the charges are clearly not legally
>supportable. I believe that the other charges are also relatively weak
>but I cannot unequivocally say that they must be dropped. Whether or
>not to proceed with them becomes a policy question for your office.
>However, I think the relative weakness of the remaining charges is a
>factor which should be a part of your analysis.
><<militaryinvestigationhypnosis.doc>>
>
>Lindsay
>
>Lindsay Childress-Beatty, M.S., J.D.
>Deputy General Counsel
>American Psychological Association
>750 First Street, NE
>Washington, D.C. 20002-4242
>(202) 312-6493 Telephone
>(202) 336-6069 Facsimile
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Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Saturday, June 24, 2006 11:28:07 PM
Recipient: Olivia Moorehead-Slaughter [REDACTED]
Subject: A message and our talk

Hi Olivia,

I think I'm likely going to drive to Boston tomorrow, so I'll be in the car all morning and early afternoon if you'd like to call [REDACTED]

I think it's time for you to send a preliminary message to the group (Judy, Corann, Linda, Andy, Doug). I think the message is exactly what you said so eloquently earlier today, that you have become very concerned about the tone of the discussions. I also think you could convey a serious concern about what effect the manner in which the issue is getting discussed will have on relationships between different groups within APA. Out of these concerns, you would like to raise the possibility that they reach out to Division 19, and see whether the two divisions might fashion a joint resolution on this issue. Such a collaboration would send a very powerful signal to the association, about how to work together toward a shared goal. Something like:

Sample to consider:

Dear Judy and Corann,

I'm very glad that we'll be able to speak this week; Steve will take care of the logistics of our call, scheduled for Wednesday at 1 pm, East Coast time. I'd like to talk about the substance of the Resolution and to cover some issues that we addressed earlier, for example the role of other documents in an APA resolution.

There is something else I'd like us to talk about as well. I have become increasingly concerned about the tone of this discussion. My worry is that our colleagues are less willingly to listen to one another, and less inclined to assume that members of APA aspire to the highest ethical behavior. I am also concerned that virtually an entire segment of our membership is being cast in a particular light, and are now at risk of become the targets of strong feelings having more to do with political inclinations than with how psychologists may behave in an ethical manner. As these discussions are evolving, I cannot say with confidence that relationships between groups within APA will not suffer long-term harm.

For this reason, I would like to raise the possibility that you consider reaching out to Division 19 and exploring whether they would be interested in collaborating on this Resolution with you. Such collaboration would send a very powerful message to the entire Association, about working together, about listening to one another, and about the confidence we have in ourselves as a group. I would be more than happy to facilitate the process however I am able, and I know Steve would as well. I am convinced that our areas of agreement are far larger than our disagreements, but until we're working together that will not become apparent. I think your Resolution offers a wonderful opportunity for the APA community.

I look forward to hearing from you. Warmly,

Olivia

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Wednesday, June 21, 2006 4:36:58 PM
Recipient: 'Banks, Louie M. COL' <louie.morgan.banks@us.army.mil>
Subject: FW: [COR] Petition on APA Ethics

Morgan, you are really doing a yeoman's worth of work helping us out. I haven't figured out how I'm going to repay you, but trust me, I'm working on it.

I am growing increasingly concerned about a petition (link below). I do not believe that the statements it makes are correct, and would like confirmation of that, ideally by someone who can render an authoritative legal statement.

Can you help us out, or know someone who can?

Thanks Morgan,

Steve

-----Original Message-----

From: Council of Representatives [<mailto:COR@LISTS.APA.ORG>] On Behalf Of Dr. Trish Crawford
Sent: Tuesday, June 20, 2006 5:50 PM
To: COR@LISTS.APA.ORG
Subject: [COR] Petition on APA Ethics

Subject: Petition on APA Ethics

<http://www.thepetitionsite.com/takeaction/483607021>

Well, it turns out that indeed an online petition for psychologists has been launched, it has been up for 5 days, and has 660 people who have signed on (you can view the names if you go to the website). They say their goal is to obtain 50,000 names.

Would anyone care to comment on what they see might be the possible responses from the Board and/or Council and/or staff in dealing with such a petition?

Has such a petition from members ever been undertaken before? And if so, what were the results?

I knew it was going to be very hot in New Orleans in August, but I wasn't exactly imagining this kind of heat. Now, I am.

Trish Crawford, Ph.D.
BCPA

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Wednesday, March 14, 2007 10:38:40 AM
Recipient: Willenz, Pamela <pwillenz@apa.org>
Subject: RE: A question

Thank you, Pam!

From: Willenz, Pamela
Sent: Wednesday, March 14, 2007 10:38 AM
To: Behnke, Stephen
Subject: RE: A question

Steve,

I have called (and emailed) the globe about making a pdf of this article and distributing it. It may take a day or two for them to respond.

pam

Pamela Willenz
Manager
APA Public Affairs Office
202-336-5707
pwillenz@apa.org

From: Behnke, Stephen
Sent: Wednesday, March 14, 2007 12:42 AM
To: Farberman, Rhea
Cc: Willenz, Pamela
Subject: A question

Rhea, when Mike Gelles sends his letter to Neil Altman and Olivia, Olivia is going to distribute to individuals and groups working on the resolution. While many people have heard of Mike, many have not. Do you think it would make sense, when Olivia forwards the letter (the letter will be a pdf file), for her also to forward the Boston Globe article below (again as a pdf), for people who don't know about Mike to read and know who he is/what he did? It will definitely set a context for the letter...

Thanks for letting me know,

Steve

http://www.boston.com/news/world/latinamerica/articles/2005/03/16/abuse_led_navy_to_consider_pulling_cuba_in_mode=PF

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Wednesday, March 14, 2007 12:42:16 AM
Recipient: Farberman, Rhea <rfarberman@apa.org>
Cc: Willenz, Pamela <pwillenz@apa.org>
Subject: A question

Rhea, when Mike Gelles sends his letter to Neil Altman and Olivia, Olivia is going to distribute to individuals and groups working on the resolution. While many people have heard of Mike, many have not. Do you think it would make sense, when Olivia forwards the letter (the letter will be a pdf file), for her also to forward the Boston Globe article below (again as a pdf), for people who don't know about Mike to read and know who he is/what he did? It will definitely set a context for the letter...

Thanks for letting me know,

Steve

http://www.boston.com/news/world/latinamerica/articles/2005/03/16/abuse_led_navy_to_consider_pulling_cuba_in_mode=PF

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Friday, May 11, 2007 10:01:53 PM
Recipient: 'Abeles, Norman' **PRIVACY REDACTION**
Subject: RE: APA Council

Norm, I trust your judgment a great deal. What you say seems right to me. The resolution will get a few votes, but with no governance group in support, it's very difficult to imagine Council will adopt.

Steve

From: Abeles, Norman **PRIVACY REDACTION**
Sent: Friday, May 11, 2007 10:04 AM
To: Behnke, Stephen
Subject: APA Council

On reflection I think we should be OK at Council in San Francisco. I do think COR members will be positively influenced by the board and committee support we received and will vote down Altman's motion. I will also be interested in what the APA Board of Directors will do. Norm

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Tuesday, August 14, 2007 12:35:21 AM
Recipient: [REDACTED] Larry James
Subject: San Francisco

Larry, I've heard through the grapevine that there is a very strong reaction to your being at Convention and participating in the discussions on item 5. That, to me, is an indication of your influence. Now, I think it's best if you are respectful, measured, clear and low-key in all of your interactions. Your presence will speak volumes. It's entirely possible that folks will try to bait and provoke you.

Since you said in your letter that you were being deployed, I assume it's okay to say that you are at Convention from your deployment—is that correct?

Steve

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Monday, August 13, 2007 10:28:52 PM
Recipient: Larry James
Subject: RE: appointed to council

Larry, that is excellent, excellent news.

From: Larry James
Sent: Monday, August 13, 2007 10:27 PM
To: Behnke, Stephen
Subject: Re: appointed to council

Steve, I forgot to tell you, I have been appointed to Council for the next two years for DIV 38. one of our Reps has resigned!! so the DIV 38 Board of directors appointed me :).

now, I will attend council al day Sunday in an official Capacity :)

Larry

-----Original Message-----

From: Behnke, Stephen <sbehnke@apa.org>
To: Larry James
Sent: Mon, 13 Aug 2007 4:19 pm
Subject: RE: cell phone#

Excellent, thank you.

From: Larry James
Sent: Monday, August 13, 2007 10:18 PM
To: Behnke, Stephen
Subject: Re: cell phone#

PRIVACY REDACTION

-----Original Message-----

From: Behnke, Stephen <sbehnke@apa.org>
To: Larry James
Sent: Mon, 13 Aug 2007 4:04 pm
Subject: cell phone#

Hi Larry,
Could you please send me your [REDACTED] # again—I want to make sure I have it.
Thanks,
Steve

size=2 width="100%" align=center>

AOL now offers free email to everyone. Find out more about what's free from AOL at AOL.com.

<> size=2 width="100%" align=center>

AOL now offers free email to everyone. Find out more about what's free from AOL at AOL.com.

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Monday, August 13, 2007 10:28:02 PM
Recipient: [REDACTED] **Larry James**
Subject: RE: appointed to council

OH WHOA THAT IS EXCELLENT NEWS, MAN, THAT IS FANTASTIC!

From: [REDACTED] **Larry James**
Sent: Monday, August 13, 2007 10:27 PM
To: Behnke, Stephen
Subject: Re: appointed to council

Steve, I forgot to tell you, I have been appointed to Council for the next two years for DIV 38. one of our Reps has resigned!! so the DIV 38 Board of directors appointed me :).

now, I will attend council al day Sunday in an official Capacity :)

Larry

-----Original Message-----

From: Behnke, Stephen <sbehnke@apa.org>
To: [REDACTED] **Larry James**
Sent: Mon, 13 Aug 2007 4:19 pm
Subject: RE: cell phone#

Excellent, thank you.

From: [REDACTED] **Larry James**
Sent: Monday, August 13, 2007 10:18 PM
To: Behnke, Stephen
Subject: Re: cell phone#

PRIVACY REDACTION
[REDACTED]

-----Original Message-----

From: Behnke, Stephen <sbehnke@apa.org>
To: [REDACTED] **Larry James**
Sent: Mon, 13 Aug 2007 4:04 pm
Subject: cell phone#

Hi Larry,
Could you please send me your [REDACTED] again—I want to make sure I have it.
Thanks,
Steve

size=2 width="100%" align=center>

AOL now offers free email to everyone. Find out more about what's free from AOL at AOL.com.

<> size=2 width="100%" align=center>

AOL now offers free email to everyone. Find out more about what's free from AOL at AOL.com.

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Sunday, February 17, 2008 7:43:59 PM
Recipient: [REDACTED] Melba Vasquez ; Linda Campbell
Subject: RE: Letter to Ken Pope (still confidential)

Melba, do you think it would be possible for you to ask Ken whether he has specific language in mind and, if so, whether he could send it to me?

Steve

From: [REDACTED] Melba Vasquez
Sent: Sunday, February 17, 2008 6:34 PM
To: Behnke, Stephen; Linda Campbell; Melba Vasquez
Subject: Re: Letter to Ken Pope (still confidential)

Steve, I have clients from 9 am to 7 pm central time. But I do have 15 minutes between clients...I end on the hour, and begin again 15 after the hour...If you and Linda can talk in that window of time, let me know when and I'll be watching for the call...the direct line at the office is [REDACTED]; if no one answers, it'll roll over to the voice mail (I'm [REDACTED]).

Or in the evening, after 7:30 central time...I'll be packing, as I leave to DC early Tuesday morning.

Also, I reread and have a couple of other comments after paragraph 3.

Mlba

In a message dated 2/17/08 1:12:24 PM, sbehnke@apa.org writes:

Hi Linda and Melba,

I've addressed Melba's points about the letter. Would you all be free at any point tomorrow to touch base by phone, for just a few minutes about this?

Thanks,

Steve

Melba J. T. Vasquez, PhD, ABPP
Board of Directors, American Psychological Association
Past-President, Texas Psychological Association
Anderson House at Heritage Square

[REDACTED]

[REDACTED]

Ideas to please picky eaters. Watch video on AOL Living.
([http://living.aol.com/video/how-to-please-your-picky-eater/rachel-campos-duffy/2050827?
NCID=aolcmp00300000002598](http://living.aol.com/video/how-to-please-your-picky-eater/rachel-campos-duffy/2050827?NCID=aolcmp00300000002598))

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Thursday, July 10, 2008 5:05:04 PM
Recipient: Anderson, Norman <NAnderson@apa.org>;Garrison, Ellen
<egarrison@apa.org>;Strassburger, Judy <jstrassburger@apa.org>;Gilfoyle,
Nathalie <ngilfoyle@apa.org>;Honaker, Michael
<mhonaker@apa.org>;Farberman, Rhea <rfarberman@apa.org>
Subject: Con statement rebuttal

Bob has reached out regarding the con statement rebuttal. The rebuttal is of the same quality as the initial con statement. Ellen and I will offer suggestions that Bob and his colleagues are free to use, or not, as they see fit, as we did with the original statement.

Thank you,

Steve

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Friday, June 27, 2008 11:35:18 PM
Recipient: 'Joel Dvoskin' **PRIVACY REDACTION**
Subject: APA statement

Joel,

Will you be around for a call on Saturday? The Board reviewed the process for choosing the con writer, and decided that the con statement would have a single author. A member of Council and former APA president has been chosen. That person will work with a group of people to write the statement. Barry Anton, a member of the Board of Directors, would like to speak with you to ask that you be a part of this team. Of course, I think the statement will be much stronger with your involvement.

I really apologize for reaching out to you before this had all been settled. This Bylaw provision has never been used before, and so APA is working its way through this process for the first time. I feel very bad about the effort you put into the statement, but I know the others would be extremely interested in your draft, and your skills as a writer and grasp of the subject matter will be immediately obvious to them.

Joel, I really appreciate your response to my reaching out to you, and next time we get together dinner's on me.

Thanks again,

Steve

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Thursday, June 26, 2008 11:13:26 AM
Recipient: Garrison, Ellen <egarrison@apa.org>; Anderson, Norman <NAnderson@apa.org>; Gilfoyle, Nathalie <ngilfoyle@apa.org>; Farberman, Rhea <rfarberman@apa.org>; Strassburger, Judy <jstrassburger@apa.org>; Honaker, Michael <mhonaker@apa.org>
Subject: RE: Con statement writer STAFF DISCUSSION

I don't have it...Joel read it to me, but he didn't send it (and I didn't ask, given our earlier discussions about not wanting staff to appear overly involved in the process).

Should I ask Joel if he would send me a draft? He'll want to know specifically who is going to see it...if I do ask, should I preface the request with raising the possibility that we will have editorial suggestions? And if he indicates that he would like to reach out to the sponsors, what should I say?

How about the following:

Dear Joel,

Thanks so much for your patience and your willingness to consider writing the con statement. As I mentioned, there are ongoing discussions about the process by which the con writer will be chosen. As that process moves forward, I wonder whether you would send the draft you read to me last Friday. It would be shared with APA staff and two members of the Board of Directors, and would not be distributed further without your permission.

Thanks for considering,

Steve

From: Garrison, Ellen
Sent: Thursday, June 26, 2008 10:47 AM
To: Behnke, Stephen; Anderson, Norman; Gilfoyle, Nathalie; Farberman, Rhea; Strassburger, Judy; Honaker, Michael
Subject: RE: Con statement writer STAFF DISCUSSION

Steve, would you please forward Joel's draft – naturally we will all keep it in the closest confidence.

Ellen

From: Behnke, Stephen
Sent: Thursday, June 26, 2008 10:12 AM
To: Anderson, Norman; Gilfoyle, Nathalie; Garrison, Ellen; Farberman, Rhea; Strassburger, Judy; Honaker, Michael
Subject: RE: Con statement writer STAFF DISCUSSION

I'm fine with any of these possibilities, but I think it's going to be something of a delicate conversation with Joel either to: tell him how we'd like him to edit his draft, or ask if another author can use portions of his draft. Not saying it can't or shouldn't be done at all, but it will not be an uncomplicated call.

Steve

From: Anderson, Norman
Sent: Thursday, June 26, 2008 10:04 AM
To: Gilfoyle, Nathalie; Garrison, Ellen; Farberman, Rhea; Behnke, Stephen; Strassburger, Judy; Honaker, Michael

Subject: RE: Con statement writer STAFF DISCUSSION

Personally, I like the idea of Bob, since he has been on Council and has been following the issues. He is also a Past-President. I wonder if Joel would mind allowing Bob (or whomever the con writer is) to use portions of his draft?

I think we need to pose these two options to Alan ASAP.

Norman Anderson, Ph.D.
Chief Executive Officer
American Psychological Association
750 First Street, NE
Washington, DC 20002
(202) 336-6080
(202) 336-6069 (fax)
www.apa.org

From: Gilfoyle, Nathalie
Sent: Thursday, June 26, 2008 10:01 AM
To: Garrison, Ellen; Farberman, Rhea; Behnke, Stephen; Anderson, Norman; Strassburger, Judy; Honaker, Michael
Subject: RE: Con statement writer STAFF DISCUSSION

I'd love to see it too.

Nathalie

From: Garrison, Ellen
Sent: Thursday, June 26, 2008 9:55 AM
To: Farberman, Rhea; Behnke, Stephen; Gilfoyle, Nathalie; Anderson, Norman; Strassburger, Judy; Honaker, Michael
Subject: RE: Con statement writer STAFF DISCUSSION

Either option sounds good to me. Would it be possible to see Joel's draft?

Ellen

From: Farberman, Rhea
Sent: Thursday, June 26, 2008 9:49 AM
To: Behnke, Stephen; Gilfoyle, Nathalie; Anderson, Norman; Strassburger, Judy; Honaker, Michael; Garrison, Ellen
Subject: RE: Con statement writer STAFF DISCUSSION

Hi all. We really need to move on this – pro/con deadline is in 11 days. In my mind, and considering all the issues, I think our best options are:

1. We ask Joel to tone down the revise and resubmit aspect of his draft and just address the problems with the petition as drafted.
2. Ask Bob Resnick to draft the con statement. Bob can be a bit hard-headed but he knows these issues and is seen as an advocate for psychologists.

Rhea

From: Behnke, Stephen

Sent: Wednesday, June 25, 2008 8:33 PM

To: 'Barry S Anton'; Gilfoyle, Nathalie; Anderson, Norman; Farberman, Rhea; Strassburger, Judy; Honaker, Michael; Garrison, Ellen

Subject: RE: Con statement writer

Hi Everyone,

I'm not entirely sure where we are in terms of the con writer selection process. However that process unfolds, I think we should be mindful that we first reached out to Joel Dvoskin and he penned a draft, so if we end up choosing someone other than Joel let's be sure to express our appreciation to him, whoever makes that contact.

One thought—given that there is a lot that is very good in Joel's draft, would we want to consider asking Joel whether he would be willing to work with others?

Steve

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Saturday, June 21, 2008 10:29:56 PM
Recipient: 'Joel Dvoskin' <Privacy Redaction >
Subject: Statement

Joel, we need to hit the "pause" button on the con statement. This is the first time this particular clause in the APA Bylaws (that establishes the process by which a petition goes forward to a vote by the membership) has been invoked, so we are working our way through a number of questions of first impression. The Board is going to review the process by which the con statement writer is chosen, to address a concern that the relevant constituencies have not been adequately consulted.

Obviously, this has nothing to do with you, and everyone here thinks you're both brilliant and exceptionally eloquent. The issue is rather ensuring that key constituencies don't feel left out of the process.

I'll be back in touch in a couple of days.

Thanks, Joel; I apologize for the uncertainty,

Steve

PRIVACY REDACTION

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Wednesday, June 18, 2008 8:14:51 PM
Recipient: Gilfoyle, Nathalie <ngilfoyle@apa.org>
Subject: RE: Third anniversary
Attachments: Division41PresidentialAddress0807.pdf

See the final 2 pages...

From: Gilfoyle, Nathalie
Sent: Wednesday, June 18, 2008 7:27 PM
To: Behnke, Stephen
Subject: FW: Third anniversary

Cell phone below. I think it is current.
Do you have a copy of his talk on being an incrementalist? If so would you send it on? Thanks

From: Joel Dvoskin [Privacy Redaction]
Sent: Monday, September 24, 2007 9:22 PM
To: Gilfoyle, Nathalie
Subject: Re: Third anniversary

I am in Miami consulting. Call me tonight PRIVACY REDACTION or call me Wednesday at PRIVACY REDACTION.

Thanks.
Joel

Joel A. Dvoskin, Ph.D., ABPP
Diplomate in Forensic Psychology
University of Arizona College of Medicine
Past President, American Psychology-Law Society (APA Division 41)
Past President, Psychologists in Public Service (APA Division 18)

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Wednesday, June 18, 2008 3:52:44 PM
Recipient: 'Joel Dvoskin' <Privacy Redaction >
Subject: A call

Joel, would you be available for a phone call? There is an APA-related matter I would very much like to discuss with you, at your earliest convenience.

Thanks so much,

Steve

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Saturday, February 14, 2009 4:10:23 PM
Recipient: Garrison, Ellen <egarrison@apa.org>
Subject: Big Picture

Ellen, just to keep us centered, because at times I feel I'm losing focus in all this (and I can only imagine what your experience is like), if the Board recommends 1. Action complete; 2. Title; 3. Receive the Report, and that's what Council does, we're going to be fine on all fronts. There will be people who aren't thrilled, but we'll be fine.

Steve

Sender: Olivia Moorehead-Slaughter [Privacy Redaction]
Sent: Friday, March 24, 2006 4:00:55 PM
Recipient: [Redacted]
Cc: [Redacted]; Behnke, Stephen
</O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Subject: our phone call

Dear Corann,

Thank you for your message. Steve (who is right now on his way to the California Psychological Association Convention) and I very much look forward to speaking with you.

The Ethics Committee was most interested in learning about your process of writing the resolution, and how you crafted the three resolves in the language you did. As an example, the second resolve could be interpreted in a manner that would preclude a significant portion of current forensic practice, and the Committee was unsure of whether that was your intent. Given the complexity of the issues, it probably makes sense to begin with our discussion on Monday evening, and then to schedule a follow-up discussion if we think that would be helpful.

All best,

Olivia

Sender: Mihaly, Martha </O=APA/OU=DC/CN=RECIPIENTS/CN=MYM>
Sent: Thursday, August 08, 2002 2:50:52 PM
Recipient: Behnke, Stephen <sbehnke@apa.org>
Subject: Gelles memo
Attachments: Gellesmemo0809.doc



*Martha Mihaly, MS
Senior Investigator
American Psychological Association
Office of Ethics
202-336-5930
fax: 202-336-5997
mmihaly@apa.org*

*This email is intended only for the use of the individual or entity to which it is addressed, and may contain information that is privileged and confidential, and exempt from disclosure under applicable law. If the reader of this email is not the intended recipient or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please notify me immediately at mmihaly@apa.org
Thank you.*

August 9, 2002

CONFIDENTIAL MEMORANDUM

TO: Members of the Ethics Committee: Steve Sparta, PhD; Michael Roberts, PhD; Peter Mayfield, PhD; Bill McKeachie, PhD; Michael Gottlieb, PhD; Carolyn Block, PhD; Ed Nottingham, PhD; Anne Hess, PhD; Linda Campbell, PhD; Lisa Callahan, PhD; Elizabeth Swenson, PhD, JD; June Grant Wolf, PhD

FROM: Steve Behnke, JD, PhD, Director
Office of Ethics

RE: Michael Gelles case

Attached please find a memorandum from APA's Deputy General Counsel, Lindsay Childress-Beatty, concerning the Michael Gelles case. Please note that the memo indicates certain "in that's" and charges are not legally supportable. These are "in thats" numbers 1 and 3 from standards 1.15 and 1.16(a); standard 5.01(a); and standard 5.01(c). These "in thats" and standards should therefore not be considered for violation as you review the case materials.

Thank you

Enc: memo dated from Lindsay Childress-Beatty

SB/mm

Sender: Carliner, Deborah </O=APA/OU=DC/CN=RECIPIENTS/CN=DCARLINER>
Sent: Tuesday, September 17, 2002 10:44:46 AM
Recipient: Gilfoyle, Nathalie <ngilfoyle@apa.org>
Cc: Behnke, Stephen <sbehnke@apa.org>
Subject: gelles

I know that Steve has asked you if you have any questions about this case, and I assume since we haven't heard from you that you do not. However, I would like to get your thoughts on it now that you've seen the tape.

Are you free sometime this afternoon or on Thursday?

Thanks.

Debbie

Sender: Carliner, Deborah </O=APA/OU=DC/CN=RECIPIENTS/CN=DCARLINER>
Sent: Sunday, September 15, 2002 10:11:11 PM
Recipient: Behnke, Stephen <sbehnke@apa.org>
Subject: RE: Nathalie

[Now that she's seen the tape, I think it would be helpful to discuss with her her thoughts.](#)

-----Original Message-----

Behnke, Stephen
Thursday, September 12, 2002 11:50 PM
Carliner, Deborah
RE: Nathalie

Thanks, Debbie--I will be sure to remember to ask.

Nathalie, by the way, will ask me what the meeting is for--what should I tell her?

Steve

-----Original Message-----

From: Carliner, Deborah
To: Behnke, Stephen
Sent: 9/12/02 5:14 PM
Subject: Nathalie

Since I suggested it as you were leaving, I thought it could easily have slipped your mind. Could we meet with Nathalie some time on Tuesday to talk about Gelles. If she can't do it then, I will be here Thursday even though you will not be.

See you on Tuesday.

Debbie

Sender: Dunivin, Debra L LTC WRAMC-Wash DC
<Debra.Dunivin@NA.AMEDD.ARMY.MIL>
Sent: Monday, June 12, 2006 5:23:40 PM
Recipient: Behnke, Stephen
</O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>;banks1@soc.mil
Subject: BSC Ethics Curriculum Development

Steve/ Morgan:

Could I impose upon your schedule for a few more hours on 6 July 06 to discuss what modifications, if any, we might need to make to the BSC curriculum given that our students will include psychiatrists as well as psychologists and psych techs. We can work it around your other commitments that day and would make for a long day of activities here at WRAMC... I don't imagine that it would require more than an hour or two, actually. And then there's always the "over lunch" option!

Let me know if you think we need any other participants.

Thanks,
Debra

DEBRA DUNIVIN
LTC MS USA
Deputy Chief, Dept of Psychology
Walter Reed Army Medical Center
202/782-5917; DSN 662-5917
Debra.Dunivin@na.amedd.army.mil

Sender: Morgan Banks
Sent: Thursday, June 15, 2006 6:05:04 AM
Recipient: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Subject: Re: (no subject)

In a message dated 6/15/2006 12:16:20 A.M. Eastern Daylight Time, sbehnke@apa.org writes:

Morgan, thanks so much. I have tried to soften the language in paragraph #5—do you think it works?

From: Morgan Banks
Sent: Wednesday, June 14, 2006 7:52 PM
To: Behnke, Stephen
Subject: Re: (no subject)

In a message dated 6/14/2006 7:30:30 P.M. Eastern Daylight Time, sbehnke@apa.org writes:

Hi Morgan, here it is...

<<MonitorstoryJulAug 06.doc>>

Steve,\

Here are my thoughts. More to follow tomorrow.

Morgan

Steve,

I am much more comfortable with this paragraph. I have no concerns about the first statement in the paragraph. We may get questions on this topic, and we probably still need to have talking points ready that answers the inevitable questions.

Morgan

Sender: Olivia Moorehead-Slaughter <Privacy Redaction >
Sent: Monday, July 10, 2006 11:48:06 AM
Recipient: Linda Woolf ; Corran Okorodudu ; Judith Van Hoorn
Cc: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Subject: Ethics Committee

Dear Linda, Judy, and Corann,

Thank you for all your hard work. You are doing an enormous service to APA. I will ask the Ethics Committee to review your Resolution. The Committee will make a determination regarding whether anything in the Resolution is inconsistent with the *Ethical Principles of Psychologists and Code of Conduct* (2002). If nothing in the Resolution is inconsistent with the APA Ethics Code, the Ethics Committee will recommend that the Resolution move forward in the APA Governance process. I will have the Committee address this issue as expeditiously as possible.

Warmly,

Olivia

Sender: Larry James
Sent: Tuesday, August 14, 2007 5:17:13 AM
Recipient: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Subject: Re: San Francisco

yeap, no problemo.

I'll will be calm, respectfull and measured at all times.

PRIVACY REDACTION

-----Original Message-----

From: Behnke, Stephen <sbehnke@apa.org>

To: Larry James

Sent: Mon, 13 Aug 2007 6:35 pm

Subject: San Francisco

Larry, I've heard through the grapevine that there is a very strong reaction to your being at Convention and participating in the discussions on item 5. That, to me, is an indication of your influence. Now, I think it's best if you are respectful, measured, clear and low-key in all of your interactions. Your presence will speak volumes. It's entirely possible that folks will try to bait and provoke you.

Since you said in your letter that you were being deployed, I assume it's okay to say that you are at Convention from your deployment—is that correct?

Steve

AOL now offers free email to everyone. Find out more about what's free from AOL at <<http://www.aol.com?ncid=AOLAOF00020000000437>> AOL.com.

Sender: Larry James
Sent: Monday, August 13, 2007 10:27:19 PM
Recipient: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Subject: Re: appointed to council

Steve, I forgot to tell you, I have been apointed to Council for the next two years for DIV 38. one of our Reps has resigned!! so the DIV 38 Board of directors appointed me :).

now, I will attend council al day Sunday in an official Capacity :)

Larry

-----Original Message-----

From: Behnke, Stephen <sbehnke@apa.org>

To: Larry James

Sent: Mon, 13 Aug 2007 4:19 pm

Subject: RE: cell phone#

Excellent, thank you.

From: Larry James | Larry James]

Sent: Monday, August 13, 2007 10:18 PM

To: Behnke, Stephen

Subject: Re: cell phone#

PRIVACY REDACTION

-----Original Message-----

From: Behnke, Stephen <sbehnke@apa.org>

To: Larry James

Sent: Mon, 13 Aug 2007 4:04 pm

Subject: cell phone#

Hi Larry,

Could you please send me your PRIVACY REDA again—I want to make sure I have it.

Thanks,

Steve

size=2 width="100%" align=center>

AOL now offers free email to everyone. Find out more about what's free from AOL at

<<http://www.aol.com/?ncid=AOLAOF00020000000437>> AOL.com.

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<<http://www.aol.com?ncid=AOLAOF00020000000437>> AOL.com.

Sender: Anderson, Norman </O=APA/OU=DC/CN=RECIPIENTS/CN=NBA>
Sent: Thursday, June 26, 2008 11:49:56 AM
Recipient: Farberman, Rhea <rfarberman@apa.org>; Strassburger, Judy <jstrassburger@apa.org>; Behnke, Stephen <sbehnke@apa.org>; Garrison, Ellen <egarrison@apa.org>; Gilfoyle, Nathalie <ngilfoyle@apa.org>; Honaker, Michael <mhonaker@apa.org>
Subject: RE: Con statement writer STAFF DISCUSSION

Good point. Staff should not be seen as helping to craft the con statement.

Norman Anderson, Ph.D.
Chief Executive Officer
American Psychological Association
750 First Street, NE
Washington, DC 20002
(202) 336-6080
(202) 336-6069 (fax)
www.apa.org

From: Farberman, Rhea
Sent: Thursday, June 26, 2008 11:37 AM
To: Strassburger, Judy; Behnke, Stephen; Garrison, Ellen; Anderson, Norman; Gilfoyle, Nathalie; Honaker, Michael
Subject: RE: Con statement writer STAFF DISCUSSION

I agree. We need to be really careful about asking to review drafts. My assumption was that we would not be reviewing drafts of the con statement unless asked to do so by the author.

If Joel's authorship is this complicated why not go with Bob Resnick?

Rhea

From: Strassburger, Judy
Sent: Thursday, June 26, 2008 11:28 AM
To: Behnke, Stephen; Garrison, Ellen; Anderson, Norman; Gilfoyle, Nathalie; Farberman, Rhea; Honaker, Michael
Subject: RE: Con statement writer STAFF DISCUSSION

My two cents, is that we should decide which way we are going prior to asking Joel for anything. Judy

Judy A. Strassburger
Executive Director, Governance Affairs
American Psychological Association
750 First Street NE
Washington, DC 20002-4242
Tel: (202) 336-6088 | Fax: (202) 336-6157
email: jstrassburger@apa.org | www.apa.org

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Sent: Thursday, June 26, 2008 11:13 AM
To: Garrison, Ellen; Anderson, Norman; Gilfoyle, Nathalie; Farberman, Rhea; Strassburger, Judy; Honaker, Michael
Subject: RE: Con statement writer STAFF DISCUSSION

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Thanks for considering,

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Ellen

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Subject: RE: Con statement writer STAFF DISCUSSION

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www.apa.org

From: Gilfoyle, Nathalie

Sent: Thursday, June 26, 2008 10:01 AM

To: Garrison, Ellen; Farberman, Rhea; Behnke, Stephen; Anderson, Norman; Strassburger, Judy; Honaker, Michael

Subject: RE: Con statement writer STAFF DISCUSSION

I'd love to see it too.

Nathalie

From: Garrison, Ellen

Sent: Thursday, June 26, 2008 9:55 AM

To: Farberman, Rhea; Behnke, Stephen; Gilfoyle, Nathalie; Anderson, Norman; Strassburger, Judy; Honaker, Michael

Subject: RE: Con statement writer STAFF DISCUSSION

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Ellen

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To: Behnke, Stephen; Gilfoyle, Nathalie; Anderson, Norman; Strassburger, Judy; Honaker, Michael; Garrison, Ellen

Subject: RE: Con statement writer STAFF DISCUSSION

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Sender: Anderson, Norman </O=APA/OU=DC/CN=RECIPIENTS/CN=NBA>
Sent: Saturday, June 21, 2008 3:35:54 PM
Recipient: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>;Garrison, Ellen </O=APA/OU=DC/CN=RECIPIENTS/CN=EGG>;Strassburger, Judy </O=APA/OU=DC/CN=RECIPIENTS/CN=JAS>;Honaker, Michael </O=APA/OU=DC/CN=RECIPIENTS/CN=MYH>;Gilfoyle, Nathalie </O=APA/OU=DC/CN=RECIPIENTS/CN=NPG>;Farberman, Rhea </O=APA/OU=DC/CN=RECIPIENTS/CN=RZF>
Subject: RE: Discussion with Joel Dvoskin

Yes.

Norman B. Anderson, Ph.D.
Chief Executive Officer
American Psychological Association
750 First Street, NE
Washington, DC 20002
(202) 336-6080
(202) 336-6069 fax
nanderson@apa.org
www.apa.org

From: Behnke, Stephen
Sent: Fri 6/20/2008 5:30 PM
To: Anderson, Norman; Garrison, Ellen; Strassburger, Judy; Honaker, Michael; Gilfoyle, Nathalie; Farberman, Rhea
Subject: RE: Discussion with Joel Dvoskin

Barry has just written to ask whether he can contact Joel; I think I should fill him in and recommend that this question be given to the full board.

Does that make sense?

Steve

From: Anderson, Norman
Sent: Friday, June 20, 2008 5:26 PM
To: Behnke, Stephen; Garrison, Ellen; Strassburger, Judy; Honaker, Michael; Gilfoyle, Nathalie; Farberman, Rhea
Subject: RE: Discussion with Joel Dvoskin

Clearly it is up to the Board to determine how the con statement gets written, but I would think someone who is on COR would play a role, given that it is a COR-created policy. I could foresee a "Con-writing team" to provide input into the statement, even if it is authored by one person. Some of Joel's views might be useful there.

Norman B. Anderson, Ph.D.
Chief Executive Officer
American Psychological Association

750 First Street, NE
Washington, DC 20002
(202) 336-6080
(202) 336-6069 fax
nanderson@apa.org
www.apa.org

From: Behnke, Stephen
Sent: Fri 6/20/2008 4:02 PM
To: Garrison, Ellen; Strassburger, Judy; Honaker, Michael; Gilfoyle, Nathalie; Farberman, Rhea
Cc: Anderson, Norman
Subject: RE: Discussion with Joel Dvoskin

All of these are excellent points and speak to why I have been uneasy from the get-go with this process. Also, while I think Joel's draft is extremely well written and very smart, I could imagine Division 19 taking strong exception to not having been consulted, especially if the points the Ellen raises below are not at least brought to the writer's attention.

Steve

From: Garrison, Ellen
Sent: Friday, June 20, 2008 3:58 PM
To: Strassburger, Judy; Behnke, Stephen; Honaker, Michael; Gilfoyle, Nathalie; Farberman, Rhea
Cc: Anderson, Norman
Subject: RE: Discussion with Joel Dvoskin

I agree with Judy about the need for Board involvement. I'm still pondering Joel's approach and its semi-con aspect, while considering Steve's rationale for it..

I think it is also important that the con writer(s) be informed of issues/concerns that might not be readily apparent from the Council queries and a cursory review of the petition, e.g., military placements in such facilities are voluntary, military psychologists might view such an APA policy as potentially punitive even without a clear enforcement mechanism and avoid such placements, and that they would ostensibly not be able to provide health care to detainees in such settings, etc.

Ellen

From: Strassburger, Judy
Sent: Fri 6/20/2008 3:48 PM
To: Behnke, Stephen; Honaker, Michael; Gilfoyle, Nathalie; Farberman, Rhea; Garrison, Ellen
Cc: Anderson, Norman
Subject: RE: Discussion with Joel Dvoskin

Hmmm. This could really present a problem if indeed the Con statement is not seen as a Con statement. I'm afraid there is too much at stake here if it comes out that way. I understand where he is coming from but not sure everyone will. Maybe this is a decision for the Board and not just Barry or Barry may buck it to the Board. After all the Board did say for Steve to make suggestions to the Board. Judy

Judy A. Strassburger

Executive Director, Governance Affairs
[American Psychological Association](#)
750 First Street NE

Washington, DC 20002-4242
Tel: (202) 336-6088 | Fax: (202) 336-6157

email: jstrassburger@apa.org | www.apa.org

[APA 116th Convention - Boston August 14-17](#)

From: Behnke, Stephen

Sent: Friday, June 20, 2008 3:40 PM

To: Honaker, Michael; Strassburger, Judy; Gilfoyle, Nathalie; Farberman, Rhea; Garrison, Ellen

Cc: Anderson, Norman

Subject: Discussion with Joel Dvoskin

I spoke with Joel this afternoon, and he had already written a draft of his statement. He has not contacted anyone. There are two issues:

1. Joel read the draft to me. The draft is ***very*** conciliatory in tone, endorses what Joel believes is the intent behind the petition, while making clear that the current version of the petition has significant problems that speak forcefully against its adoption. I would characterize Joel's draft as having a "revise and resubmit" tone. I myself think that there may be significant benefit to this approach, but it is also important to recognize that some of our members may want to take a much harder line. I also think it is important for us to recognize that the "con" statement, in both substance and tone, will be imputed to APA—there's just no way to distance ourselves from it, and a conciliatory tone might be very helpful in our efforts to mend fences.

2. Joel conveyed his sense that his taking on this role is likely to have professional repercussions. Certainly I think that is correct. He continues to want to reach out to Steven Reisner, Brad Olson, and Ruth Fallenbaum, so he can better understand their goals in writing the petition. Joel's response to my call was "If APA would like me to take on this role, I want to do it in the way that feels right to me." His description today of what he wants to do sounded less like mediation and more as if he wants to reach out in the spirit of understanding the motivations behind the petition.

My recommendation:

I think we should present this to Barry (I could call him), explain the situation, and let Barry make the decision. I've given Barry other possibilities (Louise Douce, Sandy Schulman) and I could add Glenn Ally and Greg Wilmoth. However this unfolds, there will be people who are not happy and I think it's important that this be a board decision. Also, I think that once the person is chosen we need to step back and let him/her write the statement in whatever manner he/she chooses.

Sender: Strassburger, Judy </O=APA/OU=DC/CN=RECIPIENTS/CN=JAS>
Sent: Tuesday, June 17, 2008 2:27:44 PM
Recipient: Gilfoyle, Nathalie <ngilfoyle@apa.org>; Garrison, Ellen <egarrison@apa.org>; Behnke, Stephen <sbehnke@apa.org>
Cc: Farberman, Rhea <rfarberman@apa.org>
Subject: RE: Update

Yes, and namely Steve. Has Steve gotten back to you Nathalie since our meeting? Judy

Judy A. Strassburger | Executive Director
Governance Affairs
American Psychological Association
750 First Street NE, Washington, DC 20002-4242
Tel: (202) 336-6088 | Fax: (202) 336-6157
email: jstrassburger@apa.org | www.apa.org
[APA 116th Convention - Boston August 14-17](#)



Please consider the environment before printing this email.

From: Gilfoyle, Nathalie
Sent: Tuesday, June 17, 2008 2:21 PM
To: Garrison, Ellen; Behnke, Stephen
Cc: Strassburger, Judy; Farberman, Rhea
Subject: RE: Update

I believe they left it to staff. Nathalie

From: Garrison, Ellen
Sent: Tuesday, June 17, 2008 2:18 PM
To: Gilfoyle, Nathalie; Behnke, Stephen
Cc: Strassburger, Judy; Farberman, Rhea
Subject: RE: Update

Nathalie, thanks for sending. Was any guidance provided by the Board as to how the con writers are to be selected? If not, how best for us to proceed?

Ellen

From: Gilfoyle, Nathalie
Sent: Tuesday, June 17, 2008 2:16 PM
To: Behnke, Stephen; Garrison, Ellen
Cc: Strassburger, Judy; Farberman, Rhea
Subject: FW: Update

Steve and Ellen, I just wanted to be sure you had seen this final that went from Barry to Aalbers. Where are you on Con writers?

Nathalie

From: Barry S Anton [Privacy Redaction]
Sent: Monday, June 16, 2008 10:07 PM
To: Dan Aalbers; Strassburger, Judy
Cc: Gilfoyle, Nathalie
Subject: RE: Update

June 16, 2008
Via email

Dear Mr. Aalbers:

I am writing to inform you that Alan Kazdin, PhD, serving in his role as 2008 APA President, has reviewed the June 1, 2008 petition you submitted as required by Article IV, section 5 of the APA Bylaws. As you know, the purpose of this review was to determine if the petition is a "proper motion." This review involved determining that the proposed policy does not constitute a bylaw amendment and is not inconsistent with the APA Certificate of Incorporation or Bylaws. The President, with advice of the APA Board of Directors, concluded that the petition is proper. An important consideration in reaching this conclusion was the understanding that the proposed resolution is not intended to amend the Ethics Code.

Consistent with the provisions of Association Rule 30-3.1 the APA Board then turned to fixing "the time and manner in which the vote is to be conducted." Under the Bylaw provision, the balloting will take place by mailed ballots. In order to balance the petitioner's request that the petition be processed with urgency and the practical matters of producing the ballot etc, the Board set a goal of mailing the petition ballot on or about August 1. The ballot will be sent to the voting membership via third class mail as is customary with all APA ballots. An outside firm will coordinate the ballot mailing and will receive and tabulate the returned ballots. The voting period will be 45 days which sets a timeline to have the voting completed by mid-September. The time required to have the vote tabulated once the voting period has ended is estimated to be 3-5 days. A majority of those voting will determine the outcome of the balloting.

The Board furthermore determined that it would be helpful to have pro and con statements and rebuttals accompany the ballot in addition to an informational preamble (this preamble will address the ballot process and not the substantive issues raised by the petition). The pro and con statements are not to exceed 750 words and the rebuttal statements are limited to 375 words. APA staff will be available to answer questions from those writing the pro and con statements and rebuttals.

The petition sponsors are responsible for selecting an author(s) for the pro statement and rebuttal. The only caveat on this choice of pro statement author is, in accordance with APA editorial policy, the author cannot be a current candidate for the office of APA president; nor can the name of any current candidate be mentioned in the statement. Also please note that URLs are not permitted as part of the pro or con statements or rebuttals.

The pro statement is due to APA no later than July 7. The rebuttal statement will be due to APA on July 15. Both texts should be submitted as a Word document to Garnett Coad, Elections Officer, at: GCoad@apa.org

Please feel free to contact me if you have any questions.

Sincerely,

Barry S. Anton, Ph.D.
Recording Secretary

Sender: Gilfoyle, Nathalie </O=APA/OU=DC/CN=RECIPIENTS/CN=NPG>
Sent: Tuesday, June 17, 2008 1:29:37 PM
Recipient: 'Barry S Anton' <[Privacy Redaction]>;Strassburger, Judy <jstrassburger@apa.org>
Cc: Farberman, Rhea <rfarberman@apa.org>;Behnke, Stephen <sbehnke@apa.org>
Subject: RE: Letter to Aalbers

No problem from my perspective . Per earlier discussions with the Board and then our internal group , we also need to alert Council. I believe Rhea has a plan in place for that. Nathalie

From: Barry S Anton [[Privacy Redaction]]
Sent: Tuesday, June 17, 2008 11:30 AM
To: Strassburger, Judy; Gilfoyle, Nathalie
Subject: RE: Letter to Aalbers

Hi Judy and Nathalie:

I sent the letter to Mr. Aalbers. I'd like to send a copy of the letter to the BoD to keep them apprised. Is that ok?

Best,

Barry

From: Strassburger, Judy [mailto:jstrassburger@apa.org]
Sent: Mon 6/16/2008 8:27 PM
To: Barry S Anton; Farberman, Rhea
Cc: Gilfoyle, Nathalie
Subject: RE: Letter to Aalbers

Yes, I drafted a note for Alan last week and waiting to hear back from him. I just sent a reminder. Judy

From: Barry S Anton [[Privacy Redaction]]
Sent: Monday, June 16, 2008 10:07 PM
To: Farberman, Rhea
Cc: Strassburger, Judy; Gilfoyle, Nathalie
Subject: RE: Letter to Aalbers

Hi Rhea, Judy, and Nathalie:

The draft is fab. I made two small editorial changes, rewriting a prepositional phrase, "2008 APA President" instead of "President of the APA in 2008", and capitalized "word" at the bottom of the letter when you requested a "Word document," as I think it is proper to capitalize when referring to Microsoft Word.

Judy: Were you going to send something to the BoD from Alan outlining my authority to send this?

Best,

Barry

June 16, 2008

Via email

Dear Mr. Aalbers:

I am writing to inform you that Alan Kazdin, PhD, serving in his role as 2008 APA President, has reviewed the June 1, 2008 petition you submitted as required by Article IV, section 5 of the APA Bylaws. As you know, the purpose of this review was to determine if the petition is a "proper motion." This review involved determining that the proposed policy does not constitute a bylaw amendment and is not inconsistent with the APA Certificate of Incorporation or Bylaws. The President, with advice of the APA Board of Directors, concluded that the petition is proper. An important consideration in reaching this conclusion was the understanding that the proposed resolution is not intended to amend the Ethics Code.

Consistent with the provisions of Association Rule 30-3.1 the APA Board then turned to fixing "the time and manner in which the vote is to be conducted." Under the Bylaw provision, the balloting will take place by mailed ballots. In order to balance the petitioner's request that the petition be processed with urgency and the practical matters of producing the ballot etc, the Board set a goal of mailing the petition ballot on or about August 1. The ballot will be sent to the voting membership via third class mail as is customary with all APA ballots. An outside firm will coordinate the ballot mailing and will receive and tabulate the returned ballots. The voting period will be 45 days which sets a timeline to have the voting completed by mid-September. The time required to have the vote tabulated once the voting period has ended is estimated to be 3-5 days. A majority of those voting will determine the outcome of the balloting.

The Board furthermore determined that it would be helpful to have pro and con statements and rebuttals accompany the ballot in addition to an informational preamble (this preamble will address the ballot process and not the substantive issues raised by the petition). The pro and con statements are not to exceed 750 words and the rebuttal statements are limited to 375 words. APA staff will be available to answer questions from those writing the pro and con statements and rebuttals.

The petition sponsors are responsible for selecting an author(s) for the pro statement and rebuttal. The only caveat on this choice of pro statement author is, in accordance with APA editorial policy, the author cannot be a current candidate for the office of APA president; nor can the name of any current candidate be mentioned in the statement. Also please note that URLs are not permitted as part of the pro or con statements or rebuttals.

The pro statement is due to APA no later than July 7. The rebuttal statement will be due to APA on July 15. Both texts should be submitted as a Word document to Garnett Coad, Elections Officer, at: GCoad@apa.org

Please feel free to contact me if you have any questions.

Sincerely,

Barry S. Anton, Ph.D., ABPP
Recording Secretary

Sender: Garrison, Ellen </O=APA/OU=DC/CN=RECIPIENTS/CN=EGG>
Sent: Thursday, July 10, 2008 10:03:46 PM
Recipient: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Subject: RE: Con statement rebuttal

We don't want to send it to Bob et al. at the last minute -- the longer they work on theirs, the more committed to it they may become...

From: Behnke, Stephen
Sent: Thu 7/10/2008 10:02 PM
To: Garrison, Ellen
Subject: RE: Con statement rebuttal

I'm not sure I understand—it's due on Tuesday at midnight to Garnett—why would it need to be out tomorrow? (certainly I think that's advisable, though)

From: Garrison, Ellen
Sent: Thursday, July 10, 2008 10:01 PM
To: Behnke, Stephen
Subject: RE: Con statement rebuttal

We need to get it out tomorrow afternoon if it's due on Tuesday to Judy.

From: Behnke, Stephen
Sent: Thu 7/10/2008 9:46 PM
To: Garrison, Ellen
Subject: RE: Con statement rebuttal

Sure; I'm working on the statement. It will probably be tomorrow, though, but we've got plenty of time.

From: Garrison, Ellen
Sent: Thursday, July 10, 2008 9:45 PM
To: Behnke, Stephen
Subject: RE: Con statement rebuttal

Steve, thanks for all your responses!

From: Behnke, Stephen
Sent: Thu 7/10/2008 5:22 PM
To: Garrison, Ellen
Subject: FW: Con statement rebuttal

Actually, I spent **quite** a bit of time working with Neil on this...

From: Honaker, Michael
Sent: Thursday, July 10, 2008 5:17 PM
To: Behnke, Stephen; Anderson, Norman; Garrison, Ellen; Strassburger, Judy; Gilfoyle, Nathalie; Farberman,

Rhea

Subject: RE: Con statement rebuttal

Just wanted to make sure!

Mike

From: Behnke, Stephen

Sent: Thursday, July 10, 2008 5:16 PM

To: Honaker, Michael; Anderson, Norman; Garrison, Ellen; Strassburger, Judy; Gilfoyle, Nathalie; Farberman, Rhea

Subject: RE: Con statement rebuttal

Mike, we'll help any one who asks; as an example (it's still on the ethics website), I helped Neil Altman put together a summary sheet on the moratorium resolution last year that he wanted to post.

Steve

From: Honaker, Michael

Sent: Thursday, July 10, 2008 5:14 PM

To: Behnke, Stephen; Anderson, Norman; Garrison, Ellen; Strassburger, Judy; Gilfoyle, Nathalie; Farberman, Rhea

Subject: RE: Con statement rebuttal

I meant to say this before but want to make sure I do now; are we offering the same help for the pro statement? One thing that has bothered me is that we are supposedly "neutral" on this issue but it seems we are developing a paper trail that shows we are not.

Mike

From: Behnke, Stephen

Sent: Thursday, July 10, 2008 5:05 PM

To: Anderson, Norman; Garrison, Ellen; Strassburger, Judy; Gilfoyle, Nathalie; Honaker, Michael; Farberman, Rhea

Subject: Con statement rebuttal

Bob has reached out regarding the con statement rebuttal. The rebuttal is of the same quality as the initial con statement. Ellen and I will offer suggestions that Bob and his colleagues are free to use, or not, as they see fit, as we did with the original statement.

Thank you,

Steve

Sender: Garrison, Ellen </O=APA/OU=DC/CN=RECIPIENTS/CN=EGG>
Sent: Thursday, July 03, 2008 5:04:24 PM
Recipient: Farberman, Rhea <rfarberman@apa.org>; Gilfoyle, Nathalie <ngilfoyle@apa.org>; Strassburger, Judy <jstrassburger@apa.org>; Honaker, Michael <mhonaker@apa.org>; Anderson, Norman <NAnderson@apa.org>
Cc: Behnke, Stephen <sbehnke@apa.org>
Subject: Positive Update on Con Statement

Dear All,

We hope you have begun your well-deserved holiday weekend. This is just a quick note to say that Steve has provided our feedback, as we have discussed, to the con statement writers, and they have responded very positively. We fully anticipate that they will comfortably make the July 7th COB deadline.

Ellen

Ellen G. Garrison, Ph.D. | Senior Policy Advisor
Executive Office
American Psychological Association
750 First Street NE, Washington, DC 20002-4242
Tel: (202) 336-6066 | Fax: (202) 336-6069
email: egarrison@apa.org | www.apa.org



Sender: Gilfoyle, Nathalie </O=APA/OU=DC/CN=RECIPIENTS/CN=NPG>
Sent: Saturday, June 21, 2008 6:03:05 AM
Recipient: Behnke, Stephen <sbehnke@apa.org>; 'Barry Anton [redacted]'; Anderson, Norman <NAnderson@apa.org>; Farberman, Rhea <rfarberman@apa.org>; Strassburger, Judy <jstrassburger@apa.org>; Honaker, Michael <mhonaker@apa.org>; Garrison, Ellen <egarrison@apa.org>
Subject: Re: Con statement writeer

Make that sounds good to me. N
Nathalie Gilfoyle

Sent from my BlackBerry Wireless Handheld

----- Original Message -----

From: Gilfoyle, Nathalie
To: Behnke, Stephen; 'Privacy Redaction [redacted]'; Anderson, Norman; Farberman, Rhea; Strassburger, Judy; Honaker, Michael; Garrison, Ellen
Sent: Fri Jun 20 21:34:32 2008
Subject: Re: Con statement writeer

Sounds good today.
Nathalie Gilfoyle

Sent from my BlackBerry Wireless Handheld

----- Original Message -----

From: Behnke, Stephen
To: 'Barry S Anton' <[redacted]>; Anderson, Norman; Farberman, Rhea; Strassburger, Judy; Honaker, Michael; Garrison, Ellen; Gilfoyle, Nathalie
Sent: Fri Jun 20 20:39:32 2008
Subject: Con statement writeer

Hello Everyone,

Barry and I had a talk this evening about my conversations with Joel. After discussing Joel's draft con statement (which I've characterized as a "revise and resubmit" approach), we thought it best that this issue be brought to the full Board during the conference call. In the meanwhile, Barry thought it would make good sense to reach out to Council reps from several divisions (e.g., 19, 41 and 42), who will now be familiar with the petition, and ask for their input regarding additional possible writers for the con statement.

Does that seem like a sensible plan?

Thanks,

Steve

Sender: Garrison, Ellen </O=APA/OU=DC/CN=RECIPIENTS/CN=EGG>
Sent: Friday, February 13, 2009 6:48:01 PM
Recipient: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>;Farberman, Rhea </O=APA/OU=DC/CN=RECIPIENTS/CN=Rzf>;O'Brien, Maureen </O=APA/OU=DC/CN=RECIPIENTS/CN=Mao>;Gilfoyle, Nathalie </O=APA/OU=DC/CN=RECIPIENTS/CN=Npg>
Cc: Honaker, Michael </O=APA/OU=DC/CN=RECIPIENTS/CN=Myh>;Anderson, Norman </O=APA/OU=DC/CN=RECIPIENTS/CN=NBA>
Subject: RE: Draft Council Intro for James for Advisory Group Report?

Steve, it should be clear to the petitioners, since I sent them the relevant Association Rule about receiving, etc., reports, and followed up with them on this point. Their goal is now for Council to receive the report and for a motion to be presented by one of the other advisory group members on Council for ALL the options contained therein to be approved by Council.

Steve, I sense where you're going with this, and believe me, no action on the report would NOT be the desired outcome.

Ellen

From: Behnke, Stephen
Sent: Fri 2/13/2009 6:08 PM
To: Farberman, Rhea; Garrison, Ellen; O'Brien, Maureen; Gilfoyle, Nathalie
Cc: Honaker, Michael; Anderson, Norman
Subject: RE: Draft Council Intro for James for Advisory Group Report?

There is a possibility that I don't think has really occurred to us. We're assuming that the petitioners will want Council to receive the report, but they may conclude that "receiving," rather than "adopting," is tantamount to damning by faint praise, and so actually prefer no action to "receiving." (Especially if it becomes clear Council is not going to "adopt.")

Clearly there's no way to know this, but we may want to consider how hard to argue for something that the petitioners themselves may have complicated feelings about.

Steve

From: Farberman, Rhea
Sent: Friday, February 13, 2009 5:25 PM
To: Garrison, Ellen; O'Brien, Maureen; Behnke, Stephen; Gilfoyle, Nathalie
Cc: Honaker, Michael; Anderson, Norman
Subject: RE: Draft Council Intro for James for Advisory Group Report?

Looks good to me.

Rhea

From: Garrison, Ellen
Sent: Friday, February 13, 2009 3:44 PM
To: O'Brien, Maureen; Behnke, Stephen; Farberman, Rhea; Gilfoyle, Nathalie
Cc: Honaker, Michael; Anderson, Norman
Subject: Draft Council Intro for James for Advisory Group Report?

How's this agenda item intro for James per our discussion yesterday? [Not sure about format – focused on content!]:

I would now like to direct your attention to the Council agenda item on the *Report of the APA Presidential Advisory Group on the Implementation of the Petition Resolution*. I would first like to thank Elena Eisman, Council Representative for Division 31, for serving as chair of this group, which was appointed by then APA President Alan Kazdin to provide further clarity concerning the petition resolution itself and to offer some options for Council to consider regarding its ongoing implementation. I also extend my appreciation to our fellow Council and Board members and to the three original petitioners who served on the group, which continued its work right up until New Year's eve, as I understand!

I now turn to Elena to provide us with a brief overview of the petition resolution, the process undertaken by the advisory group, and the options that the group members have proposed for our consideration....

The Board of Directors recommends that Council pass two motions related to the petition resolution itself, first to adopt a title for the resolution to clarify its intended purpose and scope, and second to suspend the rules to render the petition resolution "complete" and thereby fully in effect as of today, rather than as of the annual meeting in August. It's important to note that while a number of implementation options are offered by the advisory group for Council to consider, these are the only two that actually require Council action to take effect. As you may know, the APA Executive Office has already undertaken a number of steps related to the options presented in the report, e.g., by informing key federal officials in Congress and in the executive branch about our new policy, as well as initiatives begun by the International Affairs Office and the Ethics Office, and will continue to do so.

[Finally, the Board also recommends that Council adopt the motion to receive the report, which, as you'll recall does not imply APA endorsement per the Association Rules.]

Ellen

Sender: Garrison, Ellen </O=APA/OU=DC/CN=RECIPIENTS/CN=EGG>
Sent: Tuesday, February 17, 2009 2:25:19 PM
Recipient: Behnke, Stephen <sbehnke@apa.org>;Farberman, Rhea
<rfarberman@apa.org>;Gilfoyle, Nathalie <ngilfoyle@apa.org>
Cc: Anderson, Norman <NAnderson@apa.org>;Honaker, Michael
<mhonaker@apa.org>;Breckler, Steve <SBreckler@apa.org>;Kelly, Heather
<hkelly@apa.org>
Subject: Air Force re: Advisory Group Report

See below for note from psychology consultant to SG for Air Force. I'll address this as well.

Ellen

From: Marrs, Scott R Col USAF AFMOA AFMOA/SGHW [mailto:Scott.Marrs@LACKLAND.AF.MIL]
Sent: Monday, February 16, 2009 10:18 AM
To: Garrison, Ellen
Subject: Advisory Group Report
Importance: High

Ellen,

I've been reading through the Advisory Group Report. Appears to be a clear message to the APA Council to implement the petition fully, and as soon as possible.

Would greatly appreciate your thoughts on what actions the APA Council will take, and when they will likely to occur. I need to advise my leadership, who are aware of the Advisory Group Report.

Please send me an email or give me a call – I'll be in to work Tuesday morning.

Thanks!

Scott

Scott R. Marrs, Col, USAF, BSC
Chief, Mental Health Division
HQ AFMOA/SGHW
Psychology Consultant to the AF Surgeon General
WP: (210) 925-2618
DSN: 945-2618

Sender: Ronald F. Levant, Ed.D, M.B.A., ABPP <levantr@nova.edu>
Sent: Sunday, June 26, 2005 7:57:47 AM
Recipient: 'Behnke, Stephen' <sbehnke@apa.org>
Cc: 'Levant, Ronald F., Ed.D.' <[Privacy Redaction]>
Subject: RE: Gitmo

Thanks

Ronald F. Levant, Ed.D., M.B.A., ABPP
Professor
Center for Psychological Studies
Nova Southeastern University
3301 College Avenue, Room 1066
Ft. Lauderdale, FL 33314
954-262-5822 phone
[Privacy Redaction]
954-262-3859 fax
[Privacy Redaction]
www.DrRonaldLevant.com website

President, American Psychological Association, 2005
"Making Psychology a Household Word"

From: Behnke, Stephen [mailto:sbehnke@apa.org]
Sent: Sunday, June 26, 2005 6:48 AM
To: Ronald F. Levant, Ed.D, M.B.A., ABPP
Cc: Levant, Ronald F., Ed.D.
Subject: RE: Gitmo
Sensitivity: Confidential

I think this is a complicated issue, since many on the Task Force have voiced the opinion that there are significant distortions in the article. Also, this individual is not an APA member, so our Ethics Committee has no jurisdiction.

-----Original Message-----

From: Ronald F. Levant, Ed.D, M.B.A., ABPP [[Privacy Redaction]]
Sent: Sunday, June 26, 2005 7:21 AM
To: Behnke, Stephen
Cc: 'Levant, Ronald F., Ed.D.'
Subject: Gitmo
Importance: High
Sensitivity: Confidential

Steve: As you know, a psychologist, Maj. Leso, is named in the NEJM article as involved in the BSCT interrogations. Is this something the Ethics Committee should act on?

Ronald F. Levant, Ed.D., M.B.A., ABPP
Professor
Center for Psychological Studies
Nova Southeastern University
3301 College Avenue, Room 1066

APA_0844344

Ft. Lauderdale, FL 33314

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President, American Psychological Association, 2005

"Making Psychology a Household Word"

Sender: Ronald F. Levant, Ed.D, M.B.A., ABPP <Privacy Redaction >
Sent: Wednesday, April 27, 2005 7:31:07 PM
Recipient: 'Behnke, Stephen' <sbehnke@apa.org>
Subject: RE: [CAPP] FW: For Distribution to Boards & Committees

Ok
Thanks

Ronald F. Levant, Ed.D., M.B.A., ABPP
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President, American Psychological Association, 2005
"Making Psychology a Household Word"

-----Original Message-----

From: Behnke, Stephen [mailto:sbehnke@apa.org]
Sent: Wednesday, April 27, 2005 6:17 PM
To: Ronald F. Levant, Ed.D, M.B.A., ABPP
Subject: RE: [CAPP] FW: For Distribution to Boards & Committees

He is the Division 22 observer to CAPP and a member of the CAPP Integration group

-----Original Message-----

From: Ronald F. Levant, Ed.D, M.B.A., ABPP [Privacy Redaction]
Sent: Wednesday, April 27, 2005 6:39 PM
To: Behnke, Stephen
Subject: RE: [CAPP] FW: For Distribution to Boards & Committees

Okie doke
is he on CAPP?
Or a liaison?

Ronald F. Levant, Ed.D., M.B.A., ABPP
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President, American Psychological Association, 2005

"Making Psychology a Household Word"

-----Original Message-----

From: Behnke, Stephen [mailto:sbehnke@apa.org]
Sent: Wednesday, April 27, 2005 4:48 PM
To: Ronald F. Levant, Ed.D, M.B.A., ABPP
Subject: RE: [CAPP] FW: For Distribution to Boards & Committees

Don't know--I'll see what I can find out.

-----Original Message-----

From: Ronald F. Levant, Ed.D, M.B.A., ABPP [Privacy Redaction]
Sent: Wednesday, April 27, 2005 5:44 PM
To: Behnke, Stephen
Subject: RE: [CAPP] FW: For Distribution to Boards & Committees

Who is david hess?

Ronald F. Levant, Ed.D., M.B.A., ABPP
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President, American Psychological Association, 2005
"Making Psychology a Household Word"

-----Original Message-----

From: Behnke, Stephen [mailto:sbehnke@apa.org]
Sent: Wednesday, April 27, 2005 8:57 AM
To: Ronald F. Levant, Ed.D, M.B.A., ABPP
Subject: FW: [CAPP] FW: For Distribution to Boards & Committees

Ron, I was forwarded this message from the CAPP listserve. If this type of reaction--"conflict of interest"--response gets any traction, I'd like to nip it in the bud. The effectiveness of this Task Force depends upon first-hand knowledge of what psychologists are actually doing; the Task Force could not fulfill its charge without a solid grasp of what roles psychologists take in national security-related activities. It would be like revising the Standards for Educational and Psychologist Testing without including Division 5 or any school psychologists on the revision task force.

I'll keep my ear to the ground,

Steve

From: Committee for the Advancement of Professional Practice [mailto:CAPP@LISTS.APA.ORG] **On Behalf Of** David Hess
Sent: Tuesday, April 26, 2005 3:58 PM

APA_0844437

To: CAPP@LISTS.APA.ORG
Subject: Re: [CAPP] FW: For Distribution to Boards & Committees

Thanks. This is an interesting array of individuals. Although I only quickly scanned the Bios, I wondered about conflicts in interest. Some of these individuals appear to be in security positions within government.

David W. Hess, Ph.D., ABPP
Associate Professor
Rosa Schwarz Cifu Professor
Department of Physical Medicine and Rehabilitation,
Psychiatry, and Psychology
Virginia Commonwealth University
1300 E. Marshall St., N. Hospital, Rm.181B
Box 980661
Richmond, VA 23298-0661
804-828-0861
804-828-5074

-----Original Message-----

From: Committee for the Advancement of Professional Practice
[mailto:CAPP@LISTS.APA.ORG] **On Behalf Of** Schelin, Kristin
Sent: Tuesday, April 26, 2005 3:18 PM
To: CAPP@LISTS.APA.ORG
Subject: [CAPP] FW: For Distribution to Boards & Committees

From: Donnelly, Paul
Sent: Tuesday, April 26, 2005 3:16 PM
To: Liaison-Staff
Subject: For Distribution to Boards & Committees

Per a request from Steve Behnke, please distribute the following statement and roster to any board and committee lists or listservs.

In February, a call was sent out for nominations to a Presidential Task Force on Psychological Ethics and National Security (PENS Task Force). Attached please find the names and brief biographical statements of the Task Force members.

<<PENS Task Force.doc>>

Paul Donnelly
Director, Board & Committee Operation
American Psychological Association
750 First Street NE
Washington, DC 20002
202-336-6018
202-336-5963 (Fax)
pdonnelly@apa.org

APA_0844437

Sender: Marc Pilisuk <[Privacy Redaction]>
Sent: Sunday, December 05, 2004 4:09:17 PM
Recipient: global Violence and Security <[Privacy Redaction]>
Subject: Re: [psysr-gv] Psychologists and torture.

-- draft letter to APA. I am sure others can approve upon this.

Reports in the New York Times indicate that psychologists are being used to assist in programs of interrogation of prisoners at Guantanamo Base and elsewhere. The practices have been investigated by the Red Cross and found to be "tantamount to torture." Such activities are a cause for moral outrage and harm the public trust in the profession of psychology. We call upon APA to issue a statement, at once, indicating that psychologists working to abet the use of physical and psychological abuse in practices of interrogation are in serious violation of ethical standards of the profession. We call upon APA to investigate the allegations and to take appropriate actions based upon its investigations.

Peace,

Marc

Marc Pilisuk

494 Cragmont Ave

Berkeley, CA 94708

Phone & Fax: 510-526-0876

From: Heidi Perryman <[Privacy Redaction]>
Reply-To: Global Violence and Security Group
Date: Sun, 5 Dec 2004 07:45:45 -0800
To: Global Violence and Security Group
Subject: Re: [psysr-gv] Psychologists and torture.

I agree and put a message up about it last week. We need to draft a position and press APA to respond. This is especially urgent given that Boyle just ruled that information obtained during torture was "usable".

http://www.truthout.org/docs_04/120404A.shtml

Why don't you put together something and get us moving? I have already notified all my colleagues about this and made sure it scares them too.

Heidi

----- Original Message -----

From: Marc Pilisuk [Privacy Redaction]
To: global Violence and Security [Privacy Redaction]; Florence L. Denmark [Privacy Redaction]; Leila F. Dane, PhD. [Privacy Redaction]; Allen Kanner [Privacy Redaction]; Amal Winter [Privacy Redaction]; amal winter [Privacy Redaction]; ann anderson [Privacy Redaction]; anne anderson [Privacy Redaction]; bernice Zahm [Privacy Redaction]; Bianca Murphy; Brewster Smith [Privacy Redaction]; [Hoo m](#) [Privacy Redaction]; Judith Van Hoom; Julie Levitt [Privacy Redaction]; Kathleen Dockett [Privacy Redaction]; Laura Burlingame-Lee [Privacy Redaction]; linden nelson [Privacy Redaction]; Martha Mednick [Privacy Redaction]; Meghan [Privacy Redaction]; Mike Wessells [Privacy Redaction]; Milton Schwebel [Privacy Redaction]; Marc Pilisuk; Neil Wollman [Privacy Redaction]

Sent: Sunday, December 05, 2004 12:04 AM

APA_0844973

Subject: [psysr-qv] Psychologists and torture.

Colleagues

In the New York Times account of the Red Cross report on the treatment of detainees at Guantonamo

And other setting it is clear that the US is now violating a long standing policy of opposing torture and rejecting the value of information obtained by torture. The activities constitute violations of both national and international law. The wisdom of this practice is questionable since it opens the doors for the same treatment to be inflicted upon American soldiers and civilians who are captured. The morality is an outrage and a source of great shame for the barbarism is carried out and justified in our name. The report also implicates psychology since psychologists and psychiatrists are being used to assist the interrogators as members of Behavioral Science Consultation Teams. This not something that should be allowed to pass without an inquiry into the ethical standards that the profession sets for itself. I urge us to respond and to seek a response from APA.

Thanks

Peace

Marc Pilisuk

494 Cragmont Ave

Berkeley, CA 94708

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Confidential Working Draft, Ethics Code Revision, June 2001
INTRODUCTION

The following are working comments that are subject to future reevaluation by the evaluators and discussion by the ECTF. The left column is the published draft, February 2001. The middle column provides revisions for ECTF consideration based upon suggestions received from or questions raised by commentators on the published draft. The right column highlights relevant comments or Celia's questions and concerns.

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
		General Question: #52 Does inclusion of 'electronic services' give telehealth premature legitimacy?
<p>INTRODUCTION AND APPLICABILITY The American Psychological Association's (APA's) Ethical Principles of Psychologists and Code of Conduct (hereinafter referred to as the Ethics Code) consists of an Introduction, a Preamble, five General Principles (A - E), and specific Ethical Standards. The Introduction discusses the intent, organization, procedural considerations, and scope of application of the Ethics Code. The Preamble and General Principles are aspirational goals to guide psychologists toward the highest ideals of psychology. Although the Preamble and General Principles are not themselves enforceable rules, they should be considered by psychologists in arriving at an ethical course of action and may be considered by ethics bodies in interpreting the Ethical Standards. The Ethical Standards set forth enforceable rules for conduct as psychologists. Most of the Ethical Standards are written broadly, in order to apply to psychologists in varied roles, although the application of an Ethical Standard may vary depending on the context. The Ethical Standards are not exhaustive. The fact that a given conduct is not specifically addressed by the Ethics Code does not mean that it is necessarily either ethical or unethical.</p>	<p>INTRODUCTION AND APPLICABILITY The American Psychological Association's (APA's) Ethical Principles of Psychologists and Code of Conduct (hereinafter referred to as the Ethics Code) consists of an Introduction, a Preamble, , and specific Ethical Standards. The Introduction discusses the intent, organization, procedural considerations, and scope of application of the Ethics Code. The Preamble describes the aspirational goals and values to guide psychologists toward the highest ideals of psychology. Although the Preamble and General Principles are not themselves enforceable rules, they should be considered by psychologists in arriving at an ethical course of action. The Ethical Standards set forth enforceable rules for conduct as psychologists. Most of the Ethical Standards are written broadly, in order to apply to psychologists in varied roles, although the application of an Ethical Standard may vary depending on the context. The Ethical Standards are not exhaustive. The fact that a given conduct is not specifically addressed by the Ethics Code does not mean that it is necessarily either ethical or unethical.</p>	<p>Many commentators as well as some attorneys have expressed concern that despite our intent the Principles may be used in court as standards of practice. Thus my comments in this paragraph and below attempt to maintain the aspirational content of the principles while eliminating some of the legal liability</p> <p>Division 42</p>
<p>This Ethics Code applies only to psychologists' activities that are part of their scientific, educational, or professional roles as psychologists. Areas covered include but are not limited to the clinical, counseling, and school practice of psychology; research; teaching; supervision of trainees; development of assessment</p>	<p>This Ethics Code applies only to psychologists' activities that are part of their scientific, educational, or professional roles as psychologists. Areas covered include but are not limited to the clinical, counseling, and school practice of psychology; research; teaching; supervision of trainees; development of assessment</p>	

Confidential Working Draft, Ethics Code Revision, June 2001
INTRODUCTION

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
instruments; conducting assessments; educational counseling; organizational consulting; forensic activities; social intervention; and administration. This Ethics Code applies to these activities across a variety of contexts, such as in person, postal, telephone, internet, and other electronic transmissions. These activities shall be distinguished from the purely private conduct of psychologists, which is not within the purview of the Ethics Code.	instruments; conducting assessments; educational counseling; organizational consulting; forensic activities; program design and evaluation; and administration. This Ethics Code applies to these activities across a variety of contexts, such as in person, postal, telephone, internet, and other electronic transmissions. These activities shall be distinguished from the purely private conduct of psychologists, which is not within the purview of the Ethics Code.	Div 42
Membership in the APA commits members to comply with the APA Ethics Code and to the rules and procedures used to enforce it	Membership in the APA commits members and student affiliates to comply with the APA Ethics Code and to the rules and procedures used to enforce it. Lack of awareness or misunderstanding of an ethical standard is not itself a defense to a charge of unethical conduct However, APA members retain all due process rights and all their other constitutional rights not only in courts of law but in any proceeding in which fellow psychologists or others judge the behavior of other psychologists.	#262 Committee for Women Division 42
The procedures for filing, investigating, and resolving complaints of unethical conduct are described in the current Rules and Procedures of the APA Ethics Committee. APA may impose sanctions on its members for violations of the Ethics Code, including termination of APA membership, and may notify other bodies and individuals of its actions. Actions that violate the Ethics Code may also lead to the imposition of sanctions on psychologists or students whether or not they are APA members by bodies other than APA, including state psychological associations, other professional groups, psychology boards, other state or federal agencies, and payors for health services. In addition, APA may take action against a member after his or her conviction of a felony, expulsion or suspension from an affiliated state	The procedures for filing, investigating, and resolving complaints of unethical conduct are described in the current Rules and Procedures of the APA Ethics Committee. APA may impose sanctions on its members for violations of the Ethics Code, including termination of APA membership, and may notify other bodies and individuals of its actions. Actions that violate the Ethics Code may also lead to the imposition of sanctions on psychologists or students whether or not they are APA members by bodies other than APA, including state psychological associations, other professional groups, psychology boards, other state or federal agencies, and payors for health services. However, the Ethics Code should not be construed as imposing or creating a legal duty for psychologists. In addition, APA may take	Division 42

Confidential Working Draft, Ethics Code Revision, June 2001
INTRODUCTION

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
psychological association, or suspension or loss of licensure.	action against a member after his or her conviction of a felony, expulsion or suspension from an affiliated state psychological association, or suspension or loss of licensure.	
The Ethics Code is intended to provide guidance for psychologists and standards of professional conduct that can be applied by the APA and by other bodies that choose to adopt them. The Ethics Code is not intended to be a basis of civil liability. Whether or not a psychologist has violated the Ethics Code does not by itself determine whether he or she is legally liable in a court action, whether a contract is enforceable, or whether other legal consequences occur. However, compliance with or violation of the Ethics Code may be admissible as evidence in some legal proceedings, depending on the circumstances.	The Ethics Code is intended to provide guidance for psychologists and standards of professional conduct that can be applied by the APA and by other bodies that choose to adopt them. The Ethics Code is not intended to be a basis of civil liability. Whether or not a psychologist has violated the Ethics Code does not by itself determine whether he or she is legally liable in a court action, whether a contract is enforceable, or whether other legal consequences occur.	Division 42
The modifiers used in some of the standards of this Ethics Code (e.g. reasonably, appropriate, potentially, usually) are included in the standards when they would (1) allow professional judgment on the part of the psychologist, (2) eliminate injustice or inequality that would occur without the modifier, (3) ensure applicability across the broad range of activities conducted by psychologists, (4) guard against a set of rigid rules that might be quickly outdated, or (5) allow opportunities for moral growth in the field.	Throughout this document the term “client” refers to an individual, group of individuals, organization, or organizational member(s) who receive psychological services. The modifiers used in some of the standards of this Ethics Code (e.g. reasonably, appropriate, potentially, usually) are included in the standards when they would (1) allow professional judgment on the part of the psychologist, (2) eliminate injustice or inequality that would occur without the modifier, (3) ensure applicability across the broad range of activities conducted by psychologists, or (4) guard against a set of rigid rules that might be quickly outdated. “The reasonable judgment of the psychologist involved should be the standard used unless there is clear and convincing evidence that the psychologist had engaged in intentional or reckless misconduct. When there are allegations of such misconduct, judgment should be based on the custom and practice of psychologists who are similarly trained” Scientific	SIOP, BPA If we adopt this we will need to look at each standard that uses client/patient and eliminate “patient” as well as see whether lists of different types of clients are redundant. Is this definition helpful to Division 13? BPA Division 42 Division 42

Confidential Working Draft, Ethics Code Revision, June 2001
INTRODUCTION

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
	<p>and professional methods in psychology evolve and psychologists may disagree regarding the best approach to a given problem or a given person. A psychologist whose activities are consistent with a method recognized by a community of peers shall be considered to have acted appropriately unless clear and convincing evidence is provided that intentional, reckless, or negligent acts have occurred. A negative outcome shall not in and of itself constitute clear and convincing evidence that negligence occurred.</p>	
<p>In the process of making decisions regarding their professional behavior, psychologists must consider this Ethics Code in addition to applicable laws and psychology board regulations. If the Ethics Code establishes a higher standard of conduct than is required by law, psychologists must meet the higher ethical standard. If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict in a responsible manner. If the conflict is unresolvable via such means, the psychologist may adhere to the requirements of the law, regulations, or other governing authority. If neither law nor the Ethics Code resolves an issue, psychologists should consider other professional materials¹ and the dictates of their own conscience, as well as seek consultation with others within the field.</p>	<p>In the process of making decisions regarding their professional behavior, psychologists must consider this Ethics Code in addition to applicable laws and psychology board regulations. If the Ethics Code establishes a higher standard of conduct than is required by law, psychologists must meet the higher ethical standard. If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict in a responsible manner. If the conflict is unresolvable via such means, the psychologist may adhere to the requirements of the law, regulations, or other governing authority in keeping with basic principles of human rights. If neither law nor the Ethics Code resolves an issue, psychologists should consider materials and guidelines that have been adopted or endorsed by professional psychological organizations, the dictates of their own conscience, as well as seek consultation with others within the field.</p>	<p>CIRP are concerned about the message to international psychologists who rely on the Code to defend ethical actions against totalitarian regimes.</p> <p>Eliminate footnote and list of guidelines. This was raised at BPA and in comment from Janet Matthews #110 Since Code is adopted into law in many states, there is a risk that the list of guidelines referred to in the footnote would be treated as lawful guides.</p> <p>Some guidelines become obsolete during the period of Code enforcement, some may be in contradiction to the Code standards, and new guidelines not listed may be relevant.</p>

Confidential Working Draft, Ethics Code Revision, June 2001
INTRODUCTION

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>[The ECTF has not completed revision of the section immediately below on History and Effective date. The section of these 34 lines (number of section lines as published in the APA Monitor) will be revised and updated upon presentation of a final draft to Council for approval.]</p> <p>History and effective date.</p> <p>This version of the APA Ethics Code was adopted by the American Psychological Association's Council of Representatives during its meeting, _____, and is effective beginning _____. Inquiries concerning the substance or interpretation of the APA Ethics Code should be addressed to the Director, Office of Ethics, American Psychological Association, 750 First Street, NE, Washington, DC 20002-4242.</p> <p>This Code will be used to adjudicate complaints brought concerning alleged conduct occurring on or after the effective date. Complaints regarding conduct occurring prior to the effective date will be adjudicated on the basis of the version of the Code that was in effect at the time the conduct occurred, except that no provisions repealed in June 1989, will be enforced even if an earlier version contains the provision. The Ethics Code will undergo continuing review and study for future revisions; comments on the Code may be sent to the above address.</p> <p>The APA has previously published its Ethical Standards as follows: American Psychological Association. (1953). Ethical standards of psychologists. Washington, DC: Author.</p> <p>American Psychological Association. (1959). Ethical standards of psychologists. American Psychologist, 14, 279- 282.</p>		

Confidential Working Draft, Ethics Code Revision, June 2001
INTRODUCTION

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>American Psychological Association. (1963). Ethical standards of psychologists. <i>American Psychologist</i>, 18, 56-60.</p> <p>American Psychological Association. (1968). Ethical standards of psychologists. <i>American Psychologist</i>, 23, 357-361.</p> <p>American Psychological Association. (1977, March). Ethical standards of psychologists. <i>APA Monitor</i>, 22-23.</p> <p>American Psychological Association. (1979). Ethical standards of psychologists. Washington, DC: Author.</p> <p>American Psychological Association. (1981). Ethical principles of psychologists. <i>American Psychologist</i>, 36, 633-638.</p> <p>American Psychological Association. (1990). Ethical principles of psychologists (Amended June 2, 1989). <i>American Psychologist</i>, 45, 390-395.</p> <p>American Psychological Association. (1992). Ethical principles of psychologists and code of conduct. <i>American Psychologist</i>, 47, 1597-1611.</p> <p>Request copies of the APA's Ethical Principles of Psychologists and Code of Conduct from the APA Order Department, 750 First Street, NE, Washington, DC 20002-4242, or phone (202) 336-5510.</p>		
<p>Footnote 1</p> <p>Professional materials that are most helpful in this regard are guidelines and standards that have been adopted or endorsed by professional psychological organizations. Such guidelines and standards, whether adopted by the American Psychological Association (APA) or its Divisions, are not enforceable as such by this Ethics Code, but are of educative value to psychologists, courts, and professional bodies. Such materials include, but are not limited to, the APA's General Guidelines for Providers of Psychological Services (1987), , Guidelines for Providers of Psychological Services to Ethnic, Linguistic, and</p>	<p>Delete Footnote and list of guidelines see above</p> <p>Such guidelines and standards, whether adopted by the American Psychological Association (APA) or its Divisions, are not enforceable by this Ethics Code.</p>	<p>If we decide to keep footnote, we need to delete phrases which despite our intent suggest that guidelines should be used by courts. Division 42, BPA</p>

Confidential Working Draft, Ethics Code Revision, June 2001
INTRODUCTION

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>Culturally Diverse Populations (1990), Record Keeping Guidelines (1993), Guidelines for Child Custody Evaluations in Divorce Proceedings (1994), Guidelines for Ethical Conduct in the Care and Use of Animals (1996), Guidelines for the Evaluation of Dementia and Age-Related Cognitive Decline (1998), Guidelines for Psychological Evaluations in Child Protection Matters (1998), Standards for Educational and Psychological Testing (1999), Guidelines for Psychotherapy with Lesbian, Gay, and Bisexual Clients (2000), Publication Manual of the American Psychological Association (4th ed., 1994), and the APA Division 41 (Forensic Psychology/American Psychology-Law Society) Specialty Guidelines for Forensic Psychologists (1991).</p>		

Confidential Working Draft, Ethics Code Revision, June 2001
PREAMBLE AND GENERAL PRINCIPLES

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>PREAMBLE Psychologists are committed to increasing knowledge of behavior and people’s understanding of themselves and others and to the use of such knowledge to improve the condition of individuals, organizations, and society. Psychologists respect and protect civil and human rights¹ and the central importance of freedom of inquiry and expression in research, teaching, and publication. They also strive to help the public in developing informed judgments and choices concerning human behavior. [moved from above] In doing so, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist, and expert witness. This Ethics Code provides a common set of values upon which psychologists build their professional and scientific work.</p>	<p>PREAMBLE Psychologists are committed to increasing scientific and professional knowledge of behavior and people’s understanding of themselves and others and to the use of such knowledge to improve the condition of individuals, organizations, and society. Psychologists respect and protect civil and human rights² and the central importance of freedom of inquiry and expression in research, teaching, and publication. They also strive to help the public in developing informed judgments and choices concerning human behavior. [moved from above] In doing so, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist, and expert witness.</p>	<p>#292, 218, Committee for Woman Raise concerns about the absence of mention of the importance of a scientific basis of knowledge that is in the 92 Code.</p> <p>Moved see below</p>
<p>This Code is intended to provide both the general principles and the decision rules to cover most situations encountered by psychologists. It has as its goals the welfare and protection of the individuals and groups with whom psychologists work and the education of members, students, and the public regarding ethical standards of the discipline.</p>	<p>This Code is intended to provide specific standards to cover most situations encountered by psychologists. It has as its goals the welfare and protection of the individuals and groups with whom psychologists work and the education of members, students, and the public regarding ethical standards of the discipline.</p>	<p>#203 Code does not provide decision-making rules</p> <p><i>Depending upon what we decide to do about principles we might consider rewording first sentence</i></p>
<p>The development of a dynamic set of ethical standards for a psychologist’s work-related conduct requires a personal commitment to a lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues and to consult with others concerning ethical problems. Each psychologist supplements, but does not violate, the Ethics Code’s values and rules on the basis of guidance drawn from personal values, culture, and experience.</p>	<p>Move this paragraph to the end of the Preamble. Substitute the sentence below</p> <p>The specific Ethical Standards reflect a common set of values upon which psychologists build their professional and scientific work. These values are based upon the principles of beneficence and non-maleficence, social responsibility, integrity, justice, and respect for people’s rights and dignity.</p>	

¹ Respect and protect moved from later in the 1992 paragraph.

² Respect and protect moved from later in the 1992 paragraph.

Confidential Working Draft, Ethics Code Revision, June 2001
PREAMBLE AND GENERAL PRINCIPLES

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>PRINCIPLE A: BENEFICENCE AND NON-MALEFICENCE Psychologists strive to have a positive effect on those with whom they work, while taking care to do no harm. By thoughtful and prudent conduct, psychologists aspire to maximize the benefits of their work and to prevent or minimize harm to others through acts of commission or omission in their professional behavior. In their professional actions, psychologists weigh the welfare and rights of their patients or clients, students, supervisees, human research participants, and other affected persons, and the welfare of animal subjects of research. When conflicts occur among psychologists' obligations or concerns, they attempt to resolve these conflicts and to perform their roles in a responsible fashion that avoids or minimizes harm. Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence. Given that psychologists are better able to care for others when they care for themselves, psychologists take measures to promote and maintain their own physical and mental health.</p>	<p>BENEFICENCE AND NON-MALEFICENCE Psychologists strive to have a positive effect on those with whom they work, while taking care to do no harm. By thoughtful and prudent conduct, psychologists aspire to maximize the benefits of their work and to prevent or minimize harm to others through acts of commission or omission in their professional behavior. In their professional actions, psychologists attempt to weigh the welfare and rights of their patients or clients, students, supervisees, human research participants, and other affected persons, and the welfare of animal subjects of research. When conflicts occur among psychologists' obligations or concerns, they attempt to resolve these conflicts and to perform their roles in a responsible fashion that avoids or minimizes harm. Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and make efforts to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence.</p>	<p>Spelling archaic #191</p> <p>Division 42</p> <p>Division 42 #294, SIOP, MA SPA Contradicts statement that purely private conduct is not in purvue of code. Can do more harm than good and lead to frivolous complaints</p>
<p>PRINCIPLE B: FIDELITY AND SOCIAL RESPONSIBILITY Psychologists establish relationships of loyalty and trust with those with whom they work. In the course of their work, psychologists are aware of their professional and scientific responsibilities to the community and society. Psychologists uphold professional standards of conduct, clarify their professional roles and obligations, accept appropriate responsibility for their behavior, and avoid conflicts of interests. Psychologists consult with, refer to, or cooperate with other professionals and institutions</p>	<p>SOCIAL RESPONSIBILITY Psychologists strive to establish relationships of trust with those with whom they work. In the course of their work, psychologists seek to be aware of their professional and scientific responsibilities to society and to the specific communities in which they work . Psychologists attempt to uphold professional standards of conduct, clarify their professional roles and obligations, accept appropriate responsibility for their behavior, and avoid conflicts of interests. Psychologists consult with, refer to, or cooperate with other</p>	<p>#44, MA SPA Loyalty does not seem to make sense in the context of psychologists' work</p> <p>Division 42</p> <p>Division 42</p> <p>CIRP Division 42</p>

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PREAMBLE AND GENERAL PRINCIPLES

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>to the extent needed to serve the best interests of their students, research participants, patients, clients, or other recipients of their services. Psychologists' moral standards and conduct are personal matters to the same degree as is true for any other person, except as psychologists' conduct may compromise their professional responsibilities or reduce the public's trust in psychology and psychologists. Psychologists are concerned about the ethical compliance of their colleagues' scientific and professional conduct.</p>	<p>professionals and institutions to the extent needed to serve the best interests of their students, research participants, patients, clients, or other recipients of their services. Psychologists' moral standards and conduct are personal matters to the same degree as is true for any other person, except as psychologists' conduct may compromise their professional responsibilities. Psychologists share a concern about the ethical compliance of their colleagues' scientific and professional conduct. At the same time, psychologists who are called upon to serve on Ethics Committees or other bodies that judge the professional behavior of psychologists acquire the expertise necessary to insure impartial adjudication</p>	<p>Division 42 Adapted from Division 42</p>
<p>PRINCIPLE C: INTEGRITY Psychologists seek to promote accuracy, honesty, and truthfulness in the science, teaching, and practice of psychology. In these activities psychologists do not steal, cheat, or engage in fraud, subterfuge, or intentional misrepresentation of fact. In relationships involving legitimate expectations of trust, psychologists are candid and forthright. In their work, psychologists strive to keep their promises and to avoid bad-faith excuses, unwise or unclear commitments, and conflicts of interest. In situations in which deception may be ethically justifiable to maximize benefits and minimize harm, psychologist have a serious obligation to consider the need for, the possible consequences of, and their responsibility to correct any resulting mistrust or other harmful effects that arise from the use of such techniques.</p>	<p>INTEGRITY PRINCIPLE C: INTEGRITY Psychologists seek to promote accuracy, honesty, and truthfulness in the science, teaching, and practice of psychology. In these activities psychologists do not steal, cheat, or engage in fraud, subterfuge, or intentional misrepresentation of fact. In relationships involving legitimate expectations of trust, psychologists attempt to be candid and forthright. In their work, psychologists strive to keep their promises and to avoid bad-faith excuses, unwise or unclear commitments, and conflicts of interest. In situations in which deception may be ethically justifiable to maximize benefits and minimize harm, psychologists have a serious obligation to consider the need for, the possible consequences of, and their responsibility to correct any resulting mistrust or other harmful effects that arise from the use of such techniques.</p>	<p>Division 42 typo</p>
<p>PRINCIPLE D: JUSTICE Psychologists strive to conduct their work in a fair manner, taking into account issues of equality,</p>	<p>JUSTICE Psychologists recognize that fairness and justice require that all persons are entitled to access to and</p>	<p>#146 proportionality is not clear. "Equality" is addressed in second sentence</p>

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PREAMBLE AND GENERAL PRINCIPLES

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>impartiality, and proportionality. They recognize that fairness and justice require that all persons are entitled to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists. Psychologists exercise careful judgment and take appropriate precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust or discriminatory practices.</p>	<p>benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists. Psychologists exercise reasonable judgment and precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust or discriminatory practices.</p>	<p>Division 42</p>
<p>PRINCIPLE E: RESPECT FOR PEOPLE’S RIGHTS AND DIGNITY Psychologists accord appropriate respect to the fundamental rights, dignity, and worth of all people. They accept as fundamental the belief that each person should be treated as an end in him/herself, not as an object or a means to an end. They respect the rights of individuals to privacy, confidentiality, self-determination, and autonomy, cognizant of the fact that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision-making. Psychologists are aware of and respect cultural, individual, and role differences, including those based on age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, and socioeconomic status and take these factors into account when working with members of such groups. Psychologists try to eliminate the effect on their work of biases based on those factors, and they do not knowingly participate in or condone activities that are prejudicial.</p>	<p>RESPECT FOR PEOPLE’S RIGHTS AND DIGNITY Psychologists strive to accord appropriate respect to the fundamental rights, dignity, and worth of all people. They respect the rights of individuals to privacy, confidentiality, self-determination, and autonomy, and are aware that special safeguards may sometimes be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision-making. Psychologists attempt to be aware of and respect cultural, individual, and role differences, including those based on age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, and socioeconomic status and consider these factors when working with members of such groups. Psychologists try to eliminate the effect on their work of biases based on those factors, and they do not knowingly participate in or condone activities of others based upon such prejudices.</p>	<p>Division 42</p> <p>A number of commentors said this sentence was unclear #49, 79, 153, 360</p> <p>Division 42 #153, SIOP</p> <p>Division 42</p> <p>Division 42</p> <p>Several comments pointed out that “prejudicial” could have legal connotations that were not what we meant</p>
	<p>The development of a dynamic set of ethical standards for a psychologist's work-related conduct requires a personal commitment to a lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues and to consult with others</p>	

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	concerning ethical problems. Each psychologist supplements, but does not violate, the Ethics Code's values and rules on the basis of guidance drawn from personal values, culture, and experience.	

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RESOLVING ETHICAL ISSUES

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>1. RESOLVING ETHICAL ISSUES</p> <p>1.01 Misuse of Psychologists' Work.</p> <p>(a) Psychologists do not participate in activities in which it appears likely that their skills or data will be misused or misrepresented by others, unless corrective mechanisms are available such as those provided in legal proceedings. (See also Standard 3.01, Honesty.)</p>	Delete	#168, 122, 201, 258, PKS379
<p>(b) If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation.</p>	<p>b would become the misuse standard</p> <p>1.01 Misuse of Psychologists' Work</p> <p>If psychologists learn of misuse or misrepresentation of their work, they take whatever steps are available to correct or minimize the misuse or misrepresentation.</p>	PKS, Division 42
<p>1.02 Conflict Between Ethics and Law, Regulations, or Other Governing Legal Authority.</p> <p>If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict in a responsible manner. If the conflict is unresolvable via such means, the psychologist may adhere to the requirements of the law, regulations, or other governing legal authority.</p>	<p>1.02 Conflict Between Ethics and Law, Regulations, or Other Governing Legal Authority.</p> <p>If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict in keeping with basic principles of human rights. If the conflict is unresolvable via such means, the psychologist may adhere to the requirements of the law, regulations, or other governing legal authority.</p>	<p>CIRP was concerned about the use of this standard in countries with totalitarian regimes. I understand their concern and put that in the aspirational section. I am not sure whether basic principles of human rights can be operationalized in a way that can be in the specific standards.</p> <p>Division 42</p>
<p>1.03 Conflicts Between Ethics and Organizational Demands.</p> <p>If the demands of an organization with which psychologists are affiliated conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and to the extent feasible, seek to resolve the conflict in a way that permits the fullest adherence to the Ethics Code.</p>	<p>1.03 Conflicts Between Ethics and Organizational Demands.</p> <p>If the demands of an organization with which psychologists are affiliated or for whom they are working conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and seek to resolve the conflict in a way that permits the fullest possible adherence to the Ethics Code.</p>	<p>Division of Consulting Psych</p> <p>BPA</p>

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RESOLVING ETHICAL ISSUES

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>1.04 Informal Resolution of Ethical Violations. When psychologists believe that there has been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved.</p>	<p>1.04 Informal Resolution of Ethical Violations. When psychologists believe that there has been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual if in the judgment of the psychologist an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved.</p>	<p>Division 42</p>
<p>1.05 Reporting Ethical Violations. If an apparent ethical violation is not appropriate for informal resolution under Standard 1.04 or is not resolved properly in that fashion, psychologists take further action appropriate to the situation, unless such action conflicts with confidentiality rights in ways that cannot be resolved. Such action might include referral to state or national committees on professional ethics, to state licensing boards, or to the appropriate institutional authorities.</p>		
<p>1.06 Cooperating With Ethics Committees. Psychologists cooperate in ethics investigations, proceedings, and resulting requirements of the APA or any affiliated state psychological association to which they belong. In doing so, they make reasonable efforts to resolve any issues as to confidentiality. Failure to cooperate is itself an ethics violation.</p>	<p>Delete</p> <p>Or Division 42 alternative</p> <p>1.06 Cooperating With Ethics Committees. Psychologists cooperate in ethics investigations, proceedings, and resulting requirements of the APA or any affiliated state psychological association to which they belong. In doing so, they make reasonable efforts to resolve any issues as to confidentiality. Psychologists have an ethical obligation to cooperate unless such cooperation would impair their defense in a related legal proceeding. In such cases, cooperation may be deferred until after the legal proceeding is resolved.</p>	<p><i>Although this is important for the APA adjudication process, it is not necessarily an “ethical” standard. In addition, if adopted by licensing boards it raises constitutional issues. Finally, it is worded in a way that might tempt psychologists to disregard confidentiality if “reasonable efforts” fail.</i></p> <p style="text-align: center;">Division 42</p>
<p>1.07 Improper Complaints. Psychologists do not file or encourage the filing of ethics complaints that are frivolous and are intended to harm the respondent rather than address an ethical violation.</p>	<p>1.07 Improper Complaints. Psychologists do not file or encourage the filing of ethics complaints against other psychologists that are frivolous and are intended to harm the respondent rather than address an ethical violation.</p>	<p>#220 Do not want this standard to be used by other professions against psychologists who might make a complaint against them.</p>

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RESOLVING ETHICAL ISSUES

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<p>1.08 Unfair Discrimination Against Complainants and Respondents. Psychologists do not deny persons employment, advancement, admissions to academic or other programs, tenure, or promotion, based solely upon their having made, or their being the subject of an ethics complaint. This does not preclude taking action based upon the outcome of such proceedings or consideration of other appropriate information.</p>		

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COMPETENCE

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>2. COMPETENCE 2.01 Boundaries of Competence. (a) Psychologists provide services, teach, and conduct research only within the boundaries of their competence, based on their appropriate education, training, supervised experience, consultation, study, or professional experience.</p>	<p>2.01 Boundaries of Competence. Psychologists provide services, teach, and conduct research with populations and in areas only within the boundaries of their competence, based on their appropriate education, training, supervised experience, consultation, or professional experience.</p>	<p>This makes diverse populations a foundational aspect of competence BPA</p>
<p>(b) Where understanding of age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, or socioeconomic status significantly affects psychologists' work concerning particular individuals or groups, psychologists have or obtain the training, experience, consultation, or supervision necessary to ensure the competence of their services, or they make appropriate referrals, except as provided in Standard 2.02, Providing Services in Extraordinary Circumstances.</p>	<p>I have tried to address some of these issues in revisions of 2.01 and a new 2.02 below. If accepted (b) would be deleted Division 42 alternative (b) When in the professional judgment of the psychologist, an understanding of age, gender, race, ethnicity, national origin, religion, culture, sexual orientation, disability, language, or socioeconomic status significantly affects the psychologists' work with particular individuals or groups, the psychologist has or obtains the training, experience, consultation, or supervision necessary to ensure the competence of their services, or the psychologist makes appropriate referrals, except as provided in Standard 2.02, Providing Services in Extraordinary Circumstances.</p>	<p>At least 5 ECTF members thought this standard needed to be reconsidered. Issues raised were whether there was sufficient evidence that some of these factors “significantly” affect individual differences response to psychological services. Others questioned whether the sentence regarding “referrals” belonged in a standard. Others pointed out that these specific groups are mentioned in the aspirational section of the code Is there some way that (b) could be integrated into (c) and into maintaining expertise</p>
	<p>2.02 Maintaining and Expanding Expertise (a) Psychologists maintain ongoing knowledge of relevant scientific and professional information related to their work to maintain competence in the skills they use.</p>	<p>Committee for Women suggested we be more specific about the basis for maintaining expertise. This is a modification of 2.03 PKS 379 suggested “ongoing efforts” not necessary term</p>
<p>(c) Psychologists planning to provide services, teach, or conduct research involving areas, techniques, or technologies new to them undertake appropriate education, training, supervised experience, consultation, or study.</p>	<p>((b) sychologists planning to provide services, teach, or conduct research involving populations, areas, techniques, or technologies new to them undertake relevant education, training, supervised experience, consultation, or study.</p>	<p>The title of this standard, “expanding” expertise is more in line with the notion that psychologists with related training when working with new populations or areas need to get additional skills, based upon their existing competence Division 42 “relevant”</p>

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<p>(d) In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to ensure the competence of their work and to protect clients/patients, students, research participants, and others from harm.</p>	<p>(c) In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists take reasonable steps to ensure the competence of their work by drawing upon relevant research, consulting with those knowledgeable about the techniques, and identifying potential consequences and the means to protect clients/patients, students, supervisees, research participants, and others from harm.</p>	<p>#64, SIOP Is this really a harm issue? The original provides little guidance. We should be more specific. Wording is drawn from SIOP Not clear how mention of organizational fits here Division 13</p>
	<p>(d) In considering offering psychological services over the internet or by other electronically-assisted means where contextual cues may be significantly diminished or altered, psychologists weigh their own competence against the risk of harming consumers. They take into account such factors as their theoretical orientation and whether it is applicable to an electronic medium, special problems in assessing consumers' needs remotely, the needs and diagnoses of populations served, the risk of harm to those in crises, the adequacy of research and guidelines in this area, the security of websites, their ability to verify the identity of clients, and other factors relevant to consumer welfare (see Standard 3.10).</p>	<p>Wording recommended by BPA along with suggestions from comment 332</p>
<p>2.02 Providing Services in Extraordinary Circumstances. In extraordinary circumstances involving emergencies, underserved geographic areas, or underserved populations, when a psychologist is asked to provide services to individuals for whom appropriate mental health services are not available and for which the psychologist has not obtained the competence necessary, the psychologist may provide such services in order to ensure that services are not denied; however, the psychologist refers the individual to an appropriately trained provider as soon as possible or makes a reasonable effort to obtain the necessary competence. (See also Standard 10.02b, Couple and Family</p>	<p>(d) When a psychologist is asked to provide services to individuals for whom appropriate mental health services are not available and for which the psychologist has not obtained the competence necessary, a psychologist with closely related prior training or experience may provide such services in order to ensure that services are not denied if the psychologist makes a reasonable effort to obtain the competence required by drawing upon relevant research and consulting with those knowledgeable about the</p>	<p>We have received numerous comments regarding this standard. Most of them are negative. For example Dick Suinn and Division 45 raised concerns that it provides an excuse to give less qualified services to underserved groups without providing any criteria for what is competent. Dick also raised the point that if we achieve prescription authority, psychologists in an underserved area with out training might prescribe. Others say that it suggests that no psychological service is better than some service except in extraordinary circumstances. It also directly contradicts the notion that individuals need to be competent in what they do. Others are concerned that the requirement to make a referral places an undue burden on rural psychologists.</p>

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Relationships.)		<p>SIOP also suggested we add “related prior training or experience” which I agree is more protective of the client.</p> <p>I have tried to address these issues in the adjacent text and also by making this standard a part of the “Maintaining and Expanding Expertise” standard</p> <p>On another note, I have no idea why we cite 10.02b here</p>
<p>2.03 Maintaining Expertise. Psychologists undertake ongoing efforts to maintain competence in the skills they use.</p>	<p>Moved to 2.02 (a)</p>	
<p>2.04 Bases for Scientific and Professional Judgments. Psychologists’ scientific or professional judgments and endeavors must have reliable bases in the knowledge and experience of the discipline.</p>	<p>2.04 Bases for Scientific and Professional Judgments. Psychologists’ work is based upon established scientific and professional knowledge of the discipline.</p> <p>Division 42 Psychologists’ scientific or professional judgment and endeavors are informed by the evolving theoretical and empirical knowledge and experience of the discipline. This should not discourage creative and innovative approaches but when such approaches are used, they should be so identified.</p>	<p>Many comments did not understand what “reliable bases” meant. Eg. Ohio SPA</p> <p>Division 42</p>
<p>2.05 Delegation of Work to Others and Use of Interpreters. Psychologists who delegate work to employees, supervisees, and research and teaching assistants or who use the services of others, such as interpreters, (1) take reasonable steps to authorize only those responsibilities that such persons can be expected to perform competently on the basis of their education, training, or experience, either independently or with the level of supervision being provided and (2) take reasonable steps to see that such persons perform these services</p>		

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<p>competently. (See also Standards 2.02, Providing Services in Extraordinary Circumstances; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessment 9.02, Development and Use of Assessments; 9.03, Informed Consent in Assessments; and 9.07, Assessment by Unqualified Persons.)</p>		
<p>2.06 Personal Problems and Conflicts. (a) Psychologists refrain from undertaking an activity when they know or should know that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner.</p>		<p>Alternative Recommendation for a/b from Division 42 Psychologists refrain from undertaking an activity when they have actual knowledge that their personal problems will prevent them from performing their work related activities in a competent manner. They seek help for their problems</p>
<p>(b) When psychologists become aware of personal problems that may interfere with their performing work-related duties adequately, they take appropriate measures, such as obtaining professional consultation or assistance, and determine whether they should limit, suspend, or terminate their work-related duties. (See also Standard 10.10, Terminating the Professional Relationship.)</p>		

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HUMAN RELATIONS

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<p>3. HUMAN RELATIONS 3.01 Honesty. Psychologists' communications regarding their work-related activities do not knowingly contain false statements or fail to disclose material information regarding the bases for their findings or recommendations. (See also Standards 1.01, Misuse of Psychologists' Work; 5.01, Avoidance of False or Deceptive Public Statements; 6.07, Accuracy in Reports to Payors and Funding Sources; 7.02, Descriptions of Education and Training Programs; 8.11, Plagiarism; and 9.01, Bases for Assessments.)</p>		
<p>3.02 Unfair Discrimination. In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.</p>		
<p>3.03 Sexual Harassment. Psychologists do not engage in sexual harassment. Sexual harassment is sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with the psychologist's activities or roles as a psychologist, and that either (1) is unwelcome, is offensive, or creates a hostile workplace or educational environment, and the psychologist knows or is told this or (2) is sufficiently severe or intense to be abusive to a reasonable person in the context. Sexual harassment can consist of a single intense or severe act or of multiple persistent or pervasive acts. (See also Standard 1.08, Unfair Discrimination Against Complainants and Respondents.)</p>		

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HUMAN RELATIONS

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<p>3.04 Other Harassment. Psychologists do not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact in their work based on factors such as those persons' age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, or socioeconomic status.</p>	<p>3.04 Other Harassment. Psychologists do not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact in their work. Psychologists do not knowingly engage in behavior that constitutes harassment as defined in applicable statutes and case law.</p>	<p>#381. I know we discussed this, but I am not sure we why we want to limit harassment to these factors.</p> <p>Division 42</p>
<p>3.05 Avoiding Harm. Psychologists take reasonable steps to avoid harming their clients/patients, research participants, students, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable.</p>	<p>3.05 Avoiding Harm. Psychologists take reasonable steps to avoid harming their clients/patients, research participants, students, supervisees, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable.</p>	<p>If "client" is redefined does it address Division 13's concerns?</p>
<p>3.06 Multiple Relationships. (a) A multiple relationship occurs when a psychologist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom they have the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person. A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist's objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists. Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.</p>	<p>3.06 Multiple Relationships. (a) A multiple relationship occurs when a psychologist is in a professional role with a person and at the same time is in another role with the same person, or promises to enter into another relationship in the future with the person A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist's objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists. Multiple relationships that would not reasonably be expected to cause such impairment or risk exploitation or harm are not unethical.</p>	<p>We received a lot of compliments about the improvement in this standard. However, some thought it might still be too broad and unclear. <i>For example, does adding "closely related to persons' exponentially expand the potential liability of psychologists without sufficient clarity to make the inclusion useful? For example, how close is "closely associated?" A friend, a school mate, someone who works at the same office as a client?</i></p>
	<p>(b) If a psychologist finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the psychologist attempts to resolve it with due</p>	

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<p>(b) Whenever feasible, a psychologist refrains from taking on a professional role when prior personal, scientific, professional, legal, financial, or other interests or relationships could reasonably be expected (1) to impair the psychologist's objectivity, competence, or effectiveness in performing his or her functions as a psychologist or (2) to expose the person with whom the professional relationship exists to harm or exploitation.</p>	<p>regard for the best interests of the affected person and maximal compliance with the Ethics Code.</p> <p>3.07 Conflict of Interest a Whenever feasible, a psychologist refrains from taking on a professional role when prior personal, scientific, professional, legal, financial, or other interests or relationships could reasonably be expected (1) to impair the psychologist's objectivity, competence, or effectiveness in performing his or her functions as a psychologist or (2) to expose the person or organization with whom the professional relationship exists to harm or exploitation.</p>	<p>SCPA #392 and several others suggested a conflict of interest standard. It seems to me yhay 3.02b is more a conflict of interest than simply a multiple relationship role.</p> <p>Division of Consulting Psychology 13 Do 3.06 and 3.07 address Division 13's concerns?</p>
	<p>(b) Psychologists working in schools do not enter into a separate therapeutic relationship for remuneration with clients whom they serve in the school setting.</p>	<p>Division 16 and NASP</p>
<p>(c) If a psychologist finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the psychologist attempts to resolve it with due regard for the best interests of the affected person and maximal compliance with the Ethics Code.</p>	<p>Made this (b) for Multiple Relationships</p>	
<p>3.07 Third-Party Requests for Services. (a) When a psychologist agrees to provide services to a person or entity at the request of a third party, the psychologist clarifies to the extent feasible, at the outset of the service, the nature of the relationship with each party. This clarification includes the role of the psychologist (such as therapist, organizational consultant, diagnostician, or expert witness), the probable uses of the services provided or the information obtained, and the fact that there may be limits to confidentiality. (See also Standard 4.02, Discussing the Limits of Confidentiality.)</p>	<p>Numbering will need to change is we adopt 3.07 as Conflict of Interest 3.07 Third-Party Requests for Services. (a) When a psychologist agrees to provide services to a person or entity at the request of a third party, the psychologist attempts to clarify at the outset of the service, the nature of the relationship with each party (individual and entities). This clarification includes the role of the psychologist (such as therapist, organizational consultant, diagnostician, or expert witness, consulting psychologist, coach, mediator or program evaluator, the probable uses of the services provided or the information obtained, and the fact that there may be limits to confidentiality. (See also Standard 4.02, Discussing the Limits of Confidentiality, 3.06 Multiple Relationships,</p>	<p>Division 42 Division 13 Division 13</p>

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	and 11.03 Clarification of Role.)	Division 13
(b) If there is a foreseeable risk of the psychologist's being called upon to perform conflicting roles because of the involvement of a third party, the psychologist clarifies the nature and direction of his or her responsibilities, keeps all parties appropriately informed as matters develop, and resolves the situation in accordance with this Ethics Code. (See also Standards 3.06, Multiple Relationships, and 11.03, Clarification of Role.)	(b) If there is a foreseeable risk of the psychologist's being called upon to perform conflicting roles because of the involvement of a third party, the psychologist clarifies to all parties involved the nature and direction of his or her responsibilities. (See also Standards 3.06, Multiple Relationships, and 11.03, Clarification of Role.)	Division 42. I am not sure I see the practicality in this standard, especially the last phrases. Let's review.
3.08 Exploitative Relationships. Psychologists do not exploit persons over whom they have supervisory, evaluative, or other authority such as students, supervisees, employees, research participants, and clients/ patients. (See also Standards 3.06, Multiple Relationships; 6.05, Fees and Financial Arrangements; 6.06, Barter with Clients/Patients; 7.06, Sexual Relationships with Students and Supervisees; and 10.05—10.08 regarding sexual involvement with clients/ patients.)		
3.09 Cooperation with Other Professionals. When indicated and professionally appropriate, psychologists cooperate with other professionals in order to serve their clients/patients effectively and appropriately.		
3.10 Informed Consent. (a) When psychologists conduct research or provide assessment, psychotherapy, or counseling with an individual in person or via electronic transmission or other forms of communication, they obtain the informed consent of that individual using language that is reasonably understandable to that person except when conducting such activities without consent is mandated or prescribed by law or governmental regulation or as otherwise provided in this Ethics Code. The content of	3.10 Informed Consent. (a) When psychologists conduct research or provide assessment, psychotherapy, counseling, or consulting with an individual or organization in person or via electronic transmission or other forms of communication, they obtain the informed consent of that individual or organizational representative using language that is reasonably understandable to that person except when conducting such activities without consent is mandated or prescribed by law or governmental	Division 13

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<p>informed consent will vary depending on many circumstances; however, informed consent ordinarily requires that the person (1) has the capacity to consent, (2) has been provided information concerning participation in the activity that reasonably might affect his or her willingness to participate including limits of confidentiality and monetary or other costs or reimbursements, and (3) is aware of the voluntary nature of participation and has freely and without undue influence expressed consent. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; 10.01, Informed Consent to Therapy; and 11.02, Informed Consent for Forensic Services.)</p>	<p>regulation or as otherwise provided in this Ethics Code. The content of informed consent will vary depending on many circumstances; however, informed consent ordinarily requires that the person (1) has the capacity to consent, (2) has been provided information concerning participation in the activity that reasonably might affect his or her willingness to participate including limits of confidentiality and monetary or other costs or reimbursements, (3) is aware of the voluntary nature of participation and has freely and without undue influence expressed consent, and (4) has had the opportunity to ask and receive answers to questions regarding the activities. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; 10.01, Informed Consent to Therapy; and 11.02, Informed Consent for Forensic Services.)</p>	<p>#270 suggested combining (a) and (c)</p>
<p>(b) For persons who are legally incapable of giving informed consent, psychologists nevertheless (1) provide an appropriate explanation, (2) seek the individual's assent, (3) consider such persons' preferences and best interests, and (4) obtain appropriate permission from a legally authorized person, if such substitute consent is permitted or required by law. When consent by a legally authorized person is not permitted or required by law, psychologists take reasonable steps to protect the individual's rights and welfare.</p>		
<p>(c) When obtaining informed consent, psychologists make reasonable efforts to answer an individual's questions, to avoid apparent misunderstandings, and when possible, to address those misunderstandings that occur.</p>	<p>Delete –inserted into (a)</p>	
<p>(d) Psychologists appropriately document consent and assent. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; 10.01, Informed Consent to Therapy; and 11.02, Informed Consent for Forensic Services.)</p>	<p>(d) Psychologists' records document that the have obtained written or oral consent and assent. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; 10.01, Informed Consent to Therapy; and 11.02, Informed Consent for</p>	<p>CPTA asked us to clarify whether consent needed to be written. I don't think it does, so I tried the adjacent Division 42 also suggested "in their records"</p>

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<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>3.11 Describing the Nature and Results of Psychological Services. (a) When psychologists provide program evaluation, supervision, educational consultation, or scientific or other psychological services to an individual, a group, or an organization, they provide, using language that is reasonably understandable to the recipients of those services, appropriate information beforehand about the nature of such services and appropriate information later about results and conclusions. (See also Standard 9.11, Explaining Assessment Results.)</p>	<p>Forensic Services.) 3.11 Describing the Nature and Results of Psychological Services. (a) When psychologists provide program evaluation, supervision, consultation, or scientific or other psychological services to an individual, a group, or an organization, they provide, using language that is understandable to the recipients of those services, information beforehand about the nature of such services and information later about results and conclusions. (See also Standard 9.11, Explaining Assessment Results.)</p>	<p>SIOP Division 13 Division 42</p>
<p>(b) If psychologists will be precluded by law or by organizational roles from providing such information to particular individuals or groups, they so inform those individuals or groups at the outset of the service.</p>		

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PRIVACY AND CONFIDENTIALITY

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>4. PRIVACY AND CONFIDENTIALITY 4.01 Maintaining Confidentiality. Psychologists have a primary obligation and take reasonable precautions to protect confidentiality rights, recognizing that they may be established by law, institutional rules, or professional or scientific relationships. (See also Standard 2.05, Delegation of Work to Others and Use of Interpreters.)</p>		
<p>4.02 Discussing the Limits of Confidentiality. (a) Psychologists discuss with persons (including, to the extent feasible, persons who are legally incapable of giving informed consent and their legal representatives) and organizations with whom they establish a scientific or professional relationship (1) the relevant limitations on confidentiality, (2) the foreseeable uses of the information generated through their psychological activities, and (3) the limitations on confidentiality when information is communicated or services provided by electronic transmission. (See also Standard 3.10, Informed Consent.)</p>	<p>4.02 Discussing the Limits of Confidentiality. (a) Psychologists discuss with persons (including, to the extent feasible, persons who are legally incapable of giving informed consent and their legal representatives) and organizations with whom they establish a scientific or professional relationship (1) the relevant limitations on confidentiality, (2) the foreseeable uses of the information generated through their psychological activities, and (3) the limitations on confidentiality when information is communicated, records stored, or services provided by electronic transmission. (See also Standard 3.10, Informed Consent.)</p>	<p>Division 16 and NASP</p>
<p>(b) Unless it is not feasible or is contraindicated, the discussion of confidentiality occurs at the outset of the relationship and thereafter as new circumstances may warrant.</p>		
<p>(c) Psychologists offering services, products, or information via electronic transmission inform users of the risks to privacy and limitations on confidentiality.</p>	<p>(c) Psychologists offering services, products, or information via electronic transmission inform clients of the risks to privacy and limitations on confidentiality.</p>	<p>BPA</p>
<p>4.03 Recording. Psychologists obtain permission before recording the voice or image of individuals to whom they provide services. (See also Standards 8.03, Informed Consent for Recording Voice and Images in Research; 8.05, Dispensing with Informed Consent for Research; and 8.07, Deception in Research.)</p>		

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PRIVACY AND CONFIDENTIALITY

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>4.04 Minimizing Intrusions on Privacy. (a) Psychologists include in written and oral reports, consultations, and the like, only information germane to the purpose for which the communication is made.</p>	<p>4.04 Minimizing Intrusions on Privacy. (a) Psychologists include in written and oral reports, consultations, and other forms of communication, only information germane to the purpose for which the communication is made.</p>	OK SPA
<p>(b) Psychologists discuss confidential information obtained in their work only for appropriate scientific or professional purposes and only with persons clearly concerned with such matters.</p>		
<p>4.05 Disclosures. (a) Psychologists disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law for a valid purpose, such as (1) to provide needed professional services to the patient or the individual or organizational client, (2) to obtain appropriate professional consultations, (3) to protect the client/patient, psychologist, or others from harm, or (4) to obtain payment for services from a client/patient, in which instance disclosure is limited to the minimum that is necessary to achieve the purpose. (See Also Standard 6.05(f), Fees and Financial Arrangements.)</p>	<p>4.05 Disclosures. (a) Psychologists disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law for a valid purpose, such as (1) to provide needed professional services to the patient or the individual or organizational client, (2) to obtain appropriate professional consultations, (3) to protect the client/patient, psychologist, or others from harm, or (4) to obtain payment for services from a client/patient, in which instance disclosure is limited to the minimum that is necessary to achieve the purpose. (See Also Standard 6.05(f), Fees and Financial Arrangements.)</p>	
<p>(b) Psychologists also may disclose confidential information with the appropriate consent of the organizational client, the individual client/patient, or of another legally authorized person on behalf of the client/patient unless prohibited by law.</p>	<p>(b) Psychologists may disclose confidential information with the consent of the organizational client, the individual client/patient, or of another legally authorized person on behalf of the client/patient unless prohibited by law.</p>	Division 42, also suggests switching a and b.
<p>4.06 Consultations. When consulting with colleagues, (1) psychologists do not disclose confidential information that reasonably could lead to the identification of a patient, client, research participant, or other person or organization with whom they have a confidential relationship unless they have obtained the prior consent of the person or organization or the disclosure cannot be avoided, and (2)</p>	<p>4.05 Consultations. When consulting with colleagues or discussing client confidences with students or trainees (a) psychologists get informed consent to reveal the identity of the person, or (b) they attempt to conceal the identity of the person if informed consent is not</p>	Division 42

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<p>they disclose information only to the extent necessary to achieve the purposes of the consultation. (See also Standard 4.01, Maintaining Confidentiality.)</p>	<p>obtained, or (3) the disclosure cannot be avoided. (1) psychologists do not disclose confidential information that reasonably could lead to the identification of a client/patient, research participant, or other person or organization with whom they have a confidential relationship unless they have obtained the prior consent of the person or organization or the disclosure cannot be avoided, and (2) In these cases, they disclose information only to the extent necessary to achieve the purposes of the consultation. (See also Standard 4.01, Maintaining Confidentiality.)</p>	
<p>4.07 Use of Confidential Information for Didactic or Other Purposes. (a) Psychologists do not disclose in their writings, lectures, or other public media, confidential, personally identifiable information concerning their clients/patients, organizational clients, students, research participants, or other recipients of their services that they obtained during the course of their work, unless psychologists take reasonable steps to disguise the person or organization or the person or organization has consented in writing or unless there is other ethical or legal authorization for doing so.</p>	<p>4.07 Use of Confidential Information for Didactic or Other Purposes. (a) Psychologists do not disclose in their writings, lectures, or other public media, confidential, personally identifiable information concerning their clients/patients, organizational clients, students, research participants, or other recipients of their services that they obtained during the course of their work, unless (1) psychologists take reasonable steps to disguise the person or organization, (2) the person or organization has consented in writing, or (3) there is other ethical or legal authorization for doing so.</p>	<p>#207 eliminate so many “ORS”</p>

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ADVERTISING AND OTHER PUBLIC REPRESENTATIONS

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>5. ADVERTISING AND OTHER PUBLIC REPRESENTATIONS</p> <p>5.01 Avoidance of False or Deceptive Statements.</p> <p>(a) Psychologists do not knowingly make public statements that are false, deceptive, or fraudulent, concerning their research, practice, or other work activities or those of persons or organizations with which they are affiliated.</p> <p>Public statements include but are not limited to paid or unpaid advertising, product endorsements, grant and credentialing applications, brochures, printed matter, directory listings, personal resumes or curriculum vitae, or comments for use in media such as print or electronic transmission, statements in legal proceedings, lectures and public oral presentations, and published materials. (See also Standard 3.01, Honesty.)</p>	<p>5. ADVERTISING AND OTHER PUBLIC REPRESENTATIONS</p> <p>5.01 Avoidance of False or Deceptive Representations</p> <p>(a) Psychologists do not knowingly make public statements that are false, deceptive, or fraudulent, concerning their research, practice, or other work activities or those of persons or organizations with which they are affiliated.</p> <p>Public statements include but are not limited to paid or unpaid advertising, product endorsements, grant and credentialing applications, brochures, printed matter, directory listings, personal resumes or curriculum vitae, or comments for use in media such as print or electronic transmission, statements in legal proceedings, lectures and public oral presentations, and published materials. (See also Standard 3.01, Honesty.)</p>	<p>Committee for Women asked why we were just referring to the work of others that the psychologists was affiliated with and not false statements about other people or organizations in general. I looked at our definition and it appears we are talking about representations in this standard rather than any type of statement.</p>
<p>(b) Psychologists do not make false, deceptive, or fraudulent statements concerning (1) their training, experience, or competence; (2) their academic degrees; (3) their credentials; (4) their institutional or association affiliations; (5) their services; (6) the scientific or clinical basis for, or results or degree of success of, their services; (7) their fees; or (8) their publications or research findings.</p>		
<p>(c) Psychologists claim as credentials for their psychological work, only degrees that (1) were earned from a regionally accredited educational institution or (2) were the basis for psychology licensure by the state in which they practice.</p>		<p>#123, 187, 501</p> <p>A number of people raised concerns that this standard was too narrow because it seemed to prohibit use of ABPP and other legitimate postdoctoral/postlicensure credentials, but they were also concerned about vanity degrees. I think we need to discuss this.</p> <p>Division 42 suggests we may only be referring to “educational preparation”</p>
<p>5.02 Statements by Others.</p> <p>(a) Psychologists who engage others to create or place public statements that promote their professional</p>		

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ADVERTISING AND OTHER PUBLIC REPRESENTATIONS

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practice, products, or activities retain professional responsibility for such statements.		
(b) Psychologists do not compensate employees of press, radio, television, or other communication media in return for publicity in a news item.		
(c) A paid advertisement relating to psychologists' activities must be identified or clearly recognizable as such.		
5.03 Descriptions of Workshops and Non-degree-Granting Educational Programs. To the degree to which they exercise control, psychologists responsible for announcements, catalogs, brochures, or advertisements describing workshops, seminars, or other non-degree-granting educational programs ensure that they accurately describe the audience for which the program is intended, the educational objectives, the presenters, and the fees involved.	5.03 Descriptions of Workshops and Non-degree-Granting Educational Programs. To the degree to which they may be able to exercise control, psychologists responsible for announcements, catalogs, brochures, or advertisements describing workshops, seminars, or other non-degree-granting educational programs ensure that they accurately describe the audience for which the program is intended, the educational objectives, the presenters, and the fees involved.	Division 42
5.04 Media Presentations. When psychologists provide public advice or comment, they take reasonable precautions to ensure that (1) the statements are based on appropriate psychological literature or practice, (2) the statements are otherwise consistent with this Ethics Code, and (3) the recipients of the information are not encouraged to infer that a relationship has been established with them personally. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)	5.04 Media Presentations. When psychologists provide public advice or comment, they take precautions to ensure that (1) the statements are based on established scientific and professional knowledge of the discipline, (2) the statements are otherwise consistent with this Ethics Code, and (3) the statements do not indicate that a relationship has been established with them personally. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)	SIOP Division 42
5.05 Testimonials. Psychologists do not solicit testimonials from current psychotherapy clients/ patients or other persons who because of their particular circumstances are vulnerable to undue influence.		
5.06 In-Person Solicitation.		

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ADVERTISING AND OTHER PUBLIC REPRESENTATIONS

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<p>Psychologists do not engage, directly or through agents, in uninvited in-person solicitation of business from actual or potential psychotherapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence. However, this prohibition does not preclude: (1) attempting to implement appropriate collateral contacts for the purpose of benefiting an already engaged therapy client/patient or (2) providing disaster outreach services.</p>		

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RECORD KEEPING AND FEES

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>6. RECORD KEEPING AND FEES 6.01 Documentation of Professional and Scientific Work and Maintenance of Records. Psychologists appropriately create, maintain, disseminate, store, retain, and dispose of records and data relating to their professional and scientific work in order to (1) facilitate provision of services later by them or by other professionals where appropriate, (2) ensure accountability, (3) meet institutional requirements, (4) ensure accuracy of billing and payments, and (5) ensure compliance with law, all in a manner that permits compliance with the requirements of this Ethics Code. (See Also Standard 4.01, Maintaining Confidentiality.).</p>	<p>6. RECORD KEEPING AND FEES 6.01 Documentation of Professional and Scientific Work and Maintenance of Records. Psychologists create, maintain, disseminate, store, retain, and dispose of records and data relating to their professional and scientific work and that are under their control in order to (1) facilitate provision of services later by them or by other professionals, (2) allow for replication of research design and analyses, (3), (4) meet institutional requirements, (5) ensure accuracy of billing and payments, and (6) ensure compliance with law, all in a manner that permits compliance with the requirements of this Ethics Code. (See Also Standard 4.01, Maintaining Confidentiality.).</p>	<p>#125 in certain medical settings the records are not the exclusive property of the psychologist. Do we need this "appropriate?" BPA, Division 42</p> <p>What is meant by ensure accountability? Division 42</p>
<p>6.02 Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work. (a) Psychologists maintain appropriate confidentiality in creating, storing, accessing, transferring, and disposing of records under their control, whether these are written, automated, or in any other medium. (See also Standard 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.)</p>	<p>6.02 Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work. (a) Psychologists maintain confidentiality in creating, storing, accessing, transferring, and disposing of records under their control, whether these are written, automated, or in any other medium. (See also Standard 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.)</p>	<p>Division 42</p>
<p>(b) If confidential information concerning recipients of psychological services is entered into databases or systems of records available to persons whose access has not been consented to by the recipient, psychologists use coding or other techniques to avoid the inclusion of personal identifiers.</p>		
<p>(c) A psychologist makes plans in advance to facilitate the appropriate transfer and to protect the confidentiality of records and data in the event of the psychologist's death, incapacity, or withdrawal from the position or practice.</p>		

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RECORD KEEPING AND FEES

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
6.03 Availability of Records and Data. Recognizing that ownership of records and data is governed by legal principles or contractual obligations, psychologists take reasonable and lawful steps so that records and data remain available to the extent needed to serve the best interests of clients/patients, organizational clients, research participants, or appropriate others.	Delete	This standard is redundant
6.04 Withholding Records for Nonpayment. Psychologists may not withhold records under their control that are requested and needed for a client's/patient's emergency treatment solely because payment has not been received.		A number of commenters, e.g. Committee for Women did not like this change. They asked who decides what is an emergency. Is the word "solely" necessary here?
6.05 Fees and Financial Arrangements. (a) As early as is feasible in a professional or scientific relationship, the psychologist and the client/patient or other appropriate recipient of psychological services reach an agreement specifying the compensation and the billing arrangements.	6.05 Fees and Financial Arrangements. (a) As early as is feasible in a professional or scientific relationship, the psychologist and the client/patient or other recipient of psychological services reach an agreement specifying the compensation and the billing arrangements.	BPA
(b) Psychologists do not exploit recipients of services or payors with respect to fees.	delete	Division 42: too vague. Is it already covered under exploitation?
(c) Psychologists' fee practices are consistent with law.		
(d) Psychologists do not misrepresent their fees.		
(e) If limitations to services can be anticipated because of limitations in financing, this is discussed with the client/patient or other appropriate recipient of services as early as is feasible. (See also Standards 10.09, Interruption of Services, and 10.10, Terminating the Professional Relationship.)	(e) If limitations to services can be anticipated because of limitations in financing, this is discussed with the client/patient or other recipient of services as early as is feasible. (See also Standards 10.09, Interruption of Services, and 10.10, Terminating the Professional Relationship.)	BPA
(f) If the client/patient or other recipient of services does not pay for services as agreed, and if the psychologist wishes to use collection agencies or legal measures to collect the fees, the psychologist first informs the person that such measures will be taken and provides that person an opportunity to make prompt payment. (See also Standards 4.05, Disclosures; 6.04, Withholding	(f) If the client/patient or other recipient of services does not pay for services as agreed, and if the psychologist wishes to use collection agencies or legal measures to collect the fees, the psychologist first informs the person that such measures will be taken and provides that person an opportunity to make prompt payment or set up a repayment schedule. (See also Standards 4.05,	Division 42

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RECORD KEEPING AND FEES

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Records for Nonpayment; and 10.01, Informed Consent to Therapy.)	Disclosures; 6.04, Withholding Records for Nonpayment; and 10.01, Informed Consent to Therapy.)	
6.06 Barter With Clients/Patients. Barter is the acceptance of goods, services, or other nonmonetary remuneration from clients/patients in return for psychological services. A psychologist may barter only if (1) it is not clinically contraindicated, and (2) the relationship is not exploitative. (See also Standards 3.06, Multiple Relationships, and 6.05, Fees and Financial Arrangements.)	6.06 Barter With Clients/Patients. Barter is the acceptance of goods, services, or other nonmonetary remuneration from clients/patients in return for psychological services. A psychologist may barter only if (1) it is not clinically contraindicated, (2) the relationship is not exploitative, and (3) the terms of the barter (relative value of services) are set by a third party, a bartering brokerage, or reflect clear and current market value. (See also Standards 3.06, Multiple Relationships, and 6.05, Fees and Financial Arrangements.)	#129
6.07 Accuracy in Reports to Payors and Funding Sources. In their reports to payors for services or sources of research funding, psychologists accurately state the nature of the service provided or research conducted provided , the fees, or charges, or payments, and where applicable, the identity of the provider, the findings, and the diagnosis. (See also Standards 4.01, Maintaining Confidentiality, 4.04, Minimizing Intrusions on Privacy, and 4.05, Disclosures.)	6.07 Accuracy in Reports to Payors and Funding Sources. In their reports to payors for services or sources of research funding, psychologists do not knowingly make a material misrepresentation with respect to the nature of the service provided or research conducted provided , the fees, or charges, or payments, and where applicable, the identity of the provider, the findings, and the diagnosis. (See also Standards 4.01, Maintaining Confidentiality, 4.04, Minimizing Intrusions on Privacy, and 4.05, Disclosures.)	Division 42
6.08 Referrals and Fees. When a psychologist pays, receives payment from, or divides fees with another professional, other than in an employer-employee relationship, the payment to each is based on the services provided (clinical, consultative, administrative, or other) and is not based on the referral itself. (See also Standard 3.10, Consultations and Referrals.)		

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TEACHING AND TRAINING SUPERVISION

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>7. TEACHING AND TRAINING SUPERVISION 7.01 Design of Education and Training Programs. Psychologists who are responsible for education and training programs take reasonable steps to ensure that the programs are designed to provide the appropriate knowledge and proper experiences, and to meet the requirements for licensure, certification, or other goals for which claims are made by the program. (See also Standard 5.03, Descriptions of Workshops and Non-degree-Granting Educational Programs.)</p>	<p>7. TEACHING AND SUPERVISION</p>	<p>#233</p>
<p>7.02 Descriptions of Education and Training Programs. (a) Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including participation in required course- or program-related counseling, psychotherapy, experiential groups, or community service), training goals and objectives, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties.</p>	<p>7.02 Descriptions of Education and Training Programs. (a) Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including stipends and benefits and participation in required course- or program-related counseling, psychotherapy, experiential groups, consulting projects, or community service), training goals and objectives, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties.</p>	<p>APPIC SiOP</p>
<p>(b) Psychologists take reasonable steps to ensure that course outlines are accurate and not misleading, regarding the subject matter to be covered, bases for evaluating progress, and the nature of course experiences. This standard does not preclude an instructor from modifying course content or requirements when pedagogically appropriate, as long as students are made aware of these modifications in a manner that enables them to fulfill course requirements. (See also Standard 5.01, Avoidance of False or Deceptive Public Statements.)</p>	<p>(b) Psychologists take reasonable steps to ensure that course syllabi outlines are accurate and not misleading, regarding the subject matter to be covered, bases for evaluating progress, and the nature of course experiences. This standard does not preclude an instructor from modifying course content or requirements when the instructor deems it pedagogically necessary or desirable so long as students are made aware of these modifications in a manner that enables them to fulfill course requirements. (See also Standard 5.01, Avoidance of False or Deceptive Public Statements.)</p>	<p>BPA Division 42</p>
<p>7.03 Accuracy in Teaching. When engaged in teaching or training, psychologists</p>		

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TEACHING AND TRAINING SUPERVISION

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present psychological information accurately. (See also Standard 2.03, Maintaining Expertise.)		
7.04 Student Disclosure of Personal Information. Psychologists do not require students to disclose personal information, either orally or in writing, which students might reasonably be expected to find to be embarrassing or upsetting to disclose. Such information includes sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, and spouses.	7.04 Student Disclosure of Personal Information. Psychologists do not require students to disclose personal information, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, and spouses or significant others except (1) if the program or training facility has clearly identified this requirement in its admissions and program materials or (2) if the information is necessary to evaluate or obtain assistance for a student whose personal problems could reasonably be judged to be interfering with his or her work with clients or posing a threat to the student or others	This standard received a high frequency of comments. While sensitive to protecting student privacy rights, the commenters were concerned that faculty and supervisors would be prohibited from taking appropriate action when a student was impaired, when their personal problems appeared to be interfering with their clinical work or potentially harming their clients, and in multicultural classes e.g., CCPTP, APPIC. Division 39 was concerned it might limit the ability of postdoctoral institutes to explore these issues. A related concern is whether the types of information is too general and could include anything about the student. Adjacent is an attempt to address all of these concerns.
7.05 Mandatory Individual or Group Therapy. (a) In programs that require mandatory individual or group therapy, faculty who are or are likely to be responsible for evaluating students' academic performance do not themselves provide that therapy. (See also Standard 3.06, Multiple Relationships.)	7.05 Mandatory Individual or Group Therapy. (a) If a program requires In programs that require mandatory individual or group therapy, this requirement must be disclosed prior to students' enrollment. (b) faculty who are or are likely to be responsible for evaluating students' academic performance do not themselves provide that therapy. (See also Standard 3.06, Multiple Relationships.) (b) When individual or group therapy is a program or course requirement, students are allowed the option of selecting such therapy outside the program.	Division 42
(b) When individual or group therapy is a program or course requirement, students are allowed the option of	(b) When individual or group therapy is a program or course requirement, students in predoctoral programs are	Division 39 is concerned about postdoctoral psychoanalytic programs

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selecting such therapy outside the program.	allowed the option of selecting such therapy outside the program.	
7.06 Assessing Student and Supervisee Performance. (a) In academic and supervisory relationships, psychologists establish an appropriate process for providing feedback to students and supervisees.	7.06 Assessing Student and Supervisee Performance. (a) In academic and supervisory relationships, psychologists establish a timely and specific process for providing feedback to students and supervisees. Information regarding the process is provided the student at the beginning of supervision.	Several commenters raised the issue of timeliness. "Appropriate" does not provide guidance here.
(b) Psychologists evaluate students and supervisees on the basis of their actual performance on relevant and established program requirements.		
7.07 Sexual Relationships with Students and Supervisees. Psychologists do not engage in sexual relationships with students or supervisees in training who are in their department or over whom the psychologist has or is likely to have evaluative authority.	7.07 Sexual Relationships with Students and Supervisees. Psychologists do not engage in sexual relationships with students or supervisees in training who are in their department, agency, or training center or over whom the psychologist has or is likely to have evaluative authority.	This standard also elicited many comments e.g., 707, 217, 413. Most were concerned with the inclusion of "department" e.g., some departments are very large and programs may not be related to one another, and some faculty may have evaluative authority over students not in their department. Others were concerned about married couples when one wants to be a student in the program. I think we might need to keep this as is, since the issue with "departments" is that the sexual relationship may also influence how other faculty respond to the student. APPIC suggested expanding the terms.

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<p>8. RESEARCH AND PUBLICATION 8.01 Institutional Approval. Psychologists obtain from host institutions or organizations appropriate approval prior to conducting research, and they provide accurate information about their research proposals. They conduct the research in accordance with the approved research protocol.</p>	<p>8. RESEARCH AND PUBLICATION 8.01 Institutional Approval. Psychologists obtain from host institutions, communities, or organizations relevant approval prior to conducting research, and they provide accurate information about their research proposals. They conduct the research in accordance with the approved research protocol.</p>	<p>Division 42, International Psychologists</p>
<p>8.02 Informed Consent to Research. (a) When obtaining informed consent as required in Standard 3.10, Informed Consent, psychologists inform participants about (1) the purpose of the research, expected duration, and procedures; (2) their right to decline to participate and to withdraw from the research once participation has begun; (3) the foreseeable consequences of declining or withdrawing; (4) reasonably foreseeable factors that may be expected to influence their willingness to participate such as potential risks, discomfort, or adverse effects; (5) any prospective research benefits; (6) limitations on confidentiality; (7) incentives for participation; and (8) whom to contact for questions about the research and research participants' rights. (See Standards 8.05, Dispensing with Informed Consent for Research, and 8.07, Deception in Research.)</p>		
<p>(b) Psychologists conducting intervention research involving the use of experimental treatments, clarify to participants at the outset of the research the experimental nature of the treatment, the services that will or will not be available to the control group(s) if appropriate, the means by which assignment to treatment and control groups will be made, and available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun.</p>		

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<p>8.03 Informed Consent for Recording Voice and Images in Research. Psychologists obtain informed consent from research participants prior to recording their voice or image, unless the research consists solely of naturalistic observations in public places and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm. (See also Standard 8. 07, Deception in Research.)</p>	<p>8.03 Informed Consent for Recording Voice and Images in Research. Psychologists obtain informed consent from research participants prior to recording their voice or image, or prior to viewing or listening to any recorded voice or image, unless the research consists solely of naturalistic observations in public places and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm. (See also Standard 8. 07, Deception in Research.)</p>	BSA
<p>8.04 Student and Subordinate Research Participants. (a) When psychologists conduct research with students or subordinates, psychologists take special care to protect the prospective participants from adverse consequences of declining or withdrawing from participation.</p>	<p>8.04 Student and Subordinate Research Participants. (a) When psychologists conduct research with students or subordinates as participants, psychologists take special care to protect the prospective participants from adverse consequences of declining or withdrawing from participation.</p>	#379
<p>(b) When research participation is a course requirement or opportunity for extra credit, the prospective participant is given the choice of equitable alternative activities.</p>		
<p>8.05 Dispensing With Informed Consent for Research. Psychologists may dispense with informed consent only where permitted by law, applicable regulations and institutional review board requirements or where (1) research is conducted in commonly accepted educational settings and involves the study of normal educational practices, instructional strategies, or effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods and that would not reasonably be assumed to create distress or harm; (2) research involves only anonymous questionnaires, naturalistic observations, or certain kinds of archival research for which participants can not be identified and for which disclosure of the participants'</p>	<p>8.05 Dispensing With Informed Consent for Research. Psychologists may dispense with informed consent only where permitted by law, applicable regulations and institutional review board requirements or where (1) research is conducted in commonly accepted educational settings and involves the study of normal educational practices, instructional strategies, or effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods and that would not reasonably be assumed to create distress or harm; (2) research involves only anonymous questionnaires, naturalistic observations, or certain kinds of archival research for which participants can not be identified and for which disclosure of the participants'</p>	

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<p>responses would not place them at risk of criminal or civil liability or be damaging to the participants' financial standing, employability, or reputation or that would not reasonably be assumed to create distress or harm; or (3) research is conducted in organizational settings and concerns factors related to job or organization effectiveness for which participants can not be identified and for which disclosure of the participants' responses would not place their employability at risk.</p>	<p>responses would not place them at risk of criminal or civil liability or be damaging to the participants' financial standing, employability, or reputation or that would not reasonably be assumed to create distress or harm; or (3) research is conducted in organizational settings and concerns factors related to job or organization effectiveness or academic success for which there is no risk to participant's employability or future academic progress. In this instance, predictor and outcome measures should be linked by a party other than the investigators or research assistants after which identifying data are destroyed so as to preserve the anonymity of the participants</p>	<p>BSA Rationale: in validation research responses cannot be anonymous since investigator must link them with other responses or items.</p>
<p>8.06 Offering Inducements for Research Participants. (a) When offering professional services as an inducement to obtain research participants, psychologists make clear the nature of the services, as well as the risks, obligations, and limitations. (See also Standard 6.06, Barter With Clients/Patients.)</p>		
<p>(b) Psychologists make reasonable efforts to avoid offering excessive or inappropriate financial or other inducements to obtain research participants when such inducements are likely to coerce participation.</p>		
<p>8.07 Deception in Research. (a) Psychologists do not conduct a study involving deception unless they have determined that the use of deceptive techniques is justified by the study's significant prospective scientific, educational, or applied value and that effective nondeceptive alternative procedures are not feasible.</p>		
<p>(b) Psychologists never deceive prospective participants about research that is reasonably expected to cause physical pain or severe emotional distress.</p>	<p>(b) Psychologists never deceive prospective participants about research that is reasonably expected to cause physical pain or emotional distress.</p>	<p>Do we think it is okay to deceive someone into experience moderate emotional distress?</p>
<p>(c) Psychologists explain any deception that is an integral feature of the design and conduct of an</p>	<p>(c) Psychologists explain any deception that is an integral feature of the design and conduct of an</p>	<p>Zimbardo, PKS</p>

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experiment to participants as early as is feasible, preferably at the conclusion of their participation, but no later than at the conclusion of the research. (See also Standard 8.08, Debriefing.)	experiment to participants as early as is feasible, preferably at the conclusion of their participation, but no later than at the conclusion of the research, and permit participants to withdraw their data. (See also Standard 8.08, Debriefing.)	
8.08 Debriefing. (a) Psychologists provide a prompt opportunity for participants to obtain appropriate information about the nature, results, and conclusions of the research, and psychologists take reasonable steps to correct any misconceptions that participants may have of which the psychologists are aware.		
(b) If scientific or humane values justify delaying or withholding this information, psychologists take reasonable measures to reduce the risk of harm.		
(c) When a psychologist becomes aware that research procedures have had a harmful impact on the individual participant, the psychologist takes reasonable steps to ameliorate the harm.	(c) When a psychologist becomes aware that research procedures have had a harmful impact on the individual participant, the psychologist takes reasonable steps to minimize the harm.	
8.09 Humane Care and Use of Animals in Research. (a) Psychologists acquire, care for, use, and dispose of animals in compliance with current federal, state, and local laws and regulations, and with professional standards.		
(b) Psychologists trained in research methods and experienced in the care of laboratory animals supervise all procedures involving animals and are responsible for ensuring appropriate consideration of their comfort, health, and humane treatment.		
(d) Psychologists ensure that all individuals under their supervision who are using animals have received instruction in research methods and in the care, maintenance, and handling of the species being used, to the extent appropriate to their role. (See also Standard		

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2.05, Delegation of Work to Others and Use of Interpreters.)		
(d) Psychologists assign responsibilities and activities to individuals assisting in research projects that are consistent with their competencies. (See also Standard 2.05, Delegation of Work to Others and Use of Interpreters.)		
(e) Psychologists make reasonable efforts to minimize the discomfort, infection, illness, and pain of animal subjects.		
(f) Psychologists use a procedure subjecting animals to pain, stress, or privation only when an alternative procedure is unavailable and the goal is justified by its prospective scientific, educational, or applied value.		
(g) Psychologists perform surgical procedures under appropriate anesthesia and follow techniques to avoid infection and minimize pain during and after surgery.		
(h) When it is appropriate that an animal's life be terminated, psychologists proceed rapidly, with an effort to minimize pain and in accordance with accepted procedures.		
8.10 Reporting Research Results. (a) Psychologists do not fabricate data. (See also Standard 5.01a, Avoidance of False or Deceptive Public Statements.)		
(b) If psychologists discover significant errors in their published data, they take reasonable steps to correct such errors in a correction, retraction, erratum, or other appropriate publication means.		
8.11 Plagiarism. Psychologists do not present substantial portions or	8.11 Plagiarism. Psychologists do not present portions or elements of	#134, 106 A little plagarism is still plagiarism

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elements of another's work or data as their own, even if the other work or data source is cited occasionally.	another's work or data as their own, even if the other work or data source is cited occasionally.	
8.12 Publication Credit. (a) Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have contributed.	8.13 Publication Credit. (a) Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have substantially contributed.	#135 consistent with view that minor contributions do not merit authorship and should be cited in acknowledgments
(b) Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institutional position, such as department chair, does not justify authorship credit. Minor contributions to the research or to the writing for publications are acknowledged appropriately, such as in footnotes or in an introductory statement.		
(c) A student is listed as principal author on any multiple-authored article that is substantially based on the student's dissertation or thesis when to do so accurately reflects the relative scientific or professional contributions of the individuals involved. Faculty advisors discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate.	(c) Except under exceptional circumstances, a student is listed as principal author on any multiple-authored article that is substantially based on the student's doctoral dissertation. Faculty advisors discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate.	BSA BSA rationale. For dissertation work the wording is circular since most universities stipulate that doctoral dissertations must be original work devised and conducted largely by the student. The previous wording suggests that there may be dissertations for which this is not true.
8.13 Duplicate Publication of Data. Psychologists do not publish, as original data, data that have been previously published. This does not preclude republishing data when they are accompanied by proper acknowledgment.		

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<p>8.14 Sharing Research Data. After research results are published, psychologists do not withhold the data on which their conclusions are based from other competent professionals who seek to verify the substantive claims through reanalysis and who intend to use such data only for that purpose, provided that the confidentiality of the participants can be protected and unless legal rights concerning proprietary data preclude their release. This does not preclude psychologists from requiring that such individuals or groups be responsible for costs associated with the provision of such information.</p>		
	<p>Professional Reviewers. Psychologists who review material submitted for publication, grant, or other research proposal review respect the confidentiality of and the proprietary rights in such information of those who submitted it.</p>	<p>Old 6.06 Professional Reviewers</p>

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<p>9. ASSESSMENT</p> <p>9.01 Bases for Assessments</p> <p>(a) Psychologists' base their assessments, recommendations, reports, opinions, and diagnostic or evaluative statements on information and techniques sufficient to substantiate their findings. (See also Standards 2.04, Basis for Scientific and Professional Opinion and 3.01, Honesty.)</p>	<p>9. ASSESSMENT</p> <p>9.01 Bases for Assessments</p> <p>(a) Psychologists base their assessments, recommendations, reports, opinions, and diagnostic or evaluative statements on information and techniques sufficient to substantiate their findings. (See also Standards 2.04, Basis for Scientific and Professional Opinion and 3.01, Honesty.)</p>	Typo
<p>(b) Except as noted in (c) and (d), below, psychologists provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions.</p>		
<p>(c) When, despite reasonable efforts, such an examination is not practical, psychologists document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions, and appropriately limit the nature and extent of their conclusions or recommendations. (See also Standards 2.01, Boundaries of Competence and 9.07, Interpreting Assessment Results.)</p>	<p>(c) When, , such an examination is not possible, psychologists document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions, and limit the nature and extent of their conclusions or recommendations. (See also Standards 2.01, Boundaries of Competence and 9.07, Interpreting Assessment Results.)</p>	<p>Division 42 Oklahoma SPA. Our rationale was that anything is possible, but “practical” seems to low a threshold</p> <p>Division 42</p>
<p>(d) When a psychologist conducts a record review and an individual examination is not warranted or necessary for the opinion, psychologists explain this and the bases upon which they arrived at this opinion in their conclusions and recommendations.</p>	<p>(d) When psychologists conduct a record review and an individual examination is not warranted or necessary for the opinion, psychologists explain this and the bases upon which they arrived at this opinion in their conclusions and recommendations.</p>	OK SPA grammar
<p>9.02 Development and Use of Assessments.</p> <p>(a) Psychologists develop, administer, score, interpret, or use assessment techniques, interviews, tests, or instruments in a manner and for purposes that are appropriate in light of the research on or evidence of the usefulness and proper application of the techniques.</p>		

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<p>(b) When appropriate tests for diverse populations have not been developed, psychologists who use existing standardized tests may adapt the administration and interpretation procedures only if the adaptations have a reliable basis in the knowledge and experience of the discipline. Psychologists must document any such adaptation and clarify its probable impact on the reliability and validity of their findings.</p>	<p>(b) Whenever possible, psychologists use culturally appropriate assessment instruments whose validity, reliability, and cultural equivalents have been tested across culturally diverse samples. When such instruments are not available, care is taken to interpret any test results cautiously, with regard to the potential cultural bias and misuse of such results.</p> <p>(b) “ Psychologists use assessment methods in a manner appropriate to an individual’s language preference and competence and cultural background, unless the use of an alternative language is relevant to the assessment issues. If usage requires the adaptation of such methods, psychologists document any such adaptation and clarify its probable impact on the reliability and validity of their findings.”)</p>	<p>Suggestion by Division 45. Does this raise same problems as 2.02?</p> <p>Division 42 recommendation</p>
<p>(c) Except as described in 9.02b, psychologists use assessment methods in a manner appropriate to an individual’s language preference and competence and cultural background, unless the use of an alternative language is relevant to the assessment issues.</p>	<p>(c) would be deleted if Division 42’s (b) is accepted</p>	
<p>(d) Psychologists using the services of an interpreter who has been adequately trained, obtain informed consent from the client/patient to use that interpreter, ensure that confidentiality of test results and test security are maintained, and discuss any limitations on the reliability and validity of data obtained. (See also Standards 2.05, Delegation of Work to Others and Use of Interpreters; 4.01 Maintaining Confidentiality; 9.01, Bases for Assessment; 9.03, Informed Consent in Assessments; and 9.07, Assessment by Unqualified Persons.)</p>		

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	(e) In developing or administering instruments for use in assessing consumers over the internet or by any other electronically-assisted means where standards may be inadequate or absent altogether, care is taken to interpret any test results cautiously, with regard to the potential cultural bias and misuse of such results.	Adapation of recommendation by BPA
<p>9.03 Informed Consent In Assessments (a) Psychologists obtain informed consent for assessments, evaluations, or diagnostic services, as described in Standard 3.10, Informed Consent, except when testing is mandated by law or governmental regulation or when testing is conducted as a routine educational, institutional, or organizational activity.</p>	<p>9.03 Informed Consent In Assessments (b) Psychologists obtain informed consent for assessments, evaluations, or diagnostic services, as described in Standard 3.10, Informed Consent, except (1) when testing is mandated by law or governmental regulation, (2) when testing is conducted as a routine means of assessing job candidates or evaluating educational, institutional, or organizational programs , or (3) when one purpose of the testing is to evaluate decisional capacity.</p>	<p>Several commentors mentioned that “routine educational, institutional, or organizational” activity was unclear. Many Neuropsychologists and Division 40 were concerned that one of their tasks is to assess consent capacity so that they cannot obtain consent from such clients. SIOP made suggestions relevant to organizations</p>
<p>(b) Psychologists inform persons for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed.</p>	<p>(b) Psychologists inform persons with questionable capacity to consent or for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed.</p>	<p>I added this phrase because even if neuropsychologists cannot obtain formal consent from some potentially impaired persons, they should inform clients of the purpose of the assessment</p>
<p>9.04 Release of Test Data. Test data refer to the individual responses or score sheets and scores or notes regarding an individual’s responses to test items. Psychologists may release test data to another qualified professional based on a client/patient release. Psychologists refrain from releasing test data to persons who are not qualified to use such information, except (1) as required by law or court order or (2) to an attorney or court based on a client/patient release or (3) to the client/patient as appropriate. (See also Standards 1.02, Conflict Between Ethics and Law, Regulations, or</p>	<p>9.04 Release of Test Data. Test data refer to the individual responses, scores or notes regarding an individual’s responses to test items. Psychologists may release test data to another qualified professional trained in the use and interpretation of the test based on a client/patient release. Psychologists refrain from releasing test data to persons who are not qualified to use such information, except (1) as required by law or court order or (2) to a court based on a client/patient release or (3) to the client/patient with appropriate explanation when it is the professional</p>	<p>This is the standard that we received perhaps the most comments about. CPTA, IOWA SPA, Ohio SPA , Jason Brandt, Division 41, Division 42 Concerns expressed included, what do we mean by “qualified” [Division 40 suggested the adjacent wording for qualified], why should attorneys be privileged over others can we just leave #2 to “court” [I don’t know enough about that to make a judgment], under what conditions should psychologists release to clients, Protection of test security was a major issue., It was suggested that “score sheets” often have the test items on</p>

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Other Governing Legal Authority, and 2.01, Boundaries of Competence.)	judgement of the psychologist that this release is in the client’s best interest. Psychologists may refrain from relasng test data to protect a client from harm or to protect test security. (See also Standards 1.02, Conflict Between Ethics and Law, Regulations, or Other Governing Legal Authority, and 2.01, Boundaries of Competence.)	them and should be eliminated. I think the first sentence is still awkward since it uses “responses” twice. As indicated in our agenda book, I asked several APA constituencies about language that would allow psychologists to refrain from release to protect clients or test security. CPTA modified my language, see adjacent and BPA approved the idea behind the modification.
9.05 Test Construction. Psychologists who develop and conduct research with tests and other assessment techniques use appropriate psychometric procedures and current scientific or professional knowledge for test design, standardization, validation, reduction or elimination of bias, and recommendations for use.		
9.06 Interpreting Assessment Results. When interpreting assessment results, including automated interpretations, psychologists take into account the various test factors, test taking abilities ,and other characteristics of the person being assessed, such as situational, personal, linguistic, and cultural differences, that might affect psychologists' judgments or reduce the accuracy of their interpretations. They indicate any significant reservations they have about the accuracy or limitations of their interpretations. (See also Standards 2.01 b and c, Boundaries of Competence and 3.03, Unfair Discrimination.)	9.06 Interpreting Assessment Results. When interpreting assessment results, including automated interpretations, psychologists take into account the purpose of the assessment as well as the various test factors, test taking abilities ,and other characteristics of the person being assessed, such as situational, personal, linguistic, and cultural differences, that might affect psychologists' judgments or reduce the accuracy of their interpretations. They indicate any significant reservations they have about the accuracy or limitations of their interpretations. (See also Standards 2.01 b and c, Boundaries of Competence and 3.03, Unfair Discrimination.)	SIOP
9.07 Assessment by Unqualified Persons. Psychologists do not promote the use of psychological assessment techniques by unqualified persons, except when such use is conducted for training purposes with appropriate supervision. (See also Standard 2.05, Delegation of Work to Others and Use of Interpreters.)		NC SPA Can we define what is meant by “unqualified” person? Is it training, certification, licensure?
9.08 Obsolete Tests and Outdated Test Results.		

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(a) Psychologists do not base their assessment or intervention decisions or recommendations on data or test results that are outdated for the current purpose.		
(b) Similarly, psychologists do not base such decisions or recommendations on tests and measures that are obsolete and not useful for the current purpose.		
9.09 Test Scoring and Interpretation Services. (a) Psychologists who offer assessment or scoring services to other professionals accurately describe the purpose, norms, validity, reliability, and applications of the procedures and any special qualifications applicable to their use.		
(b) Psychologists select scoring and interpretation services (including automated services) on the basis of evidence of the validity of the program and procedures as well as on other appropriate considerations. (See also Standard 2.01 b and c, Boundaries of Competence.)		
(c) Psychologists retain responsibility for the appropriate application, interpretation, and use of assessment instruments, whether they score and interpret such tests themselves or use automated or other services.		
9.10 Explaining Assessment Results. Regardless of whether the scoring and interpretation are done by the psychologist, by employees or assistants, or by automated or other outside services, psychologists take reasonable steps to ensure that appropriate explanations of results are given unless the nature of the relationship precludes provision of an explanation of results (such as in some organizational consulting, pre-employment or security screenings, and forensic evaluations), and this fact has been clearly explained to the person being assessed in advance.	9.10 Explaining Assessment Results. Regardless of whether the scoring and interpretation are done by the psychologist, by employees or assistants, or by automated or other outside services, psychologists explain results to relevant persons, unless the nature of the relationship precludes provision of an explanation of results (such as in some organizational consulting, pre-employment or security screenings, and forensic evaluations), and this fact has been clearly explained to the person being assessed in advance.	Division 42
9.11 Maintaining Test Security. Psychologists make reasonable efforts to maintain the		Is "strive" a better term than "make reasonable efforts?" Division 42

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integrity and security of tests and other assessment techniques consistent with law, contractual obligations, and in a manner that permits compliance with the requirements of this Ethics Code. (See also Standards 1.02, Conflict Between Ethics and Law, Regulations, and Other Governing Legal Authority, and 9.04 Release of Test Data.)		

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THERAPY

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		<p>The Division of Consulting Psychology has asked that we address issues of informed consent, individual and group interventions, interruption of services, terminating professional relationships. As we look through this section could it be titled "Therapy and Other Psychological Interventions" e/g which standards would or would not be appropriate. Especially if we have decided to use the term "client" instead of client/patient.</p>
<p>10. THERAPY 10.01 Informed Consent to Therapy. (a) When obtaining informed consent to therapy as required in Standard 3.10, Informed Consent, psychologists inform clients/ patients as early as is feasible in the therapeutic relationship about appropriate information, including the nature and anticipated course of therapy, fees, involvement of third parties, and confidentiality. (See also Standards 4.02, Discussing the Limits of Confidentiality, and 6.05, Fees and Financial Arrangements.)</p>		
<p>(b) Prior to providing treatment for which generally recognized standards do not yet exist, psychologists inform their clients/patients of the experimental nature of the treatment the potential risks involved, and the voluntary nature of their participation. (See also Standards 2.01d, Boundaries of Competence, and 3.10, Informed Consent.)</p>	<p>(b) Prior to providing treatment for which generally recognized standards do not yet exist, psychologists inform their clients/patients of the current status of research regarding that treatment , the potential risks involved, alternative treatments that may be available, and the voluntary nature of their participation. (See also Standards 2.01d, Boundaries of Competence, and 3.10, Informed Consent.)</p>	<p>Adapted from BPA recommendations. BPA wanted to give internet therapy as an example, but given the 10 year time span, that might quickly become anachronistic.</p>
<p>(c) When the therapist is being supervised as part of his or her training and the legal responsibility resides with the supervisor, the client/patient, as part of the informed consent procedure, is informed that the therapist is in training and is being supervised and is given the name of the supervisor.</p>		<p>NC SPA Clarify what legal responsibility means and should it be up to institutions to decide if supervisor's name is released.</p>

**Confidential Working Draft, Ethics Code Revision, June 2001
THERAPY**

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>10.02 Couple and Family Relationships. (a) When a psychologist agrees to provide services to several persons who have a relationship (such as husband and wife or parents and children), the psychologist attempts to clarify at the outset (1) which of the individuals are clients/patients and (2) the relationship the psychologist will have with each person. This clarification includes the role of the psychologist and the probable uses of the services provided or the information obtained. (See also Standard 4.02, Discussing the Limits of Confidentiality.)</p>	<p>10.02 Couple and Family Relationships. (a) When a psychologist agrees to provide services to several persons who have a relationship (such as to spouses, life partners, or significant others or to parents and children), the psychologist attempts to clarify at the outset (1) which of the individuals are clients/patients and (2) the relationship the psychologist will have with each person. This clarification includes the role of the psychologist and the probable uses of the services provided or the information obtained. (See also Standard 4.02, Discussing the Limits of Confidentiality.)</p>	<p>303</p>
<p>(b) If it becomes apparent that the psychologist may be called on to perform potentially conflicting roles (such as marital counselor to husband and wife, and then witness for one party in a divorce proceeding), the psychologist attempts to clarify and adjust, or withdraw from, roles appropriately. (See also Standard 11.03, Clarification of Role, under Forensic Activities.)</p>	<p>(b) If it becomes apparent that the psychologist may be called on to perform potentially conflicting roles (such as marital counselor to husband and wife, and then witness for one party in a divorce proceeding), the psychologist attempts to clarify roles and get consent of both parties or a court order directing the psychologist's response. (See also Standard 3.06, Multiple Relationships, and Standard 11.03, Clarification of Role, under Forensic Activities.)</p>	<p>Division 42</p>
<p>10.03 Group Therapy When a psychologist provides services to several persons in a group setting, the psychologist describes at the outset the roles and responsibilities of all parties and the limits of confidentiality.</p>		
	<p>10.X Use of the Internet for Therapy Psychologists conducting therapy over the internet assess the suitability of potential clients for online services, establish means to verify the identity of clients, establish means other than the internet of communicating with clients and emergency contacts, describe the limits of confidentiality, and advise client of any limitations of online services with regard to third-party involvement, payments or reimbursements.</p>	<p>Adapted from "Ethical Therapy and Healthcare in Internet Clinical Service" #332</p>

Confidential Working Draft, Ethics Code Revision, June 2001
THERAPY

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>10.04 Providing Mental Health Services to Those Served by Others. In deciding whether to offer or provide services to those already receiving mental health services elsewhere, psychologists carefully consider the treatment issues and the potential client's/patient's welfare. The psychologist discusses these issues with the client/patient, or another legally authorized person on behalf of the client/patient, in order to minimize the risk of confusion and conflict, consults with the other service providers when appropriate, and proceeds with caution and sensitivity to the therapeutic issues.</p>		
<p>10.05 Sexual Intimacies With Current Therapy Clients/Patients. Psychologists do not engage in sexual intimacies with current therapy clients/patients.</p>		
<p>10.06 Sexual Intimacies with Relatives of Current Therapy Clients/Patients. Psychologists do not engage in sexual intimacies with individuals they know to be the parents, guardians, spouses, partners, offspring, or siblings of current clients/patients. Psychologists do not terminate therapy to circumvent this rule.</p>	<p>10.06 Sexual Intimacies with Relatives of Current Therapy Clients/Patients. Psychologists do not engage in sexual intimacies with individuals they know to be the parents, guardians, spouses, partners, offspring, or siblings of current clients/patients. Psychologists do not terminate therapy to circumvent this standard .</p>	#350
<p>10.07 Therapy With Former Sexual Partners. Psychologists do not accept as therapy clients/patients persons with whom they have engaged in sexual intimacies.</p>		
<p>10.08 Sexual Intimacies With Former Therapy Clients/Patients. (a) Psychologists do not engage in sexual intimacies with a former client/patient for at least two years after cessation or termination of therapy.</p>		
<p>(c) Because sexual intimacies with a former client/patient are so frequently harmful to the client/patient, and because such intimacies undermine</p>	<p>(c) The psychologist who engages in such activity after the two years following cessation or termination of therapy and of having no sexual contact with the former</p>	<p>Does this explanation belong in the code? Is the term "most unusual circumstances" operational? Does it add anything to the criteria listed?</p>

Confidential Working Draft, Ethics Code Revision, June 2001
THERAPY

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>public confidence in the psychology profession and thereby deter the public's use of needed services, psychologists do not engage in sexual intimacies with former clients/patients and even after a two-year interval except in the most unusual circumstances. The psychologist who engages in such activity after the two years following cessation or termination of therapy and of having no sexual contact with the former client/patient bears the burden of demonstrating that there has been no exploitation, in light of all relevant factors, including (1) the amount of time that has passed since therapy terminated, (2) the nature, duration, and intensity of the therapy, (3) the circumstances of termination, (4) the client's/patient's personal history, (5) the client's/patient's current mental status, (6) the likelihood of adverse impact on the client/patient, and (7) any statements or actions made by the therapist during the course of therapy suggesting or inviting the possibility of a post-termination sexual or romantic relationship with the client/patient. (See also Standard 3.06, Multiple Relationships.)</p>	<p>client/patient bears the burden of demonstrating that there has been no exploitation, in light of all relevant factors, including (1) the amount of time that has passed since therapy terminated, (2) the nature, duration, and intensity of the therapy, (3) the circumstances of termination, (4) the client's/patient's personal history, (5) the client's/patient's current mental status, (6) the likelihood of adverse impact on the client/patient, and (7) any statements or actions made by the therapist during the course of therapy suggesting or inviting the possibility of a post-termination sexual or romantic relationship with the client/patient. (See also Standard 3.06, Multiple Relationships.)</p>	
<p>10.09 Interruption of Services. (a) Psychologists make reasonable efforts to plan for facilitating care in the event that psychological services are interrupted by factors such as the psychologist's illness, death, unavailability, or relocation or by the client's/patient's relocation or financial limitations. (See also Standard 6.02c, Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work .)</p>		
<p>(b) When entering into employment or contractual relationships, psychologists make reasonable efforts to provide for orderly and appropriate resolution of</p>		

Confidential Working Draft, Ethics Code Revision, June 2001
THERAPY

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
responsibility for client/patient care in the event that the employment or contractual relationship ends, with paramount consideration given to the welfare of the client/patient.		
10.10 Terminating the Professional Relationship. (a) Psychologists must terminate a professional relationship when it becomes reasonably clear that the client/patient no longer needs the service, is not likely to benefit, or is being harmed by continued service.		
(b) Psychologists may terminate a professional relationship when threatened or otherwise endangered by the client/patient or another person with whom the client/patient has a relationship.		
(c) Except where precluded by the actions of clients/patients or third party payors, prior to termination the psychologist discusses the client's/patient's views and needs, provides pretermination counseling, suggests alternative service providers as appropriate, and takes other reasonable steps to facilitate transfer of responsibility to another provider if the client/patient needs one immediately.	(c) Except where precluded by the actions of clients/patients or third party payors, prior to termination the psychologist discusses the client's/patient's views and needs, provides pretermination counseling, suggests alternative service providers as appropriate, and takes steps to facilitate transfer of responsibility to another provider if the client/patient needs one immediately.	Division 42

Confidential Working Draft, Ethics Code Revision, June 2001
FORENSIC ACTIVITIES

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>11. FORENSIC ACTIVITIES Forensic activities are assessments, interviews, consultations, testimony or other psychological services specifically performed when psychologists can be expected to know there is a substantial likelihood that their work, opinions, or testimony will be offered as evidence or otherwise used in a legal or adjudicative proceeding or a similar forensic context.</p>	<p>11. FORENSIC ACTIVITIES Forensic activities are assessments, interviews, consultations, therapy, interventions, testimony or other psychological services specifically performed when psychologists present themselves as forensic specialists and therefore incur a a substantial likelihood that their work, opinions, or testimony will be offered as evidence or otherwise used in a legal or adjudicative proceeding or a similar forensic context.</p>	<p>Division 42</p>
<p>11.01 Forensic Competence. (a) Psychologists base their forensic activities on a reasonable level of knowledge and understanding of the professional and legal bases for their work and their participation in forensic proceedings. (See also Standards 1.01, Misuse of Psychologists' Work; 2.01, Boundaries of Competence; 2.03, Maintaining Expertise; 2.04, Bases for Scientific and Professional Judgments; 2.05, Delegation of Work to Others and Use of Interpreters; and 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.)</p>	<p>11.01 Forensic Competence. (a) Psychologists base their forensic activities on knowledge and understanding of the scientific, professional, and legal bases for their work and their participation in forensic proceedings. (See also Standards 1.01, Misuse of Psychologists' Work; 2.01, Boundaries of Competence; 2.03, Maintaining Expertise; 2.04, Bases for Scientific and Professional Judgments; 2.05, Delegation of Work to Others and Use of Interpreters; and 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.)</p>	<p>#360 re "scientific" Division 42</p>
<p>(b) When there is a substantial likelihood that psychologists' work will be used in forensic proceedings, psychologists create and maintain documentation in the kind of detail and quality adequate to allow reasonable judicial scrutiny. (See also Standard 1.02, Conflict Between Ethics and Law, Regulations, or Other Governing Legal Authority.)</p>	<p>Delete</p>	<p>#405 if we do not specify what kind of detail allows reasonable judicial scrutiny, then this standard is too vague and the principle is covered under record keeping.</p>

Confidential Working Draft, Ethics Code Revision, June 2001
FORENSIC ACTIVITIES

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
<p>11.02 Informed Consent for Forensic Services. (a) When obtaining informed consent to forensic services as required in Standard 3.10, Informed Consent, psychologists inform the person or organization from whom consent is requested about the purposes of evaluations, the nature of procedures to be employed, the potential use of the results, the party who has employed the psychologist, and the limits of confidentiality which may exist. (See also Standards 3.05, Avoiding Harm; 3.07, Third Party Requests for Services; and 3.11, Describing the Nature and Results of Psychological Services.)</p>	<p>11.02 Informed Consent for Forensic Services. When obtaining informed consent to forensic services as required in Standard 3.10, Informed Consent, psychologists inform the person or organization from whom consent is requested about the purposes of evaluations, the nature of procedures to be employed, the potential use of the results, the party who has employed the psychologist including whether the evaluation is court ordered, and the limits of confidentiality which may exist. (See also Standards 3.05, Avoiding Harm; 3.07, Third Party Requests for Services; and 3.11, Describing the Nature and Results of Psychological Services, 9.03 Informed Consent for Assessments, 10.01 Informed Consent to Therapy.)</p>	
<p>(b) When an evaluation is court ordered, the psychologist informs the individual and the individual's legal representative of the nature of the anticipated forensic service before proceeding with the evaluation. (See also Standard 3.10, Informed Consent.)</p>	<p>delete</p>	<p>Commenters representing psychologists working in correctional facilities and others stated that it is not usual for a psychologist to contact legal representative. This point has been raised before and I think I forgot to bring it up. Without that statement, this is covered better in the informed consent for assessment and for therapy sections. I think they should just be referred to these standards. I also included in 11.02 a the requirement to tell clients if service is court ordered.</p>
<p>11.03 Clarification of Role. When psychologists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in a forensic proceeding, they clarify role expectations and the extent of confidentiality in advance and thereafter as changes occur. (See also Standards 3.05, Avoiding Harm; 3.06, Multiple Relationships; and 3.07, Third-Party Requests for Services.)</p>	<p>11.03 Clarification of Role. When psychologists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in a forensic proceeding, at the outset they clarify role expectations and the extent of confidentiality in advance and thereafter as changes occur. (See also Standards 3.05, Avoiding Harm; 3.06, Multiple Relationships; and 3.07, Third-Party Requests for Services.)</p>	<p>Division 42</p>
<p>11.04 Prior Relationships. A prior professional relationship with a party does not preclude psychologists from testifying as fact witnesses or from testifying to their services to the extent</p>	<p>11.04 Prior Relationships. A prior professional relationship with a party does not preclude psychologists from testifying as fact witnesses or from testifying to their services to the extent</p>	<p>Division 42</p>

Confidential Working Draft, Ethics Code Revision, June 2001
FORENSIC ACTIVITIES

<i>Published Draft, February 2001</i>	<i>CBF proposal with redline</i>	<i>CBF rationale</i>
permitted by applicable law. Psychologists appropriately take into account ways in which the prior relationship might affect their professional objectivity or opinions and disclose the potential conflict to the relevant parties.	permitted by applicable law. Psychologists take into account ways in which the prior relationship might affect their professional objectivity or opinions and disclose the potential conflict, if any, to the relevant parties.	

THE ETHICS CODE TASK FORCE

Report to Council August 21, 2002

ETHICS CODE TASK FORCE [ECTF] 1996-2002

Celia B. Fisher, *Chair*

Bruce Bennett

Dennis J. Grill

Jessica Henderson Daniel

Samuel J. Knapp

Peter E. Nathan

Thomas D. Oakland

Julia Ramos-Grenier

Melba J.T. Vasquez

Mary H. Quigley *Public*

Gerald P. Koocher, *Board*

Linda Campbell, *Council*

Steven Sparta, *EC*

Nabil El-Ghoroury, *APAGS*

*Past Members: Peter Appleby (Public), Laura Brown, Marsha Moody (APAGS),
Abigail Sivan (EC) Elizabeth Swenson (EC), Brian Wilcox (Council)*

ECTF OUTREACH

- ◆ “Call for Comments” Monitor 1998-1999
- ◆ Critical Incident Survey
- ◆ APAGS
- ◆ Regular Updates: *Council, Licensing Bds. & SPAs*
- ◆ Division Observers at ECTF Meetings
- ◆ APA Convention:
Invitation to Division Presidents, Meetings with Divisions, Q & A sessions
- ◆ Articles in Monitor & AP
- ◆ Requests for Feedback *Divisions, Boards, Committees*
- ◆ Legal Review
- ◆ Feedback from EC
- ◆ Meeting with Board of Directors
- ◆ Requests for feedback from consumer groups
- ◆ Online submission of comments for Drafts 4-6
- ◆ Online and hard copy distribution of Draft 7 & 1992 Code & Draft 7 comparison

YOUR COMMENTS WANTED!

APA is currently revising its **Ethics Code**. A draft of the new code will appear in the **February Monitor**. Your comments will be a central part of the revision process.

Please watch for the draft and instructions on how to submit recommendations for the new code. The Ethics Code Task Force, chaired by Celia B. Fisher, PhD, will read and review every comment submitted.

The draft will also be available on the **Web site after Feb. 1:**
www.apa.org/ethics

Remember—your input counts!

American Psychological Association
Ethical Principles of Psychologists
and Code of Conduct
Draft for Comment

Instructions for Comment

The Ethics Code Task Force (ECTF) invites both members and nonmembers of the APA to comment upon the accompanying Draft of the Ethics Code. This draft, along with instructions on how to submit comments online, can also be found at www.apa.org/ethics. While all comments will be read and considered, due to the anticipated volume of submissions it will not be possible to respond to comments on an individual basis.

The ECTF encourages the submission of comments online, by way of APA's Web site, www.apa.org/ethics. Both the revision published in this issue of the Monitor and the current (1992) Ethics Code can be found on the apa Web site.

To submit comments please:

- 1) Include your name, address, phone number, and indicate whether you are an APA member;
- 2) Indicate whether this comment is submitted on behalf of an individual or a group and, if the latter, identify the group (e.g., APA Div. 39; Massachusetts Psychological Association Ethics Committee);
- 3) State as clearly as possible what aspect of the Code you wish to address. As examples: Introduction,

paragraph 4; Preamble, Principal A; Standard 3, Informed Consent, 3.10(b);

4) State clearly the language of your proposed revision. It will be especially helpful to the ECTF if you provide a "redline" version (that is, indicate additions by underlining, and deletions by strike-throughs or []s);

5) State the reasons why your proposed revision improves the Code. For explanations of more than half a page, please provide a concise (two-to-three sentence) summary of your reasoning. *The ECTF will not accept comments that include identifying information about other persons;*

6) Send your postal or fax comments to: ECTF, APA Ethics Office, 750 First St., N.E., Washington, DC, 20002. By fax: (202) 336-5997;

7) To obtain a comparison of the Draft of the Ethics Code and the current (1992) Ethics Code, please send your request to the ECTF at the address immediately above.

Comments must be received by 5 p.m. on Monday, April 30, 2001, in order to be considered at the June meeting of the Ethics Code Task Force.

Submit a Comment - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Submit a Comment

Comment submission from: **John Doe**
You must complete the form completely for your comments to be submitted for review.

Comment on Section: 3.10 (b)

Comment

State clearly the language of your proposed revision and the reasons why your proposed revision improves the Code.

This section is problematic because

The ECTF will not accept comments that include identifying information about other persons.

Are you submitting this comment on behalf of a group or as an individual?
 Group Individual

If submitting for a group, on who's behalf are you officially submitting these comments?

Done Internet

66%

6

The following are working comments that are subject to future reevaluation by the evaluators and discussion by the EC TF. Changes in the draft published in February 2001 (in the right-hand column) are shown by underlining for newly added text and strikeout for deleted text. Standards are presented according to the organization of the draft and have been renumbered accordingly.

<p>1.23 Documentation of Professional and Scientific Work. (a) Psychologists appropriately document their professional and scientific work in order to facilitate provision of services later by them or by other professionals, to ensure accountability, and to meet other requirements of institutions or the law.</p> <p>1.24 Records and Data. Psychologists create, maintain, disseminate, store, retain, and dispose of records and data relating to their research, practice, and other work in accordance with law and in a manner that permits compliance with the requirements of this Ethics Code. (See also Standard 5.04, Maintenance of Records.)</p>	<p>6. RECORD KEEPING AND FEES</p> <p>6.01 Documentation of Professional and Scientific Work and Maintenance of Records. Psychologists appropriately document create, maintain, disseminate, store, retain, and dispose of records and data relating to their professional and scientific research, practice, and other work in order to (1) facilitate provision of services later by them or by other professionals <u>where appropriate</u>, (2) to ensure accountability, and to (3) meet <u>institutional other</u> requirements of institutions or the law, (4) <u>ensure accuracy of billing and payments</u>, and (5) <u>ensure compliance in accordance with law</u>, and all in a manner that permits compliance with the requirements of this Ethics Code. (See Also Standard 4.01, <u>Maintaining Confidentiality</u>.)</p>
<p>5.04 Maintenance of Records Psychologists maintain appropriate confidentiality in creating, storing, accessing, transferring, and disposing of records under their control, whether these are written, automated, or in any other medium. Psychologists maintain and dispose of records in accordance with law and in a manner that permits compliance with the requirements of this Ethics Code.</p>	<p>6.02 Maintenance, <u>Dissemination, and Disposal</u> of <u>Confidential</u> Records <u>of Professional and Scientific Work</u>. (a) Psychologists maintain appropriate confidentiality in creating, storing, accessing, transferring, and disposing of records under their control, whether these are written, automated, or in any other medium. Psychologists maintain and dispose of records in accordance with law and in a manner that permits compliance with the requirements of this Ethics Code. (See also Standard 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.)</p>
<p>5.07 Confidential Information in Databases. (a) If confidential information concerning recipients of psychological services is entered into databases or systems of records available to persons whose access has not been consented to by the recipient, psychologists use coding or other techniques to avoid the inclusion of personal identifiers.</p>	<p>5.07 Confidential Information in Databases. (b) If confidential information concerning recipients of psychological services is entered into databases or systems of records available to persons whose access has not been consented to by the recipient, psychologists use coding or other techniques to avoid the inclusion of personal identifiers.</p>
<p>5.09 Preserving Records and Data. A psychologist makes plans in advance so that confidentiality of records and data is protected in the event of the psychologist's death, incapacity, or withdrawal from the position or practice.</p>	<p>5.09 Preserving Records and Data. (c) A psychologist makes plans in advance <u>to facilitate so that the appropriate transfer and to protect the</u> confidentiality of records and data is protected in the event of the psychologist's death, incapacity, or withdrawal from the position or practice.</p>

Comments & Feedback

ECTF reviewed 1,366 comments & critical incidents

Groups that sent observers

Division 2 Society for the Teaching of Psychology

Division 12 Society of Clinical Psychology

Division 13 Consulting Psychology

Division 14 Society for Industrial & Organizational Psychology

Division 39 Psychoanalysis

Division 40 Clinical Neuropsychology

Division 42 Psychologists in Independent Practice

Groups Receiving Requests for Feedback on Specific Standards

- **BPA, BSA, CAPP, COLI, COPPS, CPTA**
- **Divisions 8, 9, 13, 40, 42, 42**
- **P&C Board, Council of Editors, Ethics Committee**

Consumer Groups that Received Requests for Feedback

National Alliance for the Mentally Ill

Center for Mental Health Services

National Mental Health Association

Federation of Families for Children's Mental Health

Freedom From Fear

National Depressive and Manic-Depressive Association

Alzheimer's Association

The National Coalition of Mental Health Professionals and Consumers, Inc.

The National Empowerment Center

Treatment Advocacy Center

GUIDES FOR DRAFTING CODE

- ⊕ **Reflect the values of the profession**
- ⊕ **Educate members, students, & the public**
- ⊕ **Guide licensing boards & institutions**
- ⊕ **Use clear and unambiguous language**
- ⊕ **Allow professional judgment/growth of discipline**
- ⊕ **Avoid undue hardship & baseless complaints**
- ⊕ **Avoid redundancy**

The number of standards have been reduced by almost 20%

Distinguishing Aspirational Principles from Enforceable Standards

- General Principles, as opposed to Ethical Standards, are aspirational in nature. Their intent is to guide and inspire psychologists toward the very highest ethical ideals of the profession. General Principles, in contrast to Ethical Standards, do not represent obligations and should not form the basis for imposing sanctions. Relying upon General Principles for either of these reasons distorts both their meaning and purpose.

Ethics Code Format

INTRODUCTION & APPLICABILITY

PREAMBLE

GENERAL PRINCIPLES

Principle A: Beneficence and Non-Maleficence

Principle B: Fidelity and Responsibility

Principle C: Integrity

Principle D: Justice

Principle E: Respect For People's Rights and
Dignity

Ethical Standards

1. Resolving Ethical Issues
2. Competence
3. Human Relations
4. Privacy and Confidentiality
5. Advertising & Other Public Statements
6. Record Keeping & Fees
7. Education and Training
8. Research and Publication
9. Assessment
10. Therapy

Forensic Standards

- **2.01 (e) Boundaries of Competence**
- **3.05 (c) Multiple Relationships**
- **3.10 (c) Informed Consent**
- **9.01 (a – d) Bases for Assessments**
- **9.03 (a & b) Informed Consent in Assessments**
- **10.02(b) Therapy Involving Couples or Families**

Emerging & Evolving Issues

- **Managed Care**
- **Prescription Privileges**
- **Telehealth & use of electronic media**
- **Informed consent & use of interpreters**
- **Multiple relationship, interruption of services**
- **Student disclosures**
- **Intervention research, data sharing**

Sensitivity to Law

General Considerations

- Law does not dictate ethics
- Sensitivity to law protects the integrity of the profession
- Avoid non-compliance with state and federal law

April 2002: HIPAA Health Insurance Portability & Accountability Act

- Special attention to release of test data and test security
- Participants for meeting included representatives from CAPP, COLI and Divisions 12, 13, 14, 40, and 42
- Revisions reflect change in legal landscape and efforts to avoid language that would suggest to members that they have greater discretion than the law allows.

Legal Review

Nathalie Gilfoyle, General Counsel, APA

Lindsay Childress-Beatty, Deputy General Counsel,
special focus on HIPAA

Outside legal Counsel to APA

2 defense attorneys

2 attorneys for HIPAA review

FTC attorney

Plaintiff attorney

Final Steps

- + Draft 7 has been approved by the Ethics Committee and the Board of Directors**
- + Submitted to COR for consideration and approval**

A Brief History of the Ethics Code Revision

(August 2002)

Early Revision Activity

- Ethics Committee approves plan for next revision shortly after adoption of the 1992 Ethics Code
- Study of methods for the next revision is completed July 1995

Appointment of Ethics Code Task Force

- Ethics Committee (EC) appoints the Ethics Code Task Force (ECTF) November 1996
 - Represents diverse constituencies within the APA..
 - Includes representatives from the Ethics Committee, the Board of Directors, Council, and APAGS.
- EC appoints a member representing Police and Public Safety Psychology, Correctional Psychology, or Military Psychology at the direction of Council in August 2000
- Final size of the ECTF is 14 members.

Ethics Code Task Force Members

Celia B. Fisher, Chair

Bruce E. Bennett

Dennis J. Grill

Jessica H. Daniels

Samuel J. Knapp

Peter E. Nathan

Thomas D. Oakland

Mary H. Quigley

Julia M. Ramos-Grenier

Melba J.T. Vasquez

Linda F. Campbell

Gerald P. Koocher

Steven N. Sparta

Nabil El-Ghoroury

Work on Revision of the Ethics Code

Collecting Comments

- October 1997, ECTF reviews the EC's plan for revision of the Ethics Code and discusses an information gathering plan, including a Call for Comments in January – August 1998 issues the *APA Monitor* and a critical incident survey.
- March 1998, ECTF discusses the purpose and format of the Ethics Code, and implements the information-gathering plan in April 1998 by working with the APA Research Office to mail the ECTF's critical incident survey to 3,000 members. Members return 194 responses covering 270 separate incidents.
- October 1998, the ECTF considers the format for ethical standards, reviews critical incidents, and develops a process for drafting ethical standards.

Work on Revision of the Ethics Code

Early Drafts

- April 1999, the ECTF refines criteria for revising and writing standards, and creates Draft 1 of the enforceable standards.
- October 1999, the ECTF completes most of Draft 2 of the enforceable standards.
- March 2000, the ECTF completes Draft 3, including a revised introduction, preamble, and general principles.
- October 2000, the ECTF incorporates feedback from the October 2000 Board retreat meeting and completes Draft 4, which is published for comment in the *APA Monitor*, February 2001, and posted on the APA web site in February 2001 with a form for the electronic submission of comments.

Work on Revision of the Ethics Code

Later Drafts

- June 2001, the ECTF creates Draft 5, which is posted on the web site in early August with a request for comments.
- October 2001, the ECTF meets via conference call (following events on September 11, 2001) and creates Draft 6, which is posted on the web site in early December with a request for comments.
- April 2002, the ECTF creates Draft 7, which is forwarded to the Ethics Committee in May, the Board in June, and Council for a vote of approval in August 2002.

Updates to the Council of Representatives

- Information items at every February and August Council from February 1998 to present.
- Presentation to Council at each February meeting since 1998 by ECTF Chair or the Board or Council ECTF representative.

Updates to the Board of Directors

- Information items following each of the ECTF's meetings beginning in December 1997.
- Meeting of the Chair, Celia B. Fisher, Ph.D., with the Board in October 2000 to discuss Draft 3 and receive the Board's feedback.

Updates to Consolidated Committees and the Membership

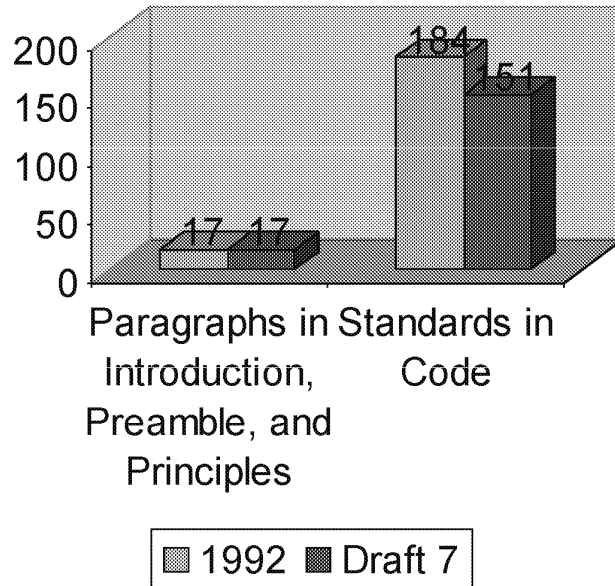
- Information items to all Spring and Fall Consolidated Meetings since March 1999.
- Open discussion sessions at every APA Annual Convention since 1998.

Total Comments Received and Reviewed

1998	40 comments and 270 critical incidents
1999	78 comments
2000	79 comments
2001	131 hard comments and 556 on line (687)
2002	131 hard comments and 81 on line (212)

Grand total of 1366

Comparison of Length



Comparison of Number of Standards in the 1992 Code and Draft 7

	<u>92 Code</u>	<u>Draft 7</u>
Intro	6 paragraphs	7 paragraphs
Preamble	3 paragraphs	3 paragraphs
GPs	6 principles	5 principles plus intro
Enforceable standards	184	151

Groups that Sent Observers to ECTF Meetings

Committee for the Advancement of Professional Practice
(CAPP)

Committee on Legal Issues (COLI)

Division 2

Division 12

Division 13

Division 14

Division 32

Division 40

Division 42

Groups That Received Requests for Feedback on Specific Standards

BPA

CAPP

COLI

COPPS

CPTA

Divisions 8, 9, 13, 14, 40, 41, and 42

P&C Board

Council of Editors

BSA

Ethics Committee

Consumer Groups that Received Requests for Feedback

National Alliance for the Mentally Ill
Center for Mental Health Services
National Mental Health Association
Federation of Families for Children's Mental Health
Freedom From Fear
National Depressive and Manic-Depressive Association
Alzheimer's Association
The National Coalition of Mental Health Professionals and
Consumers, Inc.
The National Empowerment Center
Treatment Advocacy Center

Attorneys Who Reviewed Drafts

Nathalie Gilfoyle, General Counsel, APA	reviewed every draft
Lindsay Childress-Beatty	read and commented on Drafts 6 and 7, special focus on HIPAA
Outside legal Counsel to APA	consulted to Nathalie Gilfoyle on various aspects of Code read drafts
2 defense attorneys	
2 attorneys for HIPAA review	
FTC attorney	
Plaintiff attorney	

Last Meeting, April 2002

- Reviewed compatibility of Revised Ethics Code with HIPAA
- Care taken not to mislead psychologists in making important decisions
- Participants for meeting included CAPP, COLI, and Divisions 12, 13, 14, 40, and 42

Robert S. Nichols, Ph.D., S.M. in Hyg.

PRIVACY REDACTION

E-mail: PRIVACY REDACTION FAX: PRIVACY REDACTION August 24, 2000

Dr. Janice Laurence, President
Division of Military Psychology
Human Resources Research Organization
66 Canal Center Plaza
Alexandria, VA 22314

Dear Janice,

In response to your request, and that of Dr. Hank Taylor, our division representative to the APA Council of Representatives, I'm sending you a copy of my vita (enclosed) and my reasons for volunteering to serve on the APA Ethics Task Force in the event I am chosen for that opportunity.

As my vita indicates, I have done a wide variety of clinical and non-clinical work as a psychologist, both in the military and in civilian life. In the course of this work I have had to deal with many ethical issues, ranging from problems I faced as a direct-service clinician to those I dealt with as a supervisor, trainer and manager of other clinicians. I have also encountered a considerable number of ethical problems when working as a consultant, teacher and researcher, so I can bring to the work of the ethics group a wide variety of relevant experience.

Many ethical problems I encountered were similar to those of non-governmental psychologists, but some would be rather unusual in private settings even though they are quite common for those of us who are in the military or are civilian governmental employees.

Four types of problems are especially common for military and other governmental employees. In each case, I shall give an example of the problem and then mention a relevant ethical provision of the draft ethical code published on 3/31/2000.

(1) Our primary obligation is often to the organization rather than to the client. For example, we may need to recommend that clients return to hazardous duties which they are able to perform, in order to help their unit accomplish its

mission, even though the individual welfare of the clients may suffer when they return to these dangerous activities.(standard 1.04)

(2) In some cases, military policies clearly conflict with prevailing psychological policies and procedures. A very relevant example is the military policy barring overt homosexual behavior by military personnel, a policy which is opposed by our profession. This military policy creates ethical conflicts for clinicians serving such clients who also seek to comply with APA ethical standards barring unfair discrimination. (Standard 3.03)

(3) Military posts are like small towns in which clinicians and researchers often have multiple roles that may conflict with their psychological duties. For example, it is not unusual for a clinician to have a client who is also his/her residential neighbor, the coach of his child's athletic team, a family friend who is having sexual problems, or even his/her boss.(Standard 3.07)

(4) The rules regarding confidentiality are in some ways very different from those prevailing in other settings. Quite often no promise of confidentiality can be made.(Standards 4.01 and 4.02)

I should also mention that military medical care is given both to soldiers and their families (including children) and to retirees and their families, so I have worked with a very diverse group of clients from many ethnic and social backgrounds.

I hope these comments help explain why I would welcome serving on the task force, and the expertise I think I would bring to that duty. I hope to be selected, but if not, then I will do all I can to offer consultation and support to the person who is chosen.

Sincerely yours,

Robert S. Nichols, Ph.D.
Colonel, USA (Ret.)

cc: Dr. Henry Taylor

VITA August 23, 2000

ROBERT STANTON NICHOLS, Ph. D., S.M. in Hygiene

PROFESSIONAL SKILLS

1. Manager of human services programs, especially in mental health; consultant and analyst regarding human services management issues
2. Clinical and community psychologist
3. Behavioral science consultant and researcher
4. Graduate-level teacher and educational administrator
5. Military planner and administrator

JOB HISTORY

1994-date: **Retired, but do volunteer work, such as representing the Association for the Advancement of Psychology (AAP) in meetings of the Washington-based Mental Health Liaison Group**

1990-1994: **Director, Mental Health Policy and Planning (Apr 90-Jun 91)** [position abolished in budget cut, June, '91]; **Director, Mental Health Quality Assurance (Jul 91-April 1990, Fairfax-Falls Church Community Services Board**: Performed policy development and planning, management analyses and quality assurance activities for the mental health system described in the next job entry.

1983-1990 **Director of Mental Health Programs, Fairfax-Falls Church Community Services Board, Fairfax County Va.** Directed a large community mental health program with a budget of over \$24 million and a staff of nearly 500 providing clinical and community services to more than 17,000 clients per year. Supervised 3 large community mental health centers and @ \$3 million in contract services. Programs included emergency, inpatient, outpatient and case management, day support, residential, prevention and early intervention activities. Expanded and improved services and won approval from all licensure, inspection and evaluation agencies.

December, 1982. **Mandatory retirement from US Army for length of service (30 years) with rank of colonel.**

1981-1982 **Psychology Consultant, Office of the Army Surgeon General (Pentagon)**: Supervised recruitment, education, career development and professional practice of 150 commissioned Army psychologists and 50 psychology graduate-student officers. Provided advice to senior Army leaders and staffs on the psychological aspects of a wide variety of military operations, both medical and non-medical.

1979-1981 **Chief, Health Education and Training Division U.S. Army Medical Department Personnel Support Agency (AMEDDPERSA) Washington, DC:** Exercised staff supervision over all Army medical and health-related education: a program costing \$50 million annually, serving 45,000 students per year. Recommended policy, funding, training, educational and administrative procedures. Directly managed a staff of 35 and budget of \$5.5 million.

1978-1979 **Assistant Dean for Academic Support, Uniformed Services University of Health Sciences (USUHS), Bethesda, MD:** Directed staff of 10 providing admissions and registrar support for a new military medical school. Gave technical support regarding medical educational technology. Served as assistant professor of medical psychology and medical education.

1973-1978 **Director, Human Resources Development; Director, Curricular Research; Director, American Studies at U.S. Army War College (USAWC), Carlisle, PA:** Taught (a) high level command and management, (b) national and international security studies (political, economic, social-psychological and military analyses of U.S. and foreign nations), (c) special analyses of U.S. health, education and welfare issues, and (d) military applications of psychology. Conducted human resource development programs for students and faculty. Did research on student characteristics, student academic progress and curricular effectiveness. Managed Cooperative Master's Degree Program (jointly with Shippensburg State College and Pennsylvania State University at Harrisburg).

1969-1973 **Chief (1972-1973) and Administrative Officer (1970-1972), Mental Hygiene Consultation Service, Silas B. Hays Army Community Hospital, Fort Ord, CA:** Directed 35 members of a multidisciplinary staff providing community mental health services to 100,000 active-duty and retired personnel and their families. Also served as **Chief Psychologist (1969-1973) and Director of Training (1970-1973)** for a new community-oriented clinical psychology internship which I founded in 1970 and got fully accredited by APA a year later.

1964-1968 **Chief Psychologist and Administrative Officer, Psychiatry Department, US Army Hospital, Stuttgart, Germany:** Provided mental health services to 50,000 military and dependents throughout southwest Germany. Consultant to commanders, chaplains, schools and medical agencies. Administrator for psychiatric department.

1957-1962 **Chief Psychologist, Mental Hygiene Consultation Service, Womack Army Hospital, Fort Bragg, NC**

1954-1957 **Staff Psychologist, Fitzsimons Army Hospital, Denver, CO**

1953-1954 **Psychology Intern, Walter Reed Army Hosp, Washington, DC**

EDUCATION

- 1950 **B.A., Lehigh University**, Bethlehem, PA. Psychology, Personnel Management, Chemical Engineering (first two years)
- 1956 **Ph.D., University of Rochester**, Rochester, NY. Clinical Psychology
- 1963 **S.M. in Hygiene, Harvard School of Public Health**, Boston, MA. Community Mental Health and Public Health Administration
- 1964 **Medical Field Service School (MFSS)**, Fort Sam Houston, San Antonio, TX. (9 months): military and medical administration, tactics and logistics
- 1969 **U.S. Army Command and General Staff College (CGSC)**, Fort Leavenworth, KS (10 months): Higher level strategy, tactics, management and logistics
- 1973 **U.S. Army War College (USAWC)** (Corresponding Studies Course, 2 years). National policy, military strategy and tactics, command, management and logistics

Many short courses in: behavior modification; drug and alcohol abuse and effects; human stress tolerance; brain mechanisms in behavior; organizational effectiveness; human relations; EEO; current trends in Army psychology

ADMINISTRATIVE EXPERIENCE

1. Direct/administer mental health services: 15 years
2. Chief Psychologist: 13 years
3. Educational Administration: 11 years

PSYCHOLOGICAL SKILLS

1. Direct and administer psychological agencies and programs
2. Provide individual and group clinical psychological services to a broad range of outpatients/inpatients with a wide variety of problems. (16 years)
3. Consult with managers and their staffs, teachers, lawyers, clergy, medical and social welfare workers, etc. concerning prevention/treatment of individual problems. Also consulted about leadership, organizational effectiveness, morale, drug abuse, race, equal opportunity and other behavioral issues.
4. Conduct community-oriented clinical training programs for psychologists
5. Teach psychology
6. Conduct and administer psychological research programs

AREAS OF CONSULTATION and/or RESEARCH

1. Executive development: content, methods and assessment of executive development programs, especially curricular evaluation, measures of student learning, and analyses of student attitudes and personality (1973-78)(USAWC)
2. Psychological factors in evaluating US/USSR strategic balance (USAWC)
3. Psychological factors in unit readiness reporting (USAWC)
4. Social and psychological aspects of the U.S. military Vietnam experience (USAWC)
5. Women's changing roles in the military and society (USAWC)
6. Services for Army families (USAWC)
7. Prevalence and nature of race relations/equal opportunity and drug/alcohol abuse problems 1969-1973 (Fort Ord)
8. Organizational effectiveness (morale, training, effectiveness of individual and group behavior)(Fort Ord)
9. Ineffective military personnel (identification, evaluation, treatment and prevention)(1959-1962) (Fort Bragg)
10. Health care administration (funding methods; morale of health professionals; effectiveness of health care programs)
11. Community organization and race relations work in the Roxbury (mostly Afro-American) district of Boston (1963)
12. Effects of drugs and sleep deprivation on individual and group behavior (doctoral thesis)(1953-1956)

TEACHING EXPERIENCE

1. Undergraduate (off duty, part-time): Taught most areas of psychology and statistics at: Fort Bragg(for North Carolina State Univ.), San Antonio (Our Lady of the Lake College); Stuttgart (Univ. of Maryland); Fort Ord (Golden Gate University)
2. Graduate (off duty, part-time): Taught community organization for Worden School of Social Service (San Antonio and organizational behavior for Pennsylvania State University (Harrisburg)
3. Graduate (full time): Taught command and management, national and international security studies, military psychology, and special analyses of U.S. health, education and welfare issues at U.S. Army War College
4. Clinical Psychology Internship: Director of, and instructor for, the internship at Fort Ord

PERFORMANCE RECOGNITION

1. Four years of Infantry ROTC at Lehigh ending in designation as Distinguished Military Graduate. Entered Army as 2nd Lt., Medical Service Corps, in 1952. Promoted through all ranks, attaining Colonel in 1972. Retired in 1982.
2. Frequent selection for high level military and civilian schooling and for positions of increasing responsibility throughout military career.
3. Five military awards for achievement: Legion of Merit; Meritorious Service Medal (awarded twice); Army Commendation Medal (awarded twice); various service ribbons.
4. High level managerial jobs in post-military civilian career.

PROFESSIONAL RECOGNITION

- 1983-86 **Member, APA Council of Representatives** representing the Division of Military Psychology
- 1982-83 **President, Division of Military Psychology**
- 1980 **Award for "Outstanding Scientific and Professional Contributions to Military Psychology"** from the Division of Military Psychology
- 1975 **Accepted in National Register of Health Service Providers in Psychology**
- 1972 **Received "A" award**, (highest level of professional recognition) **from the Army Surgeon General**
- 1970 **Licensed as psychologist in California** (allowed to lapse when I moved from state)

- 1969 **Elected as an APA Fellow.** I am now a fellow in three divisions: clinical, military and peace.
- 1961 **Board certified in clinical psychology by ABPP**
- 1958 **Licensed as psychologist in New York State** (remains in effect)

ACADEMIC HONORS

Phi Beta Kappa; Graduated from Lehigh with highest honors and as a Distinguished Military Graduate; Sigma Xi (science research honorary); Delta Omega (public health honorary); fourth in class of over 100 at Medical Field Service School; Commandant's List (top 20%) at Command and General Staff College

PROFESSIONAL SOCIETIES

American Psychological Association (Fellow); American Association for the Advancement of Science (Fellow); Inter-University Seminar on Armed Forces and Society (Fellow; Member of Governing Council for over 10 years); Berufsverband Deutscher Psychologinnen und Psychologen (Professional Society of German Psychologists); American Public Health Association; Association of Military Surgeons (Life Member)

LANGUAGE AND TRAVEL EXPERIENCE

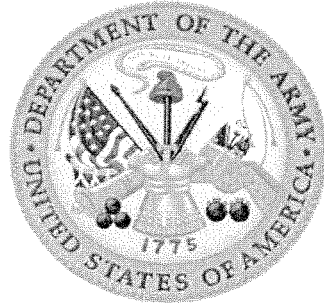
German: Read and speak well French: Read fair and speak poorly

Travel: All countries of western Europe, Russia, Poland, Finland, Hungary, Czechoslovakia, Yugoslavia, Bulgaria, Israel, Egypt, Lebanon, Cyprus, Japan, China, Taiwan, Thailand, Philippines, Mexico, Canada; Africa; India and Nepal; South America; Australia and New Zealand.

PERSONAL DATA

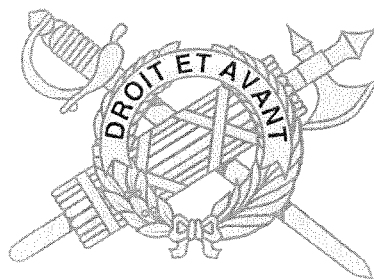
PRIVACY REDACTION

PRIVACY REDACTION



**DEPARTMENT OF THE ARMY
THE INSPECTOR GENERAL**

Detainee Operations Inspection



21 July 2004



DEPARTMENT OF THE ARMY
WASHINGTON DC 20310

JUL 21 2004

MEMORANDUM FOR CHIEF OF STAFF, ARMY

SUBJECT: Department of the Army Inspector General Inspection Report on Detainee Operations

I approve the Department of the Army Inspector General Inspection Report on Detainee Operations dated 21 July 2004.

I direct:

- a. As an exception to policy, the unclassified portion of this report be released, without redactions, through posting on the Army website.
- b. Findings and recommendations concerning Central Command be forwarded through the Joint Staff to Central Command for consideration.
- c. The Director of the Army Staff task the appropriate Army Staffs and major Army commands with implementing the recommendations specified in the inspection report and then track their compliance.
- d. The Department of the Army Inspector General disseminate the inspection report to the Army leadership.

A handwritten signature in black ink, appearing to read "R. L. Brownlee".

R. L. Brownlee
Acting Secretary of the Army

FOREWORD

This inspection report responds to the Acting Secretary of the Army's 10 February 2004 directive to conduct a functional analysis of the Army's conduct of detainee and interrogation operations to identify any capability shortfalls with respect to internment, enemy prisoner of war, detention operations, and interrogation procedures and recommend appropriate resolutions or changes if required.

Based on this inspection:

-- the overwhelming majority of our leaders and Soldiers understand the requirement to treat detainees humanely and are doing so.

-- we were unable to identify system failures that resulted in incidents of abuse. These incidents of abuse resulted from the failure of individuals to follow known standards of discipline and Army Values and, in some cases, the failure of a few leaders to enforce those standards of discipline.

-- the current operational environment demands that we adapt; our Soldiers are adapting; so we must also adapt our doctrine, organization, and training.

We examined the two key components of detainee operations: the capture, security and humane treatment of the detainees; and the conduct of interrogation operations in order to gain useful intelligence. While we did not find any systemic failures that directly led to the abusive situations we reviewed, we have made recommendations to improve the effectiveness of detainee operations.

We found that Soldiers are conducting operations under demanding, stressful, and dangerous conditions against an enemy who does not follow the Geneva Conventions. They are in an environment that puts a tremendous demand on human intelligence, particularly, at the tactical level where contact with the enemy and the people are most intense. They do understand their duty to treat detainees humanely and in accordance with laws of land warfare. These Soldiers understand their obligation to report incidents of abuse when they do occur, and they do so. Our leaders have been developed, trained and educated to adapt to the environment in which they find themselves. They understand their tasks, conditions and standards. The conditions of the current operations have caused them to adapt their tactics, techniques and procedures within their capabilities to accommodate this operational environment.

Expanding our doctrine to provide commanders flexibility and adaptability within well-defined principles will better enable them to conduct these operations. Our training and education systems at the individual, unit, and institutional levels must continue to be thorough and realistically simulate the intensity of the environment in which we now operate.

While the primary purpose of this inspection was not to examine specific incidents of abuse, we did analyze reported incidents to determine their root or fundamental causes. To provide a context for the incidents, we noted that an estimated 50,000 individuals were detained for at least some period of time by U.S. Forces during the conduct of OPERATION ENDURING FREEDOM and OPERATION IRAQI FREEDOM. U.S. Forces' contact with the local populace at checkpoints, on patrols, and in other situations increases the number of contacts well in excess of this 50,000 estimate. As of 9 June 2004, there were 94 cases of confirmed or possible abuse of any type, which include, theft, physical assault, sexual assault, and death.

The abuses that have occurred are not representative of policy, doctrine, or Soldier training. These abuses should be viewed as what they are - unauthorized actions taken by a few individuals, and in some cases, coupled with the failure of a few leaders to provide adequate supervision and leadership. These actions, while regrettable, are aberrations when compared to the actions of fellow Soldiers who are serving with distinction.

FOREWORD

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Executive Summary

Detainee Operations

1. **Background:** On 10 February 2004, the Acting Secretary of the Army directed the Department of the Army Inspector General (DAIG) to conduct an assessment of detainee operations in Afghanistan and Iraq. In order to satisfy this directive, the DAIG inspected internment, enemy prisoner of war, detention operations, and interrogation procedures in Afghanistan and Iraq. The inspection focused on the adequacy of Doctrine, Organization, Training, Materiel, Leadership, Personnel, and Facilities (DOTMLPF), standards, force structure, and policy in support of these types of operations.

This inspection was not an investigation of any specific incidents or units but rather a comprehensive review of how the Army conducts detainee operations in Afghanistan and Iraq.

The DAIG did not inspect the U.S. military corrections system or operations at the Guantanamo Bay Naval Base during this inspection. Central Intelligence Agency (CIA) and Defense HUMINT Services (DHS) operations were not inspected.

2. **Purpose:** Conduct a functional analysis of the Army's internment, enemy prisoner of war, detention operations, and interrogation procedures, policies, and practices based on current Department of Defense and Army policies and doctrine. The inspection is to identify any capability and systemic shortfalls with respect to internment, enemy prisoner of war, detention operations, and interrogation procedures and recommend appropriate resolutions or changes if required.

3. **Concept:** Two teams conducted inspections of 26 locations in Iraq, Afghanistan, and the Continental United States (CONUS). The CONUS team consisted of seven personnel, including augmentees, and visited 10 locations while the OCONUS team consisted of nine personnel, including augmentees, and inspected 16 locations. We interviewed and surveyed over 650 leaders and Soldiers spanning the ranks from Private to Major General. We also reviewed 103 reports of allegations of abuse from Criminal Investigation Division (CID) and 22 unit investigations that covered the period from September 2002 to June 2004.

4. **Objectives:** The DAIG Team had four objectives for the inspection:

a. Assess the adequacy of DOTMLPF of Army Forces for internment, enemy prisoner of war, detention operations, and interrogation procedures.

b. Determine the standards for Army Forces charged with internment, enemy prisoner of war, detention operations and interrogation procedures (e.g., size, equipment, standardization, and training).

c. Assess current and future organizations and structures for Army Forces responsible for internment, enemy prisoner of war, detention operations and interrogation procedures.

d. Identify and recommend any changes in policy related to internment, enemy prisoner of war, detention operations and interrogation procedures.

5. Synopsis:

In the areas that we inspected, we found that the Army is accomplishing its mission both in the capture, care, and custody of detainees and in its interrogation operations. The overwhelming majority of our leaders and Soldiers understand and adhere to the requirement to treat detainees humanely and consistent with the laws of land warfare. Time and again these Soldiers, while under the stress of combat operations and prolonged insurgency operations, conduct themselves in a professional and exemplary manner.

The abuses that have occurred in both Afghanistan and Iraq are not representative of policy, doctrine, or Soldier training. These abuses were unauthorized actions taken by a few individuals, coupled with the failure of a few leaders to provide adequate monitoring, supervision, and leadership over those Soldiers. These abuses, while regrettable, are aberrations when compared to their comrades in arms who are serving with distinction.

The functional analysis of the Army's internment, enemy prisoner of war, detention operations, and interrogation procedures, policies, and practices can be broken down into two main functions: (1) capture, care, and control of detainees, and (2) interrogation operations.

We determined that despite the demands of the current operating environment against an enemy who does not abide by the Geneva Conventions, our commanders have adjusted to the reality of the battlefield and, are effectively conducting detainee operations while ensuring the humane treatment of detainees. The significant findings regarding the capture, care, and control of detainees are:

- All interviewed and observed commanders, leaders, and Soldiers treated detainees humanely and emphasized the importance of the humane treatment of detainees.
- In the cases the DAIG reviewed, all detainee abuse occurred when one or more individuals failed to adhere to basic standards of discipline, training, or Army Values; in some cases abuse was accompanied by leadership failure at the tactical level.
- Of all facilities inspected, only Abu Ghraib was determined to be undesirable for housing detainees because it is located near an urban population and is under frequent hostile fire, placing Soldiers and detainees at risk.

We determined that the nature of the environment caused a demand for tactical human intelligence. The demands resulted in a need for more interrogators at the tactical level and better training for Military Intelligence officers. The significant findings regarding interrogation are:

- Tactical commanders and leaders adapted their tactics, techniques, and procedures, and held detainees longer than doctrinally recommended due to the demand for timely, tactical intelligence.
- Doctrine does not clearly specify the interdependent, and yet independent, roles, missions, and responsibilities of Military Police and Military Intelligence units in the establishment and operation of interrogation facilities.
- Military Intelligence units are not resourced with sufficient interrogators and interpreters, to conduct timely detainee screenings and interrogations in the current

operating environment, resulting in a backlog of interrogations and the potential loss of intelligence.

- Tactical Military Intelligence Officers are not adequately trained to manage the full spectrum of the collection and analysis of human intelligence.
- Officially approved CJTF-7 and CJTF-180 policies and the early CJTF-180 practices generally met legal obligations under U.S. law, treaty obligations and policy, if executed carefully, by trained soldiers, under the full range of safeguards. The DAIG Team found that policies were not clear and contained ambiguities. The DAIG Team found implementation, training, and oversight of these policies was inconsistent; the Team concluded, however, based on a review of cases through 9 June 2004 that no confirmed instance of detainee abuse was caused by the approved policies.

We reviewed detainee operations through systems (Policy and Doctrine, Organizational Structures, Training and Education, and Leadership and Discipline) that influence how those operations are conducted, and have identified findings and recommendations in each. While these findings are not critical, the implementation of the corresponding recommendations will better enable our commanders to conduct detainee operations now and into the foreseeable future, decrease the possibility of abuse, and ensure we continue to treat detainees humanely.

The findings and observations from this inspection are separated into the following three chapters: Chapter 3 - Capture, Care, and Control of Detainees, Chapter 4 - Interrogation Operations, and Chapter 5 - Other Observations. A summary of the Capture, Care, and Control of Detainees and the Interrogation Operation findings is provided below.

Capture, Care, and Control of Detainees

Army forces are successfully conducting detainee operations to include the capture, care, and control of detainees. Commanders and leaders emphasized the importance of humane treatment of detainees. We observed that leaders and Soldiers treat detainees humanely and understand their obligation to report abuse. In those instances where detainee abuse occurred, individuals failed to adhere to basic standards of discipline, training, or Army Values; in some cases individual misconduct was accompanied by leadership failure to maintain fundamental unit discipline, failure to provide proper leader supervision of and guidance to their Soldiers, or failure to institute proper control processes.

We found through our interviews and observations conducted between 7 March 2004 and 5 April 2004 that leaders and Soldiers in Afghanistan and Iraq were determined to do what was legally and morally right for their fellow Soldiers and the detainees under their care. We found numerous examples of military professionalism, ingrained Army Values, and moral courage in both leaders and Soldiers. These leaders and Soldiers were self-disciplined and demonstrated an ability to maintain composure during times of great stress and danger. With the nature of the threat in both Afghanistan and Iraq, Soldiers are placed in extremely dangerous positions on a daily basis. They face the daily risks of being attacked by detainees, contracting communicable diseases from sick detainees, being taunted or spat upon, having urine or feces thrown upon them, and having to treat a detainee humanely who just attacked their unit or killed a fellow Soldier. Despite these challenges, the vast majority of Soldiers and other U.S. Military personnel continued to do their duty to care for detainees in a fair and humane manner.

Our review of the detainee abuse allegations attempted to identify underlying causes and contributing factors that resulted in abusive situations. We examined these from the perspective

of the Policy and Doctrine, Organizational Structures, Training and Education, and Leadership and Discipline systems. We also examined them in terms of location on the battlefield and sought to determine if there was a horizontal, cross-cutting system failure that resulted in a single case of abuse or was common to all of them. Based on this inspection, we were unable to identify system failures that resulted in incidents of abuse. These incidents of abuse resulted from the failure of individuals to follow known standards of discipline and Army Values and, in some cases, the failure of a few leaders to enforce those standards of discipline. We also found that our policies, doctrine, and training are being continually adapted to address the existing operational environment regarding detainee operations. Commanders adjusted existing doctrinal procedures to accommodate the realities of the battlefield. We expect our leaders to do this and they did. The Army must continue to educate for uncertain environments and develop our leaders to adapt quickly to conditions they confront on the battlefield.

Using a data cut-off of 9 June 2004 we reviewed 103 summaries of Army CID reports of investigation and 22 unit investigation summaries conducted by the chain of command involving detainee death or allegations of abuse. These 125 reports are in various stages of completion. 31 cases have been determined that no abuse occurred; 71 cases are closed; and 54 cases are open or undetermined. Of note, the CID investigates every occurrence of a detainee death regardless of circumstances.

Recognizing that the facts and circumstances as currently known in ongoing cases may not be all-inclusive, and that additional facts and circumstances could change the categorization of a case, the Team placed each report in a category for the purposes of this inspection to understand the overall numbers and the facts currently known, and to examine for trends or systemic issues. This evaluation of allegations of abuse reports is not intended to influence commanders in the independent exercise of their responsibilities under the Uniform Code of Military Justice (UCMJ) or other administrative disciplinary actions. As an Inspector General inspection, this report does not focus on individual conduct, but on systems and policies.

This review indicates that as of 9 June 2004, 48% (45 of 94) of the alleged incidents of abuse occurred at the point of capture, where Soldiers have the least amount of control of the environment. For this inspection, the DAIG Team interpreted point of capture events as detainee operations occurring at battalion level and below, before detainees are evacuated to doctrinal division forward or central collecting points (CPs). This allowed the DAIG Team to analyze and make a determination to where and what level of possible abuse occurred. The point of capture is the location where most contact with detainees occurs under the most uncertain, dangerous, and frequently violent circumstances.

This review further indicates that as of 9 June 2004, 22% (21 of 94) of the alleged incidents of abuse occurred at Internment/Resettlement (I/R) facilities. This includes the highly publicized incident at Abu Ghraib. Those alleged abuse situations at I/R facilities are attributed to individual failure to abide by known standards and/or individual failure compounded by a leadership failure to enforce known standards, provide proper supervision, and stop potentially abusive situations from occurring. As of 9 June 2004, 20%, (19 of 94) of the alleged incidents of abuse occurred at CPs. For the remaining 10% (9 of 94) of the alleged incidents of abuse, a location could not be determined based on the CID case summaries.

*Note For the purpose of this inspection, we defined abuse as wrongful death, assault, sexual assault, and theft.

The Army estimates that over 50,000 detainees have been captured or processed. While even one case of abuse is unacceptable, we conclude that given the volume of detainees and the potential for abuse in these demanding circumstances, the overwhelming majority of our Soldiers and leaders are conducting these operations with due regard for the detainees right to be treated humanely and properly.

Detainee abuse does not occur when individual Soldiers remain disciplined, follow known procedures, and understand their duty obligation to report abusive behavior. Detainee abuse does not occur when leaders of those Soldiers who deal with detainees enforce basic standards of humane treatment, provide oversight and supervision of detainee operations, and take corrective action when they see potentially abusive situations developing. Our site visits, interviews, sensing sessions, and observations indicate that the vast majority of Soldiers and leaders, particularly at the tactical level, understand their responsibility to treat detainees humanely and their duty obligation to report infractions.

We inspected I/R facilities at Bagram, Baghdad, and Camp Bucca and found only Abu Ghraib overcrowded, located near a densely populated urban area, on a dangerous main supply route, and subject to frequent hostile enemy fire from enemy mortars or rockets. The physical design of the camps within the prison was not optimal for the mission: towers were not properly placed to support overlapping fields of fire and cover blind spots; entrance/egress routes were hampered by make-shift gates; and sally ports were not used correctly. The supply of fresh water was difficult to maintain and the food quality was sub-standard. Detainees did not have access to bunkers or shelters with overhead cover to protect them from hostile enemy mortar or rocket fire from outside the walls of Abu Ghraib.

Interrogation Operations

The need for timely, tactical human intelligence is critical for successful military operations particularly in the current environment. Commanders recognized this and adapted by holding detainees longer at the point of capture and collecting points to gain and exploit intelligence. Commanders and interrogators also conducted tactical questioning to gain immediate battlefield intelligence. Commanders and leaders must set the conditions for success, and commanders, leaders, and Soldiers must adapt to the ever changing environment in order to be successful.

Of the interviewed point of capture battalion and company leaders, 61% (25 of 41) stated their units established CPs and held detainees at their locations from 12 hours up to 30 days. The primary reason units held detainees at these locations was to conduct screenings and interrogations closer to the point of capture. The result of holding detainees for longer timeframes at all locations was increased requirements in facility infrastructure, medical care, preventive medicine, trained personnel, logistics, and security. Organic unit personnel at these locations did not have the required institutional training and were therefore unaware of or unable to comply fully with Army policies in areas such as detainee processing, confinement operations, security, preventive medicine, and interrogation.

Doctrine does not clearly and distinctly address the relationship between the MP operating I/R facilities and the Military Intelligence (MI) personnel conducting intelligence exploitation at those facilities. Neither MP nor MI doctrine specifically defines the interdependent, yet independent, roles, missions, and responsibilities of the two in detainee operations. MP doctrine states MI may collocate with MP at detention sites to conduct interrogations, and coordination should be made to establish operating procedures. MP doctrine does not,

however, address approved and prohibited MI procedures in an MP-operated facility. It also does not clearly establish the role of MPs in the interrogation process. Conversely, MI doctrine does not clearly explain MP internment procedures or the role of MI personnel within an internment setting. Contrary to MP doctrine, FM 34-52, Intelligence Interrogation, 28 September 1992, implies an active role for MPs in the interrogation process: "Screeners coordinate with MP holding area guards on their role in the screening process. The guards are told where the screening will take place, how EPWs and detainees are to be brought there from the holding area, and what types of behavior on their part will facilitate the screenings." Subordination of the MP custody and control mission to the MI need for intelligence can create settings in which unsanctioned behavior, including detainee abuse, could occur. Failure of MP and MI personnel to understand each other's specific missions and duties could undermine the effectiveness of safeguards associated with interrogation techniques and procedures.

Doctrine that addresses the establishment and operation of interrogations contains inconsistent guidance on terminology, structure, and function of these facilities. At the time of the inspection there were facilities in OPERATION ENDURING FREEDOM and OPERATION IRAQI FREEDOM that conducted intelligence exploitation as Joint Interrogation Facilities and as a Joint Interrogation and Debriefing Center. The intelligence sections of each were uniquely structured to meet mission requirements.

Shortfalls in numbers of interrogators and interpreters, and the distribution of these assets within the battlespace, hampered human intelligence (HUMINT) collection efforts. Valuable intelligence—timely, complete, clear, and accurate—may have been lost as a result. Interrogators were not available in sufficient numbers to efficiently conduct screening and interrogations of the large numbers of detainees at collecting points (CPs) and internment/resettlement (I/R) facilities, nor were there enough to man sufficient numbers of Tactical Human Intelligence Teams (THTs) for intelligence exploitation at points of capture. Interpreters, especially those Category II personnel authorized to participate in interrogations, were also in short supply. Units offset the shortage of interrogators with contract interrogators. While these contract interrogators provide a valuable service, we must ensure they are trained in military interrogation techniques and policy.

Due to the demand for immediate tactical intelligence, tactical intelligence officers were conducting interrogations of detainees without thorough training on the management of HUMINT analysis and collection techniques. They were not adequately trained to manage the full spectrum of HUMINT assets being used in the current operating environment. The need for these officers to understand the management of the full spectrum of HUMINT operations is a key for successful HUMINT exploitation in the current operating environment.

Current interrogation doctrine includes 17 interrogation approach techniques. Doctrine recognizes additional techniques may be applied. Doctrine emphasizes that every technique must be humane and be consistent with legal obligations. Commanders in both OEF and OIF adopted additional interrogation approach technique policies. Officially approved CJTF-180 and CJTF -7 generally met legal obligations under U.S. law, treaties and policy, if executed carefully, by trained soldiers, under the full range of safeguards. The DAIG Team found that some interrogators were not trained on the additional techniques in either formal school or unit training programs. Some inspected units did not have the correct command policy in effect at the time of inspection. Based on a review of CID case summaries as of 9 June 2004, the team was unable to establish any direct link between the proper use of an approved approach technique or techniques and a confirmed case of detainee abuse.

6. Conclusion: The Army's leaders and Soldiers are effectively conducting detainee operations and providing for the care and security of detainees in an intense operational environment. Based on this inspection, we were unable to identify system failures that resulted in incidents of abuse. This report offers 52 recommendations that are designed to improve the ability of the Army to accomplish the key tasks of detainee operations: keep the enemy off the battlefield in a secure and humane manner, and gain intelligence in accordance with Army standards.

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Chapter 1

Background and Inspection Concept

1. **Background:** On 10 February 2004, the Acting Secretary of the Army directed the Department of the Army Inspector General (DAIG) to conduct an assessment of detainee operations in Afghanistan and Iraq. In order to satisfy the Acting Secretary of the Army's directive, the DAIG inspected internment, enemy prisoner of war, detention operations, and interrogation procedures in Iraq and Afghanistan. The inspection focused on the adequacy of Doctrine, Organization, Training, Materiel, Leadership, Personnel, and Facilities (DOTMLPF), standards, force structure, and policy.
2. **Inspection Concept:** The detailed concept for this inspection is as follows:
 - a. **Purpose:** The purpose of this inspection was to conduct a functional analysis of detainee operations based on current Department of Defense (DoD) and Army policy and doctrine.
 - b. **Objectives:**
 - (1) Assess the adequacy of DOTMLPF of Army Forces for internment, enemy prisoner of war, detention operations, and interrogation procedures.
 - (2) Determine the standards for Army Forces charged with internment, enemy prisoner of war, detention operations and interrogation procedures (e.g., size, equipment, standardization, and training).
 - (3) Assess current and future organizations and structures for Army Forces responsible for internment, enemy prisoner of war, detention operations and interrogation procedures.
 - (4) Identify and recommend any changes in policy related to internment, enemy prisoner of war, detention operations and interrogation procedures.
 - c. **Scope:** Two teams conducted inspections of 25 locations in Iraq, Afghanistan, and the Continental United States (CONUS). The CONUS team consisted of seven personnel, including augmentees, and visited seven locations while the OCONUS team consisted of nine personnel, including augmentees, and inspected 16 locations. We interviewed and surveyed over 650 leaders and Soldiers spanning the ranks from Private to Major General. We also reviewed 103 reports of allegations of abuse from Criminal Investigation Division (CID) and 22 unit investigations that cover the period of September 2002 to June 2004.
 - d. **Focus:** The inspection focused on the functional analysis of the Army's internment, enemy prisoner of war, and detention policies, practices, and procedures as the Army executes its role as the DoD Executive Agent for Enemy Prisoners of War and Detention Program. Numerous DoD Policies, Army Regulations, and Army Field Manuals provided the guiding tenets for this inspection.
 - e. **Task Organization:** Two teams from the DAIG Inspections Division, with augmentation from the Office of the Provost Marshal General (OPMG), Office of the Judge Advocate General (OTJAG), Office of the Surgeon General (OTSG), U.S. Army Maneuver Support Center

(USAMANSCEN), U.S. Army Criminal Investigation Command (USACIC), U.S. Army Special Operations Command (USASOC), and the U.S. Army Intelligence Center (USAIC) conducted the inspection by traveling to 25 locations in CONUS and OCONUS. The composition of these teams was as follows:

Inspector General

CONUS

Team Chief IG
Detailed IG
Detailed IG
Assistant IG
Expert from OTSG
Expert from OPMG
Expert from USACIC (Assistant IG)

OCONUS

Team Chief IG
Operation Officer IG
Detailed IG
Detailed IG
Expert from USASOC
Expert from OTJAG
Expert from USAIC
Expert from USAMANSCEN (Assistant IG)
Expert from OPMG

f. Inspection Process:

- (1) Preparation Phase: Research and Training (February - March 2004)
- (2) Execution Phase: On-Site Inspections (March - April 2004)
- (3) Completion Phase: Final Report Preparation (April - June 2004)

g. Inspection Locations and Schedule: See Appendix C.

h. Inspection Approach: The Inspectors General (IG) for Combined Forces Land Component Command (CFLCC), Combined Joint Task Force-7 (CJTF-7), Combined Joint Task Force-180 (CJTF-180), and local IGs served as coordinating agents for all DAIG inspection activities at those locations. These IGs were telephonically and electronically notified by DAIG with the Notification Memorandum and Detailed Inspection Plan that was sent to all affected Commanders/IGs on 20 February 2004.

i. Other Reports: This report mentions the Ryder Report, Miller Report, and Taguba Investigation throughout its inspection results. These two reports and investigation deal with the following: the Ryder Report is an assessment of detention and corrections operations in Iraq; the Miller Report is a classified assessment of the Department of Defense's counterterrorism interrogation and detention operations in Iraq; and the Taguba Investigation is a classified investigation under Army Regulation 15-6 into the 800th Military Police (MP) Brigade's detention and internment operations.

j. Definitions: The DAIG used the following definitions throughout the report.

(1) The DAIG defined the term "detainee operations" as the range of actions taken by Soldiers beginning at the point of capture, the movement of detainees through division forward and central collecting points (CPs), to internment at internment/resettlement (I/R) facilities, and release. This includes the administrative and medical processing of detainees, medical treatment of detainees, sanitary conditions at I/R facilities and CPs, and interrogation procedures. The term "detainee operations" does not apply to confined U.S. Military personnel.

(2) Army Regulation (AR) 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, defines the term detainee as "any person captured or otherwise detained by an armed force." The DAIG uses the term as defined by AR 190-8 in this report. The term "detainee" includes enemy prisoners of war (EPWs), retained persons (RP), civilian internees (CIs), and other detainees (ODs). When making a differentiation between the different classifications of detainees, the report will specifically mention EPWs, RPs, CIs, or ODs. The report will also point out the use of non-doctrinal terms sometimes used as detainee classifications.

(3) The battlespace of OPERATION ENDURING FREEDOM (OEF) and OPERATION IRAQI FREEDOM (OIF) included an enemy that deployed asymmetrically with adaptive tactics; a battlespace in which there was not always a clear forward line of troops, massing of forces, or an identifiable rear area to which detainees could be rapidly evacuated. The battlespace of OEF and OIF was non-linear with combat and stability operations taking place simultaneously throughout the areas of operation. Combatants included both uniformed and non-uniformed state and non-state sponsored forces who fought using conventional and non-conventional methods to include terrorist actions against both military and civilian targets. Detainees were, and continue to be, more than compliant civilian internees and enemy prisoners of war. They are primarily a noncompliant hostile population that requires more intensive screening, interrogation and segregation. The Army is in a new and unique operational environment stemming from the need for immediate tactical level intelligence coupled with the significant numbers of non-traditional combatants/detainees encountered.

(4) We define a problem as systemic if it is widespread and presents a pattern. We attempted through observations, sensing sessions, interviews, site visits, surveys, and reviews of documents, other reports, and investigations to identify failures in the systems that comprise detainee operations.

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Chapter 2

Inspection Methodology

The Department of the Army Inspector General (DAIG) Team developed a baseline approach to the inspection that focused on gathering information and data from five primary domains: interviews, sensing sessions, document reviews, surveys of commanders, leaders, and Soldiers, and site visits. This approach allowed the Team to glean perceptions and attitudes about detainee operations from selected individuals and populations; to assess detainee operations in doctrinal manuals, unit policies, unit Standing Operating Procedures (SOPs); and to determine compliance with Department of Defense (DoD) and Army policies. The Team visited U.S. Armed Forces-controlled internment/resettlement (I/R) facilities and division central and forward collecting points (CPs), as well as units conducting patrol missions, to gather overall trends and observations on detainee operations from point of capture to the processing conducted at U.S. Armed Forces-controlled I/R facilities.

This baseline methodology afforded the Team a standard, systematic approach to conducting an inspection at each location, which proved essential since the DAIG Team conducted split operations with two teams that traveled separately to continental United States (CONUS) and outside the continental United States (OCONUS) locations. The Team had to tailor their trips to look at units that had already returned from OPERATION ENDURING FREEDOM (OEF) and OPERATION IRAQI FREEDOM (OIF) as well as those units currently deployed.

The methodology established a three-phase plan for executing the inspection.

a. **Phase 1: Preparation.** This phase included travel planning, pre-deployment training, administrative requirements, a review of documents the Team requested in advance from the unit IGs, pre-inspection visits to the National Training Center (NTC) at Fort Irwin and the Joint Readiness Training Center (JRTC) at Fort Polk, and development of a detailed inspection plan.

b. **Phase 2: Execution.** This phase outlined the physical execution of the itinerary developed by the local IG in accordance with the Detailed Inspection Plan. Each visit began with an inbrief to the unit's senior leadership and ended with an outbrief. The DAIG Team conducted interviews, sensing sessions, and a survey of Commanders, leaders and Soldiers currently in the area of responsibility (AOR) and those who recently returned from OEF and OIF to determine detainee operations tactics, techniques, and procedures from point of capture to arrival at the CPs; inspected CPs from receipt of detainees to the transfer of detainees to U.S. Armed Forces-controlled I/R facilities; inspected U.S. Armed Forces-controlled I/R facilities and operations; and reviewed policies, plans, records, programs, Standard Operating Procedures (SOPs), and other related documents.

c. **Phase 3: Completion.** The DAIG Team returned to home station and conducted post-trip data analyses of the information gathered. The Team then crafted detailed trip reports of the visit that captured the critical information gleaned from the trips. These trip reports formed the basis from which the Team developed the findings outlined in the report. Additionally, team members cross-walked information and traveled to the MI and MP schools for coordination and confirmation of information used in the findings.

The following section outlines the baseline methodology in detail to include the specific requirements for interviews and sensing sessions based upon the type of unit visited.

a. **Inspection Methodology.** The local IG served as the coordinating agent for all DAIG inspection activities. The coordinating agent worked with his or her respective DAIG Team point of contact (POC) to develop an itinerary for a four-day inspection for CONUS units and a 30-day period for OCONUS. The coordinating agent and DAIG Team POC fine-tuned the itinerary to maximize the Team's ability to meet the inspection's baseline requirements.

b. **Personnel Interviewed:**

(1) OCONUS

(a) The Team conducted interviews at CFLCC, CJTF-7, CJTF-180, U.S. Armed Forces-controlled I/R facilities, and division CPs. The Team interviewed selected leaders from CFLCC/CJTF/division/brigade/battalion staffs and company level personnel. Individual interviews occurred in the interviewee's office or in a similar location free from interruptions and telephone calls. The coordinating agent scheduled these interviews to last no more than 1.5 hours. The coordinating agent also considered geographical dispersion and travel times between events. The interviews were conducted by one or two DAIG Team members with the unit interviewee.

(b) The DAIG Team conducted sensing sessions at each U.S. Armed Forces-controlled I/R facility, division CPs, and at the company level, one for junior enlisted (Private through Specialist, but not including Corporals) and one for junior noncommissioned officers (Sergeant and Staff Sergeant). Units provided eight to twelve Soldiers per session. Each sensing session required a classroom or similar facility that was removed from the unit's normal work location. The area was relatively quiet and free from interruptions and telephone calls. In addition, the room needed no less than 14 chairs or desks formed in a circle or square. The coordinating agent scheduled 1.5-hour time blocks for each sensing session. The sensing sessions were conducted by two DAIG Team members with the unit Soldiers.

(c) The coordinating agent adjusted the interview schedule, in coordination with the Team, based upon the availability of personnel. The Team recognized that only full-time manning personnel might be available in Reserve Component units.

(d) The matrix below was a strawman that was finalized by the DAIG Team POC and the local IG for the OCONUS inspection.

Interviewee/ Sensing Session Requirements	CFLCC	CJTF	DIV COLL Point	BDE COLL Point	Co	MP BDE /BN	US Military Controlled/ Oversight Det Fac
SJA			1			1	1
G2/S2 (for HUMINT purposes)	1	1	1	1		1	1
S1 (if involved with detainee processing)						1	1

SURGEON/ME D OFF	1	1	1	1		1	1
PMO	1	1	1				
CHAPLAIN			1	1		1	1
ENGINEER/S4		1	1	1		1	1
CDR/OIC			1	1	1	1	1
1SG/NCOIC			1	1	1	1	1
S3						1	
INTERROGAT OR (depending where they are located)			3	3			3
GUARD (E1-4) SENSING SESSION			1 EA (8- 12 SOLDIE RS)	1 EA (8-12 SOLDIERS)			1 EA (8-12 SOLDIER S)
GUARD (E5-6) SENSING SESSION			1 EA (8- 12 SOLDIE RS)	1 EA (8-12 SOLDIERS)			1 EA (8-12 SOLDIER S)
GUARD (NCOIC)			1	1			1
SECURITY FORCE (E1-4) SENSING SESSION							1 EA (8-12 SOLDIER S)
SECURITY FORCE (E5-6) SENSING SESSION							1 EA (8-12 SOLDIER S)
SECURITY FORCE NCOIC							1
INFANTRY BDE XO				1			
INFANTRY BN XO				1			
INFANTRY Co CDR/1SG				1			
PREVENTIVE MED INSP			1	1			1
COLL PT MP PLT LDR			1	1			
COLL PT MP PLT SGT			1	1			
UNIT PLT LDR INVOLVED WITH CAPTURE OF PERSONNEL						2	

UNI PLT SGT INVOLVED WITH CAPTURE OF PERSONNEL					2		
UNIT SOLDIERS INVOLVED WITH CAPTURE OF PERSONNEL (E1-4) SENSING SESSION					2 EA (8-12 SOLDIERS) PER COLLECTING POINT		
UNIT SOLDIERS INVOLVED WITH CAPTURE OF PERSONNEL (E5-6) SENSING SESSION					2 EA (8-12 SOLDIERS) PER COLLECTING POINT		

(2) CONUS

(a) The Team conducted interviews of division, brigade, battalion, and company level personnel. The Team interviewed selected leaders from each of these type units. Individual interviews occurred in the interviewee's office or in a similar location that was free from interruptions and telephone calls. The coordinating agent scheduled these interviews to last no more than 1.5 hours. The coordinating agent considered geographical dispersion and travel times between events. The interviews were conducted by one or two Team members with the unit interviewee.

(b) The DAIG Team conducted sensing sessions with collecting point and I/R facility guards and with Soldiers who captured personnel during OEF and OIF. Sensing sessions included one for junior enlisted (Private through Specialist, but not including Corporals) and one for junior noncommissioned officers (Sergeant and Staff Sergeant). Units provided eight to twelve Soldiers per session. Each sensing session required a classroom or similar facility that was removed from the unit's normal work location. The area was relatively quiet and free from interruptions and telephone calls. In addition, the room needed no less than 14 chairs or desks formed in a circle or square. The coordinating agent scheduled 1.5-hour time blocks for each sensing session. The sensing sessions were conducted by two Team members with the unit Soldiers.

(c) The coordinating agent adjusted the interview schedule, in coordination with the Team, based upon the availability of personnel. The Team recognized that only full-time manning personnel might be available in Reserve Component units.

(d) The matrix below was a strawman that was finalized by the DAIG Team POC and the local IG for the CONUS inspection.

Interviewee/Sensing Session Requirements	DIV/SEP BDE	BDE	BN	Co
INFANTRY CDR			1	1
INFANTRY CSM/1SG			1	1
INFANTRY XO		1		
MP CDR/XO	1		1	
MP S4	1		1	
PMO	1			
COLL PT GUARDS (E1-4) SENSING SESSION				1 EA (8-12 SOLDIERS)
COLL PT GUARDS (E5-6) SENSING SESSION				1 EA (8-12 SOLDIERS)
GUARD (NCOIC)				1
DSA/BSA CDR (if coll pt was is in DSA/BSA)			2	
COLL PT MP PLT LDR				1
COLL PT MP PLT SGT				1
UNIT PLT LDR INVOLVED WITH CAPTURE OF PERSONNEL			2	
UNIT PLT SGT INVOLVED WITH CAPTURE OF PERSONNEL			2	
UNIT SOLDIERS INVOLVED WITH CAPTURE OF PERSONNEL (E1-4) SENSING SESSION				2 EA (8-12 SOLDIERS)
UNIT SOLDIERS INVOLVED WITH CAPTURE OF PERSONNEL (E5-6) SENSING SESSION				2 EA (8-12 SOLDIERS)
CHAPLAIN	1	1	1	

d. **Administrative Support Requirements.** The DAIG Team conducted this inspection with minimal disruption to ongoing unit missions. The Team required special arrangements from the field Inspectors General (IGs), including assistance with country clearances, travel in the AOR, in-country travel, sleeping arrangements, convoy security arrangements, body armor, weapons and ammunition, communications, scheduling of inbriefs and outbriefs, interviews and sensing sessions, and an appropriate work space for up to nine personnel conducting DAIG business.

e. **Documents Reviewed In Advance (OCONUS Only):**

(1) All inspections related to detainee operations, including command products, Inspector General products, Criminal Investigative Division(CID), legal, etc.

(2) All case histories of punishment (judicial and non-judicial) relating to detainee abuse.

(3) Past and current Rules of Engagement (ROE).

f. **Documents Reviewed on Site (OCONUS Only):**

(1) Unit TACSOPs relating to detainee operations (e.g., 5Ss and T, collecting point procedures, and inventorying EPW belongings).

(2) U.S. Armed Forces-controlled I/R facility SOPs.

(3) I/R BDE/BN/CO unit manning documentation.

(4) DD Form 2745 (EPW Capture Tag) log.

(5) DD Form 629 (Receipt for Prisoner or Detained Person) log.

(6) DA Form 4137 (Receipt for Evidence/Property Custody Document) log.

(7) DD Form 2708 (Receipt of Inmate/Detained Person) log.

(8) DD Form 1594 (Duty Logs).

(9) U.S. Armed Forces-controlled I/R facilities reporting system database.

(10) Facility maintenance and repair documentation.

(11) Facility security SOP.

(12) Detainee in/out-processing documentation.

g. **Documents Reviewed During Inspections (CONUS Only):**

(1) Unit Tactical Standing Operating Procedures (TACSOP) relating to detainee operations (e.g., 5Ss and T, collecting point procedures, and inventorying EPW belongings).

(2) U.S. Armed Forces-controlled I/R facility SOPs.

(3) I/R Brigade (BDE)/Battalion (BN)/Company (Co) unit manning documentation.

h. **Inspection Itineraries.** DAIG requested each coordinating agent develop a draft itinerary that met the requirements listed in paragraph b. DAIG requested the coordinating agent include the necessary travel time between scheduled locations. The DAIG Team POC and the coordinating agent developed an itinerary that allows the DAIG Team to meet the objectives listed in Chapter 1 paragraph 2b. The DAIG Team conducted an inbrief with the senior commander/representative at each location.

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Chapter 3

Capture, Care, and Control of Detainees

1. **Summary of Findings:** Army forces are successfully conducting detainee operations to include the capture, care, and control of detainees. Commanders and leaders emphasized the importance of humane treatment of detainees and, currently, leaders and Soldiers treat detainees humanely and understand their obligation to report abuse. In those instances where detainee abuse occurred, individuals failed to adhere to basic standards of discipline, training, or Army Values; in some cases individual misconduct was accompanied by leadership failure to maintain fundamental unit discipline, failure to provide proper leader supervision of and guidance to their Soldiers, or failure to institute proper control processes.

For the purpose of this inspection, we defined abuse as wrongful death, assault, battery, sexual assault, sexual battery, or theft. As of 9 June 2004 we had reviewed 103 summaries of Criminal Investigative Division (CID) reports of investigation and 22 unit investigation summaries conducted by the chain of command involving detainee death or alleged abuse. These 125 reports are in various stages of completion. No abuse was determined to have occurred in 31 cases; 71 cases are closed; and 54 cases are open or undetermined. Of note, the CID investigates every occurrence of a detainee death regardless of circumstances. While recognizing that any abuse incident is one too many, we conducted a review and categorization of the summary reports of the 125 investigations. Based on our review and analysis of reports and case summaries of investigations and our observations and interviews conducted throughout this inspection, we could not identify a systemic cause for the abuse incidents. The DAIG uses the term "systemic" specifically to describe a problem if it is widespread and presents a pattern. As defined by the DAIG in this report, a systemic issue may be found either horizontally across many various types of units, or vertically through many command levels or within systems. The DAIG determined that incidents where detainees were allegedly mistreated occurred as isolated events. In a few incidents, higher ranking individuals up to Lieutenant Colonel were involved; however, the chain of command took action when an allegation of detainee abuse was reported.

Abu Ghraib had problems with deteriorating infrastructure that impacted the clean, safe, and secure working environment for Soldiers and living conditions for detainees. Poor food quality and food distribution, lack of laundry capability, and inadequate personal hygiene facilities affected the detainees' living conditions. Overcrowding, frequent enemy hostile fire, and lack of in-depth force protection measures also put Soldiers and detainees at risk.

2. Findings:

a. Finding 1:

(1) Finding: All interviewed and observed commanders, leaders, and Soldiers treated detainees humanely and emphasized the importance of the humane treatment of detainees.

(2) Standard: See Appendix E.

(3) Inspection Results: The DAIG Team conducted numerous interviews and sensing sessions with leaders and Soldiers that revealed most leaders and Soldiers have treated detainees humanely and would report detainee abuse if they became aware of it.

For OPERATION ENDURING FREEDOM(OEF), Chairman Joint Chiefs of Staff(CJCS) Message dated 211933Z JAN 02, stated that Al Qaida and Taliban would be treated humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions. Therefore, most detainees were classified as civilian internees (CIs) (sub-classified for OEF by the following non-doctrinal terms: Persons Under U.S. Control (PUC), Enemy Combatant (EC), and Low-level Enemy Combatant (LLEC)). Interviews, sensing sessions, and document reviews revealed that most Soldiers were aware of their requirement to treat detainees humanely. In most cases, the present level of treatment exceeded the Common Article 3 standard of treatment. Notwithstanding, while detainee abuse had occurred in OEF in the past, the DAIG Team observed that units currently conducting detainee operations missions treated detainees humanely.

Many noncommissioned officers (NCOs) stated very clearly that the humane treatment of detainees was paramount to the success of the mission. Another group of junior enlisted Soldiers stated that they received substantial training on detainee treatment. They went on to specifically mention that they were taught to treat detainees with dignity and respect. In another sensing session, the NCOs stated that the minimum standard for treating detainees is protection, respect, and humane treatment. Some went on to say that violations are not tolerated by the command or fellow Soldiers.

Consistent with these statements, the DAIG Team that visited Iraq and Afghanistan discovered no incidents of abuse that had not been reported through command channels; all incidents were already under investigation. The DAIG Team that visited units recently returning from Iraq did receive a total of 5 new allegations of potential abuse that occurred prior to January 2004. The DAIG Team immediately turned these over to the chain of command and Army Criminal Investigation Division (CID). There is no evidence of the cover-up of current detainee abuse by U.S. Soldiers. This is consistent with the results of the teams' sensing sessions; all currently deployed Soldiers were aware of their responsibility to report abuse and appeared to be willing and able to report any potential abuse.

In OIF, U.S. Forces detained the full spectrum of classes of detainees, but most were classified as EPWs or CIs. Presently, CIs make up the vast majority of the U.S.-controlled detainee population. EPWs are entitled to all the protections in the Geneva Convention Relative to the Treatment of Prisoners of War (GPW), and CIs are entitled to relevant protections in the Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC). The GPW and GC provide detailed levels and standards of treatment for EPWs and CIs that include treatment during armed conflict and occupation. Most leaders and Soldiers treated EPWs and CIs humanely and consistent with the Geneva Conventions (GPW and GC).

The Army estimates that over 50,000 detainees have been captured or processed. While even one case of abuse is unacceptable, we conclude that given the volume of detainees and the potential for abuse in these demanding circumstances, the overwhelming majority of our Soldiers and leaders are conducting these operations with due regard for the detainees right to be treated humanely and properly.

Detainee abuse does not occur when individual Soldiers remain disciplined, follow known procedures and understand their duty obligation to report abusive behavior. Detainee

abuse does not occur when leaders of those Soldiers who deal with detainees enforce basic standards of humane treatment, provide oversight and supervision of detainee operations and take corrective action when they see potentially abusive situations developing. Our site visits, interviews, sensing sessions and observations indicate that the vast majority of Soldiers and leaders, particularly at the tactical level, understand their responsibility to treat detainees humanely and their duty obligation to report infractions.

The GC and GPW require that copies of the GC be posted in the detainees' language in facilities that contain EPWs and/or CIs. Only 25% (4 of 16) facilities inspected maintained copies of the Geneva Conventions in the detainees' language. No facilities in Afghanistan complied with this Geneva requirement, while only 4 facilities in Iraq were compliant. Other specific details of treatment outlined in the GPW and GC are covered elsewhere in this report.

The DAIG Team observed that units made efforts to comply with the DoD requirement to treat the detainees consistent with the Geneva Conventions. Some of the improvements being made by units and resourceful individuals include: increased training for key noncommissioned officers (NCOs) and small unit leaders; developing standing operating procedures (SOPs); and requesting copies of the Geneva Conventions in the detainees' language for posting.

In general, the Miller Report recognized that detainees should be secured in a humane environment and that greater involvement by judge advocates was required. The DAIG Team did not observe a dedicated judge advocate for interrogation operations, but did note that the MI brigades, assigned to duty at Abu Ghraib, were each assigned at least 1 brigade judge advocate. The Ryder Report stated EPWs and CIs should receive the full protections of the Geneva Conventions unless the denial of these protections was due to specifically articulated military necessity.

The Taguba Investigation observed that many Soldiers and units upheld the Army Values. The Taguba Investigation also detailed numerous incidents where U.S. Soldiers abused detainees, which the investigation characterized as "systemic." As used in the Taguba Investigation, the term "systemic" deals with a subset of the security and interrogation operations at only one interment /resettlement facility and is not theater-wide. However, MG Taguba testified before the Senate Armed Services Committee on 11 May 04, narrowing the extent of the term "systemic" by stating that these particular abuses were individual actions not committed at the direction of the chain of command and that the resulting photos were taken with personal cameras. Additionally, the Taguba Investigation recommended detention facilities make several changes that would help ensure compliance with the Geneva Conventions. As stated above, the DAIG uses the term "systemic" specifically to describe a problem if it is widespread and presents a pattern. As defined by the DAIG in this report, a systemic issue may be found either horizontally across many various types of units, or vertically through many command levels from squad through division or higher level. Based on our review and analysis of reports and case summaries of investigations and our observations and interviews conducted throughout this inspection, we could not identify a systemic cause for the abuse incidents.

(4) Recommendation: CJTF-7 and CJTF-180 continue to emphasize compliance with the requirements regarding the humane treatment of detainees.

Recommendation: Commanders continue to stress the importance of humane treatment of detainees and continue to supervise and train Soldiers on their responsibility to treat detainees humanely and their responsibility to report abuse.

b. **Finding 2:**

(1) Finding: In the cases the DAIG reviewed, all detainee abuse occurred when one or more individuals failed to adhere to basic standards of discipline, training, or Army Values; in some cases abuse was accompanied by leadership failure at the tactical level.

(2) Standard: See Appendix E.

(3) Inspection Results: As of 9 June 2004, there were 125 reported cases of detainee abuse (to include death, assault, or indecent assault) that either had been, or were, under investigation.

For the purpose of this inspection, we defined abuse as wrongful death, assault, sexual assault, or theft. As of 9 June 2004 we had reviewed 103 summaries of Criminal Investigation Division (CID) reports of investigation and 22 unit investigation summaries conducted by the chain of command involving detainee death or alleged abuse. These 125 reports are in various stages of completion. No abuse was determined to have occurred in 31 cases; 71 cases are closed; and 54 cases are open or undetermined. Of note, the CID investigates every occurrence of a detainee death regardless of circumstances.

Recognizing that the facts and circumstances as currently known in ongoing cases may not be all inclusive, and that additional facts and circumstances could change the categorization of a case, the Team placed each report in a category for the purposes of this inspection to understand the overall numbers and the facts currently known, and to examine for a trend or systemic issue. This evaluation of alleged abuse reports is not intended to, nor should it, influence commanders in the independent exercise of their responsibilities under the Uniform Code of Military Justice (UCMJ) or other administrative disciplinary actions. As an Inspector General inspection, this report does not focus on individual conduct, but on systems and policies.

We separated these 125 cases into two categories:

- (1) no abuse occurred
- (2) confirmed or possible abuse

In the first category of no abuse occurring, we further separate the reports into deaths (to include death from natural causes and justified homicide as determined by courts martial) and other instances (to include cases where there was insufficient evidence to determine whether abuse occurred or where the leadership determined, through courts martial or investigation, that no abuse occurred). There were a total of 19 natural deaths and justified homicides, and 12 instances of insufficient evidence or determined that no abuse occurred. Deaths occurred at the following locations: 15 at I/R facilities; 1 at Central Collecting Points (CPs); 1 at Forward CPs; and 2 at the point of capture (POC) for a total of 19. Other instances where it was determined that no abuse occurred were at the following locations: 2 at I/R facilities; 1 at Central CPs; 2 at Forward CPs; 5 at the POC; and 2 at locations which could not be determined or did not fall into doctrinal categories, for a total of 12.

In the second category of confirmed or possible abuse, we further separated the reports into wrongful deaths, deaths with undetermined causes, and other alleged abuse (e.g., assault, sexual assault, or theft). There were a total of 20 deaths and 74 incidents of other alleged abuse. Deaths occurred at the following locations: 10 at I/R facilities; 0 at Central CPs; 5 at

Forward CPs; and 5 at the POC, for a total of 20. Other instances of alleged abuse occurred at the following locations: 11 at I/R facilities; 3 at Central CPs; 11 at Forward CPs; 40 at the POC; and 9 at locations which could not be determined or did not fall into doctrinal categories, for a total of 74.

This review indicates that as of 9 June 2004, 48% (45 of 94) of the alleged incidents of abuse occurred at the point of capture. For this inspection, the DAIG Team interpreted point of capture events as detainee operations occurring at battalion level and below, before detainees are evacuated to doctrinal division forward or central collecting points (CPs). This allowed the DAIG Team to analyze and make a determination to where and what level of possible abuse occurred. The point of capture is the location where most contact with detainees occurs under the most uncertain, dangerous and frequently violent circumstances. During the period of April-August 2003 when units were most heavily engaged in combat operations, 56% (29 of 52) of point of capture incidents were reported. Even during this period of high intensity combat operations, Soldiers and leaders identified incidents that they believe to be abuse and the command took action when reported. Most of the allegations of abuse that occurred at the point of capture were the result of actions by a Soldier or Soldiers who failed to maintain their self discipline, integrity, and military bearing, when dealing with the recently captured detainees. There are a few incidents that clearly show criminal activity by an individual or individuals with disregard of their responsibility as a Soldier.

This review further indicates that as of 9 June 2004, 22% (21 of 94) of the alleged incidents of abuse occurred at I/R facilities. This includes the highly publicized incident at Abu Ghraib. Those alleged abuse situations at the I/R facilities are attributed to: individual failure to abide by known standards and/or individual failure compounded by a leadership failure to enforce known standards, provide proper supervision and stop potentially abusive situations from occurring.

While recognizing that any abuse incident is one too many, through a review of the summary reports of the 125 investigations and categorizing them, the DAIG did not identify a systemic cause for the abuse incidents. The DAIG uses the term "systemic" specifically to describe a problem if it is widespread and presents a pattern. As defined by the DAIG in this report, a systemic issue may be found either horizontally across many various types of units, or vertically through many command levels from squad through division or higher level. The DAIG determined that incidents where detainees were allegedly mistreated occurred as isolated events. In a few incidents, higher ranking individuals up to Lieutenant Colonel were involved; however, the chain of command took action when an allegation of detainee abuse was reported.

Recognizing that the facts and circumstances as currently known in ongoing cases may not be all inclusive, and that additional facts and circumstances could change the categorization of a case, the Team placed each report in a category for the purposes of this inspection to understand the overall numbers and the facts currently known, and to examine for a trend or systemic issue. This evaluation of alleged abuse reports is not intended to influence commanders in the independent exercise of their responsibilities under the Uniform Code of Military Justice (UCMJ) or other administrative disciplinary actions.

The DAIG Team that visited Iraq and Afghanistan found no incidents of abuse that had not already been reported through command channels; all incidents were already under investigation. The DAIG Team that visited units recently returning from Iraq did receive a total of 5 new allegations of potential abuse that occurred prior to January 2004. In each of these cases, CID and the chain of command were notified of the allegations. There is no evidence of

any cover-up of current detainee abuse by U.S. Soldiers. This is consistent with the results of the teams' sensing sessions that all currently deployed Soldiers were aware of their responsibility to report abuse and appeared to be willing and able to report it.

In studying the actual abuse investigations, the incidents may be broken down into 2 broad categories. The first category will be referred to as isolated abuse, and the second as progressive abuse. The first are those incidents that appear to be a one-time occurrence. In other words, these are incidents where individual Soldiers took inappropriate actions upon the capture of detainees or while holding or interrogating them. The second category of detainee abuse, referred to as progressive abuse because these usually develop from an isolated incident into a more progressive abuse.

There is substantial research on the behavior of guards in prisons and Enemy Prisoner of War (EPW)/Prisoner of War (POW) camps, in addition to the Department of Defense (DoD) experience of running simulated prisoner of war resistance training. Research indicates that regardless of how good the training and oversight, some inappropriate behavior will occur. (For example, one of the seminal studies of prisoner/guard behavior is Haney, C., Banks, C., & Zimbardo, P., A Study of Prisoners and Guards in a Simulated Prison, the Office of Naval Research, 1973. For a more recent review, along with significant commentary, see Philip Zimbardo, A Situationalist Perspective on the Psychology of Evil: Understand How Good People are Transformed into Perpetrators, a chapter in Arthur Miller (Ed.) The social psychology of good and evil: Understanding our capacity for kindness and cruelty. New York: Guilford, 2004. Also worth reviewing are Stanley Milgram's studies, starting with Obedience to authority, New York: Harper & Row, 1974.) Because of this, the DoD simulated prisoner of war resistance training that prepares service members to resist exploitation, requires intensive oversight to prevent the abuse of Soldiers by other Soldiers.

Contributing factors to the first category of abuse include poor training (common in the cases the DAIG Team reviewed), poor individual discipline, novel situations (to include the stressors involved in combat operations), and a lack of control processes (specific oversight mechanisms). Commander's addressed the first category of abuse through counseling, administrative action, and UCMJ (up to and including courts-martial).

Below are 4 examples of this first category of detainee abuse from the 125 reported allegations referenced in the first paragraph of the inspection results above.

– One incident occurred at an internment/resettlement (I/R) facility where a Master Sergeant and her 3 subordinates attempted to beat several detainees as they arrived at the camp. Other Soldiers, not in her chain of command, prevented much of the potential abuse and then reported the Master Sergeant to the chain of command who took corrective action. All 4 Soldiers were administratively separated from the Army; 3 of these Soldiers also received nonjudicial punishment.

– In another incident a Specialist was threatening detainees by stating he would shoot them. A guard observed him making these threats and immediately turned the Specialist in to his chain of command. The commander took quick action, administering an Article 15, to prevent a recurrence.

– Another example occurred in an internment facility where a Specialist and a Staff Sergeant began to punish a detainee by using excessive force. Another Soldier from a different company joined them. The Platoon Sergeant discovered the incident and immediately relieved

both of the Soldiers in his platoon and pressed charges against all 3. All 3 received field-grade Article 15 punishments.

– Another illustrative incident occurred when an interrogator struck a detainee on the head during questioning. The International Committee of the Red Cross, via the mayor of the detainee's compound, discovered this after the fact. Once he was made aware of the incident, the Soldier's commander investigated and ultimately issued a field-grade Article 15. The commander then required 2 Soldiers to be present during every interrogation.

In these examples, abuse was discovered immediately by the command, and corrective actions were taken to prevent a recurrence. One comment made by a Noncommissioned officer (NCO) from a unit that did not have any abuse cases was that multiple levels of NCO oversight ensured compliance with the Rules of Engagement (ROE), and the team leaders and Platoon Sergeant maintained strict standards for all Military Police (MP). One interrogator NCO stated that in his unit there would be a number of people in the room during interrogations to ensure that Soldiers did not violate the Interrogation ROE.

The psychological research on abuse (see above) suggests that in similar situations, such as prisons, when some relatively minor abusive behavior occurs and corrective action is not taken, there is an escalation of violence. If there is uncorrected abuse and more people become involved, there is a diffusion of responsibility making it easier for individuals to commit abuse. The research further suggests that a moral disengagement occurs which allows individuals to rationalize and justify their behavior. (See Bandura, A., Moral Disengagement in the Perpetration of Inhumanities, Personality and Social Psychology Review, 1999.)

In at least 11 of the 125 incidents reviewed by the DAIG Team, immediate corrective action was not taken by the chain of command. The reasons for this leadership failure included either a lack of fundamental unit discipline, ambiguous command and control over the facility or individuals involved, ambiguous guidance from command on the treatment of detainees, no control processes in place to provide oversight and notify the command of the incident, or, in very few cases, leader complicity at the Lieutenant Colonel level and below in the actions. This led to the second category of detainee abuse, referred to as progressive abuse because these usually develop from an isolated incident into a more progressive abuse.

Here are 5 examples of this second category from the 125 reported allegations referenced in the first paragraph of the inspection results above, where actions were not taken until more generalized abuse had occurred.

– The incidents involving Tier 1A at Abu Ghraib began no later than October and continued until December 2003. The degradation of the detainees by the guard force appears to have started out with smaller, less-intensive types of abuse and humiliation, and increased to physical assault and injury. There were no formal control processes, such as a routine inspection of Tier 1A during the night hours or electronic monitoring, in place to easily identify abuse and bring it to the attention of the command. Eventually, a Soldier who knew it was wrong was made aware of the abuse and reported it to CID. Charges were preferred on 20 March 2004 against 6 reserve MP Soldiers for detainee abuse, and further investigation continues.

– In a different incident that resulted in a death, 2 Warrant Officers appeared to exhibit a pattern of abusive interrogations. A detainee, who was overweight and in poor physical health, died during an interrogation. The CID investigation contained sworn statements indicating that

physical beatings at this site were common during this time and alleged that the two Warrant Officers routinely slapped and beat the detainees they were questioning. There were no control processes in place to review the interrogation techniques used in this facility. There was apparently no oversight on the behavior of the interrogators, and, although many of the guard personnel were aware of the techniques being used, the abusive behavior was not reported. There was a perception among the guard personnel that this type of behavior by the interrogators was condoned by their chain of command. Both Warrant Officers received a General Officer Memorandum of Reprimand and further disposition of the case is under review.

– In another incident a platoon detained 2 individuals, later released them on a bridge, and made them jump into a river below. One of the detainees drowned. Sworn statements indicated the platoon "as a whole" had previously discussed having detainees jump off the bridge, and the planned action apparently had the support of the Platoon Sergeant. There is no evidence to support any previous incidents by this platoon, but these discussions are indicators that junior leader deficiencies at the platoon level contributed to the death of a detainee. CID continues to investigate this incident.

– There was an incident involving a Sergeant First Class (SFC) telling his subordinates to, "rough them up," referring to 2 detainees in custody. This occurred in the middle of the night without any oversight and at a division collecting point operated by an infantry unit. There are indications that this SFC had given similar guidance earlier. Several of the SFC's subordinates actually performed most of the subsequent beating. There is no evidence that the SFC had abused detainees previously. This incident was adjudicated by both Special and Summary Courts-Martial, with the SFC receiving a reduction to Staff Sergeant (SSG) and a punitive censure. One SSG was reduced to a Specialist and received 30 days confinement; another SSG pled guilty to one specification of violation of a lawful general order and was reduced to the grade of Sergeant. Finally, a Specialist was found guilty at a summary court-martial and his punishment included forfeiture of \$1092 and hard labor without confinement for 45 days.

– One final example is an incident where a Soldier had been talking extensively with others in his unit about wanting to kill an Iraqi. This Soldier later shot and killed an Iraqi detainee who was flexi-cuffed and may have tripped while walking away from the Soldier. This incident is currently under investigation.

Although elimination of all abuse is the goal of the DoD Law of War Training several factors prevent the complete elimination of detainee abuse. These include:

a. The psychological process that increases the likelihood of abusive behavior when one person has complete control over another is a major factor. This is the same process that occurs in prisons, in EPW/POW camps, and in DoD resistance training. Even in well-trained and screened populations, it is a constant threat. This threat can be minimized through individual and unit training on proper procedures and standards of behavior and by leader supervision of actual operations.

b. Poor training in the handling of detainees increases the risk of abuse. Although most personnel interviewed had some training in the Law of Land Warfare, many did not have training specific to detainee handling. It was often the case that individuals conducting interrogations were not school-trained as interrogators.

c. Ambiguous instructions concerning the handling of detainees also greatly increase the risk of abuse. Some Soldiers believed their command encouraged behavior at the harsher end

of the acceptable range of behavior in the treatment of detainees. This can very quickly lead to abusive behavior, even if it is not the intent of the command. The Taguba Investigation makes clear that the 800th MP (I/R) Brigade leadership did not properly communicate to its Soldiers the requirements for the treatment of detainees. In order to mitigate the risk of abuse, commanders must give clear, unambiguous guidance, make sure that Soldiers understand the guidance, supervise Soldiers' operations, and then hold their Soldier's accountable for meeting standards.

d. Criminal behavior among a small percentage of Soldiers.

e. Combat operations, as a new experience for many Soldiers, combined with the above, may lead to Soldiers justifying abusive behavior as a result of their exposure to danger. This leads to a moral disengagement where Soldiers do not take responsibility for their actions.

f. Poor unit discipline, which is a function of poor leader supervision, allows abusive behavior an opportunity to occur. Again, the Taguba Investigation identified a serious lack of discipline among the units involved in detainee abuse.

The last 3 of these factors can be best prevented by making sure Soldiers understand the standards of behavior expected of them, and by leaders who maintain unit and individual discipline and exercise appropriate supervision of Soldiers.

Almost all of the abuse cases studied by the DAIG Team were isolated events. The Soldiers' chain of command, when notified of the allegation of abuse, took appropriate action and prevented further abusive behavior. The DAIG Team found that most abuse incidents were isolated events that, when discovered, were immediately corrected by commanders at battalion level and lower.

Those cases where corrective action did not occur, usually because the chain of command was not aware of the abuse, resulted in a continuation of abuse or a progression from talking about abuse to actually committing abuse. Factors that influenced this progression of abuse and responsive actions taken by units to mitigate these factors were:

a. Poor oversight and poor control mechanisms to inspect and check on Soldiers' behavior decreased the likelihood that abuse would be discovered by command. This led to a breakdown in the command and control of Soldiers interacting with detainees. One NCOIC stated that the chain of command did not visit his location very often, and that when they began to receive enemy fire, he did not see the Commander or Command Sergeant Major (CSM). In response, over time, several units developed standing operating procedures that incorporated specific control mechanisms, such as requiring a certain number of personnel to be present during interrogations, having all Soldiers sign a document outlining acceptable behavior, and tasking independent officers to monitor all detainee operations, with the ability to observe anything, anytime, within their facility.

b. A command climate that encourages behavior at the harsher end of the acceptable range of behavior towards detainees may unintentionally, increase the likelihood of abuse. One officer interviewed stated that there is often a "do what it takes" mindset. This appeared to be more prevalent in the early days of the war in Iraq. Among other responses, the CJTF-7 Rules for Detainee Operations, published 30 November 2003, states, "Treat all persons with dignity and respect." In addition, on 12 October 2003, CJTF-7 published a memorandum stating all interrogations would be, "applied in a humane and lawful manner with sufficient oversight by

trained investigators or interrogators. Interrogators and supervisory personnel will ensure uniform, careful, and safe conduct of interrogations."

c. In the few cases involving the progression to more serious abuse by Soldiers, tolerance of inappropriate behavior by any level of the chain of command, even if minor, led to an increase in the frequency and intensity of abuse. In a few cases, the perception, accurate or not, that Other Governmental Agencies(OGA) conducted interrogations using harsher methods than allowed by Army Regulation, led to a belief that higher levels of command condoned such methods. As noted in paragraph b above, CJTF-7 began to publish specific guidance that emphasized the humane treatment of detainees. At the time of the DAIG Team's visit to the theater, leaders and Soldiers uniformly understood the need to treat detainees humanely.

It is evident there were Soldiers who knew the right thing to do and reported abuse when they discovered it. Soldiers who believed that abusive behavior was not acceptable reported almost all of the abuse incidents. Some of these Soldiers stopped other Soldiers from hurting detainees, demonstrating moral courage in the face of peer pressure. Others reported serious abuse when it involved their comrades and leaders. This finding on abuse focused on a very small percentage of Soldiers who may have committed abusive behavior, and not on the vast majority that, even under the stress of combat and poor living conditions, and presented with sometimes resistant and hostile detainees, have treated all within their care humanely.

(4) Root Cause: Detainee abuse was an individual failure to uphold Army Values and in some cases involved a breakdown in the leadership supervision of Soldiers' behavior.

(5) Recommendation: Commanders enforce the basic fundamental discipline standards of Soldiers, provide training, and immediately correct inappropriate behavior of Soldiers towards detainees to ensure the proper treatment of detainees.

Recommendation: Commanders assess the quality of leadership in units and replace those leaders who do not enforce discipline and hold Soldiers accountable.

Recommendation: TRADOC develop and implement a train-the-trainer package that strongly emphasizes leaders' responsibilities to have adequate supervision and control processes in place to ensure the proper treatment of detainees.

Recommendation: TRADOC integrate training into all Professional Military Education that strongly emphasizes leaders' responsibilities to have adequate supervision and control processes in place to ensure the proper treatment of detainees.

Recommendation: The G3 require pre-deployment training include a strong emphasis on leaders' responsibilities to have adequate supervision and control processes in place to ensure proper treatment of, and prevent abuse of, detainees.

c. Finding 3:

(1) Finding: Of all facilities inspected, only Abu Ghraib was determined to be undesirable for housing detainees because it is located near an urban population and is under frequent hostile fire, placing Soldiers and detainees at risk.

(2) Standard: See Appendix E.

(3) Inspection Results: Abu Ghraib was overcrowded, located near a densely populated urban area and on a dangerous main supply route, and subject to frequent hostile enemy fire from enemy mortars or rockets. The facility was located approximately 20 miles west of Baghdad. The entire encampment of Abu Ghraib was quite large, covering 280 acres. This facility has had up to 10,000 persons interned there and was considered the most notorious landmark in all of Iraq, made so by the previous regime under Saddam Hussein.

Abu Ghraib consisted of three distinct separate facilities: the hard site prison complex, Camp Vigilant, and Camp Ganci. Except for Tier 1, the rest of the hard site prison complex (Tiers 2 through 7) was under complete control of Iraqi prison guards under supervision of the Coalition Provisional Authority. Criminals were housed there who had committed crimes against other Iraqis. Camp Vigilant was under complete U.S. Armed Forces control. It was the least populated facility of the three at Abu Ghraib, housing several hundred detainees.

The facility employs over 1500 Soldiers and civilians and there is no Post Exchange (PX) within the walls of Abu Ghraib. This was one of the major complaints from Soldiers. Routine trips for PX runs did not occur because of the danger in traveling to Camp Victory on the main supply route. Soldiers complained that they could not get necessary clothing and uniform items when needed.

On 19 March 2004, the official detainee headcount in Camps Ganci and Vigilant was 5967 detainees under U.S. control. This number frequently fluctuated because of releases, transfers, or additional captures of detainees. Including the hard site, there were 7490 detainees on this date. Only one internment/resettlement (I/R) Military Police battalion was charged with managing, operating, and maintaining security of Camps Ganci and Vigilant. By doctrine an I/R battalion should support the following ratios: up to 4,000 EPWs/CIs; 8,000 dislocated civilians; or 1,500 U.S. Armed Forces prisoners. The Taguba Investigation also addressed the problems of under-manning at Abu Ghraib.

Abu Ghraib also did not have sufficient protection measures in place to protect the detainees from hostile fire. Abu Ghraib was frequently under mortar and small arms fire. Detainees suffered casualties in the past due to enemy hostile fire. Detainees at Camps Vigilant and Ganci did not have access to protective bunkers or shelters, placing them at great risk.

Camp Ganci was overcrowded with a population of over 5000 detainees at the time of the DAIG inspection. Camp Ganci was designed and built as an Enemy Prisoner of War (EPW) camp, and the camp living environment was not conducive to a criminal or high security population. The population of the camp alone made security and control inherently difficult and dangerous. There were 8 compounds in Camp Ganci, and the capacity for each compound was 500. During the inspection, the average population was from 600 to 700 detainees per compound.

Camp Ganci's 8 compounds inside of Abu Ghraib had similar problems with the guard towers and perimeter triple-standard concertina wire that the old compounds at Camp Bucca suffered. The overcrowding and cramped conditions at Camp Ganci, and the fact that the distance between each compound was only 30 to 40 feet, compounded the safety and security concerns for Soldiers. Detainee rioting had occurred in the past. Lighting at Camp Ganci was poor, especially at compound 6, according to interviewed Soldiers. The physical design of the camps within the facility was not optimal for the mission. The towers, for example, provided limited visibility due to numerous blind spots. Towers supporting Camp Ganci were not placed

reasonably well, as they should have been, with good fields of fire. Some towers faced each other, and there were some identified blind spots throughout the compounds according to interviewed Soldiers. Entrance and egress to the compounds were hampered by cumbersome, makeshift gates made of concertina wire and wood that dragged across the ground. This made rapid access very difficult. Sally ports were used primarily as gates or "slow down" barriers.

The Single Channel Ground/Air Radio System (SINCGARS) system used at Abu Ghraib, when operable, was maintained inside the compound for communication with units outside the compound and the roving patrols. Because many units were using the same frequency, crossed radio traffic was common between roving patrols, other outside units, and the Tactical Operations Center (TOC) inside the compound. The facility NCOIC at Abu Ghraib stated there was also a shortfall in radios, which hampered communications and security within the compound. In some instances, the guards in the towers had communication with the TOC, but not with the roving guards on the ground. So, in order to communicate with a tower, the roving guards would have to yell up to them. The guards would also have to yell up to the towers when they wanted to pass information to the TOC. Due to the ineffective communication systems at Abu Ghraib and Camp Bucca, Soldiers took it upon themselves to purchase handheld commercial radios to communicate within the camps. Because these radios are unsecured, they pose a communications security (COMSEC) problem; frequencies can be easily monitored by outside forces using the same commercially available radios. The commercial radios were also unable to communicate with the military issue radios.

During sensing sessions, NCOs at Abu Ghraib stated there were no standardized procedures for searching Iraqis entering the compound. The DAIG Team's findings are consistent with the Ryder Report that stated, "The lack of policy and standard operating procedures results in inconsistent application of basic security protocols. Visitation is a serious opportunity to introduce security and safety hazards."

Refuse and litter were seen within one of the Ganci compounds. It could not be determined if the trash was actually refuse that had migrated to the surface from an old landfill site on which Camp Ganci was built. There was approximately one portable latrine per 25 detainees, and there was a contract in place to clean the latrines. There was, however, a bad smell throughout the area from sewage because disinfectant chemicals were not replaced in the latrines. According to sensing sessions, there were only 12 showerheads in each Ganci compound for 600 to 700 detainees. The detainees showered every other day, but the guards ran all 600 to 700 detainees through the process in 2 hours. The lack of laundry capabilities or services for the detainees was similar to the situation at Camp Bucca. Detainees had tubs and soap, but there was no accountability on where the tubs were and how many there were. The unit submitted a contract request to start a laundry service for detainees.

The supply of fresh water was difficult to maintain at the required levels for drinking and personal hygiene for both Soldiers and detainees. According to interviews, Abu Ghraib received fresh water from a Baghdad city water main that frequently broke down. A 3-day supply (200K gallons) was required to be on-hand. The day before the DAIG Team arrived, the reserve water supply was down to 50K gallons. Rationing of fresh water was not uncommon for Soldiers and detainees according to leaders and Soldiers from interviews and sensing sessions.

Food quality for detainees was a serious issue at Abu Ghraib. Spoiled and contaminated food (rodent droppings and dirt) had been delivered by the contractor for the detainees in the past. Units at Abu Ghraib had to use unit stocks of Meals, Ready to Eat

(MREs) to distribute to detainees instead. The unit was working with the contracting officer to remedy the substandard work of the contractor.

Other problems observed included problems with the existing power generators and lack of ventilation for the detainees.

There were planned and ongoing projects at Abu Ghraib. The new Entry Control Point (ECP) was recently completed. This will allow 200 visitations of detainee family members a day and will provide a stand-off of 100 meters for force protection. The project included a new parking lot. Another ongoing project was the new reception center. Besides the ECP and reception center, other projects planned include: perimeter fencing around Abu Ghraib; completion of Camp Avalanche (recently renamed Camp Redemption), a new facility with a capacity of 3000 detainees; and future plans to upgrade Camps Ganci and Vigilant. Both the Taguba Investigation and Ryder Report mentioned the need for structural improvements and renovations at various facilities. The Taguba Investigation stated the need for structural improvements, including enhancements of perimeter lighting, additional chain link fencing, staking down of all concertina wire, hard site development, and expansion of Abu Ghraib. One recommendation of the Ryder Report included renovation of all available cells at Abu Ghraib to facilitate consolidation and separation of the different categories of detainees. The Ryder Report also recommended modification of the Abu Ghraib master plan that allowed expansion and increased detainee capacity by means of renovation. All of the improvements mentioned in the Taguba Investigation and Ryder Report are needed at Abu Ghraib if U.S. Forces continue to use it as an I/R facility. However, because of its location in a densely populated urban area and the frequent hostile fire, the DAIG Team found that the facility should be phased out as an I/R facility, with Camp Bucca becoming the primary I/R facility in Iraq.

Abu Ghraib will be the central facility for the Iraqi Prison System after transition to the interim government. However, Abu Ghraib's location near an urban and hostile environment goes against doctrine for setting up I/R facilities. The area lends itself to poor and dangerous living and working conditions. In contrast, Camp Bucca in southern Iraq is isolated from local Iraqi populations, not frequently attacked, and is close to vital supply lines and logistical support (Navistar in Kuwait). Camp Bucca has room to expand if necessary and is already used as an overflow facility for Abu Ghraib. At the time of the DAIG visit, the detainee population of Camp Bucca was just over 1700. The new compounds at Camp Bucca (1 through 6) have a capacity for 4500 detainees. If the old compounds (7 through 11) are renovated in the same manner as the new compounds, Camp Bucca could reasonably expand the population capacity by several thousand if needed. Once the Camp Bucca expansion is completed and the "Iraqi on Iraqi" criminal population at Camp Ganci are segregated from other detainees, a phase out of Abu Ghraib as an I/R facility and complete turnover to the interim Iraqi government can take place.

(4) Root Cause: Units operating the Abu Ghraib facility were overwhelmed by the frequent hostile fire, the overcrowded conditions, and the deteriorating infrastructure.

(5) Recommendation: CJTF-7 expand Camp Bucca as an internment/resettlement facility in order to transfer detainees from Camps Ganci and Vigilant, and phase out U.S. Armed Forces detainee operations at Abu Ghraib completely.

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Chapter 4

Interrogation Operations

1. **Summary of Findings:** Commanders recognized the need for timely, tactical human intelligence and adapted to the environment by keeping detainees longer at the point of capture and collecting points to gain and exploit intelligence. Commanders and interrogators conducted tactical questioning to gain immediate battlefield intelligence. Holding detainees longer than 72 hours increased requirements for facility infrastructure, medical care, preventive medicine, trained personnel, logistics, and security.

Doctrine does not clearly and distinctly address the relationship between the Military Police (MP) operating I/R facilities and the Military Intelligence (MI) personnel conducting intelligence exploitation at those facilities. Neither MP nor MI doctrine specifically defines the distinct but interdependent roles and responsibilities of the two in detainee operations. MP doctrine states MI may collocate with MP at detention sites to conduct interrogations, and coordination should be made to establish operating procedures. MP doctrine does not, however, address approved and prohibited MI procedures in an MP-operated facility. It also does not clearly establish the role of MPs in the interrogation process. Conversely, MI doctrine does not clearly explain MP internment procedures or the role of MI personnel within an internment setting.

There is no DoD or Army policy that addresses the establishment and operation of interrogation facilities, including Joint Interrogation Facilities (JIFs) and Joint Interrogation and Debriefing Centers (JIDCs). Doctrine provided in two field manuals (FMs) dealing with military intelligence, FM 34-52 and FM 3-31, Joint Force Land Component Commander Handbook (JFLCC), 13 December 2001, contains inconsistent guidance on terminology, structure, and function of these facilities.

Shortfalls in numbers of interrogators and interpreters, and the distribution of these assets within the battlespace, hampered human intelligence (HUMINT) collection efforts. Valuable intelligence—timely, complete, clear, and accurate—may have been lost as a result. Interrogators were not available in sufficient numbers to efficiently conduct screening and interrogations of the large numbers of detainees at collecting points (CPs) and internment/resettlement (I/R) facilities, nor were there enough to man sufficient numbers of Tactical Human Intelligence Teams (THTs) for intelligence exploitation at points of capture. Interpreters, especially those Category II personnel authorized to participate in interrogations, were also in short supply.

Interviewed MI leaders and Soldiers indicated that G2s and S2s were conducting interrogations of detainees without the proper training on the management of HUMINT analysis and collection techniques. They were not adequately trained to manage the full spectrum of HUMINT assets being used in the current operating environment. The need for these officers to understand the management of HUMINT operations is critical to successful HUMINT exploitation in the current operating environment.

Army doctrine found in Field Manual (FM) 34-52, Intelligence Interrogation, 28 September 1992, lists 17 accepted interrogations approach techniques. It states that those approach techniques are not inclusive of all possible or accepted techniques. The DAIG Team reviewed interrogation approach techniques policy for both OEF and OIF and determined that

CJTF-180 and CJTF-7 included additional interrogation approach techniques not found FM 34-52. The DAIG Team found that officially approved CJTF-7 and CJTF-180 policies and the early CJTF-180 practices generally met legal obligations under Geneva Convention Relevant to Prisoners of War (GPW), the Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), the UN Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT), the U.S. Torture statute, 18 USC §§2034, 2034A, if executed carefully, by trained soldiers, under the full range of safeguards. The DAIG Team found that some interrogators may not have received formal instruction from the U.S. Army Military Intelligence Center on interrogation approach techniques not contained in FM 34-52. Additionally, the DAIG Team found that while commands published interrogation approach policy, some subordinate units were unaware of the current version of those policies. Content of unit interrogator training programs varied among units in both OEF and OIF. However, no confirmed instance involving the application of approved approach techniques resulted in an instance of detainee abuse.

2. Findings:

a. Finding 4:

(1) Finding: Tactical commanders and leaders adapted to the environment and held detainees longer than doctrinally recommended due to the demand for timely, tactical intelligence.

(2) Standard: See Appendix E.

(3) Inspection Results: In OPERATION ENDURING FREEDOM (OEF) and OPERATION IRAQI FREEDOM (OIF), company through division units held detainees longer than the doctrinal timeframes. By doctrine, companies and battalions are to evacuate detainees as quickly as possible to a division forward collecting point (CP). Interviewed point of capture battalion and company leaders stated 61% (25 of 41) of their units established CPs and held detainees at their locations from 12 hours up to 30 days. Of the geographically remote inspected companies and battalions, 3 of 3, established CPs at their locations. By doctrine, division forward CPs are located at maneuver brigades and can hold detainees for up to 12 hours before evacuating to division central CPs.

All interviewed leaders from 11 division forward CPs stated their facilities held detainees from 24 hours up to 54 days. By doctrine, division central CPs are located near the division support area (DSA) and can hold detainees for up to 24 hours before evacuating to the corps holding area (CHA) or internment/resettlement (I/R) facility. All interviewed leaders from 4 central CPs stated their facilities held detainees from 72 hours up to 45 days.

The primary reason units held detainees at these locations was to conduct screenings and interrogations closer to the point of capture. The result of holding detainees for longer timeframes at all locations was increased requirements in facility infrastructure, medical care, preventive medicine, trained personnel, logistics, and security. Organic unit personnel at these locations did not have the required institutional training and were therefore unaware of, or unable, to comply with Army policies in areas such as detainee processing, confinement operations, security, preventive medicine, and interrogation.

Current detainee doctrine is written to apply to a linear battlefield with an identifiable combat zone and rear area, and with the presumption that detainees at the point of capture will

normally be enemy prisoners of war (EPWs). EPWs are to be humanely evacuated from the combat zone to internment facilities (normally located in the corps communication zone (COMMZ)). Evacuation is accomplished as quickly as possible for the safety of the EPWs and to ensure operations of the maneuver unit are not hampered. Doctrine assumes EPWs are normally captured forward in the combat zone by company and battalion-sized units. While doctrine does provide for interrogations to be conducted at forward locations, it limits the time detainees should be held at these sites.

By doctrine, EPWs are evacuated from companies and battalions to a division forward CP located in the brigade area of operations. A forward CP is normally a guarded, roped-off area (concertina or razor tape) or a secure fixed facility, with potable water, a latrine, and a trench or cover for protection from indirect fire. A division MP company commander plans for a platoon to operate the forward CP and process EPWs using the STRESS method (search, tag, report, evacuate, segregate, and safeguard). The MP company medical section provides medical support. Additional medical support can be requested by the brigade medical officer from the forward support battalion (FSB). EPWs doctrinally do not remain at a forward CP for more than 12 hours before being escorted to the division central CP.

By doctrine, the division central CP is established near the division support area (DSA). The central CP is larger than the forward CP, contains some type of tentage or uses an existing shelter/structure to protect detainees from the elements. The central CP may have multiple water and latrine sites. A division MP company operates the CP and continues to process EPWs using the STRESS method. The MP company medical section provides medical support. Units within the DSA provide support as stated in the division operations order. EPWs do not remain at a central CP for more than 24 hours before being escorted to the CHA.

By doctrine, a CHA is usually located near a base or base cluster in the corps rear area with one CHA to support each division conducting operations. Normal hold time at the CHA is 72 hours, but the CHA must be prepared to hold EPWs for extended periods until they are evacuated to an internment facility or until hostilities end. A CHA is a semi-permanent facility. The capture rate and captive categories determine the size of the CHA, and it should be divided into two or more compounds for segregation, security, and ease of control. The CHA has areas designated for EPW reception, processing, storage and accountability of detainee property, interrogation, medical facilities, showers, and protection from direct and indirect fire. A corps MP platoon or corps MP company operates a CHA and may be augmented with additional MPs. Support agreements can be arranged between MP headquarters and a base or base cluster where the CHA is located. Class I through Class IX supplies are requested through logistics channels and Class VIII through medical channels.

Doctrine does not address the unique characteristics of OIF and OEF, specifically operations in non-linear battlespaces and large numbers of detainees whose status is not readily identifiable as combatants, criminals, or innocents. In OIF and OEF, units held detainees at division CPs longer than doctrinal timeframes and established CPs at companies and battalions. Commanders held detainees at forward locations to facilitate more effective initial screenings (to determine detainees' status and disposition) and to obtain more timely intelligence than would be obtained from interrogations at I/R facilities. Interviews and sensing sessions with leaders and Soldiers indicated a common perception at the unit level that once a detainee was evacuated, interrogations conducted at higher echelon facilities did not return tactical intelligence to the capturing unit. Furthermore, commanders and MI personnel perceived additional value in holding detainees at CPs where they can be segregated and intelligence is less likely to be compromised. Detainees held at CPs were also available for

follow-up interrogations and clarifications of details based on the tactical exploitation of intelligence previously provided. Finally, interrogators at CPs are familiar with the unique local characteristics that enable more effective intelligence exploitation, i.e., religious affiliation, tribal affiliation, and regional politics.

Doctrine does not address how to effectively screen and interrogate large numbers of captured persons of undetermined status. Unlike EPWs, detained persons in OIF and OEF did not have a clear status upon capture. Capturing units were attempting to screen persons close to the point of capture to confer status in a timely manner. By doing so, they could quickly release innocent persons with no intelligence value who would otherwise burden the detention system, or detain combatants or persons of potential intelligence value for continued exploitation. In situations where effective screening couldn't be accomplished at the point of capture, companies and battalions established collecting points and held detainees instead of evacuating them to higher echelons. The time detainees were held at company and battalion locations varied from 12 hours up to 30 days based on the number of detainees and the availability of interrogators.

A result of holding detainees at CPs was company, battalion, brigade and divisional units were being required to meet the standards of CHAs without the organic resources (trained personnel, materials, equipment, and facilities) to do so. The DAIG Team found most personnel, especially at battalion and brigade CPs, did not have the training to perform the humanitarian, security, and administrative requirements for extended holding times. Because most personnel were not trained in detention operations they were unaware of Army doctrinal requirements, policies, and procedures that address the specific responsibilities for confinement, security, preventive medicine, and interrogation. The DAIG Team found most CP operations were conducted using standing operating procedures (SOPs) developed by previous units; internal tactics, techniques, and procedures; common sense; and basic soldier skills and knowledge.

Holding detainees for longer periods of time at CPs increases the infrastructure requirements from those needed for mobile, temporary holding areas to the more substantial demands of semi-permanent facilities. CPs have to provide increased internal and external security to physically contain the detainees. Considerations have to be made for areas designated for detainee reception, processing, storage and accountability of detainee property, interrogation, medical care, latrines, and protection from direct and indirect fire. The medical requirements for the care of detainees increase (e.g., trained personnel, supplies, and equipment), as do the requirements for preventive medicine (e.g., showers, sundry packs, pest control, and facility inspections). Units have increased requirements for logistics (e.g., Class I, Class II (shotguns, restraints, communications, and uniforms), Class III, Class V (non-lethal ammunition), and security (e.g., permanent external guard force and quick reaction force).

Detainee doctrine does not address operations in a non-linear battlespace. Doctrine was written for operations on a linear battlefield on which EPWs were to be quickly evacuated to corps holding areas or I/R facilities. Commanders in OIF and OEF were holding detainees closer to the point of capture to expedite intelligence exploitation. The result of holding detainees forward of I/R facilities was that companies, battalions, brigades and divisions were being required to meet higher standards of detainee humanitarian care when these units are not organically resourced with the trained personnel, materials or equipment to operate semi-permanent facilities. The DAIG Team found that battalions, brigades or divisions operating CPs are not trained or resourced to run semi-permanent collection/holding facilities, and no units are fully compliant with Army policy. The DAIG Team also found that the inspected units were

treating detainees humanely and in accordance with the provisions of the Geneva Conventions. Units continue to physically improve the facilities of the CPs and obtain external support for personnel and resources.

Although the Ryder Report cited changes are required in doctrine and organizational structure related to detention and correction operations, it did not go into specific details. The report did note the wide variance of standards and approaches at collecting points and recommended assessing the tactical feasibility of decreasing the number of collection points.

(4) Root Cause: Units did not comply with doctrine that requires the quick evacuation of detainees to internment facilities. Units held detainees at CPs closer to the point of capture for longer periods of time to conduct more effective interrogation and intelligence exploitation.

(5) Recommendation: TRADOC revise doctrine to address the criteria for establishing and operating collecting points to enable commanders to more effectively conduct intelligence exploitation in a non-linear battlespace.

b. Finding 5:

(1) Finding: Doctrine does not clearly specify the interdependent, and yet independent, roles, missions, and responsibilities of Military Police and Military Intelligence units in the establishment and operation of interrogation facilities.

(2) Standard: See Appendix E.

(3) Inspection Results: Doctrine does not provide clear guidance on the relationship between Military Police (MP), responsible for the safekeeping of detainees, and Military Intelligence (MI), responsible for intelligence collection. Neither MP nor MI doctrine clearly defines the distinct but interdependent roles, missions, and responsibilities of the two in detainee operations. MP doctrine states MI may collocate with MP at detention sites to conduct interrogations, and coordination should be made to establish operating procedures. MP doctrine does not, however, address approved and prohibited MI procedures in an MP-operated facility. It also does not clearly establish the role of MPs in the interrogation process. Conversely, MI doctrine does not clearly explain MP internment procedures or the role of MI personnel in an internment setting. Subordination of the MP custody and control mission to the MI need for intelligence can create settings in which unsanctioned behavior, including detainee abuse, could occur. Failure of MP and MI personnel to understand each other's specific missions and duties could undermine the effectiveness of safeguards associated with interrogation techniques and procedures. Failure of MP and MI personnel to understand each other's specific missions and duties could undermine the effectiveness of safeguards associated with interrogation techniques and procedures.

MP doctrine explicitly outlines MP roles and responsibilities in operating collecting points (CPs), corps holding areas (CHAs) and internment/resettlement (I/R) facilities. MP doctrine identifies the priorities of detainee operations as the custody and control of detainees and the security of the facility. MP doctrine states detainees may be interrogated at CPs, CHAs and I/R facilities operated by MPs to facilitate the collection of intelligence information. It highlights the need for coordination between MP and MI to establish operating procedures. MPs are responsible for passively detecting and reporting significant information. MPs can assist MI screeners by identifying captives who may have information that supports Priority Intelligence Requirements (PIRs). MPs can acquire important information through observation and insight

even though they are not trained intelligence specialists. MP interaction with detainees is limited, however, to contact necessary for the management of a safe and secure living environment and for security escort functions during detainee movement. Thus, active participation by MPs in the intelligence exploitation process is not within the doctrinal scope of the MP mission.

MI doctrine clearly states MPs command and operate CPs and CHAs, but it does not address operational authority for I/R facilities. MI doctrine specifies MPs conduct detainee receipt, escort, transport, and administrative processing functions, including document handling and property disposition. MI doctrine in FM 34-52, contrary to MP doctrine in FM 3-19.1, contains a passage that implies an active role for MPs in the screening/interrogation process: "Screeners coordinate with MP holding area guards on their role in the screening process. The guards are told where the screening will take place, how EPWs and detainees are to be brought there from the holding area, and what types of behavior on their part will facilitate the screenings." The implication in FM 34-52 that MPs would have an active role in the screening process is in conflict with MP doctrine that states MPs maintain a passive role in both the screening and interrogation processes. This passage could cause confusion with MI personnel as to the role of MPs in screenings and interrogations. The Ryder Report addressed the issue of MPs maintaining a passive role in interrogations, stating that, "Military police, though adept at passive collection of intelligence within a facility, do not participate in Military Intelligence supervised interrogation sessions." The report further states that the active participation of MPs in interrogations could be a source of potential problems: "Such actions generally run counter to the smooth operation of a detention facility, attempting to maintain its population in a compliant and docile state." The Ryder Report recommends establishing "procedures that define the role of military police soldiers securing the compound, clearly separating the actions of the guards from those of the military intelligence personnel."

Additionally, two intelligence oriented field manuals, FM 34-52, Intelligence Interrogation (discussed above), and FM 3-31, Joint Force Land Component Commander Handbook (JFLCC), contain inconsistent guidance on terminology, structure, and function of interrogation facilities. Neither field manual address the relationship of MI and MP personnel within those facilities. FM 34-52 describes a Theater Interrogation Facility (TIF). FM 3-31 describes a Joint Interrogation Facility (JIF) and Joint Interrogation and Debriefing Center (JIDC). Interrogation facilities in OEF and OIF identified themselves as JIFs and JIDCs. Commanders and leaders structured the organization and command relationships within these JIFs and JIDCs to meet the unique requirements of their operating environments.

The DAIG Team determined MP and MI doctrine did not sufficiently address the interdependent roles of MP and MI personnel in detainee operations in OEF and OIF. Doctrine needs to be updated to clearly specify the roles and responsibilities of MPs in the intelligence exploitation of detainees. It should also clearly specify the roles and responsibilities of MI personnel within MP-operated internment facilities. For example, MP and MI doctrine should address and clarify: (1) command and control relationship of MP and MI personnel within internment facilities; (2) MPs' passive or active role in the collection of intelligence; (3) interrogation techniques and the maintenance of good order within the detention facility; (4) detainee transfer procedures between MP and MI to conduct interrogations, including specific information related to the safety and well-being of the detainee; and (5) locations for conducting interrogations within I/R or other facilities.

(4) Root Cause: Current doctrine does not adequately address or prepare MP or MI units for collaboratively conducting detainee operations and provides inconsistent guidance on terminology, structure, and function of interrogation facilities.

(5) Recommendation: TRADOC develop a single document for detainee operations that identifies the interdependent and independent roles of the Military Police custody mission and the Military Intelligence interrogation mission.

Recommendation: TRADOC establish doctrine to clearly define the organizational structures, command relationships, and roles and responsibilities of personnel operating interrogation facilities.

Recommendation: The Provost Marshal General revise, and the G2 establish, policy to clearly define the organizational structures, command relationships, and roles and responsibilities of personnel operating interrogation facilities.

Recommendation: The G3 direct the incorporation of integrated Military Police and Military Intelligence detainee operations into field training exercises, home station and mobilization site training, and combat training center rotations.

c. Finding 6:

(1) Finding: Military Intelligence units are not resourced with sufficient interrogators and interpreters, to conduct timely detainee screenings and interrogations in the current operating environment, resulting in a backlog of interrogations and the potential loss of intelligence.

(2) Standard: See Appendix E.

(3) Inspection Results: Shortfalls in numbers of interrogators (Military Occupational Specialty (MOS) 97E and 351E) and interpreters, and the distribution of these assets within the battlespace, hampered human intelligence (HUMINT) collection efforts. Valuable intelligence—timely, complete, clear, and accurate—may have been lost as a result. Interrogators were not available in sufficient numbers to efficiently conduct screening and interrogations of the large numbers of detainees at collecting points (CPs) and internment/resettlement (I/R) facilities, nor were there enough to man adequate numbers of Tactical Human Intelligence (HUMINT) Teams (THTs) for intelligence exploitation at points of capture. Interpreters, especially those Category II personnel authorized to participate in interrogations, were also in short supply. Interrogations were conducted at locations throughout the battlespace by trained military interrogators, contract interrogators, and, in some forward locations, by leaders and Soldiers with no training in military interrogation tactics, techniques, and procedures. Interrogations observed by DAIG Team members were conducted in accordance with Army policy and doctrine. Policy and doctrine clearly reinforce and fully comply with the provisions of the laws of land warfare, and all Army interrogators are trained extensively on approved and prohibited interrogation techniques.

The quantity and distribution of military interrogators were insufficient to conduct timely intelligence exploitation of non-compliant detainees in the current operational environment. 78% (18 of 23) of interviewed S2s and G2s stated the shortage of interrogators at points of capture and company and battalion CPs resulted in untrained combat leaders and Soldiers conducting screenings and field interrogations. 89% (17 of 19) of interviewed military interrogators cited a shortage of interrogators, resulting in backlogs of interrogations at I/R

facilities. Military interrogators at Abu Ghraib stated there were detainees that had been in custody for as long as 90 days before being interrogated for the first time.

In OEF and OIF, the total number of interrogators varied by unit and location. Each division (1ID, 1AD, 4ID, 1st CAV, 82nd ABN, and 101st ABN) deployed with an MI battalion that was resourced with interrogators. The 519th MI BN of the XVIII ABN Corps, and the 202nd MI BN, echelons above corps, deployed with interrogators. The 30th and 39th Army National Guard (ARNG) Separate Brigades were resourced with interrogators. All of the above units supplemented interrogators with counterintelligence Soldiers (MOS 97B and 351B) to increase interrogation capabilities. The 205th MI Brigade, V Corps; 504th MI Brigade, III Corps; and the 902nd MI Group had no interrogators and therefore conducted all interrogations using counterintelligence Soldiers. The number of interrogators in the above units varied from 4 in the ARNG Separate Brigades to 16 in some divisions, to approximately 60 in the 519th MI BN. Military interrogators in OIF were supplemented by 31 contract interrogators. (12 contract interrogators have re-deployed for personal reasons since the blanket purchase agreement (contract) was issued 14 August 2003). CJTF-180 was preparing to hire contract interrogators for OEF at the time of the inspection.

Because detainees have varying degrees of intelligence value, there is no doctrinal formula to determine the recommended ratio of interrogators and interpreters to detainees. All detainees require initial screening after capture to determine their status and potential intelligence value. The requirement for interrogation of each detainee is unique and based on potential intelligence yield, the characteristics of the detainee, and the information requirements of the unit. Some detainees may only require a single screening to determine their status and be released, while others will be screened, determined to be of intelligence value, and subsequently interrogated a few times, several times over many weeks, or numerous times over many months. The ratio of interrogators to detainees varied at each facility. At Abu Ghraib there were 120 interrogators for 1500 detainees determined to be of intelligence value; at Brassfield-Mora there were 2 interrogators for 50 such detainees; and at Bagram there were 12 interrogators for 192 detainees of intelligence value.

Category II Arabic, Pashtu, and Dari interpreters--interpreters with U.S. citizenship, but no security clearances-- were also identified as shortages throughout OEF and OIF. As crucial players in every aspect of operations, skilled interpreters were in high demand. The quality of intelligence derived from an interrogation can depend greatly on the ability of the interpreter to work effectively with the interrogator. An effective interpreter must not only convey the accurate meaning of language, he/she must be able to express the implied message in the demeanor of the interrogator. To function together as a successful team requires specific, individualized training prior to employment in the field, as well as time working together to maximize their effectiveness. Category II interpreters should be deployed in sufficient numbers to support the commander's intelligence gathering requirements.

Detainee operations in a non-linear battlespace presented a unique challenge, requiring screening operations to be placed closer to points of capture. Using properly trained HUMINT soldiers to screen detainees in the immediate vicinity of the point of capture reduces the number of innocents detained, produces more timely intelligence, and increases the quality of evidence collection and documentation for use in future judicial proceedings. One senior MI officer indicated that his division only had the manpower to utilize THTs at points of capture approximately 10% of the time. Failure to position trained HUMINT Soldiers close to points of capture puts a burden on units farther up the chain of custody and delayed the collection of timely intelligence. The backlog of unscreened detainees quickly overwhelmed the internment

system in OIF, where I/R facilities were unprepared to deal with such large numbers of detainees. This slowed the process of intelligence exploitation and prevented the timely release of detainees who were apprehended and later found to have no intelligence value and to be of no threat to Coalition Forces.

If performed by trained interrogators, front-line interrogations offer other advantages. Recently captured persons are less likely to resist the interrogator. They also have not yet entered the general detainee population where they can conspire with others to resist interrogation techniques. In untrained hands, however, these advantages can be lost. To satisfy the need to acquire intelligence as soon as possible following capture, some officers and noncommissioned officers (NCOs) with no training in interrogation techniques began conducting their own interrogation sessions. Inexperienced and untrained persons using unproven interrogation techniques often yield poor intelligence and can harden detainees against future questioning by trained interrogators. The potential for abuse increases when interrogations are conducted in an emotionally-charged environment by untrained personnel who are unfamiliar with the approved interrogation approach techniques. The quality of these interrogations was further eroded by the absence of Category II interpreters. Category I interpreters—local nationals without security clearances—were the only interpreters available in forward locations, and there was no way to guarantee the accuracy or trustworthiness of their work.

The Military Intelligence (MI) School has internally resourced a mobile training team (MTT) to offset the shortage of interrogators in the field. The MTT trains non-MI personnel in the skills and knowledge required to perform basic questioning techniques and operations in order to enhance ongoing HUMINT collection missions at the tactical level. Tactical questioning (TQ) is a critical element of small unit operations. Tactical Questioning (TQ) is defined as the questioning of the local population (noncombatants and enemy prisoners of war (EPWs)/detainees) for information of immediate tactical value. Through TQ, the handling of detainees, and the handling of captured documents, Soldiers serve as the commander's eyes and ears. The information that the Soldiers report as a result of TQ is passed up the chain of command and forms a vital part of planning and operations. The TQ MTT has trained approximately 4000 Soldiers as of March 2004.

Current military interrogation procedures as published in FM 34-52, Intelligence Interrogations, 28 September 1992, and taught at the U.S. Army Intelligence Center, Fort Huachuca, remain valid. Interrogation approach techniques, themselves, are addressed in Finding 9. Military interrogators receive 16.5 weeks of intensive training on interrogation procedures and techniques at the Army's Human Intelligence Collector Course. This training includes collection priority, screening, planning and preparation, approaches, questioning, and termination of interrogations. A total of 192 hours of direct and indirect training on the laws of land warfare emphasizes compliance of all military interrogation techniques with the Geneva Conventions and Army policy. Prohibited activities are covered in detail and reinforced in interrogation operation exercises.

Interrogation approach techniques policies were issued for OEF and OIF. The CJTF-7 Commander issued initial interrogation approach techniques policy on 14 September 2003, and amended the interrogation approach techniques policy on 12 October 2003 and 13 May 2004. The CJTF-180 Commander issued approved interrogation approach techniques policy on 16 March 2004.

The DAIG Team observed 2 detainee facilities using digital video recording devices, 1 in Afghanistan and 1 in Iraq. Because interrogations are confrontational, a monitored video

recording of the process can be an effective check against breaches of the laws of land warfare and Army policy. It further protects the interrogator against allegations of mistreatment by detainees and provides a permanent record of the encounter that can be reviewed to improve the accuracy of intelligence collection. All facilities conducting interrogations would benefit from routine use of video recording equipment.

In summary, the DAIG Team found the quantity and distribution of military interrogators were insufficient to conduct timely intelligence exploitation of non-compliant detainees in OEF and OIF. Military interrogators observed in OEF and OIF were performing interrogations of detainees in accordance with doctrine.

(4) Root Cause: The shortages of interrogators and interpreters at all echelons caused commanders and other leaders to use untrained personnel to conduct interrogations of detainees. Insufficient numbers of Category II interpreters, especially those with experience working with interrogators, further hampered interrogation operations.

(5) Recommendation: TRADOC and G2 ensure documentation of unit organizations meet interrogator personnel manning requirements, authorizations, and capabilities in order to provide commanders with timely intelligence.

Recommendation: The CFLCC contracting officer representative ensure enough Category II interpreters are hired to support timely intelligence exploitation of detainees.

d. Finding 7:

(1) Finding: Tactical Military Intelligence officers are not adequately trained on how to manage the full spectrum of the collection and analysis of human intelligence.

(2) Standard: See Appendix E.

(3) Inspection Results: Interviewed Military Intelligence (MI) leaders and Soldiers indicated that G2s and S2s were conducting interrogations of detainees without the proper training on the management of Human Intelligence (HUMINT) analysis and collection techniques. They were not adequately trained to manage the full spectrum of HUMINT assets being used in the current operating environment. The counterintelligence team leaders (TL) interviewed expressed a wish that all G2s and S2s were trained on how to manage the collection and analysis of HUMINT. The need for these officers to understand the management of HUMINT operations is the key for successful HUMINT exploitation in the current operating environment. Battalion commanders, company commanders, and platoon leaders were interrogating detainees at the point of capture according to counterintelligence TLs interviewed. They complained about this practice because these leaders were not properly trained in interrogation techniques and quite possibly jeopardized the intelligence gathering process to acquire timely intelligence from detainees. Counterintelligence TLs were told on several occasions by these leaders that they had the interrogations under control and did not require their Military Intelligence (MI) assistance.

Currently, MI officers only receive a general overview of HUMINT during their Professional Military Education (PME) courses. During the Military Intelligence Officer Basic Course (MIOBC), MI officers receive a 9 day Intelligence Battlefield Operating System (IBOS) block of instruction which includes a 6-hour block on: review/reinforcement of counterintelligence/human intelligence principles; counterintelligence organizations; Subversion

& Espionage Directed Against U.S. Army & Deliberate Security Violations (SAEDA); and the role of the tactical human intelligence teams (THTs). Furthermore, the MIOBC students receive approximately an hour block of instruction from their Stability and Support Operations (SASO) instructor on displaced civilians/refugees on the battlefield.

MI Captain Career Course (MICCC) officers receive a one-hour block of instruction in their intelligence support to brigade operations (ISBO) on imagery intelligence (IMINT), counterintelligence/human intelligence, and signals intelligence (SIGINT). Additionally, during practical exercises the students receive 40 hours of Stability and Support Operations (SASO) training, 32 hours of threat training, and 2 hours of crime link training from their instructor. Also, during intelligence, surveillance, and reconnaissance planning the basic principles of counterintelligence/HUMINT are reinforced during practical exercises (30 minutes in length) that addresses IMINT, counterintelligence/HUMINT, and SIGINT being used on the battlefield to collect intelligence information. During the Intelligence Support Course to division, corps, and joint officers, there is one day of counterintelligence/HUMINT training. This training includes an overview, specific training, and a practical exercise for counterintelligence/HUMINT. Additionally, the 35E series (Counterintelligence Officer) course conducts counterintelligence/HUMINT training for 8 hours, and the Strategic Intelligence Officer Course conducts counterintelligence /HUMINT training for 5 hours.

Interviewed career course captains with experience in OPERATION ENDURING FREEDOM (OEF) and OPERATION IRAQI FREEDOM (OIF) from the Military Intelligence school stated their home station training on detainee operations was limited and concentrated on EPWs or compliant detainee populations. These officers stated the training they received at the MI Basic Course did not provide them with enough training to prepare them to conduct detainee or human intelligence gathering operations.

The G2, in coordination with TRADOC, has created a G2X/S2X Battle Staff Course to begin in July 2004 for MI officers. The G2X/S2X Battle Staff Course will prepare a G2X/S2X staff of a deploying Army division with the capability to synchronize, coordinate, manage and de-conflict counterintelligence and HUMINT sources within the division's area of responsibility (AOR). The G2X/S2X program of instruction (POI) will be tailored for a staff operating within a Joint or multi-national (Coalition) environment which will focus on real world missions, Army-centric, and counterintelligence/HUMINT tool-specific training. The G2X/S2X curriculum is based upon the counterintelligence/HUMINT critical tasks and incorporates J2X/G2X/S2X emerging doctrine/methodology and lessons learned. This course will be hands-on and application based. The G2X/S2X Battle Staff Course provides the critical knowledge and skills required to enable the G2X staff to successfully synchronize and monitor asset management to place sources against the combatant commander's target in support of the mission.

The G2, in coordination with the MI School, is currently revising Field Manual (FM) 34-52, Intelligence Interrogation, 28 September 1992. Additionally, the G2 is spearheading a coordinated effort with TRADOC and the U.S. Army Military Police School to synchronize between the 3 disciplines of intelligence, surveillance, and reconnaissance, particularly in the area of detainee handling and internment/resettlement facility management.

Interviewed and sensed leaders and Soldiers stated that the Law of War training they received prior to deployment did not differentiate between the different classifications of detainees causing confusion concerning the levels of treatment. Even though this confusion existed, the vast majority of leaders and Soldiers treated detainees humanely.

TRADOC, in coordination with the Office of the Judge Advocate General, is currently determining the feasibility of increasing or adjusting Law of War training in the proponent schools to include procedures for handling civilian internees and other non-uniformed personnel on the battlefield.

(4) Root Cause: The MI School is not adequately training the management of HUMINT to tactical MI officers. The MI School has no functional training course available to teach the management of HUMINT.

(5) Recommendation: TRADOC continue the integration of the G2X/S2X Battle Staff Course for all Military Intelligence officers assigned to G2X/S2X positions.

Recommendation: TRADOC integrate additional training on the collection and analysis of HUMINT into the Military Intelligence Officer Basic Course program of instruction.

e. Finding 8:

(1) Finding: The DAIG Team found that officially approved CJTF-7 and CJTF-180 policies and the early CJTF-180 practices generally met legal obligations under U.S. law, treaty obligations and policy, if executed carefully, by trained soldiers, under the full range of safeguards. The DAIG Team found that policies were not clear and contained ambiguities. The DAIG Team found implementation, training, and oversight of these policies was inconsistent; the Team concluded, however, based on a review of cases through 9 June 2004 that no confirmed instance of detainee abuse resulted from the approved policies.

(2) Standard: See Appendix E.

(3) Inspection Results: Interrogation approach techniques policy is identified by several different titles by the different commands of OEF and OIF. For the purpose of standardization of this report those titles will be referred to collectively as interrogation approach techniques policy.

Army doctrine found in Field Manual (FM) 34-52, Intelligence Interrogation, 28 September 1992, lists 17 accepted interrogations approach techniques. It states that those approach techniques are not inclusive of all possible or accepted techniques. The DAIG Team reviewed interrogation approach techniques policy for both OEF and OIF and determined that CJTF-180 and CJTF-7 included additional interrogation approach techniques not found FM 34-52. The DAIG Team found that officially approved CJTF-7 and CJTF-180 policies and the early CJTF-180 practices generally met legal obligations under Geneva Convention Relevant to Prisoners of War (GPW), the Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), the UN Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT), the U.S. Torture statute, 18 USC §§2034, 2034A, if executed carefully, by trained soldiers, under the full range of safeguards. The DAIG Team found that some interrogators may not have received formal instruction from the U.S. Army Military Intelligence Center on interrogation approach techniques not contained in FM 34-52. Additionally, the DAIG Team found that while commands published interrogation approach policy, some subordinate units were unaware of the current version of those policies. Content of unit interrogator training programs varied among units in both OEF and OIF. However, no confirmed instance involving the application of approved approach techniques resulted in an instance of detainee abuse.

The 17 approved interrogation approach techniques listed in FM 34-52 are direct, incentive, emotional love, emotional hate, fear-up (harsh), fear-up (mild), fear-down, pride and ego-up, pride and ego-down, futility, we know all, file and dossier, establish your identity, repetition, rapid fire, silent, and change of scene. Approach techniques can be used individually or in combination as part of a cohesive, logical interrogation plan. These approach techniques are found in the current training curriculum at the Military Intelligence School. The FM states these approach techniques are "not new nor are all the possible or acceptable techniques discussed. Everything the interrogator says and does must be in concert with the GWS [Geneva Convention For the Amelioration of the Wounded and Sick in Armed Forces in the Field], GPW, GC and UCMJ [Uniform Code of Military Justice]." The FM further states, "Almost any ruse or deception is usable as long as the provisions of the GPW are not violated." Techniques considered to be physical or mental torture and coercion are expressly prohibited, including electric shock, any form of beating, mock execution, and abnormal sleep deprivation.

The FM gives commanders additional guidance in analyzing additional techniques. On page 1-9 it states: "When using interrogation techniques, certain applications of approaches and techniques may approach the line between lawful actions and unlawful actions. It may often be difficult to determine where lawful actions end and unlawful actions begin. In attempting to determine if a contemplated approach or technique would be considered unlawful, consider these two tests: Given all the surrounding facts and circumstances, would a reasonable person in the place of the person being interrogated believe that his rights, as guaranteed under both international and U.S. law, are being violated or withheld if he fails to cooperate. If your contemplated actions were perpetrated by an enemy against U.S. PWs [Prisoners of War], you would believe such actions violate international or U.S. law. If you answer yes to either of these tests, do not engage in the contemplated action. If a doubt still remains as to the legality of the proposed action, seek a legal opinion from your servicing judge advocate."

The FM lists four primary factors that must be considered when selecting interrogation approach techniques:

- (1) The person under interrogation's mental or physical state,
- (2) The person under interrogation's background and experience,
- (3) The objective of the interrogation, and
- (4) The interrogator's background and abilities.

The DAIG Team found some interrogation approach techniques approved for use at Guantanamo Bay were used in development of policies in OEF and OIF. As interrogation policy was developed for Joint Task Force (JTF) Guantanamo, the Commander, U.S. Southern Command requested additional approach techniques to be approved. A Working Group on Detainee Interrogations in the Global War on Terrorism was convened. This group was required to recommend legal and effective interrogation approach techniques for collection of strategic intelligence from detainees interned at Guantanamo Bay. The working group collected information on 39 existing or proposed interrogation tactics, techniques and procedures from the U.S. Central Command (CENTCOM) and U.S. Southern Command in a 6 March 2003 report. It recommended approval of 26 interrogation approaches.

A memorandum on 16 April 2003, entitled "Counter-Resistance Techniques" approved 26 specific techniques for use only by JTF Guantanamo. It required the use of 7 enumerated safeguards in all interrogations. The memorandum stated that the use of any additional interrogation techniques required additional approval. The instructions noted that the intent in

all interrogations was to use "the least intrusive method, always applied in a humane and lawful manner with sufficient oversight by trained investigators or interrogators."

Both CJTF-180 and CJTF-7 developed interrogation policies for intelligence exploitation operations in OEF and OIF. All policies contained additional interrogation approach techniques other than those identified in FM 34-52. The DAIG Team identified this occurred for three reasons: (1) Drafters referenced the JTF Guantanamo policy memorandum as a basis for development for their policy; (2) In two instances, published policy made reference to the 8 May 1987 version of FM 34-52 which listed a technique that was later removed from the 28 September 1992 revision; and (3) Some intelligence personnel believed that additional interrogation techniques would assist in more effective intelligence exploitation of a non-compliant or hardened detainee population. Both OEF and OIF included safeguards in their policy, although they differed from each other and from the 16 April 2003 memorandum applicable to JTF Guantanamo. Reliance on the Guantanamo policy appears to contradict the terms of the memorandum itself which explicitly states it was applicable to interrogations of unlawful combatants at JTF Guantanamo and failed to take into account that different standards applied to JTF Guantanamo, CJTF-180 and CJTF-7.

The DAIG Team found that CJTF-7 issued a series of evolving policy statements, while CJTF-180 only issued one policy. The DAIG Team, however, found evidence of practices that had been in effect in Afghanistan since at least early 2003. The DAIG Team reviewed the officially approved interrogation approach technique policies for both CJTF-7 and CJTF-180, and the record of practices in use in CJTF-180 prior to adoption of a formal policy. The changes in policies and practices, over time, reflect the struggle that commanders faced in developing approach techniques policies that were both effective and complied generally with legal obligations applicable to the theater. In Iraq, in particular, the commander was faced with a group of detainees that ranged from Enemy Prisoners of War (EPW's), to security internees (SI's) to unlawful combatants. In both theaters, commanders were operating under combat conditions, facing the death and wounding of scores of U.S. soldiers, civilians and other non-combatants on a daily basis. Their decisions and decision-making process must be viewed against this backdrop.

The DAIG Team found that officially approved CJTF-7 and CJTF-180 policies and the early CJTF-180 practices generally met legal obligations under U.S. law, treaty obligations and policy, if executed carefully, by trained soldiers, under the full range of safeguards. The approved policies, however, presented significant risk if not executed in strictest compliance with their own safeguards. In this light, the caution noted in FM 34-52 (above) appears applicable, "It may often be difficult to determine where lawful actions end and unlawful actions begin." In a high-stress, high pressure combat environment, soldiers and subordinate leaders require clear, unambiguous guidance well within established parameters that they did not have in the policies we reviewed.

The DAIG Team found that the established policies were not clear and contained ambiguity. The absence of clarity could have been mitigated by additional training, detailed planning and brief-backs, detailed case-by-case legal analysis and other command and staff execution safeguards. In the absence of the safeguards, however, the commands could have embarked on high risk interrogation operations without adequate preparation or safeguards. Contributing to the ambiguity were command policies that included both approved techniques and security and safety provisions. While some security provisions provide a secondary benefit to an interrogation, it is not proper to use the security provision solely for the purpose of causing this secondary benefit in the interrogation. Both the CJTF-180 and CJTF-7 policies and the

known CJTF-180 practices prior to their first published policy, imprudently mixed discussion of security provisions into interrogation techniques. This added to the possible confusion regarding whether a particular action was truly a security provision or an interrogation technique. While the language of the approved policies could be viewed as a careful attempt to draw the line between lawful and unlawful conduct, the published instructions left considerable room for misapplication, particularly under high-stress combat conditions.

Application of the additional techniques involving higher risk of violations required additional training for interrogators. Formal school training at the U.S. Army Intelligence Center and School (USAICS) for both MOS 97E, Enlisted Human Intelligence Collector, and 351E, Warrant Officer Human Intelligence Collection Technician, provides instruction on the interrogation approach techniques identified in FM 34-52. The DAIG Team identified that interrogators only received training on doctrinal approach techniques listed in FM 34-52 from the USAICS, however, some interrogators may have received training on the additional approach techniques at the unit level. Interviewed intelligence personnel stated they were also trained on the additional approaches through mobile training teams. In some organizations, the team found a comprehensive unit training program; in others, the team found no formal or standardized interrogator training program. Inadequately trained interrogators present an increased risk that the approach technique will be improperly applied. The team found no indication that a lack of training resulted in an improper application of any particular technique or techniques; however, it remains critical that units applying any of the additional interrogation approach techniques have a comprehensive training program as a risk mitigation measure for those higher risk techniques.

The DAIG Team observed that although both CJTF-180 and CJTF-7 published interrogation approach technique policies, some inspected units were unaware of the correct command policy in effect at the time of inspection. The differences noted were omission of approved approach techniques and failure to note that a particular approach technique required higher command approval. The team was unable to determine if inspected units with incorrect versions of higher headquarters policy had requested authorization to use, or had used, any of the additional techniques. The unit policies did include safeguards consistent with the higher headquarters policy. As with other sensitive changes in unit mission orders, commanders should ensure that they have an effective feedback mechanism to ensure subordinate units receive, acknowledge and comply with changes in approved approach techniques.

Interviews and sworn statements from personnel in both CJTF-180 and CJTF-7 indicated that some of the approach techniques included in their policies, but not listed in FM 34-52, were used by some interrogators. The DAIG team found no indication of the frequency or consistency with which these additional approach techniques were employed. The DAIG Team conducted a review of 125 case summaries from the Criminal Investigation Division (CID) and unit investigations available as of 9 June 2004. Based on a review of case summaries, and despite the significant shortcomings noted in the command policies and practices, the team was unable to establish any direct link between the use of an approved approach technique or techniques and a confirmed case of detainee abuse.

(4) Root Cause: Commanders perceived interrogation approach techniques found in FM 34-52 were insufficient for effective intelligence exploitation of non-compliant detainees in OEF and OIF and published high risk policies that presented a significant risk of misapplication if not trained and executed carefully. Not all interrogators were trained on all approved approach techniques.

(5) Recommendation: TRADOC, in coordination with G2 and TJAG, revise doctrine to identify interrogation approach techniques that are acceptable, effective and legal for non-compliant detainees.

Recommendation: CJTF-7 and CJTF-180 ensure that standardized policy on interrogation approach techniques are received, understood, trained and enforced by all units.

Chapter 5

Other Observations

1. **Summary of Findings:** We examined seven key systems (Leadership and Discipline, Policy and Doctrine, Military Intelligence/Military Police Relationship, Organizational Structures, Facilities, Resources, and Training and Education) that influence how detainees are handled throughout the detention process, including interrogations. In the course of that examination we identified a number of observations that while not critical, require attention and resolution. None of the findings contributed directly to any specific case of abuse. The recommendations accompanying the 15 following findings are designed to improve our ability to properly conduct detainee operations.

2. **Findings:**

a. **Finding 9:**

(1) Finding: Interviewed leaders and Soldiers stated the unit's morale (71%) and command climate (68%) had steadily improved due to competent leadership, caring for Soldiers by leaders, and better working and living conditions as the theater matured.

(2) Standard: See Appendix E.

(3) Inspection Results: We attempted to determine the effect of stress and morale on detainee operations and conducted a Combat/Operational Stress Survey. We interviewed or sensed more than 650 leaders and Soldiers and received 603 of the surveys back. The DAIG Team found that 71% (428 of 603) of leaders and Soldiers surveyed stated the unit's morale, (71%, 428 of 603) and command climate (68%, 410 of 603) had steadily improved in OPERATION ENDURING FREEDOM (OEF) and OPERATION IRAQI FREEDOM (OIF). The survey results found that leaders and Soldiers perceived that morale and the command climate was good. The results of the survey, interviews, and sensing sessions showed that the morale and command climate improved due to competent leadership, caring for Soldiers by leaders, and better working and living conditions as the theater matured. The DAIG Team also found that most perceptions of morale and command climate varied widely between senior leaders, junior leaders, and Soldiers. The morale and command climate perception was higher for those interviewed and surveyed leaders and Soldiers who deployed prior to November 2003 and had redeployed from OEF/OIF than those that were still in country or arrived after the first of the year when living conditions started to improve.

The morale and command climate perceptions varied depending upon the difficulty of the unit's mission and its location. Soldiers conducting detainee operations in remote and dangerous locations complained of very poor to poor morale and command climate due to the lack of higher command involvement and the perception that their leaders did not care. These Soldiers stated that the leadership from higher commands hardly ever visited their locations, they were living in much worse conditions than other Soldiers, they suffered increased dangers, they were untrained to perform their mission, and the work schedule/lack of personnel depth caused them to "burn out."

Of the Soldiers who arrived in theater since November/December 2003 (61%, 194 of 318), expressed morale as good to excellent, while 51% (145 of 285) of Soldiers who deployed during the initial stages of OEF/OIF complained of poor morale, but also expressed that it seemed to get better with time.

Most Soldiers talked of how morale improved as living and working conditions improved. A majority of Soldiers mentioned the arrival of air conditioning, installation of Internet cafes, rest and recuperation (R&R) trips to Qatar, and environmental leave as some of the things that improved morale. Many engaged in Morale, Welfare, and Recreation (MWR) activities, such as weight lifting, basketball, softball, billiards, and ping-pong. Many enjoyed TV, hot meals, satellite phones, volleyball, and MWR bands in some locations. Soldiers were very pleased with how the leaders helped and listened to them more than they had before. The majority of Soldiers got more downtime or time off when possible. Most leaders expressed a need to continue to obtain more comfort items sooner to speed up improvements in living conditions as a measure to boost the morale.

The survey was given to every leader and Soldier that was interviewed and in sensing sessions both in theater and CONUS. The survey revealed that the majority of leaders and Soldiers agreed that unit members can depend, cooperate, and stand up for each other, which are factors of having good unit morale. In addition, leaders and Soldiers were told when they were doing a good job, were not embarrassed in front of peers, and were not assigned extra missions by leadership to look good for the chain of command, which are some indicators that there is a perception of a good command climate. Although the morale and command climate was poor under certain conditions, it steadily improved as living conditions in the theater improved over time.

(4) Recommendation: CFLCC, CJTF-7, and CJTF-180 continue to stress the importance of positive unit morale and command climate.

b. Finding 10:

(1) Finding: Detainee administration, internment, and intelligence exploitation policy and doctrine does not address detainee operations conducted in the current operating environment, which has a higher demand for human intelligence exploitation at the tactical level and the need for additional classifications of detainees.

(2) Standard: See Appendix E.

(3) Inspection Results:

POLICY

Although classified detainee operations policy has been issued to address individual situations at specific geographic locations, current published detainee operations policy in AR 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, does not address additional definitions of detainee designations and related treatment requirements. In addition to enemy prisoners of war (EPWs) in OPERATION IRAQI FREEDOM (OIF) and compliant, non-hostile civilian internees (CIs) in OPERATION ENDURING

FREEDOM (OEF) and OIF, units were faced with capturing, transporting, segregating and controlling other categories of detainees, such as non-state combatants and non-compliant CIs. AR 190-8 also does not address the relationship between mission requirements for re-establishing a civilian prison system and detainee operations. Policy must address requirements for expanded employment of confinement expertise for managing detainee security, custody, and control challenges for a wider array of detainee designations. Policy must also address the confinement expert's role in standing up indigenous prison systems, enabling rapid segregation and transfer of criminal detainee populations from U.S. Forces to indigenous control.

The DAIG Team found the addition of new detainee administrative policy classifications of detainees resulted in inconsistent administrative procedures. Current doctrine, regulations, and policy are based on a linear battlefield and a largely compliant population, with the primary goal of removing individuals from the battlefield. In addition to EPWs and compliant, non-hostile CIs, units in OEF and OIF were confronted with capturing, transporting, processing, and confining other classifications of detainees, such as non-state combatants and non-compliant CIs. The nature of the environment in which we now conduct detainee operations requires a more specific classification of the detainees interned. Instead of compliant, non-hostile detainees, units are capturing and transporting non-state combatants, insurgents, criminals, and detainees who are either known or perceived security threats. Policy needs to be updated to address the management of detainees captured and detained primarily for intelligence exploitation, the potential security threat they may pose, or the pending reestablishment of indigenous prison systems.

Army Regulation (AR) 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, accords appropriate legal status using four detainee classifications: EPW, Retained Personnel (RP), CI, and Other Detainees (OD). In OEF and OIF, various fragmentary orders, policy memorandums, and unit standing operating procedures utilized several variations on these classifications, including Enemy Combatants, Under-privileged Enemy Combatant, Security Internee, Criminal Detainee, Person Under U.S. Forces Control (PUC), and Low Level Enemy Combatant (LLEC). In accordance with AR 190-8, administrative and treatment requirements are based on the classification assigned to a particular detainee. For example, detainees are to be segregated in facilities according to their status. The development of classifications not correlated to one of the four terms defined in AR 190-8 resulted in confusing and ambiguous requirements for those charged with managing detainees and created the potential for inconsistent treatment. From points of capture to internment/resettlement (I/R) facilities, there are varying degrees of understanding as to which standards apply to the various classifications of detainees in OEF and OIF. Policy does not specifically address administrative responsibilities related to the timely release of detainees captured and detained primarily for intelligence exploitation and/or the potential security threat they may pose. Administrative processing of detainees by units in OEF and OIF was not standardized or fully compliant with policy and doctrine.

The time between capture and receipt of an Internment Serial Number (ISN) at an I/R facility far exceeded the time specified in policy and doctrine. Once the detainee reached an I/R facility, the required documentation received from collecting points (CPs) was often incomplete. The National Detainee Reporting Center (NDRC) did not receive all mandatory data elements, or in a timely manner, as detainee designation was often not determined until long after capture. From points of capture to corps holding areas, detainees are to be moved "as soon as practical"

depending on the condition of the detainee, the threat faced in moving them, and military necessity. The non-linear nature of the battlespace and missions dependent on human intelligence made administrative processing a secondary priority to intelligence exploitation of detainees. This had additional second- and third-order effects on accountability, security, and reporting requirements for detainees. Detaining individuals primarily for intelligence collection or because of their potential security threat, though necessary, presented units with situations not addressed by current policy and doctrine.

Administrative processing is further hampered by the absence of the Branch Prisoner of War Information Center (now called the Theater Detainee Reporting Center (TDRC)), the central agency in theater required by policy to manage information on all EPW, CI and RP and their personal property. This resulted in missing data on individual detainees, poor detainee and property accountability, and the inability of the NDRC to completely and accurately report all required data elements to the DoD, the Army, and other appropriate agencies. Inadequate property accountability could also result in claims against the U.S. government for losses incurred by detainees while in U.S. custody.

According to Department of Defense Directive (DoDD) 2310.1, DoD Program for Enemy Prisoners of War (EPOW) and Other Detainees, 18 August 1994, the transfer of detainees to or from the custody and control of U.S. Forces requires the approval of the Assistant Secretary of Defense for International Security Affairs (ASD(ISA)). In OEF, oversight of detainee operations policy was transferred from ASD(ISA) to the Assistant Secretary of Defense for Special Operations and Low Intensity Conflict (ASD(SO/LIC)) in a memorandum dated 17 January 2002, SUBJECT: Responsibility for Detainees in Association with the Global War on Terrorism. In OIF, ASD(ISA) maintained transfer authority under DoDD 2310.1 for most detainees, but ASD(SO/LIC) had authority under the 17 January 2002 memorandum for specific classifications of detainees. Release decisions were made by commanders or review boards at multiple echelons of detention in OIF, from points of capture to the Detainee Release Board (DRB) developed by CJTF-7. The DAIG Team did not find evidence of ASD(ISA) oversight of release decisions in OIF.

Complex detainee release mechanisms contributed to overcrowding of I/R facilities. Multiple reviews were required to make release recommendations prior to approval by the release authority. Non-concurrence by area commanders, intelligence organizations or law enforcement agencies resulted in retention of larger numbers of detainees. Interviews with the CJTF-7 Chief Magistrate, Appeal & Review Board members, and Release Review Board members indicated they believed up to 80% of detainees being held for security and intelligence purposes might be eligible for release upon review of their cases with the other 20% either requiring continued detention due to security reasons or continued intelligence requirements. Interviews also indicated area commanders were reluctant to concur with some release decisions out of concern that potential combatants may be re-introduced into their areas of operation. The Ryder Report referenced the overcrowded conditions and recommended holding Iraqi magistrate proceedings at individual facilities, reducing the requirement to manage many detainees centrally. Release of those individuals locally would substantially reduce the detainee population and the related resources and manpower, and would improve the capability to manage the remaining population. The remaining detainee population would be made up of only those criminals awaiting the restoration of the Iraqi prison system, those who are under active or pending interrogation, or those being held for specific security reasons.

During interviews and sensing sessions, the DAIG Team noted all Active Component and Reserve Component leaders indicated that current detainee operations policy was not consistent with the requirements of ongoing operations in OEF and OIF. Detainee operations policy must reflect requirements of the Future Force for strategic and operational versatility—conducting combat and stability operations simultaneously—while operating in a joint environment. As Army Transformation continues, detainee operations policy should be appropriate for and responsive to the requirements of non-linear battlespaces. Policy should provide specific guidance for a wider array of detainees who have significantly varying security requirements. This will reduce confusion in relation to the applicability of these requirements to various categories of detainees.

The Ryder Report points to several areas where current policy is not sufficient for detainee operations. It stated that, ". . . more detailed instructions in areas such as discipline, instruments of restraint, and treatment of prisoners awaiting trial. . ." are needed. The report suggested that the 800th MP Brigade's challenges in adapting its organizational structure, training, and equipment resources to expand from a purely EPW operation to also managing Iraqi and third country national detainee populations can be attributed to a lack of policy guidance. The Taguba Investigation also points to a lack of sufficient policy and training on existing policy.

The DAIG Team concluded DoD-developed classifications of detainees were different from those found in AR 190-8 and led to inconsistent segregation of these groups as directed by policy. The lack of an adequate system-wide capacity for handling detainees, the lack of specific policy on adequacy of information/evidence collection, and the lack of an operating detainee release process at all echelons, along with the perceived need to conduct interrogations closer to the point of capture, caused units to retain detainees beyond doctrinal time periods and without properly segregating the various classifications of detainees. The decision by capturing units to hold and interrogate detainees also interfered with the policy requirements for accountability of detainees and their property within the system, leading to substantial delays in determining an individual's status and his/her subsequent disposition. Policy must address the appropriate, safe, secure, and humane custody of detainees, the specialized confinement skills required in a high-risk detainee I/R setting, and the need for timely intelligence exploitation of detainees in a non-linear battlespace. Lack of a TDRC contributed to units' failure to administratively process detainees in accordance with all regulations and policy, and the loss of theater-wide detainee and property accountability. Incomplete documentation and a cumbersome review process caused detainees to be held for extended periods of time and contributed to the overcrowding of I/R facilities.

DOCTRINE

Current doctrine was designed to quickly evacuate compliant, non-hostile enemy prisoners of war (EPWs) and CIs from point of capture to I/R facilities. It does not envision the demands of gaining immediate, tactical human intelligence, hence the requirement to detain and interrogate at lower levels. The nature of OEF and OIF battlespaces, coupled with the urgent need for human intelligence (HUMINT), compelled many units to adapt their tactics, techniques, and procedures (TTPs) for conducting detainee operations. While the necessary basic skill sets and organizational responsibilities contained in current detainee operations doctrine remain applicable, the procedural timelines for detainee processing and movement from the point of capture to the I/R facilities do not consider current operational needs. Also the unit task

organizations for detainee processing and movement are not properly resourced to meet many of the challenges faced in OEF and OIF.

During interviews and sensing sessions, the DAIG Team noted leaders and Soldiers indicated current detainee operations doctrine was not consistent with the requirements of ongoing operations. According to current doctrine, the swift flow of detainees to the rear is critical in getting them to trained interrogators for intelligence exploitation, and to secure them in I/R facilities designed and operated for long-term internment. Under present doctrine, combat units must rely on support elements from other units to perform many mission-related tasks (e.g., MPs to provide escort and guard functions, and Tactical Human Intelligence (HUMINT) Teams (THTs) to screen detainees at points of capture and forward collecting points (CPs)). While current doctrine is meant to relieve combat formations of the significant manpower and logistical requirements for managing detainees before they have a negative impact on combat effectiveness, it has failed to do so in OEF and OIF. Current doctrine does not address a non-linear battlespace where units at division level and below hold detainees for extended periods of time to provide commanders with intelligence for the conduct of effective tactical operations. Traditional task organizations are not properly resourced to meet the needs of this new operating paradigm.

Standing operating procedures (SOPs) for CPs and I/R facilities that were drafted by units prior to deployment (and in accordance with current doctrine) were found early on to be outdated based on the current operating environment for OEF and OIF. Soldiers were required to perform effectively in a variety of missions across a spectrum of operations. Units quickly found themselves taking on roles in detainee operations which were unanticipated. For example, the need for timely intelligence compelled officers and Noncommissioned officers (NCOs) in combat units to conduct tactical questioning even though none had been trained in proper interrogation TTPs. Manpower shortages at CPs and I/R facilities were satisfied by using in lieu of (ILO) units; most received little or no training in detainee operations.

The limitations of current doctrine meant that mission, enemy, terrain and weather, time, troops available, and civilian (METT-TC) considerations often drove the design and operations of division CPs and battalion and company CPs. This had negative second- and third-order effects on the accountability, intelligence exploitation, security, and safeguarding of detainees. Instead of capturing and rapidly transporting detainees to doctrinal CPs, battalions and companies were holding detainees for up to 30 days without the training, materiel, or infrastructure for doing so. The desire for timely intelligence, transportation and security concerns, and delays in administrative processing caused units at all echelons to retain detainees for periods of time that exceeded those recommended by doctrine. While adapting and operating outside of established doctrine is necessary and desirable, especially when current doctrine fails to meet the needs of ongoing operations, doing so carries with it a requirement to ensure that mission effectiveness is not hampered while ensuring safeguards are in place to prevent unsanctioned activities and meet other established requirements.

The DAIG Team observed and determined through interviews and sensing sessions that capture information was often incomplete when detainees were processed at detention locations. Capturing units lacked knowledge of procedures for information and evidence collection, critical for the accurate disposition of detainees. This was particularly apparent as OIF 2 units began deploying into theater and new commanders were faced with making release decisions based on insufficient information and documentation. The lack of required information

and specificity resulted in an administrative processing backlog at all echelons of internment. CPs and I/R facilities now require capturing units to have complete documentation prior to the transfer of a detainee into their custody.

Current interrogation doctrine for intelligence preparation of the battlefield and the composition and structure of interrogation assets does not adequately cover the current operational environment. Field Manual (FM) 34-52, Intelligence Interrogation, 28 September 1992, describes military interrogation approaches that remain valid, but the FM may not include all acceptable and effective techniques. Army interrogators receive 16.5 weeks of intensive training on interrogation procedures and techniques at the Human Intelligence Collection Course. This training includes collection priority, screening, planning and preparation, approaches, questioning, and termination of the interrogation. Specific instruction on the laws of land warfare emphasizes compliance of all Army interrogation TTPs with the Geneva Conventions and Army policy. All Army interrogators interviewed in OEF and OIF stated they were performing interrogations of detainees in accordance with policy and doctrine.

The Ryder Report and Taguba Investigation indicated deficiencies in detainee operations doctrine. The Ryder Report noted significant variances from doctrine and highlighted the need for changes in current doctrine to address the "significant paradigm shift" in detainee operations. The report, however, does not provide information on specific instances where doctrine needs to be revised. (The report did state, "the team will forward suggested doctrinal and organizational changes to the appropriate proponent schools for review and action.") The Taguba Investigation of the 800th MP Brigade found, "basic Army doctrine was not widely referenced or utilized to develop the accountability practices throughout the 800th MP Brigade's subordinate units." Procedures were "made up," with "reliance on, and guidance from, junior members of the unit who had civilian corrections experience." The relevance of current doctrine to present and future operations was beyond the scope of the Taguba Investigation. The DAIG Team found the statements made in these earlier reports to be consistent with the results of this inspection.

Findings from interviews, sensing sessions, and direct observations of AC and RC units consistently indicated that current doctrine fell short in preparing Soldiers to conduct detainee operations in the fluid and dynamic environment of OEF and OIF. Detainee operations doctrine needs to fulfill the requirement of the Future Force for strategic versatility—conducting combat and stability operations simultaneously—while operating in a joint environment with relative independence and at a high operational tempo. As Army Transformation continues, detainee operations doctrine needs to be appropriate for, and responsive to, the requirements of asymmetric battlespaces, the role of non-State belligerents, and modular force structures.

(4) Root Cause: Current doctrine and policy does not provide adequate guidance for detainee operations in OEF and OIF.

(5) Recommendation: TRADOC revise doctrine for the administrative processing of detainees to improve accountability, movement, and disposition in a non-linear battlespace. And further examine processes for capturing and validating lessons learned in order to rapidly modify doctrine and incorporate into training application for Soldiers and units.

Recommendation: The Provost Marshal General revise policy for the administrative processing of detainees to improve accountability, movement, and disposition in a non-linear battlespace

Recommendation: The Provost Marshal General, in coordination with the G2, update detainee policy to specifically address the administration, internment/resettlement, and intelligence exploitation in a non-linear battlespace, enabling commanders to better manage resources, ensure safe and secure custodial environments, and improve intelligence gathering.

c. Finding 11:

(1) Finding: Shortfalls in both the Military Police and Military Intelligence organizational structures resulted in the tactical unit commanders adjusting their tactics, techniques, and procedures to conduct detainee operations.

(2) Standard: See Appendix E.

(3) Inspection Results:

DOCTRINE

Doctrine indicates that Military Police (MP) units accept detainees from capturing units as far forward and as rapidly as possible. MPs operate divisional forward collecting points (CPs), divisional central CPs, and corps holding areas (CHA). MP units operating CPs and CHAs have the responsibilities to sustain, safeguard and ensure sick and wounded detainees receive medical treatment.

A platoon from the division MP company operates the forward CPs and should hold detainees for no more than 12 hours before transporting detainees to the central CP. The central CP should not hold detainees for more than 24 hours before transporting detainees to the CHA. Units will protect the detainees from enemy attacks and provide medical support, food, potable water, latrine facilities, and shelter. Detainee property is tagged with part C of Department of Defense (DD) Form 2745, Enemy Prisoner of War Capture Tag, and given to the escort guards. The MP leader will request transportation through logistic channels to transfer detainees from the forward CP to the central CP with the same procedures to transport the detainees to the CHA.

The CHA is operated by a platoon or company from a corps MP battalion and should not keep detainees for more than 72 hours. The decision to hold detainees longer is based on mission, enemy, terrain, time, troops available and civilian (METT-TC) considerations and the availability of forces. An MP platoon can guard 500 detainees, while an MP company can guard 2,000 detainees. As the population of the CHA increases, detainee evacuations to the internment/resettlement (I/R) facility also increase. Logistical requirements for food, water, medical care and sanitation must be considered. Locations for use by Military Intelligence (MI) interrogators need to be identified. The MP leader will request transportation through logistic channels to transport detainees from the CHA to the I/R facility.

The I/R facilities provide appropriate segregation, accountability, security, and support of detainees. An I/R facility is semi-permanent and normally consists of one to eight compounds,

with each compound capable of interning 500 detainees. The facility is operated by the HHC, MP battalion (I/R) (EPW/CI/DC) which provides command and control, administrative, and logistics functions to operate the facility. The battalion is capable of interning and supporting 4,000 enemy prisoner of war (EPWs) and civilian internees (CIs) or 8,000 dislocated civilians (DCs). An MP company (Guard) is assigned to provide guards for EPWs, CIs, and DCs, at the I/R facility. The company is capable of securing 2,000 EPWs, 2,000 CIs, or 4,000 DCs. The MP company (Escort Guard) provides supervision and security for evacuating and moving EPWs, CIs, DCs and other detained persons via vehicles, trains, aircraft, and road marches. The minimal security requirements for the facility include clear zones, guard towers, lights, sally ports, communications, and patrol roads. The MP and support personnel accepting detainees into the facility will search the detainee, conduct medical screening, perform administrative accountability, photograph and fingerprint as needed, account for personal property, and review records.

Doctrinally the first location an interrogation could take place is at the brigade. The interrogation teams are temporarily attached to the brigade from the division MI battalion interrogation section. The teams at the brigade level are strictly tactical and deal with information of immediate value. Interrogators are not usually assigned below the brigade level unless the combat situation requires limited tactical interrogation at battalion or company. Interrogations below brigade level are brief and concerned with information bearing directly on the combat mission of the capturing unit. This information is immediate tactical intelligence that is necessary for mission accomplishment and permits rapid reaction based on the information obtained.

In addition, MP personnel and MI interrogator teams at CPs and CHAs need to work closely together to determine which detainees, their personal belongings, and completed paperwork will offer intelligence information that would be useful to the command. The MI interrogators must support operations from brigade to theater level. Interrogators have to be highly mobile, and have communication equipment to report timely intelligence information to the supported commander.

Units conducting detainee operations in OPERATION ENDURING FREEDOM (OEF) and OPERATION IRAQI FREEDOM (OIF) adapted tactics, techniques, and procedures to make up for organizational shortfalls and to fill the void in doctrine resulting from the current operational environment.

OPERATION ENDURING FREEDOM

In OEF, units at point of capture processed their detainees at a non-doctrinal company CPs that held the detainees for up to 72 hours before releasing them or transporting them to higher headquarters. Detainees were held longer than 72 hours if required for intelligence purposes. Battalion Tactical Human Intelligence (HUMINT) Teams (THTs) sent to the company were extremely successful in gathering intelligence information from the detainees. If the THT was not available, the commander determined whether to detain or release a detainee after screening. MP personnel were not assigned to these company CPs, so the forward units had to provide their own guard force for the detainees. This additional duty took Soldiers away from performing their combat mission, which decreased the combat effectiveness of the unit. To process a detainee into the CP, the unit had to complete all required paperwork. The unit inventoried and tagged detainee personal property which would accompany the detainee when

he was repatriated or transferred to another location. The unit also tracked detainees with a Department of the Army (DA) Form 2708, Receipt of Inmate or Detained Person, when they were transferred to another location. The company CP provided detainees with food, water, shelter, and limited medical treatment.

The battalion CP held anywhere from 11 to 24 detainees for a period of 2 to 30 days. The battalions operating the CPs received sufficient information from the point of capture units to aid in their processing of the detainees. The interrogators examined all evidence before they began interrogating a detainee. When there was no THT present, commanders screened detainees for their intelligence value to determine if they should be released or transferred to the I/R facility. The determination to retain or release detainees at lower levels helped to ease the backlog of detainees requiring screening and questioning at higher locations. There were no MP personnel assigned to the battalions to support the battalion CPs. The battalions drew guards from their subordinate companies to act as a guard force for the detainees. This requirement to guard detainees diverted Soldiers from performing their combat mission and decreased the combat effectiveness of the unit. The unit leadership supervised its Soldiers to ensure detainees were protected, accounted for, and safeguarded. The unit provided detainees with; food, bottled water, shelter, and limited medical treatment. The unit evacuated detainees by air or tactical vehicles to higher level facilities.

The division central CP at Kandahar was operated by platoons from an MP Company. The MP personnel in-processed the detainees, inventoried their personal property on a DA Form 4137, Evidence/Property Custody Document, placed their items in bags (if they would fit) or large suitcases and other items. A copy of the inventory sheet was placed inside with the property (with the detainee internally generated identification number) and stored the property in a secure area. The detainees were physically searched, checked for injuries, digitally photographed, and if sick or wounded, evacuated to a medical treatment facility (MTF) for treatment. The central CP held anywhere from 23 to 40 detainees. Most detainees were repatriated or transferred within 72 hours of arrival at this location, however detainees could be held longer for intelligence exploitation. MP guards escorted detainees to the interrogators and remained in close proximity during the interrogation. Since the detainees did not leave the facility, there was no custodial transfer of detainees to interrogators. When an interrogator requested to screen detainee personal effects prior to the interrogation, the MP guard would have the interrogator sign for the items prior to releasing them. The unit provided detainees with food, bottled water, shelter, blanket, Qur-an, medical treatment and showers for personal hygiene. CP personnel transported detainees by air to the I/R facility.

Detainees were held at the Bagram I/R facility for an unspecified length of time. The facility could house up to 275 detainees and, at the time of the inspection, housed 175. The I/R facility was operated by an MP battalion. The MP battalion did not deploy with two of its organic MP companies, but was augmented with two Reserve Component (RC) MP companies, one company was an MP company (combat support) and the other was an MP company (guard), to aid them with the internment duties. Upon a detainee's arrival, the MPs in-processed the detainee's personal effects and accounted for the items on a DA Form 4137. The evidence custodian signed for the property and stored it in a secure area. The detainee was photographed, received a medical screening including height and weight, was issued a jumpsuit, showered and shaved, and then was photographed again. The MP guards escorted the detainee to the interrogators and remained in close proximity to the interrogation. Since the detainee did not leave the facility there was no custodial transfer of the detainee to the

interrogator. If the detainee was transferred outside the facility, a DD Form 2708, Receipt of Inmate or Detained Person, was completed and signed to maintain accountability. Upon return the detainee received a complete medical exam to check for injuries. When an interrogator requested to screen detainee's personal effects prior to the interrogation, the MP guard would have the interrogator sign for the items. The interrogators used the same screening sites they use for interrogations to review personal effects. One MI Officer felt there was a doctrinal shortcoming pertaining to interrogation operations. He felt there should be a standing operating procedure (SOP) for the operations of a joint interrogation facility (JIF) that is standard Army wide. MP personnel provided the detainees with food, bottled water and access to medical treatment. The detainees slept in cells, received blankets and had access to latrines and showers.

OPERATION IRAQI FREEDOM

Based on interviews and sensing sessions with leaders and Soldiers in Continental United States (CONUS)/Outside CONUS (OCONUS) the DAIG Team found 50% (13 of 26) of interviewed point of capture company leaders stated that their companies had established and operated non-doctrinal company CPs in OIF. These companies detained individuals during their cordon and search operations and raids. The remaining 50% of interviewed point of capture company leaders transported their detainees to the next higher collecting point. The companies held anywhere from 3 to 15 detainees for a period of 12 hours up to 3 days. This was longer than the recommended doctrinal standard of 12 hours. Doctrine also has the MP operating CPs to temporarily secure EPWs /CIs until they can be evacuated to the next higher echelon's holding area. MP personnel are not doctrinally assigned at the company level to collect or guard detainees. The capturing unit had the responsibility to guard their detainees for extended periods of time, which took the Soldiers away from performing their combat mission and adversely impacted the combat effectiveness of the unit. The company CPs were established to interrogate detainees closer to the point of capture prior to evacuating the detainee to the next higher level CP. The unit completed the required detainee paperwork at this location. The required paperwork included 2 sworn statements, the Coalition Provisional Authority Forces Apprehension Form, and DD Form 2745, Enemy Prisoner of War Capture Tag. The unit had to complete this process in order to evacuate the detainees to the next higher location. Units inventoried and bagged the detainees' personal property as part of the paperwork process. Of the interviewed company leaders that had established the company CPs, 62% (16 of 26) said they would interrogate the detainee to gather information while holding them at the company CP. This tactical questioning (TQ) was more than just asking the detainee basic questions (name, age, place of residence, etc); it was an attempt to gather intelligence that might aid the unit in locating other potential targets. In a few cases, when available, units had THTs to conduct initial intelligence screening of detainees. Another 15% (4 of 26) of interviewed company leaders that had established the company CPs, asked detainees basic questions to complete the paperwork. The remaining 23% (6 of 26) of interviewed company leaders that had established the company CPs said they did not conduct interrogations or question detainees at all. The unit leadership did not have the proper training in interrogation procedures and techniques to conduct effective interrogations. Without training, individual conducting interrogation could possibly jeopardize vital intelligence information instead of quickly processing and transporting detainees to an area with trained interrogators. The company CP provided detainees with; food, bottled water, limited shelter and limited medical treatment. The unit transported detainees to the battalion CP during re-supply assets operations for unit security.

Of the interviewed combat arms brigade/battalion leaders who performed cordon and search missions and raids 77% (10 of 13), operated their own non-doctrinal battalion CPs. The remaining three interviewed battalion/brigade leaders said they did not operate CPs but would transport the detainee to the division forward CP. Battalions held 12 to 20 detainees at their CPs for 12 hours up to 14 days, relying on their subordinate units to guard the detainees for extended periods of time. This guard requirement took Soldiers away from performing their combat mission and adversely impacted the combat effectiveness of their units. MP personnel are not doctrinally assigned at the company level to collect or guard detainees. The battalions required capturing units to complete all mandatory paperwork (sworn statements, Coalition Provisional Authority Forces Apprehension Form, and DD Form 2745) before accepting the detainees into their battalion CP. The interviewed combat arms brigade/battalion leaders (77%, 10 of 13) said TQ or interrogations of detainees were performed to gather tactical information if there were no trained interrogators at their location. Battalion commanders and S2s did their own interrogations of detainees to ease the backlog of detainees at CPs. Of these battalion commanders 18% (1 of 13) said they had a THT team at their location to conduct interrogation of detainees and 15% (2 of 13) said they did not question detainees. There were not enough interrogators to be pushed down to battalion level to conduct interrogations of detainees. Without trained interrogators at the battalion level and below, the units risked missing intelligence information by holding detainees, instead of quickly processing and transporting them to an area with trained interrogators. The battalion CPs provided detainees with; food, water, shelter, blankets, latrines, and limited medical treatment. Battalions transported the detainees to the division forward CP during re-supply operations.

Based on interviews with leaders in OCONUS/CONUS who said they operated division forward CPs located in a brigade area, the DAIG Team found 45% (5 of 11) were operated by non-MP units during the period of May 03 to April 04. Another 27% (3 of 11) of division MP platoons operating CPs required augmentation from 4 to 14 Soldiers from Infantry units to help them with this mission. The remaining 27% (3 of 11) of CPs were operated by MP platoons. The forward CPs held between 4 to 150 (150 detainees in one incident) detainees from 24 hours up to 54 days. The MP platoon provided trained MP personnel to handle, safeguard, and account for detainees. This included reviewing the point of capture unit's paperwork for each detainee, assigning detainees an internally generated detainee number, and a complete inventory of each detainee's personal belongings on a DA Form 4137. The personal belongings were bagged with the DA Form 4137 to include a matched internally generated detainee number and secured in an evidence room, separate cell, small footlocker, container, or tent. If the unit delivering detainees to the forward CP did not have the required paperwork (sworn statements, Coalition Provisional Authority Forces Apprehension Form, and DD Form 2745), the in-processing personnel would not accept the detainee into the CP until the unit completed the paperwork. The paperwork, to include evidence the unit brought in with the detainee, was a critical source of useful information the interrogator could use during their interrogations. The brigades were using their MI interrogators and contracted interpreters to interrogate detainees and gather tactical intelligence information for their units. Personnel operating CPs had different procedures in place for transferring a detainee to an interrogator. If the detainee was not leaving the CP then the guard did not have the interrogator sign for the detainee. When the interrogator was finished with the detainee he would return the detainee to the guard who would then return the detainee to the cell. However, if a detainee was taken outside the CP then the interrogator would sign for the detainee on a DD Form 2708 or DD Form 629, Receipt for Prisoner or Detained Person. Upon the detainee's return, the guards would sign for the

detainee and the medic or guard would check the detainee for marks or bruises and then annotate the marks or bruises if any, on an SF 600, Medical Record - Chronological Record of Medical Care. The DAIG Team did a sampling of detainee records to include the SF 600 and the team found no annotations of marks or bruises. The detainees were provided; food, bottled water, shelter, blankets, latrines, and medical treatment. The unit transported detainees to the division central CPs by either ground (wheeled convoy) or air (CH-47 helicopter).

Two of 4 division central CPs were operated by a platoon from the division MP company, which required augmentation of 7 to 15 Soldiers from Infantry or Engineer units to help them with this mission. The remaining two division central CPs were operated by platoons from a different division or from a company from the MP battalion (Corps). MP platoons provided trained personnel to handle, safeguard, account for, and input information into the Detainee Reporting System (DRS) and or Biometric Automated Tool Set (BATS) system. This included a review of point of capture paperwork for each detainee and an inventory of their personal belongings on DA Form 4137. Once the inventory was complete the evidence custodian locked the detainee's personal property in a separate room. The central CPs used both MI interrogators and contract interrogators and interpreters to interrogate detainees. The MP guards did not have the interrogator sign for the detainee if the interrogator was not departing the CP. Division central CP SOP required the guards to have the interrogators sign a DD Form 629 or DD Form 2708, and enter the information on their DA Form 1594, Daily Staff Journal or Duty Officer's Log, if the detainee departed the CP. Three Provost Marshals said Other Government Agencies (OGAs) did interrogate detainees, however, this required their approval, and the OGAs had to sign for the detainee. Upon their return they were examined and resigned for to regain custody of the detainee. The division central CP held anywhere between 70 to 200 detainees from 72 hours up to 45 days. The division central CP provided the detainees with food, bottled water, shelter, blankets, latrines, and medical treatment. The division central CP transported detainees by ground convoys or helicopter to I/R facilities.

I/R facilities were operated and controlled by MP battalions, MP companies, and in lieu of units (non-MP units). MP personnel processed the detainees into their facilities, which included checking the detainees against the roster for arrival, obtaining weight and height, issuing an Internment Serial Number (ISN), medical screening, inventorying, and tagging property, and review of paperwork (sworn statement, Coalition Provisional Authority Forces Apprehension Form, completed DD Form 2745 verifying that detainee data was entered into the DRS system, and amending and updating the database information as required. The detainee's personal property was annotated on DA Form 4137 and placed in a bag or a box with the detainee's ISN number. The property was then placed in a controlled access evidence room. Each detainee was issued a blanket, jumpsuit, shoes, and a Qur-an as part of their in-processing.

There was no specific length of time I/R facilities held detainees. The I/R facilities held anywhere from 1700 detainees up to a maximum of 7000 detainees depending on the facility. Inside each I/R facility were a series of compounds housing from 450 to 700 detainees each. The operations of I/R facilities and compounds were the responsibility of the MP (Combat Support) battalions who were sometimes not properly equipped with specific items necessary for detainee operations and were not trained specifically on detainee tasks in order to perform this mission. Additionally, in lieu of (ILO) units assigned the guard force (tower) and escort mission for I/R facilities received limited MP training at their Mobilization Site.

Interrogators used the screening procedure to identify a detainee who may have intelligence information. The interrogators screened both the detainee paperwork along with his/her personal effects to determine which individual possessed intelligence information. When an interrogator requested to screen a detainee's personal effects prior to the interrogation, the MP guard would have him sign for the items using DA Form 4137. The MP guard escorted the detainee to the interrogators, and since the detainee was not leaving the facility the interrogator was not required to sign for the detainees. If the detainee was leaving the facility a written authorization was required, and the guard had the individual sign for the detainee on a DD Form 2708 or DD Form 629. The MI units used military and contract interrogators and interpreters to interrogate the detainees. MP personnel provided the detainees with food, water (bottled water or 5 gallon cans), and access to medical treatment. Each compound had shelter, mats or cots to sleep on, latrines, and showers.

(4) Root Cause: Division level units are not resourced with sufficient numbers of Military Police personnel and Military Intelligence personnel (interrogators) to conduct detainee operations in a non-linear battlespace. Point of capture units did not comply with doctrine that requires the quick evacuation of detainees to internment facilities. Units held detainees at CPs closer to the point of capture for longer periods of time to conduct more effective interrogation and intelligence exploitation so they could obtain time-sensitive tactical intelligence.

(5) Recommendation: TRADOC and G3 update the Military Police force structure at the division level and below to support the simultaneous execution of detainee operations and other battlefield missions.

Recommendation: TRADOC and G3 update the Military Intelligence force structure at the division level and below to integrate the requirement for detainee operations that allows for timely intelligence exploitation.

Recommendation: TRADOC update doctrine to integrate tactical interrogation at battalion and company level to assist in the intelligence exploitation of detainees immediately upon capture.

d. Finding 12:

(1) Finding: There was no Theater Detainee Reporting Center (TDRC) acting as the central, theater-level agency responsible for detainee accountability, resulting in a lack of detainee personnel and data management.

(2) Standard: See Appendix E.

(3) Inspection Results: The Office of the Provost Marshal General (OPMG) has redesignated the doctrinal term Prisoner of War Information Center (PWIC) used in the above standards as the TDRC, and the doctrinal term National Prisoner of War Information Center (NPWIC) as the National Detainee Reporting Center (NDRC). The following inspection results will refer to these organizations by their redesignated titles.

The DAIG Team found there was no central agency in theater to collect and manage detainee information for OPERATION ENDURING FREEDOM (OEF) or OPERATION IRAQI FREEDOM (OIF), and no consolidated, comprehensive, and accurate database for detainee

accountability. The TDRC that had the doctrinal mission to maintain detainee accountability was not deployed to OIF or OEF during the timeframe of the inspection. In OIF, the TDRC mission of detainee data collection was consolidated at one location in Iraq and was executed as an additional duty by a battalion S1 section. None of the major functions of the TDRC were performed in accordance with policy. Internment facilities were not fully accounting for detainees or property, and they were not meeting policy requirements. There were no procedures to ensure records on detainee disposition, health status, and personal/evidentiary property were adequately accounted for during movement of detainees between collecting points and internment facilities. Capturing units did not have standardized procedures for recording detainee personal and property information or for maintaining accountability. Doctrine and policy for detainee data collection need to be revised to address technological requirements for personnel accountability systems (biometrics) and the processing of non-compliant detainees in the current operating environment.

The TDRC is the specialized unit whose mission is to be the central agency in theater for total detainee and property accountability, from which consolidated detainee data is forwarded to the NDRC. There are two Reserve Component TDRCs, and no Active Component TDRCs, in the Army. TDRCs are structured as 59-Soldier units consisting of a headquarters detachment, operations, record keeping, property accountability, postal operations, public relations, information management, and other staff sections. TDRCs were not used in OIF or OEF. A TDRC was activated and deployed to Kuwait during the mobilization for OIF, but it did not move forward into Iraq in support of detainee operations and was re-deployed to Continental United States (CONUS). However, the large numbers of captured detainees, holding detainees longer for intelligence exploitation, and a slow release process resulted in a significantly higher detainee population and a demonstrated need for the TDRC.

In OIF, the TDRC mission of detainee data collection for Iraq was assigned to the MP battalion at Camp Bucca and overseen by the S1 as an additional duty. Detainee data was consolidated as it was received from locations throughout the country and forwarded to the NDRC. Forwarded data was often incomplete, and the S1 lacked the resources to track down missing data from reporting internment facilities. The TDRC responsibilities for detainee property accountability, tracking, records management, and postal operations were not met. The S1 performed as well as could be expected with limited organic assets, but it was impossible to execute the many mission requirements that would normally be executed by a 59-Soldier TDRC. A TDRC was not deployed in OEF. The internment facility at Bagram performed the mission of detainee data collection, consolidation, and reporting. Although information management and property accountability were more consistent in Afghanistan than in Iraq, most TDRC responsibilities were not being performed.

In the absence of a TDRC there were inefficiencies in accounting, reporting and tracking of detainee information from internment/resettlement facilities to the NDRC. The NDRC developed the automated Detainee Reporting System (DRS) as a standardized, automated data system that the TDRC uses to consolidate data from the internment facilities and forward to the NDRC. With no TDRC to provide oversight, OIF and OEF detainee processing centers often used simple spreadsheets or alternate automated data systems (Joint Automated Booking System (JABS) and Biometric Assessment Tool Set (BATS)) with the ability to capture biometric data (e.g., fingerprints), but these applications did not capture other data required by Army policy. Moreover, the alternate data systems were not compatible with DRS and could not transfer information to the NDRC. At the direction of the NDRC, the DRS became the primary

automated database that internment facilities were required to use. Concurrently, internment facilities continued to enter data in JABS and BATS due to the inability of DRS to record biometric data. (Note: The DRS is projected to have the capability to collect and store fingerprints by July 2004.) There is a fourth detainee reporting system in place to collect the same data in Arabic for use by the Coalition Provisional Authority (CPA). Because of the use of multiple data systems, incomplete data entry, and the inconsistent implementation of the DRS there are approximately 50,000 missing data points in the NDRC database.

Capturing units did not have standardized procedures for recording detainee personal and property information or for maintaining accountability. In OEF and OIF, units at points of capture and collecting points were not uniformly using DD Form 2745, Enemy Prisoner of War (EPW) Capture Tag. Of the assessed units in Iraq (19%) were using DD Form 2745, compared to 55% in Afghanistan and 30% of units redeploying from both theaters. In Iraq, the Coalition Provisional Authority Forces Apprehension Form was used, a form that is more comprehensive than the EPW Capture Tag. Although the CPA form appears better than DD Form 2745 for the purpose of intelligence exploitation and continued custody determinations, there was no TDRC in theater to manage the use of the form or capture information from the form for forwarding to the NDRC. Units did not uniformly forward documentation (medical, evidence/property, capture, and intelligence documents) when detainees were transferred to other echelons of detention. Furthermore, there was no mechanism during the transfer process to maintain accountability for records that accompanied a particular detainee.

The DAIG concluded the reason for the lack of accountability, standardization and reliability of detainee data is directly related to the absence of the TDRC. The sole purpose of the TDRC, as the field operating agency for the NDRC, is to ensure the accountability of detainees and their property by standardizing practices throughout the theater and implementing DoD and Army policy. An 8-person Camp Liaison Detachment (CLD) was deployed as part of OIF 2 to perform the functions of the TDRC, in addition to numerous other responsibilities. They have received initial training on the DRS, but as a CLD they are not trained on the procedures for executing the other specific TDRC tasks. The CLD may be able to accomplish the TDRC mission if appropriately trained and relieved of additional, unrelated duties, but they lack sufficient manpower to address the backlog of unaccounted-for detainees and property.

(4) Root Cause: The TDRC was not deployed for OEF. In OIF, it was initially deployed and subsequently redeployed without moving forward in the theater.

(5) Recommendation: CFLCC submit a Request For Forces for the Theater Detainee Reporting Center (TDRC) to meet the requirements for reporting and accountability of detainees and their property.

Recommendation: The Provost Marshal General review the TDRC process, structure, and employment methods for maintaining information on detainees, their property, and other related requirements within an assigned theater of operations and consider the development of an information technology solution.

e. **Finding 13:**

(1) Finding: The ongoing Military Intelligence Force Design Update is better suited to conduct simultaneous and sustained human intelligence missions in the current and future operating environment.

(2) Standard: See Appendix E.

(3) Inspection Results: The DAIG Team found the ongoing Military Intelligence - Counterintelligence/Human Intelligence Force Design Update is better suited than the current Military Intelligence force structure to conduct simultaneous and sustained human intelligence collection and counterintelligence/force protection missions in the current and future operating environments.

The current Military Intelligence (MI) force structure lacks the necessary 97E - Human Intelligence (HUMINT) Collectors (formerly called interrogators) and 97B - Counterintelligence personnel to conduct simultaneous and sustained HUMINT collection and counterintelligence/force protection missions. The current force structure does not allow the commander to employ the doctrinal concept of conducting both HUMINT and counterintelligence missions simultaneously. Currently the commander must choose which mission is the priority. These items are covered in the Current Military Intelligence Force Structure Section below.

The ongoing Military Intelligence - Counterintelligence/Human Intelligence (HUMINT) Force Design Update (FDU), provides the necessary 97E and 97B personnel to conduct simultaneous and sustained HUMINT collection and counterintelligence/force protection missions. Multiple MI initiatives and programs, specifically the Counterintelligence/HUMINT FDU, are reshaping the MI force structure in a multi-tiered approach, to include: increasing the 97E authorizations, converting 97Bs to 97Es, converting 97L (Translator/Interpreter) to 97E and 97B, rebalancing the Active Component (AC) to Reserve Component (RC) mix to move more personnel to the AC, increasing the number of MI units and the dispersion of Tactical Human Intelligence (HUMINT) Teams (THTs) in the division and Stryker Brigade force structures, and designing Human Intelligence (HUMINT) Collection Teams (HCTs) throughout the Unit of Action (UA), Unit of Employment x (UE_x), and Unit of Employment y (UE_y) level. These items are addressed in the Military Intelligence - Counterintelligence/Human Intelligence Force Design Update Section below.

CURRENT MI FORCE STRUCTURE

The MI mission to gain HUMINT information during detainee operations is performed by the 97E. In contrast, the 97B counters the intelligence gathering of foreign intelligence and security services (FIS). Gathering information from detainees focuses the 97Es on their specialty: gathering and developing intelligence from the local environment. The 97E10 is a highly trained Soldier who has gone through 82 weeks of training. This Soldier has completed language training from the Defense Language Institute, in addition to the required Military Occupational Specialty (MOS) training. Developing this asset is a costly and time-consuming process.

The current force structure does not give the commander on the ground the amount of 97E and 97B expertise required. A divisional MI battalion has all of the 97Es in the division (depending on the type of division, approximately 16 are authorized). The DAIG Team visited one division that had six 97Es. In the current operating environment people are the key terrain, but the force structure lacks 97Es and 97Bs at the brigade level.

The average maneuver brigade has an intelligence team consisting of four 97B - Counterintelligence personnel and three 97E - HUMINT personnel (approximately two Tactical HUMINT Teams (THTs)). These 97Es come from the division MI battalion. The commander must set the intelligence priorities at either HUMINT (gathering intelligence from the local environment and information exploitation from detainees) or at counterintelligence (denying FIS intelligence on U.S. Forces).

G3 Force Developers stated current rotations in OPERATION ENDURING FREEDOM (OEF) and OPERATION IRAQI FREEDOM (OIF) require approximately 130 THTs per deployment. There are approximately four personnel per team. The ongoing Counterintelligence/HUMINT Force Design Update has greatly contributed to meeting the current operational needs. Since 2001, the number of THTs has grown from 300 teams to 450 teams. Even with these changes, the current force structure lacks the depth to meet this doctrinal requirement for a sustained period.

There are usually three 97E HUMINT specialists in the current brigade force structure; they come from the division MI battalion. They gather intelligence on threat forces and capabilities. The 97Es, as part of THTs, accompany patrols, visit communities, talk to local leaders, to gather information on how U.S. Forces are being targeted. The 97Es evaluate the internment/resettlement (I/R) population to identify potential intelligence sources. They conduct interviews and interrogations across the range of detainees, gathering information from civilian internees, enemy prisoners of war (EPWs), and high-risk detainees (HRDs).

Information gathered from detainees is critical to meeting the doctrinal mission of the 97E "to conduct focused collection, analysis, and production on the adversary's composition, strength, dispositions, tactics, equipment, personnel, personalities, capabilities, and intentions". Exploitation of intelligence gathered from EPWs and HRDs is one of the reasons detainees are kept beyond the doctrinal time standard at the point of capture and brigade level. The current force structure of three 97Es in the brigade (division MI battalion assets) provides limited resources to evaluate, gather, and analyze information from detainees.

The 97B counterintelligence mission requires the intelligence assets of the brigade to cover a large section of the local population. The brigade has a total of 4 counterintelligence specialists who gather information on threat forces and foreign intelligence services and their activities and then develop force protection and information denial measures. The 97B focus on denying intelligence to the enemy is based on their ability to stop the following FIS operations: counter-HUMINT, counter-signals intelligence (C-SIGINT), and counter-imagery intelligence (C-IMINT). The 97Bs are not accomplishing their counterintelligence and force protection missions if they are supporting the HUMINT mission of gathering information from detainees.

The current force structure of the MI is a result of the 1997 Quadrennial Defense Review (QDR) process. The QDR reshaped tactical MI units, relying heavily on the Reserve Component (RC) to carry a large portion of MI personnel. Additionally, in 1994 and 1995, the

Army restructured personnel authorizations and sent 97E personnel to the Defense Intelligence Agency.

A substantial number of active component 97Es and 97Bs are in U.S. Army Intelligence and Security Command (INSCOM) Theater Intelligence Brigades (BDEs)/Groups (GPs). Until recently, those personnel were not available to support rotational sourcing.

Some commands were using 97Bs to fill 97E requirements to meet the shortage of personnel who can conduct interrogations of detainees. Commanders who chose the collection and exploitation of information as the priority mission gave up the 97Bs from performing their counterintelligence/force protection mission. However, force protection is still a critical issue due to the non-linear battlefield. Based on the current force structure, the Army has the ability to support either force protection or HUMINT.

Currently, 60% of the 97E and 97B force structure is in the Reserve Component (RC). Deployment of some units as battalions vs. teams in early rotations to OEF followed by OIF artificially reduced the available population to support subsequent rotations. The buildup of RC THTs prior to OIF met the immediate requirement for tactical intelligence but denied a sustained capability. Additionally, the MOS qualification rate in the RC is at 50%. So even if all RC authorized positions were filled, only one-half of the personnel would be deployable.

The TRADOC proponent (U.S. Army Intelligence Center and Fort Huachuca) developed the Military Intelligence - Counterintelligence/HUMINT Force Design Update and other initiatives to meet the requirements of the current and future operating environments. G3 Force Management is restructuring the force through redesign of current Modified Tables of Organization and Equipment (MTOEs) of MI units and creation of new MTOEs. The new force structure increases the authorizations for and distribution of 97E and 97B.

MI - COUNTERINTELLIGENCE/HUMAN INTELLIGENCE FORCE DESIGN UPDATE

The Army recognizes the current force structure does not allow the commander to conduct the doctrinal missions of HUMINT and counterintelligence simultaneously. Currently, the commander must choose which mission is the priority. The Counterintelligence/HUMINT FDU was approved on 2 August 2001. Some aspects of the Counterintelligence/HUMINT FDU and other MI initiatives and programs have assisted the force in current operations, while the majority is still ongoing (as of 21 May 2004). The number of THTs in the Army has increased by 50% since 2001 (300 THTs to 450 THTs).

The main portions of the Counterintelligence/HUMINT FDU will occur from 2005 to 2009 Total Army Analysis 09 (TAA 09); additional changes will continue in 2007 through 2011 (TAA 11). The changes to the force structure are being documented in the UA, UEx, UEy, templates and in the Stryker Brigades' Modified Tables of Organization and Equipment.

The near-term changes include adding one counterintelligence company per Theater at Echelon Above Corps Theater Intelligence Groups/Brigades in Fiscal Year (FY) 05-07. The FDU and other initiatives add a variety of active component Counterintelligence/HUMINT Teams to Theater Intelligence Groups/Brigades for an increase of 400 counterintelligence/HUMINT spaces in FY06. Other changes include revising the MI Corps Support BN (MI-CSB) and changing the MI-CSB allocation from one MI-CSB per Theater to one MI-CSB per Corps.

Another Corps-level change is the creation of a "Corps G2X Cell" in the G2 section of the HHC with HUMINT authorizations.

Four counterintelligence and 2 HUMINT companies (U.S. Army Reserve) will activate in FY05-07. Finally, the AC/RC mix will rebalance, resulting in activation of 2 HUMINT companies and 1 counterintelligence company (active component) and deactivation of 2 U.S. Army Reserve counterintelligence companies.

The design of the HUMINT team will change. Previously, Warrant Officers led HUMINT teams; in the future a Sergeant First Class will lead some HUMINT teams. The current force structure can convert to an enlisted-led team by using currently available NCOs.

The Counterintelligence/HUMINT FDU is programmed to increase the number of 97E and 97B Soldiers; 97E will increase by 50%. An increase of "in excess of" 1400 97E and 97B personnel is programmed from FY05-07, including an increase in authorizations for 97E and 97B in the AC. Some of these changes will be the result of rebalancing the AC/RC mix of 97E. The 97E personnel increases have been implemented early and continue to occur. Other changes include the conversion of 460 Compo 2 MOS 97L (Translator/Interpreter) to 97E and 97B authorizations in FY05.

MI Branch will restructure the 97E MOS. 97E10 Soldiers will no longer have a language requirement following initial entry training (IET). By removing the language requirement at Skill Level 1 for 97E MOS the MI branch can send 97E10 Soldiers directly to units to gain experience. The language requirement will shift to a 97E20 requirement. Currently the 97E10 Soldier spends up to 82 weeks post-IET meeting the language requirement.

The Counterintelligence/HUMINT FDU and other initiatives will support the design of elements within the UEy, UEx, and UA. (The current design of the UEy, UEx, and UA are the base for this section of the report). This increase of counterintelligence/HUMINT units at each level is significant and is designed to add an intelligence gathering and processing capability at the UA level, as well as at higher levels. The Army's ability to add counterintelligence/HUMINT resources as it transforms into the Modular Design is based on an increase in the number of 97Es authorizations, which go from the FY04 level of 861 authorizations to the FY 11 projection of 3312 authorizations.

The UEy's Theater Intelligence Brigade will add an Exploitation Battalion and a RC Battalion that are in-Theater assets. The Exploitation Battalion and the RC Battalion will each add a counterintelligence company and a HUMINT company to the Theater, providing an additional 2 counterintelligence companies and 2 HUMINT companies to the commander.

The UEx has a G2X cell designed into its Main HQ staff. The G2X is a new organization not in the current division template. The G2X acts as the single point for all counterintelligence/HUMINT data. The G2X is a 6-person team led by an officer (MAJ/CPT) and contains a CW3 HUMINT Technician, one 97B, and three 97Es. Supplying information to the G2X are the Counterintelligence Control Authority (CICA) and the HUMINT Operations Cell (HOC). The CICA provides the counterintelligence function with 97Bs while the HOC adds 4 more 97Es for the HUMINT function. The G2X also contains a Language Coordination Section which sets up contracts for interpreters. The main HUMINT and counterintelligence gathering capability will exist in the UAs.

There are HUMINT and counterintelligence gathering capability in both Maneuver UAs (MUA) and Reconnaissance, Surveillance, and Target Acquisition UAs (RSTA UA). In the MUA and the RSTA UA the main HUMINT collection will be conducted by the HUMINT Collection Teams (HCTs) which have taken the place of the Tactical HUMINT Teams (THTs). The HCT is made up of four 97E whose mission is to gather HUMINT. This will eliminate the THTs' requirement of dividing the time among the mission of the 97B and the 97E that made up the THT. The THT currently exists in the division force structure and the Stryker Brigade force structure; THTs are not in the UA or UE force structures.

Each MUA has an S2X in the headquarters, serving the same function as the G2X does at the UEx. The MUA also has an MI company with a robust intelligence gathering capability. The HUMINT platoon contains 26 Soldiers focused on gathering HUMINT. The HUMINT platoon has two Operations Management Teams (OMTs) that each manages two HCT. Each OMT also has the ability to serve as a HCT. At the minimum, each MUA has an organic capability to field four HCTs and, if needed, generate 2 more from the OMTs. This gives the UA commander the ability to put HCTs at the point of capture or where detainees are first encountered.

The RSTA UA has a greater HUMINT capability. The MI battalion in the RTSA UA has a Collection and Exploitation (C&E) company and a counterintelligence/HUMINT company. The C&E Company has 3 HCT platoons (28 Soldiers per platoon) with 1 OMT and 5 HCTs per platoon. The C&E Company has a total of 15 HCTs. The counterintelligence/HUMINT company has 9 OMTs and 27 HCTs. At the minimum, each RSTA UA will have 42 HCTs on the ground.

The significant difference from the current division force structure is that the average division has all 16 Soldiers with MOS 97E in the division MI battalion. The UEx will deploy into theater with a modular capability that is based on the mission requirements. If the UEx deploys with 4 MUAs and a RSTA UA, it will have a total of 20 OMTs and 58 HCTs and a robust HUMINT planning, coordination, and analysis capability.

(4) Recommendation: TRADOC and G3 continue to refine and implement the force structure changes in the Military Intelligence - Counterintelligence/Human Intelligence Force Design Update.

Recommendation: TRADOC integrate the Military Intelligence - Counterintelligence/Human Intelligence Force Design Updates into the development of Units of Action and Units of Employment.

f. Finding 14:

(1) Finding: The ongoing Military Police Force Design Update provides a force structure for internment/resettlement operations that has the flexibility and is better suited to conduct sustained detainee operations in the current and future operating environment.

(2) Standard: See Appendix E.

(3) Inspection Results: The DAIG Team found the ongoing Military Police - Internment/Resettlement Battalion Force Design Update provides a force structure for Military Police internment/resettlement operations that has the flexibility and is better suited than the current Military Police force structure to conduct sustained detainee operations in the current and future operating environments, to include control and internment of high-risk detainees.

The current Military Police force structure lacks the 31E (Internment/Resettlement Specialist) personnel to meet the requirements of manning the current detention facilities and conducting sustained detainee operations in the current and future operating environments, to include control and confinement of high-risk detainees. The 31E is the only Soldier trained to run a detention facility and specifically deals with controlling and confining high value detainees. The Active Component (AC) 31Es are in the Table of Distribution and Allowance (TDA) that runs the U.S. Military Disciplinary Barracks (USDB), staffs Guantanamo Bay Naval Station (GTMO) and other outside the continental United States (OCONUS)-based confinement facilities, and staffs continental United States (CONUS)-based confinement facilities. The Reserve Component (RC) does not have the 31E personnel to provide units to run sustained detainee operations. These items are covered in the Current Military Police Force Structure Section below:

The ongoing Military Police Internment/Resettlement (I/R) Battalion Force Design Update (FDU) standardizes the force structure of Active Component (AC) and Reserve Component (RC) I/R units, converts AC Tables of Distribution and Allowance (TDAs) to I/R Modified Tables of Organization and Equipment (MTOEs), and increases personnel and units throughout the AC and RC force structure. The FDU was approved September 2003, this analysis is based on that data and is current as of 21 May 2004. The increase of deployable 31Es will give Combatant Commanders the flexibility to conduct sustained detainee operations in a non-linear battlefield and the ability to control and confine high-risk detainees (HRDs). The I/R FDU provides the RC force structure necessary to carry out its sustainability mission. Employment of the I/R FDU has been incorporated into the Unit of Employment (UE) design at Unit of Employment y (UEy) level with staff support at Unit of Employment x (UEx) level. These items are covered in the Military Police Internment/Resettlement (I/R) Battalion Force Design Update Section below:

CURRENT MP FORCE STRUCTURE

The current AC TDA organizations, such as the U.S. Army Disciplinary Barracks (USDB) and Regional Correctional Facilities (RCFs) are not deployable, and each has a different force structure. Each facility will convert to at least one I/R company.

The AC 31E population is based out of 4 installations within CONUS TDA units and 2 Modified Table of Organization and Equipment (MTOE) MP battalions that are OCONUS. In CONUS, the largest population of 31Es is at the USDB at Fort Leavenworth. Large numbers of 31Es are also assigned to the 3 Regional Correctional Facilities (RCFs) at Fort Lewis, Fort Sill, and Fort Knox. These are TDA organizations and not designed to deploy, lacking a rotational base to support the TDA corrections mission and other missions such as GTMO. There are 824 AC MOS 31E authorizations in the Army; of these, 770 are directly related to running the current detention facilities. There are 371 31E authorizations at the USDB. The other 31E authorizations are at Fort Lewis (112), Fort Sill (81), Fort Knox (80), and 24 at Navy/Marine facilities (CONUS and OCONUS). The 2 OCONUS MP battalions contain 31Es in their MTOE,

but lack the depth to support rotations; USAREUR has 76 authorizations and USFK has 26 authorizations. The remaining 54 are not directly working with U.S. prisoners or detainees. These Soldiers are at the U.S. Army Military Police School (24), recruiting (12), AC/RC support (6), and 12 others throughout the AC force.

The deployable 31Es are in the RC. The RC has 119 31E authorizations, 90 of which were filled as of 22 April 2004. The RC internment/resettlement (I/R) units' missions are to deploy or provide backfill for the AC's 31Es that deploy. However, the RC I/R units lack the qualified personnel to sustain the mission. Additionally, the RC has the only I/R command and control elements, two I/R brigades.

This force structure does not support the policy or doctrine requirement for a deployable, sustainable, and standardized, modular MP I/R battalion force design package that can meet the I/R operations objective of processing, handling, caring for, accounting for, and securing EPWs, CIs, RPs, ODs, DCs, and U.S. Armed Forces prisoners, as well as supporting the global war on terrorism (GWOT) and controlling and confining high-risk detainees. The I/R doctrine is a revision of the old Enemy Prisoner of War concept, reminiscent of Cold War doctrine applicable to a unit that is modular, capabilities-based, and deployable.

The new I/R doctrine adapts well to the Units of Action concept, however, the 31E force structure does not support I/R doctrine. FM 3-19.40, Military Police Internment/Resettlement Operations, 1 August 2001, covers most detainee operations, but at the time the doctrine was written, the MP Corps had not yet developed or defined the term high-risk detainee.

FM 3-19.1 Military Police Operations, Change-1, 31 January 2002, and FM 3-19.40, refer to the MPs as having the responsibility for coordinating sustainment for EPW/CI and that I/R battalions are equipped and trained to handle the EPW/CI mission for the long term. This is not true under the current force structure. By doctrine, an I/R battalion should support up to 4,000 EPWs/CIs, 8000 dislocated civilians, or 1500 U.S. Armed Forces prisoners. This formula does not address confinement of high-risk detainees. The current MP doctrine only focuses on long-term confinement of U.S. Armed Forces personnel.

The 31E Soldier receives his/her MOS training as part of Military Police Advanced Individual Training (AIT). All MP AIT is based on 31B (Military Police) training. There is a split in the MP AIT where 31Es and 31Bs go to different tracks. MOS 31E Soldiers take a 4-week Corrections track while the 31B receive 4 weeks of Law and Order training. The 31B (Military Police) do not receive corrections training. 31Bs receive one day of I/R training in MP AIT. The 31E10 gains MOS experience at a correctional facility or the USDB.

The current Military Police force structure is not designed to support Units of Action. The TDA-based AC units are not flexible, adaptable, or deployable.

The U.S. Army Training and Doctrine Command (TRADOC) proponent (U.S. Army Military Police School) developed an I/R Battalion Force Design Update and which was approved September 2003. G3 Force Management is restructuring the force through redesign of current MTOEs of AC and RC MP units and creation of new MTOEs. The new force structure increases the number of I/R units and 31E authorizations and is covered in the next section of this finding.

MP I/R BATTALION FORCE DESIGN UPDATE SECTION

The ongoing Military Police Internment/Resettlement (I/R) Battalion Force Design Update addresses the flexibility and sustainability of the current MP force structure. The current AC TDA organizations, such as the U.S. Army Disciplinary Barracks (USDB) and Regional Correctional Facilities (RCFs) are not deployable, and each has a different force structure. Each facility will convert to at least one I/R company.

The Director of Force Management approved the I/R Tables of Organization and Equipment (TOEs) on 17 May 2004. The I/R FDU will occur from Fiscal Year (FY04) through FY11. The FDU will standardize the I/R force structures in the AC and RC. The distribution of personnel and units will rebalance between the AC and RC, giving the AC the ability to immediately deploy I/R companies. The RC will have the force structure to accomplish the mission of backfilling Army confinement facilities as well as providing a sustained rotation of deployable units.

The I/R FDU will standardize the force structure and increase the MOS 31E expertise within the units conducting the I/R mission. The I/R battalion will be modular in nature, providing a command and control capability that is flexible and tailorable, that by design supports the Units of Action concept. The MP I/R battalion will be a flexible base that can be tailored to the Theater of Operations and the operating environment.

The I/R battalion Headquarters and Headquarters Detachment (HHD) is a 74-person unit that provides the command and control function and supports a mix of I/R companies, guard companies, and I/R detachments as required. A standard I/R battalion template for deployment could include the battalion HHD, 1 guard company, 1 I/R company, and 3 I/R detachments.

The I/R company is tailored around accomplishing the 31E mission and is the base of the new force structure. It can operate independently or as part of an I/R battalion. The I/R company will have 124 personnel, with 100 31Es. It has the built-in administrative support to conduct detainee operations as well as 2 internment platoons and a Maximum Security Section. The internment platoons each contain 42 personnel while the Maximum Security Section has 12 personnel. The Maximum Security Section is different from an I/R detachment. The I/R company should have the ability in the short term to control and intern HRDs, a capability that is essential in the current operating environment.

The I/R company can either operate as a stand-alone organization or operate as part of an I/R battalion. In either mission it provides command and control, staff planning, administration and logistical services (for both assigned personnel and the prisoner population). If the I/R company operates as a stand-alone unit, it is limited in the detainee operations functions it can perform. The stand-alone I/R company can operate either a U.S. Armed Forces prisoner confinement facility or a high-risk detainee internment facility.

If the I/R company operates as part of an I/R battalion, it can conduct a wider range of detainee operations due to the support of the I/R battalion's guard company and I/R detachments. When the I/R company operates as part of I/R battalion, it can operate the following types of facilities: high-risk detainee internment facilities; Enemy Prisoner of War/Civilian Internee (EPW/CI) internment facilities; or displaced civilian (DC) resettlement facilities.

The I/R company and I/R battalion force structures are focused on the I/R mission. Any I/R unit will require support from the Command it falls under. I/R units will require engineer support to build facilities, medical support for Soldiers and detainees, maintenance support, water purification, and other support as required.

The I/R company's main focus is supporting its 2 internment platoons and 1 Maximum Security Section. The I/R company has different capabilities based on whether it is conducting stand-alone operations or operating as part of an I/R battalion. If operating in the stand-alone function the I/R company has the capability to confine up to 300 U.S. prisoners or detain up to 100 high-risk detainees. If the I/R company is operating as part of an I/R battalion, the I/R company has the capability to detain up to 300 high-risk detainees when supported by 1 MP guard company. The I/R company also has the capability to conduct detainee operations for enemy prisoners of war/civilian internees or resettlement operations for dislocated civilians. In these detainee operations, the I/R company will also require support from one MP guard company.

The Maximum Security Section in the I/R company is responsible for detainees/prisoners who require special supervision, control, and discipline. These detainees/prisoners require close and intense management, special precautions, and more stringent confinement, search, and handling measures. The Maximum Security Section is merged with the internment platoons when conducting high-risk detainee operations.

The MP guard company has personnel and equipment resources to provide a perimeter security function as well as a transportation function. Each guard company has 3 platoons of 31Bs. Each platoon has four 11-man squads. The MP guard company has 3 light medium tactical vehicle (LMTV) trucks and 16 high mobility multipurpose wheeled vehicle (HMMWV) trucks authorized. This robust guard force and transportation assets will give the I/R battalion the capability to control and transport detainees using internal resources.

The I/R detachment is a 24-person unit that exists only in the RC. The I/R detachment augments an AC or RC I/R battalion HHD. There are no 31Es in an I/R detachment; the detachments support the detainee operations mission by providing 31Bs to act as outside-the-wire security and additional support personnel. The I/R detachment is not designed to detain HRD or U.S. prisoners. The 60 I/R detachments allow a high degree of flexibility in modularizing any organization for a mission. These units are designed to be mobilized and attached to other units as needed.

To meet the requirement for the I/R FDU, G3 plans to increase 31E authorizations through conversion of some 31Bs (Military Police) to 31Es (Internment/Resettlement Specialist), increased recruiting for 31E positions, and a redesignation of RC units to the 31E mission.

The conversion of Active Component MP TDA organizations to an I/R company MTOE has begun. The first AC I/R company will activate in FY04 at Guantanamo Bay (GTMO). A total of 10 AC I/R companies will activate by FY11.

The RC will contain the bulk of the 31E units and personnel. The RC currently contains 119 authorizations. When the I/R battalion FDU is completed in FY11, the RC will contain approximately 1720 31E authorizations, a 14-fold increase in personnel.

The U.S. Army Reserve (USAR) will contain most of the I/R battalions, while the Army National Guard (ARNG) will contain most of the I/R companies. By FY11, the RC will be organized with 20 I/R battalions (17 USAR, 3 ARNG) compared to the AC's 1 I/R battalion. The RC will have 17 I/R companies (7 USAR, 10 ARNG) compared to the AC's 10 I/R companies. The RC will contain all 60 I/R detachments (51 USAR, 9 ARNG). The I/R sustainment mission will be supplemented by this RC build-up of 17 I/R companies and 60 I/R detachments.

Based on the currently proposed MTOE, the standard I/R battalion will deploy with a battalion HHD, 1 guard company, 1 I/R company, and 3 I/R detachments. The template for a deployed I/R battalion will contain 427 personnel; 101 of them will be 31Es. The I/R company contains the 31E personnel in the 2 I/R platoons and the Maximum Security Section. The I/R FDU units contain the following personnel:

- I/R battalion HHDs: 74 total personnel (one 31E)
- I/R companies: 124 total personnel (100 31Es)
- I/R platoons: 42 total personnel (41 31Es)
- Maximum Security Sections: 12 total personnel (12 31Es)
- MP guard companies: 157 total personnel (no 31Es)
- I/R detachments (RC only): 24 total personnel (no 31Es)

The I/R FDU is designed to provide I/R units to the UEy that meet the specific requirements of the commander. The primary employment of 31Es will be at the UEy level. They will deploy in the I/R configuration best suited to the mission, whether it be as I/R brigades or I/R battalions. Current planning calls for two 31E NCOs (E-7s) working on the UEx staff, one in the UEx Main and one in the UEx TAC. Both will act as liaisons to the UEy I/R units and as advisors on I/R capabilities at the UEx level. There are no current plans to place 31Es in the Unit of Action (UA) or Stryker Brigades.

A UA will contain a 41-person MP platoon (31Bs). There will be no 31Bs in the Stryker Brigades. In the UEx and UEy, the 31Bs outside of the I/R units will not be primarily tasked with I/R operations.

(4) Recommendation: TRADOC and G3 continue to refine and implement the force structure changes in the Military Police - Internment/Resettlement Battalion Force Design Update.

Recommendation: TRADOC integrate the Military Police - Internment/Resettlement Battalion Force Design Update into the development of Units of Action and Units of Employment.

g. Finding 15:

(1) Finding: Three of 4 inspected internment/resettlement facilities and many of the collecting points, had inadequate force protection measures, Soldier working conditions, detainee living conditions, and did not meet the minimum preventive medicine and medical treatment requirements.

(2) Standard: See Appendix E.

(3) Inspection Results: The DAIG Team inspected 4 internment/resettlement (I/R) facilities and 12 forward and central collecting points (CPs). Three of 4 inspected internment/resettlement (I/R) facilities, and 3 of 12 (25%) inspected collecting points (CPs), had problems and shortcomings with deteriorating infrastructure that impacted on having a clean, safe, and secure working environment for Soldiers and living conditions for detainees. Poor food quality and food distribution, lack of laundry capability, and lack of personal hygiene facilities at some of these facilities affected the detainees' living conditions. Overcrowding, safety hazards, frequent enemy hostile fire, and lack of in-depth force protection measures also put both Soldier and detainee at risk.

Four of 16 (25%) inspected facilities (Camp Bucca, Bagram, Abu Ghraib, and Brassfield-Mora) were found to have safety hazards that posed risks to Soldiers and detainees. In addition, there was little evidence that units operating facilities had safety inspection programs in place. Safety programs in just a few facilities amounted to nothing more than detainee fire evacuation plans, weapons clearing procedures, and military working dog safety considerations. At the time of the inspection, Camp Cropper, Camp Bucca, and Abu Ghraib did not have finalized and approved Standing Operating Procedures (SOPs) for their facilities. At the time, units were busy revising and tailoring their SOPs for the mission. However, during SOP reviews conducted by the DAIG Team, there was no evidence that the risk management process was being incorporated into the working draft SOPs as required. Reviews of finalized SOPs at other facilities yielded the same results as the working drafts—no risk management was incorporated into SOPs.

No units fully complied with the medical treatment of detainees or with the sanitary conditions of the detainee facilities. Not all medical personnel supporting division CPs and I/R facilities were aware of detainee medical treatment requirements or had the proper equipment to treat a detainee population. The medical personnel interviewed stated that they did not receive any specific training in detainee operations and were not aware of Army Regulation (AR) 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, although most believed they were required to treat detainees to the same standard of care as Coalition Forces. There was a widespread lack of preventive medicine staffing, supplies, and equipment to meet the needs of CPs and I/R facilities. This shortfall was compounded by the failure of units to deploy appropriately trained and supplied field sanitation teams. Medical leaders responsible for direct oversight of preventive medicine personnel lacked specific training in detainee operations and field sanitation. I/R facility site selection, design and construction decisions did not incorporate preventive medicine considerations. There was significant variance in the hygiene and sanitation conditions at CPs and in I/R facilities throughout Afghanistan and Iraq. While major improvements continue to upgrade conditions at most sites, the process has been hampered by shortages of preventive medicine personnel and materiel, problems with site selection and design, and detainee populations that exceed the current system capacity. Lack of trained preventive medicine personnel and required field sanitation supplies has contributed significantly to deficiencies in hygiene and sanitation at CPs and I/R facilities.

CAMP BUCCA

Soon after the ground conflict began in Iraq, the Camp Bucca I/R facility was designed and established as an internment facility for Enemy Prisoners of War (EPWs). At the time of the

DAIG inspection, Camp Bucca was considered an overflow I/R facility for Abu Ghraib, and all detainees were kept in the old facility, which contained 6 compounds. The new facility, containing six additional compounds, was in the final stages of completion. The old facility housed a non-compliant Civilian Internee (CI) population, third-country nationals, and a very small number of EPWs. Detainees were not segregated according to category (i.e., EPWs and CIs (to include Security Internees) were housed together in compounds 7 through 11). Compound 12 housed the third-country nationals.

The DAIG Team found inadequate security measures at the Camp Bucca. Camp Bucca had 2 controlled entry points leading into the compound, but blind spots along the perimeter made access possible at other points. The facility had a sally port gate, but it was used as a serpentine instead of a true double-gate security mechanism to control the entrance and exit of personnel and vehicles. The perimeter security consisted of roving guards, a gate guard, and a guard in each of the towers. There were 2 vehicular security patrols, but they would consistently take the same route, making them vulnerable to enemy attacks and Improvised Explosive Devices (IEDs) placed on the patrol route. The visitation process at Camp Bucca presented security concerns. During visitation hours Iraqi family members were searched at the exterior entry point, but thereafter they were allowed to mingle around guards who were carrying weapons until they were taken inside the compound to visit detained relatives. This posed a major security concern should one or more of the visitors overtake a guard and seize his weapon.

In numerous places at the old facility, the triple-standard concertina wire was over-stretched and not tied down properly, and the short and long U-shaped pickets were not spaced properly. This, and the fact that the detainees vastly outnumbered the guard force, posed a security concern and potentially put Soldiers at risk if detainees rushed the wire. There were 8 perimeter towers that were not mutually supporting, creating dead space and blind spots throughout the old compounds. The towers also did not have effective communications with the roving guards. The facility had good lighting according to leaders and Soldiers due to recently receiving 32 trailer-mounted portable light stands that can be moved around the facility as needed. The acquired light stands significantly improved the lighting around the compounds. At the time of the Taguba Investigation, the perimeter lighting around Camp Bucca was inadequate and needed to be improved to illuminate dark areas that routinely became avenues of escape. Many of the security concerns due to the wire fences were corrected when the detainees were transferred to the 6 new compounds that have been constructed. The chain link fence at the new compounds was not staked to the ground between fence posts to prevent detainees from slipping through the bottom. However, to overcome this shortcoming, the battalion was placing concertina wire around the inside perimeter of the chain-link fence. This is a significant improvement in security over the old compounds. Detainees were transferred to the new compounds after the DAIG visit. These safety and security concerns were resolved once the detainees were transferred and the old compounds phased out.

According to interviews and sensing sessions at Camp Bucca, Soldiers said food is distributed and served in 30 gallon plastic containers, sometimes long after it is prepared. Detainees served themselves by dipping whatever containers they possessed into the food. No utensils were provided, and no portion control measures were in place to ensure that each detainee got the proper amount of food. One leader interviewed stated that serving ladles were on order, but none were on-hand. Food frequently ran out before all detainees had an opportunity to eat. Soldiers stated in sensing sessions that Meals, Ready to Eat (MREs) had to

be used to ensure all detainees were fed. The detainees got their drinking water from water spigots at Camp Bucca. It was noted during the walk-through that at least one water source at one of the compounds was located several feet from the human waste dump (septic tank). This problem was eliminated once the detainees were transferred.

There was no laundry service at Camp Bucca to support the detainees so they did their own laundry with the small tubs and soap given them. However, leaders and Soldiers said during interviews that they did not know if there were enough washtubs supplied to the detainees. They were not sure how many detainees actually possessed tubs and soap, and where the tubs were located within the 6 compounds.

Camp Bucca did not routinely receive hostile fire, if at all. However, the compounds did not have adequate force protection measures in place to ensure the safety and protection of detainees and Soldiers from potential hostile indirect and small arms fire. There were no bunkers or shelters constructed with overhead cover for detainees to enter if the compounds came under attack. There were also no such bunkers or shelters constructed in the new compounds where the detainees are scheduled to be transferred.

The Taguba Investigation mentioned Camp Bucca as significantly over its intended maximum capacity, with a guard force that is under-manned and under-resourced. The DAIG Team found that Camp Bucca was not overcrowded nor under-manned because the facility had been scheduled to be discontinued as an I/R facility, and a drawdown in the detainee population had occurred after the investigation was conducted. A decision to use it as an overflow facility for Abu Ghraib kept it operational. The detainee population during the DAIG inspection was 1769. Capacity for the newly constructed facility is 4500 according to the command briefing given to the DAIG Team.

BAGRAM I/R FACILITY

The Bagram I/R facility was designed and used as a Soviet aircraft maintenance facility that was built in the early 1960s. The DAIG Team found several safety hazards at the facility that posed risks to both Soldiers and detainees. Based on the document review and a thorough walk-through of the Bagram I/R facility, there was little evidence of a unit safety program. However, extensive engineering and environmental surveys of the facility, to include contaminated rooms and roof failures, had been recently conducted. At the time of the DAIG inspection, the infrastructure to support the facility was inadequate. Examples included inadequate ventilation/climate control and lighting on the main floor, the electrical distribution system throughout the facility, and non-existent sanitary facilities at the main floor.

In the Bagram I/R facility, there were no handrails and banisters on many of the steep stairwells and landings. The DAIG Team determined this was particularly dangerous while Soldiers escorted blindfolded detainees up and down the stairs. Team members actually witnessed Soldiers escorting blindfolded detainees on these stairs. Some drop-offs from the second floor landings were 5 to 7 feet.

Potential shock hazards existed at the Bagram I/R facility. There were numerous examples of open and exposed electrical wiring around the facility, to include a major electrical panel located in the vicinity of a known roof leak. Throughout the office areas, uncovered receptacles and light switches were found.

Contaminated soil (evidence of heavy metals) was found in the former metal plating rooms. The rooms were previously used as a metal plating facility as part of the Soviet aircraft maintenance facility. The unit requested and received an environmental survey of the rooms, and the conclusion was that the sampled materials represented a health risk. A rough cost estimate (\$3-6 million) to remediate the contaminated rooms was cost-prohibitive, and the decision was made to seal the rooms to protect Soldiers and detainees from exposure.

According to an interview, lead-based paint was procured from the local economy to paint the interior in various locations in the facility. Lead-based paint had been used in the past and was still being used in the Bagram I/R facility, creating a potential risk to Soldiers and detainees.

Concerning the non-existing sanitary system, Soldiers were required to remove modified portable latrines from each detainee group cell by hand. These latrines were dragged to a designated location outside the facility where contractors would empty and clean them. After cleaning the latrines, Soldiers dragged the latrines back into place in each detainee cell. During interviews and sensing sessions, Soldiers stated that human waste spills were frequent on the main floor. There was a project ongoing that will remedy this problem. The project included an installed indoor septic system that consisted of a 4-inch main line running underneath the newly poured concrete pads and along the length of the group cells. Toilets were being installed inside of each cell, and the effluent will flow via gravity to an exterior waste system. The estimated completion date was April or May 2004.

The facility had multiple roof leaks, to include an area that was repaired after damage from aerial bombing. In December 2003, the engineer group conducted a roof inspection and found possible obstructed roof drains and deterioration of parapet walls and flashing. The estimated cost to repair the roof is \$350K. This project was not funded at the time of the inspection.

At the time of this inspection, the facility had inadequate personal hygiene facilities for the number of detainees. An ongoing indoor plumbing system project to fix the problem will consist of a newly built shower room with full shower capabilities (10 shower heads) as well as a white water supply system. The fresh water supply will be housed inside of an exterior water system building that must also be designed and built.

The electrical distribution system in place was inadequate, especially to support planned upgrades for the facility that include lighting for new cells and towers and power for the Morale, Welfare, and Recreation room for the Soldiers. Current electrical amperage draw is 1279.7 amps. Amperage draw, once the upgrades are complete, will increase by another 340 amps, beyond the current transformer's capability of 1441 amps. The facility engineer was assessing the electrical load and prioritizing electrical distribution throughout the facility, with office air conditioning units and hot water heaters being shut down first during overloads to the system. There was concern that serious overloads to the system will occur this summer. There is a project planned to replace the transformer and renovate the electrical distribution system for the facility, but at the time of the inspection the project had not been funded.

ABU GHRAIB

Abu Ghraib had problems with deteriorating infrastructure that impacted the clean, safe, and secure working environment for Soldiers and living conditions for detainees. Poor food quality and food distribution, lack of laundry capability, and inadequate personal hygiene facilities affected the detainees' living conditions. Overcrowding, frequent enemy hostile fire, and lack of in-depth force protection measures also put Soldiers and detainees at risk. There is a separate finding concerning Abu Ghraib. See Finding 3 in Chapter 3.

COLLECTING POINTS

Detainees were being held at division forward and central CPs from 1 to 54 days for intelligence exploitation before release or transfer based on interviews and sensing sessions of leaders and Soldiers. If detainees are kept longer than doctrinally recommended, then the infrastructure standards for the facilities should be similar to I/R facilities for the security, safety, and wellbeing of the detainee. 3 of the 12 (25%) forward and central CPs inspected (Green Zone in Baghdad, Brassfield-Mora in Samarra, and Khost, Afghanistan) were determined to be inadequate to keep detainees for longer than doctrinally recommended due to not having the needed laundry services, personal hygiene facilities, medical care, and adequate shelter from adverse weather conditions and the elements. The division forward collecting point (CP) at Brassfield-Mora was also located within 100 feet of an ammunition holding area and fuel point. Enemy hostile fire targeting these areas could result in detainee casualties due to the close proximity of these sites to the collecting point. There were plans to fix a majority of these shortcomings at these three facilities.

Many forward and central facilities visited had recent improvements and upgrades made to them because of the inadequate facilities and harsh conditions. These improvements included upgrades to supporting infrastructure and expansions to facilities to relieve overcrowding, enhance security, and to provide for better sanitation conditions. Improvements and upgrades at collecting points included (but are not limited to) a completely new facility (construction ongoing) at the Kandahar division central CP; new roof, new interrogation room, new electrical system, installed personal hygiene facility, and additional security lighting at the division forward CP in the Green Zone; security upgrades at the division forward CP at Ar Ramadi; addition of gravel around latrines at the Brassfield-Mora division forward CP to improve drainage; and a repaired guard tower at the division central CP at the Baghdad International Airport.

Planned upgrades and improvements included (but are not limited to) installation of two 500 gallon water tanks, laundry washers, and shower facility at Ar Ramadi; new cells in a hardened facility that will protect detainees from the elements in Khost; and planned security upgrades and construction of new shower facilities for the CP at Brassfield-Mora. All units inspected were placing a great deal of effort on making improvements and upgrades to existing collecting points for the health and welfare of detainees.

PREVENTIVE MEDICINE

Six of 8 inspected units operated CPs and I/R facilities that did not comply with minimum preventive medicine standards established in policy and doctrine. Two of 8 units met or exceeded minimum preventive medicine standards. The DAIG Team conducted

comprehensive preventive medicine inspections at 8 of the 16 (50%) internment/resettlement (I/R) facilities and collecting points (CPs) visited that were interning detainees.

Leaders and Soldiers from 36 units, both continental U.S. (CONUS) and outside CONUS (OCONUS), were interviewed concerning preventive medicine practices and procedures in detainee operations. There was a widespread lack of preventive medicine staffing, supplies, and equipment to meet the needs of CPs and I/R facilities. This shortfall was compounded by the failure of units to deploy appropriately trained and supplied field sanitation teams. Medical leaders responsible for direct oversight of preventive medicine personnel lacked specific training in detainee operations and field sanitation. I/R facility site selection, design and construction decisions did not incorporate preventive medicine considerations. The capacity of the detainee system was exceeded early in the operations, leading to prolonged holding times at CPs and other areas not prepared for long-term housing of detainees.

There was significant variance in the hygiene and sanitation conditions at CPs and in I/R facilities throughout Afghanistan and Iraq. While major improvements continue to upgrade conditions at most sites, the process has been hampered by shortages of preventive medicine personnel and materiel, problems with site selection and design, and detainee populations that exceed the current system capacity. As of March 2004, Camp Bucca still had potable water sources within a few feet of exposed fecal material; Abu Ghraib continued to struggle with garbage and rodents in living areas; and Kandahar's food service sanitation was extremely poor. Hand washing stations were still absent from 3 of 8 (38%) locations inspected, and sanitary orders had not been published and posted at any detainee facilities in accordance with Army Regulation (AR) 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997.

Lack of trained preventive medicine personnel and required field sanitation supplies contributed significantly to deficiencies in hygiene and sanitation at CPs and I/R facilities. Units (97%, 35 of 36) did not deploy with properly trained and equipped field sanitation teams in accordance with AR 40-5, Preventive Medicine, 15 October 1990. Preventive medicine technicians (Military Occupational Specialty 91S) were not deployed in sufficient numbers to support detainee operations, with only one assigned to each Military Police (MP) I/R battalion and none available to support units operating CPs. Preventive medicine detachments at the division level provided support to I/R facilities and CPs when distance and security permitted, but the non-linear battlespace precluded support to the majority of CPs forward of brigade. Shortages of supplies and equipment prohibited preventive medicine personnel from providing complete field sanitation services. Holding times at CPs (up to 54 days; doctrinal maximum is 24 hours) required a more robust infrastructure than units were prepared or resourced to provide.

During interviews and sensing sessions, the DAIG Team noted that (86%, 31-36) leaders and Soldiers were unaware of the specific hygiene and sanitation requirements for CPs and I/R facilities. They relied on "common sense" and contractors to establish local, often unwritten, standards. All (16 of 16) of the interviewed battalion, brigade, and division surgeons said they were not trained in detainee operations and/or preventive medicine and therefore lacked the knowledge to provide adequate oversight for hygiene and sanitation of CPs and I/R facilities. There were no theater- or unit-level policies that addressed preventive medicine requirements for detainee operations. Additionally, there was no evidence of specific medical planning for field sanitation/preventive medicine support to detainee operations.

Despite the many obstacles, recent (March 2004 timeframe) International Committee of the Red Cross (ICRC) inspections of the U.S.-operated I/R facilities in OIF have indicated general satisfaction with the efforts underway to address persistent problems in hygiene and sanitation (although the slow pace of improvements was criticized). As of March 2004, contractors have assumed responsibility for many sanitation functions, including food and water supplies, latrines, laundry, and waste disposal. The most significant problems that persist include overcrowding and insect/rodent control.

The Ryder Report and the Taguba Investigation indicated deficiencies in preventive medicine aspects of detainee operations. The Ryder Report stated that "significant variance in the health, hygiene and sanitation conditions were observed in the detention facilities throughout Iraq." The report referred to ICRC reports that indicated "major progress" in all areas, and further stated that "most facilities have adequate water supplies, sewage management and appropriate food services to comply with the United Nations guidelines." The deficiencies observed were attributed in this report to "inadequate logistical support for facility operations." The Ryder Report pointed out major sanitation problems at Camps Ganci and Vigilant (compounds at Abu Ghraib). Camp Ganci was littered with trash, had large amounts of standing water around latrines, lacked laundry facilities, had insufficient cleaning supplies, and housed detainees in tents that did not provide adequate protection from severe weather or hostile fire. Camp Vigilant had problems with water supply and latrines. The Taguba Investigation did not look at hygiene and sanitation, but it noted that Abu Ghraib and Camp Bucca were "significantly over their intended maximum capacity", with the overcrowding contributing to "poor living conditions." The DAIG Team's findings are consistent with those of the Ryder Report and the Taguba Investigation, but they were not chartered to perform specific evaluations of preventive medicine conditions at U.S.-operated CPs and I/R facilities. While the Ryder Report found most facilities to be in compliance with United Nations guidelines, the DAIG Team inspected I/R facilities and CPs against Army standards (AR 190-8, AR 40-5, and FM 21-10).

MEDICAL TREATMENT

No inspected units supporting detainee operations complied with all medical treatment requirements for enemy prisoners of war and civilian internees, such as monthly height/weight screenings, chest x-rays, and tuberculin skin tests. The DAIG Team found none of the inspected units were following all the medical requirements in accordance with AR 190-8. However, at the time of the inspection all units were attempting to provide detainees with the same quality of medical treatment as that provided to Coalition Forces.

AR 190-8 requires an initial medical screening at I/R facilities for both enemy prisoners of war (EPWs) and civilian internees (CIs). At the time of the inspection, all I/R facilities and collecting points (CPs) were performing a medical screening upon initial in processing, but not to standards. At least one I/R facility (Camp Bucca) had previously provided no medical screening, relying on sick call to discover detainees who required medical treatment. The regulation also requires a continuing monthly medical screening, to include weight measurements that ensure detainees are properly nourished. Two of the 4 I/R facilities (Camp Bucca and the Bagram Internment Facility) were aware of this requirement, and both stated they had started performing these screenings in December 2003. Only 2 of the 4 I/R facilities (Camp Cropper and Bagram Internment Facility) conducted a routine, follow-up monthly

examination for detainees held over one month as required by regulation.

AR 190-8 also requires CIs be administered a "radioscopic chest examination." None of the facilities had performed this examination. At least one facility (Camp Bucca) had no means of diagnosis for tuberculosis until December 2003. At the time of the inspection, all I/R facilities isolated potentially contagious detainees and provided some preventive measures for Soldiers treating these detainees. All I/R facilities and 7 of 12 (58%) inspected collecting points, established medical records for personnel who required medical treatment. At least 3 facilities transferred these records with the detainee when they were medically evacuated. Medical personnel at only one facility stated they would provide detainees with their medical records upon release.

Medical personnel at all facilities stated they provided medical care comparable to that afforded to Coalition Soldiers. The DAIG Team found this to be accurate in most cases, with some diagnosis-specific exceptions. The exceptions occurred when treatment required transportation out of the host nation, the patient required significant psychiatric care, or treatment was of an elective nature. Previously, one unit reported there had been some conflict between AR 190-8 and Coalition Provisional Authority treatment policy, which reportedly dictated that U.S. medical care was only available to detainees to prevent loss of life, limb, or eyesight. In these cases Army medical personnel attempted to maintain the higher standard by providing detainees with all necessary care. All interviewed medical providers stated they did not have the proper equipment for treating a detainee population that included older, chronically ill patients. In one I/R facility a senior medical Noncommissioned officer (NCO) stated that over 50% of his population had diabetes, and he had neither glucometers nor insulin. At another location a medical NCO stated that approximately 75% of his detainees had hypertension, and one-third were diabetics. At least 4 medical personnel and I/R facility commanders described shortfalls in resources to provide adequate psychiatric treatment. At least 2 I/R facilities had severely ill psychiatric patients (detainees who, in the estimation of the facility's medical personnel, required inpatient treatment) who were being treated pharmacologically by non-psychiatrist physicians.

The medical personnel interviewed stated that they did not receive any specific training in detainee operations or were aware of AR 190-8, although most believed they were required to treat detainees to the same standard of care as Coalition Forces. All requested additional training. At least one provider requested Mobile Training Teams to provide in-theater training.

The Ryder Report also noted medical personnel lacked adequate training and guidance on the treatment of detainees. Specifically, this report recommended that CJTF-7, "Publish and distribute all new Policies and SOPs to all affected parties and re-evaluate the application and adherence to medical practices." It went on to recommend that CJTF-7, "Provide continued in-service training to all newly assigned and/or rotating medical personnel on the provisions, rules and responsibilities stated."

(4) Root Cause: Some units did not have thorough plans to upgrade their facilities and in some cases, were not funded for upgrades. Field sanitation teams were not deployed in compliance with AR 40-5 and did not have adequate supplies to provide the services required. None of the units inspected were fully aware of, or trained on the specific medical requirements for detainees in accordance with AR 190-8. Medical leaders were not adequately trained for detainee operations and were unprepared to provide oversight for preventive medicine functions

at collecting points and I/R facilities. Preventive medicine aspects of detainee operations were not appropriately incorporated into medical planning processes. Preventive medicine detachments lacked sufficient personnel on their Modified Tables of Organization and Equipment (MTOEs) to adequately inspect all division collecting points and I/R facilities. Units did not have all the necessary medical equipment or supplies to meet the specific requirements contained in AR 190-8.

(5) Recommendation: CJTF-7 and CJTF-180 ensure all units meet the guidelines for minimum infrastructure standards supporting detainee operations to allow for adequate facilities to house detainees.

Recommendation: CJTF-7 and CJTF-180 implement a safety inspection program for all facilities that support detainee operations to identify and eliminate hazards to Soldiers and detainees.

Recommendation: CJTF-7 and CJTF-180 evaluate current living and working conditions at all facilities housing detainees and take corrective actions to improve the current living and working environment.

Recommendation: CJTF-7 review the physical and operations security requirements and policy/doctrinal procedures to ensure units operating internment/resettlement facilities comply with all requirements.

Recommendation: Force Providers require commanders to have trained and equipped field sanitation teams prior to deployment, and deployed commanders ensure field sanitation teams comply with Army policy.

Recommendation: TRADOC review the preventive medicine detachment force structure to ensure support to all collecting points and internment/resettlement facilities in a non-linear battlespace.

Recommendation: MEDCOM train all medical personnel in the preventive medicine aspects of detainee operations to ensure compliance with policy and the laws of land warfare.

Recommendation: MEDCOM ensure all health care personnel are trained on the medical treatment requirements for detainees in accordance with Army Regulations and ensure that units have the required medical equipment and supplies for treating detainees.

Recommendation: CJTF-7 and CJTF-180 evaluate current detainee medical capabilities and requirements and take corrective action to ensure detainees receive the required medical screening and care.

h. Finding 16:

(1) Finding: Two of 4 internment/resettlement facilities did not segregate enemy prisoners of war from civilian internees in accordance with legal requirements.

(2) Standard: See Appendix E.

(3) Inspection Results: The DAIG Team observed that 2 of the 4 inspected internment/resettlement (I/R) facilities did not segregate enemy prisoners of war (EPWs) from civilian internees (CIs). Inspections of I/R facilities, leader interviews, Soldier sensing sessions, and document reviews showed that there were 46 documented EPWs in Iraq, few of which were segregated from the CI population. Units did not segregate EPWs for 2 reasons: (1) it was too difficult a task because some of the compounds within the internment facility would only have a few EPWs in them, thus wasting space that could be used to house CIs; and (2) they were co-mingled to support interrogation requirements. Continued failure to segregate EPWs from CIs in Iraq is in contradiction to the legal requirements of GC, Article 84.

The Ryder Report mentioned, "Currently, due to the lack of Iraqi prison facilities and the ongoing consolidation efforts at the Abu Ghraib complex, Iraqi criminals are detained with security internees (generally Iraqi-on-Coalition offenses) and EPWs; though segregated in different cells/compounds. These categories of offenders need to be separated as soon as facility construction and renovation projects permit, especially separating those facilities run by U.S. personnel (for Iraqi criminals). The management of multiple disparate groups of detained persons in a single location by members of the same unit invites confusion about handling, processing, and treatment, and typically facilitates the transfer of information between different categories of detainees. Absent specific mission constraints, intermingling these categories of detainees should be avoided." Abu Ghraib abided by the Ryder Report recommendation regarding segregation of detainees by either releasing EPWs or moving them to other facilities, as the DAIG Team observed no EPWs at Abu Ghraib. In addition, the Ryder Report mentions segregation, but not specifically in the context of EPWs and CIs: "Initiate procedures for segregating Detainees into separate buildings if and where available, based on category of detainee, sex, untried, or sentenced, and severity of offense."

(4) Root Cause: Leaders at all levels were aware of the legal and regulatory requirement to segregate EPWs from CIs. Units did not comply with the segregation standard because they felt it was too difficult a task or they acted to support intelligence requirements.

(5) Recommendation: CJTF-7 segregate enemy prisoners of war and civilian internees to ensure compliance with the Geneva Conventions and Army Regulations.

i. Finding 17:

(1) Finding: Units operating collecting points (42%, 5 of 12), and units operating internment/resettlement facilities (2 of 4), were not adequately resourced with communications equipment, shotguns, and non-lethal ammunition.

(2) Standard: See Appendix E.

(3) Inspection Results: The DAIG Team inspected 12 collecting points and 4 internment/resettlement (I/R) facilities. Five out of 12 (42%) units operating collecting points (CPs), and 2 of 4 (Camp Bucca and Abu Ghraib) units operating I/R facilities experienced equipment shortfalls, including hand-held radios for communications between guards, escorts, and towers; weapon systems with non-lethal ammunition; hand and leg restraint devices; and rubber gloves to safely handle detainees.

The Military Police (MP) I/R battalion at Abu Ghraib experienced equipment shortfalls of weapons, radios, and non-lethal ammunition. This problem was compounded because the MP battalion was augmented with in lieu of (ILO) units (a Marine Infantry company and a Field Artillery battery) to perform MP missions. The MP battalion was short radios, so Soldiers at Abu Ghraib purchased their own commercial hand-held radios to overcome their shortages. These radios were used primarily for communication between tower guards, roving guards, and for detainee escort missions. Lack of batteries and working radios in the units compounded the problem. Leaders and Soldiers stated during interviews and sensing sessions that detainee operations placed additional communication burdens on the units. These commercial hand-held radios lacked the range and the communications security (COMSEC) capabilities required to maintain secure communications. According to interviews and sensing sessions, the ILO MP units did not deploy with the authorized number of shotguns, non-lethal ammunition, and radios for guard companies and escort guard companies under the Modified Table of Organization and Equipment (MTO&E) of an I/R battalion.

The situation at Camp Bucca was slightly different. The I/R battalion was augmented by two Field Artillery batteries that were ILO MP units. According to interviewed and sensed leaders and Soldiers, the MP battalion, to include the ILO units at Camp Bucca, was short authorized hand and leg restraint devices, radios, shotguns, and non-lethal ammunition. Soldiers at Camp Bucca also purchased commercial hand-held radios to overcome unit communication shortages. Like the ILO MP units at Abu Ghraib, the Field Artillery batteries experienced shortages before and after deployment due to MTO&E differences with I/R MP Guard and Guard Escort companies and experienced many of same impacts that the units at Abu Ghraib faced.

Based on interviews and sensing sessions, the collecting points at Baghdad (Green Zone), Tikrit, Baghdad International Airport (BIAP), Brassfield-Mora, and Ar Ramadi all had equipment shortages. Soldiers at the division forward collecting points at Brassfield-Mora and Ar Ramadi said that they did not have enough radios for detainee operations. The forward and central collecting points at the Green Zone, Tikrit, Ar Ramadi, and BIAP experienced shortages in hand and leg restraint devices. Collecting points at the Green Zone and Brassfield-Mora had difficulties in acquiring identification bracelets. All five of the collecting points mentioned above suffered shortages in rubber gloves for the handling of detainees.

(4) Root Cause: Combat support MPs and in lieu of MP units are not adequately equipped to perform detainee operations.

(5) Recommendation: TRADOC identify minimum equipment requirements for detainee operations to ensure successful unit mission accomplishment.

j. Finding 18:

(1) Finding: All inspected point of capture units established ad hoc kits containing necessary items and supplies for detainee field processing, but the items they contained and their quantities varied from unit to unit.

(2) Standard: See Appendix E.

(3) Inspection Results: Current operations involving the securing and field processing of detainees require specific equipment and paperwork. A "Detainee Field Processing Kit" would assist all units in processing detainees. Based on leader and Soldier interviews, the DAIG Team found that capturing units had established some type of ad hoc kit, which included a variety of items required for securing and field processing a detainee, however, the contents and quantities varied from unit to unit. Some units had more complete kits than others.

These kits were put together at unit level with no guidance from higher and no standardization except generally for the type of forms required for field processing. Capturing units developed the kits by trial and error over a period of time to streamline the processing of detainees to the forward collecting points. In some units, leaders and Soldiers were not aware of all the processing requirements for detainees for evacuation or transfer to forward collecting points. They expressed concern over not knowing these requirements and felt that if the kit had been established through doctrine, it would have expedited and standardized the field processing of detainees.

Some of the more complete kits contained copies of the required forms from AR 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, such as DA Form 4137, Receipt for Evidence/Property Custody Document; DD Form 2745, Enemy Prisoner of War (EPW) Capture Tag; DA Form 2823, Sworn Statement; and the Coalition Provisional Authority (CPA) Forces Apprehension Form (OPERATION IRAQI FREEDOM only). Other items generally found in the more complete kits were flexi-cuffs, string or wire (to attach the Capture Tag or CPA Form to the detainee), large plastic bags (to hold evidence, personal effects and other large confiscated items), small zip-lock plastic bags (to hold currency or small valuable items), an instant or digital camera, hearing protection, sandbags, bandages, or blacked-out goggles (to cover eyes), and in times of cold weather, blankets for the detainees.

(4) Root Cause: Capturing units did not have doctrinal guidance to follow in preparing or funding detainee kits that enabled units to safely and efficiently field process detainees.

(5) Recommendation: TRADOC establish and identify resource requirements for a standardized "Detainee Field Processing Kit" that will enable capturing units to properly secure and process detainees quickly, efficiently, and safely.

k. Finding 19:

(1) Finding: All inspected units had adequate transportation assets to evacuate and/or transfer detainees from points of capture to collecting points, and eventually to internment/resettlement facilities.

(2) Standard: See Appendix E.

(3) Inspection Results: The DAIG Team determined that inspected units had adequate transportation assets to evacuate, transfer, or repatriate detainees. Only a few units experienced minor difficulties arranging transportation, usually during surge periods. These transportation shortages were usually temporary problems that were resolved through coordination with supporting units.

Leaders and Soldiers stated that supporting units, such as forward support and main support battalions, were able to assist in providing transportation assets if capturing units were hampered due to other ongoing missions when required.

Capturing units typically transported detainees to the battalion or division forward collecting points in the back of High Mobility Multi-Wheeled Vehicles or Bradley Fighting Vehicles. Guard ratios and the numbers of accompanying security vehicles were generally well planned out. Most units took advantage of resupply assets to move detainees across the battlefield.

(4) Root Cause: Units were planning for and using transportation assets efficiently to move detainees across the battlefield and through the system.

(5) Recommendation: Commanders continue to stress the importance of planning and providing for adequate transportation assets to support continuing detainee operations.

I. Finding 20:

(1) Finding: Common leader training in professional military schools contains only one detainee operations task.

(2) Standard: See Appendix E.

(3) Inspection Results: The DAIG Team found that leaders and Soldiers from 87% (53 of 61) of the units that commented on Professional Military Education (PME) indicated that their PME common core does not train them to conduct detainee operations. The only PME courses that cover detainee operations training in their common core are during pre-commissioning, Warrant Officer Candidate School and the Primary Leadership Development Course. The Noncommissioned officers (NCOs) interviewed and sensed said they received little detainee operations training in their PME courses. These same NCOs talked more specifically about the Situational Training Exercises (STX) that are conducted at the end of each level of NCOES through the Advanced Noncommissioned Officer Course (ANCOC). Their STX training was force-on-force play using Multi-Integrated Laser Engagement System (MILES), and detainee operations training ceased after the point of capture.

The NCOs experienced difficulty in filling out and completing the required detainee apprehension forms correctly, which included witness statements. They also experienced difficulty in creating a detailed list and accounting for captured detainee property and evidence. The NCOs agreed that there is a training shortfall dealing with detainee classification, and status and treatment afforded to each classification under the provisions of the Geneva Convention. STXs did not cover the classifying of detainees or the paperwork involved in field processing detainees. Their PME training for detainee operations only covered the processing of enemy prisoners of war (EPW). Leaders and Soldiers interviewed and sensed indicated a need to incorporate detainee operations tasks into their PME common core programs of instruction (POI). The current operating environment has evolved and Soldiers at all levels must have a clear understanding of and how to execute detainee operations in a non-linear battlespace. The PME must apply lessons learned quickly to adjust their training to what is occurring in the current operating environment. Interviewed leaders and Soldiers all said that PME is a very important training base, but that it must keep up with current operational lessons

learned and evolving tactics, techniques and procedures.

Interviewed and sensed leaders and Soldiers stated that the Law of War training they received prior to deployment did not differentiate between the different classifications of detainees causing confusion concerning the levels of treatment. Even though this confusion existed, most leaders and Soldiers treated detainees humanely.

Currently, TRADOC has integrated one detainee operations task into the PME common core: Process Captives, (191-000-0001). The pre-commissioning course, Warrant Officers Candidate School and NCOs at the Primary Leadership Development Course are only courses receiving training on this task.

The U.S. Army Military Police School (USAMPS) has several ongoing initiatives that began in December 2003. USAMPS is currently in the process of creating and revising their detainee operations programs of instruction and training support packages using lessons learned from OPERATION ENDURING FREEDOM (OEF) and OPERATION IRAQI FREEDOM (OIF). Military Police (MP) NCOs attending the MP NCO Academy receive training on the following new and revised detainee operations tasks:

- Introduction to Detainee operations
- Communication with detainees
- Use of Force and Detainees
- Detainee Frisk, Undress, Cell and area search operations
- Restraint procedures and Detainees
- The Geneva Conventions and detainee operations

USAMPS has currently revised the tasks to provide updated programs of instruction and training support packages to support detainee operations training at all PME schools and colleges.

(4) Root Cause: There are currently not enough programs of instruction and training support packages available to the Professional Military Education schools and colleges that support detainee operations training.

(5) Recommendation: TRADOC integrate standardized detainee operations training into all Army proponent school common core programs of instruction and training support packages.

m. Finding 21:

(1) Finding: Leaders and Soldiers assigned to 69% (46 of 67) of inspected units stated they desired additional home station training; and pre- and post mobilization training to assist them in performing detainee operations.

(2) Standard: See Appendix E.

(3) Inspection Results: The DAIG Team found that leaders and Soldiers assigned to 27 of 39 (69%) of inspected Active Component (AC) units indicated their home station training did not prepare their units to perform detainee operations. Individual and collective training at home station was concentrated on fighting an enemy on a linear battlefield, according to interviewed

and sensed leaders and Soldiers. Their units did little in the way of training on detainee operations. All inspected units did execute the Common Military Training (CMT) as outlined in Army Regulation 350-1, Army Training and Education, 9 April 2003. However, the CMT classes on the Law of War, the Geneva Conventions, and Code of Conduct were generic and did not address the specific application of detainee operations in the current operating environment. These same leaders and Soldiers said their detainee operations training only covered field processing of enemy prisoners of war (EPWs) and not other classifications of detainees. The training these units received on field processing of detainees was comprehensive when dealing with EPWs only.

Once deployed in support of OPERATION ENDURING FREEDOM (OEF) and OPERATION IRAQI FREEDOM (OIF), leaders and Soldiers identified a training shortfall dealing with the handling of the different classifications of detainees and their special handling procedures. Units did not have established tactics, techniques, and procedures (TTPs) or standing operating procedures (SOPs) to cover the handling and processing of different classifications of detainees. This lack of training by point of capture units placed a burden on their resources (manpower, logistics and medical). To compound the problem, a number of leaders and Soldiers were unaware of the specific Army regulation or field manuals that govern detainee operations.

Soldiers assigned to division MP units told the DAIG Team that they did not train at home station on the five MP functional areas that were assigned to the units in theater. One example concerned a division MP platoon conducting maneuver and mobility support training at home station and then being assigned the internment/resettlement (I/R) function after deployment. These Soldiers said that their training at home station should include all 5 of the MP battlefield functions. This agrees with the Taguba Investigation finding that states, "Those military units conducting I/R operations must know of, train on, and constantly reference the applicable Army Doctrine and CJTF command policies."

Reserve Component (RC) leaders and Soldiers assigned to 64% (14 of 22) of inspected RC units stated the training they received at their mobilization sites did not prepare them to conduct detainee operations. OEF and OIF experienced RC career course captains, interviewed at the U.S. Army Military Police School (USAMPS), also said their units did not receive adequate training at their mobilization sites to prepare them to conduct detainee operations. Training at some mobilization sites concentrated on improving combat soldiering skills and to pass the Common Task Test (CTT). Leaders and Soldiers were not required to attend deployment briefings at these mobilization sites, also these units maintained no tracking systems to ensure that every Soldier received mandatory training.

Interviewed and sensed leaders and Soldiers said they were not given enough time at the mobilization sites to conduct collective unit level training. Some units had just enough time to complete their central issue facility (CIF) draw, and complete the Soldier readiness checks (SRC) before deploying overseas. Training was considered and treated like a "revolving door" at some mobilization sites. Interviewed leaders and soldiers assigned to 64% (14 of 22) of inspected RC stated they were not given a clear mission statement prior to mobilization and were not notified of their MP mission until after deploying. The units received their MP mission upon their arrival in theater. Interviewed Soldiers gave examples of being placed in stressful situations in internment/resettlement (I/R) facility with thousands of non-compliant detainees and not being trained to handle them. The lack of a mission statement limited units in support of

Readiness Training Center (JRTC). Soldiers said detainee operations during their rotation at NTC or JRTC was not evaluated beyond the point of capture and lacked realism.

Post-mobilization training for units that deployed in support of OEF 5 and OIF 2 consisted of a comprehensive training program ending in a Mission Rehearsal Exercise (MRX) to assess units' ability to execute wartime missions. Leaders and Soldiers interviewed said that all Soldiers were required to sign-in for all mandatory training received at the mobilization site. Soldiers deploying in support of OEF 5 and OIF 2 were required to sign a statement acknowledging the training they received at their mobilization site. These Soldiers were being tracked by name and by unit. This process ensured that all mobilized leaders and Soldiers were accounted for and trained. Mobilization site training was broken down into 7 Modules culminating in a Simulation Exercise (SIMEX):

Module 1: Soldier Readiness Packet, Central Issue Facility, Theater Specific Individual Readiness Training briefings

Module 2: NBC survival tasks, Land Navigation, Communications

Module 3: Crew and Individual Basic and Advanced Weapons Qualification Skills, Leader Training & New Equipment Training

Module 4: Specialty Training

Module 5: Squad and Platoon Training

Module 6: Platoon Training

Module 6.1: Combat Support/Combat Service Support training

Module 7: Multi-Echelon Training / Support and Stability Operations Training

(CAPSTONE)

Brigade SIMEX that covers Battalion and Brigade level collective tasks.

Modules 1 and 2 are augmented with a series of leader and Soldier concurrent training on Common Task Test supporting tasks. Leaders and Soldiers, deployed in support of OIF 2 and OEF 5, were very complimentary of the training they received at their respective mobilization sites. These training modules provided unit commanders the ability to execute detainee operations training during Modules 4, 5, 6, and 7. Interviewed leaders and Soldiers that deployed in support of OIF 2 said that post-mobilization training helped them once they deployed into theater. Forces Command (FORSCOM) issued specific guidance on the collective and individual tasks units must train on prior to deploying in support of OEF and OIF. These tasks did not prepare units to conduct detainee operation in the current operating environment.

The Combat Training Centers (CTC) are using an internal After Action Review (AAR) process in order to continue making improvements to their detainee operations scenario and to include the synchronization and integration of detainee operations into every unit's rotation. NTC's current focus is on conducting detainee operations to the doctrinal standard and by incorporating approved procedures used in OIF. Both JRTC and NTC have incorporated detainee operations into their Mission Rehearsal Exercises (MRXs) and Contemporary Operational Environment High Intensity (COE HI) rotations.

In the future, the Combat Training Centers' (CTCs) detainee operations training during MRX scenarios will be based upon reports and lessons learned from OIF and/or OEF, to include 1st Armored Division SOPs/TTPs, and doctrinal guidelines. All rotating units will be required to establish and operate a collecting point of some kind as part of their rotations. The CTCs are striving to replicate the best scenarios for the current operating environment. The G3, in

coordination with TRADOC, the Office of the Provost Marshal General, and the Office of The Judge Advocate General (OTJAG) has initiated a training integration assessment for improving detainee handling from point of capture to repatriation, to include a review of CTT and specialized MP training across the Army during Combat Training Center (CTCs) rotations, MRXs and TRADOC institutional training. This assessment began in December 2003 and is currently ongoing with no projected completion date.

The G3, in coordination with the U.S. Army Training and Doctrine Command (TRADOC), the Office of the Provost Marshal General, and the Office of The Judge Advocate General (OTJAG), has initiated a training integration assessment for improving detainee handling from point of capture to repatriation, to include a review of CTT and specialized MP training across the Army during CTCs rotations, MRXs and TRADOC institutional training. This assessment began in December 2003 and is currently ongoing with no projected completion date.

TRADOC's institutional training assessment is focusing on the Law of War and the 5Ss and T (Search, Silence, Segregate, Safeguard, Speed, and Tag) regarding EPWs throughout the proponent schools. USAMPS has formed an MP subject matter expert team to develop a process to analyze, identify, evaluate, and integrate lessons learned from all CONUS/OCONUS MP operations. TRADOC, in coordination with OTJAG, is currently determining the feasibility of expanding or adjusting Law of War training in the proponent schools to include procedures for handling of detainees.

In January 2004, the U.S. Army Military Police School (USAMPS) sent a Mobile Training Team (MTT) to JRTC to conduct "train-the-trainer" education for their observer controllers (O/Cs) on detainee operations. The MTT training covered detainee operations, personal safety, forced cell movements, restraint procedures, communication with detainees, and case studies. USAMPS is also coordinating with the NTC for a MTT to conduct the same training.

Currently, the USAMPS MTT mission is to train identified CONUS/OCONUS units performing detainee operations or I/R missions in support of OIF 2 on select and approved tasks to enhance their capabilities of mission accomplishment. The 31E detainee operations support and MTT is comprised of a total of 29 (31E) Soldiers. The MTT has trained leaders and Soldiers from the following units: 160th MP Battalion (BN), 107th FA Battery, 172nd FA Battery, 391st MP BN, 152nd FA Battery, K 3/24 INF-USMC, 439th CLD, MEK: 336th MP BN, 579th FA Battery, and the 1/124th AR SQ. A total of 565 leaders and Soldiers have been trained as of 7 May 2004. The following units are scheduled: 1st INF DIV (9 May-11 Jun), 1st CAV DIV (24 May-12 JUN), 1st MEF (6-30 Jun), and MNB-N (TF-Olympia) (14-30 Jun).

(4) Root Cause: There is no prescribed detainee operations training program for units to train at home station. A majority of Reserve Component MP Units who deployed in support of OIF 1 were not told of their missions until they arrived into theater and their area of responsibility.

(5) Recommendation: The G3 integrate a prescribed detainee operations training program into unit training.

Recommendation: CFLCC and Force Providers coordinate to ensure, where possible, units are aware of their assigned mission upon mobilization so they can train for their specific mission.

Recommendation: FORSCOM integrate a standardized detainee operations training package as part of pre- and post-mobilization training.

Recommendation: CFLCC ensure that ILO MP units are trained before they assume their ILO MP missions.

n. Finding 22:

(1) Finding: To offset the shortage of interrogators, contractors were employed, however, 35% (11 of 31) of contract interrogators lacked formal training in military interrogation policies and techniques.

(2) Standard: See Appendix E.

(3) Inspection Results: 35% (11 of 31) Of the contract interrogators in OPERATION IRAQI FREEDOM (OIF), 35% (11 of 31) had not received formal training in military interrogation techniques, policy, and doctrine. These personnel conducted interrogations using skill sets obtained in previous occupational specialties such as civilian police interrogator or Military Intelligence (MI) officer. The lack of specific training in military policies and techniques has the potential of placing these interrogators at a higher risk of violating Army policies and doctrine, and decreasing intelligence yield. 65% (20 of 31) of contract interrogators in OIF had previous experience as Army or Marine interrogators (Army 97E military occupational specialty or Marine Corps 0211) where they received formal school training in military interrogation techniques and procedures. These individuals had received formal military interrogation training an average of 9.5 years prior to employment as interrogators in OIF. The range of time from having completed basic military interrogation training was 1 to 25 years. Field Manual (FM) 34-52, Intelligence Interrogation, 28 September 1992, is the base document for Army interrogation doctrine. Persons trained in interrogation techniques prior to publication of the current version of the FM would have been trained on some doctrinal techniques that are no longer valid.

Contract interrogators were a force multiplier in OIF, supplementing a shortage of military interrogators. Contract interrogators were used to perform screenings and interrogations at collecting points (CPs) and in internment/resettlement (I/R) facilities to free military interrogators and counterintelligence agents to perform tactical missions at points of capture and CPs.

CACI International, Inc. is the civilian company contracted through the Department of the Interior to provide civilian interrogators for OIF. CACI has provided a total of 31 contract interrogators since the blanket purchase agreement (contract) was issued on 14 August 2003. As of 17 May 2004, 19 contract interrogators were deployed in support of OIF, and 12 contract interrogators have returned to the United States citing personal or family reasons.

The CJTF-7 Statement of Work (SOW) required contract interrogators to be the civilian equivalent of military occupational specialty 97E (Human Intelligence Collector) or 351E (Human Intelligence Collection Technician), strategic debriefer (completed the DoD Strategic Debriefing Course), or an individual with a similar skill set. Contract interrogators that only meet the requirements of "strategic debriefer" or "similar skill sets" may not have training in military-

specific interrogation techniques and procedures as taught in the 97E and 351E qualification courses. This training is specific to human intelligence exploitation and includes collection priority, battlefield screening, planning and preparation, authorized approaches, methods of questioning, and termination of interrogations. It also includes 192 hours of direct and indirect training on the laws of land warfare, emphasizing compliance of all military interrogation techniques with the Geneva Conventions and Army policy.

The DAIG Team inspected the resumes of all 31 individuals hired as contract interrogators by CACI. 65% (20 of 31) were prior service military interrogators who had been awarded the Army 97E MOS or Marine Corps 0211 MOS. These individuals had received formal military interrogation training an average of 9.5 years prior to employment by CACI (range: 1-25 years). Of the contractors without prior military service, 35% (11 of 31) had "similar skill sets" acquired in related military or civilian experience (e.g., military intelligence/counterintelligence agent, police interrogator, intelligence analyst, and police officer).

Prior to May 2004, there was no CACI or CJTF-7 requirement for all contract interrogators to receive formal, comprehensive, military-specific interrogator training prior to performing interrogations in OIF. While in Iraq the DAIG Team did not find evidence of a formal training program for contract interrogators. The DAIG Team requested from the J2, CJTF-7, both in Iraq and upon return to the United States, a training plan or program of instruction (POI) outlining a formal training program. On 19 May 2004, the Chief, CJ2X, CJTF-7 provided an email message to the DAIG Team stating that prior to February 2004, new contract interrogators working at the Joint Interrogation and Debriefing Center (JIDC) received familiarization training, consisting of briefings on the approved interrogation approach techniques and the Geneva Conventions, "left seat-right seat ride" training, and evaluation by experienced interrogators prior to conducting interrogations. On 21 May 2004, the Chief, CJ2X, CJTF-7 provided an email message stating that in February 2004, the JIDC began a two-part newcomer's training/orientation for all contract interrogators deployed to OIF. This training consisted of an organizational overview, interrogation policy briefing, tour of the facilities, and "left seat-right seat ride" training on interrogation duties and responsibilities. The message stated that documentation of this training began in May 2004.

In interviews conducted during the inspection, when four contract interrogators were asked about in-theater training, there were three different responses. One stated he received no in-theater training of any kind. Two stated training was provided on the Geneva Conventions and the interrogation approach techniques, with some additional time spent observing experienced interrogators. One stated he received 2 weeks of "right seat" training at Abu Ghraib, followed by 1 week performing supervised interrogations. Two military interrogators interviewed stated, "While some contract interrogators were fine, some lacked understanding of proper interrogation policies and procedures." In contrast, the DAIG Team interviewed 5 leaders and Soldiers who found contract interrogators to be adequate to very good.

Two specific incidents were described to the DAIG Team where Army personnel stated they saw contract interrogators using techniques and procedures inconsistent with Army policy and doctrine (e.g., pouring water over detainees' heads while in stress positions); the chain of command was already aware of this incident. In one of these incidents military interrogators at that location were reportedly using the same techniques. The DAIG Team did not observe any improper interrogation techniques during the inspection. A DAIG Team member observed two

contract interrogators performing interrogations; both interrogations were conducted using tactics, techniques, and procedures in accordance with Army policy and doctrine.

The Taguba Investigation cited a contract interrogator who gave an MP non-doctrinal guidance that violated Army policy in order to facilitate conditions for interrogation. The contract interrogator has since requested to return to the United States. A lawyer representing CACI International stated that the Army has not requested, and no contract interrogators in OIF have received, administrative or disciplinary action as a result of improper performance of duties.

At the time of the inspection there were no contract interrogators employed in OPERATION ENDURING FREEDOM (OEF). In March 2004, CJTF-180 contracted with SYTEX, Inc. for 4 contract interrogators, all of which were assigned to the I/R facility at Bagram, Afghanistan. Two of the 4 contract interrogators have military interrogation training, and the other 2 are former police officers. The senior Army interrogator assigned to CJTF-180 stated that upon arrival at Bagram the contract interrogators were provided training on interrogation planning and preparation, interrogation approaches, Geneva Conventions, questioning methods, report writing, and the CJTF-180 interrogation approach techniques. They also underwent left/right seat interrogation training. CJTF-180 provided the DAIG Team with a training plan that outlines the above.

In summary, contract interrogators in OIF met the requirements of the CJTF-7 C2 Interrogation Cell SOW. The SOW did not mandate military interrogation training as a prerequisite for employment. While some training may have occurred at Abu Ghraib, there is no evidence of a formalized POI for contract interrogators. All contract interrogators should receive training on specific theater and Army techniques, policies, and doctrine for conducting military interrogations. This requirement should be reflected in the CJTF-7 C2 Interrogation Cell SOW.

(4) Root Cause: The CJTF-7 C2 Interrogation Cell SOW did not require contract interrogators to be trained in military interrogation procedures, policy, and doctrine. Pre-deployment and in-theater training for contract interrogators on military interrogation techniques, policy, and doctrine did not occur or was inconsistent.

(5) Recommendation: The CFLCC contracting officer representative modify the CJTF-7 C2 Interrogation Cell Statement of Work to require civilian interrogators to be former military interrogators trained in current interrogation policy and doctrine or receive formal training in current military interrogation policy and doctrine.

o. Finding 23:

(1) Finding: Interviewed leaders and Soldiers indicated their Law of War refresher training was not detailed enough to sustain their knowledge obtained during initial and advanced training.

(2) Standard: See Appendix E.

(3) Inspection Results: Leaders and Soldiers from inspected units who commented on Law of War training stated they did receive some Law of War training prior to deploying, but 57% (272 of 474) of leaders and Soldiers indicated that the training was generic and did not prepare them for the current operating environment. The Level B Law of War training was

normally given by the brigade legal advisor. Law of War training is required for leaders and Soldiers throughout their military careers commensurate with their duties and responsibilities. There are currently 3 levels of training for the Law of War. Level A training is conducted during Initial entry training (IET) for all enlisted personnel and during basic courses of instruction for all warrant officers and officers. Level B training is conducted in units for officers, warrant officers noncommissioned officers (NCOs) and enlisted personnel and incorporates the missions of the unit. Level C training is conducted in Professional Military Education (PME).

Currently in IET, Level A Law of Land warfare training is designed to advise the Soldier on his rights, duties, and obligations under the Hague Convention of 1907, the Geneva Conventions of 1949, and the customary Law of War. The program of instruction used for this training is dated 1 October 1998, and is scheduled for one hour, which includes 36 minutes of classroom instruction on the principles, spirit, and intent of the Hague and Geneva Conventions; the laws of war prohibiting unnecessary destruction; and the laws of war requiring humane treatment of prisoners of war (PWs), other captured and detained persons, and civilians. In this portion of the training, Soldiers become familiar with their obligations not to commit war crimes and to report all violations of the laws of war, and the significant provisions of the Geneva Convention relative to the treatment of prisoners of war (EPWs). The other 24 minutes consists of a television tape covering the Law of Land Warfare, and emphasizes "honor" and the Army's Values. The tape stresses that each Soldier has a personal stake in knowing about these conventions and in understanding how they work. Soldiers are taught to comply with these provisions and that failure may subject them to provisions under the Uniform Code of Military Justice (UCMJ). This program of instruction is given to all IET Soldiers who enter the Army.

Level B Law of War training is designed to sustain the training received in IET and PME. Unit commanders are responsible for planning and executing Level B Law of War training. Level B training should reinforce the basic principles set forth in "The Soldiers' Rules." Level B training should be designed around current missions and contingency plans, including anticipated geographical areas of deployment or rules of engagement. Commanders ensure that Law of War training is integrated into unit training activities, field training exercises, and unit external evaluations. There are no Office of The Judge Advocate General (OTJAG) programs of instructions for Level B training. Level B training is designed to be refresher training, used to reinforce previous training and/or to sustain/regain previously acquired skills, knowledge, and experiences. Commanders determine the need for refresher training based on assessment of individual and unit proficiency. Leaders and Soldiers complained about the content and quality of their unit level B Law of War training during interviews and sensing sessions. All agreed that their Level B Law of War training needed more structure as part of Common Military Training (CMT) to help them to better function in the current operating environment.

Level C Law of War training is conducted in The Army School System (TASS); TASS is a composite school system consisting of Army National Guard (ARNG), U.S. Army Reserve (USAR), and Active Army institutional training systems. TASS conducts IET; functional training (Military Occupational Specialty (MOS), Area of Concentration (AOC), Additional Skill Identifier (ASI), and Language Identification Code (LIC)); reclassification; and officer, warrant officer, NCO, and DA civilian professional development training and education through both standard resident and distance learning courses. Level C Law of War training emphasizes officer, warrant officer, and NCO responsibilities for their performance of duties in accordance with the Law of War obligations of the United States; Law of War issues in command planning and execution of combat operations; and measures for the reporting of suspected or alleged war

crimes committed by or against U.S. or allied personnel. There are currently 2 PME common core Law of War tasks:

1. Conduct small unit combat operations according to the law of war (Task #181-431-1001) – taught at the Pre-commissioning Course (PRE), the Officer Basic Course (OBC), the Warrant Officer Candidate School (WOCS), the Basic Noncommissioned Officer Course (BNCOC), and the Primary Leadership Development Course (PLDC). This task helps leaders identify key provisions of the Hague and Geneva Conventions and those acts that constitute violations and war crimes against noncombatants, property, POWs, and medical transports/facilities, and prevent the engagement of unlawful targets and the excessive use of force. This task is designed to be programmed training, with specific learning objectives and an evaluation for proficiency. The task is trained by an instructor/trainer in a structured manner and serves as the foundation for other training. Normally the task is a qualification requirement and is presented and evaluated using the prescribed training conditions and performance standards. This task takes 100 minutes to train.

2. Conduct company level combat operations consistent with the laws of war and laws affecting peacekeeping and peacekeeping operations, rules of engagement, and other legal constraints (Task # 181-433-1001) – taught at the Captain's Career Course (CCC) and the Warrant Officer Advanced Course (WOAC). This task helps leaders prevent law of war violations and war crimes against protected noncombatants, property, POWs, and medical transports/facilities, and prevent engagement of unlawful targets and excessive use of force. This task is designed to be programmed training. This task has specific learning objectives and an evaluation for proficiency; is conducted by an instructor/trainer in a structured manner; serves as the foundation for other training; normally is a qualification requirement; and is presented and evaluated using the prescribed training conditions and performance standards. This task also takes 100 minutes to train.

Interviewed and sensed leaders and Soldiers stated that the Law of War training they received prior to deployment did not differentiate between the different classifications of detainees, causing confusion concerning the levels of treatment. Even though this confusion existed, most leaders and Soldiers treated detainees humanely.

TRADOC, in coordination with the Office of The Judge Advocate General, is currently determining the feasibility of increasing or adjusting Law of War training in the proponent schools to include procedures for handling civilian internees and other non-uniformed personnel on the battlefield.

(4) Root Cause: Level B Law of War training is a CMT task, coded "R" (Refresher), that does not require the training to have specific learning objectives and taught by an instructor/trainer in a structured manner.

(5) Recommendation: The G3, in coordination with the Office of The Judge Advocate General, mandate that Level B Law of War training have specific learning objectives, be conducted by an instructor/evaluator in a structured manner, and be presented and evaluated annually using the established training conditions and performance standards.

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Chapter 6

Summary of Recommendations

1. **Purpose:** The purpose of this chapter is to list all of the recommendations proffered in the report. Some recommendations may be similar to others; however, all recommendations are included here.

2. **Recommendation for Implementation:** Director, Army Staff task out appropriate recommendations and track compliance to Department of the Army Staffs and Major Commands. The Acting Secretary of the Army submit appropriate recommendations to the Joint Staff for consideration and implementation as appropriate by units deployed in OPERATION ENDURING FREEDOM and OPERATION IRAQI FREEDOM.

3. **Chapter 3, Capture, Care, and Control of Detainees:**

a. Recommendation: CJTF-7 and CJTF-180 continue to emphasize compliance with the requirements regarding the humane treatment of detainees.

b. Recommendation: Commanders continue to stress the importance of humane treatment of detainees and continue to supervise and train Soldiers on their responsibility to treat detainees humanely and their responsibility to report abuse.

c. Recommendation: Commanders enforce the basic fundamental discipline standards of Soldiers, provide training, and immediately correct inappropriate behavior of Soldiers towards detainees to ensure the proper treatment of detainees.

d. Recommendation: Commanders assess the quality of leadership in units and replace those leaders who do not enforce discipline and hold Soldiers accountable.

e. Recommendation: TRADOC develop and implement a train-the-trainer package that strongly emphasizes leaders' responsibilities to have adequate supervision and control processes in place to ensure the proper treatment of detainees.

f. Recommendation: TRADOC integrate training into all Professional Military Education that strongly emphasizes leaders' responsibilities to have adequate supervision and control processes in place to ensure the proper treatment of detainees.

g. Recommendation: The G3 require pre-deployment training include a strong emphasis on leaders' responsibilities to have adequate supervision and control processes in place to ensure proper treatment of, and prevent abuse of, detainees.

h. Recommendation: CJTF-7 expand Camp Bucca as an internment/resettlement facility in order to transfer detainees from Camps Ganci and Vigilant, and phase out U.S. Armed Forces detainee operations at Abu Ghraib completely.

4. Chapter 4, Interrogation Operations:

a. Recommendation: TRADOC revise doctrine to address the criteria for establishing and operating collecting points to enable commanders to more effectively conduct intelligence exploitation in a non-linear battlespace.

b. Recommendation: TRADOC develop a single document for detainee operations that identifies the interdependent and independent roles of the Military Police custody mission and the Military Intelligence interrogation mission.

c. Recommendation: TRADOC establish doctrine to clearly define the organizational structures, command relationships, and roles and responsibilities of personnel operating interrogation facilities.

d. Recommendation: The Provost Marshal General revise, and the G2 establish, policy to clearly define the organizational structures, command relationships, and roles and responsibilities of personnel operating interrogation facilities.

e. Recommendation: The G3 direct the incorporation of integrated Military Police and Military Intelligence detainee operations into field training exercises, home station and mobilization site training, and combat training center rotations.

f. Recommendation: TRADOC and G2 ensure documentation of unit organizations meet interrogator personnel manning requirements, authorizations, and capabilities in order to provide commanders with timely intelligence.

g. Recommendation: The CFLCC contracting officer representative ensure enough Category II interpreters are hired to support timely intelligence exploitation of detainees.

h. Recommendation: TRADOC continue the integration of the G2X/S2X Battle Staff Course for all Military Intelligence officers assigned to G2X/S2X positions.

i. Recommendation: TRADOC integrate additional training on the collection and analysis of HUMINT into the Military Intelligence Officer Basic Course program of instruction.

j. Recommendation: TRADOC, in coordination with G2 and TJAG, revise doctrine to identify interrogation approach techniques that are acceptable, effective and legal for non-compliant detainees.

k. Recommendation: CJTF-7 and CJTF-180 ensure that standardized policy on interrogation approach techniques are received, understood, trained and enforced by all units.

5. Chapter 5, Other Observations

a. Recommendation: CFLCC, CJTF-7, and CJTF-180 continue to stress the importance of positive unit morale and command climate.

b. Recommendation: TRADOC revise doctrine for the administrative processing of detainees to improve accountability, movement, and disposition in a non-linear battlespace. And further examine processes for capturing and validating lessons learned in order to rapidly modify doctrine and incorporate into training application for Soldiers and units.

c. Recommendation: The Provost Marshal General revise policy for the administrative processing of detainees to improve accountability, movement, and disposition in a non-linear battlespace.

d. Recommendation: The Provost Marshal General, in coordination with the G2, update detainee policy to specifically address the administration, internment/resettlement, and intelligence exploitation in a non-linear battlespace, enabling commanders to better manage resources, ensure safe and secure custodial environments, and improve intelligence gathering.

e. Recommendation: TRADOC and G3 update the Military Police force structure at the division level and below to support the simultaneous execution of detainee operations and other battlefield missions.

f. Recommendation: TRADOC and G3 update the Military Intelligence force structure at the division level and below to integrate the requirement for detainee operations that allows for timely intelligence exploitation.

g. Recommendation: TRADOC update doctrine to integrate tactical interrogation at battalion and company level to assist in the intelligence exploitation of detainees immediately upon capture.

h. Recommendation: CFLCC submit a Request for Forces for the Theater Detainee Reporting Branch Center (TDRC) to meet the requirements for reporting and accountability of detainees and their property.

i. Recommendation: The Provost Marshal General review the TDRC process, structure, and employment methods for maintaining information on detainees, their property, and other related requirements within an assigned theater of operations and consider the development of an information technology solution.

j. Recommendation: TRADOC and G3 continue to refine and implement the force structure changes in the Military Intelligence - Counterintelligence/Human Intelligence Force Design Update.

k. Recommendation: TRADOC integrate the Military Intelligence-Counter Intelligence/Human Intelligence Force Design Updates into the development of Units of Action and Units of Employment.

l. Recommendation: TRADOC and G3 continue to refine and implement the force structure changes in the Military Police - Internment/Resettlement Battalion Force Design Update.

m. Recommendation: TRADOC integrate this Force Design Update into the development of Units of Action and Units of Employment.

n. Recommendation: CJTF-7 and CJTF-180 ensure all units meet the guidelines for minimum infrastructure standards supporting detainee operations to allow for adequate facilities to house detainees.

- o. Recommendation: CJTF-7 and CJTF-180 implement a safety inspection program for all facilities that support detainee operations to identify and eliminate hazards to Soldiers and detainees.
- p. Recommendation: CJTF-7 and CJTF-180 evaluate current living and working conditions at all facilities housing detainees and take corrective actions to improve the current living and working environment.
- q. Recommendation: CJTF-7 review the physical and operations security requirements and policy/doctrinal procedures to ensure units operating internment/resettlement facilities comply with all requirements.
- r. Recommendation: Force Providers require commanders to have trained and equipped field sanitation teams prior to deployment, and deployed commanders ensure field sanitation teams comply with Army policy.
- s. Recommendation: TRADOC review the preventive medicine detachment force structure to ensure support to all collecting points and internment/resettlement facilities in a non-linear battlespace.
- t. Recommendation: MEDCOM train all medical personnel in the preventive medicine aspects of detainee operations to ensure compliance with policy and the laws of land warfare.
- u. Recommendation: MEDCOM ensure all health care personnel are trained on the medical treatment requirements for detainees in accordance with Army Regulations and ensure that units have the required medical equipment and supplies for treating detainees.
- v. Recommendation: CJTF-7 and CJTF-180 evaluate current detainee medical capabilities and requirements and take corrective action to ensure detainees receive the required medical screening and care.
- w. Recommendation: CJTF-7 segregate enemy prisoners of war and civilian internees to ensure compliance with the Geneva Conventions and Army Regulations.
- x. Recommendation: TRADOC identify minimum equipment requirements for detainee operations to ensure successful unit mission accomplishment.
- y. Recommendation: TRADOC establish and identify resource requirements for a standardized "Detainee Field Processing Kit" that will enable capturing units to properly secure and process detainees quickly, efficiently, and safely.
- z. Recommendation: Commanders continue to stress the importance of planning and providing for adequate transportation assets to support continuing detainee operations.
- aa. Recommendation: TRADOC integrate standardized detainee operations training into all Army proponent school common core programs of instruction and training support packages.
- bb. Recommendation: The G3 integrate a prescribed detainee operations training program into unit training.

cc. Recommendation: CFLCC and Force Providers coordinate to ensure, where possible, units are aware of their assigned mission upon mobilization so they can train for their specific mission.

dd. Recommendation: FORSCOM integrate a standardized detainee operations training package as part of pre- and post-mobilization training.

ee. Recommendation: CFLCC ensure that ILO MP units are trained before they assume their ILO MP missions.

ff. Recommendation: The CFLCC contracting officer representative modify the CJTF-7 C2 Interrogation Cell Statement of Work to require civilian interrogators to be former military interrogators trained in current interrogation policy and doctrine or receive formal training in current military interrogation policy and doctrine.

gg. Recommendation: The G3, in coordination with the Office of the Judge Advocate General, mandate that Level B Law of War training have specific learning objectives, be conducted by an instructor/evaluator in a structured manner, and be presented and evaluated annually using the established training conditions and performance standards.

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Appendix A

References

Reference	Date	Title
AR 1-201	12 January 2004	Army Inspection Policy
AR 25-30	16 March 2004	The Army Publishing Program
AR 27-10	6 September 2002	Military Justice
AR 40-5	15 October 1990	Preventive Medicine
AR 71-32	3 March 1997	Force Development and Documentation-Consolidated Policies
AR 190-5	28 August 1992	Evidence Procedures
AR 190-8	1 October 1997	Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees
AR 190-11	12 February 1998	Physical Security of Arms, Ammunition and Explosives
AR 190-13	30 September 1993	The Army Physical Security Program
AR 190-14	12 March 1993	Carrying of Firearms and Use of Force for Law Enforcement and Security Duties
AR 190-22	1 February 1983	Searches, Seizures, and Disposition of Property
AR 190-40	30 November 1993	Serious Incident Report
AR 190-47	15 August 1996	The Army Corrections System
AR 350-1	9 April 2003	Army Training and Education
AR 381-20	15 November 1993	The Army Counterintelligence Program
AR 385-10	29 February 2000	The Army Safety Program
AR 420-70	10 October 1997	Buildings and Structures
AR 600-20	13 May 2002	Army Command Policy
AR 735-5	10 June 2002	Policies and Procedures for Property Accountability
ARTEP 19-472-MTP	2 March 2001	Mission Training Plan For The Military Police Combat Support And Internment And Resettlement Brigades And Criminal Investigation Division Groups
ARTEP 19-546-30 MTP	10 April 1999	MTP for HHC MP BN (IR)
ARTEP 19-647-30 MTP	10 April 1999	MTP for MP CO (Escort Guard)
ARTEP 19-667-30 MTP	10 April 1999	MTP for MP CO (Guard)
CENTCOM REG 27-13	7 February 1995	Captured Persons Determination of Eligibility For Enemy Prisoner of War Status
CFLCC	18 December 2001	OEF Detainee Handling Guidance
CFLCC FRAGO 254 to OPOD 03-032	111800Z April 2003	Subject is Classified Secret
CFLCC FRAGO 501 to OPOD 03-032	241500Z April 2003	Guidance for the Release and Repatriation of EPW.

CJCSI 3290.01A	15 October 2000	Program For Enemy Prisoners Of War, Retained Personnel, Civilian Internees, And Other Detained Personnel (EPW/Detainee Policy)
CJCSI 5810.01B	25 March 2002	Implementation Of The DoD Law Of War Program
CJCS Message	211933ZJan02	Subject is Classified Secret
CJTF-7 CG Memo	14 September 2003	Subject is Classified Secret
CJTF-7 CG Memo	12 October 2003	Subject is Classified Secret
CJTF-7 CG Memo	13 May 2004	Subject is Classified Secret
CJTF-7 FRAGO 209 to CJTF-7 OPOD 03-036	282021D June 2003	Subject is Classified Secret
CJTF-7 FRAGO 368to CJTF-7 OPOD 03-036	141028Z Jun03	Guidance for the Detention, Handling and Release of Individuals Who are Potentially Subject to Prosecution for War Crimes
CJTF-7 FRAGO 415 to CJTF-7 OPOD 03-036	151950DJul03	Subject is Classified Secret
CJTF-7 FRAGO 455 to CJTF-7 OPOD 03-036	200415DJul03	Classifying and Processing Enemy Prisoners of War/Detained Persons/Civilian Internees
CJTF-7 FRAGO 749 to CJTF-7 OPOD 03-036	242320DAug03	Subject is Classified Secret
CJTF-180 SJA Memo	24 January 2004	CJTF180 Interrogation Techniques
CJTF-180 DCG Memo	16 March 2004	Subject is Classified Secret
CJTF-180 DCG Memo	28 March 2004	Consolidated Detainee Operations Standard Operating Procedures
DA Form 3881	November 1989	Rights Warning Procedure/Waiver Certificate
DA Form 4237-R	August 1985	Detainee Personnel Record
DoD Directive 1325.4	1 December 2003	Confinement of Military Prisoners and Administration of Military Correctional Programs and Facilities
DoD Directive 2310.1	18 August 1994	DoD Program for Enemy Prisoners of War (EPOW) and Other Detainees (Short Title: DoD Enemy POW Detainee Program)
DoD Directive 5100.69	27 December 1972	DoD Program for Prisoners of War and Other Detainees
DoD Directive 5100.77	9 December 1998	DoD Law of War Program
DoD Directive 5210.56	24 January 2002	Use of Deadly Force and the Carrying of Firearms by DoD Personnel Engaged in Law Enforcement and Security Duties
FM 3-0	14 June 2001	Operations
FM 3-31	13 December 2001	Joint Force Land Component Commander Handbook (JFLCC)
FM 3-19.1	31 January 2002	Military Police Operations
FM 3-19.4	4 March 2002	Military Police Leaders' Handbook

FM 3-19.30	8 January 2001	Physical Security
FM 3-19.40	1 August 2001	Military Police Internment/Resettlement Operations
FM 5-34, w/ C3	10 April 2003	Engineer Field Data
FM 6-0	11 August 2003	Mission Command: Command and Control of Army Forces
FM 6-22.5	23 JUNE 2000	Combat Stress
FM 7-0	22 October 2002	Training the Force
FM 22-51	29 September 1994	Leaders' Manual For Combat Stress Control
FM 27-10, w/ C1	15 July 1976	The Law of Land Warfare
FM 27-100	1 March 2000	Legal Support to Operations
FM 34-60	3 October 1995	Counterintelligence
FM 34-52	28 September 1992	Intelligence Interrogation
FORSCOM Message	162313Z Jan 03	Subject is Classified Secret
FORSCOM/ARNG/ USAR Reg 350-2	27 October 1999	Reserve Component Training
FORSCOM Reg 500-3-1	15 April 1998	FORMDEPS, Volume I, FORSCOM Mobilization Plan (FMP)
FORSCOM Reg 500-3-3	15 July 1999	FORMDEPS Volume III, Reserve Component Unit Commander's Handbook (RCUCH)
Geneva Convention	12 August 1949	Relative to the Treatment of POWs
Geneva Convention	12 August 1949	Amelioration of the Condition of the Wounded, Sick and Shipwrecked Members of Armed Forces at Sea
Geneva Convention	12 August 1949	Amelioration of the Condition of the Wounded and Sick in the Armed Forces in the Field
Geneva Convention	12 August 1949	Protection of War Victims
Geneva Convention	12 August 1949	Relative to the Protections of Civilian Persons in Time of War
Geneva Convention	1967	Relative to the Status of Refugees
Geneva Convention	1951	Relative to the Status of Refugees
Convention Against Torture	1984	Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment
Hague Convention No. IV	18 October 1907	Respecting the Laws and Customs of War on Land
JP 1-0	19 November 1998	Doctrine for Personnel Support to Joint Operations
JP 1-02	12 April 2001 (amended through 23 March 04)	Department of Defense Dictionary of Military and Associated Terms
JP 2-01	20 November 1996	Joint Intelligence Support to Military Operations
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Joint Operations Concepts	November 2003	Joint Operations Concepts
MG Antonio Taguba, AR 15-6 Investigation	14 March 2004	AR 15-6, Investigation of the 800th MP BDE
MG Donald J. Ryder, Provost Marshal Report	6 November 2003	Assessment of Detention and Corrections Operations in Iraq
MG Geoffrey D. Miller, CDR JTF-GTMO, Guantanamo Bay, Cuba Report	9 September 2003	Assessment of DoD Counter Terrorism Interrogation and Detention Operations in Iraq
ST 2-22.7	11 April 2002	Tactical Human Intelligence and Counterintelligence Operations
STP 19-95B1-SM	6 August 2002	MOS 95B, Skill Level 1
STP 19-95C14-SM-TG	26 March 1999	MOS 95C, Skill Levels 1/2/3/4
STP 19-95C1-SM	30 September 2003	MOS 95C, Skill Level 1
STP 19-95C24-SM-TG	30 September 2003	MOS 95C, Skill Level 2/3/4
V CORPS FRAGO 006M to V CORPS OPORD 0303-343	190200Z March 2003	Procedures for Handling the Detention of Iraqis in Internment Facilities and Detention Centers
V CORPS FRAGO 312M to V CORPS OPORD FINAL VICTORY	252146D May 2003	Guidance on Tactics, Techniques, and Procedures Designed to Improve the Preservation of Evidence of Crimes Committed by Civilians Detained and Transported to Detention Facilities

APPENDIX B

**Acting Secretary of the Army
Directive for Assessment of Detainee Operations
10 February 2004**

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DEPARTMENT OF THE ARMY
WASHINGTON DC 20310-0200

February 10, 2004

MEMORANDUM FOR THE INSPECTOR GENERAL

SUBJECT: Directive for Assessment of Detainee Operations

You are hereby directed to establish an Assessment Team to complete a Functional Analysis of the Department's internment, enemy prisoner of war, and detention policies, practices, and procedures as the Army executes its role as DOD Executive Agent for Enemy Prisoners of War and Detention Program.

When conducting this assessment, the following terms of reference apply. Use all potential Doctrine, Operations, Training, Materiel, Leadership, Personnel, and Facilities (DOTMLPF) approaches to identify any capability shortfalls with respect to internment, enemy prisoner of war, detention operations, and interrogation procedures and recommend appropriate resolutions or changes if required.

The assessment will focus on the following objectives:

- a. Assess the adequacy of DOTMLPF of Army Forces for internment, enemy prisoner of war, detention operations, and interrogation procedures.
- b. Determine the standards for Army Forces charged with internment, enemy prisoner of war, detention operations and interrogation procedures (e.g., size, equipment, standardization, and training).
- c. Assess current and future organizations and structures for Army Forces responsible for internment, enemy prisoner of war, detention operations and interrogation procedures.
- d. Identify and recommend any changes in policy related to internment, enemy prisoner of war, detention operations and interrogation procedures.

You are authorized to task the Army Staff and subordinate headquarters for those resources needed to ensure accomplishment of the detainee operations assessment. You are further authorized access to locations, documents, and personnel across the Army in order to complete your assessment. Coordinate with other Services for assistance, documentation, and information that may assist in completing this assessment.

You will provide me with a report at the conclusion of the assessment.

This assessment is exempt from the HQDA Short Notice Tasking Policy Message, dated 031353Z Jan 01, requiring units to be notified 180 days from execution of tasking and the HQDA memorandum dated January 27, 2004, subject: Travel [Restriction] to Iraq, Afghanistan, Kuwait and Qatar which requires my approval to travel to these countries.

A handwritten signature in black ink, appearing to read "R. L. Brownlee". The signature is fluid and cursive, with the first name "R. L." and the last name "Brownlee" clearly distinguishable.

R. L. Brownlee
Acting Secretary of the Army

Appendix C

Locations Visited

February 2004 (CONUS)

JRTC MRX (39th Separate Brigade) (Pre-Inspection)

NTC MRX (81st Separate Brigade) (Pre-Inspection)

March 2004 (Afghanistan)

Bagram (CJTF 180 and 237th MP BN)

Khandahar (274th MP CO, 805th MP CO, and 1/10th MTN DIV)

Gheresk (ODA 312)

Khost (1/501st Parachute Infantry Regiment)

March-April 2004 (Iraq)

Baghdad (CJTF 7, Camp Cropper, Camp Slayer, 1st AD Division Collecting Point, 2/1st AD Brigade Collecting Point)

Camp Bucca (160th MP BN)

Abu Ghraib (504th MI BDE)

Ar Ramadi (1/1st ID Brigade Collecting Point)

Brassfield-Mora (2/1st ID Brigade Collecting Point)

Tikrit (1st ID Division Collecting Point)

Mosul (MND-N Collecting Point and 3/2nd ID Brigade Collecting Point, Battalion Collecting Point)

March-April 2004 (Kuwait)

Camp Doha (CFLCC)

Arifjan (2/4th ID)

March-April 2004 (CONUS)

Fort Dix (310th MP BN and 320th MP BN; at two different times)

Fort Hood (4th ID and 720th MP BN)

Fort Bragg (2/82nd ABN DIV and USASOC SERE Course)

Fort Campbell (3/101st ABN DIV)

Fort Meade (HHC 400th MP BDE)

Owings Mill, MD (433rd MP CO)

June 2004 (CONUS)

Fort Leonard Wood (MP School)

Fort Huachuca (MI School)

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Appendix E

Standards

a. Finding 1:

(1) Finding: All interviewed and observed commanders, leaders, and Soldiers treated detainees humanely and emphasized the importance of the humane treatment of detainees.

(2) Standard: Standard of treatment for detainees in OPERATION ENDURING FREEDOM (OEF): Chairman, Joint Chiefs of Staff (CJCS) message dated 211933Z JAN 02 states that members of the Taliban militia and members of Al Qaida under the control of US Forces would be treated humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949. The DAIG has therefore used the provisions of the Geneva Conventions as a benchmark against which to measure the treatment provided to detainees by U.S. Forces to determine if detainees were treated humanely. The use of these standards as benchmarks does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

The DAIG refers to 3 key documents in this report. CJCS Message dated 211933Z JAN 02, provides the determination regarding the humane treatment of Al Qaida and Taliban detainees. Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW) is the international treaty that governs the treatment of prisoners of war, and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), 12 August 1949, is the international treaty that governs the treatment of civilian persons in time of war.

As the guidance did not define "humane treatment" but did state that the US would treat members of the Taliban militia and Al Qaida in a manner consistent with the Geneva Conventions, the DAIG determined that it would use Common Article 3 of the GCs as its floor measure of humane treatment, but would also include provisions of the Geneva Convention on the Treatment of Prisoners of War (GPW) and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC) as other relevant indicia of "humane treatment." The use of this standard does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

Standard of treatment for detainees in OPERATION IRAQI FREEDOM (OIF): OIF was an international armed conflict and therefore the provisions of the Geneva Conventions applied. Additionally, the United States was an occupying power and has acted in accordance with the obligations of an occupying power described in the Hague Convention No. IV Respecting the Laws and Customs of War on Land (H.IV), 18 October 1907, including, but not limited to, Articles 43-46 and 50; Geneva Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW), Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), 12 August 1949. The GC supplements H.IV, providing the general standard of treatment at Article 27 and specific standards in subsequent Articles.

The minimum treatment provided by Common Article 3 of the Geneva Conventions is: 1) No adverse distinction based upon race, religion, sex, etc.; 2) No violence to life or person; 3) No taking hostages; 4) No degrading treatment; 5) No passing of sentences in absence of fair trial, and; 6) The wounded and sick must be cared for.

The specific language in the CJCS Message for OEF and the GPW/GC and H.IV follows:

CJCS Message dated 211933Z JAN 02, "Paragraph 3. The combatant commanders shall, in detaining Al Qaida and Taliban individuals under the control of the Department of Defense, treat them humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949."

GPW/GC, Article 3 (Common Article 3) – "In the case of armed conflict not of an international character occurring in the territory of one of the High Contracting Parties, each party to the conflict shall be bound to apply, as a minimum, the following provisions:

1. Persons taking no active part in the hostilities, including members of armed forces who have laid down their arms and those placed hors de combat by sickness, wounds, detention, or any other cause, shall in all circumstances be treated humanely, without any adverse distinction founded on race, color, religion or faith, sex, birth or wealth, or any other similar criteria.

To this end the following acts are and shall remain prohibited at any time and in any place whatsoever with respect to the above-mentioned persons:

(a) Violence to life and person, in particular murder of all kinds, mutilation, cruel treatment and torture;

(b) Taking of hostages;

(c) Outrages upon personal dignity, in particular, humiliating and degrading treatment;

(d) The passing of sentences and the carrying out of executions without previous judgment pronounced by a regularly constituted court affording all the judicial guarantees which are recognized as indispensable by civilized peoples.

2. The wounded and sick shall be collected and cared for. An impartial humanitarian body, such as the International Committee of the Red Cross, may offer its services to the Parties to the conflict. The Parties to the conflict should further endeavour to bring into force, by means of special agreements, all or part of the other provisions of the present Convention. The application of the preceding provisions shall not affect the legal status of the Parties to the conflict."

H.IV, Article 43 – "The authority of the legitimate power having in fact passed into the hands of the occupant, the latter shall take all the measures in his power to restore, and ensure, as far as possible, public order and safety, while respecting, unless absolutely prevented, the laws in force in the country.

H.IV, Article 44 – A belligerent is forbidden to force the inhabitants of territory occupied by it to furnish information about the army of the other belligerent, or about its means of defense.

H.IV, Article 45 – It is forbidden to compel the inhabitants of occupied territory to swear allegiance to the hostile Power.

H.IV, Article 46 – Family honour and rights, the lives of persons, and private property, as well as religious convictions and practice, must be respected. Private property cannot be confiscated.

H.IV, Article 47 – Pillage is formally forbidden."

H.IV, Article 50 – "No general penalty, pecuniary or otherwise, shall be inflicted upon the population on account of the acts of individuals for which they cannot be regarded as jointly and severally responsible."

GPW, Article 13 – "Prisoners of war must at all times be humanely treated. Any unlawful act or omission by the Detaining Power causing death or seriously endangering the health of a prisoner of war in its custody is prohibited, and will be regarded as a serious breach of the present Convention. In particular, no prisoner of war may be subjected to physical mutilation or to medical or scientific experiments of any kind which are not justified by the medical, dental or hospital treatment of the prisoner concerned and carried out in his interest. Likewise, prisoners of war must at all times be protected, particularly against acts of violence or intimidation and against insults and public curiosity.

GPW, Article 14 – Prisoners of war are entitled in all circumstances to respect for their persons and their honour. Women shall be treated with all the regard due to their sex and shall in all cases benefit by treatment as favourable as that granted to men. Prisoners of war shall retain the full civil capacity which they enjoyed at the time of their capture. The Detaining Power may not restrict the exercise, either within or without its own territory, of the rights such capacity confers except in so far as the captivity requires.

GPW, Article 15 – The Power detaining prisoners of war shall be bound to provide free of charge for their maintenance and for the medical attention required by their state of health.

GPW, Article 16 – Taking into consideration the provisions of the present Convention relating to rank and sex, and subject to any privileged treatment which may be accorded to them by reason of their state of health, age or professional qualifications, all prisoners of war shall be treated alike by the Detaining Power, without any adverse distinction based on race, nationality, religious belief or political opinions, or any other distinction founded on similar criteria."

GPW, Article 39 – "Every prisoner of war camp shall be put under the immediate authority of a responsible commissioned officer belonging to the regular armed forces of the Detaining Power. Such officer shall have in his possession a copy of the present Convention; he shall ensure that its provisions are known to the camp staff and the guard and shall be responsible, under the direction of his government, for its application. Prisoners of war, with the exception of officers, must salute and show to all officers of the Detaining Power the external marks of respect provided for by the regulations applying in their own forces. Officer prisoners of war are bound to salute only officers of a higher rank of the Detaining Power; they must, however, salute the camp commander regardless of his rank."

GPW, Article 41 – "In every camp the text of the present Convention and its Annexes and the contents of any special agreement provided for in Article 6, shall be posted, in the prisoners' own language, at places where all may read them. Copies shall be supplied, on request, to the prisoners who cannot have access to the copy which has been posted. Regulations, orders, notices and publications of every kind relating to the conduct of prisoners of war shall be issued to them in a language which they understand. Such regulations, orders and publications shall be posted in the manner described above and copies shall be handed to

the prisoners' representative. Every order and command addressed to prisoners of war individually must likewise be given in a language which they understand."

GC, Article 27 – "Protected persons are entitled, in all circumstances, to respect for their persons, their honour, their family rights, their religious convictions and practices, and their manners and customs. They shall at all times be humanely treated, and shall be protected especially against all acts of violence or threats thereof and against insults and public curiosity. Women shall be especially protected against any attack on their honour, in particular against rape, enforced prostitution, or any form of indecent assault. Without prejudice to the provisions relating to their state of health, age and sex, all protected persons shall be treated with the same consideration by the Party to the conflict in whose power they are, without any adverse distinction based, in particular, on race, religion or political opinion. However, the Parties to the conflict may take such measures of control and security in regard to protected persons as may be necessary as a result of the war."

GC, Article 31 – "No physical or moral coercion shall be exercised against protected persons, in particular to obtain information from them or from third parties."

GC, Article 32 – The High Contracting Parties specifically agree that each of them is prohibited from taking any measure of such a character as to cause the physical suffering or extermination of protected persons in their hands. This prohibition applies not only to murder, torture, corporal punishments, mutilation and medical or scientific experiments not necessitated by the medical treatment of a protected person, but also to any other measures of brutality whether applied by civilian or military agents."

GC, Article 37 – "Protected persons who are confined pending proceedings or subject to a sentence involving loss of liberty, shall during their confinement be humanely treated."

GC, Article 41 – "Should the Power, in whose hands protected persons may be, consider the measures of control mentioned in the present Convention to be inadequate, it may not have recourse to any other measure of control more severe than that of assigned residence or internment, in accordance with the provisions of Articles 42 and 43. In applying the provisions of Article 39, second paragraph, to the cases of persons required to leave their usual places of residence by virtue of a decision placing them in assigned residence, by virtue of a decision placing them in assigned residence, elsewhere, the Detaining Power shall be guided as closely as possible by the standards of welfare set forth in Part III, Section IV of this Convention."

GC, Article 42 – The internment or placing in assigned residence of protected persons may be ordered only if the security of the Detaining Power makes it absolutely necessary. If any person, acting through the representatives of the Protecting Power, voluntarily demands internment, and if his situation renders this step necessary, he shall be interned by the Power in whose hands he may be."

GC, Article 43 – Any protected person who has been interned or placed in assigned residence shall be entitled to have such action reconsidered as soon as possible by an appropriate court or administrative board designated by the Detaining Power for that purpose. If the internment or placing in assigned residence is maintained, the court or administrative board shall periodically, and at least twice yearly, give consideration to his or her case, with a view to the favorable amendment of the initial decision, if circumstances permit. Unless the protected persons concerned object, the Detaining Power shall, as rapidly as possible, give the Protecting Power the names of any protected persons who have been interned or subjected to assigned residence."

residence, or who have been released from internment or assigned residence. The decisions of the courts or boards mentioned in the first paragraph of the present Article shall also, subject to the same conditions, be notified as rapidly as possible to the Protecting Power."

GC, Article 68 – "Protected persons who commit an offence which is solely intended to harm the Occupying Power, but which does not constitute an attempt on the life or limb of members of the occupying forces or administration, nor a grave collective danger, nor seriously damage the property of the occupying forces or administration or the installations used by them, shall be liable to internment or simple imprisonment, provided the duration of such internment or imprisonment is proportionate to the offence committed. Furthermore, internment or imprisonment shall, for such offences, be the only measure adopted for depriving protected persons of liberty. The courts provided for under Article 66 of the present Convention may at their discretion convert a sentence of imprisonment to one of internment for the same period.

The penal provisions promulgated by the Occupying Power in accordance with Articles 64 and 65 may impose the death penalty on a protected person only in cases where the person is guilty of espionage, of serious acts of sabotage against the military installations of the Occupying Power or of intentional offences which have caused the death of one or more persons, provided that such offences were punishable by death under the law of the occupied territory in force before the occupation began.

The death penalty may not be pronounced on a protected person unless the attention of the court has been particularly called to the fact that since the accused is not a national of the Occupying Power, he is not bound to it by any duty of allegiance.

In any case, the death penalty may not be pronounced on a protected person who was under eighteen years of age at the time of the offence."

GC, Article 78 – "If the Occupying Power considers it necessary, for imperative reasons of security, to take safety measures concerning protected persons, it may, at the most, subject them to assigned residence or to internment. Decisions regarding such assigned residence or internment shall be made according to a regular procedure to be prescribed by the Occupying Power in accordance with the provisions of the present Convention. This procedure shall include the right of appeal for the parties concerned. Appeals shall be decided with the least possible delay. In the event of the decision being upheld, it shall be subject to periodical review, if possible every six months, by a competent body set up by the said Power. Protected persons made subject to assigned residence and thus required to leave their homes shall enjoy the full benefit of Article 39 of the present Convention.

GC, Article 79 – The Parties to the conflict shall not intern protected persons, except in accordance with the provisions of Articles 41, 42, 43, 68 and 78.

GC, Article 80 – Internees shall retain their full civil capacity and shall exercise such attendant rights as may be compatible with their status."

GC, Article 82 – "The Detaining Power shall, as far as possible, accommodate the internees according to their nationality, language and customs. Internees who are nationals of the same country shall not be separated merely because they have different languages. Throughout the duration of their internment, members of the same family, and in particular parents and children, shall be lodged together in the same place of internment, except when separation of a temporary nature is necessitated for reasons of employment or health or for the

purposes of enforcement of the provisions of Chapter IX of the present Section. Internees may request that their children who are left at liberty without parental care shall be interned with them. Wherever possible, interned members of the same family shall be housed in the same premises and given separate accommodation from other internees, together with facilities for leading a proper family life.

GC, Article 83 – The Detaining Power shall not set up places of internment in areas particularly exposed to the dangers of war. The Detaining Power shall give the enemy Powers, through the intermediary of the Protecting Powers, all useful information regarding the geographical location of places of internment. Whenever military considerations permit, internment camps shall be indicated by the letters IC, placed so as to be clearly visible in the daytime from the air. The Powers concerned may, however, agree upon any other system of marking. No place other than an internment camp shall be marked as such.

GC, Article 84 – Internees shall be accommodated and administered separately from prisoners of war and from persons deprived of liberty for any other reason.

GC, Article 85 – The Detaining Power is bound to take all necessary and possible measures to ensure that protected persons shall, from the outset of their internment, be accommodated in buildings or quarters which afford every possible safeguard as regards hygiene and health, and provide efficient protection against the rigours of the climate and the effects of the war. In no case shall permanent places of internment be situated in unhealthy areas or in districts, the climate of which is injurious to the internees. In all cases where the district, in which a protected person is temporarily interned, is an unhealthy area or has a climate which is harmful to his health, he shall be removed to a more suitable place of internment as rapidly as circumstances permit. The premises shall be fully protected from dampness, adequately heated and lighted, in particular between dusk and lights out. The sleeping quarters shall be sufficiently spacious and well ventilated, and the internees shall have suitable bedding and sufficient blankets, account being taken of the climate, and the age, sex, and state of health of the internees. Internees shall have for their use, day and night, sanitary conveniences which conform to the rules of hygiene, and are constantly maintained in a state of cleanliness. They shall be provided with sufficient water and soap for their daily personal toilet and for washing their personal laundry; installations and facilities necessary for this purpose shall be granted to them. Showers or baths shall also be available. The necessary time shall be set aside for washing and for cleaning. Whenever it is necessary, as an exceptional and temporary measure, to accommodate women internees who are not members of a family unit in the same place of internment as men, the provision of separate sleeping quarters and sanitary conveniences for the use of such women internees shall be obligatory.

GC, Article 86 – The Detaining Power shall place at the disposal of interned persons, of whatever denomination, premises suitable for the holding of their religious services."

GC, Article 88 – "In all places of internment exposed to air raids and other hazards of war, shelters adequate in number and structure to ensure the necessary protection shall be installed. In case of alarms, the measures internees shall be free to enter such shelters as quickly as possible, excepting those who remain for the protection of their quarters against the aforesaid hazards. Any protective measures taken in favour of the population shall also apply to them. All due precautions must be taken in places of internment against the danger of fire.

GC, Article 89 – Daily food rations for internees shall be sufficient in quantity, quality and variety to keep internees in a good state of health and prevent the development of nutritional

deficiencies. Account shall also be taken of the customary diet of the internees. Internees shall also be given the means by which they can prepare for themselves any additional food in their possession. Sufficient drinking water shall be supplied to internees. The use of tobacco shall be permitted. Internees who work shall receive additional rations in proportion to the kind of labour which they perform. Expectant and nursing mothers and children under fifteen years of age, shall be given additional food, in proportion to their physiological needs.

GC, Article 90 – When taken into custody, internees shall be given all facilities to provide themselves with the necessary clothing, footwear and change of underwear, and later on, to procure further supplies if required. Should any internees not have sufficient clothing, account being taken of the climate, and be unable to procure any, it shall be provided free of charge to them by the Detaining Power. The clothing supplied by the Detaining Power to internees and the outward markings placed on their own clothes shall not be ignominious nor expose them to ridicule. Workers shall receive suitable working outfits, including protective clothing, whenever the nature of their work so requires."

GC, Article 93 – "Internees shall enjoy complete latitude in the exercise of their religious duties, including attendance at the services of their faith, on condition that they comply with the disciplinary routine prescribed by the detaining authorities."

GC, Article 97 – "Internees shall be permitted to retain articles of personal use. Monies, cheques, bonds, etc., and valuables in their possession may not be taken from them except in accordance with established procedure. Detailed receipts shall be given therefor. The amounts shall be paid into the account of every internee as provided for in Article 98. Such amounts may not be converted into any other currency unless legislation in force in the territory in which the owner is interned so requires or the internee gives his consent. Articles which have above all a personal or sentimental value may not be taken away. A woman internee shall not be searched except by a woman. On release or repatriation, internees shall be given all articles, monies or other valuables taken from them during internment and shall receive in currency the balance of any credit to their accounts kept in accordance with Article 98, with the exception of any articles or amounts withheld by the Detaining Power by virtue of its legislation in force. If the property of an internee is so withheld, the owner shall receive a detailed receipt. Family or identity documents in the possession of internees may not be taken away without a receipt being given. At no time shall internees be left without identity documents. If they have none, they shall be issued with special documents drawn up by the detaining authorities, which will serve as their identity papers until the end of their internment. Internees may keep on their persons a certain amount of money, in cash or in the shape of purchase coupons, to enable them to make purchases."

GC, Article 99 – "Every place of internment shall be put under the authority of a responsible officer, chosen from the regular military forces or the regular civil administration of the Detaining Power. The officer in charge of the place of internment must have in his possession a copy of the present Convention in the official language, or one of the official languages, of his country and shall be responsible for its application. The staff in control of internees shall be instructed in the provisions of the present Convention and of the administrative measures adopted to ensure its application. The text of the present Convention and the texts of special agreements concluded under the said Convention shall be posted inside the place of internment, in a language which the internees understand, or shall be in the possession of the Internee Committee. Regulations, orders, notices and publications of every kind shall be communicated to the internees and posted inside the places of internment in a

language which they understand. Every order and command addressed to internees individually must, likewise, be given in a language which they understand."

GC, Article 100 – "The disciplinary regime in places of internment shall be consistent with humanitarian principles, and shall in no circumstances include regulations imposing on internees any physical exertion dangerous to their health or involving physical or moral victimization. Identification by tattooing or imprinting signs or markings on the body, is prohibited. In particular, prolonged standing and roll-calls, punishment drill, military drill and manoeuvres, or the reduction of food rations, are prohibited."

Army Regulation 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Chapter 1, paragraph 1-1, subparagraphs a and b. This regulation is a multi-service regulation implementing DOD Directive 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304 and outlines policies, procedures, and responsibilities for treatment of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI), and other detainees (OD) and implements international law for all military operations. The specific language in the regulation follows:

"1-1. Purpose

a. This regulation provides policy, procedures, and responsibilities for the administration, treatment, employment, and compensation of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI) and other detainees (OD) in the custody of U.S. Armed Forces. This regulation also establishes procedures for transfer of custody from the United States to another detaining power.

b. This regulation implements international law, both customary and codified, relating to EPW, RP, CI, and ODs which includes those persons held during military operations other than war."

b. Finding 2:

(1) Finding: In the cases the DAIG reviewed, all detainee abuse occurred when one or more individuals failed to adhere to basic standards of discipline, training, or Army Values; in some cases abuse was accompanied by leadership failure at the tactical level.

(2) Standard: Standard of treatment for detainees in OPERATION ENDURING FREEDOM (OEF): Guidance was provided stating that members of the Taliban militia and members of Al Qaida under the control of U.S. Forces would be treated humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949. The DAIG has therefore used the provisions of the Geneva Conventions as a benchmark against which to measure the treatment provided to detainees by U.S. Forces to determine if detainees were treated humanely. The use of these standards as benchmarks does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

Chairman, Joint Chiefs of Staff (CJCS) Message dated 211933Z JAN 02, provides the determination regarding the humane treatment of Al Qaida and Taliban detainees. Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW) is the international treaty that governs the treatment of prisoners of war), and Geneva Convention Relative to the

Protection of Civilian Persons in Time of War (GC), August 12, 1949 is the international treaty that governs the treatment of civilian persons in time of war.

As the guidance did not define "humane treatment" but did state that the U.S. would treat members of the Taliban militia and Al Qaida in a manner consistent with the Geneva Conventions, the DAIG determined that it would use Common Article 3 of the GCs as its floor measure of humane treatment, but would also include provisions of the Geneva Convention on the Treatment of Prisoners of War (GPW) and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC) as other relevant indicia of "humane treatment." The use of this standard does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

Standard of treatment for detainees in OPERATION IRAQI FREEDOM (OIF): OIF was an international armed conflict and therefore the provisions of the Geneva Conventions applied. Additionally, the United States was an occupying power and has acted in accordance with the obligations of an occupying power described in the Hague Convention No. IV Respecting the Laws and Customs of War on Land (H.IV), Oct. 18, 1907, including, but not limited to, Articles 43-46 and 50; Geneva Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW); and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), August 12, 1949. The GC supplements H.IV, providing the general standard of treatment at Article 27 and specific standards in subsequent Articles.

The minimum treatment provided by Common Article 3 of the Geneva Conventions is:
(1) No adverse distinction based upon race, religion, sex, etc.; (2) No violence to life or person;
(3) No taking hostages; (4) No degrading treatment; (5) No passing of sentences in absence of fair trial, and; (6) The wounded and sick must be cared for.

The specific language in the CJCS Message for OEF and the GPW/GC and H.IV follows:

CJCS Message dated 211933Z JAN 02, "Paragraph 3. The combatant commanders shall, in detaining Al Qaida and Taliban individuals under the control of the Department of Defense, treat them humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949."

GPW/GC, Article 3 (Common Article 3) – "In the case of armed conflict not of an international character occurring in the territory of one of the High Contracting Parties, each party to the conflict shall be bound to apply, as a minimum, the following provisions:

1. Persons taking no active part in the hostilities, including members of armed forces who have laid down their arms and those placed hors de combat by sickness, wounds, detention, or any other cause, shall in all circumstances be treated humanely, without any adverse distinction founded on race, color, religion or faith, sex, birth or wealth, or any other similar criteria.

To this end the following acts are and shall remain prohibited at any time and in any place whatsoever with respect to the above-mentioned persons:

- (a) Violence to life and person, in particular murder of all kinds, mutilation, cruel treatment and torture;
- (b) Taking of hostages;

(c) Outrages upon personal dignity, in particular, humiliating and degrading treatment;
(d) The passing of sentences and the carrying out of executions without previous judgment pronounced by a regularly constituted court affording all the judicial guarantees which are recognized as indispensable by civilized peoples.

2. The wounded and sick shall be collected and cared for. An impartial humanitarian body, such as the International Committee of the Red Cross, may offer its services to the Parties to the conflict. The Parties to the conflict should further endeavour to bring into force, by means of special agreements, all or part of the other provisions of the present Convention. The application of the preceding provisions shall not affect the legal status of the Parties to the conflict."

GPW, Article 13 – "Prisoners of war must at all times be humanely treated. Any unlawful act or omission by the Detaining Power causing death or seriously endangering the health of a prisoner of war in its custody is prohibited, and will be regarded as a serious breach of the present Convention. In particular, no prisoner of war may be subjected to physical mutilation or to medical or scientific experiments of any kind which are not justified by the medical, dental or hospital treatment of the prisoner concerned and carried out in his interest. Likewise, prisoners of war must at all times be protected, particularly against acts of violence or intimidation and against insults and public curiosity."

GPW, Article 14 – Prisoners of war are entitled in all circumstances to respect for their persons and their honour. Women shall be treated with all the regard due to their sex and shall in all cases benefit by treatment as favourable as that granted to men. Prisoners of war shall retain the full civil capacity which they enjoyed at the time of their capture. The Detaining Power may not restrict the exercise, either within or without its own territory, of the rights such capacity confers except in so far as the captivity requires.

GPW, Article 15 – The Power detaining prisoners of war shall be bound to provide free of charge for their maintenance and for the medical attention required by their state of health.

GPW, Article 16 – Taking into consideration the provisions of the present Convention relating to rank and sex, and subject to any privileged treatment which may be accorded to them by reason of their state of health, age or professional qualifications, all prisoners of war shall be treated alike by the Detaining Power, without any adverse distinction based on race, nationality, religious belief or political opinions, or any other distinction founded on similar criteria."

GPW, Article 39 – "Every prisoner of war camp shall be put under the immediate authority of a responsible commissioned officer belonging to the regular armed forces of the Detaining Power. Such officer shall have in his possession a copy of the present Convention; he shall ensure that its provisions are known to the camp staff and the guard and shall be responsible, under the direction of his government, for its application. Prisoners of war, with the exception of officers, must salute and show to all officers of the Detaining Power the external marks of respect provided for by the regulations applying in their own forces. Officer prisoners of war are bound to salute only officers of a higher rank of the Detaining Power; they must, however, salute the camp commander regardless of his rank."

GPW, Article 41 – "In every camp the text of the present Convention and its Annexes and the contents of any special agreement provided for in Article 6, shall be posted, in the prisoners' own language, at places where all may read them. Copies shall be supplied, on request, to the prisoners who cannot have access to the copy which has been posted.

Regulations, orders, notices and publications of every kind relating to the conduct of prisoners of war shall be issued to them in a language which they understand. Such regulations, orders and publications shall be posted in the manner described above and copies shall be handed to the prisoners' representative. Every order and command addressed to prisoners of war individually must likewise be given in a language which they understand."

GC, Article 27 – "Protected persons are entitled, in all circumstances, to respect for their persons, their honour, their family rights, their religious convictions and practices, and their manners and customs. They shall at all times be humanely treated, and shall be protected especially against all acts of violence or threats thereof and against insults and public curiosity. Women shall be especially protected against any attack on their honour, in particular against rape, enforced prostitution, or any form of indecent assault. Without prejudice to the provisions relating to their state of health, age and sex, all protected persons shall be treated with the same consideration by the Party to the conflict in whose power they are, without any adverse distinction based, in particular, on race, religion or political opinion. However, the Parties to the conflict may take such measures of control and security in regard to protected persons as may be necessary as a result of the war."

GC, Article 31 – "No physical or moral coercion shall be exercised against protected persons, in particular to obtain information from them or from third parties."

GC, Article 32 – "The High Contracting Parties specifically agree that each of them is prohibited from taking any measure of such a character as to cause the physical suffering or extermination of protected persons in their hands. This prohibition applies not only to murder, torture, corporal punishments, mutilation and medical or scientific experiments not necessitated by the medical treatment of a protected person, but also to any other measures of brutality whether applied by civilian or military agents."

GC, Article 37 – "Protected persons who are confined pending proceedings or subject to a sentence involving loss of liberty, shall during their confinement be humanely treated."

GC, Article 41 – "Should the Power, in whose hands protected persons may be, consider the measures of control mentioned in the present Convention to be inadequate, it may not have recourse to any other measure of control more severe than that of assigned residence or internment, in accordance with the provisions of Articles 42 and 43. In applying the provisions of Article 39, second paragraph, to the cases of persons required to leave their usual places of residence by virtue of a decision placing them in assigned residence, by virtue of a decision placing them in assigned residence, elsewhere, the Detaining Power shall be guided as closely as possible by the standards of welfare set forth in Part III, Section IV of this Convention."

GC, Article 42 – "The internment or placing in assigned residence of protected persons may be ordered only if the security of the Detaining Power makes it absolutely necessary. If any person, acting through the representatives of the Protecting Power, voluntarily demands internment, and if his situation renders this step necessary, he shall be interned by the Power in whose hands he may be."

GC, Article 43 – "Any protected person who has been interned or placed in assigned residence shall be entitled to have such action reconsidered as soon as possible by an appropriate court or administrative board designated by the Detaining Power for that purpose. If the internment or placing in assigned residence is maintained, the court or administrative board shall periodically, and at least twice yearly, give consideration to his or her case, with a view to

the favorable amendment of the initial decision, if circumstances permit. Unless the protected persons concerned object, the Detaining Power shall, as rapidly as possible, give the Protecting Power the names of any protected persons who have been interned or subjected to assigned residence, or who have been released from internment or assigned residence. The decisions of the courts or boards mentioned in the first paragraph of the present Article shall also, subject to the same conditions, be notified as rapidly as possible to the Protecting Power."

GC, Article 68 – "Protected persons who commit an offence which is solely intended to harm the Occupying Power, but which does not constitute an attempt on the life or limb of members of the occupying forces or administration, nor a grave collective danger, nor seriously damage the property of the occupying forces or administration or the installations used by them, shall be liable to internment or simple imprisonment, provided the duration of such internment or imprisonment is proportionate to the offence committed. Furthermore, internment or imprisonment shall, for such offences, be the only measure adopted for depriving protected persons of liberty. The courts provided for under Article 66 of the present Convention may at their discretion convert a sentence of imprisonment to one of internment for the same period.

The penal provisions promulgated by the Occupying Power in accordance with Articles 64 and 65 may impose the death penalty on a protected person only in cases where the person is guilty of espionage, of serious acts of sabotage against the military installations of the Occupying Power or of intentional offences which have caused the death of one or more persons, provided that such offences were punishable by death under the law of the occupied territory in force before the occupation began.

The death penalty may not be pronounced on a protected person unless the attention of the court has been particularly called to the fact that since the accused is not a national of the Occupying Power, he is not bound to it by any duty of allegiance.

In any case, the death penalty may not be pronounced on a protected person who was under eighteen years of age at the time of the offence."

GC, Article 78 – "If the Occupying Power considers it necessary, for imperative reasons of security, to take safety measures concerning protected persons, it may, at the most, subject them to assigned residence or to internment. Decisions regarding such assigned residence or internment shall be made according to a regular procedure to be prescribed by the Occupying Power in accordance with the provisions of the present Convention. This procedure shall include the right of appeal for the parties concerned. Appeals shall be decided with the least possible delay. In the event of the decision being upheld, it shall be subject to periodical review, if possible every six months, by a competent body set up by the said Power. Protected persons made subject to assigned residence and thus required to leave their homes shall enjoy the full benefit of Article 39 of the present Convention.

GC, Article 79 – The Parties to the conflict shall not intern protected persons, except in accordance with the provisions of Articles 41, 42, 43, 68 and 78.

GC, Article 80 – Internees shall retain their full civil capacity and shall exercise such attendant rights as may be compatible with their status."

GC, Article 82 – "The Detaining Power shall, as far as possible, accommodate the internees according to their nationality, language and customs. Internees who are nationals of the same country shall not be separated merely because they have different languages.

Throughout the duration of their internment, members of the same family, and in particular parents and children, shall be lodged together in the same place of internment, except when separation of a temporary nature is necessitated for reasons of employment or health or for the purposes of enforcement of the provisions of Chapter IX of the present Section. Internees may request that their children who are left at liberty without parental care shall be interned with them. Wherever possible, interned members of the same family shall be housed in the same premises and given separate accommodation from other internees, together with facilities for leading a proper family life.

GC, Article 83 – The Detaining Power shall not set up places of internment in areas particularly exposed to the dangers of war. The Detaining Power shall give the enemy Powers, through the intermediary of the Protecting Powers, all useful information regarding the geographical location of places of internment. Whenever military considerations permit, internment camps shall be indicated by the letters IC, placed so as to be clearly visible in the daytime from the air. The Powers concerned may, however, agree upon any other system of marking. No place other than an internment camp shall be marked as such.

GC, Article 84 – Internees shall be accommodated and administered separately from prisoners of war and from persons deprived of liberty for any other reason.

GC, Article 85 – The Detaining Power is bound to take all necessary and possible measures to ensure that protected persons shall, from the outset of their internment, be accommodated in buildings or quarters which afford every possible safeguard as regards hygiene and health, and provide efficient protection against the rigours of the climate and the effects of the war. In no case shall permanent places of internment be situated in unhealthy areas or in districts, the climate of which is injurious to the internees. In all cases where the district, in which a protected person is temporarily interned, is an unhealthy area or has a climate which is harmful to his health, he shall be removed to a more suitable place of internment as rapidly as circumstances permit. The premises shall be fully protected from dampness, adequately heated and lighted, in particular between dusk and lights out. The sleeping quarters shall be sufficiently spacious and well ventilated, and the internees shall have suitable bedding and sufficient blankets, account being taken of the climate, and the age, sex, and state of health of the internees. Internees shall have for their use, day and night, sanitary conveniences which conform to the rules of hygiene, and are constantly maintained in a state of cleanliness. They shall be provided with sufficient water and soap for their daily personal toilet and for washing their personal laundry; installations and facilities necessary for this purpose shall be granted to them. Showers or baths shall also be available. The necessary time shall be set aside for washing and for cleaning. Whenever it is necessary, as an exceptional and temporary measure, to accommodate women internees who are not members of a family unit in the same place of internment as men, the provision of separate sleeping quarters and sanitary conveniences for the use of such women internees shall be obligatory.

GC, Article 86 – The Detaining Power shall place at the disposal of interned persons, of whatever denomination, premises suitable for the holding of their religious services."

GC, Article 88 – "In all places of internment exposed to air raids and other hazards of war, shelters adequate in number and structure to ensure the necessary protection shall be installed. In case of alarms, the measures internees shall be free to enter such shelters as quickly as possible, excepting those who remain for the protection of their quarters against the aforesaid hazards. Any protective measures taken in favour of the population shall also apply to them. All due precautions must be taken in places of internment against the danger of fire.

GC, Article 89 – Daily food rations for internees shall be sufficient in quantity, quality and variety to keep internees in a good state of health and prevent the development of nutritional deficiencies. Account shall also be taken of the customary diet of the internees. Internees shall also be given the means by which they can prepare for themselves any additional food in their possession. Sufficient drinking water shall be supplied to internees. The use of tobacco shall be permitted. Internees who work shall receive additional rations in proportion to the kind of labour which they perform. Expectant and nursing mothers and children under fifteen years of age, shall be given additional food, in proportion to their physiological needs.

GC, Article 90 – When taken into custody, internees shall be given all facilities to provide themselves with the necessary clothing, footwear and change of underwear, and later on, to procure further supplies if required. Should any internees not have sufficient clothing, account being taken of the climate, and be unable to procure any, it shall be provided free of charge to them by the Detaining Power. The clothing supplied by the Detaining Power to internees and the outward markings placed on their own clothes shall not be ignominious nor expose them to ridicule. Workers shall receive suitable working outfits, including protective clothing, whenever the nature of their work so requires."

GC, Article 93 – "Internees shall enjoy complete latitude in the exercise of their religious duties, including attendance at the services of their faith, on condition that they comply with the disciplinary routine prescribed by the detaining authorities."

GC, Article 97 – "Internees shall be permitted to retain articles of personal use. Monies, cheques, bonds, etc., and valuables in their possession may not be taken from them except in accordance with established procedure. Detailed receipts shall be given therefor. The amounts shall be paid into the account of every internee as provided for in Article 98. Such amounts may not be converted into any other currency unless legislation in force in the territory in which the owner is interned so requires or the internee gives his consent. Articles which have above all a personal or sentimental value may not be taken away. A woman internee shall not be searched except by a woman. On release or repatriation, internees shall be given all articles, monies or other valuables taken from them during internment and shall receive in currency the balance of any credit to their accounts kept in accordance with Article 98, with the exception of any articles or amounts withheld by the Detaining Power by virtue of its legislation in force. If the property of an internee is so withheld, the owner shall receive a detailed receipt. Family or identity documents in the possession of internees may not be taken away without a receipt being given. At no time shall internees be left without identity documents. If they have none, they shall be issued with special documents drawn up by the detaining authorities, which will serve as their identity papers until the end of their internment. Internees may keep on their persons a certain amount of money, in cash or in the shape of purchase coupons, to enable them to make purchases."

GC, Article 99 – "Every place of internment shall be put under the authority of a responsible officer, chosen from the regular military forces or the regular civil administration of the Detaining Power. The officer in charge of the place of internment must have in his possession a copy of the present Convention in the official language, or one of the official languages, of his country and shall be responsible for its application. The staff in control of internees shall be instructed in the provisions of the present Convention and of the administrative measures adopted to ensure its application. The text of the present Convention and the texts of special agreements concluded under the said Convention shall be posted inside the place of internment, in a language which the internees understand, or shall be in the

possession of the Internee Committee. Regulations, orders, notices and publications of every kind shall be communicated to the internees and posted inside the places of internment in a language which they understand. Every order and command addressed to internees individually must, likewise, be given in a language which they understand."

GC, Article 100 – "The disciplinary regime in places of internment shall be consistent with humanitarian principles, and shall in no circumstances include regulations imposing on internees any physical exertion dangerous to their health or involving physical or moral victimization. Identification by tattooing or imprinting signs or markings on the body, is prohibited. In particular, prolonged standing and roll-calls, punishment drill, military drill and manoeuvres, or the reduction of food rations, are prohibited."

H.IV, Article 43 – "The authority of the legitimate power having in fact passed into the hands of the occupant, the latter shall take all the measures in his power to restore, and ensure, as far as possible, public order and safety, while respecting, unless absolutely prevented, the laws in force in the country.

H.IV, Article 44 – A belligerent is forbidden to force the inhabitants of territory occupied by it to furnish information about the army of the other belligerent, or about its means of defense.

H.IV, Article 45 – It is forbidden to compel the inhabitants of occupied territory to swear allegiance to the hostile Power.

H.IV, Article 46 – Family honour and rights, the lives of persons, and private property, as well as religious convictions and practice, must be respected. Private property cannot be confiscated.

H.IV, Article 47 – Pillage is formally forbidden."

H.IV, Article 50 – "No general penalty, pecuniary or otherwise, shall be inflicted upon the population on account of the acts of individuals for which they cannot be regarded as jointly and severally responsible."

Army Regulation (AR) 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Chapter 1, paragraphs 1-5, subparagraphs a, b, and c; paragraph 2-1, subparagraph a (1)(d); and paragraph 5-1, subparagraph (6), provides instruction on the overall treatment of detainees. This regulation is a multi-service regulation implementing DOD Directive 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304 and outlines policies, procedures, and responsibilities for treatment of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI), and other detainees (OD) and implements international law for all military operations. The specific language in the regulation follows:

"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."

"(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 is to be protected from all threats or acts of violence."

"2-1. a. (1) (d) Prisoners may be interrogated in the combat zone. The use of physical or mental torture or any coercion to compel prisoners to provide information is prohibited.... Prisoners may not be threatened, insulted, or exposed to unpleasant or disparate treatment of any kind because of their refusal to answer questions."

"5-1 (6) The following acts are specifically prohibited:

(a) Any measures of such character as to cause the physical suffering or extermination of the CI. This prohibition applies not only to murder, torture, corporal punishment, mutilation, and medical or scientific experiments, but also to any other measure of brutality.

(b) Punishment of the CI for an offense they did not personally commit.

(c) Collective penalties and all measures of intimidation and terrorism against the CI.

(d) Reprisals against the CI and their property.

(e) The taking and holding of the CI as hostages."

AR 600–20, Army Command Policy, Chapter 1, paragraph 1-5, subparagraph c (1), and (4), prescribes the policies and responsibilities of command. The specific language in the regulation follows:

"c. Characteristics of command leadership.

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. Commanders are also responsible for the professional development of their soldiers. To this end, they encourage self-study, professional development, and continued growth of their subordinates' military careers.

(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."

"(4) Professionally competent leaders will develop respect for their authority by-

(a) Striving to develop, maintain, and use the full range of human potential in their organization. This potential is a critical factor in ensuring that the organization is capable of accomplishing its mission.

(b) Giving troops constructive information on the need for and purpose of military discipline. Articles in the UCMJ which require explanation will be presented in such a way to ensure that soldiers are fully aware of the controls and obligations imposed on them by virtue of their military service. (See Art 137, UCMJ.)

(c) Properly training their soldiers and ensuring that both soldiers and equipment are in the proper state of readiness at all times. Commanders should assess the command climate periodically to analyze the human dimension of combat readiness. Soldiers must be committed to accomplishing the mission through the unit cohesion developed as a result of a healthy leadership climate established by the command. Leaders at all levels promote the individual readiness of their soldiers by developing competence and confidence in their subordinates. In addition to being mentally, physically, tactically, and technically competent, soldiers must have confidence in themselves, their equipment, their peers, and their leaders. A leadership climate in which all soldiers are treated with fairness, justice, and equity will be crucial to development of this confidence within soldiers. Commanders are responsible for developing disciplined and cohesive units sustained at the highest readiness level possible."

c. Finding 3:

(1) Finding: Of all facilities inspected, only Abu Ghraib was determined to be undesirable for housing detainees because it is located near an urban population and is under frequent hostile fire, placing Soldiers and detainees at risk.

(2) Standard: Hague Convention No. IV Respecting the Laws and Customs of War on Land (H.IV), Oct. 18, 1907, Articles 43-46 and 50; and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), Aug 12, 1949, Articles 81, 83, 85, 88, 89, and 91 discuss the requirement to accommodate detainees in buildings or quarters which afford every possible safeguard regarding health and hygiene and the effects of war. The specific language in the GC follows:

GC Article 81 – "Parties to the conflict who intern protected persons shall be bound to provide free of charge for their maintenance, and to grant them also the medical attention required by their state of health. No deduction from the allowances, salaries or credits due to the internees shall be made for the repayment of these costs.

GC, Article 83 – "The Detaining Power shall not set up places of internment in areas particularly exposed to the dangers of war. ...

GC, Article 84 – Internees shall be accommodated and administered separately from prisoners of war and from persons deprived of liberty for any other reason.

GC, Article 85 – The Detaining Power is bound to take all necessary and possible measures to ensure that protected persons shall, from the outset of their internment, be accommodated in buildings or quarters which afford every possible safeguard as regards hygiene and health, and provide efficient protection against the rigors of the climate and the effects of the war. In no case shall permanent places of internment be situated in unhealthy areas or in districts, the climate of which is injurious to the internees. In all cases where the district, in which a protected person is temporarily interned, is an unhealthy area or has a climate which is harmful to his health, he shall be removed to a more suitable place of internment as rapidly as circumstances permit. The premises shall be fully protected from dampness, adequately heated and lighted, in particular between dusk and lights out. The sleeping quarters shall be sufficiently spacious and well ventilated, and the internees shall have suitable bedding and sufficient blankets, account being taken of the climate, and the age, sex, and state of health of the internees. Internees shall have for their use, day and night, sanitary conveniences which conform to the rules of hygiene, and are constantly maintained in a state of cleanliness. They shall be provided with sufficient water and soap for their daily personal toilet and for washing their personal laundry; installations and facilities necessary for this purpose shall be granted to them. Showers or baths shall also be available. The necessary time shall be set aside for washing and for cleaning. Whenever it is necessary, as an exceptional and temporary measure, to accommodate women internees who are not members of a family unit in the same place of internment as men, the provision of separate sleeping quarters and sanitary conveniences for the use of such women internees shall be obligatory."

GC, Article 88 – "In all places of internment exposed to air raids and other hazards of war, shelters adequate in number and structure to ensure the necessary protection shall be installed.

GC, Article 89 – Daily food rations for internees shall be sufficient in quantity, quality and variety to keep internees in a good state of health and prevent the development of nutritional deficiencies. Account shall also be taken of the customary diet of the internees. Internees shall also be given the means by which they can prepare for themselves any additional food in their possession. Sufficient drinking water shall be supplied to internees. ... "

GC Article 91 – "Every place of internment shall have an adequate infirmary, under the direction of a qualified doctor, where internees may have the attention they require, as well as appropriate diet. Isolation wards shall be set aside for cases of contagious or mental diseases. Maternity cases and internees suffering from serious diseases, or whose condition requires special treatment, a surgical operation or hospital care, must be admitted to any institution where adequate treatment can be given and shall receive care not inferior to that provided for the general population. Internees shall, for preference, have the attention of medical personnel of their own nationality. Internees may not be prevented from presenting themselves to the medical authorities for examination. The medical authorities of the Detaining Power shall, upon request, issue to every internee who has undergone treatment an official certificate showing the nature of his illness or injury, and the duration and nature of the treatment given. A duplicate of this certificate shall be forwarded to the Central Agency provided for in Article 140 Treatment, including the provision of any apparatus necessary for the maintenance of internees in good health, particularly dentures and other artificial appliances and spectacles, shall be free of charge to the internee."

Army Regulation 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Chapter 5, paragraph 5-2, subparagraph a, states that a safety program for civilian internees (CIs) will be established. Chapter 6, paragraph 6-1,

subparagraphs a & b, (1) through (4), states commanders' responsibilities regarding housing, caring for, and safeguarding CIs in facilities. This regulation is a multi-service regulation implementing DOD Directive 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304 and outlines policies, procedures, and responsibilities for treatment of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI), and other detainees (OD) and implements international law for all military operations. The specific language in the regulation follows:

"a. Establishment. A safety program for the CI will be established and administered in accordance with the policies prescribed in AR 385-10 and other pertinent safety directives.

"6-1. Internment Facility

a. Location. The theater commander will be responsible for the location of the CI internment facilities within his or her command. The CI retained temporarily in an unhealthy area or where the climate is harmful to their health will be removed to a more suitable place of internment as soon as possible.

b. Quarters. Adequate shelters to ensure protection against air bombardments and other hazards of war will be provided and precautions against fire will be taken at each CI camp and branch camp.

(1) All necessary and possible measures will be taken to ensure that CI shall, from the outset of their internment, be accommodated in buildings or quarters which afford every possible safeguard as regards hygiene and health, and provide efficient protection against the rigors of the climate and the effects of war. In no case shall permanent places of internment be placed in unhealthy areas, or in districts the climate of which is injurious to CI.

(2) The premises shall be fully protected from dampness, adequately heated and lighted, in particular between dusk and lights out. The sleeping quarters shall be sufficiently spacious and well ventilated, and the internees shall have suitable bedding and sufficient blankets, account being taken of the climate, and the age, sex and state of health of the internees.

(3) Internees shall have for their use, day and night, sanitary conveniences which conform to the rules of hygiene and are constantly maintained in a state of cleanliness. They shall be provided with sufficient water and soap for their daily personal hygiene and for washing their personal laundry; installations and facilities necessary for this purpose shall be provided. Showers or baths shall also be available. The necessary time shall be set aside for washing and for cleaning.

(4) CI shall be administered and housed separately from EPW/RP. Except in the case of families, female CI shall be housed in separate quarters and shall be under the direct supervision of women."

Field Manual (FM) 3-19.1, Military Police Operations, 31 January 2002, Chapter 4, paragraph 4-44, describes the capability of a modular internment/resettlement (I/R) Military Police (MP) battalion that is trained and equipped for an I/R mission. The specific language in the field manual follows:

"4-44. Although the CS MP unit initially handles EPWs/CIs, modular MP (I/R) battalions with assigned MP guard companies and supporting MWD teams are equipped and trained to

handle this mission for the long term. A properly configured modular MP (I/R) battalion can support, safeguard, account for, guard, and provide humane treatment for up to 4,000 EPWs/CIs; 8,000 dislocated civilians; or 1,500 US military prisoners."

FM 3-19.40, Military Police Internment/Resettlement Operations, 1 August 2001, Chapter 6, paragraphs 6-2 and 6-3, discuss the considerations of choosing sites for I/R facilities. The specific language in the field manual follows:

"6-2. The MP coordinate the location with engineers, logistical units, higher headquarters, and the HN. The failure to properly consider and correctly evaluate all factors may increase the logistical and personnel efforts required to support operations. If an I/R facility is improperly located, the entire internee population may require movement when resources are scarce. When selecting a site for a facility, consider the following:

- Will the interned population pose a serious threat to logistical operations if the tactical situation becomes critical?
- Is there a threat of guerrilla activity in the area?
- What is the attitude of the local population?
- What classification of internees will be housed at the site?
- What type of terrain surrounds the site, and will it help or hinder escapes?
- What is the distance from the MSR to the source of logistical support?
- What transportation methods are required and available to move internees, supplies, and equipment?

6-3. In addition, consider the—

- METT-TC.
- Proximity to probable target areas.
- Availability of suitable existing facilities (avoids unnecessary construction).
- Presence of swamps, mosquitoes, and other factors (including water drainage) that affect human health.
 - Existence of an adequate, satisfactory source of potable water. The supply should meet the demands for consumption, food sanitation, personal hygiene, and sewage disposal.
 - Availability of electricity. Portable generators can be used as standby and emergency sources of electricity.
 - Distance to work if internees are employed outside the facility.
 - Availability of construction material.
 - Soil drainage."

d. Finding 4:

(1) Finding: Tactical commanders and leaders adapted to the environment and held detainees longer than doctrinally recommended due to the demand for timely, tactical intelligence.

(2) Standard: Army Regulation (AR) 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Chapter 2, paragraph 2-1, subparagraph a (d), states that prisoners may be interrogated in the combat zone; subparagraph a (e) states that prisoners will be evacuated as quickly as possible from the collecting points (CPs) to the Corps Holding Area (CHA). If evacuation is delayed the detaining

force will increase the level of humanitarian care provided at the CP. Chapter 3, paragraph 3-2, subparagraph b, states that CPs will operate under conditions similar to those prescribed for internment camps; paragraph 3-4, subparagraph e, requires enemy prisoners of war (EPWs) and retained persons (RP) to be housed under the same conditions as U.S. Forces residing in the same area; subparagraph i requires EPW/RP facilities to ensure a clean and healthy environment for detainees. Chapter 6, paragraph 6-1, subparagraph b, requires that internment facilities for CIs provide a safe and sanitary environment; paragraph 6-6, subparagraph g, requires facilities housing Civilian Internees (CI) to provide hygiene and sanitation measures in accordance with AR 40-5, Preventive Medicine. This regulation is a multi-service regulation implementing DOD Directive 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304 and outlines policies, procedures, and responsibilities for treatment of EPW, RP, CI, and other detainees (OD) and implements international law for all military operations. The specific language in the regulation follows:

2-1. a. (d) – "Prisoners may be interrogated in the combat zone.

2-1. a. (e) – "Prisoners will be humanely evacuated from the combat zone and into appropriate channels as quickly as possible. . . . When military necessity requires delay in evacuation beyond a reasonable period of time, health and comfort items will be issued, such as food, potable water, appropriate clothing, shelter, and medical attention.

3-2. b. – ". . . 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.

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.

Field Manual (FM) 3-19.40, Military Police Internment/Resettlement Operations, 1 August 2001, Introduction, explains the role of MPs in establishing CPs. Chapter 3, paragraph 3-1, further explains the MP role in establishing CPs and CHAs; paragraph 3-3, states that MPs and MI interrogation teams should work closely at CPs and CHAs to make a determination of the potential intelligence value of detainees; paragraphs 3-37, 3-45 and 3-54, state that divisions will operate forward and central CPs as temporary holding areas until detainees are removed from the battlefield and transferred to the CHA. Doctrine states that detainees should remain at a forward CP no longer than 12 hours, and a central CP no longer than 24 hours. Paragraphs 3-41 to 3-43 identify planning considerations for division forward and central CPs. Doctrine identifies divisions providing minimum medical, preventive medical, logistics, personnel and infrastructure support to hold detainees for 12 hours at forward CPs and for 24 hours at central CPs. Paragraph 3-49 describes the Preventive Medicine (PVNTMED) support to a central CP. Paragraph 3-55 states that CHAs are more permanent than CPs and must be prepared to hold detainees for 72 hours. External support is required if CHAs are required to hold detainees for more than 72 hours. Chapter 5, paragraph 5-52, describes the sanitation

requirements for Civilian Internee (CI) populations. The specific language in the field manual follows:

Introduction – "A large number of captives on the battlefield hampers maneuver units as they move to engage and destroy an enemy. To assist maneuver units in performing their mission—

- Division MP units operate CPs in the division AO.
- Corps MP units operate holding areas in the corps AO."

"3.1. The MP units accept captives from capturing units as far forward as possible, and captives are held in CPs and CHAs until they are removed from the battlefield. Normally, CPs are operated in the division AO and CHAs are operated in the corps AO; but they can be operated anywhere they are needed. The CPs and CHAs sustain and safeguard captives and ensure a minimum level of field processing and accountability. Wounded and sick captives receive medical treatment, and captives who require lifesaving medical attention are evacuated to the nearest medical facility.

3.3. The MP work closely with military intelligence (MI) interrogation teams at CPs and CHAs to determine if captives, their equipment, and their weapons have intelligence value. This process is accelerated when MI interrogation teams can observe captives during arrival and processing, and interrogators can also be used as interpreters during this phase. Before a captive is interviewed by MI personnel, he must have a Department of Defense (DD) Form 2745 (Figure 3-1) attached to him and be accounted for on DD Form 2708.

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.

3-41. Medical support is provided by the MP company medical section. Additional medical support can be requested through the forward support battalion (FSB) to the brigade medical officer. The brigade OPORD includes specific actions and support (operational requirements) needed from non-MP units.

3-42. When a division MP company commander is tasked with planning and operating a forward CP, he-

- Coordinates with the unit responsible for the area.
- Conducts a recon of the area before selecting a location.
- Locates it far enough from the fighting to avoid minor shifts in the main battle area (MBA) (normally 5 to 10 kilometers).
- Notifies the BSA tactical operations center (TOC) and the PM operations section of the selected location (grid coordinates). The BSA TOC reports the location to the brigade TOC, and the brigade TOC notifies subordinate units.
- Coordinates with MI on co-locating an MI interrogation team at the CP.
- Provides potable water and, if required, food for captives.

3-43. A forward CP is seldom located near the indigenous population to prevent problems caused by the presence of captives in the area. A forward CP is usually a guarded,

roped-off area (concertina or razor tape) or a secure, fixed facility. The capture rate and the captive categories determine the size of forward CP.

3-45. Captives should not remain at a forward CP more than 12 hours before being escorted to the central CP.

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.

3-54. Captives should not remain at the central CP more than 24 hours before being evacuated to the CHA.

3-55. A CHA (Figure 3-4) can hold more captives for longer periods of times than a central CP. Depending on the availability of MP units to establish I/R facilities, corps MP units must be prepared to hold captives at the CHA more than 72 hours. If the CHA keeps captives more than 72 hours, MP must plan and coordinate for the increased logistics and personnel required to operate a long-term facility. The decision to hold captives longer is based on METT-TC and the availability of forces. Captives remain in the CHA until they are evacuated to an I/R facility or until hostilities end."

e. Finding 5:

(1) Finding: Doctrine does not clearly specify the interdependent, and yet independent, roles, missions, and responsibilities of Military Police and Military Intelligence units in the establishment and operation of interrogation facilities.

(2) Standard: Department of Defense Directive (DoDD) 2310.1, DoD Program for Enemy Prisoners of War (EPOW) and Other Detainees, 18 August 1994, Paragraph 3.4, outlines the disposition of persons captured or detained and indicates who should operate collecting points, other holding facilities and installations. The specific language in the directive follows:

"Persons captured or detained by the U.S. Military Services 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. Detainees may be interviewed for intelligence collection purposes at facilities and installations operated by U.S. Army Military Police."

Joint Publication (JP) 1-02, Department of Defense Dictionary of Military and Associated Terms, 12 April 2001 (as amended through 23 March 2004), defines "tactical control", often abbreviated by the acronym "TACON". The specific language in the joint publication follows:

"tactical control — Command authority over assigned or attached forces or commands, or military capability or forces made available for tasking, that is limited to the detailed direction and control of movements or maneuvers within the operational area necessary to accomplish missions or tasks assigned. Tactical control is inherent in operational control. Tactical control may be delegated to, and exercised at any level at or below the level of combatant command. When forces are transferred between combatant commands, the command relationship the gaining commander will exercise (and the losing commander will relinquish) over these forces must be specified by the Secretary of Defense. Tactical control provides sufficient authority for controlling and directing the application of force or tactical use of combat support assets within the assigned mission or task. Also called TACON."

JP 2-01, Joint Intelligence Support to Military Operations, 20 November 1996, Appendix G, paragraph 1, subparagraph d, describes the organization and function of the Joint Interrogation and Debriefing Center (JIDC). The specific language in the joint publication follows:

"Joint Interrogation and Debriefing Center. The JFC normally tasks the Army component commander to establish, secure, and maintain an EPW camp system. Under some circumstances, particularly during MOOTW, the JFC may designate another component commander to be responsible for the EPW camp system. The subordinate joint force J-2 establishes a JIDC for follow-on exploitation. The establishment (when, where, and how) of the JIDC is highly situation dependent, with the main factors being the geographic nature of the JOA, the type and pace of military operations, the camp structure, and the number and type of the sources. The JIDC may be a central site where appropriate EPW are segregated for interrogation, or it may be more of a clearinghouse operation for dispatch of interrogators or debriefers to other locations.

- Organization. The JIDC interrogation and debriefing activities are managed by the subordinate joint force HUMINT staff section or HOC. The HOC will coordinate with the TFCICA within the J-2X for CI [counterintelligence] augmentation for exploitation of those personnel of CI [counterintelligence] interest, such as civil and/or military leadership, intelligence or political officers and terrorists. The staff is augmented by deployed DHS personnel, linguists and, as required, component personnel. The HUMINT appendix of Annex B (Intelligence) to the OPLAN or CONPLAN contains JIDC planning considerations.

- Responsibilities. Service component interrogators collect tactical intelligence from EPWs based on joint force J-2 criteria. EPWs (i.e., senior level EPWs) are screened by the components and those of further intelligence potential are identified and processed for follow-on interrogation and debriefing by the JIDC to satisfy theater strategic and operational requirements. In addition to EPW, the JIDC may also interrogate civilian detainees, and debrief refugees as well as other non-prisoner sources for operational and strategic information."

FM 3-31, Joint Force Land Component Commander Handbook (JFLCC), 13 December 2001, Appendix A, paragraph A-11, describes the roles of the Joint Interrogation Facility (JIF) and the Joint Interrogation and Debriefing Center (JIDC). The specific language in the field manual follows:

"The following may be established or requested by the JFLCC in addition to the J-2X [J-2 CI [counterintelligence] and HUMINT Support Element] and JACE [Joint Analysis and Control Element]:

Joint Interrogation Facility (JIF). JIF conducts initial screening and interrogation of EPWs, translation and exploitation of captured adversary documents, and debriefing of captured or detained US personnel released or escaped from adversary control. It coordinates exploitation of captured equipment with the JCMEC [Joint Captured Materiel Exploitation Center], documents with the JDEC [Joint Document Exploitation Center], and human sources with the JIDC [Joint Interrogation and Debriefing Center]. More than one JIF may be established in the JOA depending upon the anticipated number of EPWs.

JIDC. JIDC conducts follow-on exploitation of EPWs. EPWs are screened by the JIFs, and those of further intelligence potential are identified and forwarded to the JIDC for follow-on interrogation and debriefing in support of JTF and higher requirements. Besides EPWs, the JIDC may also interrogate civilian detainees, refugees, and other nonprisoner sources. JIDC activities are managed by the J-2X HOC [HUMINT Operations Cell]."

FM 34-52, Intelligence Interrogation, 28 September 1992, Preface, establishes this FM as the doctrinal foundation for interrogations of detainees. Chapter 1 defines and explains the purpose of interrogation. Chapter 2 describes the organization and operation of the Theater Interrogation Facility (TIF). The specific language in the field manual follows:

Preface – "This manual provides doctrinal guidance, techniques, and procedures governing employment of interrogators as human intelligence (HUMINT) collection assets in support of the commander's intelligence needs. It outlines the interrogator's role within the intelligence collection effort and the supported unit's day-to-day operations.

This manual is intended for use by interrogators as well as commanders, staff officers, and military intelligence (MI) personnel charged with the responsibility of the interrogation collection effort."

Chapter 1 – "Interrogation is the process of questioning a source to obtain the maximum amount of usable information. The goal of any interrogation is to obtain reliable information in a lawful manner, in a minimum amount of time, and to satisfy intelligence requirements of any echelon of command.

A good interrogation produces needed information, which is timely, complete, clear, and accurate."

Chapter 2 – "At echelons above corps (EAC), the MI company (I&E), MI battalion (C&E) or (I&E), MI brigade (EAC), will form the Theater Interrogation Facility (TIF). The TIF, which is commanded by an MI captain, provides interrogation support to the theater or joint command and to national level intelligence agencies. The TIF will—

- Be located within the main theater EPW internment facility.
- Be tailored organizationally to meet requirements of the theater and situation.
- Include interrogators, CI [counterintelligence] personnel, and intelligence analysts from the Army, Air Force, Marine Corps, and, in some cases, the Navy.
- Be organized similarly to the CIF; that is, by function.

- Have intelligence analysts to handle requirements and keep interrogators informed of changes in the operational or strategic situation.
- Maintain the capability to deploy "GO" teams to multiple theater EPW camps, as well as to forward deploy them to corps and ECB as needed.
- Provide experienced senior interrogation warrant officers and NCOs who are graduates of the Department of Defense (DOD) Strategic Debriefing Course (additional skill identifier 9N or N7) and physical plant for the Joint Debriefing Center (JDC), where exploitation of high-level (Category A) sources takes place on operational and strategic topics."

"THEATER INTERROGATION FACILITY

The EAC interrogation facility will normally be designated as the 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 may be established with allied interrogator augmentation. In addition to conventional theater Army operations, a TIF may be established to support a joint or unified command to meet theater requirements during crisis or contingency deployments.

MI battalion companies, MI brigade (EAC) provide US Army interrogation support to the EAC TIF. The mission of the TIF is to—

- Establish liaison with host nation (HN) commanders to achieve critical intelligence information in response to theater and national level intelligence collection requirements.
- Ensure communication between HN and US military TF commanders, and establish rapport with HN interrogation activities.
- Coordinate for national level collection requirements.
- Interrogate PWs, high-level political and military personnel, civilian internees, defectors, refugees, and displaced persons.
- Participate in debriefings of US and allied personnel who have escaped after being captured, or who have evaded capture.
- Translate and exploit selected CEDs.
- Assist in technical support activity (TSA) operations (see FM 34-5(S)).

The MI battalion (I&E) has an HHC for C³, and three interrogation companies, of which one is Active Component (AC) and the other two are RC. The companies consist of two MI companies, I&E (EPW support) and one MI company, I&E (GS-EAC).

The two MI companies support EPW compound operations. Their elements are primarily for GS at EAC, but may be deployed for DS at corps and division. The MI company (I&E) (GS-EAC) provides priority interrogation and DOCEX support to corps and divisions, to the TIF, and to temporary EPW compounds as required.

A TIF is organized into a headquarters section, operations section, and two interrogation and DOCEX sections. It will normally have an attached TSA section from Operations Group, and a liaison team from the Joint Captured Materiel Exploitation Center (JCMEC). The JCMEC liaison team assists in exploiting sources who have knowledge of captured enemy weapons and equipment.

The headquarters section provides all command, administrative, logistical, and maintenance support to the TIF. It coordinates with—

- Commander, MI Battalion (I&E) for personnel status, administrative support, and logistical support prior to deployment.
- Battalion S3 for deployment of interrogation assets.
- Theater J2 for reporting procedures, operational situation update, and theater and national level intelligence requirements.
- Provost marshal for location of theater EPW camps, and for procedures to be followed by interrogators and MP for processing, interrogating, and internment.
- Commanders of theater medical support units and internment facility for procedures to treat, and clear for questioning, wounded EPWs.
- Commander, CI [counterintelligence] company, for CI [counterintelligence] requirements and joint interrogation and CI [counterintelligence] procedures.

OPERATIONS SECTION

This section (where ideally the officer in charge [OIC] has the 3Q additional skill identifier) is organized into the operations, OB, and communications elements. The operations section—

- Designates work areas for all TIF elements.
- Establishes and maintains TIF functional files.
- Establishes interrogation priorities.
- Maintains a daily log and journal.
- Disseminates incoming and outgoing distribution.
- Conducts liaison with local officials, adjacent and subordinate intelligence activities, CI [counterintelligence], MP, PSYOP, the JCMEC, Plans and Policy Directorate (J5), and provost marshal.
- Conducts coordination with holding area OIC or enclosure commander for screening site, medical support, access, movement, and evacuation procedures for EPWs.
- Conducts operations briefings when required.

- Manages screening operations.
- Manages EPW access for intelligence collection.
- Assigns control numbers (see DIAM 58-13).
- Supervises all intelligence collection activities within the TIF."

Army Regulation (AR) 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Chapter 2, paragraph 2-1, provides the regulatory guidance for interrogation of detainees in a combat zone. This regulation is a multi-service regulation implementing DOD Directive 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304 and outlines policies, procedures, and responsibilities for treatment of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI), and other detainees (OD) and implements international law for all military operations. The specific language in the regulation follows:

"(d) Prisoners may be interrogated in the combat zone. The use of physical or mental torture or any coercion to compel prisoners to provide information is prohibited. Prisoners may voluntarily cooperate with PSYOP personnel in the development, evaluation, or dissemination of PSYOP messages or products. Prisoners may not be threatened, insulted, or exposed to unpleasant or disparate treatment of any kind because of their refusal to answer questions. Interrogations will normally be performed by intelligence or counterintelligence personnel."

Field Manual (FM) 3-19.1, Military Police Operations, 31 January 2002, Chapter 4, paragraphs 4-42 and 4-43, describe the role of MP units in detainee operations and references MI. The specific language in the field manual follows:

"4-42. The Army is the Department of Defense's (DoD's) executive agent for all EPW/CI operations. Additionally, the Army is DoD's executive agent for long-term confinement of US military prisoners. Within the Army and through the combatant commander, the MP is tasked with coordinating shelter, protection, accountability, and sustainment for EPWs/CIs. The I/R function addresses MP roles when dealing with EPWs/CIs, dislocated civilians, and US military prisoners.

4-43. The I/R function is of humane as well as tactical importance. In any conflict involving US forces, safe and humane treatment of EPWs/CIs is required by international law. Military actions on the modern battlefield will result in many EPWs/CIs. Entire units of enemy forces, separated and disorganized by the shock of intensive combat, may be captured. This can place a tremendous challenge on tactical forces and can significantly reduce the capturing unit's combat effectiveness. The MP supports the battlefield commander by relieving him of the problem of handling EPWs/CIs with combat forces. The MP performs their I/R function of collecting, evacuating, and securing EPWs throughout the AO. In this process, the MP coordinates with MI to collect information that may be used in current or future operations."

FM 3-19.40, Military Police Internment/Resettlement Operations, 1 August 2001, Preface, establishes this FM as the doctrinal foundation for detainee operations. Chapter 2, paragraph 2-1, describes the role of the MP Battalion Commander. Chapter 3, paragraph 3-3, states the need for MP and MI to work closely, and paragraphs 3-64 to 3-66 describe the MP-MI

interaction at collecting points (CPs) and corps holding areas (CHAs). The specific language in the field manual follows:

"Field Manual (FM) 3-19.40 depicts the doctrinal foundation, principles, and processes that MP will employ when dealing with enemy prisoners of war (EPWs), civilian internees (CIs), US military prisoner operations, and MP support to civil-military operations (populace and resource control [PRC], humanitarian assistance [HA], and emergency services [ES]).

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, refugee, and US military prisoner), the commander, the cadre, and support personnel must be aware of the requirements for each category.

3-3. The MP work closely with military intelligence (MI) interrogation teams at CPs and CHAs to determine if captives, their equipment, and their weapons have intelligence value.

3-64. To facilitate collecting enemy tactical information, MI may collocate interrogation teams at CPs and CHAs. This provides MI with direct access to captives and their equipment and documents. Coordination is made between MP and MI to establish operating procedures that include accountability. An interrogation area is established away from the receiving/processing line so that MI personnel can interrogate captives and examine their equipment and documents. 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.

3-65. The MI interrogation teams screen captives at CPs and CHAs, looking for anyone who is a potential source of information. Screeners observe captives from an area close to the dismount point or processing area. As each captive passes, MI personnel examine the capture tag and look for branch insignias that indicate a captive with information to support command priority intelligence requirements (PIR) and information requirements (IR). They also look for captives who are willing or attempting to talk to guards; joining the wrong group intentionally; or displaying signs of nervousness, anxiety, or fear.

3-66. The MP assist MI screeners by identifying captives who may have answers that support PIR and IR. Because MP are in constant contact with captives, they see how certain captives respond to orders and see the type of requests they make. The MP ensure that searches requested by MI are conducted out of sight of other captives and that guards conduct same-gender searches."

FM 6-0, Mission Command: Command and Control of Army Forces, 11 August 2003, Appendix D, paragraph D-114, describes the responsibilities of the Provost Marshal (PM). The specific language in the field manual follows:

"PM responsibilities include—

- Internment and resettlement of EPWs and civilian internees, dislocated civilians, and US military prisoners, including their—
 - Collection.
 - Detention and internment.
 - Protection.
 - Sustainment.

- Evacuation.
 - Coordinating for all logistic requirements relative to EPW and civilian internees, US military prisoners, and dislocated civilians (with the G-4).
 - Coordinating on EPW and civilian internee pay support, and financial aspects of weapons bounty programs (with the finance officer and RM)."

FM 34-52, Intelligence Interrogation, 28 September 1992, Preface, establishes this FM as the doctrinal foundation for interrogations of detainees. Chapter 1 defines and explains the purpose of interrogation. Chapter 2 describes the role of MPs in the operation of CPs and CHAs. Chapter 3 describes the role of MPs in the MI screening process. Chapter 4 allows MI to assume control of detainees from MP for interrogation. The specific language in the field manual follows:

Preface – "This manual provides doctrinal guidance, techniques, and procedures governing employment of interrogators as human intelligence (HUMINT) collection assets in support of the commander's intelligence needs. It outlines the interrogator's role within the intelligence collection effort and the supported unit's day-to-day operations.

This manual is intended for use by interrogators as well as commanders, staff officers, and military intelligence (MI) personnel charged with the responsibility of the interrogation collection effort."

"Chapter 1 – Interrogation is the process of questioning a source to obtain the maximum amount of usable information. The goal of any interrogation is to obtain reliable information in a lawful manner, in a minimum amount of time, and to satisfy intelligence requirements of any echelon of command.

A good interrogation produces needed information, which is timely, complete, clear, and accurate."

"Chapter 2 – The division's central EPW collecting point is operated by division MP under the supervision of the division provost marshal.

The capturing unit escorts or transports EPWs or detainees to the nearest collecting point, and turns them over to the MP. Interrogators in DS of the brigade will screen and categorize all EPWs or detainees, question them, and report information obtained in response to brigade PIR, IR, and SIR.

The corps MP commander operates the corps EPW holding area and provides escort guard support to divisions for EPW evacuation in routine or medical channels.

"Chapter 3 – Screeners coordinate with MP holding area guards on their role in the screening process. The guards are told where the screening will take place, how EPWs and detainees are to be brought there from the holding area, and what types of behavior on their part will facilitate the screenings."

"Chapter 4 – MI assumes control from the MP when interrogators determine a captured item or EPW is of intelligence value."

f. **Finding 6:**

(1) Finding: Military Intelligence units are not resourced with sufficient interrogators and interpreters, to conduct timely detainee screenings and interrogations in the current operating environment, resulting in a backlog of interrogations and the potential loss of intelligence.

(2) Standard: Army Regulation (AR) 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Chapter 2, paragraph 2-1, provides the regulatory guidance for interrogation of detainees in a combat zone. This regulation is a multi-service regulation implementing DOD Directive 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304 and outlines policies, procedures, and responsibilities for treatment of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI), and other detainees (OD) and implements international law for all military operations. The specific language in the regulation follows:

"(d) Prisoners may be interrogated in the combat zone. The use of physical or mental torture or any coercion to compel prisoners to provide information is prohibited. Prisoners may voluntarily cooperate with PSYOP personnel in the development, evaluation, or dissemination of PSYOP messages or products. Prisoners may not be threatened, insulted, or exposed to unpleasant or disparate treatment of any kind because of their refusal to answer questions. Interrogations will normally be performed by intelligence or counterintelligence personnel."

Field Manual (FM) 3-19.40, Military Police Internment/Resettlement Operations, 1 August 2001, Chapters 2 and 3, paragraphs 2-48, 3-3, 3-13, 3-65 to 3-68, describe doctrine for Military Intelligence (MI) operations in internment/resettlement (I/R) facilities. The specific language in the field manual follows:

"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."

"3-3. The MP work closely with military intelligence (MI) interrogation teams at CPs and CHAs to determine if captives, their equipment, and their weapons have intelligence value. This process is accelerated when MI interrogation teams can observe captives during arrival and processing, and interrogators can also be used as interpreters during this phase. Before a

captive is interviewed by MI personnel, he must have a Department of Defense (DD) Form 2745 (Figure 3-1) attached to him and be accounted for on DD Form 2708.

3-13. The MP coordinate with MI interrogation teams to determine which confiscated items have intelligence value. Personal items (diaries, letters from home, and family pictures) can be taken by MI teams for review and then returned to the proper owner via MP."

"INTERROGATION TEAMS

"3-65. The MI interrogation teams screen captives at CPs and CHAs, looking for anyone who is a potential source of information. Screeners observe captives from an area close to the dismount point or processing area. As each captive passes, MI personnel examine the capture tag and look for branch insignias that indicate a captive with information to support command priority intelligence requirements (PIR) and information requirements (IR). They also look for captives who are willing or attempting to talk to guards; joining the wrong group intentionally; or displaying signs of nervousness, anxiety, or fear.

3-66. The MP assist MI screeners by identifying captives who may have answers that support PIR and IR. Because MP are in constant contact with captives, they see how certain captives respond to orders and see the type of requests they make. The MP ensure that searches requested by MI are conducted out of sight of other captives and that guards conduct same-gender searches.

3-67. The MI screeners examine captured documents, equipment and, in some cases, personal papers (journals, diaries, and letters from home). They are looking for information that identifies a captive and his organization, mission, and personal background (family, knowledge, and experience). Knowledge of a captive's physical and emotional status or other information helps screeners determine his willingness to cooperate.

LOCATION

3-68. Consider the following when planning an MI screening site:

- 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 an interrogator, a captive, a guard, and an interpreter as well as furniture. Lights are available for night operations.
- Procedures are implemented to verify that sick and wounded captives have been treated and released by authorized medical personnel.
- Guards are available and procedures are implemented for escorting captives to the interrogation site.
- Procedures are published to inform screeners who will be moved and when they will be moved.
- Accountability procedures are implemented and required forms are available."

FM 3-31, Joint Force Land Component Commander Handbook (JFLCC), 13 December 2001, Appendix A, paragraph A-11, describes the role of the Joint Interrogation and Debriefing Center (JIDC). The specific language in the field manual follows:

"JIDC conducts follow-on exploitation of EPWs. EPWs are screened by the JIFs, and those of further intelligence potential are identified and forwarded to the JIDC for follow-on interrogation and debriefing in support of JTF and higher requirements. Besides EPWs, the JIDC may also interrogate civilian detainees, refugees, and other nonprisoner sources. JIDC activities are managed by the J-2X HOC."

FM 27-10, The Law of Land Warfare, 18 July 1956 (change 1, 15 July 1976), Paragraph 93, describes guidelines for the questioning of enemy prisoners of war (EPWs). The specific language in the field manual follows:

"Every prisoner of war, when questioned on the subject, is bound to give only his surname, first names and rank, date of birth, and army, regimental, personal or serial number, or failing this equivalent information. If he willfully infringes this rule, he may render himself liable to a restriction of the privileges accorded to his rank or status. Each Party to a conflict is required to furnish the persons under its jurisdiction who are liable to become prisoners of war, with an identity card showing the owner's surname, first names, rank, army, regimental, personal or serial number or equivalent information, and date of birth. The identity card may, furthermore, bear the signature or the fingerprints, or both, of the owner, and may bear, as well, any other information the Party to the conflict may wish to add concerning persons belonging to its armed forces. As far as possible the card shall measure 6.5 x 10 cm. and shall be issued in duplicate. The identity card shall be shown by the prisoner of war upon demand, but may in no case be taken away from him. No physical or mental torture, nor any other form of coercion, may be inflicted on prisoners of war to secure from them information of any kind whatever. Prisoners of war who refuse to answer may not be threatened, insulted, or exposed to unpleasant or disadvantageous treatment of any kind."

FM 34-52, Intelligence Interrogation, 28 September 1992, Chapter 1, defines and explains the purpose of interrogation. The specific language in the field manual follows:

"Interrogation is the process of questioning a source to obtain the maximum amount of usable information. The goal of any interrogation is to obtain reliable information in a lawful manner, in a minimum amount of time, and to satisfy intelligence requirements of any echelon of command.

A good interrogation produces needed information, which is timely, complete, clear, and accurate."

Special Text (ST) 2-22.7 (FM 34-7-1), Tactical Human Intelligence and Counterintelligence Operations, 11 April 2002, Chapter 1, paragraphs 1-19, 1-21 to 1-25, provides the doctrinal basis for the structure and utilization of tactical human intelligence assets. The specific language in the special text follows:

"1-19. The requirement for collectors is based on the density of the potential source pool. The basic methodology of collection does not change in the urban environment; however, the density of the population results in a proportional increase in the number of collectors required. This need for additional assets has been illustrated by recent operations in Somalia, Haiti, Bosnia, and Kosovo."

"ARMY CORPS AND BELOW

1-21. Army HUMINT and CI assets organic at corps and below are uniquely qualified to be the primary collection asset in many of our future conflicts. They are organic to—

- Tactical exploitation battalions (TEBs) and the corps support battalions (CSBs) at the Corps MI brigade.
- MI battalions at division.
- MI companies at armored cavalry regiments (ACRs) and separate brigades (SEP BDEs).
- MI elements at Special Forces Groups (SFGs).

1-22. Army HUMINT and CI assets provide technologically enhanced exploitation of human sources and media. This exploitation provides valuable intelligence to meet the critical requirements affecting the MDMP. The simultaneous digital interaction between operational HUMINT and CI teams and analytical elements provides the deployed commander with near-instantaneous information. This rapid transmission of critical intelligence to the user gives the supported command an information edge and a more complete vision of the battlespace.

INTERIM BRIGADE COMBAT TEAM

1-23. The brigade's intelligence system is a flexible force of Intelligence, Surveillance, and Reconnaissance (ISR) personnel, organizations, and equipment. Individually and collectively, these assets provide commanders throughout the brigade with the capability to plan and direct ISR operations, collect and process information, produce relevant intelligence, and disseminate combat information and intelligence to those who need it, when they need it. The brigade and its subordinate units possess organic ISR assets that enable the above actions. Based on METT-TC considerations the brigade task organizes its organic ISR assets for the operation and, in addition, may receive additional ISR assets from corps, joint, and national organizations.

1-24. The brigade's tactical HUMINT assets include an S2X team, a tactical HUMINT platoon with two operational management teams (OMTs) and tactical HUMINT teams, and troop HUMINT collectors in the reconnaissance, surveillance, and target acquisition (RSTA) squadron. The functions and responsibilities of these assets are the same as at higher echelons. The mission of the Troop HUMINT collector is limited to providing tactical questioning and DOCEX in support of the squadron's multidimensional reconnaissance and surveillance (R&S) mission and identifying possible sources of interest for the tactical HUMINT platoon. The functions of the different teams and offices in tactical HUMINT are similar through the echelons where tactical HUMINT is conducted.

RESERVE COMPONENT INTEGRATION

1-25. Given the Army's current operational tempo and force structure, the integration of RC forces into the AC is a near certainty for future operational deployments. Commanders must identify their requirements early and establish proactive coordination (both in garrison and while deployed) with their RC counterparts to fully integrate them during all phases of training and operations."

ST 2-91.6 Small Unit Support to Intelligence, March 2004, Chapter 2, paragraphs 2-13 to 2-17, explains the use of interpreters in tactical interrogations. The specific language in the special text follows:

2-13. The use of interpreters is an integral part of the information collection effort. Use of an interpreter is time consuming and potentially confusing. Proper use and control of an interpreter is a skill that must be learned and practiced to maximize the potential of collection.

2-14. Perhaps the most important guideline to remember is that an interpreter is essentially your mouthpiece; he says what you say, but in a different language. This sounds simple, but for those who have never worked with interpreters, problems can quickly develop.

2-15. Upon meeting your interpreter, it is important that you assess his proficiency in English. You need an interpreter with a firm grasp of English and the terminology you may encounter.

2-16. Interpreters are categorized as to capability and clearance they have been granted. The categories below are more fully detailed in Interpreter Ops, Multi-Service Reference Manual for Interpreter Operations, February 2004. This manual can be obtained from the Air Land Sea Application (ALSA) Center.

CATEGORIES OF INTERPRETERS

- CAT I Linguists - Locally hired personnel with an understanding of the English language. These personnel are screened and hired in-theater and do not possess a security clearance. During most operations, CAT I linguists are required to be re-screened by CI personnel on a scheduled basis. CAT I linguists should not be used for HUMINT collection operations.
- CAT II Linguists - CAT II linguists are United States citizens who have native command of the target language and near-native command of the English language. These personnel undergo a screening process, which includes a background check. Upon favorable findings, these personnel are granted an equivalent of a Secret Collateral clearance.
- CAT III Linguists - CAT III linguists are United States citizens who have native command of the target language and native command of the English language. These personnel undergo a screening process, which includes a special background check. Upon favorable findings, these personnel are granted an equivalent of a Top Secret (TS) clearance. CAT III linguists are used mostly for high-ranking official meetings and by strategic collectors.

2-17. The following are several tips that should prove useful when working with an interpreter.

Placement

- When standing, the interpreter should stand just behind you and to the side.
- When sitting, the interpreter should sit right beside you but not between you and the individual.

Body Language and Tone

- Have the interpreter translate your message in the tone you are speaking.

- Ensure the interpreter avoids making gestures.

Delivery

- Talk directly to the person with whom you are speaking, not the interpreter.
- Speak as you would in a normal conversation, not in the third person. For example, do not say, "Tell him that...." Rather say, "I understand that you..." and instruct the interpreter to translate as such.
- Speak clearly, avoid acronyms or slang, and break sentences uniformly to facilitate translation.
- Some interpreters will begin to translate while you are still speaking. This is frustrating for some people. If so, discuss the preference of translation with the interpreter.
- The most important principle to obey while using an interpreter is to remember that you control the conversation, not the interpreter.

Security

- Work on the premise that the interpreter is being debriefed by a threat intelligence service.
- Always assume the worst.
- Avoid careless talk.
- Avoid giving away personal details.
- Do not become emotionally involved!

Interpreter Checklist for Patrolling

- Tell the interpreter what you expect of him, and how you want him to do it.
- Tell the interpreter exactly what you want translated. The interpreter should translate all conversation between you and the individual without adding anything on his own.
- Just as questioning should be conducted in such a way as to disguise the true intent of the questioning from the source, you should not reveal intelligence requirements (FFIR, IR, or essential elements of friendly information [EEFI]) to the interpreter. Brief the interpreter on actions to take at the halt or in the event of enemy contact."

g. Finding 7:

(1) Finding: Tactical Military Intelligence officers are not adequately trained on how to manage the full spectrum of the collection and analysis of human intelligence.

(2) Standard: Army Regulation 350-1, Army Training and Education, 9 April 2003, Chapter 3, paragraph 3-2, requires that TRADOC establish training and education goals and objectives for all Army personnel. The specific language in the regulation follows:

"Training proponents. These would include TRADOC schools and colleges, USAJFKSWC&S and AMEDDC&S and would perform the following.

(a) Develop courses based on established training and education goals and objectives as well as the duties, responsibilities, and missions their graduates will be assigned.

(b) Develop, evaluate, and train leader, technical, and tactical tasks that focus on missions for the size or type units to which graduates will be assigned.

(c) Provide progressive and sequential training.

(d) Provide personnel serving at the same organizational level with training consisting of the same tasks, conditions, and standards.

(e) Provide leader, technical, and tactical training that affords soldiers and DA civilians an opportunity to acquire the skills and knowledge needed to perform more complex duties and missions of greater responsibility."

Field Manual (FM) 7-0, Training the Force, 22 October 2002, Chapter 1, paragraph 1-29, gives overall guidance for the implementation of Professional Military Education (PME). The specific language in the field manual follows:

"Professional Military Education - PME develops Army leaders. Officer, warrant officer, and NCO training and education is a continuous, career-long, learning process that integrates structured programs of instruction—resident at the institution and non-resident via distributed learning at home station. PME is progressive and sequential, provides a doctrinal foundation, and builds on previous training, education and operational experiences. PME provides hands-on technical, tactical, and leader training focused to ensure leaders are prepared for success in their next assignment and higher-level responsibility.

- Officer Education System (OES). Army officers must lead and fight; be tactically and technically competent; possess leader skills; understand how the Army operates as a service, as well as a component of a joint, multinational, or interagency organization; demonstrate confidence, integrity, critical judgment, and responsibility; operate in a complex, uncertain, and rapidly changing environment; build effective teams amid continuous organizational and technological change; and solve problems creatively. OES develops officers who are self-aware and adaptive to lead Army units to mission success.

- Warrant Officer Education System (WOES). Warrant officers are the Army's technical experts. WOES develops a corps of highly specialized experts and trainers who are fully competent and proficient operators, maintainers, administrators, and managers of the Army's equipment, support activities, and technical systems.

- NCO Education System (NCOES). NCOES trains NCOs to lead and train soldiers, crews, and subordinate leaders who work and fight under their leadership. NCOES provides hands-on technical, tactical, and leader training focused to ensure that NCOs are prepared for success in their next assignment and higher-level responsibility.

- Functional Training. In addition to the preceding PME courses, there are functional courses available in both resident and non-resident distributed learning modes that enhance functional skills for specific duty positions. Examples are Battalion S2, Battalion Motor Officer, First Sergeant, Battle Staff NCO, and Airborne courses."

FM 34-52, Intelligence Interrogation, 28 September 1992, Chapter 1, Intelligence Disciplines, states that the Intelligence Electronic Warfare (IEW) system includes three MI disciplines. The specific language in the field manual follows:

"HUMINT -

HUMINT is obtained from information collected from human sources and consists of the following intelligence collection operations. Interrogation of EPWs, civilian detainees, insurgents, defectors, refugees, displaced persons and agents and suspected agents.

- Long-range surveillance patrols.
- Strategic debriefing
- Controlled collection operations
- Open-source exploitation, to include publications and broadcasts.
- Reports of contact from forward units.
- Observation and listening posts
- Low-level source operations (LLSO)
- HUMINT liaison contacts

HUMINT is vital in all combat operations, regardless of echelon or intensity of conflict. By nature, HUMINT lends itself to the collection of information about the enemy's thought processes and intentions. HUMINT can provide information on almost any topic of intelligence interest, including order of battle (OB) factors, as well as scientific and technical (S&T) intelligence subjects. During operation Desert Storm, interrogators collected information which helped to -

- Develop a plan to breach Iraqi defensive belts.
- Confirm Iraqi supply line interdiction by coalition air strikes.
- Identify diminishing Iraqi troop morale.
- Identify a US Prisoner of war captured during the battle of Kanji."

h. **Finding 8:**

(1) Finding: The DAIG Team found that officially approved CJTF-7 and CJTF-180 policies and the early CJTF-180 practices generally met legal obligations under US law, treaty obligations and policy, if executed carefully, by trained soldiers, under the full range of safeguards. The DAIG Team found that policy was not clear and contained ambiguity. The DAIG Team found implementation, training, and oversight of these policies was inconsistent; the Team concluded, however, based on a review of cases through 9 June 2004 that no confirmed instance of detainee abuse resulted from the approved policies.

(2) Standard: Standard of treatment for detainees in OPERATION ENDURING FREEDOM (OEF): The Secretary of Defense determined that members of the Taliban militia and members of Al Qaida under the control of US Forces would be treated humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949. The DAIG has therefore used the provisions of the Geneva Conventions as a benchmark against which to measure the treatment provided to detainees by U.S. Forces to determine if detainees were treated humanely. The use of these standards as benchmarks does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

Chairman, Joint Chiefs of Staff (CJCS) Message dated 211933Z JAN 02, provides the determination regarding the humane treatment of Al Qaida and Taliban detainees. Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW) is the international

treaty that governs the treatment of prisoners of war, and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), August 12, 1949, is the international treaty that governs the treatment of civilian persons in time of war.

As the guidance did not define "humane treatment" but did state that the US would treat members of the Taliban militia and Al Qaida in a manner consistent with the Geneva Conventions, the DAIG determined that it would use Common Article 3 of the GCs as its floor measure of humane treatment, but would also include provisions of the Geneva Convention on the Treatment of Prisoners of War (GPW) and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC) as other relevant indicia of "humane treatment." The use of this standard does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

Standard of treatment for detainees in OPERATION IRAQI FREEDOM (OIF): OIF was an international armed conflict and therefore the provisions of the Geneva Conventions applied. Additionally, the United States was an occupying power and has acted in accordance with the obligations of an occupying power described in the Hague Convention No. IV Respecting the Laws and Customs of War on Land (H.IV), 18 October 1907, including, but not limited to, Articles 43-46 and 50; Geneva Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW), Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), 12 August 1949. The GC supplements H.IV, providing the general standard of treatment at Article 27 and specific standards in subsequent Articles.

The minimum treatment provided by Common Article 3 of the Geneva Conventions is: 1) No adverse distinction based upon race, religion, sex, etc.; 2) No violence to life or person; 3) No taking hostages; 4) No degrading treatment; 5) No passing of sentences in absence of fair trial, and; 6) The wounded and sick must be cared for.

The specific language in the CJCS Message for OEF and the GPW/GC and H.IV follows:

CJCS Message dated 211933Z JAN 02, "Paragraph 3. The combatant commanders shall, in detaining Al Qaida and Taliban individuals under control of the Department of Defense, treat them humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949."

GPW/GC, Article 3 (Common Article 3) – "In the case of armed conflict not of an international character occurring in the territory of one of the High Contracting Parties, each party to the conflict shall be bound to apply, as a minimum, the following provisions:

1. Persons taking no active part in the hostilities, including members of armed forces who have laid down their arms and those placed hors de combat by sickness, wounds, detention, or any other cause, shall in all circumstances be treated humanely, without any adverse distinction founded on race, color, religion or faith, sex, birth or wealth, or any other similar criteria.

To this end the following acts are and shall remain prohibited at any time and in any place whatsoever with respect to the above-mentioned persons:

(a) Violence to life and person, in particular murder of all kinds, mutilation, cruel treatment and torture;

(b) Taking of hostages;
(c) Outrages upon personal dignity, in particular, humiliating and degrading treatment;
(d) The passing of sentences and the carrying out of executions without previous judgment pronounced by a regularly constituted court affording all the judicial guarantees which are recognized as indispensable by civilized peoples.

2. The wounded and sick shall be collected and cared for. An impartial humanitarian body, such as the International Committee of the Red Cross, may offer its services to the Parties to the conflict. The Parties to the conflict should further endeavour to bring into force, by means of special agreements, all or part of the other provisions of the present Convention. The application of the preceding provisions shall not affect the legal status of the Parties to the conflict."

Geneva Convention Relative to the Treatment of Prisoners of War, 12 August 1949, Part II, Article 13, requires that enemy prisoners of war (EPWs) be treated humanely at all times; Part III, Section I, Articles 13, 14, and 17, explain the protections afforded EPWs. The specific language in the convention follows:

"Article 13

Prisoners of war must at all times be humanely treated. Any unlawful act or omission by the Detaining Power causing death or seriously endangering the health of a prisoner of war in its custody is prohibited, and will be regarded as a serious breach of the present Convention. In particular, no prisoner of war may be subjected to physical mutilation or to medical or scientific experiments of any kind which are not justified by the medical, dental or hospital treatment of the prisoner concerned and carried out in his interest.

Likewise, prisoners of war must at all times be protected, particularly against acts of violence or intimidation and against insults and public curiosity.

Measures of reprisal against prisoners of war are prohibited.

Article 14

Prisoners of war are entitled in all circumstances to respect for their persons and their honour. Women shall be treated with all the regard due to their sex and shall in all cases benefit by treatment as favourable as that granted to men. Prisoners of war shall retain the full civil capacity which they enjoyed at the time of their capture. The Detaining Power may not restrict the exercise, either within or without its own territory, of the rights such capacity confers except in so far as the captivity requires."

Article 17

Every prisoner of war, when questioned on the subject, is bound to give only his surname, first names and rank, date of birth, and army, regimental, personal or serial number, or failing this, equivalent information. If he willfully infringes this rule, he may render himself liable to a restriction of the privileges accorded to his rank or status.

Each Party to a conflict is required to furnish the persons under its jurisdiction who are liable to become prisoners of war, with an identity card showing the owner's surname, first names, rank, army, regimental, personal or serial number or equivalent information, and date of

birth. The identity card may, furthermore, bear the signature or the fingerprints, or both, of the owner, and may bear, as well, any other information the Party to the conflict may wish to add concerning persons belonging to its armed forces. As far as possible the card shall measure 6.5 x 10 cm. and shall be issued in duplicate. The identity card shall be shown by the prisoner of war upon demand, but may in no case be taken away from him.

No physical or mental torture, nor any other form of coercion, may be inflicted on prisoners of war to secure from them information of any kind whatever. Prisoners of war who refuse to answer may not be threatened, insulted, or exposed to any unpleasant or disadvantageous treatment of any kind.

Prisoners of war who, owing to their physical or mental condition, are unable to state their identity, shall be handed over to the medical service. The identity of such prisoners shall be established by all possible means, subject to the provisions of the preceding paragraph.

The questioning of prisoners of war shall be carried out in a language which they understand."

Geneva Convention Relative to the Protection of Civilian Persons in Time of War, 12 August 1949, Part III, Section I, Articles 31 32, and 100, prohibit coercion and abuse of civilian internees. The specific language in the convention follows:

"Article 31

No physical or moral coercion shall be exercised against protected persons, in particular to obtain information from them or from third parties.

Article 32

The High Contracting Parties specifically agree that each of them is prohibited from taking any measure of such a character as to cause the physical suffering or extermination of protected persons in their hands. This prohibition applies not only to murder, torture, corporal punishment, mutilation and medical or scientific experiments not necessitated by the medical treatment of a protected person but also to any other measures of brutality whether applied by civilian or military agents."

"Article 100

The disciplinary regime in places of internment shall be consistent with humanitarian principles, and shall internees any physical exertion dangerous to their health or involving physical or moral victimization. Identification by tattooing or imprinting signs or markings on the body, is prohibited. In particular, prolonged standing and roll-calls, punishment drill, military drill and manoeuvres, or the reduction of food rations, are prohibited."

Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, 10 December 1984, Part I, Articles 1,2,10,11 and 16(1) define torture (1), the basic responsibilities of states under the convention (2), the requirement for training personnel on this convention (10), the need to conduct systematic reviews of interrogations rules, instructions, methods and practices (11), and the requirement to prevent acts not amounting to "torture"

committed with consent or acquiescence of a public official or other person in an official capacity (16). The specific language in the convention follows:

"Article 1

1. For the purposes of this Convention, the term "torture" means any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity. It does not include pain or suffering arising only from, inherent in or incidental to lawful sanctions.

2. This article is without prejudice to any international instrument or national legislation which does or may contain provisions of wider application.

Article 2

1. Each State Party shall take effective legislative, administrative, judicial or other measures to prevent acts of torture in any territory under its jurisdiction.

2. No exceptional circumstances whatsoever, whether a state of war or a threat of war, internal political instability or any other public emergency, may be invoked as a justification of torture.

3. An order from a superior officer or a public authority may not be invoked as a justification of torture.

Article 10

1. Each State Party shall ensure that education and information regarding the prohibition against torture are fully included in the training of law enforcement personnel, civil or military, medical personnel, public officials and other persons who may be involved in the custody, interrogation or treatment of any individual subjected to any form of arrest, detention or imprisonment.

2. Each State Party shall include this prohibition in the rules or instructions issued in regard to the duties and functions of any such person.

Article 11

Each State Party shall keep under systematic review interrogation rules, instructions, methods and practices as well as arrangements for the custody and treatment of persons subjected to any form of arrest, detention or imprisonment in any territory under its jurisdiction, with a view to preventing any cases of torture.

Article 16 (1)

Each State Party shall undertake to prevent in any territory under its jurisdiction other acts of cruel, inhuman or degrading treatment or punishment which do not amount to torture as

defined in article I, when such acts are committed by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity. In particular, the obligations contained in articles 10, 11, 12 and 13 shall apply with the substitution for references to torture of references to other forms of cruel, inhuman or degrading treatment or punishment.

US Reservations, Declarations and Understandings the Convention Against Torture. The United States Senate ratified the Convention Against Torture subject to certain reservations, declarations and understandings. Pertinent reservations and understandings are as follow:

Senate Reservations: (136 Cong Rec S 17486):

The Senate's advice and consent is subject to the following reservations:

(1) That the United States considers itself bound by the obligation under article 16 to prevent 'cruel, inhuman or degrading treatment or punishment', only insofar as the term 'cruel, inhuman or degrading treatment or punishment' means the cruel, unusual and inhumane treatment or punishment prohibited by the Fifth, Eighth, and/or Fourteenth Amendments to the Constitution of the United States.

Senate Understandings (136 Cong Rec S 17486):

The Senate's advice and consent is subject to the following understandings, which shall apply to the obligations of the United States under this Convention:

(1) (a) That with reference to article 1, the United States understands that, in order to constitute torture, an act must be specifically intended to inflict severe physical or mental pain or suffering and that mental pain or suffering refers to prolonged mental harm caused by or resulting from (1) the intentional infliction or threatened infliction of severe physical pain or suffering; (2) the administration or application, or threatened administration or application, of mind altering substances or other procedures calculated to disrupt profoundly the senses or the personality; (3) the threat of imminent death; or (4) the threat that another person will imminently be subjected to death, severe physical pain or suffering, or the administration or application of mind altering substances or other procedures calculated to disrupt profoundly the senses or personality.

(b) That the United States understands that the definition of torture in article 1 is intended to apply only to acts directed against persons in the offender's custody or physical control.

(c) That with reference to article 1 of the Convention, the United States understands that 'sanctions' includes judicially-imposed sanctions and other enforcement actions authorized by United States law or by judicial interpretation of such law provided that such sanctions or actions are not clearly prohibited under international law.

(d) That with reference to article 1 of the Convention, the United States understands that the term 'acquiescence' requires that the public official, prior to the activity constituting torture, have awareness of such activity and thereafter breach his legal responsibility to intervene to prevent such activity.

(e) That with reference to article 1 of the Convention, the United States understands that noncompliance with applicable legal procedural standards does not per se constitute torture.

Domestic Criminal Law: US Domestic Criminal law reflects treaty obligations and ratification reservations and understandings regarding torture in the adoption of 18 USCS §§2340, 2340A, which state:

18 USC§ 2340 Definitions

As used in this chapter [18 USCS §§ 2340 et seq.]-

(1) "torture" means an act committed by a person acting under the color of law specifically intended to inflict severe physical or mental pain or suffering (other than pain or suffering incidental to lawful sanctions) upon another person within his custody or physical control;

(2) "severe mental pain or suffering" means the prolonged mental harm caused by or resulting from-

(A) the intentional infliction or threatened infliction of severe physical pain or suffering;

(B) the administration or application, or threatened administration or application, of mind-altering substances or other procedures calculated to disrupt profoundly the senses or the personality;

(C) the threat of imminent death;

(D) the threat that another person will imminently be subjected to death, severe physical pain or suffering, or the administration or application of mind-altering substances or other procedures calculated to disrupt profoundly the senses or personality; and

(3) "United States" includes all areas under the jurisdiction of the United States including any of the places described in sections 5 and 7 of this title and section 46501(2) of title 49.

§ 2340A. Torture

(a) Offense. Whoever outside the United States commits or attempts to commit torture shall be fined under this title or imprisoned not more than 20 years, or both, and if death results to any person from conduct prohibited by this subsection, shall be punished by death or imprisoned for any term of years or for life.

(b) Jurisdiction. There is jurisdiction over the activity prohibited in subsection (a) if--

(1) the alleged offender is a national of the United States; or

(2) the alleged offender is present in the United States, irrespective of the nationality of the victim or alleged offender.

(c) Conspiracy. A person who conspires to commit an offense under this section shall be subject to the same penalties (other than the penalty of death) as the penalties prescribed for the offense, the commission of which was the object of the conspiracy.

Field Manual (FM) 34-52, Intelligence Interrogation, 28 September 1992, Chapter 1, explains the prohibitions against use of torture or coercion. Chapter 3 describes the interrogation approaches and techniques used by trained Army interrogators. The specific language in the field manual follows:

Chapter 1 – "One of the significant means used by the intelligence staff is the interrogation of the following:

- EPWs.
- Captured insurgents.
- Civilian internees.
- Other captured, detained, or retained persons.
- Foreign deserters or other persons of intelligence interest.

These persons are protected by the Geneva Conventions for the Protection of War Victims of August 12, 1949, as they relate to captured wounded and sick enemy personnel (GWS), retained enemy medical personnel and chaplains (GWS), enemy prisoners of war (GPW), and civilian internees (GC). Captured insurgents and other detained personnel whose status is not clear, such as suspected terrorists, are entitled to PW protection until their precise status has been determined by competent authority.

In conducting intelligence interrogations, the J2, G2, or S2 has primary staff responsibility to ensure these activities are performed in accordance with the GWS, GPW, and GC, as well as US policies, regarding the treatment and handling of the above-mentioned persons.

The GWS, GPW, GC, and US policy expressly prohibit acts of violence or intimidation, including physical or mental torture, threats, insults, or exposure to inhumane treatment as a means of or aid to interrogation.

Such illegal acts are not authorized and will not be condoned by the US Army. Acts in violation of these prohibitions are criminal acts punishable under the UCMJ. If there is doubt as to the legality of a proposed form of interrogation not specifically authorized in this manual, the advice of the command judge advocate should be sought before using the method in question.

Experience indicates that the use of prohibited techniques is not necessary to gain the cooperation of interrogation sources. Use of torture and other illegal methods is a poor technique that yields unreliable results, may damage subsequent collection efforts, and can induce the source to say what he thinks the interrogator wants to hear.

Revelation of use of torture by US personnel will bring discredit upon the US and its armed forces while undermining domestic and international support for the war effort. It also may place US and allied personnel in enemy hands at a greater risk of abuse by their captors. Conversely, knowing the enemy has abused US and allied PWs does not justify using methods of interrogation specifically prohibited by the GWS, GPW, or GC, and US policy.

Limitations on the use of methods identified herein as expressly prohibited should not be confused with psychological ploys, verbal trickery, or other nonviolent or noncoercive ruses used by the interrogator in the successful interrogation of hesitant or uncooperative sources.

The psychological techniques and principles in this manual should neither be confused with, nor construed to be synonymous with, unauthorized techniques such as brainwashing, physical or mental torture, or any other form of mental coercion to include drugs that may induce lasting and permanent mental alteration and damage.

Physical or mental torture and coercion revolve around eliminating the source's free will, and are expressly prohibited by GWS, Article 13; GPW, Articles 13 and 17; and GC, Articles 31 and 32. Torture is defined as the infliction of intense pain to body or mind to extract a confession or information, or for sadistic pleasure.

Examples of physical torture include—

- Electric shock.
- Infliction of pain through chemicals or bondage (other than legitimate use of restraints to prevent escape).
- Forcing an individual to stand, sit, or kneel in abnormal positions for prolonged periods of time.
- Food deprivation.
- Any form of beating.

Examples of mental torture include—

- Mock executions.
- Abnormal sleep deprivation.
- Chemically induced psychosis.

Coercion is defined as actions designed to unlawfully induce another to compel an act against one's will. Examples of coercion include—

- Threatening or implying physical or mental torture to the subject, his family, or others to whom he owes loyalty.
- Intentionally denying medical assistance or care in exchange for the information sought or other cooperation.
- Threatening or implying that other rights guaranteed by the GWS, GPW, or GC will not be provided unless cooperation is forthcoming.

Chapter 3 – "The number of approaches used is limited only by the interrogator's skill. Almost any ruse or deception is usable as long as the provisions of the GPW, as outlined in Figure 1-4, are not violated.

An interrogator must not pass himself off as a medic, chaplain, or as a member of the Red Cross (Red Crescent or Red Lion). To every approach technique, there are literally hundreds of possible variations, each of which can be developed for a specific situation or source. The variations are limited only by the interrogator's personality, experience, ingenuity, and imagination.

3-7 There are four primary factors that must be considered when selecting tentative approaches:

- The source's mental and physical state. Is the source injured, angry, crying, arrogant, cocky, or frightened? If so, how can this state be best exploited during interrogation.
- The source's background. What is the source's age and level of military or civilian experience.
- The objective of the interrogation. How much time is available for the interrogation? Is the commander interested only in specific areas (PIR, IR, SIR)? Is this source knowledgeable enough to require a full OB interrogation?
- The interrogator himself. What abilities does he have that can be brought into play? What weaknesses does he have that may interfere with the interrogation? Can his personality adapt to the personality of the source?

APPROACH COMBINATIONS

With the exception of the direct approach, no other approach is effective by itself. Interrogators use different approach techniques or combine them into a cohesive, logical technique. Smooth transitions, sincerity, logic, and conviction almost always make a strategy work. The lack of will undoubtedly dooms it to failure. Some examples of combinations are—

Direct—futility—incentive.

Direct—futility—love of comrades.

Direct—fear-up (mild)—incentive.

The number of combinations are unlimited. Interrogators must carefully choose the approach strategy in the planning and preparation phase and listen carefully to what the source is saying (verbally or nonverbally) for leads the strategy chosen will not work. When this occurs, the interrogator must adapt to approaches he believes will work in gaining the source's cooperation.

The approach techniques are not new nor are all the possible or acceptable techniques discussed below. Everything the interrogator says and does must be in concert with the GWS, GPW, GC, and UCMJ. The approaches which have proven effective are—

- Direct.
- Incentive.
- Emotional.
- Increased fear-up.
- Pride and ego.

Direct Approach

The interrogator asks questions directly related to information sought, making no effort to conceal the interrogation's purpose. The direct approach, always the first to be attempted, is used on EPWs or detainees who the interrogator believes will cooperate.

This may occur when interrogating an EPW or detainee who has proven cooperative during initial screening or first interrogation. It may also be used on those with little or no security training. The direct approach works best on lower enlisted personnel, as they have little or no resistance training and have had minimal security training.

The direct approach is simple to use, and it is possible to obtain the maximum amount of information in the minimum amount of time. It is frequently employed at lower echelons when the tactical situation precludes selecting other techniques, and where the EPW's or detainee's mental state is one of confusion or extreme shock. Figure C-3 contains sample questions used in direct questioning.

The direct approach is the most effective. Statistics show in World War II, it was 90 percent effective. In Vietnam and OPERATIONS URGENT FURY, JUST CAUSE, and DESERT STORM, it was 95 percent effective.

Incentive Approach

The incentive approach is based on the application of inferred discomfort upon an EPW or detainee who lacks willpower. The EPW or detainee may display fondness for certain luxury items such as candy, fruit, or cigarettes. This fondness provides the interrogator with a positive means of rewarding the EPW or detainee for cooperation and truthfulness, as he may give or withhold such comfort items at his discretion. Caution must be used when employing this technique because—

- Any pressure applied in this manner must not amount to a denial of basic human needs under any circumstances. [NOTE: Interrogators may not withhold a source's rights under the GPW, but they can withhold a source's privileges.] Granting incentives must not infringe on these rights, but they can be things to which the source is already entitled. This can be effective only if the source is unaware of his rights or privileges.
- The EPW or detainee might be tempted to provide false or inaccurate information to gain the desired luxury item or to stop the interrogation.

The GPW, Article 41, requires the posting of the convention contents in the EPW's own language. This is an MP responsibility.

Incentives must seem to be logical and possible. An interrogator must not promise anything that cannot be delivered. Interrogators do not make promises, but usually infer them while sidestepping guarantees.

For example, if an interrogator made a promise he could not keep and he or another interrogator had to talk with the source again, the source would not have any trust and would probably not cooperate. Instead of clearly promising a certain thing, such as political asylum, an interrogator will offer to do what he can to help achieve the source's desired goal; as long as the source cooperates.

As with developing rapport, the incentive approach can be broken down into two incentives. The determination rests on when the source expects to receive the incentive offered.

- Short term—received immediately; for example, letter home, seeing wounded buddies.
- Long term—received within a period of time; for example, political asylum.

Emotional Approach

Through EPW or detainee observation, the interrogator can often identify dominant emotions which motivate. The motivating emotion may be greed, love, hate, revenge, or others. The interrogator employs verbal and emotional ruses in applying pressure to the EPW's or detainee's dominant emotions.

One major advantage of this technique is it is versatile and allows the interrogator to use the same basic situation positively and negatively.

For example, this technique can be used on the EPW who has a great love for his unit and fellow soldiers. The interrogator may take advantage of this by telling the EPW that by providing pertinent information, he may shorten the war or battle in progress and save many of his comrades' lives, but his refusal to talk may cause their deaths. This places the burden on the EPW or detainee and may motivate him to seek relief through cooperation.

Conversely, this technique can also be used on the EPW or detainee who hates his unit because it withdrew and left him to be captured, or who feels he was unfairly treated in his unit. In such cases, the interrogator can point out that if the EPW cooperate and specifies the unit's location, the unit can be destroyed, thus giving the EPW an opportunity for revenge. The interrogator proceeds with this method in a very formal manner.

This approach is likely to be effective with the immature and timid EPW.

Emotional Love Approach. For the emotional love approach to be successful, the interrogator must focus on the anxiety felt by the source about the circumstances in which he finds himself. The interrogator must direct the love the source feels toward the appropriate object: family, homeland, or comrades. If the interrogator can show the source what the source himself can do to alter or improve his situation, the approach has a chance of success.

This approach usually involves some incentive such as communication with the source's family or a quicker end to the war to save his comrades' lives. A good interrogator will usually orchestrate some futility with an emotional love approach to hasten the source's reaching the breaking point.

Sincerity and conviction are critical in a successful attempt at an emotional love approach as the interrogator must show genuine concern for the source, and for the object at which the interrogator is directing the source's emotion.

If the interrogator ascertains the source has great love for his unit and fellow soldiers, the interrogator can effectively exploit the situation. This places a burden on the source and may motivate him to seek relief through cooperation with the interrogator.

Emotional Hate Approach. The emotional hate approach focuses on any genuine hate, or possibly a desire for revenge, the source may feel. The interrogator must ascertain exactly what it is the source may hate so the emotion can be exploited to override the source's rational

side. The source may have negative feelings about his country's regime, immediate superiors, officers in general, or fellow soldiers.

This approach is usually most effective on members of racial or religious minorities who have suffered discrimination in military and civilian life. If a source feels he has been treated unfairly in his unit, the interrogator can point out that, if the source cooperates and divulges the location of that unit, the unit can be destroyed, thus affording the source revenge.

By using a conspiratorial tone of voice, the interrogator can enhance the value of this technique. Phrases, such as "You owe them no loyalty for the way they treated you," when used appropriately, can expedite the success of this technique.

Do not immediately begin to berate a certain facet of the source's background or life until your assessment indicates the source feels a negative emotion toward it.

The emotional hate approach can be used more effectively by drawing out the source's negative emotions with questions that elicit a thought-provoking response. For example, "Why do you think they allowed you to be captured?" or "Why do you think they left you to die?" Do not berate the source's forces or homeland unless certain negative emotions surface.

Many sources may have great love for their country, but may hate the regime in control. The emotional hate approach is most effective with the immature or timid source who may have no opportunity up to this point for revenge, or never had the courage to voice his feelings.

Fear-Up Approach

The fear-up approach is the exploitation of a source's preexisting fear during the period of capture and interrogation. The approach works best with young, inexperienced sources, or sources who exhibit a greater than normal amount of fear or nervousness. A source's fear may be justified or unjustified. For example, a source who has committed a war crime may justifiably fear prosecution and punishment. In contrast, a source who has been indoctrinated by enemy propaganda may unjustifiably fear that he will suffer torture or death in or hand if captured.

This approach has the greatest potential to violate the law of war. Great care must be taken to avoid threatening or coercing a source which is in violation of the GPW, Article 17.

It is critical the interrogator distinguish what the source fears in order to exploit that fear. The way in which the interrogator exploits the source's fear depends on whether the source's fear is justified or unjustified.

Fear-Up (Harsh). In this approach, the interrogator behaves in an overpowering manner with a loud and threatening voice. The interrogator may even feel the need to throw objects across the room to heighten the source's implanted feelings of fear. Great care must be taken when doing this so any actions would not violate the prohibition on coercion and threats contained in the GPW, Article 17.

This technique is to convince the source he does indeed have something to fear; that he has no option but to cooperate. A good interrogator will implant in the source's mind that the interrogator himself is not the object to be feared, but is a possible way out of the trap.

Use the confirmation of fear only on sources whose fear is justified. During this approach, confirm to the source that he does indeed have a legitimate fear. Then convince the source that you are the source's best or only hope in avoiding or mitigating the object of his fear, such as punishment for his crimes.

You must take great care to avoid promising actions that are not in your power to grant. For example, if the source has committed a war crime, inform the source that the crime has been reported to the appropriate authorities and that action is pending. Next inform the source that, if he cooperates and tells the truth, you will report that he cooperated and told the truth to the appropriate authorities. You may add that you will also report his lack of cooperation. You may not promise that the charges against him will be dismissed because you have no authority to dismiss the charges.

Fear-Up (Mild). This approach is better suited to the strong, confident type of interrogator; there is generally no need to raise the voice or resort to heavy-handed, table-banging.

For example, capture may be a result of coincidence—the soldier was caught on the wrong side of the border before hostilities actually commenced (he was armed, he could be a terrorist)—or as a result of his actions (he surrendered contrary to his military oath and now a traitor to his country, and his forces will take care of the disciplinary action).

The fear-up (mild) approach must be credible. It usually involves some logical incentive.

In most cases, a loud voice is not necessary. The actual fear is increased by helping the source realize the unpleasant consequences the facts may cause and by presenting an alternative, which, of course, can be brought about by answering some simple questions.

The fear-up (harsh) approach is usually a dead end, and a wise interrogator may want to keep it in reserve as a trump card. After working to increase the source's fear, it would be difficult to convince him everything will be all right if the approach is not successful.

Fear-Down Approach

This technique is nothing more than calming the source and convincing him he will be properly and humanely treated, or telling him the war for him is mercifully over and he need not go into combat again. When used with a soothing, calm tone of voice, this often creates rapport and usually nothing else is needed to get the source to cooperate.

While calming the source, it is a good idea to stay initially with nonpertinent conversation and to avoid the subject which has caused the source's fear. This works quickly in developing rapport and communication, as the source will readily respond to kindness.

When using this approach, it is important the interrogator relate to the source at his perspective level and not expect the source to come up to the interrogator's level.

If the EPW or detainee is so frightened he has withdrawn into a shell or regressed to a less threatening state of mind, the interrogator must break through to him. The interrogator can do this by putting himself on the same physical level as the source; this may require some physical contact. As the source relaxes and begins to respond to kindness, the interrogator can begin asking pertinent questions.

This approach technique may backfire if allowed to go too far. After convincing the source he has nothing to fear, he may cease to be afraid and may feel secure enough to resist the interrogator's pertinent question. If this occurs, reverting to a harsher approach technique usually will bring the desired result quickly.

The fear-down approach works best if the source's fear is unjustified. During this approach, take specific actions to reduce the source's unjustified fear. For example, if the source believes that he will be abused while in your custody, make extra efforts to ensure that the source is well cared for, fed, and appropriately treated.

Once the source is convinced that he has no legitimate reason to fear you, he will be more inclined to cooperate. The interrogator is under no duty to reduce a source's unjustified fear. The only prohibition is that the interrogator may not say or do anything that directly or indirectly communicates to the source that he will be harmed unless he provides the requested information.

These applications of the fear approach may be combined to achieve the desired effect. For example, if a source has justified and unjustified fears, you may initially reduce the source's unfounded fears, and then confirm his legitimate fears. Again, the source should be convinced the interrogator is his best or only hope in avoiding or mitigating the object of his fear.

Pride and Ego Approach

The strategy of this approach is to trick the source into revealing desired information by goading or flattering him. It is effective with sources who have displayed weakness or feelings of inferiority. A real or imaginary deficiency voiced about the source, loyalty to his organization, or any other feature can provide a basis for this technique.

The interrogator accuses the source of weakness or implies he is unable to do a certain thing. This type of source is also prone to excuses and reasons why he did or did not do a certain thing, often shifting the blame to others. An example is opening the interrogation with the question, "Why did you surrender so easily when you could have escaped by crossing the nearby ford in the river?"

The source is likely to provide a basis for further questions or to reveal significant intelligence information if he attempts to explain his surrender in order to vindicate himself. He may give an answer such as, "No one could cross the ford because it is mined."

This technique can also be employed in another manner--by flattering the source into admitting certain information in order to gain credit. For example, while interrogating a suspected saboteur, the interrogator states: "This was a smooth operation. I have seen many previous attempts fail. I bet you planned this. Who else but a clever person like you would have planned it? When did you first decide to do the job?"

This technique is especially effective with the source who has been looked down upon by his superiors. The source has the opportunity to show someone he is intelligent.

A problem with the pride and ego approach is it relies on trickery. The source will eventually realize he has been tricked and may refuse to cooperate further. If this occurs, the interrogator can easily move into a fear-up approach and convince the source the questions he has already answered have committed him, and it would be useless to resist further.

The interrogator can mention it will be reported to the source's forces that he has cooperated fully with the enemy, will be considered a traitor, and has much to fear if he is returned to his forces.

This may even offer the interrogator the option to go into a love-of-family approach where the source must protect his family by preventing his forces from learning of his duplicity or collaboration. Telling the source you will not report that he talked or that he was a severe discipline problem is an incentive that may enhance the effectiveness of the approach.

Pride and Ego-Up Approach. This approach is most effective on sources with little or no intelligence, or on those who have been looked down upon for a long time. It is very effective on low-ranking enlisted personnel and junior grade officers, as it allows the source to finally show someone he does indeed have some "brains."

The source is constantly flattered into providing certain information in order to gain credit. The interrogator must take care to use a flattering somewhat-in-awe tone of voice, and speak highly of the source throughout this approach. This quickly produces positive feelings on the source's part, as he has probably been looking for this type of recognition all of his life.

The interrogator may blow things out of proportion using items from the source's background and making them seem noteworthy or important. As everyone is eager to hear praise, the source will eventually reveal pertinent information to solicit more laudatory comments from the interrogator.

Effective targets for a successful pride and ego-up approach are usually the socially accepted reasons for flattery, such as appearance and good military bearing. The interrogator should closely watch the source's demeanor for indications the approach is working. Some indications to look for are—

- Raising of the head.
- A look of pride in the eyes.
- Swelling of the chest.
- Stiffening of the back.

Pride and Ego-Down Approach. This approach is based on attacking the source's sense of personal worth. Any source who shows any real or imagined inferiority or weakness about himself, loyalty to his organization, or captured under embarrassing circumstances, can be easily broken with this approach technique.

The objective is for the interrogator to pounce on the source's sense of pride by attacking his loyalty, intelligence, abilities, leadership qualities, slovenly appearance, or any other perceived weakness. This will usually goad the source into becoming defensive, and he will try to convince the interrogator he is wrong. In his attempt to redeem his pride, the source will usually involuntarily provide pertinent information in attempting to vindicate himself.

A source susceptible to this approach is also prone to make excuses and give reasons why he did or did not do a certain thing, often shifting the blame to others. If the interrogator uses a sarcastic, caustic tone of voice with appropriate expressions of distaste or disgust, the source will readily believe him. Possible targets for the pride and ego-down approach are the source's—

- Loyalty.
- Technical competence.
- Leadership abilities.
- Soldierly qualities.
- Appearance.

The pride and ego-down approach is also a dead end in that, if unsuccessful, it is difficult for the interrogator to recover and move to another approach and reestablish a different type of rapport without losing all credibility.

Futility

In this approach, the interrogator convinces the source that resistance to questioning is futile. When employing this technique, the interrogator must have factual information. These facts are presented by the interrogator in a persuasive, logical manner. He should be aware of and able to exploit the source's psychological and moral weaknesses, as well as weaknesses inherent in his society.

The futility approach is effective when the interrogator can play on doubts that already exist in the source's mind. There are different variations of the futility approach. For example:

- Futility of the personal situation—"You are not finished here until you answer the question."
- Futility in that "everyone talks sooner or later."
- Futility of the battlefield situation.
- Futility in the sense if the source does not mind talking about history, why should he mind talking about his missions, they are also history.

If the source's unit had run out of supplies (ammunition, food, or fuel), it would be somewhat easy to convince him all of his forces are having the same logistical problems. A soldier who has been ambushed may have doubts as to how he was attacked so suddenly. The interrogator should be able to talk him into believing that the interrogator's forces knew of the EPW's unit location, as well as many more units.

The interrogator might describe the source's frightening recollections of seeing death on the battlefield as an everyday occurrence for his forces. Factual or seemingly factual information must be presented in a persuasive, logical manner, and in a matter-of-fact tone of voice.

Making the situation appear hopeless allows the source to rationalize his actions, especially if that action is cooperating with the interrogator. When employing this technique, the interrogator must not only have factual information but also be aware of and exploit the source's psychological, moral, and sociological weaknesses.

Another way of using the futility approach is to blow things out of proportion. If the source's unit was low on, or had exhausted, all food supplies, he can be easily led to believe all

of his forces had run out of food. If the source is hinging on cooperating, it may aid the interrogation effort if he is told all the other source's have cooperated.

The futility approach must be orchestrated with other approach techniques (for example, love of comrades). A source who may want to help save his comrades' lives may be convinced the battlefield situation is hopeless and they will die without his assistance.

The futility approach is used to paint a bleak picture for the prisoner, but it is not effective in and of itself in gaining the source's cooperation.

We Know All

This approach may be employed in conjunction with the "file and dossier" technique (discussed below) or by itself. If used alone, the interrogator must first become thoroughly familiar with available data concerning the source. To begin the interrogation, the interrogator asks questions based on this known data. When the source hesitates, refuses to answer, or provides an incorrect or incomplete reply, the interrogator provides the detailed answer.

When the source begins to give accurate and complete information, the interrogator interjects questions designed to gain the needed information. Questions to which answers are already known are also asked to test the source's truthfulness and to maintain the deception that the information is already known. By repeating this procedure, the interrogator convinces the source that resistance is useless as everything is already known.

After gaining the source's cooperation, the interrogator still tests the extent of cooperation by periodically using questions to which he has the answers; this is very necessary. If the interrogator does not challenge the source when he is lying, the source will know everything is not known, and he has been tricked. He may then provide incorrect answers to the interrogator's questions.

There are some inherent problems with the use of the "we know all" approach. The interrogator is required to prepare everything in detail, which is time consuming. He must commit much of the information to memory, as working from notes may show the limits of the information actually known.

File and Dossier

The file and dossier approach is used when the interrogator prepares a dossier containing all available information obtained from documents concerning the source or his organization. Careful arrangement of the material within the file may give the illusion it contains more data than actually there. The file may be padded with extra paper, if necessary. Index tabs with titles such as education, employment, criminal record, military service, and others are particularly effective.

The interrogator confronts the source with the dossiers at the beginning of the interrogation and explains intelligence has provided a complete record of every significant happening in the source's life; therefore, it would be useless to resist. The interrogator may read a few selected bits of known data to further impress the source.

If the technique is successful, the source will be intimidated by the size of the file, conclude everything is known, and resign himself to complete cooperation. The success of this

technique is largely dependent on the naiveté of the source, volume of data on the subject, and skill of the interrogator in convincing the source.

Establish Your Identity

This approach is especially adaptable to interrogation. The interrogator insists the source has been correctly identified as an infamous individual wanted by higher authorities on serious charges, and he is not the person he purports to be. In an effort to clear himself of this allegation, the source makes a genuine and detailed effort to establish or substantiate his true identity. In so doing, he may provide the interrogator with information and leads for further development.

The "establish your identity" approach was effective in Viet Nam with the Viet Cong and in OPERATIONS JUST CAUSE and DESERT STORM.

This approach can be used at tactical echelons. The interrogator must be aware if it is used in conjunction with the file and dossier approach, as it may exceed the tactical interrogator's preparation resources.

The interrogator should initially refuse to believe the source and insist he is the criminal wanted by the ambiguous higher authorities. This will force the source to give even more detailed information about his unit in order to convince the interrogator he is who he says he is. This approach works well when combined with the "futility" or "we know all" approach.

Repetition

This approach is used to induce cooperation from a hostile source. In one variation of this approach, the interrogator listens carefully to a source's answer to a question, and then repeats the question and answer several times. He does this with each succeeding question until the source become so thoroughly bored with the procedure he answers questions fully and candidly to satisfy the interrogator and gain relief from the monotony of this method.

The repetition technique must be judiciously used, as it will generally be ineffective when employed against introverted sources or those having great self-control. In fact, it may provide an opportunity for a source to regain his composure and delay the interrogation. In this approach, the use of more than one interrogator or a tape recorder has proven effective.

Rapid Fire

This approach involves a psychological ploy based upon the principles that—

- Everyone likes to be heard when he speaks.
- It is confusing to be interrupted in mid-sentence with an unrelated question.

This approach may be used by one or simultaneously by two or more interrogators in questioning the same source. In employing this technique, the interrogator asks a series of questions in such a manner that the source does not have time to answer a question completely before the next one is asked.

This confuses the source and he will tend to contradict himself, as he has little time to formulate his answers. The interrogator then confronts the source with the inconsistencies causing further contradictions.

In many instances, the source will begin to talk freely in an attempt to explain himself and deny the interrogator's claims of inconsistencies. In this attempt, the source is likely to reveal more than he intends, thus creating additional leads for further exploitation. This approach may be orchestrated with the pride and ego-down or fear-up approaches.

Besides extensive preparation, this approach requires an experienced and competent interrogator, with comprehensive case knowledge and fluency in the source's language.

Silent

This approach may be successful when used against the nervous or confident source. When employing this technique, the interrogator says nothing to the source, but looks him squarely in the eye, preferably with a slight smile on his face. It is important not to look away from the source but force him to break eye contact first.

The source may become nervous, begin to shift in his chair, cross and recross his legs, and look away. He may ask questions, but the interrogator should not answer until he is ready to break the silence. The source may blurt out questions such as, "Come on now, what do you want with me?"

When the interrogator is ready to break silence, he may do so with some nonchalant questions such as, "You planned this operation for a long time, didn't you? Was it your idea?" The interrogator must be patient when using this technique. It may appear the technique is not succeeding, but usually will when given a reasonable chance.

Change of Scene

The idea in using this approach is to get the source away from the atmosphere of an interrogation room or setting. If the interrogator confronts a source who is apprehensive or frightened because of the interrogation environment, this technique may prove effective.

In some circumstances, the interrogator may be able to invite the source to a different setting for coffee and pleasant conversation. During the conversation in this more relaxed environment, the interrogator steers the conversation to the topic of interest. Through this somewhat indirect method, he attempts to elicit the desired information. The source may never realize he is being interrogated.

Another example in this approach is an interrogator poses as a compound guard and engages the source in conversation, thus eliciting the desired information."

i. **Finding 9:**

(1) Finding: Interviewed leaders and Soldiers stated the unit's morale (71%) and command climate (68%) had steadily improved due to competent leadership, caring of Soldiers by leaders, and better working and living conditions as the theater matured.

(2) Standard: Army Regulation (AR) 600-20, Army Command Policy, 13 May 2002, Chapter 1, paragraph 1-5, subparagraph c (1) and (4)(c), prescribes the policies and responsibilities of command. The specific language in the regulation follows:

"c. Characteristics of command leadership.

(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.

"(4) Professionally competent leaders will develop respect for their authority by-

"(c) Properly training their soldiers and ensuring that both soldiers and equipment are in the proper state of readiness at all times. Commanders should assess the command climate periodically to analyze the human dimension of combat readiness. Soldiers must be committed to accomplishing the mission through the unit cohesion developed as a result of a healthy leadership climate established by the command. Leaders at all levels promote the individual readiness of their soldiers by developing competence and confidence in their subordinates. In addition to being mentally, physically, tactically, and technically competent, soldiers must have confidence in themselves, their equipment, their peers, and their leaders. A leadership climate in which all soldiers are treated with fairness, justice, and equity will be crucial to development of this confidence within soldiers. Commanders are responsible for developing disciplined and cohesive units sustained at the highest readiness level possible."

j. Finding 10:

(1) Finding: Detainee administration, internment, and intelligence exploitation policy and doctrine does not address detainee operations conducted in the current operating environment, which has a higher demand for human intelligence exploitation at the tactical level and the need for additional classifications of detainees.

(2) Standard: Standard of treatment for detainees in OPERATION ENDURING FREEDOM (OEF): Chairman, Joint Chiefs of Staff (CJCS) message dated 211933Z JAN 02 states that members of the Taliban militia and members of Al Qaida under the control of US Forces would be treated humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949. The DAIG has therefore used the provisions of the Geneva Conventions as a benchmark against which to measure the treatment provided to detainees by U.S. Forces to determine if detainees were treated humanely. The use of these standards as benchmarks does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

CJCS Message dated 211933Z JAN 02, provides the determination regarding the humane treatment of Al Qaida and Taliban detainees. Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW) is the international treaty that governs the treatment of prisoners of war; and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), August 12, 1949 is the international treaty that governs the treatment of civilian persons in time of war.

As the guidance did not define "humane treatment" but did state that the US would treat members of the Taliban militia and Al Qaida in a manner consistent with the Geneva Conventions, the DAIG determined that it would use Common Article 3 of the GCs as its floor measure of humane treatment, but would also include provisions of the Geneva Convention on the Treatment of Prisoners of War (GPW) and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC) as other relevant indicia of "humane treatment." The use of this standard does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

Standard of treatment for detainees in OPERATION IRAQI FREEDOM (OIF): OIF was an international armed conflict and therefore the provisions of the Geneva Conventions applied. Additionally, the United States was an occupying power and has acted in accordance with the obligations of an occupying power described in the Hague Convention No. IV Respecting the Laws and Customs of War on Land (H.IV), Oct. 18, 1907, including, but not limited to Articles 43-46 and 50; Geneva Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW), Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), August 12, 1949. The GC supplements H.IV, providing the general standard of treatment at Article 27 and specific standards in subsequent Articles.

The minimum treatment provided by Common Article 3 of the Geneva Conventions is: (1) No adverse distinction based upon race, religion, sex, etc.; (2) No violence to life or person; (3) No taking hostages; (4) No degrading treatment; (5) No passing of sentences in absence of fair trial, and; (6) The wounded and sick must be cared for.

The specific language in the CJCS Message for OEF and the GPW/GC and H.IV follows:

CJCS Message dated 211933Z JAN 02, "Paragraph 3. The combatant commanders shall, in detaining Al Qaida and Taliban individuals under the control of the Department of Defense, treat them humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949."

GPW/GC, Article 3 (Common Article 3) – "In the case of armed conflict not of an international character occurring in the territory of one of the High Contracting Parties, each party to the conflict shall be bound to apply, as a minimum, the following provisions:

1. Persons taking no active part in the hostilities, including members of armed forces who have laid down their arms and those placed hors de combat by sickness, wounds, detention, or any other cause, shall in all circumstances be treated humanely, without any adverse distinction founded on race, color, religion or faith, sex, birth or wealth, or any other similar criteria.

To this end the following acts are and shall remain prohibited at any time and in any place whatsoever with respect to the above-mentioned persons:

- (a) Violence to life and person, in particular murder of all kinds, mutilation, cruel treatment and torture;
- (b) Taking of hostages;
- (c) Outrages upon personal dignity, in particular, humiliating and degrading treatment;

(d) The passing of sentences and the carrying out of executions without previous judgment pronounced by a regularly constituted court affording all the judicial guarantees which are recognized as indispensable by civilized peoples.

2. The wounded and sick shall be collected and cared for. An impartial humanitarian body, such as the International Committee of the Red Cross, may offer its services to the Parties to the conflict. The Parties to the conflict should further endeavour to bring into force, by means of special agreements, all or part of the other provisions of the present Convention. The application of the preceding provisions shall not affect the legal status of the Parties to the conflict."

The following specific provisions of GPW and GC apply:

"Article 18 – All effects and articles of personal use, except arms, horses, military equipment and military documents, shall remain in the possession of prisoners of war, likewise their metal helmets and gas masks and like articles issued for personal protection. Effects and articles used for their clothing or feeding shall likewise remain in their possession, even if such effects and articles belong to their regulation military equipment. At no time should prisoners of war be without identity documents. The Detaining Power shall supply such documents to prisoners of war who possess none. Badges of rank and nationality, decorations and articles having above all a personal or sentimental value may not be taken from prisoners of war. Sums of money carried by prisoners of war may not be taken away from them except by order of an officer, and after the amount and particulars of the owner have been recorded in a special register and an itemized receipt has been given, legibly inscribed with the name, rank and unit of the person issuing the said receipt. Sums in the currency of the Detaining Power, or which are changed into such currency at the prisoner's request, shall be placed to the credit of the prisoner's account as provided in Article 64. The Detaining Power may withdraw articles of value from prisoners of war only for reasons of security; when such articles are withdrawn, the procedure laid down for sums of money impounded shall apply. Such objects, likewise sums taken away in any currency other than that of the Detaining Power and the conversion of which has not been asked for by the owners, shall be kept in the custody of the Detaining Power and shall be returned in their initial shape to prisoners of war at the end of their captivity.

Article 19 – Prisoners of war shall be evacuated, as soon as possible after their capture, to camps situated in an area far enough from the combat zone for them to be out of danger. Only those prisoners of war who, owing to wounds or sickness, would run greater risks by being evacuated than by remaining where they are, may be temporarily kept back in a danger zone. Prisoners of war shall not be unnecessarily exposed to danger while awaiting evacuation from a fighting zone."

Department of Defense Directive (DoDD) 2310.1, DoD Program for Enemy Prisoners of War (EPOW) and Other Detainees, 18 August 1994, Paragraph 3.3, requires the application of appropriate legal status, transfer and release authority and authorization. Paragraph 3.4 directs the handing over of detainees to Military Police and provides for intelligence collection. Paragraph 4.4 assigns responsibility for treatment, classification, administrative processing, and custody for detainees. The specific language in the directive follows:

"3.3 Captured or detained personnel shall be accorded an appropriate legal status under international law. Persons captured or detained may be transferred to or from the care, custody, and control of the U.S. Military Services only on approval of the Assistant Secretary of Defense for International Security Affairs (ASD(ISA)) and as authorized by the Geneva Conventions

Relative to the Treatment of Prisoners of War and for the Protection of Civilian Persons in Time of War (references (d) and (e)).

3.4 Persons captured or detained by the U.S. Military Services 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. Detainees may be interviewed for intelligence collection purposes at facilities and installations operated by U.S. Army Military Police."

"4.4. The Commanders of the Unified Combatant Commands shall:

4.4.2. Provide for the proper treatment, classification, administrative processing, and custody of those persons captured or detained by the Military Services under their command and control. "Department of Defense Directive (DoDD) 2310.1, DoD Program for Enemy Prisoners of War (EPOW) and Other Detainees, 18 August 1994, Paragraph 1.1, reissues responsibility, specifically assigning the Army as Executive Agent for the DoD Program for Enemy Prisoners of War (EPOW) and Other Detainees. The specific language in the directive follows:

"1.1. Reissues reference (a) to update policy and responsibilities within the Department of Defense for a program to ensure implementation of the international law of war, both customary and codified, about EPOW, to include the enemy sick or wounded, retained personnel, civilian internees (CIs), and other detained personnel (detainees). Detainees include, but are not limited to, those persons held during operations other than war."

Under Secretary of Defense Memorandum, SUBJECT: Responsibility for Detainees in Association with the Global War on Terrorism, 17 January 2002, assigns the Assistant Secretary of Defense for Special Operations and Low Intensity Conflict (ASD(SO/LIC)) responsibility for DoD policies and plans related to persons detained in the Global War on Terrorism. The specific language in the memorandum follows:

"Effective immediately, ASD(SO/LIC) assumes responsibility for overall development, coordination, approval and promulgation of major DoD policies and plans related to persons detained in association with the Global War on Terrorism. This includes development, coordination, approval, and promulgation of major DoD policies, and new courses of action with DoD Components and other Federal Agencies as necessary.

DoD Directive 2310.1 will be adjusted to reflect this decision."

Army Regulation (AR) 25-30, The Army Publishing Program, 16 March 2004, Glossary, defines the term "Army regulation." And field manual The specific language in the regulation follows:

"Army regulation

A directive that sets forth missions, responsibilities, and policies, delegates authority, sets objectives, and prescribes mandated procedures to ensure uniform compliance with those policies. Mandated procedures in Army regulations are required and authoritative instructions that contain the detail needed to make sure basic policies are carried out uniformly throughout the Army. These mandated procedures also ensure uniform implementation of public law, policy

guidance, and instructions from higher headquarters or other Government agencies such as the JCP, OMB, or Department of Defense."

"Field manual.

A DA publication that contains doctrine and training principles with supporting tactics, techniques, and/or procedures and describes how the Army and its organizations function in terms of missions, organizations, personnel, and equipment. FMs implement ratified international standardization agreements. FMs may also contain informational or reference material relative to military operations and training and may be used to publish selected alliance doctrinal publications that are not readily integrated into other doctrinal literature."

AR 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Chapter 1, paragraph 1-1, subparagraphs a and b, implement DoDD 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304. It establishes policies and planning guidance for the treatment, care, accountability, legal status, and administrative procedures for Enemy Prisoners of War, Civilian Internees, Retained Persons, and Other Detainees and implements international law for all military operations. The specific language in the regulation follows:

"Summary. This regulation implements Department Of Defense Directive 2310.1 and establishes policies and planning guidance for the treatment, care, accountability, legal status, and administrative procedures for Enemy Prisoners of War, Civilian Internees, Retained Persons, and Other Detainees. This regulation is a consolidation of Army Regulation 190-8 and Army Regulation 190-57 and incorporates SECNAV Instruction 3461.3 and Air Force Joint Instruction 31-304. Policy and procedures established herein apply to the services and their capabilities to the extent that they are resourced and organized for enemy prisoner of war operations.

Applicability. This is a multi-service regulation. It applies to the Army, Navy, Air Force and Marine Corps and to their Reserve components when lawfully ordered to active duty under the provisions of Title 10 United States Code.

"a. This regulation provides policy, procedures, and responsibilities for the administration, treatment, employment, and compensation of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI) and other detainees (OD) in the custody of U.S. Armed Forces. This regulation also establishes procedures for transfer of custody from the United States to another detaining power.

b. This regulation implements international law, both customary and codified, relating to EPW, RP, CI, and ODs, which includes those persons, held during military operations other than war. The principal treaties relevant to this regulation are:

(1) The 1949 Geneva Convention Relative to the Amelioration of the Condition of the Wounded and Sick in Armed Forces in the Field (GWS).

(2) The 1949 Geneva Convention for the Amelioration of the Condition of Wounded, Sick and Shipwrecked Members of Armed Forces at Sea (GWS SEA).

(3) The 1949 Geneva Convention Relative to the Treatment of Prisoners of War (GPW).

(4) The 1949 Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), and In the event of conflicts or discrepancies between this regulation and the Geneva Conventions, the provisions of the Geneva Conventions take precedence."

Field Manual (FM) 3-19.1, Military Police Operations, 31 January 2002, Chapter 4, paragraphs 4-42 to 4-45, describe the role of MP units in detainee operations. The specific language in the field manual follows:

"4-42. The Army is the Department of Defense's (DOD's) executive agent for all EPW/CI operations. Additionally, the Army is DOD's executive agent for longterm confinement of US military prisoners. Within the Army and through the combatant commander, the MP are tasked with coordinating shelter, protection, accountability, and sustainment for EPWs/CIs. The I/R function addresses MP roles when dealing with EPWs/CIs, dislocated civilians, and US military prisoners.

4-43. The I/R function is of humane as well as tactical importance. In any conflict involving US forces, safe and humane treatment of EPWs/CIs is required by international law. Military actions on the modern battlefield will result in many EPWs/CIs. Entire units of enemy forces, separated and disorganized by the shock of intensive combat, may be captured. This can place a tremendous challenge on tactical forces and can significantly reduce the capturing unit's combat effectiveness. The MP support the battlefield commander by relieving him of the problem of handling EPWs/CIs with combat forces. The MP perform their I/R function of collecting, evacuating, and securing EPWs throughout the AO. In this process, the MP coordinate with MI to collect information that may be used in current or future operations.

4-44. Although the CS MP unit initially handles EPWs/CIs, modular MP (I/R) battalions with assigned MP guard companies and supporting MWD teams are equipped and trained to handle this mission for the long term. A properly configured modular MP (I/R) battalion can support, safeguard, account for, guard, and provide humane treatment for up to 4,000 EPWs/CIs; 8,000 dislocated civilians; or 1,500 US military prisoners.

EPW/CI HANDLING

4-45. The MP are tasked with collecting EPWs/CIs from combat units as far forward as possible. The MP operate collection points and holding areas to temporarily secure EPWs/CIs until they can be evacuated to the next higher echelon's holding area. The MP escort-guard company assigned to the MP brigade (I/R) evacuate the EPWs/CIs from the corps's holding area to the COMMZ's internment facilities. The MP safeguard and maintain accountability, protect, and provide humane treatment for all personnel under their care."

FM 3-19.4, Military Police Leaders' Handbook, 2 August 2002, Preface, addresses detainee operations doctrine at the platoon level. The specific language in the field manual follows:

"This field manual (FM) addresses military police (MP) maneuver and mobility support (MMS), area security (AS), internment and resettlement (I/R), law and order (L&O), and police intelligence operations (PIO) across the full spectrum of Army operations. Although this manual includes a discussion of corps and division MP elements, it primarily focuses on the principles of platoon operations and the tactics, techniques, and procedures (TTP) the platoon uses to accomplish its mission."

FM 3-19.40, Military Police Internment/Resettlement Operations, 1 August 2001, Preface, establishes this FM as the doctrinal foundation for detainee operations. Chapter 2, paragraph 2-1, provides explains the role of the MP battalion commander. Chapter 3, paragraphs 3-1 to 3-3, 3-5, and 3-6, describes the basic requirements for the handling, securing, and accounting for EPWs and CIs; paragraphs 3-14 to 3-17 describe the procedures for handling property and tagging EPWs and CIs. Chapter 4 describes detailed administrative procedures for enemy prisoners of war (EPWs), including evacuation, receiving, processing, personnel files, internment serial number (ISN) issuance, information flow, facility assignment, classification, control and discipline, transfer between facilities, host nation or allied forces, and repatriation; the introduction outlines this content. Chapter 5 describes procedures for civilian internees (CIs), including specifying who is a CI, general protection requirements, authorization to intern, administrative responsibilities, receiving, processing, flow of information, security, control and discipline; the introduction explains the difference between CIs and EPWs. The specific language in the field manual follows The specific language in the field manual follows:

"Field Manual (FM) 3-19.40 depicts the doctrinal foundation, principles, and processes that MP will employ when dealing with enemy prisoners of war (EPWs), civilian internees (CIs), US military prisoner operations, and MP support to civil-military operations (populace and resource control [PRC], humanitarian assistance [HA], and emergency services [ES])."

"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, refugee, and US military prisoner), the commander, the cadre, and support personnel must be aware of the requirements for each category.

3-1. The MP units accept captives from capturing units as far forward as possible, and captives are held in CPs and CHAs until they are removed from the battlefield. Normally, CPs are operated in the division AO and CHAs are operated in the corps AO; but they can be operated anywhere they are needed. The CPs and CHAs sustain and safeguard captives and ensure a minimum level of field processing and accountability. Wounded and sick captives receive medical treatment, and captives who require lifesaving medical attention are evacuated to the nearest medical facility.

3-2. The MP establishes listening posts (LPs), observation posts (OPs), guard posts, and fighting positions to protect captives and prevent their escape. Captured soldiers are trained to believe that escape from captivity is their duty; therefore, they must be closely guarded. Consider the morale and physical condition of captives when determining the number of guards needed. Guards must be prepared to use and maintain firm control and security.

3-3. The MP work closely with military intelligence (MI) interrogation teams at CPs and CHAs to determine if captives, their equipment, and their weapons have intelligence value. This process is accelerated when MI interrogation teams can observe captives during arrival and processing, and interrogators can also be used as interpreters during this phase. Before a captive is interviewed by MI personnel, he must have a Department of Defense (DD) Form 2745 (Figure 3-1) attached to him and be accounted for on DD Form 2708.

3-5. Processing begins when US forces capture or detain an individual. The processing is accomplished in the CZ for security, control, intelligence, and the welfare of captives in evacuation channels. This is referred to as *field processing*. The capturing unit begins field processing by using the Five Ss and T procedure (search, segregate, silence, speed,

safeguard, and tag). At the CP or the CHA, MP continue processing with the principles of STRESS (search, tag, report, evacuate, segregate, and safeguard).

3-6. After receiving a captive from a capturing unit, MP are responsible for safeguarding and accounting for the captive at each stage of his removal from the battlefield. The processing procedure begins upon capture and continues until the captive reaches the I/R facility and is released. The process of identifying and tagging a captive helps US forces control and account for him as they move rearward from the battlefield. Before a captive is interned, repatriated, or released, MP at the I/R facility must provide full-scale processing.

3-14. Property Accountability. When seizing property from a captive—

- Bundle it or place it in a bag to keep it intact and separate from other captives' possessions.
- Prepare DA Form 4137 for confiscated and impounded property.
- Prepare a receipt for currency and negotiable instruments to be signed by the captive and the receiver. Use cash collection vouchers so that the value can be credited to each captive's account. List currency and negotiable instruments on the captive's personal-property list, but treat them as impounded property.
- Keep the original receipt with the property during evacuation. Give the captive a copy of the receipt, and tell him to keep it to expedite the return of his property.
- 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.

3-15. Tag each captive with a DD Form 2745. The MP at CPs and CHAs check each tag for the—

- Date and time of capture.
- Capturing unit.
- Place of capture.
- Circumstances of the capture.

The remaining information on the tag is included as it becomes available.

3-16. A DD Form 2745 is a perforated, three-part form that is individually serial-numbered. It is constructed of durable, waterproof, tear-resistant material with reinforced eyeholes on Parts A and C. Part A is attached to the captive with wire or string, Part B is maintained by the capturing unit for their records, and Part C is attached to confiscated property so that the owner can be identified later.

3-17. The MP at division CPs ensure that a DD Form 2745 is placed on each captive who arrives at the CP without one. They may direct the capturing unit to complete a capture tag before accepting the prisoner into the CP. The MP—

- Make a statement on the tag if the captive arrived without it.
- Instruct the captive not to remove or alter the tag.
- Annotate the tag's serial number and the captive's name on a locally developed manifest."

Chapter 4, Introduction – "The MP are responsible for evacuating EPWs from division CPs to CHAs and then to internment facilities (normally located in the COMMZ). This chapter

addresses procedures for properly handling, processing, and safeguarding EPWs. The procedures outlined in this chapter are also applicable to RPs.

Chapter 5, Introduction – "A CI internment facility runs parallel to an EPW internment facility, with some differences.

A CI—

- Is protected under the provisions of the GC.
- Does not meet the criteria for classification as an EPW or an RP.
- Is considered a security risk.
- Needs protection because he committed an offense against the detaining power (insurgents, criminals, or other persons)."

FM 34-52, Intelligence Interrogation, 28 September 1992, Preface, establishes this FM as the doctrinal foundation for interrogations of detainees. The specific language in the field manual follows:

"This manual provides doctrinal guidance, techniques, and procedures governing employment of interrogators as human intelligence (HUMINT) collection assets in support of the commander's intelligence needs. It outlines the interrogator's role within the intelligence collection effort and the supported unit's day-to-day operations.

This manual is intended for use by interrogators as well as commanders, staff officers, and military intelligence (MI) personnel charged with the responsibility of the interrogation collection effort."

ARTEP 19-546-MTP, Mission Training Plan for the Headquarters and Headquarters Company Military Police Battalion (Internment/Resettlement), 10 April 1999, Chapter 1, paragraph 1-4, subparagraph a, outlines training doctrine for I/R battalions. The specific language in the ARTEP follows:

"1-4. Mission and Tasks.

a. The battalion's critical mission is to provide command, staff planning, administration, and logistical support for the operation of an Internment/Resettlement facility for either Enemy Prisoner of War/Civilian Internees (EPW/CI), or US Military Prisoners. It also provides direct supervision of battalion functions: Personnel, Medical, Supply, and Food Services. This MTP is composed of major activities that the unit must execute to accomplish the mission."

k. **Finding 11:**

(1) Finding: Shortfalls in both the Military Police and Military Intelligence organizational structures resulted in the tactical unit commanders adjusting their tactics, techniques, and procedures to conduct detainee operations.

(2) Standard: Field Manual (FM) 3-19.1, Military Police Operations, 31 January 2002, Chapter 7, paragraph 7-9, requires corps augmentation for sustained operations and for special operations such as dealing with dislocated civilians, and refugee internment or resettlement. Paragraphs 7-13, 7-14, 7-17, 7-21, and paragraph 7-26 discuss the employment of the different division Military Police companies, by the type of division to which they are assigned. The specific language in the field manual follows:

"7-9. In the division (where flexible support of an austere force is crucial), the division PM must have a clear understanding of situational awareness. To obtain current information for projecting MP needs in the division area, he must be mobile and be able to conduct split-cell operations. The assets available to the PM include the division MP company and at least one corps MP company. Corps augmentation is required for sustained operations and for special operations such as river crossings, dealing with dislocated civilians, and refugee internment or resettlement. The division PM coordinates with the corps PM and the MP brigade or CID commanders for— • Evacuating and guarding EPWs/CIs from division to corps."

"7-13. The Army of Excellence (AOE) heavy division MP company has six platoons. Three platoons provide support to each maneuver brigade and are designated as DS. The other three platoons are designated as GS platoons. One MP platoon provides security for the division main CP; one provides security for the division's EPW central collection point; and one performs other MP operations within the division rear.

7-14. The GS MP platoons' AOs are configured based on METT-TC and the availability of MP augmentation from the corps. The DS MP platoons' AOs coincide with the supported maneuver brigade's boundary. Each platoon headquarters locates within its brigade's support area or any other area where it can best provide and receive support. To accomplish its mission, each DS platoon requires a minimum of two squads, each with three teams. One squad operates the EPW/CI collection point. The other squads perform MMS and AS operations. All MP platoons are capable of performing all five MP functions. However, performance of these functions is prioritized based on METT-TC and the division commander's concept of operations. The division PM, the company commander, and METT-TC dictate how these platoons should be tasked-organized to accomplish the mission."

"7-17. The company has three GS platoons to support the division. No platoons are provided to the maneuver brigade. One platoon is normally located in the vicinity of the division main CP so that its resources can help support CP security. Another platoon locates in the DSA and operates the division EPW/ CI collection point. The last platoon has an AO configured according to METT-TC and the commander's priority of MP missions. Each GS MP platoon has a headquarters and three squads, each with two teams. The PM section is located in the vicinity of the division main CP. The exact location is based on the current operational status and on METT-TC.

"7-21. The nature of airborne operations makes the capture of EPWs likely. Therefore, during the first stage of the assault phase, the priority of MP support is given to EPW operations. After assembling the DZ or LZ, the MP collect EPWs captured during the assault. Combat elements are relieved of EPWs as far forward as possible. In airborne operations, EPWs are held for later movement to a central collection point. During the first stage of the assault, the MP perform limited straggler and refugee control and undertake AS operations, when possible.

"7-26. When possible, habitually aligned platoons remain with their brigades, and corps assets perform GS missions. However, when no corps assets are available and two division platoons are employed as stated above, the two remaining platoons conduct division EPW collection-point operations and other MP functions based on METT-TC. Normally, the EPW platoon and the MP company headquarters collocate in the DSA. As required (and based on METT-TC), airflow planning includes EPW/CI evacuation from the AATF/FOB collection point back to the DSA. The PM section operates from the division rear CP to facilitate I/R operations and to coordinate MMS and AS with key logistical staff. Due to potentially extreme distances on

the air assault battlefield, the DPM normally locates with the division main CP to serve as a key G3 battle-staff member and to coordinate PIO with the G2."

FM, 3-19.40, Military Police Internment/Resettlement Operations, 1 August 2001, Chapter 3, addresses the responsibility of division Military Police (MP) units to operate collecting points and to assist maneuver units as they move through the battlefield and perform their mission. Paragraph 3-1 assigns MP units the responsibility to accept captives from capturing units as far forward as possible, but allowing them to operate anywhere they are needed. Paragraph 3-3 describes how MP personnel work closely with the Military Intelligence (MI) interrogators to determine if detainees and their possessions have any intelligence value. Paragraph 3-5 outlines the beginning of detainee processing when U.S. Armed Forces detain an individual in the combat zone. Paragraph 3-64 provides information to facilitate collecting enemy tactical information and how MI may collocate interrogation teams at collecting points and Corps Holding Area to collect intelligence information. The specific language in the field manual follows:

"A large number of captives on the battlefield hampers maneuver units as they move to engage and destroy an enemy. To assist maneuver units in performing their mission— • Division MP units operate CPs in the division AO. • Corps MP units operate holding areas in the corps AO."

"3-1. The MP units accept captives from capturing units as far forward as possible, and captives are held in CPs and CHAs until they are removed from the battlefield. Normally, CPs are operated in the division AO and CHAs are operated in the corps AO; but they can be operated anywhere they are needed. The CPs and CHAs sustain and safeguard captives and ensure a minimum level of field processing and accountability. Wounded and sick captives receive medical treatment, and captives who require lifesaving medical attention are evacuated to the nearest medical facility."

"3-3. The MP work closely with military intelligence (MI) interrogation teams at CPs and CHAs to determine if captives, their equipment, and their weapons have intelligence value. This process is accelerated when MI interrogation teams can observe captives during arrival and processing, and interrogators can also be used as interpreters during this phase. Before a captive is interviewed by MI personnel, he must have a Department of Defense (DD) Form 2745 (Figure 3-1) attached to him and be accounted for on DD Form 2708."

"3-5. Processing begins when US forces capture or detain an individual. The processing is accomplished in the CZ for security, control, intelligence, and the welfare of captives in evacuation channels. This is referred to as field processing. The capturing unit begins field processing by using the Five Ss and T procedure (search, segregate, silence, speed, safeguard, and tag). At the CP or the CHA, MP continue processing with the principles of STRESS (search, tag, report, evacuate, segregate, and safeguard)."

"3-64. To facilitate collecting enemy tactical information, MI may collocate interrogation teams at CPs and CHAs. This provides MI with direct access to captives and their equipment and documents. Coordination is made between MP and MI to establish operating procedures that include accountability. An interrogation area is established away from the receiving/processing line so that MI personnel can interrogate captives and examine their equipment and documents. 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."

FM, 34-52, Intelligence Interrogation, 28 September 1992, Chapter 1, definition of Interrogation, pages 1-6 and 1-7, Objective, pages 1-7, discuss the interrogator should not concentrate on the objective to the extent he overlooks or fails to recognize and exploit other valuable information extracted from the source. Chapter 2, page 2-1, Composition and Structure, discusses that the interrogation architecture is a seamless system that supports operations from brigade to theater level. Page 2-2, Interrogation below division, addresses the first interrogation could take place at brigade level to receive tactical information that will provide immediate value to the unit on the ground. Page 2-3, Division interrogation assets, provides an overview of the capabilities a division Military Intelligence battalion provides to a division. Page 2-4, Interrogation Teams, provides the composition of an interrogation team and is normally employed as part of the MI company teams. Page 2-12, Interrogation at Brigade and Below, describes that an MI battalion interrogator can be attached temporarily to the committed battalion to assist in exploiting information immediately from the enemy prisoner of war (EPW). Page 2-22, Theater Interrogation Facility, describe the purpose of the Theater Interrogation Facility and that it is staffed by U.S. Army interrogators, with support from Air Force, Navy, Marine Corps, and other U.S. national agencies as required. Page 3-1, provides the criteria for selecting personnel to be interrogated. Page 3-2, Screening, explains the screening to select a source to interrogate. Page 3-2, Prepare to conduct screenings, describe the coordination and roles between the screeners and MP holding area guards. Page 3-2, Document Screening, outlines when examining documents, the screener should identify topics on which EPWs and detainees have pertinent information that may contain indications of pertinent knowledge and potential cooperation. Page 3-2, Personnel Screening, recommends if time permits, that screeners should question holding area personnel about the EPWs and detainees who might identify sources or answer the supported commander's priority intelligence requirements (PIR) and intelligence requirements (IR). Page 3-29, Interrogation with an Interpreter, provides what needs to take place before, during, and after an interrogation. Page 3-30 Conduct the Interrogation, outlines the steps the interrogators need to take when an interpreter does not follow the guidance of the interrogator during an interrogation. The specific language in the field manual follows:

Page 1-6. "Definition of Interrogation. Interrogation is the process of questioning a source to obtain the maximum amount of usable information. The goal of any interrogation is to obtain reliable information in a lawful manner, in a minimum amount of time, and satisfy intelligence requirements of any echelon of command. Sources may be - civilian internees, insurgents, EPWs, defectors, refugees, displaced persons, agents or suspected agents, other non-US personnel. A good interrogation produces needed information which is timely, complete, clear, and accurate. An interrogation involved the interaction of two personalities - the source and the interrogator."

Page 1-7. "Objective. Each interrogation must be conducted for a definite purpose. The interrogator must keep this purpose firmly in mind as he proceeds to obtain usable information to satisfy the assigned requirement, and thus contribute to the success of the unit's mission..... In either case, the interrogator must use the objective as a basis for planning and conducting the interrogation. He should attempt to prevent the source from becoming aware of the true objective of the interrogation. The interrogator should not concentrate on the objective to the extent he overlooks or fails to recognize and exploit other valuable information extracted from the source."

Page 2-1. "Composition and Structure. The interrogation architecture (interrogators and interrogation units) is a seamless system that supports operations from brigade to theater level. The dynamic warfighting doctrine requires interrogation units be highly mobile and have

automation and communication equipment to report information to the supported commander. The MI commander must ensure interrogators have the necessary equipment to accomplish their wartime mission. The MI commander retains overall responsibility for interrogators assigned to his unit. The manner in which these interrogators are controlled depends on how the MI unit is task organized for combat."

Page 2-2, "Interrogation Below Division. The first interrogation could take place at brigade. Interrogation teams are attached temporarily to brigades in enemy contact when determined appropriate by the division G2. These teams come from the interrogation section of the parent division. Interrogation personnel are organic to separate brigades and armored cavalry regiments (ACRs). Interrogation at brigade level is strictly tactical and deals with information of immediate value.

Interrogation personnel in DS to brigade will be collocated or immediately adjacent to the division forward EPW collecting point in the brigade support area (BSA). For MI units to receive S2 support, the collecting point and interrogation site will be collocated and accessible to the command post (CP)."

Page 2-3, "Division Interrogation Assets. An MI battalion is organic to each division. It provides combat intelligence, EW, and OPSEC support to light or heavy infantry and airborne or air assault division. The MI battalion provides special support the G2 needs to produce combat intelligence. Interrogation personnel organic to the MI battalions compose the interrogation support element."

Page 2-4, "Interrogation Teams. Each interrogation team consists of a team leader (warrant officer), NCO assistant team leader, and three team members. Teams are normally employed as part of the MI company teams which provide IEW support to the brigades."

Page 2-12. "Interrogation at Brigade and Below. Interrogators are not usually attached below brigade level unless the combat situation requires limited tactical interrogation at battalion or lower. In this event, skilled interrogators from the MI battalion will be attached temporarily to committed battalions. They will assist in exploiting EPW immediately upon capture to extract information needed in support of the capturing unit.

Interrogations at battalion or lower are brief and concerned only with information bearing directly on the combat mission of the capturing unit. The following are examples of circumstance warranting an interrogation:

- A unit or landing force assigned an independent mission in which the S2 is primarily responsible for collecting information necessary to fulfill the unit's mission. Immediate tactical intelligence is necessary for mission accomplishment.
- There is a definite need for interrogation at the lower level to permit rapid reaction based on information obtained.
- It is advantageous to have an EPW point out enemy defense and installation from observation points in forward areas."

Page 2-22. "Theater Interrogation Facility. The EAC interrogation facility will normally be designated as the 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 may be established with allied interrogators augmentation. In addition to conventional theater Army operations, a TIF may be established to support a joint or unified command to meet theater requirements during crisis or contingency deployments.

MI battalion companies, MI brigade (EAC) provide US Army interrogation support to the EAC TIF. The mission of the TIF is to-

- Interrogate PWs, high-level political and military personnel, civilian internees, defectors, refugees, and displace persons."

"A TIF is organized into a headquarters section, operations section, and two interrogation and DOCEX sections. It will normally have an attached TSA section from Operations Group, and a liaison team from the Joint Captured Materiel Exploitation Center (JCMEC). The JCMEC liaison team assists in exploiting sources who have knowledge of captured enemy weapons and equipment.

- Provost marshal for location of theater EPW camps, and for procedures to be followed by interrogators and MP for processing, interrogating, and internment."

Page 3-1. "Interrogation Process. Criteria for selecting personnel to be interrogated vary with the - commander's collection requirements. Time limitations. Number and types of potential sources available. Exact circumstance surrounding the employment of US Forces. In this regard, source selection is important in conducting interrogation at tactical echelons of command because of the proximity to enemy elements, number and conditions of detainees, and time restrictions."

Page 3-2. "Screening. Screening is the selection of sources for interrogation. It must be conducted at every echelon to-Determine source cooperativeness and knowledgeability. Determine which sources can best satisfy the commander's PIR and IR in a timely manner."

Page 3-2. "Prepare to Conduct Screenings. Screeners coordinate MP holding area guards on their role in the screening process. The guards are told where the screening will take place, how EPWs, and detainees are to be brought there from the holding area, and what types of behavior on their part will facilitate the screening."

Page 3-2. "Document Screening. If time permits, screeners should go to the holding area and examine all available documents pertaining to the EPWs and detainees. They should look for signs that certain EPWs and detainees are willing, or can be induced, to cooperate with the interrogators. Previous screening and interrogation reports and EPW personnel records are important."

Page 3-2. "Personnel Screening. 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."

Page 3-29. "Interrogation With an Interpreter. Interrogation through an interpreter is time consuming because the interpreter must repeat everything said by the interrogator and source.

The interrogator must brief the interpreter before the interrogation can begin. An interrogation with an interpreter will go through all five phases of the interrogation process. After the interrogation is over, the interrogator will evaluate the interpreter."

Page 3-30. "Conduct the Interrogation. During the interrogation, the interrogator corrects the interpreter if he violates any standards on which he was briefed. For example, if the interpreter injects his own ideas into the interrogation, he must be corrected.

"Corrections should be made in a low-key manner. At no time should the interrogator rebuke his interpreter sternly or loudly while they are with the source. The interrogator should never argue with the interpreter in the presence of the source. If a major correction must be made, the interrogator and the interpreter should leave the interrogation site temporarily, and only when necessary."

I. Finding 12:

(1) Finding: There was no Theater Detainee Reporting Center (TDRC) acting as the central, theater-level agency responsible for detainee accountability, resulting in a lack of detainee personnel and data management.

(2) Standard: Standard of treatment for detainees in OPERATION ENDURING FREEDOM (OEF): Chairman, Joint Chiefs of Staff (CJCS) message dated 211933Z JAN 02 states that members of the Taliban militia and members of Al Qaida under the control of US Forces would be treated humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949. The DAIG has therefore used the provisions of the Geneva Conventions as a benchmark against which to measure the treatment provided to detainees by U.S. Forces to determine if detainees were treated humanely. The use of these standards as benchmarks does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

CJCS Message dated 211933Z JAN 02, provides the determination regarding the humane treatment of Al Qaida and Taliban detainees. Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW) is the international treaty that governs the treatment of prisoners of war; and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), August 12, 1949 is the international treaty that governs the treatment of civilian persons in time of war.

As the guidance did not define "humane treatment" but did state that the US would treat members of the Taliban militia and Al Qaida in a manner consistent with the Geneva Conventions, the DAIG determined that it would use Common Article 3 of the GCs as its floor measure of humane treatment, but would also include provisions of the Geneva Convention on the Treatment of Prisoners of War (GPW) and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC) as other relevant indicia of "humane treatment." The use of this standard does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

Standard of treatment for detainees in OPERATION IRAQI FREEDOM (OIF): OIF was an international armed conflict and therefore the provisions of the Geneva Conventions applied. Additionally, the United States was an occupying power and has acted in accordance with the obligations of an occupying power described in the Hague Convention No. IV Respecting the Laws and Customs of War on Land (H.IV), Oct. 18, 1907, including, but not limited to Articles

43-46 and 50; Geneva Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW), Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), August 12, 1949. The GC supplements H.IV, providing the general standard of treatment at Article 27 and specific standards in subsequent Articles.

The minimum treatment provided by Common Article 3 of the Geneva Conventions is:
(1) No adverse distinction based upon race, religion, sex, etc.; (2) No violence to life or person;
(3) No taking hostages; (4) No degrading treatment; (5) No passing of sentences in absence of fair trial, and; (6) The wounded and sick must be cared for.

The specific language in the CJCS Message for OEF and the GPW/GC and H.IV follows:

CJCS Message dated 211933Z JAN 02, "Paragraph 3. The combatant commanders shall, in detaining Al Qaida and Taliban individuals under the control of the Department of Defense, treat them humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949."

GPW/GC, Article 3 (Common Article 3) – "In the case of armed conflict not of an international character occurring in the territory of one of the High Contracting Parties, each party to the conflict shall be bound to apply, as a minimum, the following provisions:

1. Persons taking no active part in the hostilities, including members of armed forces who have laid down their arms and those placed hors de combat by sickness, wounds, detention, or any other cause, shall in all circumstances be treated humanely, without any adverse distinction founded on race, color, religion or faith, sex, birth or wealth, or any other similar criteria.

To this end the following acts are and shall remain prohibited at any time and in any place whatsoever with respect to the above-mentioned persons:

(a) Violence to life and person, in particular murder of all kinds, mutilation, cruel treatment and torture;
(b) Taking of hostages;
(c) Outrages upon personal dignity, in particular, humiliating and degrading treatment;
(d) The passing of sentences and the carrying out of executions without previous judgment pronounced by a regularly constituted court affording all the judicial guarantees which are recognized as indispensable by civilized peoples.

2. The wounded and sick shall be collected and cared for. An impartial humanitarian body, such as the International Committee of the Red Cross, may offer its services to the Parties to the conflict. The Parties to the conflict should further endeavour to bring into force, by means of special agreements, all or part of the other provisions of the present Convention. The application of the preceding provisions shall not affect the legal status of the Parties to the conflict."

The following specific provisions of GPW and GC apply:

"Article 18 – All effects and articles of personal use, except arms, horses, military equipment and military documents, shall remain in the possession of prisoners of war, likewise their metal helmets and gas masks and like articles issued for personal protection. Effects and

articles used for their clothing or feeding shall likewise remain in their possession, even if such effects and articles belong to their regulation military equipment. At no time should prisoners of war be without identity documents. The Detaining Power shall supply such documents to prisoners of war who possess none. Badges of rank and nationality, decorations and articles having above all a personal or sentimental value may not be taken from prisoners of war. Sums of money carried by prisoners of war may not be taken away from them except by order of an officer, and after the amount and particulars of the owner have been recorded in a special register and an itemized receipt has been given, legibly inscribed with the name, rank and unit of the person issuing the said receipt. Sums in the currency of the Detaining Power, or which are changed into such currency at the prisoner's request, shall be placed to the credit of the prisoner's account as provided in Article 64. The Detaining Power may withdraw articles of value from prisoners of war only for reasons of security; when such articles are withdrawn, the procedure laid down for sums of money impounded shall apply. Such objects, likewise sums taken away in any currency other than that of the Detaining Power and the conversion of which has not been asked for by the owners, shall be kept in the custody of the Detaining Power and shall be returned in their initial shape to prisoners of war at the end of their captivity.

Article 19 – Prisoners of war shall be evacuated, as soon as possible after their capture, to camps situated in an area far enough from the combat zone for them to be out of danger. Only those prisoners of war who, owing to wounds or sickness, would run greater risks by being evacuated than by remaining where they are, may be temporarily kept back in a danger zone. Prisoners of war shall not be unnecessarily exposed to danger while awaiting evacuation from a fighting zone."

Department of Defense Directive (DoDD), 2310.1, DoD Program for Enemy Prisoners of War (EPOW) and Other Detainees, 18 August 1994, Paragraph 1.2, designates the Secretary of the Army as Executive Agent for detainee operations; paragraph 4.2.5 establishes information coordination requirements for the Executive Agent for detainee operations. The specific language in the directive follows:

"1.2. Designates the Secretary of the Army as the Executive Agent for the Department of Defense for the administration of the DoD EPOW Detainee Program.

"4.2.5. Provide, in coordination with the ASD(ISA), appropriate reports to the OSD, the Chairman of the Joint Chiefs of Staff, and information or reports to other U.S. Government Agencies or Components, to include the Congress of the United States, or to the International Committee of the Red Cross."

Army Regulation (AR) 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Chapter 1, paragraph 1-7, subparagraph b, requires specific data elements to be collected and stored by the National Prisoner of War Information Center (NPWIC, now called the National Detainee Recording Center (NDRC)). Paragraph 1-8, subparagraphs a and b, assigns the Branch Prisoner of War Information Center (Branch PWIC, now called the Theater Detainee Reporting Center (TDRC)) as the field agency for maintaining information on persons and property within an assigned theater of operations or in Continental United States (CONUS) and outlines the Branch PWIC's primary responsibilities. Chapter 2, paragraph 2-1, subparagraph a (1) (b), explains how prisoners are to be tagged. Paragraph 2-2, subparagraph b (1), requires the use of DA Form 4137 for accounting for large sums of money and property taken from captured persons. This regulation is a multi-service regulation implementing DOD Directive 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304 and outlines

policies, procedures, and responsibilities for treatment of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI), and other detainees (OD) and implements international law for all military operations. The specific language in the regulation follows:

1-7. b. – "Obtain and store information concerning EPW, CI and RP, and their confiscated personal property. Information will be collected and stored on each EPW, CI, and RP captured and detained by U.S. Armed Forces. This includes those EPW, RP, who were captured by the United States but are in custody of other powers and those who have been released or repatriated. EPW, CI and RP cannot be forced to reveal any information however they are required to provide their name, rank, serial number and date of birth. The Geneva Convention requires the NPWIC to collect and store the following information for EPW, RP:

- (1) Complete name.
- (2) ISN.
- (3) Rank.
- (4) Serial number.
- (5) Date of birth.
- (6) City of birth.
- (7) Country of birth.
- (8) Name and address of next of kin.
- (9) Date of capture.
- (10) Place of capture.
- (11) Capturing unit.
- (12) Circumstances of capture.
- (13) Location of confiscated personal property.
- (14) Nationality.
- (15) General statement of health.
- (16) Nation in whose armed services the individual is serving.
- (17) Name and address of a person to be notified of the individual's capture.
- (18) Address to which correspondence may be sent.
- (19) Certificates of death or duly authenticated lists of the dead.
- (20) Information showing the exact location of war graves together with particulars of the dead.
- (21) Notification of capture.
- (22) List of personal articles of value not restored upon repatriation."

1-8. a. – "The Branch PWIC functions as the field operations agency for the NPWIC. It is the central agency responsible to maintain information on all EPW, CI and RP and their personal property within an assigned theater of operations or in CONUS.

1-8. b. – The Branch PWIC serves as the theater repository for information pertaining to:

- (1) Accountability of EPW, CI, and RP and implementation of DOD policy.
- (2) Providing initial and replacement block ISN assignments to theater EPW, CI and RP processing organizations, and requests replacement ISN's from the NPWIC.
- (3) Obtaining and storing information concerning all EPW, CI and RP, in the custody of U.S. Armed Forces, those captured by U.S. Armed Forces and transferred to other powers for internment (either temporarily or permanently), those EPW and RP transferred to CONUS for internment, and EPW, CI and RP released or repatriated. Obtaining and storing information about CI kept in the custody of U.S. Armed Forces within its assigned theater of operations who are subjected to assigned residence, interned, or released."

2-1. a. (1) (b) -- "All prisoners of war and retained persons will, at the time of capture, be tagged using DD Form 2745.

2-2. b. (1) – Appropriate intelligence sources will be notified when EPW and RP are found in possession of large sums of U.S. or foreign currency. A receipt DA Form 4137 will be prepared to account for all property that is taken from the EPW. Copies of DD Form 629 (Receipt for Prisoner or Detained Person) and DA Form 4137 will be maintained to establish positive accountability of the EPW and their property and can be used to substantiate proper care and treatment at a later time. DA Form 4137 will be used to account for property released before final disposition is ordered. Records of disposition of property will be evacuated with prisoners for inclusion in their personnel records."

Field Manual (FM) 3-19.40, Military Police Internment/Resettlement Operations, 1 August 2001, Chapter 3, paragraphs 3-45 and 3-54, establish the 12-hour forward collecting point and 24-hour central collecting point doctrine. The specific language in the field manual follows:

"3-45. Captives should not remain at a forward CP more than 12 hours before being escorted to the central CP.

3-54. Captives should not remain at the central CP more than 24 hours before being evacuated to the CHA."

m. Finding 13:

(1) Finding: The ongoing Military Intelligence Force Design Update is better suited to conduct simultaneous and sustained human intelligence missions in the current and future operating environment.

(2) Standard: Army Regulation (AR) 71-32, Force Development and Documentation—Consolidated Policies, 3 March 1997, Paragraph 2-1, subparagraph f, establishes the Deputy Chief of Staff for Operations and Plans (DCSOPS) responsibility for The Army Authorization Documents System-Redesign (TAADS-R) systems, which provides Army Modified Table of Organization and Equipment (MTOE) and Table of Distribution and Allowance (TDA) units with authorization documents containing the HQDA-approved organizational structure, personnel and equipment requirements and authorizations. Paragraph 2-2, subparagraph x, directs the Commander of U.S. Army Force Management Support Agency (USAFMSA) to act as executive agent for TAADS-R and review, develop, and publish MTOEs and TDAs. Paragraph 2-26, subparagraphs a-c, requires the Commander of U.S. Army Training and Doctrine Command (TRADOC) to develop and validate battlefield requirements and use the force design update process to document needed changes. TRADOC develops organizational concepts and designs. TRADOC provides USAFMSA the approved organization designs for the development of a Table of Organization and Equipment (TOE). Paragraph 4-1, subparagraphs b, c, and e, describe the TOE as the result of the combat development process and documents wartime capabilities, organizational structure, personnel and equipment. Paragraph 4-4 describes the concept for TOE review and revision. In this case the TOE revision documents a more effective organizational design. The specific language in the regulation follows:

"2-1. Deputy Chief of Staff for Operations and Plans (DCSOPS)
The DCSOPS will—

"f. Have HQDA responsibility for TAADS-R and, after appropriate HQDA coordination, will—

"(2) Develop and manage the Army force structure.

"(4) In coordination with the DCSPER and the DCSLOG publish and enforce policy and procedures to document requirements for and authorization of, organizations, personnel, and equipment.

"(6) Serve as the final HQDA approval authority for authorization documents.

"2–2. CDR, U.S. Army Force Management Support Agency (USAFMSA)
CDR, USAFMSA will—

"x. Act as executive agent for the operation of the TAADS-R and perform the following:

"(9) Perform technical review of Active Army and Reserve Component (RC) MTOE and TDA.

(10) Develop MTOEs for all Active Army and RC MTOE organizations under the CENDOC concept.

(11) Provide a foundation for manning the force, quantitatively and qualitatively, principally through detailed manpower requirements determination programs such as MARC, manpower staffing guides, organizational and manpower studies, and the MS3.

"(17) Maintain and distribute current files of all authorization documents (MTOEs and TOEs). Furnish authorization documentation data to HQDA and agencies/activities using TAADS.

"2–26. CG, U.S. Army Training and Doctrine Command (TRADOC)
In addition to the responsibilities in paragraph 2–19, the CG, TRADOC will—

a. Lead the Army in developing and validating battlefield requirements and use the force design update (FDU) process as the semiannual Army process to update organizational concepts and designs.

b. Develop organizational concepts and designs.

c. Provide USAFMSA completed unit reference sheets for FDU approved organization designs as the basis for TOE development.

"4–1. Concepts

"b. The TOE is the end product document of the Army's combat development process. It merges, in one document, the results of the requirements determination process...

"c. TOEs are the primary basis for stating Army requirements. This document heavily impacts the budget, the training base, efficiency, operational readiness, and overall management of Army resources.

"e. The TOE system is characterized by incremental TOEs that prescribe the wartime mission, capabilities, organizational structure, and minimum mission essential personnel and equipment requirements for military units. They portray the doctrinal modernization path (MODPATH) of a unit over time from the least modernized configuration to the most modernized.

"4-4. TOE review and revision

TOEs are normally revised as required to accommodate changes to doctrine, introduction of new equipment, or to incorporate more effective designs. Some TOEs are replaced by new organizations. Those TOEs that do not fall into the above categories will be reviewed not less than every three years from the date of approval."

AR 381-20, The Army Counterintelligence Program, 15 November 1993, Glossary, defines the terms counterintelligence, counterintelligence operations, and counterintelligence special agent. The term Military Occupational Specialty (MOS) refers to the type of training and skills of a Soldier in a specific specialty. In this report the DAIG Team uses the abbreviation CI to refer to Civilian Internees; the Military Intelligence mission of counterintelligence will not be abbreviated as CI except when quoted directly from Military Intelligence policy/doctrine paragraph(s) referring to counterintelligence, as in the following. The specific language in the regulation follows:

"counterintelligence

1. Information gathered and activities conducted to protect against espionage, other intelligence activities, sabotage or assassinations conducted for or on behalf of foreign powers, organizations, or persons, or international terrorist activities, but not including personnel, physical, document or communications security programs. Synonymous with foreign counterintelligence. (ICS Glossary)

2. Those activities which are concerned with identifying and counteracting the threat to security posed by foreign intelligence services or organizations, or by individuals engaged in espionage, sabotage, sedition, subversion or terrorism.

"counterintelligence operations

Activities taken to hinder the multidisciplinary activities of foreign intelligence and security services, and to cause FIS to doubt the validity of its own analysis.

"counterintelligence special agent

Soldiers holding the SSI 35E, MOS 351B or 97B, and civilian employees in the GS-0132 career field, who have successfully completed a CI [counterintelligence] officer/agent course, who are authorized USAI badges and credentials, and who are assigned to conduct CI [counterintelligence] investigations and operations. Also known as CI [counterintelligence] agent or MI agent."

Field Manual (FM) 34-60, Counterintelligence, 3 October 1995, Chapter 1, describes the Army counterintelligence mission as preventing other organizations and agencies from gathering information on Army organizations and agencies. Counterintelligence operations is a force protection factor and includes counter-human intelligence (C-HUMINT), counter-signals

intelligence (C-SIGINT), and counter-imagery intelligence (C-IMINT) functions. In this report the DAIG Team uses the abbreviation CI to refer to Civilian Internees; the Military Intelligence mission of counterintelligence will not be abbreviated as CI except when quoted directly from Military Intelligence policy/doctrine paragraph(s) referring to counterintelligence, as in the following. The specific language in the field manual follows:

"MISSION

The CI [counterintelligence] mission is authorized by Executive Order (EO) 12333, implemented by AR 381-20. The Army conducts aggressive, comprehensive, and coordinated CI [counterintelligence] activities worldwide. The purpose is to detect, identify, assess, counter, neutralize, or exploit threat intelligence collection efforts. This mission is accomplished during peacetime and all levels of conflict. Many CI [counterintelligence] functions, shown in Figure 1-1, are conducted by echelons above corps (EAC); some by echelons corps and below (ECB); and some are conducted by both. Those CI [counterintelligence] assets found at ECB respond to tactical commanders. EAC assets respond primarily to commanders of intelligence units while supporting all commanders within their theater or area of operations (AO).

"The essence of the Army's CI [counterintelligence] mission is to support force protection. By its nature, CI [counterintelligence] is a multidiscipline (C-HUMINT, C-SIGINT, and C-IMINT) function designed to degrade threat intelligence and targeting capabilities. Multidiscipline counterintelligence (MDCI) is an integral and equal part of intelligence and electronic warfare (IEW). MDCI operations support force protection through OPSEC, deception, and rear area operations across the range of military operations. For more information on IEW operations, see FM 34-1."

ST 2-22.7, Tactical Human Intelligence and Counterintelligence Operations, 11 April 2002, Paragraphs 1-1 and 1-7, describe the relationship between human intelligence (HUMINT) and counterintelligence and the function of Tactical HUMINT. Paragraph 1-10 defines the term HUMINT Collector. Additionally, the unit's counterintelligence mission is a force protection factor. In this report the DAIG Team uses the abbreviation CI to refer to Civilian Internees; the Military Intelligence mission of counterintelligence will not be abbreviated as CI except when quoted directly from Military Intelligence policy/doctrine paragraph(s) referring to counterintelligence, as in the following. The specific language in the manual follows:

"1-1. HUMINT and CI [counterintelligence] have distinctly different missions. HUMINT collectors gather information to answer intelligence and information requirements while CI [counterintelligence] personnel help protect the force from an adversary's intelligence collection efforts. HUMINT collectors and CI [counterintelligence] personnel bring unique sets of skills to any mission. At times each discipline may uncover information relating to the other's primary mission. Although HUMINT collectors and CI [counterintelligence] personnel appear to have similar functions, because the common denominator is human interaction, each discipline has its own area of expertise.

"1-7. Tactical HUMINT is the task organization of HUMINT collection assets and CI [counterintelligence] assets into combined teams to accomplish the mission of both disciplines at the tactical level (echelon corps and below). This task organization supports the force protection plan and answers the commander's intelligence requirements by employing -

- "CI [counterintelligence] agents to conduct focused identification, collection, analysis, recommendation of countermeasures, and production against FISS technical means and other adversary intelligence collection threats.
- "HUMINT collectors to conduct focused collection, analysis, and production on the adversary's composition, strength, dispositions, tactics, equipment, personnel, personalities, capabilities, and intentions.

"1-10. HUMINT collectors are personnel who, by training or in certain specific positions, are tasked with collecting information for intelligence use from people or related documents. A HUMINT source is any person who can provide information to answer collection requirements. [Unless otherwise noted in this manual, the term "HUMINT collector" refers to personnel in MOSs 351E and 97E. The term "CI [counterintelligence] collector" or "CI [counterintelligence] agent" refers to 35E, 351B, and 97B personnel.] The HUMINT and CI [counterintelligence] force is organized, trained, and equipped to provide timely and relevant answers to information requirements at each echelon. While HUMINT and CI [counterintelligence] have a different focus, in most deployment scenarios they work best in a collaborative effort."

n. Finding 14:

(1) Finding: The ongoing Military Police Force Design Update provides a force structure for internment/resettlement operations that has the flexibility and is better suited to conduct sustained detainee operations in the current and future operating environments.

(2) Standard: Army Regulation (AR) 71-32, Force Development and Documentation—Consolidated Policies, 3 March 1997, Paragraph 2-1, subparagraph f, establishes the Deputy Chief of Staff for Operations and Plans (DCSOPS) responsibility for The Army Authorization Documents System-Redesign (TAADS-R) systems, which provides Army Modified Table of Organization and Equipment (MTOE) and Table of Distribution and Allowance (TDA) units with authorization documents containing the HQDA-approved organizational structure, personnel and equipment requirements and authorizations. Paragraph 2-2, subparagraph f, requires Commander of U.S. Army Force Management Support Agency (USAFMSA) to review, evaluate, and coordinate all changes to force structure documents with effected Major Commands (MACOMs) and the U.S. Army Training and Doctrine Command (TRADOC) proponent. Paragraph 2-26, subparagraphs a-c, requires the Commander of U.S. Army Training and Doctrine Command (TRADOC) to develop and validate battlefield requirements and use the force design update process to document needed changes. TRADOC develops organizational concepts and designs. TRADOC provides USAFMSA the approved organization designs for the development of a Table of Organization and Equipment (TOE). Paragraph 4-1, subparagraphs b, c, and e, describe the TOE as the result of the combat development process and documents wartime capabilities, organizational structure, personnel and equipment. Paragraph 4-4 describes the concept for TOE review and revision. In this case the TOE revision documents a more effective organizational design. Paragraph 8-4, Table 8-1, gives the characteristics of an MTOE: a unit or organization with the ability to perform sustained Combat, Combat Support (CS), or Combat Service Support (CSS) missions; and the characteristics of a TDA: a unit or organization performing a mission at a fixed location. The Active Component (AC) units qualified to conduct internment/resettlement (I/R) operations are organized in TDAs and are not designed for deployment. Reserve Component (RC) units conducting I/R operations are organized in MTOEs for deployment. The specific language in the regulation follows:

"2-1. Deputy Chief of Staff for Operations and Plans (DCSOPS)
The DCSOPS will—

"f. Have HQDA responsibility for TAADS-R and, after appropriate HQDA coordination, will—

"(2) Develop and manage the Army force structure.

"(4) In coordination with the DCSPER and the DCSLOG publish and enforce policy and procedures to document requirements for and authorization of, organizations, personnel, and equipment.

"(6) Serve as the final HQDA approval authority for authorization documents.

"2-2. CDR, U.S. Army Force Management Support Agency (USAFMSA)
CDR, USAFMSA will—

"f. Review and evaluate all proposed TOE changes. Coordinate requests for TOE changes with the affected MACOM and proponent schools. Recommend approval to HQDA if appropriate.

"2-26. CG, U.S. Army Training and Doctrine Command (TRADOC)
In addition to the responsibilities in paragraph 2-19, the CG, TRADOC will—

a. Lead the Army in developing and validating battlefield requirements and use the force design update (FDU) process as the semiannual Army process to update organizational concepts and designs.

b. Develop organizational concepts and designs.

c. Provide USAFMSA completed unit reference sheets for FDU approved organization designs as the basis for TOE development.

"4-1. Concepts

"b. The TOE is the end product document of the Army's combat development process. It merges, in one document, the results of the requirements determination process...

"c. TOEs are the primary basis for stating Army requirements. This document heavily impacts the budget, the training base, efficiency, operational readiness, and overall management of Army resources.

"e. The TOE system is characterized by incremental TOEs that prescribe the wartime mission, capabilities, organizational structure, and minimum mission essential personnel and equipment requirements for military units. They portray the doctrinal modernization path (MODPATH) of a unit over time from the least modernized configuration to the most modernized.

"4-4. TOE review and revision

TOEs are normally revised as required to accommodate changes to doctrine, introduction of new equipment, or to incorporate more effective designs. Some TOEs are replaced by new organizations. Those TOEs that do not fall into the above categories will be reviewed not less than every three years from the date of approval.

"8-4. Type of organization

Criteria in Table 8-1 will be used to determine whether an organization should be documented as a MTOE, TDA, or AUGTDA.

"MTOE – The unit or organization is required to perform combat, CS, or CSS missions on a continuing basis.

"TDA – The unit or organization is part of a fixed support establishment, for example, installation, garrison."

AR 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Paragraph 1-1, subparagraph a, establishes the regulation as the source for policy for enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI) and other detainees (OD). The policy (written in 1997) is based on the Cold War model of an organized EPW population that is cooperative. The policy does not address the confinement of high-risk detainees. Paragraph 1-4, subparagraph g, establishes that EPW, RP, CI, and OD will be handed over to the Military Police (MP) or facilities run by the MPs. The regulation states that MPs have units specifically organized to perform the long-term functions associated with EPW/CI internment. The force structure of MP units does not support this requirement. The Glossary, Section II, defines the following terms: EPW, RP, CI, OD, and Detainee. The MP Corps has not yet developed or defined the term High Risk Detainee. This regulation is a multi-service regulation implementing DOD Directive 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304 and outlines policies, procedures, and responsibilities for treatment of EPWs, RPs, CIs, and ODs and implements international law for all military operations. The specific language in the regulation follows:

"1-1. Purpose

a. This regulation provides policy, procedures, and responsibilities for the administration, treatment, employment, and compensation of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI) and other detainees (OD) in the custody of U.S. Armed Forces. This regulation also establishes procedures for transfer of custody from the United States to another detaining power.

"1-4. Responsibilities

"g. *Combatant Commanders, Task Force Commanders and Joint Task Force Commanders.* Combatant Commanders, Task Force Commanders and Joint Task Force Commanders 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 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. U.S. Army Military Police have units specifically organized to perform the long-term functions associated with EPW/CI internment.

"Glossary

"Section II Terms

"Civilian Internee(s). A civilian who is interned during armed conflict or occupation for security reasons or for protection or because he has committed an offense against the detaining power.

"Detainee. A term used to refer to any person captured or otherwise detained by an armed force.

"Enemy Prisoner of War. A detained person as defined in Articles 4 and 5 of the Geneva Convention Relative to the Treatment of Prisoners of War of August 12, 1949. In particular, one who, while engaged in combat under orders of his or her government, is captured by the armed forces of the enemy. As such, he or she is entitled to the combatant's privilege of immunity from the municipal law of the capturing state for warlike acts which do not amount to breaches of the law of armed conflict. For example, a prisoner of war may be, but is not limited to, any person belonging to one of the following categories who has fallen into the power of the enemy: a member of the armed forces, organized militia or volunteer corps; a person who accompanies the armed forces without actually being a member thereof; a member of a merchant marine or civilian aircraft crew not qualifying for more favorable treatment; or individuals who, on the approach of the enemy, spontaneously take up arms to resist invading forces.

"Other Detainee (OD). Persons in the custody of the U.S. Armed Forces who have not been classified as an EPW (article 4, GPW), RP (article 33, GPW), or CI (article 78, GC), shall be treated as EPWs until a legal status is ascertained by competent authority."

Field Manual (FM) 3-19.1, Military Police Operations, 31 January 2002, Paragraph 1-3, describes the doctrine review process the MP Corps underwent in 1996 and establishes and separates the internment and resettlement (I/R) function from the EPW mission. Paragraph 4-42 requires the Army to act as the Department of Defense's (DoD) Executive Agent for long-term confinement of U.S. Armed Forces prisoners. The paragraph goes on to address the MPs role in I/R functions, but does not address long-term confinement as an I/R function. The MP Corps does not address the doctrinal requirement for long-term I/R confinement or confinement of high-risk detainees. Paragraph 4-44 states the ratios by type of detainee that an MP (I/R) Battalion can support. This formula does not address confinement of high-risk detainees. The specific language in the field manual follows:

"1-3. In 1996, the MP Corps went through a doctrinal review process to determine if it was properly articulating its multiple performance capabilities in support of US forces deployed worldwide (see Appendix B). The review process identified the need to restructure and expand the EPW mission to include handling US military prisoners and all dislocated civilians. This new emphasis transformed the EPW mission into the internment and resettlement (I/R) function. The review process also identified the need to shift from missions to functions. In the past, the four battlefield missions adequately described MP capabilities in a mature theater against a

predictable, echeloned threat. However, that landscape is no longer valid. Accordingly, the four MP battlefield missions have become the following five MP functions:

- Maneuver and mobility support (MMS).
- AS.
- L&O.
- I/R.
- Police intelligence operations (PIO).

"4-42. The Army is the Department of Defense's (DOD's) executive agent for all EPW/CI operations. Additionally, the Army is DOD's executive agent for longterm confinement of US military prisoners. Within the Army and through the combatant commander, the MP are tasked with coordinating shelter, protection, accountability, and sustainment for EPWs/CIs. The I/R function addresses MP roles when dealing with EPWs/CIs, dislocated civilians, and US military prisoners.

"4-44. Although the CS MP unit initially handles EPWs/CIs, modular MP (I/R) battalions with assigned MP guard companies and supporting MWD teams are equipped and trained to handle this mission for the long term. A properly configured modular MP (I/R) battalion can support, safeguard, account for, guard, and provide humane treatment for up to 4,000 EPWs/CIs; 8,000 dislocated civilians; or 1,500 US military prisoners."

FM 3-19.40, Military Police Internment/Resettlement Operations, 1 August 2001, Paragraph 1-13, states the objectives of I/R operations and the types of detainees expected. The terms refer to EPW, CI, RP, OD, dislocated civilian (DC), and U.S. Armed Forces prisoners. At the time this doctrine was written (August 2001) the MP Corps had not yet developed or defined the term high-risk detainee. The specific language in the field manual follows:

"1-13. The objectives of I/R operations are to process, handle, care for, account for, and secure—

- EPWs.
- CIs.
- RPs.
- ODs
- DCs.
- US military prisoners."

o. Finding 15:

(1) Finding: Three of 4 inspected internment/resettlement facilities, and many of the collecting points, had inadequate force protection measures, Soldier working conditions, detainees living conditions, and did not meet the minimum preventive medical treatment requirements.

(2) Standard: Standard of treatment for detainees in OPERATION ENDURING FREEDOM (OEF): CJCS message dated 211933Z JAN 02 states that members of the Taliban militia and members of Al Qaida under the control of U.S. Forces would be treated humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949. The DAIG has therefore used the provisions of the Geneva Conventions as a benchmark against which to measure the treatment provided to detainees by U.S. Forces to determine if detainees were treated humanely. The use of these

standards as benchmarks does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

CJCS Message dated 211933Z JAN 02, provides the determination regarding the humane treatment of Al Qaida and Taliban detainees. Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW) is the international treaty that governs the treatment of prisoners of war, and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), August 12, 1949, is the international treaty that governs the treatment of civilian persons in time of war.

As the guidance did not define "humane treatment" but did state that the U.S. would treat members of the Taliban militia and Al Qaida in a manner consistent with the Geneva Conventions, the DAIG determined that it would use Common Article 3 of the GCs as its floor measure of humane treatment, but would also include provisions of the Geneva Convention on the Treatment of Prisoners of War (GPW) and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC) as other relevant indicia of "humane treatment." The use of this standard does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

Standard of treatment for detainees in OPERATION IRAQI FREEDOM (OIF): OIF was an international armed conflict and therefore the provisions of the Geneva Conventions applied. Additionally, the United States was an occupying power and has acted in accordance with the obligations of an occupying power described in the Hague Convention No. IV Respecting the Laws and Customs of War on Land (H.IV), Oct. 18, 1907, including, but not limited to, Articles 43-46 and 50; Geneva Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW); and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), August 12, 1949. The GC supplements H.IV, providing the general standard of treatment at Article 27 and specific standards in subsequent Articles.

The minimum treatment provided by Common Article 3 of the Geneva Conventions is:
(1) No adverse distinction based upon race, religion, sex, etc.; (2) No violence to life or person;
(3) No taking hostages; (4) No degrading treatment; (5) No passing of sentences in absence of fair trial, and; (6) The wounded and sick must be cared for.

The specific language in the CJCS Message for OEF and the GPW/GC and H.IV follows:

CJCS Message dated 211933Z JAN 02, "Paragraph 3. The combatant commanders shall, in detaining Al Qaida and Taliban individuals under the control of the Department of Defense, treat them humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949."

GPW/GC, Article 3 (Common Article 3) – "In the case of armed conflict not of an international character occurring in the territory of one of the High Contracting Parties, each party to the conflict shall be bound to apply, as a minimum, the following provisions:

1. Persons taking no active part in the hostilities, including members of armed forces who have laid down their arms and those placed hors de combat by sickness, wounds, detention, or any other cause, shall in all circumstances be treated humanely, without any adverse distinction founded on race, color, religion or faith, sex, birth or wealth, or any other similar criteria.

To this end the following acts are and shall remain prohibited at any time and in any place whatsoever with respect to the above-mentioned persons:

- (a) Violence to life and person, in particular murder of all kinds, mutilation, cruel treatment and torture;
- (b) Taking of hostages;
- (c) Outrages upon personal dignity, in particular, humiliating and degrading treatment;
- (d) The passing of sentences and the carrying out of executions without previous judgment pronounced by a regularly constituted court affording all the judicial guarantees which are recognized as indispensable by civilized peoples.

2. The wounded and sick shall be collected and cared for. An impartial humanitarian body, such as the International Committee of the Red Cross, may offer its services to the Parties to the conflict. The Parties to the conflict should further endeavour to bring into force, by means of special agreements, all or part of the other provisions of the present Convention. The application of the preceding provisions shall not affect the legal status of the Parties to the conflict."

Hague Convention No. IV Respecting the Laws and Customs of War on Land (H.IV.), Oct. 18, 1907, Articles 43-46 and 50; and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), Aug 12, 1949, Articles 81, 83, 85, 88, 89, and 91 discuss the requirement to accommodate detainees in buildings or quarters which afford every possible safeguard regarding health and hygiene and the effects of war. The specific language in the GC follows:

GC Article 81 – "Parties to the conflict who intern protected persons shall be bound to provide free of charge for their maintenance, and to grant them also the medical attention required by their state of health. No deduction from the allowances, salaries or credits due to the internees shall be made for the repayment of these costs."

GC, Article 83 – "The Detaining Power shall not set up places of internment in areas particularly exposed to the dangers of war. ..."

GC, Article 85 – "The Detaining Power is bound to take all necessary and possible measures to ensure that protected persons shall, from the outset of their internment, be accommodated in buildings or quarters which afford every possible safeguard as regards hygiene and health, and provide efficient protection against the rigors of the climate and the effects of the war. In no case shall permanent places of internment be situated in unhealthy areas or in districts, the climate of which is injurious to the internees. In all cases where the district, in which a protected person is temporarily interned, is an unhealthy area or has a climate which is harmful to his health, he shall be removed to a more suitable place of internment as rapidly as circumstances permit. The premises shall be fully protected from dampness, adequately heated and lighted, in particular between dusk and lights out. The sleeping quarters shall be sufficiently spacious and well ventilated, and the internees shall have suitable bedding and sufficient blankets, account being taken of the climate, and the age, sex, and state of health of the internees. Internees shall have for their use, day and night, sanitary conveniences which conform to the rules of hygiene, and are constantly maintained in a state of cleanliness. They shall be provided with sufficient water and soap for their daily personal toilet and for washing their personal laundry; installations and facilities necessary for this purpose shall be granted to them. Showers or baths shall also be available. The necessary time shall be

set aside for washing and for cleaning. Whenever it is necessary, as an exceptional and temporary measure, to accommodate women internees who are not members of a family unit in the same place of internment as men, the provision of separate sleeping quarters and sanitary conveniences for the use of such women internees shall be obligatory."

GC, Article 88 – "In all places of internment exposed to air raids and other hazards of war, shelters adequate in number and structure to ensure the necessary protection shall be installed. ..."

GC, Article 89 – "Daily food rations for internees shall be sufficient in quantity, quality and variety to keep internees in a good state of health and prevent the development of nutritional deficiencies. Account shall also be taken of the customary diet of the internees. Internees shall also be given the means by which they can prepare for themselves any additional food in their possession. Sufficient drinking water shall be supplied to internees. ... "

GC Article 91 – "Every place of internment shall have an adequate infirmary, under the direction of a qualified doctor, where internees may have the attention they require, as well as appropriate diet. Isolation wards shall be set aside for cases of contagious or mental diseases. Maternity cases and internees suffering from serious diseases, or whose condition requires special treatment, a surgical operation or hospital care, must be admitted to any institution where adequate treatment can be given and shall receive care not inferior to that provided for the general population. Internees shall, for preference, have the attention of medical personnel of their own nationality. Internees may not be prevented from presenting themselves to the medical authorities for examination. The medical authorities of the Detaining Power shall, upon request, issue to every internee who has undergone treatment an official certificate showing the nature of his illness or injury, and the duration and nature of the treatment given. A duplicate of this certificate shall be forwarded to the Central Agency provided for in Article 140 Treatment, including the provision of any apparatus necessary for the maintenance of internees in good health, particularly dentures and other artificial appliances and spectacles, shall be free of charge to the internee."

GPW, Article 29 – "The Detaining Power shall be bound to take all sanitary measures necessary to ensure the cleanliness and healthfulness of camps and to prevent epidemics.

Prisoners of war shall have for their use, day and night, conveniences which conform to the rules of hygiene and are maintained in a constant state of cleanliness. In any camps in which women prisoners of war are accommodated, separate conveniences shall be provided for them.

Also, apart from the baths and showers with which the camps shall be furnished, prisoners of war shall be provided with sufficient water and soap for their personal toilet and for washing their personal laundry; the necessary installations, facilities and time shall be granted them for that purpose."

Army Regulation (AR) 40-5, Preventive Medicine, 15 October 1990, Chapter 14, paragraph 14-3, subparagraph a, requires field sanitation teams at all company-level units. The specific language in the regulation follows:

"a. Functions. As a minimum, units deploying to the field will—

- (1) Before deployment, appoint a field sanitation team with responsibilities defined in b below.
- (2) Before deployment, incorporate PMM into SOPs.
- (3) Have the capability to use pesticides and vegetation controls.
- (4) Bury and/or burn wastes to prevent the breeding of insects and rodents. Consult the environmental coordinator or PVNTMED personnel to ensure compliance with local environmental regulations and laws during field exercises.
- (5) Protect food during storage and preparation to prevent contamination (TB MED 530).
- (6) Monitor unit water sources to assure adequate supplies and disinfection.
- (7) Arrange for maintenance of immunizations and prophylaxis.
- (8) Use other appropriate measures under FM 21-10 / AFM 161-10.
- (9) Assure command supervision of individual PMM.
- (10) Request assistance for problems exceeding unit capabilities.
- (11) Deploy to the field with field sanitation equipment listed in table 14-1."

Army Regulation (AR) 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Chapter 1, paragraph 1-4, subparagraph g (6) (a), discusses sanitary aspects of food service and the need to provide potable water and vector control. Chapter 3, paragraph 3-2, subparagraph b, requires internment/resettlement (I/R) facilities and collecting points (CPs) to operate under the same standards of hygiene and sanitation. Paragraph 3-4, subparagraph e, requires enemy prisoners of war/retained personnel (EPW/RP) to be housed under the same conditions as US forces residing in the same area; subparagraph i requires EPW/RP facilities to ensure a clean and healthy environment for detainees. Chapter 5, paragraph 5-2, subparagraph a, states that a safety program for civilian internees (CIs) will be established. Chapter 6, paragraph 6-1, subparagraph b, discusses minimum standards to house (CIs). Paragraph 6-5 discusses subsistence requirement for CIs, and paragraph 6-6 covers medical care and sanitation. This regulation is a multi-service regulation implementing DoD Directive 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304 and outlines policies, procedures, and responsibilities for treatment of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI), and other detainees (OD) and implements international law for all military operations. The specific language in the regulation follows:

3-2. b. – "Prisoners will not normally be interned in unhealthy areas, or where the climate proves to be injurious to them, and will be removed as soon as possible to a more favorable climate. 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.

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 foregoing 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.

3-4. i. – "Hygiene and medical care:

(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.

"(6) 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.

"5-2. Civilian Internee Safety Program

a. Establishment. A safety program for the CI will be established and administered in accordance with the policies prescribed in AR 385-10 and other pertinent safety directives.

"6-1. Internment Facility

a. Location. The theater commander will be responsible for the location of the CI internment facilities within his or her command. The CI retained temporarily in an unhealthy area or where the climate is harmful to their health will be removed to a more suitable place of internment as soon as possible.

b. Quarters. Adequate shelters to ensure protection against air bombardments and other hazards of war will be provided and precautions against fire will be taken at each CI camp and branch camp.

(1) All necessary and possible measures will be taken to ensure that CI shall, from the outset of their internment, be accommodated in buildings or quarters which afford every possible safeguard as regards hygiene and health, and provide efficient protection against the rigors of the climate and the effects of war. In no case shall permanent places of internment be placed in unhealthy areas, or in districts the climate of which is injurious to CI.

(2) The premises shall be fully protected from dampness, adequately heated and lighted, in particular between dusk and lights out. The sleeping quarters shall be sufficiently spacious and well ventilated, and the internees shall have suitable bedding and sufficient blankets, account being taken of the climate, and the age, sex and state of health of the internees.

(3) Internees shall have for their use, day and night, sanitary conveniences which conform to the rules of hygiene and are constantly maintained in a state of cleanliness. They shall be provided with sufficient water and soap for their daily personal hygiene and for washing their personal laundry; installations and facilities necessary for this purpose shall be provided. Showers or baths shall also be available. The necessary time shall be set aside for washing and for cleaning.

(4) CI shall be administered and housed separately from EPW/RP. Except in the case of families, female CI shall be housed in separate quarters and shall be under the direct supervision of women.

"6-5. Supplies.

"b. Food.

(1) Subsistence for the CI will be issued on the basis of a master CI menu prepared by the theater commander. Preparation of the menu will include the following:

(a) The daily individual food ration will be sufficient in quantity, quality, and variety to maintain the CI in good health and to prevent nutritional deficiencies.

"6-6. Medical Care and Sanitation.

a. General

"(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."

AR 385-10, The Army Safety Program, 29 February 2000, Chapter 1, paragraph 1-4, paragraph n, subparagraph (1) (a), discusses commanders' responsibilities in implementing the Army Safety Program. Paragraph 1-5, subparagraph b, states that all decision makers will employ the risk management process. Chapter 2, paragraph 2-2, subparagraph b, states that the risk management process will be incorporated into SOPs. Paragraph 2-3, subparagraph d, discusses that, as a minimum requirement, annual inspections or surveys will be conducted on facilities—more inspections may be required based on risk. The specific language in the regulation follows:

"n. MACOM commanders will—(1) Ensure the full and effective implementation of the Army safety and OH program throughout their MACOM. This includes—(a) Providing a safe and healthful workplace and environment.

"b. Decision makers at every level will employ the risk management process, as specified in paragraph 2-3d of this regulation, to avoid unnecessary residual risk to missions, personnel, equipment, and the environment.

"2-2. Operational procedures. Leaders and managers are responsible for integrating risk management into all Army processes and operations. Safety and occupational health staffs will provide risk management training, tools and other related assistance. Leaders and managers will—

"b. Ensure that the risk management process is incorporated in regulations, directives, SOPs, special orders, training plans, and operational plans to minimize accident risk and that SOPs are developed for all operations entailing risk of death, serious injury, occupational illness or property loss.

"2-3. Prevention program procedures. a. Inspections and surveys. Inspections and surveys of operations and facilities will be conducted annually or more often (chap 4).

"d. Risk management. Risk Management is the Army's principal risk reduction process to assist leaders in identifying and controlling hazards and making informed decisions. (1) Every commander, leader and manager is responsible for protecting the force and persons affected by Army operations. The five-step process is the commander's principal risk reduction process to identify and control hazards and make informed decisions. (a) Identify hazards. (b) Assess hazards. (c) Develop controls and make risk decisions. (d) Implement controls. (e) Supervise and evaluate."

AR 420-70, Buildings and Structures, 10 October 1997, Chapter 2, paragraph 2-10, subparagraph a, states that lead based paint will not be used in Army facilities. The specific language in the regulation follows:

"a. Lead-based paint (LBP). LBP will not be applied to any Army facility."

Field Manual (FM) 3-19.4, Military Police Leaders' Handbook, 4 March 2002, Chapter 7, paragraph 7-8, states that detainees do not remain at forward collecting points more than 12 hours before moving to the central collecting point. Paragraph 7-9 states that existing structures should be used when possible. Paragraph 7-29 discusses safeguarding and protecting detainees from attack. Paragraph 7-30 discusses GS MPs and their role in establishing division central collecting points. Paragraph 7-33 discusses MP roles in escorting detainees from forward collecting points to division central collecting points within 12 hours. Paragraph 7-58, discusses the physical criteria for collecting points. The specific language in the field manual follows:

"7-8. ... Units needed to support the division forward collecting point should be specifically tasked in the brigade OPORD. MP leaders operating the division forward collecting point will—

- Ensure that captives do not remain at the division forward collecting point more than 12 hours before being escorted to the division central collecting point.

7-9. A forward collecting point (Figure 7-1, page 7-6) should not be set up near local inhabitants. Existing structures like vacant schools, apartments, or warehouses should be used when possible. This reduces construction requirements and minimizes logistical requirements. If existing structures are not used, detainees, except officers, can be tasked to help construct the collecting point. Prisoners may dig or build cover to protect themselves from artillery, mortar, or air attack. There is no set design for a forward collecting point. It can be anything from a guarded, roped off area to a secured, existing structure. The collecting point is built to suit the climate, the weather, and the situation. When selecting a collecting point, consider the following:

- The security of the detainees. The perimeters of the enclosure must be clearly defined and understood by the detainees.
- First aid. Injured or ill detainees require the same treatment that would be given to US casualties.
- Food and water. Detainees may have been without food or water for a long time before capture.
- Latrine facilities.
- Field sanitation. If possible, have detainees wash with soap and water to reduce the likelihood of disease.

- Shelter and cover.
- Language barriers. Provide interpreters and/or instructional graphic training aids (GTAs) in the EPW native language to compensate for the language differences.

"7-29. Protecting detainees from attack, preventing their escape, and quickly removing them from the battle area further safeguards them. Detainees should not remain at the division forward collecting point more than 12 hours, if possible. MP from the division central collecting point move forward to escort detainees back to the central collecting points.

7-30. MP in GS are responsible for establishing and maintaining the division central collecting point. They collect detainees from the forward collecting points, then process and secure them until corps MP come forward to evacuate them to the rear. Detainees should be transferred to the corps holding area or directly to an internment facility within 24 hours, if possible. One or more GS MP platoons operate the division central collecting point. The MP platoons are augmented by the division band and/or by the corps MP. Augmentation is based on the number and rate of captives expected.

"7-33. The MP platoon charged with operating the division central collecting point sends MP forward to the division forward collecting point to escort detainees back to the central collecting point. EPWs or CIs must be evacuated from the division forward collecting point as soon as possible, preferably within 12 hours. Before evacuating the detainees, MP checks with MI interrogation teams for any property to be returned to, or evacuated with, the detainees before they are moved.

"7-58. The size of the facility is based on the number of prisoners being detained. It may be room or a tent, as long as it provides shelter equal to that offered to other soldiers in the combat zone. The physical criteria for permanent and temporary structures are the same. MP use existing structures if you can. Otherwise, they use tents. ...

FM 3-19.40, Military Police Internment/Resettlement Operations, 1 August 2001, Chapter 2, paragraph 2-1, discusses the Military Police Battalion Commander's responsibilities. Paragraph 2-1 states the role of the MP battalion commander, paragraph 2-17 discusses the requirement for a safety program for I/R facilities, and paragraph states the engineer officer's responsibilities. Paragraph 2-37 states the responsibility of the engineer officer. Chapter 6, paragraphs 6-2 and 6-3 discuss the considerations of choosing sites for Internment/Resettlement (I/R) facilities. The specific language in the field manual follows:

"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, refugee, and US military prisoner), the commander, the cadre, and support personnel must be aware of the requirements for each category.

"2-17. Set up and administer a safety program for housed personnel in each I/R facility. Follow the procedures outlined in AR 385-10 and associated circulars and pamphlets to establish the safety program. Maintain records and reports for the internee safety program separate from those for the Army safety program.

"2-37. The engineer officer is a captain in a brigade and a lieutenant in a battalion. He trains and supervises internees who perform internal and external labor (construction and repair of facilities). The engineer officer is responsible for—

- Construction, maintenance, repair, and operation of utilities (water, electricity, heat, and sanitation).
- Construction support.
- Fire protection.
- Insect and rodent control and fumigation.

"6-2. The MP coordinate the location with engineers, logistical units, higher headquarters, and the HN. The failure to properly consider and correctly evaluate all factors may increase the logistical and personnel efforts required to support operations. If an I/R facility is improperly located, the entire internee population may require movement when resources are scarce. When selecting a site for a facility, consider the following:

- Will the interned population pose a serious threat to logistical operations if the tactical situation becomes critical?
- Is there a threat of guerrilla activity in the area?
- What is the attitude of the local population?
- What classification of internees will be housed at the site?
- What type of terrain surrounds the site, and will it help or hinder escapes?
- What is the distance from the MSR to the source of logistical support?
- What transportation methods are required and available to move internees, supplies, and equipment?

6-3. In addition, consider the—

- METT-TC.
- Proximity to probable target areas.
- Availability of suitable existing facilities (avoids unnecessary construction).
- Presence of swamps, mosquitoes, and other factors (including water drainage) that affect human health.
- Existence of an adequate, satisfactory source of potable water. The supply should meet the demands for consumption, food sanitation, personal hygiene, and sewage disposal.
- Availability of electricity. Portable generators can be used as standby and emergency sources of electricity.
- Distance to work if internees are employed outside the facility.
- Availability of construction material.
- Soil drainage."

p. Finding 16:

(1) Finding: Two of 4 internment/resettlement facilities did not segregate enemy prisoners of war from civilian internees in accordance with legal requirements.

(2) Standard: Standard of treatment for detainees in OPERATION ENDURING FREEDOM (OEF): CJCS message dated 211933Z JAN 02 states that members of the Taliban militia and members of Al Qaida under the control of U.S. Forces would be treated humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949. The DAIG has therefore used the provisions of the Geneva Conventions as a benchmark against which to measure the treatment provided to

detainees by U.S. Forces to determine if detainees were treated humanely. The use of these standards as benchmarks does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

CJCS Message dated 211933Z JAN 02, provides the determination regarding the humane treatment of Al Qaida and Taliban detainees. Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW) is the international treaty that governs the treatment of prisoners of war, and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), August 12, 1949, is the international treaty that governs the treatment of civilian persons in time of war.

As the guidance did not define "humane treatment" but did state that the U.S. would treat members of the Taliban militia and Al Qaida in a manner consistent with the Geneva Conventions, the DAIG determined that it would use Common Article 3 of the GCs as its floor measure of humane treatment, but would also include provisions of the Geneva Convention on the Treatment of Prisoners of War (GPW) and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC) as other relevant indicia of "humane treatment." The use of this standard does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

Standard of treatment for detainees in OPERATION IRAQI FREEDOM (OIF): OIF was an international armed conflict and therefore the provisions of the Geneva Conventions applied. Additionally, the United States was an occupying power and has acted in accordance with the obligations of an occupying power described in the Hague Convention No. IV Respecting the Laws and Customs of War on Land (H.IV), Oct. 18, 1907, including, but not limited to, Articles 43-46 and 50; Geneva Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW); and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), August 12, 1949. The GC supplements H.IV, providing the general standard of treatment at Article 27 and specific standards in subsequent Articles.

The minimum treatment provided by Common Article 3 of the Geneva Conventions is: (1) No adverse distinction based upon race, religion, sex, etc.; (2) No violence to life or person; (3) No taking hostages; (4) No degrading treatment; (5) No passing of sentences in absence of fair trial, and; (6) The wounded and sick must be cared for.

The specific language in the CJCS Message for OEF and the GPW/GC and H.IV follows:

CJCS Message dated 211933Z JAN 02, "Paragraph 3. The combatant commanders shall, in detaining Al Qaida and Taliban individuals under the control of the Department of Defense, treat them humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949."

GPW/GC, Article 3 (Common Article 3) – "In the case of armed conflict not of an international character occurring in the territory of one of the High Contracting Parties, each party to the conflict shall be bound to apply, as a minimum, the following provisions:

1. Persons taking no active part in the hostilities, including members of armed forces who have laid down their arms and those placed hors de combat by sickness, wounds, detention, or any other cause, shall in all circumstances be treated humanely, without any

adverse distinction founded on race, color, religion or faith, sex, birth or wealth, or any other similar criteria.

To this end the following acts are and shall remain prohibited at any time and in any place whatsoever with respect to the above-mentioned persons:

- (a) Violence to life and person, in particular murder of all kinds, mutilation, cruel treatment and torture;
- (b) Taking of hostages;
- (c) Outrages upon personal dignity, in particular, humiliating and degrading treatment;
- (d) The passing of sentences and the carrying out of executions without previous judgment pronounced by a regularly constituted court affording all the judicial guarantees which are recognized as indispensable by civilized peoples.

2. The wounded and sick shall be collected and cared for. An impartial humanitarian body, such as the International Committee of the Red Cross, may offer its services to the Parties to the conflict. The Parties to the conflict should further endeavour to bring into force, by means of special agreements, all or part of the other provisions of the present Convention. The application of the preceding provisions shall not affect the legal status of the Parties to the conflict."

Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), Article 84; and Geneva Convention Relative to the Treatment of Prisoners of War (GPW), Article 17. The specific language in the Geneva Conventions follows:

GC, Article 84 – "Internees shall be accommodated and administered separately from prisoners of war and from persons deprived of liberty for any other reason."

GPW, Article 17 – "Every prisoner of war, when questioned on the subject, is bound to give only his surname, first names and rank, date of birth, and army, regimental, personal or serial number, or failing this, equivalent information. If he willfully infringes this rule, he may render himself liable to a restriction of the privileges accorded to his rank or status. Each Party to a conflict is required to furnish the persons under its jurisdiction who are liable to become prisoners of war, with an identity card showing the owner's surname, first names, rank, army, regimental, personal or serial number or equivalent information, and date of birth. The identity card may, furthermore, bear the signature or the fingerprints, or both, of the owner, and may bear, as well, any other information the Party to the conflict may wish to add concerning persons belonging to its armed forces. As far as possible the card shall measure 6.5 x 10 cm. and shall be issued in duplicate. The identity card shall be shown by the prisoner of war upon demand, but may in no case be taken away from him. No physical or mental torture, nor any other form of coercion, may be inflicted on prisoners of war to secure from them information of any kind whatever. Prisoners of war who refuse to answer may not be threatened, insulted, or exposed to any unpleasant or disadvantageous treatment of any kind. Prisoners of war who, owing to their physical or mental condition, are unable to state their identity, shall be handed over to the medical service. The identity of such prisoners shall be established by all possible means, subject to the provisions of the preceding paragraph. The questioning of prisoners of war shall be carried out in a language which they understand."

q. Finding 17:

(1) Finding: Units operating collecting points (42%, 5 of 12), and 2 of 4 units operating internment/resettlement facilities, were not adequately resourced with communications equipment, shotguns, and non-lethal ammunition.

(2) Standard: Army Regulation (AR) 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Chapter 1, paragraph 1-4, subparagraph e, states that the G4 is responsible for logistics. Paragraph 1-4, subparagraph g (2), states that Combatant Commanders, Task Force Commanders, and Joint Task Force Commanders have overall responsibility for civilian internee (CI) programs and in the planning and procuring for logistical support. This regulation is a multi-service regulation implementing DOD Directive 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304 and outlines policies, procedures, and responsibilities for treatment of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI), and other detainees (OD) and implements international law for all military operations. The specific language in the regulation follows:

"e. Deputy Chief of Staff for Logistics (DCSLOG). The DCSLOG will ensure logistical resources are available to support EPW operations."

"g. Combatant Commanders, Task Force Commanders and Joint Task Force Commanders. Combatant Commanders, Task Force Commanders and Joint Task Force Commanders 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."

"(2) Plan and procure logistical support to include: transportation, subsistence, personal, organizational and Nuclear, Biological & Chemical (NBC) clothing and equipment items, mail collection and distribution, laundry, and bath for EPW, CI and RP."

Field Manual (FM) 3-19.40, Military Police Internment/Resettlement Operations, 1 August 2001, Chapter 6, paragraph 6-7, discusses the importance of good communication within a facility. The specific language in the field manual follows:

"6-7.

- Communications. Ensure that communication between towers and operation headquarters is reliable. Telephones are the preferred method; however, ensure that alternate forms of communication (radio and visual or sound signals) are available in case telephones are inoperable."

r. Finding 18:

(1) Finding: All inspected point of capture units established ad hoc kits containing necessary items and supplies for detainee field processing, but the items they contained and their quantities varied from unit to unit.

(2) Standard: There is no regulatory standard for a detainee field processing kit for capturing units. Army Regulation (AR) 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Chapter 1, paragraph 1-4,

subparagraph g (2), states that Combatant Commanders, Task Force Commanders, and Joint Task Force Commanders have overall responsibility for civilian internee (CI) programs and in the planning and procuring for logistical support. Chapter 2, paragraph 2-1, subparagraph a (1) (a) & (b), requires a capturing unit to document confiscated currency and to tag all captured prisoners. This regulation is a multi-service regulation implementing DOD Directive 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304 and outlines policies, procedures, and responsibilities for treatment of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI), and other detainees (OD) and implements international law for all military operations. The specific language in the regulation follows:

"g. Combatant Commanders, Task Force Commanders and Joint Task Force Commanders. Combatant Commanders, Task Force Commanders and Joint Task Force Commanders 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."

"(2) Plan and procure logistical support to include: transportation, subsistence, personal, organizational and Nuclear, Biological & Chemical (NBC) clothing and equipment items, mail collection and distribution, laundry, and bath for EPW, CI and RP."

"a. Each EPW/RP will be searched immediately after capture. ... Currency will only be confiscated on the order of a commissioned officer and will be receipted for using a DA Form 4137 (Evidence/Property Custody Document).

b. All prisoners of war and retained persons will, at the time of capture, be tagged using DD Form 2745. They will be searched for concealed weapons and items of intelligence. All equipment, documents, and personal property confiscated during the search must be tagged and administratively accounted for by the capturing unit. Capturing units must provide the: date of capture, location of capture (how the EPW was captured). The remaining information will be included on the tag as it becomes available."

s. Finding 19:

(1) Finding: All inspected units had adequate transportation assets to evacuate and/or transfer detainees from points of capture to collecting points, and eventually to internment/resettlement facilities.

(2) Standard: Army Regulation 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Chapter 1, paragraph 1-4, subparagraph g (2) and (5), states that Combatant Commanders, Task Force Commanders, and Joint Task Force Commanders have overall responsibility for civilian internee (CI) programs and in the planning and procuring for logistical support, to include transportation. This regulation is a multi-service regulation implementing DOD Directive 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304 and outlines policies, procedures, and responsibilities for treatment of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI), and other detainees (OD) and implements international law for all military operations. The specific language in the regulation follows:

"(2) Plan and procure logistical support to include: transportation, subsistence, personal, organizational and Nuclear, Biological & Chemical (NBC) clothing and equipment items, mail collection and distribution, laundry, and bath for EPW, CI and RP."

"(5) Establish guidance for the use, transport, and evacuation of EPW, CI, RP, and ODs in logistical support operations."

Field Manual 3-19.40, Military Police Internment/Resettlement Operations, 1 August 2001, Chapter 3, paragraph 3-7, states that the basic principle of speed is the responsibility of the capturing unit, who moves the detainee to the collecting point (CP). Paragraph 3-18 states that the number of detainees at the CP must be reported through MP channels to assist in the transportation planning. Paragraph 3-26 states who is responsible for moving detainees from CPs to the internment/resettlement facility. Paragraph 3-33 states the ratio of MP guards to detainees for movement. Paragraph 3-34 states that detainees cannot be moved with MP organic assets. Paragraph 3-35 states that the preferred method of detainee movement is by using the backhaul system. The specific language in the field manual follows:

"3-7. The Five Ss and T procedure is performed by the capturing unit. The basic principles are search, segregate, silence, speed, safeguard, and tag."

"3-18. Report the number of captives at each CP through MP channels. This aids in the transportation and security planning processes."

"3-26. Remove captives from the CZ as quickly as possible. The intent is to move them from division CPs to an I/R facility. The goal is for higher-level echelons to go forward to lower echelons and evacuate captives to the rear as follows:

- Division MP move forward to the forward CP to escort captives to the central CP.
- Corps MP move forward to the central CP to escort captives to the CHA.
- Echelons above corps (EAC) MP move forward to the CHA to escort captives to the I/R facility."

"3-33. The MP guard able-bodied captives during movement to prevent escape, liberation, or injury. A general planning consideration when determining the number of MP necessary is one for every five to ten captives.

3-34. When moving forward to escort captives to the rear area, MP responsibilities begin at the CP or the CHA where custody is accepted. Verify the method of moving captives, the location and time of pick-up, and the number of captives contained in orders from higher headquarters. The MP units cannot transport captives with organic assets.

3-35. The preferred method for moving captives through a battlefield is the backhaul system. This transportation system relies on assets that have delivered their primary cargo and are available to move personnel and materials to another location. The availability of vehicles will vary, depending on the cargo delivered to the area. The command and control (C2) element of MP unit tasked with evacuation arranges transportation through the local MCO."

t. Finding 20:

(1) Finding: Common leader training in professional military school contains only one detainee operations task.

(2) Standard: Army Regulation 350-1, Army Training and Education, 9 April 2003, Chapter 3, paragraph 3-2, requires that TRADOC establish training and education goals and objectives for all Army personnel. The specific language in the regulation follows:

"Training proponents. These would include TRADOC schools and colleges, USAJFKSWC&S and AMEDDC&S and would perform the following:

(a) Develop courses based on established training and education goals and objectives as well as the duties, responsibilities, and missions their graduates will be assigned.

(b) Develop, evaluate, and train leader, technical, and tactical tasks that focus on missions for the size or type units to which graduates will be assigned.

(c) Provide progressive and sequential training.

(d) Provide personnel serving at the same organizational level with training consisting of the same tasks, conditions, and standards.

(e) Provide leader, technical, and tactical training that affords soldiers and DA civilians an opportunity to acquire the skills and knowledge needed to perform more complex duties and missions of greater responsibility."

Field Manual (FM) 7-0, Training the Force, 22 October 2002, Chapter 1, paragraph 1-29, provides overall guidance for the implementation of Professional Military Education (PME). The specific language in the field manual follows:

"Professional Military Education - PME develops Army leaders. Officer, warrant officer, and NCO training and education is a continuous, career-long, learning process that integrates structured programs of instruction—resident at the institution and non-resident via distributed learning at home station. PME is progressive and sequential, provides a doctrinal foundation, and builds on previous training, education and operational experiences. PME provides hands-on technical, tactical, and leader training focused to ensure leaders are prepared for success in their next assignment and higher-level responsibility.

- Officer Education System (OES). Army officers must lead and fight; be tactically and technically competent; possess leader skills; understand how the Army operates as a service, as well as a component of a joint, multinational, or interagency organization; demonstrate confidence, integrity, critical judgment, and responsibility; operate in a complex, uncertain, and rapidly changing environment; build effective teams amid continuous organizational and technological change; and solve problems creatively. OES develops officers who are self-aware and adaptive to lead Army units to mission success.

- Warrant Officer Education System (WOES). Warrant officers are the Army's technical experts. WOES develops a corps of highly specialized experts and trainers who are fully competent and proficient operators, maintainers, administrators, and managers of the Army's equipment, support activities, and technical systems.

- NCO Education System (NCOES). NCOES trains NCOs to lead and train soldiers, crews, and subordinate leaders who work and fight under their leadership. NCOES provides hands-on technical, tactical, and leader training focused to ensure that NCOs are prepared for success in their next assignment and higher-level responsibility.

- Functional Training. In addition to the preceding PME courses, there are functional courses available in both resident and non-resident distributed learning modes that enhance functional skills for specific duty positions. Examples are Battalion S2, Battalion Motor Officer, First Sergeant, Battle Staff NCO, and Airborne courses."

u. Finding 21:

(1) Finding: Leaders and Soldiers assigned to 69% (46 of 67) of inspected units stated they desired additional home station training; and pre- and post mobilization training to assist them in performing detainee operations.

(2) Standard: Training on standard of treatment for detainees in OPERATION ENDURING FREEDOM (OEF): Guidance was provided stating that members of the Taliban militia and members of Al Qaida under the control of U.S. Forces would be treated humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949. The DAIG has therefore used the provisions of the Geneva Conventions as a benchmark against which to measure the treatment provided to detainees by U.S. Forces to determine if detainees were treated humanely and if the corresponding training was consistent with this obligation. The use of these standards as benchmarks does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

Chairman, Joint Chiefs of Staff (CJCS) Message dated 211933Z JAN 02, provides the determination regarding the humane treatment of Al Qaida and Taliban detainees. Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW) is the international treaty that governs the treatment of prisoners of war, and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), August 12, 1949, is the international treaty that governs the treatment of civilian persons in time of war.

As the guidance did not define "humane treatment" but did state that the U.S. would treat members of the Taliban militia and Al Qaida in a manner consistent with the Geneva Conventions, the DAIG determined that it would use Common Article 3 of the GCs as its floor measure of humane treatment and corresponding training, but would also include provisions of the Geneva Convention on the Treatment of Prisoners of War (GPW) and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC) as other relevant indicia of "humane treatment." The use of this standard does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

Standard of treatment for detainees in OPERATION IRAQI FREEDOM (OIF): OIF was an international armed conflict and therefore the provisions of the Geneva Conventions applied.

The minimum treatment provided by Common Article 3 of the Geneva Conventions is:
(1) No adverse distinction based upon race, religion, sex, etc.; (2) No violence to life or person;
(3) No taking hostages; (4) No degrading treatment; (5) No passing of sentences in absence of fair trial, and; (6) The wounded and sick must be cared for.

The specific language in the CJCS Message for OEF and the GPW/GC and H.IV follows:

CJCS Message dated 211933Z JAN 02, "Paragraph 3. The combatant commanders shall, in detaining Al Qaida and Taliban individuals under the control of the Department of Defense, treat them humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949."

GPW/GC, Article 3 (Common Article 3) – "In the case of armed conflict not of an international character occurring in the territory of one of the High Contracting Parties, each party to the conflict shall be bound to apply, as a minimum, the following provisions:

1. Persons taking no active part in the hostilities, including members of armed forces who have laid down their arms and those placed hors de combat by sickness, wounds, detention, or any other cause, shall in all circumstances be treated humanely, without any adverse distinction founded on race, color, religion or faith, sex, birth or wealth, or any other similar criteria.

To this end the following acts are and shall remain prohibited at any time and in any place whatsoever with respect to the above-mentioned persons:

(a) Violence to life and person, in particular murder of all kinds, mutilation, cruel treatment and torture;
(b) Taking of hostages;
(c) Outrages upon personal dignity, in particular, humiliating and degrading treatment;
(d) The passing of sentences and the carrying out of executions without previous judgment pronounced by a regularly constituted court affording all the judicial guarantees which are recognized as indispensable by civilized peoples.

2. The wounded and sick shall be collected and cared for. An impartial humanitarian body, such as the International Committee of the Red Cross, may offer its services to the Parties to the conflict. The Parties to the conflict should further endeavour to bring into force, by means of special agreements, all or part of the other provisions of the present Convention. The application of the preceding provisions shall not affect the legal status of the Parties to the conflict."

GPW Article 127 and GC Article 144 establish a requirement for signatories to the treaties to train their military on the obligations under the conventions. The specific standards follow:

"GC Article 127 – The High Contracting Parties undertake, in time of peace as in time of war, to disseminate the text of the present Convention as widely as possible in their respective countries, and, in particular, to include the study thereof in their programmes of military and, if possible, civil instruction, so that the principles thereof may become known to all their armed forces and to the entire population. Any military or other authorities, who in time of war assume responsibilities in respect of prisoners of war, must possess the text of the Convention and be specially instructed as to its provisions.

GC Article 144 – The High Contracting Parties undertake, in time of peace as in time of war, to disseminate the text of the present Convention as widely as possible in their respective countries, and, in particular, to include the study thereof in their programmes of military and, if

possible, civil instruction, so that the principles thereof may become known to the entire population. Any civilian, military, police or other authorities, who in time of war assume responsibilities in respect of protected persons, must possess the text of the Convention and be specially instructed as to its provisions."

Army Regulation 350-1, Army Training and Education, 9 April 2003, Chapter 1, paragraph 1-8, subparagraph 2d, establishes Home Station Training priorities for all Army personnel. Chapter 4, paragraph 4-5, outlines training requirements for Common Military Training for all Army personnel. Appendix G, paragraph G-1, subparagraph(s) b-c, outlines an overview of the Common Military Training program. Table G-1, provides examples of military training requirements in units. The specific language in the regulation follows:

"2d. Training will be the top priority for all commanders - To prepare individuals and units for immediate deployment and organizations for employment in support of operational missions, Army individual, collective, and modernization training provides for—

(1) Unit training that develops the critical components of combat readiness. These include development of—

(a) Soldiers, leaders, and units capable of deploying, executing assigned missions, and redeploying.

(b) Effective combined arms teams consisting of integrated combat, combat support (CS), combat service support, and close air support.

(2) An individual training system that—

(a) Produces initial entry soldiers who are highly motivated, disciplined, physically fit, and skilled in common soldier and basic branch tasks.

(b) Provides a training base of Army schools that prepares soldiers and DA civilian employees for more complex duties and progressively higher positions of responsibility.

(c) Produces soldiers capable of performing military occupational specialty (MOS), Area of Concentration (AOC), additional skill identifier (ASI), skill identifier (SI), special qualification identifier (SQI), and language identification code (LIC) tasks. Prior service Reserve Component (RC) and Active Army personnel receive required training through The Army Training System courses (TATS-C) or proponent-approved formal on-the-job training (OJT). TATS courses are designed to train the same MOS, AOC, skill level, SQI, ASI, LIC, and SI within the Army. TATS also includes MOS qualification (reclassification), Army leadership, and professional development courses.

(d) Provides reclassification training for changing an enlisted or warrant officer MOS, or to qualify an officer in a new branch. Reclassification training will be accomplished in accordance with Army Regulation (AR) 140-1, AR 614-200, and AR 611-1.

(3) Active Army, Department of the Army civilians, and RC forces able to mobilize rapidly, deploy, and perform their operational missions.

(4) Standardization of tasks and performance standards across the Army. Units and soldiers performing the same tasks will be trained to the same standard.

(5) Efficient and effective internal and external evaluation procedures that improve training, sustain required readiness levels, and control or reduce costs.

(6) A training system that supports peacetime requirements and transitions smoothly at mobilization."

"4-5. Common military training and common task training -

(a) CMT program identifies common military training requirements for unit commanders' planning and training programs because of their importance to individual soldier and unit readiness. Common military training is required for all leaders and soldiers at specific organizational levels, and proficiency in those subject areas is necessary, regardless of branch or career field or rank or grade. Common military training requirements are limited to those subject areas directed by law and HQDA. The HQDA, DCS, G-3, maintains centralized control over CMT directed training requirements and validates these requirements biennially."

"G-1. Overview -

(b) MACOM commanders have a degree of latitude in adding to or emphasizing certain training requirements; however, care should be taken not to degrade battle-focused training.

(c) Successful CMT programs are measured by performance to standard and not adherence to rosters or hours scheduled."

"Table G-1, Common military training requirements in units -

Weapons Qualification, Civil disturbance, Antiterrorism and Force Protection, Code of Conduct/ SERE, Law of War..."

Field Manual (FM) 3-19.4, Military Police Leaders' Handbook, 4 March 2002, Chapter 1, paragraph 1-4, outlines the 5 Military Police Functional Areas. The specific language in the field manual follows:

"b. Military Police Functional Areas -

(1-4) with the old battlefield missions, the term "operations" was used extensively and carried too broad of a meaning. To clarify the specific tasks of the MP, the battlefield missions have been redefined into the following five functional areas:

- MMS (Maneuver and Mobility Support)
- AS (Area Security)
- I/R (Internment and Resettlement)
- L&O (Law and Order)
- PIO (Police Intelligence Operations)"

FORSCOM Regulation 500-3-1, FORSCOM MOBILIZATION and DEPLOYMENT PLANNING SYSTEM (FORMDEPS), Volume 1, FORSCOM MOBILIZATION PLAN (FMP), 15 April 1998, Annex O, paragraph 2.4.4, defines additional training requirements at mobilization sites. The specific language in the regulation follows:

"Mobilized Unit Commanders --

(2) Commanders will additionally concentrate on training on soldier/leader skills. This training will be designed to make best use of time available after unit equipment is shipped and will include the following as a minimum:

(a) Physical fitness. Its importance cannot be overstated. Training should be conducted in accordance with AR 350-15 and FM 21-20.

(b) Common Task Test. Testing is most often practiced in a sterile, "round robin" setting using the tasks, conditions and standards provided in the STP 21-series Soldier's Manual of Common Tasks. Testing should include an element of tactical realism to cause soldiers, as members of teams, crews, sections, and squads to think and react instinctively.

(c) The NBC Training. The following tasks are of paramount importance:

1. Recognize/react to chemical/ biological hazards.
2. Don Mission-Oriented Protection Posture (MOPP) gear.
3. Detect and identify chemical agents using M8/M9 paper.
- 4 Administer nerve agent antidote to self (self aid) and to a nerve agent casualty (buddy-aid).
5. Decon skin and personal equipment using the M258A1 decon kit, the M291 skin decon kit, and the M295 equipment decon kit.
6. Drink from a canteen while wearing a protective mask.
7. Maintain and use the M40 series protective mask with hood.

(d) Care and maintenance of CTA 50-900 series and MTO&E equipment.

(e) Force protection to include terrorist threat. (See Appendix 1)

(f) Hazards and survival.

(g) Individual and crew served weapons proficiency.

(h) First Aid - Combat Lifesavers.

(i) Rules of Engagement.

(j) Personal hygiene.

(k) Threat and allied equipment recognition

(l) An orientation on the area of probable operations to include language, customs, courtesies, etc."

v. Finding 22:

(1) Finding: To offset the shortage of interrogators, contractors were employed, however, 35% (11 of 31) of contract interrogators lacked formal training in military interrogation policies and techniques.

(2) Standard: Army Regulation (AR) 190-8, Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 October 1997, Chapter 2, paragraph 2-1,

provides the regulatory guidance for interrogation of detainees in a combat zone. This regulation is a multi-service regulation implementing DOD Directive 2310.1 and incorporates Army Regulation 190-8 and 190-57 and SECNAV Instruction 3461.3, and Air Force Joint Instruction 31-304 and outlines policies, procedures, and responsibilities for treatment of enemy prisoners of war (EPW), retained personnel (RP), civilian internees (CI), and other detainees (OD) and implements international law for all military operations. The specific language in the regulation follows:

"(d) Prisoners may be interrogated in the combat zone. The use of physical or mental torture or any coercion to compel prisoners to provide information is prohibited. Prisoners may voluntarily cooperate with PSYOP personnel in the development, evaluation, or dissemination of PSYOP messages or products. Prisoners may not be threatened, insulted, or exposed to unpleasant or disparate treatment of any kind because of their refusal to answer questions. Interrogations will normally be performed by intelligence or counterintelligence personnel."

Field Manual (FM) 27-10, The Law of Land Warfare, 18 July 1956 (change 1, 15 July 1976), Chapter 3, section IV, paragraph 93, describes guidelines for the questioning of EPWs. The specific language in the field manual follows:

"No physical or mental torture, nor any other form of coercion, may be inflicted on prisoners of war to secure from them information of any kind whatever. Prisoners of war who refuse to answer may not be threatened, insulted, or exposed to unpleasant or disadvantageous treatment of any kind."

FM 34-52, Intelligence Interrogation, 28 September 1992, Chapter 1, defines and explains the purpose of interrogation. The specific language in the field manual follows:

"Interrogation is the process of questioning a source to obtain the maximum amount of usable information. The goal of any interrogation is to obtain reliable information in a lawful manner, in a minimum amount of time, and to satisfy intelligence requirements of any echelon of command.

A good interrogation produces needed information, which is timely, complete, clear, and accurate."

CJTF-7 C2 Interrogation Cell Statement of Work, CACI International, Inc., 14 August 2003, Paragraphs 7 (c) and 9 (c) describe the requirements for contract interrogators hired to man the theater and division interrogations support cells in OIF. The specific language in the statement of work follows:

"Identified interrogators should be the civilian equivalent to one of the following: 97E, 351E, Strategic Debriefing or an individual with a similar skill set, and US Citizens with a Secret clearance."

w. Finding 23:

(1) Finding: Interviewed leaders and Soldiers indicated their Law of War refresher training was not detailed enough to sustain their knowledge obtained during initial and advanced training.

(2) Standard: Training on standard of treatment for detainees in OPERATION ENDURING FREEDOM (OEF): Guidance was provided stating that members of the Taliban militia and members of Al Qaida under the control of U.S. Forces would be treated humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949. The DAIG has therefore used the provisions of the Geneva Conventions as a benchmark against which to measure the treatment provided to detainees by U.S. Forces to determine if detainees were treated humanely and if the corresponding training was consistent with this obligation. The use of these standards as benchmarks does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

Chairman, Joint Chiefs of Staff (CJCS) Message dated 211933Z JAN 02, provides the determination regarding the humane treatment of Al Qaida and Taliban detainees. Convention Relative to the Treatment of Prisoners of War of August 12, 1949 (GPW) is the international treaty that governs the treatment of prisoners of war, and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC), August 12, 1949, is the international treaty that governs the treatment of civilian persons in time of war.

As the guidance did not define "humane treatment" but did state that the U.S. would treat members of the Taliban militia and Al Qaida in a manner consistent with the Geneva Conventions, the DAIG determined that it would use Common Article 3 of the GCs as its floor measure of humane treatment and corresponding training, but would also include provisions of the Geneva Convention on the Treatment of Prisoners of War (GPW) and Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC) as other relevant indicia of "humane treatment." The use of this standard does not state or imply a position for the United States or U.S. Army on the legal status of its operations in OEF.

Standard of treatment for detainees in OPERATION IRAQI FREEDOM (OIF): OIF was an international armed conflict and therefore the provisions of the Geneva Conventions applied.

The minimum treatment provided by Common Article 3 of the Geneva Conventions is: (1) No adverse distinction based upon race, religion, sex, etc.; (2) No violence to life or person; (3) No taking hostages; (4) No degrading treatment; (5) No passing of sentences in absence of fair trial, and; (6) The wounded and sick must be cared for.

The specific language in the CJCS Message for OEF and the GPW/GC and H.IV follows:

CJCS Message dated 211933Z JAN 02, "Paragraph 3. The combatant commanders shall, in detaining Al Qaida and Taliban individuals under the control of the Department of Defense, treat them humanely and, to the extent appropriate and consistent with military necessity, in a manner consistent with the principles of the Geneva Conventions of 1949."

GPW/GC, Article 3 (Common Article 3) – "In the case of armed conflict not of an international character occurring in the territory of one of the High Contracting Parties, each party to the conflict shall be bound to apply, as a minimum, the following provisions:

1. Persons taking no active part in the hostilities, including members of armed forces who have laid down their arms and those placed hors de combat by sickness, wounds, detention, or any other cause, shall in all circumstances be treated humanely, without any

adverse distinction founded on race, color, religion or faith, sex, birth or wealth, or any other similar criteria.

To this end the following acts are and shall remain prohibited at any time and in any place whatsoever with respect to the above-mentioned persons:

- (a) Violence to life and person, in particular murder of all kinds, mutilation, cruel treatment and torture;
- (b) Taking of hostages;
- (c) Outrages upon personal dignity, in particular, humiliating and degrading treatment;
- (d) The passing of sentences and the carrying out of executions without previous judgment pronounced by a regularly constituted court affording all the judicial guarantees which are recognized as indispensable by civilized peoples.

2. The wounded and sick shall be collected and cared for. An impartial humanitarian body, such as the International Committee of the Red Cross, may offer its services to the Parties to the conflict. The Parties to the conflict should further endeavour to bring into force, by means of special agreements, all or part of the other provisions of the present Convention. The application of the preceding provisions shall not affect the legal status of the Parties to the conflict."

GPW Article 127 and GC Article 144 establish a requirement for signatories to the treaties to train their military on the obligations under the conventions. The specific standards follow:

"GC Article 127 – The High Contracting Parties undertake, in time of peace as in time of war, to disseminate the text of the present Convention as widely as possible in their respective countries, and, in particular, to include the study thereof in their programmes of military and, if possible, civil instruction, so that the principles thereof may become known to all their armed forces and to the entire population. Any military or other authorities, who in time of war assume responsibilities in respect of prisoners of war, must possess the text of the Convention and be specially instructed as to its provisions.

GC Article 144 – The High Contracting Parties undertake, in time of peace as in time of war, to disseminate the text of the present Convention as widely as possible in their respective countries, and, in particular, to include the study thereof in their programmes of military and, if possible, civil instruction, so that the principles thereof may become known to the entire population. Any civilian, military, police or other authorities, who in time of war assume responsibilities in respect of protected persons, must possess the text of the Convention and be specially instructed as to its provisions."

Department of Defense Directive (DoDD) 2310.1, DoD Program for Enemy Prisoners of War (EPOW) and Other Detainees, 18 August 1994, Section 3. provides DoD policy for training on the Geneva Conventions. The specific language in the directive follows:

"3. Policy, It is DoD policy that:

3.1. The U.S. Military Services shall comply with the principles, spirit, and intent of the international law of war, both customary and codified, to include the Geneva Conventions (references (b) through (e)).

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 Directive 5100.77 (reference (f)) before an assignment to a foreign area where capture or detention of enemy personnel is possible.

3.3. Captured or detained personnel shall be accorded an appropriate legal status under international law. Persons captured or detained may be transferred to or from the care, custody, and control of the U.S. Military Services only on approval of the Assistant Secretary of Defense for International Security Affairs (ASD(ISA)) and as authorized by the Geneva Conventions Relative to the Treatment of Prisoners of War and for the Protection of Civilian Persons in Time of War (references (d) and (e)).

3.4. Persons captured or detained by the U.S. Military Services 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. Detainees may be interviewed for intelligence collection purposes at facilities and installations operated by U.S. Army Military Police."

Department of Defense Directive (DoDD) 5100.77, DoD Law of War Program, 9 December 1998, Section 5.5, provides DoD policy for Law of War policy and training. The specific language in the directive follows:

"5.5. The Secretaries of the Military Departments shall develop internal policies and procedures consistent with this Directive in support of the DoD Law of War Program to:

5.5.1. Provide directives, publications, instructions, and training so that the principles and rules of the 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.

5.5.2. Ensure that programs are implemented in their respective Military Departments to prevent violations of the law of war, emphasizing any types of violations that have been reported under this Directive.

5.5.3. Provide for the prompt reporting and investigation of reportable incidents committed by or against members of their respective Military Departments, or persons accompanying them, in accordance with directives issued under paragraph 5.8.4., below.

5.5.4. Where appropriate, provide for disposition, under the Uniform Code of Military Justice (reference (i)), of cases involving alleged violations of the law of war DODD 5100.77, December 9, 1998 4 by members of their respective Military Departments who are subject to court-martial jurisdiction.

5.5.5. Provide for the central collection of reports and investigations of reportable incidents alleged to have been committed by or against members of their respective Military Departments, or persons accompanying them.

5.5.6. Ensure that all reports of reportable incidents are forwarded to the Secretary of the Army in his or her capacity as the DoD Executive Agent under subsection 5.6., below."

Army Regulation (AR) 350-1, Army Training and Education, 9 April 2003, Section 4-14, sets the guidelines for Law of War training. The specific language in the regulation follows:

"4-14. Law of war training

a. Soldiers and leaders require law of war training throughout their military careers commensurate with their duties and responsibilities. Prescribed subject matter for training at the following levels is specified in paras 4-14b-d of this regulation.

(1) Level A training is conducted during IET for all enlisted personnel and during basic courses of instruction for all warrant officers and officers.

(2) Level B training is conducted in units for officers, warrant officers, NCOs and enlisted personnel commensurate with the missions of the unit.

(3) Level C training is conducted in The Army School System (TASS).

b. Level A training provides the minimum knowledge required for all members of the Army. The following basic law of war rules (referred to as "The Soldier's Rules," which stresses the importance of compliance with the law of war) will be taught during level A training:

(1) Soldiers fight only enemy combatants.

(2) Soldiers do not harm enemies who surrender. They disarm them and turn them over to their superior.

(3) Soldiers do not kill or torture enemy prisoners of war.

(4) Soldiers collect and care for the wounded, whether friend or foe.

(5) Soldiers do not attack medical personnel, facilities, or equipment.

(6) Soldiers destroy no more than the mission requires.

(7) Soldiers treat civilians humanely.

(8) Soldiers do not steal. Soldiers respect private property and possessions.

(9) Soldiers should do their best to prevent violations of the law of war.

(10) Soldiers report all violations of the law of war to their superior.

c. Unit commanders will plan and execute level B law-of-war training based on the following:

(1) Training should reinforce the principles set forth in The Soldier's Rules.

(2) Training will be designed around current missions and contingency plans (including anticipated geographical areas of deployment or rules of engagement).

(3) Training will be integrated into unit training activities, field training exercises and unit external evaluations (EXEVAL). Maximum combat realism will be applied to tactical exercises consistent with good safety practices.

d. Army schools will tailor law of war training to the tasks taught in those schools. Level C training will emphasize officer, warrant officer, and NCO responsibilities for:

(1) Their performance of duties in accordance with the law of war obligations of the United States.

(2) Law of war issues in command planning and execution of combat operations.

(3) Measures for the reporting of suspected or alleged war crimes committed by or against U.S. or allied personnel."

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Appendix F

Abbreviations and Acronyms

AAR	After Action Review
ABN	Airborne
AC	Active Component
AD	Armored Division
ANCOC	Advanced Noncommissioned Officer Course
AOC	Area of Concentration
AOR	Area of Responsibility
AR	Army Regulation
ARNG	Army National Guard
ASD(ISA)	Assistant Secretary of Defense for International Security Affairs
ASD(SO/LIC)	Assistant Secretary of Defense for Special Operations and Low Intensity Conflict
ASI	Additional Skill Identifier
BATS	Biometric Assessment Tool Set
BIAP	Baghdad International Airport
BDE	Brigade
BN	Battalion
CAT	UN Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment
CAV	Cavalry
CCC	Captain's Career Course
C&E	Collection and Exploitation
CENTCOM	U.S. Central Command

CFLCC	Combined Forces Land Component Command
CHA	Corps Holding Area
CI	Civilian Detainee
CID	Criminal Investigation Division
CIF	Central Issue Facility
C-IMINT	Counter-Imagery Intelligence
CJCS	Chairman of the Joint Chiefs of Staff
CJTF-7	Combined Joint Task Force-7
CJTF-180	Combined Joint Task Force-180
CMT	Common Military Training
Co	Company
COE HI	Contemporary Operational Environment High Intensity
COMMZ	Communication Zone
COMSEC	Communications Security
CONUS	Continental United States
CP	Collecting Points
CPA	Coalition Provisional Authority
C-SIGINT	Counter-Signals Intelligence
CSM	Command Sergeant Major
CTC	Combat Training Center
CTT	Common Task Training
DAIG	Department of the Army Inspectors General
DD FORM	Department of Defense Form
DoD	Department of Defense
DOTMLPF	Doctrine, Organization, Training, Materiel, Leadership, Personnel, and Facilities

DRB	Detainee Release Board
DSA	Division Support Area
EC	Enemy Combatant
EPW	Enemy Prisoners of War
FDU	Force Design Update
FM	Field Manual
FORSCOM	Forces Command
FSB	Forward Support Battalion
FY	Fiscal Year
GC	Geneva Convention Relative to the Protection of Civilian Persons in Time of War
GPW	Geneva Convention Relative to the Treatment of Prisoners of War
HHD	Headquarters and Headquarters Detachment
HMMWV	High Mobility Multipurpose Wheeled Vehicle
HRD	High Risk Detainee
HUMINT	Human Intelligence
IBOS	Intelligence Battlefield Operating System
ICRC	International Committee of the Red Cross
ID	Infantry Division
IED	Improvised Explosive Device
IET	Initial Entry Training
IG	Inspectors General
ILO	In Lieu Of
IMINT	Imagery Intelligence
IN	Infantry
I/R	Internment/Resettlement

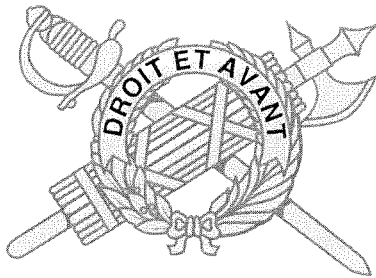
JABS	Joint Automated Booking System
JFLCC	Joint Force Land Component Commander
JIDC	Joint Interrogation and Debriefing Center
JIF	Joint Interrogation Facility
JRTC	Joint Readiness Training Center
JTF	Joint Task Force
LLEC	Low Level Enemy Combatant
LMTV	Light Medium Tactical Vehicle
METT-TC	Mission, Enemy, Terrain and Weather, Time, Troops Available, and Civilian
MG	Major General
MI	Military Intelligence
MICCC	Military Intelligence Captain Career Course
MI-CSB	Military Intelligence Corps Support Battalion
MILES	Multi-Integrated Laser Engagement System
MIOBC	Military Intelligence Officer Basic Course
MOS	Military Occupational Specialty
MP	Military Police
MRE	Meal Ready to Eat
MRX	Mission Rehearsal Exercise
MTOE	Modified Tables of Organization and Equipment
MTT	Mobile Training Team
MUA	Maneuver Unit of Action
MWR	Morale, Welfare, and Recreation
NCO	Noncommissioned Officer
NCOIC	Noncommissioned Officer in Charge

NDRC	National Detainee Reporting Center
NPWIC	National Prisoner of War Information Center
NTC	National Training Center
OCONUS	Outside the Continental United States
OD	Other Detainee
OEF	OPERATION ENDURING FREEDOM
OGA	Other Government Organization
OIF	OPERATION IRAQI FREEDOM
OMT	Operations Management Team
OPMG	Office of the Provost Marshal General
OTJAG	Office of The Judge Advocate General
OTSG	Office of the Surgeon General
PLDC	Primary Leadership Development Course
PME	Professional Military Education
POC	Point of Contact
POI	Program of Instruction
PUC	Person Under U.S. Control
PWIC	Prisoner of War Information Center
PX	Post Exchange
QDF	Quadrennial Defense Review
RC	Reserve Component
RCF	Regional Correctional Facility
ROE	Rules of Engagement
RP	Retained Person
R&R	Rest and Recuperation
RSTA UA	Reconnaissance, Surveillance, and Target

	Acquisition Unit of Action
SAEDA	Subversion & Espionage Directed Against U.S. Army & Deliberate Security Violation
SASO	Stability and Support Operation
SF	Standard Form
SFC	Sergeant First Class
SIMEX	Simulation Exercise (SIMEX)
SINGGARS	Single Channel Ground/Air Radio System
SOP	Standing Operating Procedure
SOW	Statement of Work
SRC	Soldier Readiness Checks
SSG	Staff Sergeant
STX	Situational Training Exercises
TAA	Total Army Analysis
TACSOP	Tactical Standing Operating Procedure
TDA	Table of Distribution and Allowance
TDRC	Theater Detainee Reporting Center
THT	Tactical Human Intelligence Team
TIF	Theater Interrogation Center
TOC	Tactical Operations Center
TOE	Table of Organization and Equipment
TRADOC	Training and Doctrine Command
TTP	Tactics, Techniques, and Procedures
UA	Unit of Action
UCMJ	Uniform Code of Military Justice
UEx	Unit of Employment x

UEy	Unit of Employment y
USACIC	U.S. Army Criminal Investigation Command
USAIC	U.S. Army Intelligence Center
USAICS	U.S. Army Intelligence Center and School
USAMANSCEN	U.S. Army Maneuver Support Center
USAMPS	U.S. Army Military Police School
USAR	U.S. Army Reserve
USASOC	U.S. Army Special Operations Command
USDB	U.S. Military Disciplinary Barracks
WOAC	Warrant Officer Advanced Course
WOCS	Warrant Officer Candidate School
2X	Human Intelligence / Counterintelligence Personnel
31B	Enlisted Military Occupational Specialty - Military Police
31E	Enlisted Military Occupational Specialty - Internment/Resettlement
97B	Enlisted Military Occupational Specialty - Counterintelligence Personnel
97E	Enlisted Military Occupational Specialty - Human Intelligence (HUMINT) Collector
351E	Warrant Officer Human Intelligence Collection Technician

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LETTERS

Letters

May 2006, Vol 37, No. 5
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How psychologists change

Last month's article on how clinicians change was interesting and inspiring. Hopefully, my "transitional tale" will be helpful and inspiring to my colleagues. Several years ago, with the growth of managed care and the onset of middle age, I realized that I needed to make some shifts in my life. I did a fair amount of soul searching, psychotherapy and hypnotherapy so that I could discover what I needed to add to my life.

I had been in private practice for some time, but I wanted to integrate some of my other passions into my career. Once I accepted the idea that I didn't have to be just a therapist, I made the following changes in my life:

- I have always loved sports, and I have developed an expertise in counseling athletes and added this specialty to my practice.
- I have always loved writing, and I now write a weekly column for three newspapers. I write about psychology, sports, family, people and coping.
- I bought my first stock at age seven and have always been fascinated with the equity markets. I passed three licensure exams, and I now trade stocks for a financial services firm.

I would encourage my colleagues to follow their passions, to be open to change, to reach out for help and to experiment so that they might enjoy an adventurous work life.

Jay P. Granat, PhD
Fort Lee, N.J.

The PENS Task Force

I wish to affirm the APA PENS Task Force report regarding human rights and fully and unconditionally support APA policy in that regard, particularly as it relates to any psychologist who is a member of APA who shall not participate in any activity regarding the assessment of any prisoner of war or suspected person alleged to be a terrorist or any prisoner of any prison in Guantanamo Bay or elsewhere under our care or auspices, awaiting trial or incarcerated without cause. Nor shall any psychologist in particular affiliated with Div. 19 (Society for Military Psychologists) be allowed to provide any professional services to gain information from alleged prisoners or captives unless such persons have first been informed of their captivity or imprisonment and charged with a crime.

William A. Fraenkel, PhD
Flemington, N.J.

In the President's column (</monitor/feb06/pc.aspx>) of the February *Monitor*, Gerald Koocher praises the report of the APA Task Force on Psychological Ethics and National Security (PENS) and dismisses critics. As a task force member, I approved the PENS report as a preliminary guide to psychologists involved with interrogation of terrorist suspects, anticipating fulfillment of the appended recommendations. For practical guidance and for accountability to the APA membership though, I believe more is needed.

The PENS report largely addresses the psychologist as an independent decision-maker, slighting the power of situation. Practical guidelines require articulation of psychologists' roles in interrogation in national security settings. The

guidelines should cover such situational factors as career pressure, command structure, deception of psychologists, plausible deniability, impunity under field conditions and substitutability of paraprofessionals for psychologists.

Regarding accountability, the task force mandate from APA's Council of Representatives excluded investigation of psychologists' participation in coercive interrogation, in spite of demands for investigation by APA divisions. The confidentiality rule on our proceedings rightly protected confidences of military members, I think, but wrongly obstructed APA debate. During our three-day meeting, the continuous presence of APA functionaries as important informational resources nevertheless implicitly supported APA authorities. Gerald Koocher, appointed by then-President Levant as a second liaison from the APA council to the PENS Task Force, has spoken as forcefully against task force dissidents as against critics of the PENS report. The report therefore should not be construed as the independent product of the task force members.

**Jean Maria Arrigo, PhD
Irvine, Calif.**

In "Speaking against torture," (</monitor/feb06/pc.aspx>) Gerald Koocher continues a pattern of APA overreliance on the PENS Task Force report as a means of responding to and speaking against torture. Although the work of the task force made a positive contribution, it fell short of the mark in numerous respects. Most notably, it did not take a strong stand affirming the primacy of international human rights standards as the appropriate basis for a code of professional ethics. This failure is tantamount to complicity in the U.S. government's open defiance and idiosyncratic interpretations of international rights standards.

Equally important, the PENS Task Force report should have been one element in a comprehensive response in which APA made a strong, concerted, comprehensive, proactive public and internal response of the kind warranted by the severe human rights violations. No such response has been forthcoming from APA, which has failed at the highest levels to sound a ringing condemnation of psychologists' participation not only in torture but in all forms of cruel, inhumane and degrading treatment of detainees, including psychological tactics such as sleep deprivation. The quiet, timid approach APA has taken on these issues is inappropriate to the situation, inconsistent with the association's mission and damaging to our profession.

In this respect, President Koocher's article continues APA's denial of its professional responsibility to speak out loudly not only against torture but a wide range of abusive psychological methods that trample international human rights standards.

**Michael Wessells, PhD
Randolph-Macon College**

Editors' note: Drs. Arrigo and Wessells were members of the PENS Task Force.

Find this article at:

<http://www.apa.org/monitor/may06/letters.aspx>

Jean Maria Arrigo's Notes

**APA PENS Task Force Meeting
June 24-26, 2005
Washington, DC**

Introduction

This document is a transcription of my handwritten notes from the proceedings of the APA PENS Task Force Meeting. Photocopies of the handwritten notes are attached.

My Friday, June 24, notes in my professional journal (No. 22: June 18 - September 11, 2005, pp. 32-61) are fairly complete until late afternoon, when a military Task Force member objected to my habitual note-taking. (See p. 19 below.) On Saturday I took brief margin notes on a photocopy of the second draft of the PENS report. On Sunday, a half-day meeting, there are a few notes from memory, during a recess, again in my professional journal (pp. 61-63) and a few margin notes on a photocopy of the third draft of the PENS report. In an addendum I relate an episode of the meeting in which I was too involved to take notes.

I regret biases, omissions, and errors in these notes but cannot directly remedy them.

Jean Maria Arrigo
June 13, 2006

**June 24 - 26, 2005 Meeting
(Approximate) Participant List**

APA PENS Task Force Members

OM Olivia Morehead-Slaughter, Chair
JMA Jean Maria Arrigo
MB Morgan Banks
RF Robert A. Fein — not present on Sunday
MG Michael G. Gelles
LJ Larry James
BL Bryce Lefever
SS R. Scott Shumate
NT Nina K. Thomas
MW Michael G. Wessells

SB Stephen Behnke — Director of APA Ethics Office, rapporteur

APA Staff Consultants and Observers Present at June 24-26 Meeting

BA Barry S. Anton — APA Board liaison to the ethics committee
Steven Breckler — APA Science Directorate
Susan Brandon — APA Senior Scientist (on interrogation methods.)
RF Rhea Farberman, Office of Public Affairs (present by speakerphone on Sunday)
Heather Kelly — APA Science Policy staff, liaison to DOD, present all days?
GK Gerald P. Koocher — APA President-Elect, 2nd APA Board liaison to the Task Force, present on Friday, on Sunday by speaker phone
Geoff Mumford — Director of APA Science Policy
MGravitz Mel Gravitz — retired clinical psychologist, director of Navy internship program, present Saturday and Sunday
RN Russ Newman, JD, Ph.D. — APA RN, present all days
Rhea Jacobson — APA office manager, present all days
APA intern

6/24/05 Friday 3Session [Notes recorded in my professional journal No. 22: June 18 - September 11, 2005, pp. 32-62.]

Introduction by OM

Self introductions by Task Force members and all present

SS Studies what kind of interrogations yield what kind of intelligence.

LJ BSCT at Guantanamo and Abu Ghraib. Will give us the skinny, including the children there. Do not mention LJ or MB to the press because terrorists will come after them.

[other introductions]

OM Every day in the media, there is more reason for us to be here. We need to get on the record. We do not need to do investigations. There is an ethics committee already. We owe guidance to psychologists. We should arrive at a written product. Be civil with one another. Notes are not for attribution!

Do we want outside contributors? Gregg Bloche is suggested, who wrote the article in the *New England Journal of Medicine* [July 7, 2005, ____].

LJ does not want to be in the same room with Gregg Bloche.

MB Greg put ____'s name in the paper and has ruined his life [i.e., he was wrongly accused of torture and will now become a target of terrorists.]

LJ says there was a bounty on his [own] head at Abu Ghraib. He will have to excuse himself if Bloche comes in.

Big hullabaloo about Gregg Bloche. The military people don't want him.

OM returns us to the starting point. There are difficult places where psychologists find entanglements, unclear ethical issues.

MB What's on the table?

OM Interrogation consultancy.

RF As historical background, in the 60s and 70s the intelligence efforts were in technical, e.g., SIGINT and Imagery. But now the focus is on understanding other persons and cultures, shifting to behavior, implicating psychologists. Psychologists will be more broadly utilized.

GK What guidance do we give psychologists where the client is an organization but the target is a person? What kind of ethics do we want to use, normative or utilitarian? Kant or Mill?

NT We must take culture and ethnicity into account.

JMA Makes a plea for data collection, especially for recording the experience of national security psychologists dealing with the present issues.

MW Concern with training and advice, beyond U.S. national security to psychologists in other countries.

OM Wants scenarios from the military psychologists that are perplexing under our current ethics code.

SB New areas of psychology have developed since the code was written, for example, use of the internet. We didn't need new principles but needed to know how to apply the principles. Does the APA ethics code adequately speak to these issues, or do we need to add to the code?

OM Start with the mandate from the Board of Directors, Part #2: _____. What roles are psychologists asked to take in investigations related to national security.

SB We don't want dual-theory roles. The code says the rules apply across roles.

MG People choose to represent themselves in roles according to context. The organization *is* the client if you are consulting for the police, etc.

LJ What has kept him out of trouble as *Colonel* Larry James is the "do no harm" principle of psychologists, which continues to ground him.

MG The interrogation consultations have gotten so much attention. But the assessments of people are even more challenging. Psychology plays many different roles in national security,

BL Something should go before the question of roles. An interrogation is not necessarily harmful to the target. There is no harm implied by interrogation. [Brief description of SERE ____ training.] At SERE, psychologists have recommended torture in training to prepare personnel for capture.

MG Police agencies have been receiving psycholog_____

BL Thinking in terms of Venn diagrams, DOD ethics and APA ethics overlap. Where are the differences? Just discuss these.

RN The profession will never advance if we don't apply the profession to new areas.

[We can't use dual role theory because], irrespective of role, the psychological knowledge carries across all activities.

MB Illegal behavior is absolutely proscribed. Prior to discussing the ethical, under no circumstances do you get to do illegal behavior. He doesn't agree with the Venn diagram approach. DOD rules are only legal, not ethical.

Regarding torture interrogation, where psychologists are posted there has been no abusive interrogation.

SM (?) We need to define psychologists' "involvement." We rule out the extreme of being directly involved in the interrogation.

MB Address this through boundaries of competence.

SS We have a threat that is real, unlikely to go away. Ultimately, the information issues will not go away. How do we professionalize it so we really do learn to get the best information under humane circumstances? Provide structure, guidance. Embrace this as an opportunity.

JMA Because of infiltration, espionage, etc., whatever [framework, procedures, knowledge] we develop for ourselves, we develop for the whole world.

SS(?) Good. Our practices would improve the world in this matter.

LJ Distinguish between interrogation and interview. Psychologist's teach interview techniques.

MG As psychologists, we don't do interrogation but assessment. We assist in getting *reliable* and *valid* information, humanely. Don't get caught up in the context [ie., public uproar over torture]. Psychologists assess behavior.

MW Does the psychological assessment and advice on how to collect information, does this mean analyzing vulnerabilities and how to exploit them?

SS Much interrogation is actually an interview. But a [police] investigation of a crime *is* coercive.

MB An example: You recommend that the interviewer offer tea, talk about his family, show a photo of his family. In the forensic word, this is normal. Can we fall back on this model? Is it legal in national security interrogation?

BL We *should* be exploiting vulnerabilities. I have an oath to the people to whom I swear allegiance.—But remember the *Washington Post* front-page test.—He takes his commitment to U.S. safety ahead of psychology. Also, in evaluating (or denigrating) interrogation, remember that most detainees prefer interrogation to isolation.

NT A big percentage of people at Abu Ghraib were not terrorists to begin with. So there is a higher standard for interrogation. They pose more of a threat after the treatment they receive.

RF Example: A psychologist is asked to give an assessment of someone who has no relevant information. But the organization thinks the person does. How do we advise the psychologist? The authorities said everyone at Guantanamo Bay was a terrorist. Psychologists ask who should make the diagnosis?

JMA We should keep in mind that psychologists are manipulable by authorities. A major failing of the President's Advisory Committee on Human Radiation Experiments, in my opinion, is that they treated the scientists and physicians as morally autonomous. But they are manipulable. [I give the Garcia quote and the Counterintelligence Liaison Officer quote.]

SS Psychologists don't have much power. They can't change the track the train takes. [Diffuses previous statement.]

LJ Disagrees with MJA about manipulability of the psychologists.

JMA We disagree.

MB Worried about being tarred(?).

[There is an uproar here.]

LJ There is a second groups we have...

MB There is no one in the army outside of my purview. I have a view of all the military agencies. He tells his psychologists to stop wrong interrogation behavior....

NT You say the NEJM [*New England Journal of Medicine*] article [by Greg Bloch and Jonathan Marks] is wrong?

MB Yes. It is inaccurate. Medical information has *not* been used to shape interrogation.

LJ Arrived in Gitmo in January 2002 (?). He set it up, so he knows what is happening. When he arrived, interrogators had a right to go to the hospital and question nurses and doctors. They had a *legal* right to medical records. But this practice did not pass the *Washington Post* test; it was unethical.

If prisoner X had an appendectomy last week, [no one was jumping on his abdomen]. He wrote the memorandum that no intelligence member can go into

any medical facilities. They would be court martialed. He put the policy in place around February 2002. Now it is *written policy*.

SS On how difficult it is to deal with detainees. How can information be validated? There are language difficulties, cultural issues, enemy attitudes. Information is not easily validated. It is a long and cumbersome process. Are we wrongly holding people? It takes a long time to find out, very difficult.

MB LJ got there [to Guantanamo Bay] in January 2003. The psychologists there before that did not have any training. That's corrected now. What happened before was *legal*. There is no legal requirement for confidentiality. But it didn't pass the front-page test, so they changed the rule.

Example: Before you offer a Snickers Bar to establish rapport, you need to know the person isn't a diabetic. But there are whole countries of people who have never seen a physician.

NT What about the Geneva Convention? Is medical confidentiality required?

MB No.

NT What is the significance of medical information?

LJ You can't use what you find in a medical record as part of an interrogation process. You can't withhold medical treatment or barter it.

Example: A guy had open-heart surgery six weeks before interrogation. None of the interrogators knew this. They LJ took the guy off the list for interrogation. Also, detainees may have communicable diseases—TB, hepatitis, ...—and we need medical information to protect the detainee and interrogators.

MB The Geneva Convention does not address...

MW ___ has achieved the status of customary law.

NT What are the experiences of interrogators that they [later] talk to the press?

LJ New interrogators, 18- and 19-year olds, with six weeks of training.

NT How this appears outside of psychology....

GK The unfolding picture of interrogation....

NT Time frames are not important to us [in the present Task Force business].

RN The message that goes to our own field can reflect the complexity. The message that goes to the public cannot reflect the complexity.

SS We can't adjudicate....

SB Summarizes: What are our bottom lines?

Common issues. (1) competence unique to psychologists need to play an important role. (2) The APA ethics code does apply when psychologists apply their skills. The dual-role theory does not stand. (3) ____ (4) It is important to clarify *who* is the client.

[Recess. I talk with MB about the importance of the history of interrogation in this era and inefficacy of torture—all the military psychologists are in complete agreement on this point. We need mature interrogators. He discussed the organizational problems that led to using the 18- and 19-year olds.]

OM Summary #1: Safe, legal, ethical, effective. The decision making path.

SB How repetition in the press messes up message. Clarify. Simplify.

RF No one can define "torture."

MW There is widespread agreement on "torture."

LJ Let's lay out basic principles, worry about definition later.

LJ & RN Psychologists have a valuable and appropriate role to play in participating in interrogations.

BL The purview of this committee is only ethics. Get information, but don't damage. Torture damages our international standing.

SS We don't truly know what is effective or not effective. It's an empirical matter what works. Don't rule out until we know.

SS It needs to be a professional issue.

MG Talking about *accurate, reliable* information. Doesn't want to test whether coercive techniques are reliable. How does ethics relate to efficacy?

LJ Clarifies safety of *all parties*. Psychologists should work as consultants and not conduct interrogations.

MG Train, assess, consult. There is more to lose by the psychologist becoming an interrogator.

MB Not absolutist. What if the psychologist....

MG Must keep identification as a psychologist, not be the interrogator

NT Wants the absolutist position.

MG It's not just terrorism. Espionage, etc. So *need definite rule*. This is much broader issue than Department of Defense (DoD).

RF Thought experiment about psychologist who joins FBI as interrogator....

LJ Depends on how she represents herself.

RF Complicates example.

GK ____

RN Can act in other rules in spite of being trained as a psychologist. But must be ethically appropriate in my capacity as psychologist.

MG Takes a hard line on no dual roles. Many FBI special agents who had doctors degree in psychology. They have special... *Role clarity*.

BL Ethics code says we can have dual roles if unavoidable. But be clear [in your presentation of yourself in role].

RN Don't shift roles with the same person.

MW Can you *really* take off your psychological expertise? Fundamentally different view as a psychologist.

SS In the extreme, people who get degree as psychologist are confined to that domain until they died.

MB ____

BL An article in *American Psychologist* on confusion of roles.

MJA ____

MW Humanitarian work. Can't off-duty have sexual relations [with "clients"], or then lose one's mandate.

MJA I disagree with OM's "stay within their competencies." Not settled. Report differences.

BL. Explain the pressure.

RN Should say what is being done that *is* appropriate. Got to clarify that psychologists are not engaged in inappropriate behavior on the whole.

SS Say psychologists encounter conflicts, not that there are pressures.

BL There *are* pressures. Have to stand [up]: "Sir, I am your best advice, and I am going to give you other advice in this situation." We are subject-matter experts. That ability to say "no" is very powerful.

RF What advice can we give lower-level psychologists? Whom can I ask a classified question? Think about processes that would....

JMA How do psychologists get into the military?

MB They have internship sites.... [Or] sent to Uniformed Services University. [Much entanglement, money....]

MW 1. What kind of *damage* to APA if we say we do not support human rights as defined in the Geneva Conventions and other conventions? 2. What about damage to our national security? If we engage in human rights violations, the message that sends to other countries. They therefore become our enemies and attack.

Difficult to define when something acts in long-term gain. Short-term info may be long-term loss.

SS Says he agrees with MW

As a military officer, *cannot* take a public stand opposed to the U.S. Government. We *want* to have a good public discussion, so we want that to be discovered.

GK APA Code says we will advance human welfare. Also, a long historical tradition of civil disobedience. Whose view [of right]?

MW Taliban has philosophical practice. But there are covenants on human rights. The standards are not an issue for debate at this point. An international law [settled the] argument about whether the Convention on Children is right ... because the U.S. did not agree.

NT We will be uncomfortable in deviating from international law.

BL We are under *American* law as ____

MW APA code commits us to human rights. Does American law trump international law? As a professional society, do we have commitments in human rights direction? If we aspire to these things, can we throw international human rights away? APA is diverse but the diversity is not represented here. Others

will say human rights are first. In other parts of the world, U.s. is accused of exceptionalism. We are not acting in a way that generates respect. We would damage ourselves as an association if we support American law when it contradicts international law.

DoD has defined a set of standards not congruent with international law. If we endorse that we damage our credibility. [He] gives the story for other countries. The U.S. throws out human rights when expedient for U.S. policy. If the standard of *legal* is defend by the Department of Defense, I have a problem with this.

MB No problem. We accept the Geneva convention.

MW The abuses at Guantanamo before Col. James arrives....

LJ The President said captives do not fall under the Geneva Convention, but we will treat captives under the Geneva Convention anyway.

MB Geneva Conventions don't kick in....

MW But there was an act of assessment by the U.S. Government. Red Cross and other human right organizations said the U.S. interpretation was wrong. By international opinion, U.S. was wrong.

LJ When soldiers deploy, they must attend a Geneva Conventions workshop.

MB On Geneva Convention....

MJA Convention against Torture.

NT Agrees with me on Convention against torture. Gonzales and Bush have spoken against but all these terrible things have happened.

GK It's a distraction from where we're at. We're not talking about international human rights standards.

MW As APA will we support DoD level of stress but against international law.

GK Not even willing to say APA members should obey U.S. law. APA opposing Patriot Law in aspects. It's a distraction to draw international law into the [APA] ethics law.

MW Back to the phrase "safe, legal, ethical, effective..." We've problematized it.

BL Uniform code of Military Ethics — wants this.

[Much discussion.]

SS ____

MW Standards have two functions: 1. aspire to high level; 2. prosecutory.

BL If you stand outside your community, by definition you're unethical.

MW As a professional association, as a moment of national panic, take a high standard. If someone is going to work with children, should obey Convention on Children.

RF If person disobeys Convention on Children, should person be censured by APA?

SB It's a conflict-of-laws situation. The ethics code would refer to the jurisdiction [of the episode].

MW When you're working in an international situation [you have to abide by the Convention on Children].

RN There is not a specific law. There are many laws. E.g., confidentiality is absolute or non absolute depending on jurisdiction. If legal but not ethical, we still don't do it.

MW No monolithic interpretation.

Are international human rights standards international law or APA says international human rights are not part of its commitments, will damage itself.

[Lunch. Gerry Koocher had to leave. Family medical emergency.
Lunch conversation with BL. Says my father should be congratulated...]

SB The bottom line from this morning.

Document A [SB's first draft of PENS report from morning discussion. See photocopies that follow.]

BL Can psychologists recommend playing on a person's fears? Example of suicidal Islamic detainee, threatened if dies will bury him with a pig.

RN In treating teens, manipulated them all the time for their well being.

SB Certain words very evocative: explicit, manipulate, interrogate.

MB Document A-9. At some point Guantanamo doctors would not give *any* information. Detainee had gunshot wound to the leg. Q: Does he have gunshot wound? [Authority] wanted to identify guy.

RF Suppose if identified, he will then be interrogated or this information exploited.

MB You've discovered he's a diabetic. Told interrogator Snickers bar not to be given to him. But then interrogator uses it against him. The medical records, not the technique, is the problem.

BA Is the problem the medical record of the psychological record.

LJ The allegation is that Biscuit psychologists are taking medical information and using it against detainees. Picture: fiftyish diabetic, 120 degrees Fahrenheit outside. Eighteen year-old interrogator: "I'll keep you here twelve hours. You might go into a diabetic coma."

RN Using information to make persons medically safe versus using it for knowledge versus using it against medical safety.

JMA I want to add the proviso that the psychologist make a broad consideration of the possible situations of disadvantage. [See A-9.]

RF, LJ, MB Agree with me.

MW The Torture Convention talks about sever suffering. The sense of obligations to family varies across culture. It would be useful to hear from some human rights people.

MG Are you saying that telling the Afghan diabetic he won't see his family soon is serious pain?

LJ What about a Chicago detective doing the same? Is it coercive or making an informed decision?

MW I want to flag it as a question of culture.

SS A very important point. Suffering versus severe suffering.

RF The perception question is so important. Say an uneducated Afghanian is picked up, gets medical treatment, goes home. From his perspective, maybe the medical treatment was worth it.

SS There was criticism of people sleeping on mats. But most slept on mats or no mats before capture. So also *not* understanding culture.

JMA Document A-7. "Psychologists clarify the identity of the client" to whom?

SB It's an informed consent process.

MB What's inappropriate is misrepresenting oneself to the client.

RF Scenario: A psychologist, B case officer, C target. Does A have to be identified to C as a psychologist.

SS In U.S. APA guidelines say you have to follow the law in the U.S. But suppose we're overseas and there is no stipulation.

JMA I say this is a worse problem, trying to get foreigners to betray their country.

MG Case officer B meets with C. We were B. Then A....

JMA I say, no, psychologists should not be involved in enticement of spies.

RN What about deceit in psychological research?

SB We have a standard on deception in research, code 8.0.7. Excludes physical pain or severe emotional stress. Deception is okay but there must be a debriefing.

MB Can psychologists provide recommendations for advertising campaign? Ethical?

MB or SB? How about Virginia Lottery? (To promote a healthy life style.)

SB It has never been held unethical. Some said *should be* unethical for psychologists' to help ads for children under a certain age.

MG Training to deceive—soldiers, police officers, etc.

JMA I'm not comfortable with this.

SS Hard to draw a line. The line moves. Can never account for all the variables.

OM This is where I wanted to start today, with the examples.

MG But this happens with police psychologists every day.

OM We need to address these, too.

MG Life-and-death national security cases. Squillacote case.... If you can tell patterned behavior, don't need to check therapy files. They'll take the garbage [of the subject] over the therapy files.

BA Go back to informed consent. Didn't find applicable. This ethics code does not include examples. Typical reader of ethics code won't generate good examples. Let's add examples.

SS Getting publishable examples will be awful. No useful product.

SS? Use spy novels, already fictionalized.

BA What would be helpful for our colleagues out there?

NT Aren't there adequate public cases?

SS maybe APA can generate it. DoD psychologists can't.

NT For the next iteration, include another....

MG Don't necessarily want bad guys to know garbage is important.

RN Some issues already consequences of existing ethics code. Then need to add some examples. Must show how they apply.

SB Traffic coming across his desk says people think psychologists are involved in torture. Wrong.

[Missed simultaneous conversation.]

RF People's biases have an interpretive aspect....Can APA aid relevant organization to offer this kind of discussion to your psychologists?

[Recess.]

OM We are headed for another draft.

AB What are the rules of confidentiality of *this* group?

OM We must agree this has to stay in this room. Beyond this room should not talk.

SB What get said here stays here.

NT Will be explained.

SB We want the Task Force report to stand for....

MW Suppose members of the media contact us?

SB We will not reveal the substance of the discussion.

[Overlapping talk.]

RN The media will want to know, just as will counsel. Create a statement *for* the press. Must get more proactive.

JMA I complain about the secrecy.

RF Firmly objects to us speaking. Says it makes them vulnerable.

SS There are confidentiality requirements all over. Military psychologists also deal with classified information.

MG Our examples.

SS Others may not realize the significance.

NT Maybe shouldn't identify anyone.

LJ ____

MW Wants to identify places where we couldn't reach agreement, e.g., on human rights.

SS Has big concerns because the media have blown up the human rights issue. Could be misconstrued that they are not being attentive to human rights.

RF Members of the Task Force chosen not to represent....

BL Also, doesn't want sharing.

BA *Confidentiality* versus *secrecy*. He chides me.

RN Two good reasons for the confidentiality. This is a group that is undertaking a very controversial topic. To the extent the information gets outside of the meeting, can ignite the fire instead of dampen it.

Barry, what have other groups done?

BA What goes on here cannot be taken out of context, given out in fragments.

OM We need to reach agreement.

BL Wants to take the discussion back to his community. Doesn't think it's a breach of confidentiality.

RF I disagree. The ground rules should be not to say anything.

BL I want to take the *issues* to my community to discuss.

OM & NT Want confidentiality.

BL The *issues* only.

OM Give me a concrete example.

BL. E.g., you are consulted. Somebody consults with you overseas....

RF Doesn't want *any* mention.

BA Go back to our three-point charge from the Board of Directors. This is what *we produce*, what we are supposed to do.

SG Whatever document we give to the board reflects our best thinking about these issues.

JMA I ask for [supplying the] reasoning that takes us to the conclusions.

S Breckler Given the potential for varying interpretations, [let the PENS report] be said in a single voice. Otherwise, 12 different versions. Let Olivia work out what will and will not be said and trust them to produce a document. Avoids interpretation in 12 different voices but doesn't hide anything.

SS We have lived in closed community and may ___ us. *Don't take notes* (to JMA). It worries him.

RN Worried about rekindling the fires. The [APA] President undertook this [Task Force] to calm the issues. Many of the same problems with other Task Forces. The press is not interested in harmony. We are now on the firing line.

The value of the Task Force members is what we can agree on with clarity. That is very helpful.

Where we have disagreement, we'll agree on *how* to represent....

MW The crux of ethics is struggle. We want at some time to be able to communicate the struggle. Not to feed the press. "The task force struggled with issues."

___ There have been other extreme-topic task forces. We have to work together to get to our topics. The process is rich. We can talk to....

Notes later: In the afternoon on Friday, there was a big to do about confidentiality of the meeting. I resisted strongly. It was finally put to a vote. JMA dissented. MW abstained. All others voted for confidentiality, which I called secrecy.

[Assignment for tomorrow, read APA Code. What needs to be changed?]

6/24/05 Dinner. I sat with MW and MB. MB talked about training issues. Said *everyone* at command level understood the problems of coercive interrogation. Didn't want it.

It's an organizational problem now. They didn't have proper staff for interrogations. Should appropriate be technical specialists, warrant officers, 40 years old. But warrant officers are paid at level of major or lieutenant colonel. Only have so many positions. Would have to get congress to approve many more positions. *Big* expense. Therefore using recruits with six to eight weeks of training at Ft. Huachuca. Army provides most of the interrogators. He supervises all army interrogators.

U.S. hasn't interrogated people in numbers for years. Even warrant officer specialist might have only interrogated five people in their careers.

6/25/05 Breakfast. Discussion with MB. He is trying to get psychologists at all interrogation facilities [because they prevent detainee abuse and other problems]. Doesn't know of any in Uzbekistan.

Mel Gravitz joins Task Force discussion. A retired clinical psychologist. Had directed navy internship program.

[JMA What other areas of intelligence and national security should we consider? Use or threat of psychological examination to discredit subordinates. Use of psychologists to deceive people into undertaking harmful or illegal actions. Illegal experimentation. Impersonation of psychologists by interrogators or counterintelligence.— I may not have been able to raise all these issues. The ones I did raise were dismissed as unimportant to our central purpose.—At some point I passed out a page of quotes from my interrogator correspondent concerning doctors and psychologists.]

Sketchy notes from margins of PENS report draft #2, 6/25/05. Numbers, then • , approximately indicate changes in topic of discussion.

1. LJ Wants to say psychologists can do interrogation if trained.

Other military psychologists object.

2. MG Build boundaries! Example: being swept up in espionage or homicide case. A "narrowest." He looks to future of psychology in national security.

An argument about “never” a psychologist as interrogator. Military unwilling.

MG asks for attention to psychological research.

RN Don't go too far in discussing psychologists as interrogators so as not to expose ourselves and complicate the issue.

3. SB Attend to level of specificity in document so as not to cause difficulties.

JMA I ask for “alert” [to be inserted into text of report]. Military psychologists like this.

MG The scope of APA ethics. Wants an ethical code for psychologists in general.

JMA I don't succeed in getting a statement about psychologists don't do interrogation except in emergency field situation.

BA Psychologist as advisor to induce stress.

5. MP Thinks confession is legitimate purpose [for consultation with a psychologist].

Psychologists do not conduct interrogation except possibly in emergency field condition.

MB Often we do try to exploit psychological distress. We need the boundaries.

MG Creating conflict in a person is the way to move towards confession.

6. MW On International Convention against Torture, compares it with Bush doctrine. This discrepancy leaves open unethical procedure to U.S.

LJ DoD interrogators have to agree.

[Overlapping conversations unrecorded.]

10. RF No big research on psychological effects. Wants research. Analyze past [results?]. Can get compliance by force. But little support for getting accurate information.

11. MW The disorientation techniques remain. Our reputation in this profession depends on this document.

12. MG Wants to postpone.

13. I miss national security in table of contents. Forensics experience.
14. BA Look at Task Force mandate. Is there debriefing or deception?
15. B A goes back to our three-part mandate. Do it! Don't pass the buck.
16. BL Says pain and stress are not so bad. The Hanoi Hilton survivors reported gains.
17. Ethics Code is adequate. [I.e., Task Force doesn't need to write new principles.]
18. JMA My concern about innocents who are interrogated. Can the psychologist make innocence a first order of business?

National security member: It's not our business.

Also, NT and OM are against my concern. "Stay in your lane." [I.e., military psychologists should not go out of their expertise to try to establish guilt or innocence of subject.] This works into MB's amendment.

19. MB: What psychologists contribute: maps and birth dates examples [of assistance to both interrogator and detainee. In these examples, detainee says he will cooperate. Interrogator doesn't believe him because detainee cannot point to critical location or map or won't reveal birth date. What the psychologist brings is the knowledge that the detainee cannot read a map, or people in his village don't know their birth dates.] They educate how to ask a question and how to interpret [the response].

20. JMA [Wants] ethics cases for military psychologists part of our report. An ethics case book?

RN *Must* show application of ethics code to our issue. Big support of examples.

SS Says thought that examples would alarm [people about the use of] psychological science.

RF [Let us] produce an article for the *American Psychologist* that we could refer to.

SB Examples are necessary but examples should be in a compendium.

21. MW Still worried about the gray areas.

22. BA & RN Searching for an analogue to psychological consulting for interrogation.

NT Advising on child custody issues.

RN Advising on depositions.

[Good] analogue not found.

23. the point on the dial. Do we need to address this? We will be asked. E.g., sleep deprivation.

RF Recommend that APA continue proactively. It's a national process. It's multistep, education, informing.

24. NT (on #12) What about psychologists consulting on difficult cases. APA has no provisions for classified consultation.

LJ wouldn't do it. The military people except for LJ support this.

RF wants a process going forward.

M APA could recommend such a system be established.

25. Draft [returning to draft of PENS report].

MG The panties on the head story [referring to treatment designed to humiliate of Islamic detainees].

RN Very much in favor of this example.

MB SERE training. *Must* have a psychologist on site. "Drift" happens every five minutes.

BL ____

26. Regarding confidentiality, keep point 9 because public is wrought up about use of medical information.

RN We *must* discuss confidentiality. Discussion about _____. Ethics versus law. What the law dictates. We need room for discussion.

MW A proactive ethics code wants to adhere to law but cannot be bound.

28. MW on the US interrogation rule versus Convention [on Torture]

29 JMA I talk about interrogation in Middle East without psychologists. Psychologists' reach should be extended [on the military psychologists' assertion that they protect against torture].

[Lunch recess.]

Saturday afternoon

30. Division 48 letter introduced. MW and I wanted ____

LJ Abu Ghraib, June 2002[?] [when his service began, the ethics problems with physicians and psychologists ceased.]
1000 + 2500. Treatment.

I want cases and research.

31 MW wants to say we know torture occurs and we deplore it.

RN Much effort to calm public attack.

JMA [I bring up article by the racist William Henry] Anderson [MD, former Navy Chief of Neuropsychiatry at Guantanamo Bay.]

LJ He never was at Guantanamo Bay [in current War on Terror].

NT Shuts me up abruptly.

MB [An aside.] "We think he is a kook." We agree with you.

[Missed conversation.]

RN Do our own process, not Division 48's.

SS Takes offense at my [characterization of our confidentiality agreement as] "hush-hush."

NT We've been asked to review, but we don't have to respond. Any response will feel inadequate.

MW Wants a *true* review [of psychologists involvement in interrogation of terrorist suspects].

- GM Now, what is now here, and think about the code.

LJ About treatment.

RF This [discussion of] process with military and APA should continue.

JMA I ask for recommendations to attend later to many other psychologists-national security issues. Several, ____.

NT Backs me on this one.
Supply examples.

- Discussion of profiling. “Indirect assessment.” Who does it? Military interest and discussion.
- MJA [Proposes] oral histories [of national security psychologists with experience in War on Terror].

—

LT, SS, RF for this.

RF will write it up

Classified [oral histories], yes.

Military [psychologist] also suggests and unclassified version.

- Argument between MG and MG about whether there should be psychologists in all interrogation centers. I say I value psychologists for bring reason and accountability into interrogation. MG disagrees strongly with the implication that they should monitor.
- NT *et al.*, much discussion of “drift.”
- I raise issue of vulnerability of frameworks. A struggle to classify

.SB The goodness of fit between ethics code and....

RF Many military psychology functions and agents not represented here. But need an ongoing process. Solicit perspectives.

WS (MW?) Yes. Need more discussion.

MGravitz Yes, we have to redefine basics to apply APA code.

MG If APA says informed consent needed for indirect assessment, he would have to drop APA membership.

SS Off the record—provides deniability to both to probe possibility of....

RF If APA disparages military psychology, then duck....

RN Happened with Media Psychology Division.

Late Saturday afternoon.

RF Young psychologist in unnamed institution. Tells others to use instrument X to get A, B, C.... It's classified. Managers don't want to anger psychologists, who have power.

MGravitz: Military psychologists are *more* interested in ethical issues.

RF Likes our openness.
As opposed to people who say you're a bad person.

MGravitz: APA person took a discussion like this [to] national security community a few years ago. National security folks delighted—"our" profession.

....

MGravitz: For over a decade....

- JMA I ask about the meaning of *American* in American Psychological Association, having to do with international law.

LJ Shuts me up.

[Missing discussion.]

JMA As a last proviso, I clarify that the ethics code tells how to behave if you are a military psychologist but does not endorse working as an American psychologist. [i.e., as a psychologist for the American military].

Going forward, can we include other militaries?

[Military psychologist] No, our military *cannot* talk with them.

- Communicating with the press.

Sunday, June 26, 2005 [Some margin notes on the third draft of the PENS report.]

P 1.

- I object to "...the Task Force was nonetheless able to set forth clear and unanimous statements about psychologists' ethical obligations," replacing "unanimous" with "consensus."
- I object to "Many association members work for the United States government It is the responsibility of APA to think through ...challenges that face these psychologists, who apply their training, skills, and expertise in our nation's service." I propose instead "work for their respective governments" and "expertise in national security."

P. 7 If this document has no new ethical principles, can be approved quickly. If new principles, it takes a year to approve. — This is was a huge consideration raised by APA staff [Russ Newman, I think—JMA 8/31/06] because of the felt urgency.

~~~~~  
**Sunday, June 26, 2005** [Returning to notes recorded during recess in my professional journal No. 22: June 18 - September 11, 2005, pp. 63.]

RF Last advice (through speaker phone) from APA public affairs person, Rhea Farberman: Say we are not investigative. Don't imply torture at Abu Ghraib or Guantanamo Bay. She tells how reporters will look at this.

Corruption — of interrogation.  
 APA governance  
 APA membership  
 media  
 military

MB [Will personally be] briefing the army surgeon general

In 24 hours we must respond to Task Force draft [to accept or reject it].

Steve Behnke will speak for the Task Force  
 But report *must* go from APA to the government.  
 Goes to the government before the media. Goes to government: Donald Rumsfeld, Senate, House, will be leaked to media [by the political offices].

SS wants to send report to the executive branch.  
 Send to government just very briefly before public release because of leaks, [which leads to] others framing it first.

~~~~~  
Addendum

The APA had situated us at the conference table with name placards. The 10 Task Force members sat at one end of the table, with the Chairperson at the

very end. Steve Behnke, the rapporteur, at a computer desk adjacent to the Chairperson. Other APA staff members and visitors sat at the other end of the table. I was seated at the dividing line between the two groups, with Barry Anton on my left and Morgan Banks on my right, across the seminar table from all other national security Task Force members.

On the first morning, some authority (the Task Force Chairperson, I think) [OM – JMA, 8/31/06] reviewed our mandate from the APA Board of Directors and stated that the Task Force business excluded investigation of allegations of psychologists' involvement in coercive interrogation. I questioned this limitation. Gerald Koocher, who was sitting directly across from me, chastised me sharply. He said that if I didn't agree with the Task Force constraints I should not have come to the meeting. This experience subdued me for much of the day. At the time, I did not understand he was the President-Elect, only that he was substituting for President Levant who could not attend.

IV. BOARD OF DIRECTORS

Task Force to Explore the Ethical Aspects of Psychologists' Involvement and the Use of Psychology in National Security-Related Investigations: Request for Board Discretionary Funds

Issue

The Board is asked to allocate \$12,500 from its 2005 discretionary fund to support one meeting of a task force to explore the ethical aspects of psychologists' involvement and the use of psychology in national security-related investigations.

Background

Recent events in the United States and around the world, most notably the terrorist attacks of September 11, and the Abu Ghraib prison and Guantanamo Bay detention center situations, have raised questions concerning the use of psychology and the role of psychologists in national security-related investigations and research. The ethical aspects of psychologists' work in these arenas are non-trivial and complex.

Article I of APA's Bylaws states that "the American Psychological Association shall... advance psychology as a science and profession and as a means of promoting health, education and human welfare...by the establishment and maintenance of the highest standards of professional ethics and conduct of the members of the Association."

The APA Code of Ethics, like many laws and regulations governing the practice of psychology, as well as the ethics codes of other major mental health organizations, have developed largely within specific contexts, that of traditional forms of therapy, academic research, and training programs. As a consequence, such texts may not provide as much guidance as ideal in addressing situations that involve values fundamental to the profession—confidentiality, safety, respect for autonomy, honesty, integrity—in contexts where national security and innocent lives are potentially at issue. This task force will examine the ethical dimensions of psychology's involvement and the use of psychology in national security-related investigations. The overarching purpose of the task force will be to examine whether our current Ethics Code adequately addresses such activities, whether the APA provides adequate ethical guidance to psychologists involved in these endeavors, and whether APA should develop policy to address the role of psychologists and psychology in investigations related to national security.

In examining these issues, the task force will address issues such as:

- What appropriate limits does the principle "Do no harm" place on psychologists' involvement in investigations related to national security?
- To the extent it can be determined, given the classified nature of many of these activities: What roles are psychologists asked to take in investigations related to national security?
- What are criteria to differentiate ethically appropriate from ethically inappropriate roles that psychologists may take?
- How is psychology likely to be used in investigations related to national security?
- What role does informed consent have in investigations related to national security?
- What does current research tell us about the efficacy and effectiveness of various investigative techniques?
- Would the efficacy and effectiveness of various investigative techniques, if demonstrated, affect our ethics?
- Has APA responded strongly enough to media accounts of activities that have occurred at Abu Ghraib and Guantanamo Bay?

Comment [LMB1]: This, to me, is the fundamental question. However, the answer may impact on a large number of psychologists, for example, those who work for police departments, or for the prison system. Fundamentally, any psychologist who assists in making soldiers more effective, increases the likelihood of causing someone harm.

Comment [LMB2]: My belief is that the roles can be discussed. The tactics, techniques, and procedures (an Army term) may be classified, but the roles are not.

Comment [LMB3]: You can see how I handled this in the chapter e wrote.

Comment [LMB4]: Great question. The problem, of course, is that there really is very limited research on this. It would be a great opportunity for APA to support classified research on this topic.

Comment [LMB5]: If by this question, you are implying that APA should have been stronger in supporting the accurate reflection of what occurred, as opposed to the media reports, and that APA should have been stronger in counseling its members to wait for the facts to come out, then it is a good question. If the question implies that APA should have yelled louder, without background or knowledge of the facts, then...

Implementation Plan

If approved, Ethics Office and Science Directorate staff will plan a meeting for the Task Force in 2005. Members of the Task Force will be appointed by President Ronald F. Levant, EdD.

Fiscal Implications

Estimated cost for a 10 Member Task Force:

10 x \$500 (transportation) = \$5,000
10 x \$250 (hotel/meals) x 3 = \$7,500
Total = \$12,500

Main Motion

- 1 That the Board of Directors allocates \$12,500 from its 2005 discretionary fund to support one
- 2 meeting in 2005 of a Task Force to Explore the Ethical Aspects of Psychologists' Involvement and
- 3 the Use of Psychology in National Security-Related Investigations.

Recommendation

None.

Exhibits

1. List of Members Suggested for Appointment to the Working Group (to be provided in executive session)

Stephen Behnke, JD, PhD
Ethics Office

Steven Breckler, PhD
Science Directorate

Geoff Mumford, PhD
Science Directorate

FEATURE

Ethics and interrogations: Comparing and contrasting the American Medical and American Psychiatric Association positions

By Stephen Behnke, JD, PhD

July/August 2006, Vol 37, No. 7

Print version: page 66

In 2004, the American Psychological and Psychiatric Associations began to explore the ethical aspects of psychologist and psychiatrist involvement in military interrogations. In the summer and early fall, the associations held separate meetings in Washington, D.C. Each association invited representative members to participate in discussions. In June of 2005 APA issued the Report of the Task Force on Psychological Ethics and National Security (PENS) position statement, and a few weeks later, this June, our colleagues from the American Medical Association followed with their association positions in terms of their conceptual approach to member involvement in military interrogations, as well as in terms of what members to do, can be helpful in coming to a fuller understanding of this pressing societal issue.

Of the three associations, the two most closely related are those of the American Medical and American Psychological Associations. Entire passages could easily be exchanged between the two reports, without any change in meaning. The reason behind the similarity in ethical analysis: Psychologists and physicians have ethical responsibilities to the individual under questioning, as well as to society. By virtue of Principle A, "Do No Harm," in the Ethical Principles of Psychologists and Code of Conduct (2002), and from Principle B, which states that psychologists use their expertise in, and understand, the harm that can be caused by their actions. In a similar vein, the AMA report states, "Questions about the propriety of physicians' participation in interrogations are addressed by balancing obligations to individuals with obligations to protect third parties and the public." AMA emphasizes that as questioning related "to military and national security intelligence gathering, designed to prevent harm or danger to individuals," identical ethical analyses generate very similar rules that govern member behavior.

The first rule governing the behavior of psychologists and physicians is the ethical mandate that applies in all circumstances: "Psychologists and physicians shall not engage in behavior that is cruel, inhuman or degrading treatment. These behaviors are always and in every instance antithetical to our professional obligations. No member involvement in such activities. This rule derives directly from the mandate "Do No Harm."

A corollary to this first rule is that psychologists and physicians may not participate in interrogations that rely on coercion. In the PENS report, "threatening or causing harm through physical injury or mental suffering." The APA PENS report likewise prohibits threatening or causing harm, since threatening or causing such harm, if not rising to the level of torture, would constitute cruel, inhuman or degrading treatment.

Second, psychologists and physicians have "indirect" rather than "direct" involvement in military interrogations, to use the language of the PENS report. What is meant by "indirect" participation can be best understood in the context of a third rule, which states that "Psychologists and physicians shall not act as a consultant to an interrogation."

This third rule, shared by both associations, is that psychologists and physicians never mix the roles of health-care provider and consultant. In the PENS report, psychologists are prohibited "from engaging in such multiple relationships." The absolute demarcation between these two roles is fundamental to both association positions.

From rules that APA and AMA share comes what both associations allow: Psychologists and physicians may consult to individuals in military interrogations that are not coercive and that the roles of health-care provider and consultant are never mixed. Explaining that the purpose of such consultation is "to protect the individual, the public, or national security," and that a physician's ethical obligations to individuals must be balanced against the need to protect the public, the AMA report states that physicians may consult to interrogations by developing interrogation strategies that do "not threaten or cause physical injury or mental suffering and respect the rights of individuals." Substitute "psychologist" for "physician," and the relevant passages in the AMA report apply to psychologists. APA's position whatsoever—that "It is consistent with the APA Ethics Code for psychologists to serve in consultative roles to individuals in military interrogations for national-security related purposes" when acting in accordance with strict conditions. While one recommendation in the AMA report states explicitly that the presence of a psychiatrist at an interrogation may serve to benefit the individual under questioning,

interrogation, i.e., information-eliciting process. The AMA report must be carefully read in its entirety to understand and appreciate for physicians in interrogations.

Additional agreement between the associations involves the obligation to report interrogations in which unethical behavior or medical record to construct an interrogation strategy, and the obligation to adhere to the associations' ethics code in all instances.

While AMA and APA rely on the same conceptual framework and as a consequence set forth nearly identical guidelines to guide interrogations, there is an important respect in which the associations differ. APA frames a role that psychologists have unique order to guard against "behavioral drift" on the part of interrogators. Behavioral drift, which may arise in high stress situations involves a deviation from professionally and ethically acceptable behavior and so may lead to coercive interrogation techniques trained to observe and intervene to prevent behavioral drift. AMA, while allowing physicians to monitor interrogations, states "with the intention of intervening." This difference, which stems from psychologists' unique competencies, represents an important distinction physicians may take in interrogations and arises in the context of what social psychology has taught regarding the influence

The American Psychiatric Association uses a somewhat different analysis in assessing the appropriate role for its members. Two ethical principles—Do No Harm, and contribute to society by preventing harm—the psychiatrists appear to focus solely on the former. In a brief (three paragraphs and a footnote) statement does not offer a conceptual framework for their position, the apparent intent of the psychiatrists to de-emphasize the role of protecting society. Thus, the psychiatric association states that psychiatrists should not enter the interrogation room, asking or suggesting questions, or advising authorities on the use of specific techniques of interrogation is conducted for the purpose of "identifying other persons who have committed or may be planning to commit acts of violence against physicians, on one hand, and the psychiatrists, on the other, becomes understandable when placed in the context of how the

Immediately following the release of the American Psychiatric Association position, its president was quoted by the media as stating that psychiatrists' position statement is not "an ethical rule" and that a military psychiatrist following orders "wouldn't get in trouble participating in interrogations. This clarification from the president of the American Psychiatric Association places the psychiatric association's position in context. Military psychologists, physicians and psychiatrists, following orders, abiding by clear prohibitions against participating in interrogations and not as caregivers, and reporting coercive or abusive acts to the appropriate authorities, will not be subject to military interrogations. While indicating a preference for psychologists over psychiatrists, the Department of Defense has laid out a process for psychiatric

The APA Board of Directors understands that members have deeply felt and diverse opinions on the role of psychologists in national security interrogations. There are members who feel strongly that the very presence of psychologists in national security interrogations has human rights organizations have condemned. Other members feel that our colleagues in the military have reached out to AF supporting these psychologists in their work to ensure that interrogations are conducted in a safe and ethical manner. To ensure all points of view to be clearly heard and fully considered, the issue of psychologists' involvement in military interrogations will be discussed at this August in New Orleans.

Stephen Behnke is director of APA's Ethics Office.

Further Reading

Quotations are taken from the AMA Council on Ethical and Judicial Affairs Report on Physician Participation in Interrogations, Ethics and National Security (PENS), and the American Psychiatric Association Position Statement on Psychiatric Participation in

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Ava,

Thank you for your message of Tuesday, June 16. Below are my responses.

1. Regarding the BSCT courses, I gave two workshops for each of the years 2006-2014, with the exception of 2011, in which I gave three workshops. (Although the contract indicates funds were allocated for three workshops in 2012, my records indicate that two rather than three workshops were given that year.) In 2015, I have given one workshop. Payment for the workshops was \$2500 per workshop in 2011 and was then increased to \$5000 per workshop in 2012. I believe prior to 2011 payment was \$1500 per workshop, although I can only find one payment record (from 2010) to confirm this amount (\$1499.00 on the 2010 record). The sum paid for the BSCT training is a flat figure, from which travel expenses are deducted (airfare, rental car, hotel, meals, taxis to and from airports). Expenses are generally \$1200-\$1300 per workshop (they could be slightly more or less, depending on airfare, car rental, and hotel costs).

The finance department was able to produce contracts back to 2010. (Contracts cover the following year, thus December 2010 covers 2011 programs.) I will leave these contracts with Susan McKinney, along with the 2010 invoice.

All monies for my speaking honoraria are paid directly to the Ethics Office. I submit my expenses and am reimbursed by the APA Finance Department. No monies are paid to me personally. (On two occasions payment was mistakenly made to me personally. In each instance I notified Daisy Clipper, who in turn notified the APA Finance Office; I wrote checks to APA to correct the mistakes.) Monies remaining after expenses are deducted are used in that fiscal year to support Office educational activities, such as a student writing prize, travel grants for LGBTQ students of color, and workshops for psychologists in venues that are not able to cover travel expenses. These activities are described in the Ethics Committee annual reports. (In years that the Office has a year-end surplus, the remaining balance is placed in the general APA account and is no longer available to the Ethics Office.) The Ethics Office operating budget for the years 2006-2014 was:

2006:	\$624,201
2007:	\$701,223
2008:	\$791,411
2009:	\$702,692
2010:	\$780,418
2011:	\$814,434
2012:	\$844,282
2013:	\$806,330
2014:	\$861,767

2. Regarding governance groups that reviewed Dr. Altman's proposed resolution, when a new business item is submitted to Council, the Agenda Planning Group is the governance group that determines which governance groups will review the item, including which governance group will be the lead group. There were seven such groups identified for Dr. Altman's new business item. (attachment 1) Dr. Altman's proposed resolution went through the governance process in Fall 2006/Spring 2007, and was debated and voted upon at the August 2007 Council meeting.
3. Regarding the statement in early 2007 with prohibited interrogation techniques, I'm not sure what the purpose was. The list may have been part of planning for the 2007 mini-convention, "Ethics and Interrogations: Confronting the Challenge." Dr. Brad Olson, chair of the Divisions for Social Justice, was program planning group chair. I staffed the planning group, which began its work in January 2007. Email messages with Dr. Olson and Dr. Neil Altman indicate that I discussed a prohibition on specific interrogation techniques with Dr. Olson at some point during the mini-convention planning, and that Dr. Olson was "very ambivalent" about a list approach. (attachment 2)
4. Regarding the position at Walter Reed, my recollection is that Dr. Dunivin told me about the position with the idea that I might inform potentially interested forensic psychologists about the position. I would not have been eligible because the announcement states that to be considered an applicant must "have completed a post doctoral fellowship in Forensic Psychology or have received a certification in Forensic Psychology by the American Board of Forensic Psychology." (attachment 3) I did not meet either of these requirements.

SPRING CONSOLIDATED MEETINGS
 March 23-25, 2007
 Agenda Item No. CC-23

INFORMATION

III. ETHICS

Psychologist Participation at US Detention Centers

Issue:

This item provides information to Consolidated Meetings participants regarding a new business item referred from the August 2006 Council of Representatives meeting.

✓ "Psychologist Participation at US Detention Centers," August 2006 Council New Business Item 25D, was referred to the Ethics Committee (lead group), the Board for the Advancement of Psychology in the Public Interest (BAPPI), the Board of Professional Affairs (BPA), the Committee for the Advancement of Professional Practice (CAPP), the Committee on Division/APA Relations (CODAPAR) and the Committee on Legal Issues (COLI). The mover is Neil Altman, PhD, representing Division 39.

Dr. Altman has engaged in an extensive dialog with the Ethics Committee regarding the new business item. Documents related to Dr. Altman's new business item and his exchanges with the Ethics Committee are available on the APA website at <http://www.apa.org/ethics/materialsaug2006.html>. At this time, Dr. Altman would like to move the resolution forward, with the intention of Council considering the resolution at its August 2007 meeting.

Referral groups attending the Consolidated Meetings have received an action item for their agendas, requesting these groups to provide comments on the new business item to the Ethics Committee. CAPP will receive an action item for its April 2007 meeting. Additionally, an information item has been placed in the Consolidated Meetings open agenda. Dr. Stephen Behnke, Director of the Ethics Office, will be available during the Consolidated Meetings for any interested group that has questions about the process.

Dr. Altman will be available to respond to questions about the new business item at an open meeting scheduled on Friday March 23rd at 5:00 pm. Dr. Olivia Moorehead-Slaughter, representing the Ethics Committee, will be available at this meeting as well.

Exhibit 1 shows Dr. Altman's motion, as revised from the August 2006 original submission to the current version. [Exhibit 2 is intentionally blank]. Exhibit 3 is a set of attachments to the justification statement. Exhibits 4-7 are additional reference attachments.

Exhibits 8-15 show, in reverse chronology, the discussions that took place between Dr. Altman and the Ethics Committee to develop the item and arrive at Dr. Altman's current recommended motion. (Thus, Exhibit 15 is the original motion from August 2006).

The Ethics Committee asks for written comments on the new business item from governance groups by **April 20, 2007**.

Implementation Plan:

The Ethics Committee will prepare an agenda item to provide governance groups' recommendations to the Board of Directors at its June 8-10, 2007 meeting.

Fiscal Implications:

None

Attachment 2

From: Behnke, Stephen
To: Donnelly, Paul
Subject: FW: FW: [SPSMM] Torture resolution
Date: Sunday, July 22, 2007 5:35:17 PM

Let us discuss in anticipation of a response. Thank you.

-----Original Message-----

From: Behnke, Stephen
Sent: Sunday, July 22, 2007 6:35 PM
To: 'Neil Altman'
Subject: RE: FW: [SPSMM] Torture resolution

Hi Neil, sure. In terms of how the motions work, I'm really not the right person to ask. I'll check with Paul Donnelly, who knows parliamentary procedures much better than I, and ask him to get back to you tomorrow.

Steve

-----Original Message-----

From: Neil Altman [Privacy Redaction]
Sent: Sunday, July 22, 2007 6:12 PM
To: Behnke, Stephen
Subject: RE: FW: [SPSMM] Torture resolution

Thanks, Steve.

By the way, how is it that this is being presented as a "substitute motion"?

Doesn't the maker of a resolution have to approve a motion being substituted for the one he introduced?

Neil

>From: "Behnke, Stephen" <sbehnke@apa.org>
>To: "Neil Altman" [Privacy Redaction] <Brad Olson
>Subject: RE: FW: [SPSMM] Torture resolution
>Date: Sun, 22 Jul 2007 17:56:27 -0400
>
>Neil,
>
>The SPSSI statement: http://www.spssi.org/SPSSI_Statement_on_torture.pdf
>
>The PHR letter is attached.
>
✓ >In terms of the program at the Wright Institute, the panel was video
>taped. Brad and I have discussed the notion of a "list," and I know
>Brad is very ambivalent about that approach. I myself was quite
>surprised by how strongly the group advocated for APA to prohibit
>specific techniques; at one point I said that forms of torture would be
>limited only by the human imagination, and the response came back very
>clearly that history indicates there are specific techniques that
>continue to appear across time and contexts. I asked several times if
>that is what the group believed APA should do--identify specific
>techniques that are prohibited--and the final time I asked the group
>broke into applause, so their recommendation to APA was very clear (and
>compelling). (The Board resolution identifies specific techniques, but
>prefaces the list by stating "including but not limited to...")
>
>Steve

>
>-----Original Message-----
>From: Neil Altman [Privacy Redaction]
>Sent: Sunday, July 22, 2007 5:28 PM
>To: Behnke, Stephen; Brad Olson
>Subject: RE: FW: [SPSMM] Torture resolution
>
>Steve,
>Can you please get me the documents you mention ASAP?
>Thanks,
>Neil
>
>
>>From: "Behnke, Stephen" <sbehnke@apa.org>
>>To: <Brad Olson [Privacy Redaction]>,"Neil Altman" [Privacy Redaction]
>>Subject: FW: [SPSMM] Torture resolution
>>Date: Sun, 22 Jul 2007 12:55:19 -0400
>>
>>Hi Brad and Neil,
>>
>>Just a quick note to call attention to an oversight of mine; when I
>>spoke with Brad and left a message for Neil, I mentioned two sources
>for
>>the Board's resolution--a letter from Physicians for Human Rights and
>>the SPSSI statement. I neglected to mention a third, a meeting at the
>>Wright Institute in Berkeley this past March, which is discussed in a
>>posting to Division 51 below.
>>
>>As I mentioned to Brad when we spoke, depending upon how you think best
>>to more forward (Brad outlined three general possibilities), if you do
>>want to recommend changes in language to the Board's proposal, the
>>earlier you can get specific wording out for Council to consider the
>>better.
>>
>>Thanks,
>>
>>Steve
>>
>>-----Original Message-----
>>From: Facilitate discussion of topics related to the psychology of men
>&
>>masculinity. [mailto:SPSMM@LISTS.APA.ORG] On Behalf Of Dan Quinn
>>Sent: Saturday, July 21, 2007 10:41 AM
>>To: SPSMM@LISTS.APA.ORG
>>Subject: [SPSMM] Torture resolution
>>
>>This forwarded from Gilbert Newman of the Wright Institute.
>>
>>Dan
>>
>>-----
>>
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>>
>>From: Gilbert Newman [Privacy Redaction]
>>Sent: Saturday, July 21, 2007 1:55 AM

> >Subject: Support APA Resolution against Interrogation and Torture
> >
> >
> >Many psychologists throughout California, and particularly in the Bay
> >Area, have led efforts drawing attention to the issue of psychologists
> >participating in torture at various military detention centers. These
> >advocates have continually put a spotlight on organized psychology and
> >APA to urge the adoption of a clearer and more definitive statement
> >banning psychologist participation in torture or inhumane interrogation
> >techniques. Last March, Dr. Uwe Jacobs, the Director of Survivors
> >International in San Francisco, held a forum at the Wright Institute in
> >Berkeley for Alfred McCoy, the author of A Question of Torture: CIA
> >Interrogation, From the Cold War to the War on Terror. The event,
> >billed as a fundraiser for Survivors, drew a packed audience of
> >concerned psychologists and citizens. Wisely, Dr. Jacobs also invited
> >Dr. Stephen Behnke, the Director of Ethics at APA who attended the
>event
> >and took extensive notes regarding specific language Professor McCoy
> >recommended for APA. I am pleased to say that the APA Board of
>Directors
> >will soon release a proposal for APA Council to consider adopting a
> >stronger resolution specifically banning the activities Professor McCoy
> >had identified, and going well beyond that by additionally calling upon
> >the US government to prohibit the use of torturous and inhumane
>methods,
> >and directing the Ethics Committee to establish guidelines reflecting
> >Common Article 3 of the Geneva Conventions and other international
> >instruments. This resolution will call upon US legal systems to reject
> >testimony resulting from torture or cruel, inhuman and degrading
> >treatment or punishment.
> >
> >Articles appearing recently in a Spokane, WA newspaper and in Vanity
> >Fair magazine discuss two psychologists, neither of whom are members of
> >APA, who allegedly promoted the use of reverse SERE techniques in
> >interrogations. Abuse of any individual is heinous behavior, and of
> >course, far outside our professional ethics. I want to commend Dr.
> >Jacobs, and others like him who through a nearly two-year process
> >pressed for an unequivocal statement from APA. I also want to commend
> >Dr. Behnke. In addition to having assisted in the planning of 18 hours
> >of programming related to this issue at the upcoming Convention in San
> >Francisco, he has consistently delivered your message to APA and he
>came
> >to California repeatedly to dialogue with psychologists here about this
> >matter. I view the Board's resolution as a clear signal that APA has
> >been listening carefully and wants to be responsive to the concerns of
> >our members.
> >
> >I expect that Council will approve this proposal, which I believe will
> >be available soon for review, and encourage you to contact Council
> >members you know to advocate for this proposal.
> >
> >
> >Gilbert H. Newman, Ph.D.
> >Immediate Past-president, California Psychological Association
> >Director of Clinical Training, The Wright Institute
> >2728 Durant Ave.
> >Berkeley, CA 94704
> >510-841-9230 x110
> >Fax: 510-841-0167
> >Privacy Redaction

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Attachment 3

Sender: Behnke, Stephen </O=APA/OU=DC/CN=RECIPIENTS/CN=SVB>
Sent: Monday, November 05, 2007 8:06:37 PM
Recipient: 'Dunivin, Debra L LTC WRAMC-Wash DC' <Debra.Dunivin@amedd.army.mil>
Subject: RE: NCMD07229704D, Supervisory Clinical Psychologist (Forensic) YJ-180-2, WRAMC (UNCLASSIFIED)

Thanks so much, Debra--could you also send me the dates for the course?

Steve

-----Original Message-----

From: Dunivin, Debra L LTC WRAMC-Wash DC [mailto:Debra.L.Dunivin@amedd.army.mil]
Sent: Monday, November 05, 2007 1:26 PM
To: Behnke, Stephen
Subject: FW: NCMD07229704D, Supervisory Clinical Psychologist (Forensic) YJ-180-2, WRAMC (UNCLASSIFIED)

Classification: UNCLASSIFIED
Caveats: NONE

Steve: Here's the position we discussed. Debra

DEPARTMENT OF THE ARMY
Vacancy Announcement Number: NCMD07229704D

Opening Date: October 26, 2007 Closing Date: November 09, 2007

Position: Supervisory Clinical Psychologist, YJ-0180-2
Salary: \$66,767 - \$121,967 Annual
Place of Work: USA MEDDAC, Walter Reed Army Medical Center, Dept of Psychology, Clinical Psychology Service \ Washington, DC

Position Status: This is a Permanent position. - Full Time Number of
Vacancy: 1

DEPARTMENT OF ARMY RANKED ONE OF THE TOP TEN FEDERAL WORKPLACES FOR
2007!

Duties: As Supervisor, Clinical Psychologist, you plan, develop, and direct a Post-doctoral fellowship in Forensic Psychology. This fellowship serves Department of the Army and Department of Defense (DoD) interests. You also direct an array of forensic psychology services that include assessment, consultation, and training. You provide professional consultation, liaison, and expert opinion to DoD legal and medical agencies regarding psychological issues with a complex forensic component. You develop, implement, and supervise a range of forensic assessment capabilities. You are the supervisory director of the forensic psychology service within the Department of Psychology. You plan work to be accomplished by fellows, subordinates, and interns, by setting and adjusting priorities and preparing schedules for the completion of work. You establish and monitor subordinate performance standards, counsel employees, evaluate performance and take performance based action as appropriate.

About the Position: The position is in a quiet office setting within the Walter Reed Army Medical Center, which is located in Northern Washington, DC, city limits near the Maryland, District of Columbia boundary.

Must be able to report for duty NLT 45 days after offer is made.

Who May Apply: (Click on Who May Apply) All U. S. citizens and Nationals with allegiance to the United States.

Qualifications: Click on link below to view qualification standard.
General Schedule

Basic Requirements: Applicant is required to satisfactorily complete all of the requirements for the doctoral degree (Ph.D. or equivalent) directly related to full professional work in clinical psychology.
LICENSURE: All Applicants must be licensed as a Psychologist by the recognized licensing agency of a State, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. List the type of licensure you possess and from where it was obtained. Failure to do so will result in non-consideration of your resume.

✓ In addition to your degree and licensure you must also have completed a post doctoral fellowship in Forensic Psychology or have received a certification in Forensic Psychology by the American Board of Forensic Psychology. Please list the type of fellowship you completed along with the dates or the specifics of your certification. Failure to include this information in your resume will result in non-consideration of your resume.

Applicant must also possess one year of specialized experience equivalent to that of the next lower pay band. Specialized experience is

experience that has equipped the applicant with the particular knowledge, skills, and abilities to perform successfully the duties of the position, and that is typically related to planning, developing, and directing a Post-Doctoral Fellowship Program in Forensic Psychology.

Prior experience delivering forensic psychological assessment services in an military setting is highly desirable.

NOTE: Must be able to be credentialed.

The experience described in your resume will be evaluated and screened for the Office of Personnel Management's basic qualifications requirements, and the skills needed to perform the duties of this position as described in this vacancy announcement.

Your pay will be set within the range specified in this vacancy announcement and will be based on your qualification, education, experience, training, and availability of funds.

NSPS positions are excluded from time-in-grade restrictions.

Foreign education must be evaluated for U.S. equivalency in order to be considered for this position. Please include this information in your resume.

Only degrees from an accredited college or university recognized by the Department of Education are acceptable to meet positive education requirements or to substitute education for experience. For additional information, please go to the Office of Personnel Management (OPM) and U.S. Department of Education websites at -

<http://www.opm.gov/qualifications> and

<http://www.ed.gov/admins/finaid/ac/cid/index.html>

Applicants must have one year of specialized experience at the next lower pay band or equivalent under the General Schedule (GS) or other pay systems.

Quality of experience relates to how closely or to what extent an applicant's background and recency of experience, education, and training are relevant to the duties and responsibilities of the announced position. Candidates must have the knowledge, skills, abilities and competencies to successfully perform the work of the position at the appropriate level.

Other Information:(Click on Other Information)

To successfully claim veteran's preference, your resume/supplemental data must clearly show your entitlement. Please review the information listed under the Other Requirements link on this announcement or review our on-line Job Application Kit.

Selection is subject to restrictions resulting from Department of Defense referral system for displaced employees.

The Department of Defense (DoD) policy on employment of annuitants issued March 18, 2004 will be used in determining eligibility of annuitants. The DoD policy is available on

http://www.opm.gov/policy-data-oversight/annuitants/annuitants_0304.pdf

Please note that active-duty military members are eligible to apply no earlier than 120 days before their separation or retirement date.

Permanent Change of Station (PCS) expenses are not authorized.

The Base Realignment and Closure (BRAC) Commissions recommendations have been approved. This vacancy exists in an organization that is affected by BRAC. Click here for additional information.

Other Advantages: In addition to your degree and licensure you must also have completed a post doctoral fellowship in Forensic Psychology or have received a certification in Forensic Psychology by the American Board of Forensic Psychology. Please list the type of fellowship you completed along with the dates or the specifics of your certification. Failure to include this information in your resume will result in non-consideration of your resume.

Other Requirements:(Click on Other Requirements)

Personnel security investigation required.

A medical examination is required.

Immunization screening is required.

Child Care Criminal History background checks may be required prior to movement to position.

Must comply with Drug Abuse Testing Program requirements.

You will be required to provide proof of U.S. Citizenship.

If selected, official college or university transcript must be submitted.

Must provide documents for credentialing for health care positions.

License/Certification: Must be a licensed Psychologist. State on Resume All Health Care Providers must be able to obtain and maintain current Basic Life Support (BLS) Training and certification Current Advanced Life Support or other advanced certification does not supersede BLS completion.

Male applicants born after December 31, 1959 must complete a Pre-Employment Certification Statement for Selective Service Registration.

Direct Deposit of Pay is Required.

You may claim Military Spouse Preference.

Applicants claiming veteran's preference must clearly show an

entitlement to such preference on the resume/supplemental data submitted.

Failure to provide all of the required information as stated in the vacancy announcement may result in an ineligible rating or may affect the overall rating.

One year trial/probationary period may be required.

How to Apply: (Click on How to Apply)

Resumes must be received by the closing date of this announcement.

Self-nomination must be submitted by the closing date.

Resume must be on file in our centralized database.

Announcements close at 12:00am (midnight) Eastern Time.

If your resume is currently in our central database, you may click here to Self Nominate Click here to use the Army Resume Builder to create your resume. Follow the instructions in this vacancy announcement to apply for the job.

Point of Contact: Jennifer Loy, (309)782-2783, Jennifer.Loy@us.army.mil
THE DEPARTMENT OF DEFENSE IS AN EQUAL OPPORTUNITY EMPLOYER

Classification: UNCLASSIFIED

Caveats: NONE

Classification: UNCLASSIFIED

Caveats: NONE

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The NEW ENGLAND JOURNAL of MEDICINE



Perspective

Doctors and Interrogators at Guantanamo Bay

M. Gregg Bloche, M.D., J.D., and Jonathan H. Marks, M.A., B.C.L.

N Engl J Med 2005; 353:6-8 | [July 7, 2005](#) | DOI: 10.1056/NEJMp058145

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Article

Mounting evidence from many sources, including Pentagon documents, indicates that military interrogators at Guantanamo Bay have used aggressive counter-resistance measures in systematic fashion to pressure detainees to cooperate. These measures have reportedly included sleep deprivation, prolonged isolation, painful body positions, feigned suffocation, and beatings. Other stress-inducing tactics have allegedly included sexual provocation and displays of contempt for Islamic symbols.¹ The International Committee of the Red Cross (ICRC) and others charge that such tactics constitute cruel and inhuman treatment, even torture.

To what extent did interrogators draw on detainees' health information in designing and pursuing such approaches? The Pentagon has persistently denied this practice. After the ICRC charged last year that interrogators tapped clinical data to craft interrogation strategies, Defense Department officials issued a statement denying "the allegation that detainee medical files were used to harm detainees."² This spring, an inquiry led by Vice Admiral Albert T. Church, the inspector general of the U.S. Navy, concluded: "While access to medical information was carefully controlled at GTMO [Guantanamo Bay], we found in Afghanistan and Iraq that interrogators sometimes had easy access to such information."³ The implication is that interrogators had no such access at Guantanamo and that medical confidentiality was shielded, albeit with exceptions. Other Pentagon officials have reinforced this message. In a memo made public last month, announcing "Principles . . . for the Protection and Treatment of Detainees," William Winkenwerder, the Assistant Secretary of Defense for Health Affairs, said that limits on detainees' medical privacy are "analogous to legal standards applicable to U.S. citizens."



But this claim, our inquiry has determined, is sharply at odds with orders given to military medical personnel — and with actual practice at Guantanamo. Health information has been routinely available to behavioral science consultants and others who are responsible for crafting and carrying out interrogation strategies. Through early 2003 (and possibly later), interrogators themselves had access to medical records. And since late 2002, psychiatrists and psychologists have been part of a strategy that employs extreme stress, combined with behavior-shaping rewards, to extract actionable intelligence from resistant captives.

A previously unreported U.S. Southern Command (SouthCom) policy statement, in effect since August 6, 2002, instructs health care providers that communications from "enemy persons under U.S. control" at Guantanamo "are not confidential and are not subject to the assertion of privileges" by detainees. The statement, from SouthCom's chief of staff, also instructs medical personnel to "convey any information concerning . . . the accomplishment of a military or national security mission . . . obtained from detainees in the course of treatment to non-medical military or other United States personnel who have an apparent need to know the information. Such information," it adds, "shall be communicated to other United States personnel with an apparent need to know, whether the exchange of information with the non-medical person is initiated by the provider or by the non-medical person." The only limit this policy imposes on caregivers' role in intelligence gathering is that they cannot act as interrogators.

The statement, embedded — along with policies on parking and alcohol — in the personnel section of the SouthCom Web site,⁴ not only requires caregivers to provide clinical information to military and Central Intelligence Agency interrogation teams on request; it calls on them to volunteer information that they believe might be of value. It thereby makes them part of Guantanamo's surveillance network, dissolving the Pentagon's purported separation between intelligence gathering and patient care.

Rather than being consistent with the presumption of confidentiality that applies to Americans even in prisons, the Guantanamo policy rejects this presumption. Within military prisons, personal health information cannot be given to correctional or law-enforcement officials unless they deem it necessary for health, safety, or security reasons. Confidentiality is also the starting point in federal and state prisons for civilians, albeit with similar exceptions for health, safety, and security. (Federal law permits disclosure of inmates' health information "to authorized federal officials for the conduct of lawful intelligence, counter-intelligence, and other national security activities.") There is debate over the scope of these exceptions, but there is consensus about the basic presumption of medical privacy.

Wholesale rejection of clinical confidentiality at Guantanamo also runs contrary to settled ethical precepts. Medical privacy is not an ethical absolute — caregivers in civilian and military settings have an obligation to report information to third parties when doing so can avert threats to the health or safety of identifiable persons — but confidentiality is the starting premise.

The laws of war defer to medical ethics. Additional Protocol I to the Geneva Conventions provides that medical personnel "shall not be compelled to perform acts or to carry out work contrary to the rules of medical ethics." Although the protocol has not been ratified by the United States, this principle has attained the status of customary international law. International human rights law (most important, the 1966 International Covenant on Civil and Political Rights) provides additional protection for privacy in general — in wartime and peacetime. Although this protection isn't absolute, exceptions must be justified by pressing public need, and they must represent the least restrictive way to meet this need. Wholesale abandonment of medical confidentiality hardly qualifies, especially when the "need" invoked is the crafting of counter-resistance measures that are prohibited by international law.

In what ways did military intelligence personnel draw on medical information for interrogation and counter-resistance purposes? Instructions to Guantanamo veterans not to discuss their service publicly have been an obstacle to answering this question. But available documents, an account of a fall 2004 briefing by the camp's commander (Brigadier General Jay Hood), and interviews with behavioral science professionals enable us to assemble parts of this picture.

During the camp's early months, interrogators could gain access to personal health information (and did so to set limits on practices that might put detainees' health at risk) but did not use psychological assessments of individual subjects. Conventional army intelligence doctrine has been unsympathetic to such input: it has relied instead on a mix of standard interrogation methods meant to appeal variously to subjects' insecurities, pride, and fears, within constraints set by the laws of war.⁵ But by late 2002, growing frustration with the slow pace of intelligence production at Guantanamo led to calls from commanders for innovative tactics. Major General Geoffrey Miller, who took command of Guantanamo in late 2002, approved the creation of a "Behavioral Science Consultation Team" (BSCT, pronounced "Biscuit") in order to develop new strategies and assess intelligence production. A principal BSCT function was to engineer the camp experiences of "priority" detainees to make interrogation more productive.

A psychiatrist and a psychologist staffed the Guantanamo BSCT. Those initially assigned to this team both came from health care backgrounds; neither had much training in behavioral analysis of the sort that civilian psychologists perform for law-enforcement agencies. According to Hood's briefing, BSCT consultants prepared psychological profiles for use by interrogators; they also sat in on some interrogations, observed others from behind one-way mirrors, and offered feedback to interrogators. The first BSCT psychologist, Major John Leso, a specialist in assessing aviators' fitness to fly, attended part of the interrogation of Mohammed al-Qahtani, thought by many to be the "20th hijacker." (An extract from a log of this interrogation published in *Time* magazine last month refers to Leso as "Maj. L.")

There are strong indications that the Guantanamo BSCT has had access to personal health information. An internal, May 24, 2005, memo from the Army Medical Command, offering guidance to caregivers responsible for detainees, refers to the "interpretation of relevant excerpts from medical records" for the purpose of "assistance with the interrogation process." The memo, provided to us by a military source, acknowledges this nontherapeutic role, urging health professionals who serve in this capacity to avoid involvement in detainee care, absent an emergency. This acknowledgment is consistent with other accounts of information flow from caregivers to behavioral science consultants to interrogators.

Competing behavioral science models have influenced the advice given to interrogators by BSCT members. One approach

emphasizes fear and anxiety as counter-resistance tools; another favors rapport with detainees. The former approach, supported by some associated with the John F. Kennedy Special Warfare Center who have helped to formulate BSCT doctrine, builds on the premise that acute, uncontrollable stress erodes established behavior (e.g., resistance to questioning), creating opportunities to reshape behavior. Complex reward systems (e.g., the creation of multiple camp “levels” with different privileges) promote cooperation. Stressors tailored to the psychological and cultural vulnerabilities of individual detainees (e.g., phobias, personality features, and religious beliefs) are key to this approach and can be devised on the basis of detainee profiles.

Proponents of rapport-based interrogation counter that answers given under high stress are unreliable. Not only are people in acute distress inclined to say whatever they think might bring relief; the psychiatric sequelae of extreme stress — anxiety, depressed mood, and disordered thinking — impair the understanding of questions and produce incoherent answers. Rapport building, tailored to people's cognitive styles and cultural beliefs, takes time but yields better information, its defenders contend.

There is no scientific answer to the question of which interrogation strategy is more effective. For obvious ethical and legal reasons, there is unlikely to be one. At Guantanamo, the fear-and-anxiety approach was often favored. The cruel and degrading measures taken by some, in violation of international human rights law and the laws of war, have become a matter of national shame.

Clinical expertise has a limited place in the planning and oversight of lawful interrogation. Psychologists play such a role in criminal investigations, and medical monitoring of detainees is called for by international legal instruments. But proximity of health professionals to interrogation settings, even when they act as caregivers, carries risk. It may invite interrogators to be more aggressive, because they imagine that these professionals will set needed limits. The logic of caregiver involvement as a safeguard also risks pulling health professionals in ever more deeply. Once caregivers share information with interrogators, why should they refrain from giving advice about how to best use the data? Won't such advice better protect detainees, while furthering the intelligence-gathering mission? And if so, why not oversee isolation and sleep deprivation or monitor beatings to make sure nothing terrible happens?

Wholesale disregard for clinical confidentiality is a large leap across the threshold, since it makes every caregiver into an accessory to intelligence gathering. Not only does this undermine patient trust; it puts prisoners at greater risk for serious abuse. The global political fallout from such abuse may pose more of a threat to U.S. security than any secrets still closely held by shackled internees at Guantanamo Bay.

This article was published at www.nejm.org on June 22, 2005.

An [interview](#) with Mr. Marks can be heard at www.nejm.org.

Dr. Bloche is professor of law at Georgetown University and a visiting fellow at the Brookings Institution, both in Washington, D.C., and adjunct professor at Bloomberg School of Public Health, Johns Hopkins University, Baltimore. Mr. Marks is a barrister at Matrix Chambers, London, and Greenwall Fellow in Bioethics at Georgetown University Law Center and the Bloomberg School of Public Health.

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Letters

[← Back to Original Article](#)

Doctor's Orders -- Spill Your Guts

January 09, 2005 | M. Gregg Bloche and Jonathan H. Marks | M. Gregg Bloche is professor of law at Georgetown University and adjunct professor at Johns Hopkins University's Bloomberg School of Public Health. Jonathan H. Marks is a London barrister and Greenwall fellow in bioethics at Georgetown University Law Center and the Bloomberg School of Public Health. This article draws from a piece that appears in the current *New England Journal of Medicine*.

Credit the folks who ran Abu Ghraib for their wit. "The database is lonely," says a smiley face in a slide show for new interrogators prepared a year ago. "You can help! Visit the database every time you spend time with any of our esteemed guests. Tell the database about what fun conversation you and your guests had." The last slide is a cartoon of an interrogation session. "I realize it sounds rather cliché, but we have ways of making you talk," its caption reads.

At Abu Ghraib, Guantanamo Bay, Cuba, and "undisclosed locations," some U.S. military interrogators used troubling methods to try to get their captives to talk. Many of their efforts have been widely reported; some may have risen to the level of torture under international law. What is less known -- but equally disturbing -- is that military doctors become arbiters, even planners, of aggressive interrogation practice, including prolonged isolation, sleep deprivation and exposure to temperature extremes.

An August 2002 Justice Department memo, sought by White House Counsel Alberto R. Gonzales to protect interrogators against prosecution for employing such methods as sleep deprivation, defined torture in medical terms. Coercive measures, the memo stated, don't constitute torture unless they bring about "death, organ failure ... serious impairment of bodily functions" or prolonged and severe mental illness. Use of mind-altering drugs is OK, so long as it doesn't "disrupt profoundly the senses or the personality." Even when these lines are crossed, the memo held, interrogators aren't torturers if they act "in good faith" by "surveying professional literature" or "consulting with experts."

The International Committee of the Red Cross, which monitors wartime detention practices, alleges that medical personnel at Guantanamo shared clinical information with interrogators, in "flagrant violation of medical ethics," to extract more information from detainees. The Pentagon says the charge is false. But our inquiry into the role that health professionals played in military intelligence-gathering in Iraq and Guantanamo has found a pattern of reliance on medical input. Not only did caregivers pass clinical data to interrogators, physicians and other health professionals helped craft and carry out coercive interrogation plans.

Such conduct violated U.S. obligations under the Geneva Convention, which bar threatening, insulting and other abusive treatment of prisoners. There is also probable cause to suspect that some physicians were complicit in the use of interrogation methods that constitute torture under international law.

Piercing the veil of silence surrounding Abu Ghraib and Guantanamo poses unusual difficulties. Military personnel knowledgeable about interrogation practices or medical care at these sites were reluctant to speak with us. Some cited orders not to discuss their service; others pointed to a general understanding, not expressed as an order, that public discussion of their experiences was ill advised. One, Maj. David Auch, commander of the clinical unit that staffed Abu Ghraib when the notorious photos of Iraqi prisoners were taken, said a military intelligence officer told his medics not to talk about deaths that occurred in detention.

Yet multiple interviews with military medical personnel, often on a not-for-attribution basis, made it possible to "connect the dots." Documents made public through Freedom of Information Act litigation brought by the American Civil Liberties Union also contributed.

Critical to understanding the medical role is the change in interrogation doctrine introduced by Maj. Gen. Geoffrey Miller and his team, first at Guantanamo, then at Abu Ghraib. A classified memo, prepared by Miller in late 2003, made the case for "fusion" of all prison functions to support the "interrogation mission."

Miller argued that "Behavioral psychologists and psychiatrists" were needed to "develop ... integrated interrogation strategies and assess ... interrogation intelligence production." To this end, he called for creation of "Behavioral Science Consultation Teams," known as "Biscuits," made up of psychologists and psychiatrists.

Desperate for some edge against a worsening insurgency in Iraq in November 2003, U.S. commanders implemented Miller's design at Abu Ghraib. In one example that came to our attention, Maj. Scott Uithol, a psychiatrist, arrived in Iraq expecting to serve with a combat stress-control unit. He was deployed instead to Abu Ghraib's newly formed Biscuit.

Uithol declined to talk to us, but other sources, including Abu Ghraib's chief of military intelligence, Col. Thomas Pappas, shed light on what at least some Biscuit members did. In testimony taken last February for an internal report but made public in October, Pappas described how physicians helped devise and execute interrogation strategies. Military intelligence teams, he said, prepared individualized "interrogation plans" for detainees, including a "sleep plan" and "medical standards." A physician and a psychiatrist monitored what went on.

What was in these interrogation plans? None have become public, but a classified January 2004 memo (prepared by unnamed military intelligence personnel at Abu Ghraib and made public in October) sets out an "interrogation and counter-resistance policy" calling for harsh measures. These include "dietary manipulation -- minimum bread and water, monitored by medics"; temperature extremes; sensory and sleep deprivation "monitored by medics"; prolonged isolation; and "stress positions." Pappas' testimony refers to a written "sleep management plan" that instructs guards to wake a detainee "every X-amount of hours."

Doctors collaborated with guards and interrogators in applying these approaches. "The doctor and psychiatrist," Pappas said, "look at the files to see what the

interrogation plan recommends; they have the final say as to what is implemented." A psychiatrist also went with interrogators to the Abu Ghraib prison, "review[ed] all those people under a management plan" and provided "feedback as to whether they were being medically and physically taken care of."

At both Abu Ghraib and Guantanamo, interrogation teams also had access to clinical caregivers and medical records, a practice defended by Deputy Assistant Secretary of Defense for Clinical and Program Policy David Tornberg. There is "not a doctor-patient relationship in the traditional sense between a military healthcare provider and an enemy prisoner of war," he told us. "Medical information will not be protected ... to the extent it is military relevant."

Tornberg's sweeping claim is at odds with the Geneva Convention's promise of adequate medical care to people detained in armed conflicts. When a caregiver learns of an imminent threat to the life of others (for example, a prisoner who tells his doctor about an impending terror attack), breach of doctor-patient confidentiality to save life is appropriate. But revealing health information to interrogators undermines detainees' trust in their doctors, a prerequisite for adequate care.

How did military physicians who advised or served with Biscuits justify this role to themselves? Some may have conflated Geneva protections with the ban on torture. So long as interrogation strategies didn't rise to the level of torture, they could see their conduct as lawful. Other physicians feared prosecution for disobeying orders more than they worried about the consequences of following illegal orders.

Some military doctors advanced another rationalization: Whatever their obligations under the international human rights law and the laws of war, medical ethics do not apply when they devote their skills to intelligence-gathering and other war-fighting functions. In such cases, these physicians say, they are combatants, not physicians, because they apply their knowledge to achieve military ends. A medical degree, Tornberg told us, isn't a "sacramental vow." When a doctor participates in interrogation, "he's not functioning as a physician," and the Hippocratic ideal of fidelity to patients is beside the point.

The Hippocratic ideal does fail to capture the breadth of the profession's social role. Doctors routinely serve criminal justice, public health and other social purposes, sometimes at the expense of individuals' well-being. But the proposition that, in so doing, they don't act as physicians is self-contradictory. It is their mix of technical skill, caring ethos and moral authority that qualifies them to assume these roles. It is why the architects of the United States' post-9/11 detainee counter-resistance policy looked to medicine.

To their credit, some military physicians in leadership roles seek a larger public discussion of their profession's moral dilemmas in the war on terrorism. So far, the Pentagon's civilian leadership has stymied these efforts by telling doctors not to go public with their ethics concerns. This has left them isolated from their civilian peers.

The therapeutic mission is medicine's primary role, whether or not doctors wear their country's uniform. But military physicians make a national service commitment that is sometimes at odds with Hippocratic ideals. We owe them gratitude for making this commitment -- and for their courage and sacrifice in Iraq and other post-9/11 theaters of war. But Abu Ghraib and Guantanamo should remind us that there are some things doctors must not do.

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Perspective

When Doctors Go to War

M. Gregg Bloche, M.D., J.D., and Jonathan H. Marks, M.A., B.C.L.
N Engl J Med 2005; 352:3-6 | [January 6, 2005](#) | DOI: 10.1056/NEJMp048346

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TEXAS

When military forces go into combat, they are typically accompanied by medical personnel (physicians, physician assistants, nurses, and medics) who serve in noncombat roles. These professionals are bound by international law to treat wounded combatants from all sides and to care for injured civilians. They are also required to care for enemy prisoners and to report any evidence of abuse of detainees. In exchange, the Geneva Conventions protect them from direct attack, so long as they themselves do not become combatants.

Recently, there have been accounts of failure by U.S. medical personnel to report evidence of detainee abuse, even murder, in Iraq and Afghanistan.¹ There have also been claims, less well supported, that medics and others neglected the clinical needs of some detainees. The Department of Defense says it is investigating these allegations, though no charges have been brought against caregivers.

But Pentagon officials deny another set of allegations: that physicians and other medical professionals breached their professional ethics and the laws of war by participating in abusive interrogation practices. The International Committee of the Red Cross (ICRC) has concluded that medical personnel at Guantanamo Bay shared health information, including patient records, with army units that planned interrogations.² The ICRC called this “a flagrant violation of medical ethics” and said some of the interrogation methods used were “tantamount to torture.”² The Pentagon answered that its detention operations are “safe, humane, and professional” and that “the allegation that detainee medical files were used to harm detainees is false.”²

Our own inquiry into medical involvement in military intelligence gathering in Iraq and Guantanamo Bay has revealed a more troublesome picture. Recently released documents and interviews with military sources point to a pattern of such involvement, including participation in interrogation procedures that violate the laws of war. Not only did caregivers pass health information to military intelligence personnel; physicians assisted in the design of interrogation strategies, including sleep deprivation and other coercive methods tailored to detainees' medical conditions. Medical personnel also coached interrogators on questioning technique.



Guantanamo Bay, Cuba.

Physicians who did such work tend not to see these practices as unethical. On the contrary, a common understanding among those who helped to plan interrogations is that physicians serving in these roles do not act as physicians and are therefore not bound by patient-oriented ethics. In an interview, Dr. David Tornberg, Deputy Assistant Secretary of Defense for Health Affairs, endorsed this view. Physicians assigned to military intelligence, he contended, have no doctor-patient relationship with detainees and, in the absence of life-threatening emergency, have no obligation to offer medical aid.

Most people we interviewed who had served or spent time in detention facilities in Iraq or Guantanamo Bay reported being told not to talk about their experiences and impressions. Dr. David Auch, commander of the medical unit that staffed Abu Ghraib during the time of the abuses made

notorious by soldiers' photographs, said military intelligence personnel told his medics and physician assistants not to discuss deaths that occurred in detention. Physicians who cared for so-called high-value detainees were especially hesitant to share their observations.

Yet available documents, the consistency of multiple confidential accounts, and confirmation of key facts by persons who spoke on the record make possible an understanding of the medical role in military intelligence in Iraq and Guantanamo. They also shed light on how those involved tried to justify this role in ethical terms.

In testimony taken in February 2004, as part of an inquiry into abuses at Abu Ghraib (and recently made public under the Freedom of Information Act and posted on the Web site of the American Civil Liberties Union [ACLU] at www.aclu.org), Colonel Thomas M. Pappas, chief of military intelligence at the prison, described physicians' systematic role in developing and executing interrogation strategies. Military intelligence teams, Pappas said, prepared individualized "interrogation plans" for detainees that included a "sleep plan" and medical standards. "A physician and a psychiatrist," he added, "are on hand to monitor what we are doing."

What was in these interrogation plans? None have become public, though Pappas's testimony indicates that he showed army investigators a sample, including a sleep deprivation schedule. However, a January 2004 "Memorandum for Record" (also available on the ACLU Web site) lays out an "Interrogation and Counter-Resistance Policy" calling for aggressive measures. Among these approaches are "dietary manipulation — minimum bread and water, monitored by medics"; "environmental manipulation — i.e., reducing A.C. [air conditioning] in summer, lower[ing] heat in winter"; "sleep management — for 72-hour time period maximum, monitored by medics"; "sensory deprivation — for 72-hour time period maximum, monitored by medics"; "isolation — for longer than 30 days"; "stress positions"; and "presence of working dogs."

Physicians collaborated with prison guards and military interrogators to put such approaches into practice. "Typically," said Pappas, military intelligence personnel give guards "a copy of the interrogation plan and a written note as to how to execute [it]. . . . The doctor and psychiatrist also look at the files to see what the interrogation plan recommends; they have the final say as to what is implemented." The psychiatrist would accompany interrogators to the prison and "review all those people under a management plan and provide feedback as to whether they were being medically and physically taken care of," said Pappas. These practices, he conceded, were without precedent. "The execution of this type of operation . . . is not codified in doctrine," he said. "Except for Guantanamo Bay, this sort of thing was a first."

At both Abu Ghraib³ and Guantanamo,² "behavioral science consultation teams" advised military intelligence personnel on interrogation tactics. These teams, each of which included psychologists and a psychiatrist, functioned more formally at Guantanamo; staff shortages and other administrative difficulties reduced their role at Abu Ghraib.

A slide presentation prepared by medical ethics advisors to the military as a starting point for internal discussion poses a hypothetical case that, we were told, is a "thinly veiled" account of actual events. A physician newly deployed to "Iraqistan" must decide whether to post physician assistants and medics behind a one-way mirror during interrogations. A military police commander tells the doctor that "the way this worked with the unit here before you was: We'd capture a guy; the medic would screen him and ensure he was fit for interrogation. If he had questions he'd check with the supervising doctor. The medic would get his screening signed by the doc. After that, the medic would watch over the interrogation from behind the glass."⁴

Interrogation facilities at Abu Ghraib included a one-way mirror, according to internal FBI documents obtained and made public by the ACLU in December. Draft rules of conduct, now under review, would permit army medical personnel to attend interrogations but would give them a right to refuse on ethical grounds.

Military intelligence interrogation units also had access to detainees' medical records and to clinical caregivers in both Iraq and Guantanamo Bay. "They couldn't conduct their job without that info," Tornberg told us. Caregivers, he said, have only a limited doctor-patient relationship with detainees and "make it very clear to the individuals that their medical information will not be protected . . . To the extent it is military-relevant . . . , that information can be used."

In helping to plan and execute interrogation strategies, did doctors breach medical ethics? Military physicians and Pentagon officials make a case to the contrary. Doctors, they argue, act as combatants, not physicians, when they put their knowledge to use for military ends. A medical degree, Tornberg said, is not a "sacramental vow" — it is a certification of skill. When a doctor participates in interrogation, "he's not functioning as a physician," and the Hippocratic ethic of commitment to patient welfare does not apply. According to this view, as long as the military maintains a separation of roles between clinical caregivers and physicians with intelligence-gathering responsibilities, assisting interrogators is legitimate.

Military physicians point to civilian parallels, including forensic psychiatry and occupational health, in arguing that the medical profession sometimes serves purposes at odds with patient welfare.

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They argue, persuasively in our view, that the Hippocratic ideal of undivided loyalty to patients fails to capture the breadth of the profession's social role. This role encompasses the legitimate needs of the criminal and civil justice systems, employers' concerns about workers' fitness for duty, allocation of limited medical resources, and protection of the public's health.

But the proposition that doctors who serve these social purposes don't act as physicians is self-contradictory. Their "physicianhood" — encompassing technical skill, scientific understanding, a caring ethos, and cultural authority — is the reason they are called on to assume these roles. The forensic psychiatrist's judgments about personal responsibility and competence rest on his or her moral sensibility and grasp of mental illness. And the military physician's contributions to interrogation — to its effectiveness, lawfulness, and social acceptance in a rights-respecting society — arise from his or her psychological insight, clinical knowledge, and perceived humanistic commitment.

In denying their status as physicians, military doctors divert attention from an urgent moral challenge — the need to manage conflict between the medical profession's therapeutic and social purposes. The Hippocratic ethical tradition offers no road map for resolving this conflict, but it provides a starting point. The therapeutic mission is the profession's primary role and the core of physicians' professional identity. If this mission and identity are to be preserved, there are some things doctors must not do. Consensus holds, for example, that physicians should not administer the death penalty, even in countries where capital punishment is lawful. Similarly, when physicians are involved in war, some simple rules should apply.

Physicians should not use drugs or other biologic means to subdue enemy combatants or extract information from detainees, nor should they aid others in doing so. They should not be party to interrogation practices contrary to human rights law or the laws of war, and their role in legitimate interrogation should not extend beyond limit setting, as guardians of detainees' health.⁵ This role does not carry patient care responsibilities, but it requires physicians to tell detainees about health problems they find and to make treatment available. It also demands that physicians document abuses and report them to chains of command. By these standards, military medicine has fallen short.

The conclusion that doctors participated in torture is premature, but there is probable cause for suspecting it. Follow-up investigation is essential to determine whether they helped to craft and carry out the counter-resistance strategies — e.g., prolonged isolation and exposure to temperature extremes — that rise to the level of torture.

But, clearly, the medical personnel who helped to develop and execute aggressive counter-resistance plans thereby breached the laws of war. The Third Geneva Convention states that "[n]o physical or mental torture, nor any other form of coercion, may be inflicted on prisoners of war to secure from them information of any kind whatever." It adds that "prisoners of war who refuse to answer [questions] may not be threatened, insulted, or exposed to any unpleasant or disadvantageous treatment of any kind." The tactics used at Abu Ghraib and Guantanamo were transparently coercive, threatening, unpleasant, and disadvantageous. Although the Bush administration took the position (rejected by the ICRC) that none of the Guantanamo detainees were "prisoners of war," entitled to the full protections of the Third Geneva Convention, it has acknowledged that combatants detained in Iraq are indeed prisoners of war, fully protected under this Convention.

The Surgeon General of the U.S. Army has begun a confidential effort to develop rules for health care professionals who work with detainees. Such an initiative is much needed, but it ought not to happen behind a veil of secrecy. Ethicists, legal scholars, and civilian professional leaders should participate, and the process should address role conflict in medicine more generally. An Institute of Medicine study committee, broadly representative of competing concerns (including the military's), would be a more suitable venue. To their credit, some military physicians in leadership roles have tried to involve outside ethicists in discussion of duties toward detainees. The Pentagon's civilian leadership has blocked these efforts.

Military physicians, nurses, and other health care professionals have served with courage in Iraq and other theatres of war since September 11, 2001. Some have received serious wounds, and some have died in the line of duty. By most accounts, they have delivered superb care to U.S. soldiers, enemy combatants, and wounded civilians alike. We owe them our gratitude and respect. We would affirm their honor, not besmirch it, by acknowledging the tensions between their Hippocratic and national service commitments and by working with them to map a course between the two.

SOURCE INFORMATION

Dr. Bloche is professor of law at Georgetown University, Washington, D.C., and adjunct professor at the Bloomberg School of Public Health, Johns Hopkins University, Baltimore. Mr. Marks is a barrister at Matrix Chambers, London, and Greenwall Fellow in Bioethics at Georgetown University Law Center and the Bloomberg School of Public Health.

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BOARD OF DIRECTORS
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APPROVED

Executive Session Minutes

July 27 & 30, 2004

Present: Diane F. Halpern, PhD; Ronald F. Levant, EdD; Robert J. Sternberg, PhD; Ruth Ullmann Paige, PhD; Gerald P. Koocher, PhD; Norman B. Anderson, PhD; Barry S. Anton, PhD; Paul L. Craig, PhD; Thomas J. DeMaio, PhD; Carol D. Goodheart, EdD; Chris Loftis, PhD (APAGS representative) J. Bruce Overmier, PhD; and Sandra L. Shullman, PhD.

Partial Attendance: Yaron Rabinowitz (incoming APAGS representative).

Absent: None.

- A. In double executive session, the Board received clarification on the CEO's compensation packet and approved presenting it to Council at its July 28 & 30, 2004, meeting.
- B. The Board voted to approve the minutes of its June 11-13, 2004, executive session.
- C. The Board discussed an update on the American Psychological Association Insurance Trust issue.
- D. The Board discussed the Council agenda item, "Task Force Report on Psychological Effects to Prevent Terrorism" and requested that Dr. Shullman ask Paul R. Kimmel, PhD, Chair of the Task Force Report on Psychological Effects to Prevent Terrorism, to consider a motion to postpone the item to Council's February 2005 meeting in order that the item can be reviewed by boards and committees at the fall 2004 Consolidated Meetings. The Board expressed the need for a policy on receiving/accepting task force reports.
- E. The Board was informed it would receive an Information Technology Report at its October 2004 meeting.
- F. The Board voted to recommend that Council elect 120 members to initial Fellow status, on the nomination of the indicated divisions and on the recommendation of the Membership Committee and the Board of Directors.

BOARD OF DIRECTORS
CONFIDENTIAL

DRAFT

Executive Session Minutes

June 5-7, 2008

Present: Alan E. Kazdin, PhD; James H. Bray, PhD; Sharon Stephens Brehm, PhD; Barry S. Anton, PhD; Paul L. Craig, PhD; Norman B. Anderson, PhD; Armand R. Cerbone, PhD, Lisa Grossman, JD, PhD; Douglas C. Haldeman, PhD; Nadia T. Hasan, MA; Suzanne Bennett Johnson, PhD; Melba J. T. Vasquez, PhD; Michael Wertheimer, PhD

Absent: None.

- A. The Board voted to approve the minutes of its February 20 & 21, 2008, executive session.
- B. The Board discussed the item, "Election of Initial Fellows."
- C. The Board voted to postpone the item "Task Force on Council Representation Report" to its December 2008 meeting. The Board asked that the Task Force on Council Representation provide alternative models for the Board's consideration and the Task Force's rationale for the model it proposed.
- D. The Board voted to recommend that Council approve the following motion:

That the Council of Representatives approves the sustained contribution of psychology to the revision of the Mental Health chapter of the International Classification of Diseases and Related Disorders (ICD) through 2012. This contribution will support the secondment through the International Union of Psychological Science (IUPsyS) of the services of a psychologist consultant to work full time as part of the core revision team in the World Health Organization (WHO) through the anticipated completion of the ICD revision in 2012. The contract with IUPsyS will be reviewed annually by the APA Board of Directors through the projected completion of the IDC revision in 2012 and will be renewed each year if APA is satisfied with the outcome of its ongoing support.

The Board requested that IUPsyS be informed that the Board supports the proposal but that Council approval of the funding for the consultant expert for the WHO-IUPsyS project is required.

- E. The Board voted to recommend that Council approve the following motion:

That Council approves the inclusion of \$50,000 in the 2009 Preliminary Budget to support the 2009 Presidential Summit on the Future of Psychology Practice to be held May 14-17, 2009, in San Antonio, Texas. Council also approves matching up to \$25,000 for any additional funds raised from APA entities and affiliates.

Dr. Craig abstained from voting on this item.

- F. The Board discussed the May 27, 2008, memorandum from Dorothy W. Cantor, PsyD, and Bruce E. Bennett, PhD, to the Board of Directors and authorized APA legal counsel to discuss potential resolutions with counsel for the American Psychological Association Insurance Trust (APAIT) with the understanding that any such discussions would be concluded in time for the Board to make a decision on proceeding with legal remedies no later than its August 2008 meeting. Dr. Craig recused from voting on this item.
- G. The Board discussed how complaint letters are handled in relation to the April 18, 2008, memorandum from Christopher Corbett regarding ethical and legal concerns pertaining to the Society for Community Research and Action: Division of Community Psychology.

H. The Board postponed the item "Governance Best Practices" to its August 2008 meeting.

I. The Board of Directors reviewed the petition regarding restrictions on location of services. The petition was transmitted by the Recording Secretary to the Board of Directors after it was determined that the petition was signed by 1% of the Members in good standing. Dr. Kazdin, with input from the Board, determined that the petition is a proper motion.

Consistent with the provisions of Association Rule 30-3.1, the Board took the following actions with relation to the petition:

In order to balance the petitioner's request that the petition be processed with urgency and the practical matters of producing the ballot, etc., the Board set a goal of mailing the petition ballot on or about August 1. The ballot will be sent to the voting membership via third class mail as is customary with all APA ballots. An outside firm will coordinate the ballot mailing and will receive and tabulate the returned ballots. The voting period will be 45 days which sets a timeline to have the voting completed by mid-September. A majority of those voting will determine the outcome of the balloting.

The Board determined that it would be helpful to have pro and con statements and rebuttals accompany the ballot in addition to an informational preamble (this preamble will address the ballot process and not the substantive issues raised by the petition). The pro and con statements are not to exceed 750 words and the rebuttal statements are limited to 375 words. The petition sponsors are responsible for selecting an author(s) for the pro statement and rebuttal. The Recording Secretary will invite an author or authors for the con statement and rebuttal. The only caveat on this choice of statement authors is the author cannot be a current candidate for the office of APA president; nor can the name of any current candidate be mentioned in the statement. The reason for this limitation is to adhere to the current central office practice of ensuring that no presidential candidate gains an electioneering advantage by use of an APA publication or process, in this case the balloting process on this resolution. Web page URLs are also not permitted as part of the pro or con statements or rebuttals. The pro/con statements are due to APA no later than July 7. The rebuttal statements are due to APA on July 15.

J. The Board voted to approve the establishment of a Task Force for the Development of Parenting Coordination Guidelines and to appoint the following members to the Task Force: Helen Thomas Brantley, PhD, Robin M. Deutsch, PhD, Giselle Aguilar Hass, PsyD, Joan Kelly, PhD, Marsha Kline Pruett, PhD, Arnold L. Stolberger, PhD.

K. The Board voted to appoint Margaret Bull Kovera, PhD, and Linda A. Reddy, PhD, to the Committee on Division/APA Relations with terms starting January 1, 2009 and ending December 31, 2011.

L. The Board approved the slates of nominees for APA standing and continuing boards and committees after receiving the report from the Nominations Subcommittee.

M. The Board voted to accept the Report from the Personnel and Compensation Committee (attached).

N. The Board was informed of the recent misuse of APA's logo and letterhead on an invitation from Norine Johnson, PhD, for the People to People Citizen Ambassador Programs' Psychology Delegation to China in November 2008. The Board requested that Dr. Johnson be informed of the rules regarding the use of the APA logo and letterhead and be asked to send a correction to those who were sent the invitation making it clear that the delegation is neither sponsored nor endorsed by the American Psychological Association.

O. At its March 28 meeting, the Board voted to request that Drs. Anderson and Brehm (Board liaison to APAIT) not attend the upcoming APAIT meeting during which the Trustees will be deliberating a response to the memorandum from the Board dated March 17, 2008.

BOARD OF DIRECTORS

December 7-9, 2001

APPROVED MINUTES

Present: Norine G. Johnson, PhD; Philip G. Zimbardo, PhD; Patrick H. DeLeon, PhD, JD; Ronald F. Levant, EdD; Gerald P. Koocher, PhD; Raymond D. Fowler, PhD; Laura H. Barbanel, EdD; Charles L. Brewer, PhD; ; Katherine C. Nordal, PhD; J. Bruce Overmier, PhD; Ruth Ullmann Paige, PhD; and Nathan W. Perry, PhD; *incoming Board members* Carol D. Goodheart, EdD, and Robert J. Sternberg, PhD

Absent: None.

I. MINUTES OF MEETING

A.(1) The Board voted to approve the minutes of the August 22 & 25, 2001, meeting of the Board of Directors.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(2) The Board voted to refer the item "Prohibiting the Running for Two Offices Simultaneously" to the March 2002 Cross-Cutting Agenda, the Division Leadership Conference and State Leadership Conference for discussion. The Board requested that the item be brought back to the Board at its June 2002 meeting.

B.(3) The Board voted to approve changing the order of appearance of presidential candidates in the *APA Monitor on Psychology* beginning in 2003. Candidates names will be chosen randomly by the Chair of the Election Committee for the order in which they will appear in the first issue of the *APA Monitor on Psychology* and then will be rotated into the next position for subsequent issues of the *Monitor on Psychology* and on the ballot.

C.(4) The Board voted to reject the following motion:

That all President-elect and Board of Directors campaign materials to be provided at the February Council meeting be distributed in one packet by Governance Affairs staff. Potential President-elect and Board of Directors candidates will be informed that they shall provide to Governance Affairs staff any campaign materials they wish to distribute to Council and that they are prohibited from distributing materials at the Council meetings themselves.

D.(5) The Board voted to recommend that Council approve amending Association Rule 40-1.8 as follows (bracketed material to be deleted; underlined material to be added):

The appointment of an alternate representative [other than an officer within the] for a voting unit shall be certified in writing to the Recording Secretary in advance of the [meeting at which the alternate is seated] alternate representative being seated. The certification shall be from [the president or secretary] an officer or director of the voting unit so represented[, or shall make clear by what authority or custom the appointment has been made] or from a person authorized in writing by the voting unit to make such appointments. Consistent with the APA Bylaws, an alternate representative shall be a member of the voting unit who is also a member of APA and shall not be a member who has served as a Council representative for the six consecutive years prior to the year in which they serve as an alternate

E.(6) The Board voted to recommend that Council reject the following motion:

(1) candidates for the APA Board of Directors will have an opportunity to submit a statement of 500 words (or less) when they return their questionnaire indicating interest in nomination. These

statements will be mailed to members of Council with the nomination ballots; (2) these statements will also be posted on the APA-website with the permission of each individual, and (3) the Council of Representatives encourages candidates and final nominees for the APA Board of Directors to utilize the above standard mechanisms that are designed to inform Council members of their unique qualifications and interests relevant to the respective governance groups and discourages nominees from engaging in additional direct campaigning efforts. All actions will be approved for a three-year trial basis. An evaluation of these actions in meeting their intended outcomes will be presented to Council after the completion of three election cycles, by the Election Committee.

The Board noted that the proposal is too restrictive.

F.(7) The Board voted to recommend that Council reject the following motion:

(1) nominees for each APA board or committee (excluding the Board of Directors) elected by Council members will be invited to submit a statement of 300 words (or less) that will accompany election ballots; (2) nominees for each APA board or committee (excluding the Board of Directors) will be also have the option of having their statement posted on the APA website; and (3) the Council of Representatives encourages nominees for each APA board or committee (excluding the Board of Directors) to utilize the above mechanisms that are designed to inform Council members of their unique qualifications and interests relevant to the respective governance groups and discourages nominees from engaging in additional direct campaigning efforts. All actions will be approved for a three-year trial basis. An evaluation of these actions in meeting their intended outcomes will be presented to Council after the completion of three election cycles, by the Election Committee.

The Board noted that the proposal is too restrictive.

G.(8) The Board postponed the item "Membership Recruitment and Retention Fund Proposal" to its February 2002 meeting. The Board requested that additional information regarding the proposal be provided.

H. In executive session, the Board took the following action on appointments:

1. Approved Elizabeth Lira Kornfeld as the recipient of the 2002 APA International Humanitarian Award.
2. Approved the appointment of Frederick R. Kobrick as a non-voting member of the Finance Committee for a term beginning 1/1/2002 and ending 12/31/2004.
3. Approved the appointment of Patricia Hollander as a non-voting member of the Commission for the Recognition of Specialties and Proficiencies in Professional Psychology for a term beginning 1/1/2002 and ending 12/31/2004.
4. Approved the appointment of Max Heinrich, PhD, as APA's representative to the Joint Commission on the Accreditation of Healthcare Organizations' Behavioral Health Care Professional Technical Advisory Committee (JCAHO PTAC) and Richard Hunter, PhD, as alternate representative, for terms beginning 1/1/2002 and ending 12/31/2003.
5. Approved the appointment of Nicole B. Barenbaum, PhD, to the History Oversight Committee for a term beginning 1/1/2002 and ending 12/31/2004.
6. Approved the appointments of Natacha Blain, JD, PhD, Robert T. Kinscherff, JD, PhD, and Sandra B. McPherson, PhD, to the Committee on Legal Issues for terms beginning 1/1/2002 and ending 12/31/2004.
7. Approved appointments to continuing committees. Terms will begin 1/1/2002 and end 12/31/04, except where noted. See Attachment A for list of appointments.

III. ETHICS

A.(31) The Board received an update on work by the Ethics Code Task Force in the ongoing revision of the Ethics Code.

B.(32) The Board received an update regarding the Ethics Committee's plan to award a prize for a graduate student paper on psychology and ethics.

C. In executive session, the Board took action on seven cases.

D. In executive session, the Board voted to approve the following revisions to the Ethics Committee's Rules and Procedures (bracketed material to be deleted; underlined material to be added):

Part III, Section 2.1.

Specific Jurisdiction. The Ethics Committee has the authority to review and make recommendations concerning all applications for readmission by persons who have lost membership as a result of unethical behavior, who have resigned while under an ethics investigation, or whose membership was voided because it was obtained on the basis of false or fraudulent information. The Membership Committee shall transmit all such applications for readmission to the Director of the Ethics Office.

Part IV, Section 6.

Review and Recommendation by the Committee Following a [Response] Request for Review . Upon receipt of the respondent's [response] request for review and supporting statement and upon conclusion of any necessary further investigation, the case shall be reviewed by the Ethics Committee. (Note: No changes to remainder of this section.)

IV. BOARD OF DIRECTORS

A.(9) The Board approved the following meeting dates for 2003: February 12 & 13, April 25-27 (retreat), June 6-8, August 5 & 9, October 10-12 (retreat), December 5-7.

B.(10) The Board took emergency action and approved the following Resolution on Terrorism:

- WHEREAS On September 11, 2001, terrorists hijacked four commercial airplanes and attacked the World Trade Center in New York City and the Pentagon in the Washington, DC, area and crashed the fourth plane in rural Pennsylvania;
- WHEREAS Those attacks caused the deaths of thousands and great destruction of property;
- WHEREAS The physical impact of terrorism is death and destruction; its behavioral effects include disorganization, fear, anger, a sense of helplessness, loss of confidence, and problems in coping;
- WHEREAS The fear of anthrax contamination has heightened these psychological states;
- WHEREAS Different segments of our diverse society use different methods of coping with and managing stress, some being more comfortable with individually-focussed methods like behavioral, affective and cognitive self-management and relaxation techniques, while others are more comfortable receiving support from their extended families, communities and places of worship.
- WHEREAS Psychology as a discipline and a profession has much that it can contribute through application of psychological knowledge and expertise;
- WHEREAS The events of September 11 have led to a dramatic increase in the incidence of hate crimes based on ethnicity, ranging from harassment at work to murder;

THEREFORE BE IT RESOLVED

that the American Psychological Association, an organization devoted to the promotion of health and well being, calls upon the psychology community to work toward an end to terrorism in all its manifestations;

BE IT FURTHER RESOLVED THAT THE AMERICAN PSYCHOLOGICAL ASSOCIATION:

Encourages its members to use their knowledge and expertise to help alleviate the public's high levels of stress, anxiety, fear and insecurity and to mobilize the public's strength and resilience to cope with terrorism and its aftermaths;

Provides relevant information to its members which will enable them to reduce the public's high levels of anxiety, fear, stress and insecurity;

Advocates at the congressional and executive levels for increased use of behavioral experts and behavioral knowledge in dealing with both the threat and impact of terrorism;

Encourages increased support for behavioral research that will produce greater understanding of the roots of terrorism and the methods to defeat it, including earlier identification of terrorists and the prevention of the development of terrorism and its related activities;

Encourages increased research, treatment and prevention of trauma-related and disaster-induced problems among children, adolescents and adults;

Encourages ways to develop stress management, fear management and support programs specifically designed to help citizens deal with the continuing threat of terrorism;

Condemns prejudice leading to harassment, violence and hate crimes.

Council will be informed at its February 2002 meeting of the emergency action taken by the Board.

The Board also voted to allocate 2 of its 2002 convention hours for a Symposium and Town Hall Meeting on Psychology Responds to the Threat and Impact of Terrorism sponsored by the APA Board of Directors Subcommittee on Psychology's Response to Terrorism.

C(11). The Board voted to allocate \$33,000 from the President's contingency fund to support the 2002 presidential initiative "Psychology Making a Significant Difference: Psychological Science and Research Enrich Our Lives" and \$2,000 from the President's contingency fund to support a reception for ethnic minority students in the Division 45 hospitality suite at the 2002 APA convention.

D.(12) The Board voted to recommend that Council approve the addition of \$77,000 to the 2002 Final Budget to 1) enhance central office research capabilities and 2) provide electronic access to APA journals and research tools for the Congressional Research Office.

E.(12A) The Board requested that a plan be brought to the Board in February 2002 regarding a request for new staff to work with issues on Psychology and Health.

F.(33) The Board received as information the annual report of the Ad Hoc Committee on Early Career Psychologists.

G.(34) The Board received an update regarding the activities of the Board of Professional Affairs in relation to APA guidelines.

H. In executive session, the Board discussed the coordination of Board activities relating to terrorism.

I. In executive session, the Board took action on the following Psychology Defense Fund Case:

#2001-6: On recommendation of the Executive Management Group, the Board voted to grant \$15,000 to the Missouri Psychological Association to help fund their pursuing a lawsuit against the Missouri Department of Social Services, Division of Medical Services.

J. In executive session, the Board voted to recommend that Council approve and forward to the membership for a vote the following amendments to the APA Bylaws to provide that an APAGS Representative serve as a voting member of Council and non-voting member of the Board of Directors (bracketed material to be deleted; underlined material to be added):

ARTICLE V: Composition of the Council of Representatives

1. Council shall be composed of Representatives of Divisions, Representatives of State and Provincial Psychological Associations, members of the Board of Directors [and] the Officers of the Association (the chief staff officer shall serve without vote), and the APAGS Representative...

2. The APAGS Representative shall begin his or her term on Council in January of their term as Chair of the American Psychological Association of Graduate Students Committee and will serve for a term of one year.

ARTICLE VII: Board of Directors

1. The Board of Directors shall consist of the President, the President-Elect, the Past-President, the Recording Secretary, the Treasurer, the Chief Staff Officer (without vote), the APAGS Representative to the Council of Representatives (without vote), and six others elected by a preferential ballot by those Members and from those Members holding seats on Council during the year immediately preceding the election. Directors not serving ex officio shall serve for staggered terms of three years. All members of the Board of Directors shall serve until their successors are elected and qualify.

An item will be forwarded to Council in August 2002 after the Finance Committee has reviewed the item.

V. DIVISIONS AND STATE AND PROVINCIAL ASSOCIATIONS

A.(13) The Board voted to recommend that the Council of Representatives approve the American Society for the Advancement of Pharmacotherapy, Division 55 of the American Psychological Association, as a permanent APA division.

VI. ORGANIZATION OF THE APA

No items.

VII. PUBLICATIONS AND COMMUNICATIONS

A. In executive session, the Board discussed the report of the Board of Directors American Psychologist Task Force. The Board voted to approve the continuation of the model of having the Chief Executive Officer serve as the editor of the *American Psychologist*. The Board also approved the following revised editorial coverage statement :

The *American Psychologist* is the official journal of the American Psychological Association. As such, the journal contains archival documents and articles covering current issues in psychology, covering the science and practice of psychology, and regarding psychology's contribution to public policy.

Archival and Association documents include, but are not limited to, the annual report of the Association, Council minutes, the Presidential address, editorials, other reports of the Association, ethics information, surveys of the membership, employment data, obituaries, calendars of events, announcements, and selected award addresses.

Articles published cover all aspects of psychology. Submissions should be current, timely, and of interest to the broad APA membership; they should be written in a style that is accessible to and of interest to all psychologists, regardless of area of specialization. *American Psychologist* contributions often address national and international policy issues as well as topics relevant to Association policy and activities. The first step in the AP editorial review process is performed by the AP editor/APA CEO. Approximately 70% of author-submitted manuscripts are returned without review within 30 days for a host of reasons: empirical manuscript more appropriate for one of the APA primary journals; topic of the manuscript or style of the writing too narrow for the broad AP readership; topic of the manuscript recently covered in the AP; inappropriate content or style; or other, more typical reasons such as not a major contribution to the field or simply not written well enough. As the official journal of the APA, AP does not publish papers advocating policies contrary to officially adopted APA policy, although debates of the evidence supporting such policies may appear from time to time.

Comments on the policies of the Association and articles published in the *American Psychologist* are also considered for the AP Comment section.

VIII. CONVENTION AFFAIRS

A.(14) The Board voted to approve Boston, Massachusetts, as the site for the 2008 Convention to be held within the period of Thursday, August 14 to Tuesday, August 19, 2008, as determined by the approved convention structure. The Board recommended that the Board of Convention Affairs book conventions earlier so as not to conflict with the start of the school year.

IX. EDUCATIONAL AFFAIRS

A.(15) The Board voted to approve the following motion:

The Board of Directors directs the Board of Professional Affairs, the Board of Educational Affairs, the Committee for the Advancement of Professional Practice, and relevant staff to develop an implementation plan for recommendations C-J of the Commission on Education and Training Leading to Licensure in Psychology. The implementation plan should describe the resources necessary to implement the various programmatic activities and infrastructure recommendations and the extent to which the recommendations may be implemented using existing resources. The implementation plan should be presented to the Board of Directors at its June 2002 meeting for its use in making a recommendation to Council on the Commission recommendations.

B.(16) The Board voted to recommend that the Council of Representatives confirm the recognition of Family Psychology as a specialty in professional psychology.

C.(17) The Board voted to approve the proposed changes to the *Guidelines and Principles for Accreditation of Programs in Professional Psychology (G&P)* and the *Accreditation Operating Procedures*. The Board noted the policy changes were minor and therefore did not require Council approval.

D.(18) The Board voted to recommend that Council reject the following motion:

In order to realize the benefits that would accrue from more uniform education and training standards, the American Psychological Association (APA) urges all U.S. and Canadian jurisdictions to seek changes in administrative policies and regulations and, where necessary, in law that would require all health service provider applicants for licensure to have completed a doctoral training program in psychology that is accredited by an accrediting body recognized by the U.S. Secretary of Education (or comparable recognition in Canada). The Association adopts this position as official policy and calls upon its affiliated state and provincial psychological

associations, state and provincial regulatory bodies, the Association of State and Provincial Psychology Boards (ASPPB), the Council of Graduate Departments of Psychology (COGDOP), the Councils of Training Directors in Psychology, and the National Council of Schools of Professional Psychology (NCSPP) to endorse and support the implementation of the policy.

E.(19) The item "APA/CPA Memorandum of Understanding for Concurrent Accreditation" was withdrawn.

F.(35) The Board received information regarding the creation of an Undergraduate Advisory Panel.

G.(36) The Board received an update on the Task Force for Distance Education in Professional Psychology.

H.(37) The Board was informed of the decision by the Committee on Accreditation to retain Footnote 4 of the Guidelines and Principles for Accreditation of Programs in Professional Psychology.

I.(38) The Board received an update on recent activities of the Board of Educational Affairs regarding the Committee on Accreditation.

X. PROFESSIONAL AFFAIRS

A.(20) The Board voted to recommend that Council reject the following motion:

That the Council of Representatives recommends that existing APA and Divisional guidelines be re-titled, terming them "considerations" and to title all future such documents with this term.

B.(21) The item, "AACAP Policy Statement on Juvenile Death Sentences" was withdrawn.

XI. SCIENTIFIC AFFAIRS

A.(39) The Board received an update on Science Directorate activities in the areas of research regulations and institutional review boards.

XII. PUBLIC INTEREST

A.(22) The Board voted to recommend that Council receive the report of the Working Group on Children's Mental Health and refer the report to the Committee on Children, Youth and Families for consideration of specific proposals.

B.(23) The Board voted to recommend that Council adopt the following Resolution on Ageism:

WHEREAS ageism is defined as prejudice toward, stereotyping of, and/or discrimination against any person or persons directly and solely as a function of their having attained a chronological age which the social group defines as "old"; and

WHEREAS psychologists have documented the role of ageism in assessment and treatment of older adults, the degree to which aging does (or does not) affect human behavior and performance, the effects of age stereotypes, the extent to which ageism is a factor in workplace discrimination, among other concerns related to age and behavior; and

WHEREAS over the past several years APA has affirmed its opposition to discrimination and stereotyping based on gender, race, physical disability, sexual orientation, and ethnicity; and

WHEREAS most recently (February 1999) APA affirmed by Council resolution its support of Affirmative Action and equal opportunity for all persons regardless of race, gender, age, religion, disability, sexual orientation and national origin; and

WHEREAS APA embraces diversity in all efforts and programs and recognizes the dimension of age as an important element of diversity;

THEREFORE BE IT RESOLVED that the American Psychological Association rejects ageism in all its forms and is committed to support efforts to eliminate it from our society.

References

Calasanti, T.M. (1999) Feminism and gerontology: Not just for women. Hallym International Journal of Aging, 1, 44-56.

Kimmel, D.C. (1988) Ageism, psychology, and public policy. American Psychologist, 43,175-178.

Laws, G. (1995) Understanding ageism: Lessons from feminism and postmodernism. The Gerontologist, 35, 112-118.

Palmore, E. (1990). Ageism, negative and positive. New York: Springer.

Schaie, K.W. (1988). Ageism in psychological research. American Psychologist, 43, 179-183.

C.(40) The Board received as information a report on the meeting *Sexual Orientation and Mental Health: Toward Global Perspectives on Practice and Policy*, International Meeting on Lesbian, Gay and Bisexual Concerns in Psychology.

D.(41) The Board receive an update on the activities of the Task Force on Advertising and Children.

E.(42) The Board received information regarding the APA response to recent correspondence to the APA President and President-elect from the National Association for Research and Therapy of Homosexuality.

XIII. ETHNIC MINORITY AFFAIRS

No items.

XIV. INTERNATIONAL AFFAIRS

A.(24) The Board postponed to its February 2002 meeting the item, "Draft Resolution on the Mexico City Policy."

XV. CENTRAL OFFICE

No items.

XVI. FINANCIAL AFFAIRS

A.(25) The Board voted to recommend that Council approve the following motion:

Council approves the Proposed 2002 Final Budget calling for a net bottom-line deficit of \$1,585,600.

In addition, Council supports the passage of this budget authorizing management to do what is necessary to ensure that the deficit for 2002 is no greater than the \$1,585,600 deficit being proposed at this time and asks that the CEO develop a plan to achieve a balanced budget by 2004 including substantial progress toward a balanced budget in 2003.

B.(26) The Board voted to recommend changing the name "contingency fund" to "discretionary fund" and requested that relevant Association Rule changes be drafted and provided to the Board and Council for action.

The Board voted to postpone action on the recommendations that an allowance pool be included in the budget to provide funding of core and fully loaded costs for contingency (discretionary) requests and that the core and fully loaded costs be included in each agenda item with fiscal implications beginning in 2002.

C.(27) The item, "APA Dues Payment Mechanisms/Options" was withdrawn.

D.(28) The Board postponed the item "Association Wide Operational Review" until additional information is received.

E.(29) The Board voted to approve, in principle, that:

1) the Sponsor Approval System (a) be managed to strive to generate over time an average 10% profit margin after overhead beginning in 2003; (b) be made to increase the profit margin in 2002 from 3% to 5% to the extent possible; and (c) be managed in a way that future fee increase not be disproportionately imposed on affiliated sponsors to the extent possible.

2) the CE Credit Programs (a) be managed to strive to generate over time an average of 5% profit margin after overhead beginning with 2002; and (b) be managed whereby the least profitable activities be considered for elimination if it is deemed necessary to meet the establish goal.

The Board requested that relevant Association Rule changes be drafted and provided to the Board in June 2002.

F.(43) The Board received as information the report from the Finance Committee on the annual review of the employee compensation package.

XVII. COMMUNICATIONS CONCERNING OUTSIDE ORGANIZATIONS

A.(30) The Board voted to postpone the item "Facilitating APA/ABA Relations" to its February 2002 meeting.

BOARD OF DIRECTORS

August 22 & 25, 2001

APPROVED MINUTES

Present: Norine G. Johnson, PhD; Patrick H. DeLeon, PhD, JD; Ronald F. Levant, EdD; Gerald P. Koocher, PhD; Raymond D. Fowler, PhD; Laura H. Barbanel, EdD; Charles L. Brewer, PhD; ; Katherine C. Nordal, PhD; J. Bruce Overmier, PhD; Ruth Ullmann Paige, PhD; and Nathan W. Perry, PhD, Philip G. Zimbardo, PhD; *incoming Board member* Carol D. Goodheart, EdD

Absent: None.

I. MINUTES OF MEETING

A.(1) The Board voted to approve the minutes of the June 8-10, 2001, meeting of the Board of Directors.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

B.(2) The Board voted to recommend that Council approve amending Association Rule 110-7 as follows (bracketed material to be deleted; underlined material to be added):

Guidelines for the conduct of President-elect nominations and elections

2. Eligibility and appropriateness of standing for the APA Presidency while standing for another APA office. An individual who APA has identified as a finalist to be on the ballot as President-elect shall be prohibited from concurrently being a candidate for election to any other APA office, including divisional offices. [Individuals serving in the APA Presidency cycle shall not hold offices within the Association other than the ex officio positions that accompany that office.] A person elected to the APA Presidency shall, during the term of President-elect, President, and Past President, be restricted from holding any other APA office, including divisional offices, that is not an ex officio extension of the Presidential office.

C.(3) The Board approved the following motion regarding the order of appearance of presidential candidates:

In order to remove alphabetical bias in the election process for the APA President, the Board of Directors proposes a new system that is designed to be fair to all candidates by:

1. Listing candidates in the Monitor alphabetically in their first candidate statement/response appearance;
2. In subsequent issues, rotating candidate responses so that each of the five candidates are in an issue first (far left) in the order of responses.
3. On the candidate ballot, names would be determined by a random selection by the APA Election Committee

Subsequent to the meeting, staff recognized that only four issues of the APA Monitor on Psychology provide coverage of presidential candidates. Therefore, only four of the five candidates would be listed first in the APA Monitor on Psychology. Understanding it was the intention of the Board to be fair to all presidential candidates, the Board will be asked to reconsider this motion at its December 2001 meeting.

D.(4) The Board voted to recommend that Council reject the following main motion of new business item #58A:

APA Books is instructed immediately to begin production of a paper-bound less expensive directory and make it available for purchase as soon as possible.

E.(5) The Board voted to recommend that Council approve the following amendments to Association Rules 10-11, 100-6, and 210-9 (bracketed material to be deleted; underlined material to be added):

10-11 - LIFE MEMBERSHIP STATUS (DUES-EXEMPTION)

10-11.1 Any member who has reached the age of 65 and has belonged to the APA for a total of 25 years, may choose to [become a life-member] begin the dues-reduction process, culminating in dues exemption by so advising Central Office of his or her eligibility. Any member who, regardless of age or length of membership, has been adjudged totally and permanently disabled, may choose to become exempt from dues by so advising Central Office of his or her eligibility. Ordinarily, the transfer in status will become effective as of the January 1 immediately following the member's request, but in appropriate circumstances the change in status may be made effective as of the previous January 1.

[Life] These members will be exempt from further payment of APA dues, as well as division dues, division assessments, or other assessments established by the Council. However, [life] these members will have the option of paying a subscription price/service fee if they choose to receive the *American Psychologist* and the *APA Monitor on Psychology*. The subscription price/service fee will be determined by Council to allow for dues distribution to those APA divisions to which the dues-exempt [life] member belongs and to help defray the costs of the *American Psychologist*, the *APA Monitor on Psychology*, and for administering services.

Dues-exempt [Life] members shall pay the same price for journals as dues-paying members. However, subscriptions to the *American Psychologist* and the *APA Monitor on Psychology* are included in the subscription price/servicing fee set by Council to cover such subscriptions and to help defray the cost of administering services to dues-exempt [life] members. (see also Association Rule 100-6 LIFE MEMBERSHIP STATUS (DUES EXEMPTION)). The journal credit applies only to dues-paying members.

100-6 LIFE MEMBERSHIP STATUS (DUES EXEMPTION).

100-6.1 [APA Life members] Any APA member who is exempt from paying dues shall also be exempt from further payment of division dues and assessments. However, divisions may, at their discretion, assess and collect from [life] these members a mandatory subscription price/service fee to cover the costs of providing such division publications as may be requested by [the life] these members. (see also Association Rule 10-11 - LIFE MEMBERSHIP STATUS (DUES-EXEMPTION)).

210-9 – REDUCED DUES STATUS

210-9.1 Any Fellow, Member or Associate member may request reduced dues status by so indicating on the annual dues statement and submitting a written request to the Central Office.

There shall be an annual APA membership maintenance fee for reduced dues status, set by the Membership Committee. This fee applies to APA dues and assessments. The fee will ordinarily be lower than full dues, with the amount to be determined by the Membership Committee. Reduced dues status is limited to a total of five years and must be renewed annually, on the member dues statement. [Members who are experiencing financial hardship as a result of total and permanent disability may be granted reduced dues on a permanent basis.] Those members requesting reduced dues status may continue to subscribe to APA journals, purchase APA books, and register for the annual convention at the member prices or rates.

F.(6) The Board voted to recommend that Council receive the Report of the Task Force on Membership Retention and Recruitment.

G.(7) The Board approved, in principle, the following motion:

That the Council of Representatives approves the inclusion of \$100,000 in the 2002 Final Budget to fund increased membership retention and recruitment activities. In addition, Council approves continued funding for this effort and the addition of \$100,000 per year to the 2003-2005 budgets.

The Board recommended that Council postpone the item to its February 2002 meeting to give both the Finance Committee and the Board of Directors an opportunity to review a more detailed proposal at their December 2001 meetings.

H.(8) The Board voted to recommend that Council approve the following motion:

That Council approve extending the Membership Committee's meeting by one day in the fall and inviting the co-chairs (or their designees) of the Task Force on Membership Recruitment and Retention to attend the meeting in order to further the work of the Task Force on Membership Recruitment and Retention.

I. In executive session, the Board voted to recommend that Council elect 137 Members to initial Fellow status on the nomination of the indicated divisions and on the recommendation of the Membership Committee and the Board of Directors.

J. In executive session, the Board voted to appoint Jocelyn S. Davis (term 1/1/02-12/31/02) and John McCormack (term 1/1/02-12/31/03) as non-voting investment advisors to the Finance Committee.

III. ETHICS

A.(16) The Board received an update on work done by the Ethics Code Task Force on the ongoing revision of the Ethics Code.

B.(17) The Board was informed that the Ethics Committee voted to endorse and initiate efforts toward implementation of an ethics prize for award to a graduate student in 2002.

C. In executive session, the Board voted to approve revisions to the Ethics Committee's Rules and Procedures.

IV. BOARD OF DIRECTORS

A.(9) The Board discussed the item "American Psychological Association Graduate Student (APAGS) Member of the Board of Directors."

B.(10) The Board approved changing the name of the Ad Hoc Committee on New Professionals to the Ad Hoc Committee on Early Career Psychologists.

C.(11) The Board considered the recommendations for implementation of the Report of the Task Force on Envisioning, Identifying and Accessing New Professional Roles as provided by staff at the request of Council at its February 2000 meeting.

The Board voted to approve the restoration of one position to the Congressional Fellows Program as soon as funds are available, but no later than 2003.

The Board requested that further study be done by staff regarding the following motion:

That Council approve the addition of \$187,000 to the 2003 Preliminary Budget to enhance central office research capabilities and provide electronic access to APA journals and research tools for select state and federal legislators

The Board requested that an item be brought back to the Board for consideration at its December 2001 meeting.

D. In executive session, the Board took action on the following Psychology Defense Fund Cases (PDF):

#2001-4: The Board voted to grant \$17,500 to the Nebraska "Psychologists for Responsible Hospital Practice" to help defray legal expenses arising from a lawsuit that they have filed in federal district court in Lincoln, Nebraska. The Board requested that it be updated on the status of this lawsuit.

#2001-5: On recommendation of the Executive Management Group, the Board voted to grant \$10,000 to Rebecca Busby, PhD, to help defray expenses for pursuing a legal action against the Battle Creek Veterans Hospital.

V. DIVISIONS AND STATE AND PROVINCIAL ASSOCIATIONS

A.(12) The Board discussed the Interdivisional Grants Project and requested that Drs. Charles Brewer and Ruth Paige look into reasons for the low number of grant proposals received in certain years and steps for increasing the number of grant proposals and report back to the Board in February 2002.

VI. ORGANIZATION OF THE APA

No items.

VII. PUBLICATIONS AND COMMUNICATIONS

No items.

VIII. CONVENTION AFFAIRS

No items.

IX. EDUCATIONAL AFFAIRS

No items.

X. PROFESSIONAL AFFAIRS

A.(13) The Board voted to recommend that Council approve the Criteria for Practice Guideline Development and Evaluation.

B.(14) The Board voted to recommend that Council approve the following amendments to APA's policy on challenges to the doctoral standard for psychology licensure (bracketed material to be deleted; underlined material to be added):

1. Encouragement and assistance to State Psychological Associations (SPPAs) and state licensing boards to move to single level doctoral licensure.
2. Active consulting to SPPAs in states that have dual level licensure.
3. Encourage the recognition of individuals holding terminal masters degrees in psychology under existing or new state statutes, provided that such statutes do not recognize, regulate or govern the title or practice of psychology[.] , and do not use the term "psychological" in defining the title or scope of practice for such persons.
4. Convening exploratory meetings focusing on issues involving education, training and credentialing, at the Consolidated meetings with the Board of Directors, Committee for the

Advancement of Professional Practice, Board of Professional Affairs, Board of Educational Affairs, American Psychological Association of Graduate Students, the Association of State and Provincial Psychology Boards and other relevant groups.

C.(18) The Board received information regarding plans for the Institute on Psychology and America's Changing Demographics.

D.(19) The Board received as information an update on recent developments related to two aspects of professional mobility for psychologists: communication from and with the National Register of Health Service Providers in Psychology and the adoption of a Mutual Recognition Agreement governing mobility in Canada.

XI. SCIENTIFIC AFFAIRS

No items.

XII. PUBLIC INTEREST

A.(15) The Board voted to recommend that Council reject the following main motion of new business item #58F:

WHEREAS Title VII of the Civil Rights Act of 1964 covers the American Psychological Association;

WHEREAS the principle of Title VII of the Civil Rights Act of 1964, as amended, is nondiscrimination in employment because of race, color, religion, sex, national origin, disability, or age;

WHEREAS EEOC defines EEO groups as Black males, Black females, Hispanic males, Hispanic females, Asian American/Pacific Islander males, Asian American/Pacific Islander females, American Indian/Alaskan Native males, American Indian/Alaskan Native females, White males and White females (29 CFR, 1607.4);

WHEREAS EEOC Form 100 (Employer Information Report EEO-1) for reporting EEO progress includes Black males, Black females, Hispanic males, Hispanic females, Asian American/Pacific Islander males, Asian American/Pacific Islander females, American Indian/Alaskan Native males, American Indian/Alaskan Native females, White males and White females;

WHEREAS racial discrimination is present when people are treated differently than others who are similarly situated because they are of Hispanic ethnicity or members of a specific race or sex;

WHEREAS the courts have been careful to state that Hispanics, all racial groups and both sexes are protected by civil rights law;

WHEREAS every U.S. citizen is a member of some protected class and is entitled to the benefits of EEO law;

WHEREAS EEOC stipulates that employers compare the EEO make-up of their workforce to the relevant labor force from which employees are recruited;

WHEREAS the percents of minorities and women by job groups reported in past APA EEO/Affirmative Action reports do not indicate the extent to which racial groups, Hispanics, women and men are under-represented or over-represented;

WHEREAS comparing the percent of each racial group, Hispanics, women and men in each APA job group to an appropriate (i.e., relevant) labor pool from which employees are recruited provides a common metric (a representation index) to assess the relative utilization of each target group;

WHEREAS APA has been a leader in EEO/Affirmative Action efforts (HR Magazine);

WHEREAS racial and gender bias continue to exist in U.S. society;

BE IT RESOLVED THAT:

1. APA reaffirms the spirit of the Civil Rights Act of 1964, as amended, that all-racial groups and Hispanics as well as members of both sexes shall not be discriminated against;
2. APA shall vigorously continue its affirmative action programs;
3. All APA reports on the race and gender characteristics of its staff, members, governance bodies, psychology students, etc. shall present in equal fashion information of the status separately of all racial groups and Hispanics as well as both sexes;
4. APA EEO/Affirmative Action reports shall present a representation index for each racial group, Hispanics, women and men with an accompanying description of the relevant labor pool used to calculate the representation indices;
5. These reports will be publicly available to APA Council, APA members and staff;
6. APA endorses full utilization/representation of all racial groups, Hispanics and both sexes.

B.(20) The Board received information regarding the APA Task Force on Workplace Violence.

C.(21) The Board received information on the following child, youth and family activities: APA Working Group on Children's Mental Health; Emergency Medical Services for Children; Resolution on Rural Children's Mental Health Services; and UN Convention on Rights of the Child and the Convention's Optional Protocols.

D. In executive session, the Board considered a request to recommend that Council change the status of the Ad Hoc Committee on Psychology and AIDS (COPA) from an ad hoc committee reporting directly to the Board of Directors to a continuing committee reporting to the Board for the Advancement of Psychology in the Public Interest (BAPPI). The Board did not approve changing the status of COPA from an ad hoc to a continuing committee but did approve changing its reporting to BAPPI instead of directly to the Board of Directors.

XIII. ETHNIC MINORITY AFFAIRS

No items.

XIV. INTERNATIONAL AFFAIRS

No items.

XV. CENTRAL OFFICE

No items.

XVI. FINANCIAL AFFAIRS

A.(15A) The Board voted to approve the following resolution on APA's 401(k) Plan:

WHEREAS the American Psychological Association desires to provide its employees a qualified retirement plan, including the opportunity for participants to make salary reduction contributions under Section 401(k) of the Code; and

WHEREAS the Board has previously approved the adoption of such a retirement plan for its employees;

THEREFORE BE IT RESOLVED

1. That the American Psychological Association 401(k) Plan (the "Plan") is hereby adopted, effective January 1, 2001, and Raymond D. Fowler, PhD, L. Michael Honaker, PhD, or their designee is hereby authorized to execute the Plan, and

2. That Raymond D. Fowler, PhD, L. Michael Honaker, PhD, or their designee is authorized to take all actions necessary or appropriate to implement the Plan, including submitting the Plan for a determination of the Plan's qualified status by the Internal Revenue Service, and all actions previously taken to implement the plan are hereby ratified and confirmed.

B. In executive session, the Board received information on APA's net worth and "theoretical" building equity.

BOARD OF DIRECTORS

February 13 & 14, 2002

APPROVED MINUTES

Present: Philip G. Zimbardo, PhD; Robert J. Sternberg, PhD; Norine G. Johnson, PhD; Ronald F. Levant, EdD; Gerald P. Koocher, PhD; Raymond D. Fowler, PhD; Laura H. Barbanel, EdD; Charles L. Brewer, PhD; Carol D. Goodheart, EdD; Katherine C. Nordal, PhD; J. Bruce Overmier, PhD; Nathan W. Perry, PhD; and Chris I. Loftus (APAGS Representative).

Absent: None.

I. MINUTES OF MEETING

A.(1) The Board voted to approve the minutes of its December 7-9, 2001, meeting.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(2) The Board voted to recommend that Council approve the following motion regarding the Membership Recruitment and Retention Fund Proposal:

Council approves the inclusion of \$100,000 in the 2002 Final Budget to fund special projects for membership recruitment and retention. Council asks that a strategic plan for implementing this program be developed and used in evaluating the request for future funding to be brought to Council for action in February 2003.

Council recommends a close collaboration among the American Psychological Association of Graduate Students (APAGS), the Ad Hoc Committee on Early Career Psychologists and the Membership Committee in implementing this program.

III. ETHICS

A.(3) The Board voted to approve the establishment of an award in the amount of \$1,000 to be presented in recognition of excellence in the teaching of ethics.

B.(22) The Board received an update on work by the Ethics Code Task Force in the ongoing revision of the Ethics Code.

C. In executive session, the Board took action on seven ethics cases.

D. In executive session, the Board received information on stipulated resignations with admission of violation.

IV. BOARD OF DIRECTORS

A.(4) The Board voted to allocate \$15,000 from the President-elect's contingency fund to support a planning committee for the 2003 presidential initiative on psychology and education. The funds will be used to support two two-day planning meetings and conference calls. (Note: Subsequent to the meeting, \$5,000 of the \$15,000 was allocated to support the 2003 presidential initiative on unity.)

B.(5) The Board voted to allocate \$18,700 from its 2002 contingency fund for a Task Force on Promoting Resilience in Response to Terrorism.

C.(6) The Board voted to allocate \$4,300 from its 2002 contingency fund to fund one additional meeting of the Ad Hoc Committee on Early Career Psychologists.

D.(6A) The Board voted to allocate \$8,000 from its 2002 contingency fund for a working group to meet to explore APA's possible involvement in Complementary and Alternative Medicine.

E.(6B) The Board voted to allocate \$500 from its 2002 contingency fund to support the involvement of the Illinois Psychological Association in a Chicago area *5 Girls* event.

F.(6C) The Board voted to allocate \$800 to assist in funding a meeting of the Massachusetts Think Tank.

G.(22A) The Board received an update regarding the Board of Directors' request for staff to develop a plan for coordinating the work of APA toward greater recognition of and involvement by psychology as a health discipline. A request was made that APA continue to explore how to bring psychology and health to the forefront, including ways of coordinating efforts without staff drain or the expenditure of excessive funds.

H. In executive session, the Board took action on the following Psychology Defense Fund Cases:

Petition #2002-1: On recommendation of the Executive Management Group (EMG), the Board recommended against awarding a grant to Jan Grossman, PhD, JD.

Petition #2002-2: On recommendation of the EMG, the Board voted to grant \$15,000 to Frank Masur, PhD, to support his ongoing lawsuit against a psychiatrist for interference with a business relationship

V. DIVISIONS AND STATE AND PROVINCIAL ASSOCIATIONS

A.(23) The Board received information regarding the Interdivisional Grants Project.

VI. ORGANIZATION OF THE APA

No items.

VII. PUBLICATIONS AND COMMUNICATIONS

No items.

VIII. CONVENTION AFFAIRS

No items.

IX. EDUCATIONAL AFFAIRS

A.(7) The Board voted to recommend that Council allocate \$6,800 from its 2002 contingency fund to support one meeting of the BEA Task Force on Psychology Major Competencies in 2002

B.(8) The Board voted to allocate \$2,000 from its 2002 contingency fund to support the completion of the work of the Task Force on Distance Education.

C.(9) The Board voted to recommend that Council allocate \$8,500 from its 2002 contingency fund to contribute to APPIC's conference "Competencies 2002: Future Directions in Education and Credentialing in Professional Psychology."

D.(9A) The Board voted to allocate \$2,000 from its 2002 contingency fund to support a Children's Mental Health Reception/Roundtable at the 2002 APA Convention.

E.(9B) The Board voted to approve the following activities for APA to collaborate on with the Department of Education: 1) to draft guidelines for a Request for Application (RFA) for pre- and post-doctoral training grants in educational sciences; 2) to draft the outline of a program and a proposal which would be funded by the U.S. Department of Education and administered by APA, for funding dissertation research, and accompanying meeting of funded students in educational sciences; 3) explore possible ways to help define and raise educational standards at the primary and secondary levels; 4) explore activities to assist as possible the reauthorization of the Office of Educational Research and Improvement by Congress; 5) draft guidelines for a possible Department of Education RFA for doing research on how educational scientific findings can be translated into practice.

The Board requested that the Education Directorate consult with the Science, Practice and Public Interest Directorates as appropriate to accomplish these goals.

X. PROFESSIONAL AFFAIRS

A.(10) The Board voted to recommend that Council allocate \$15,000 from its 2002 contingency fund to conduct a legal analysis on how revision to federal statutes could potentially increase the ability of psychologists to participate as providers and authorizers of treatment under Medicaid.

C.(11) The Board voted to allocate \$6,800 from its 2002 contingency fund for one meeting in 2002 of a working group to design a practitioner education project curriculum. Members of the working group will be appointed by the President.

D.(12) The Board voted to recommend that Council allocate \$9,000 from its 2002 contingency fund for a two-day meeting to revise the Guidelines on Cross Cultural Education and Training, Research, Organizational Change and Practice for Psychologists.

E.(13) The Board voted to allocate \$12,000 from its 2002 contingency fund for four psychologist briefing presenters to participate in three briefing sessions with Congressional and federal agency staff to inform them about research areas, issues and findings relevant to anti-terrorism efforts. The Board requested that it receive copies of the briefing papers.

XI. SCIENTIFIC AFFAIRS

A.(14) The Board voted to recommend that Council allocate \$7,000 from its 2002 contingency fund to cover one, two-day meeting of the Task Force on Psychological Testing on the Internet to be held in 2002.

XII. PUBLIC INTEREST

A.(15) The Board voted to recommend that Council allocate \$15,000 from its 2002 contingency fund to support the formation and two meetings of a Children and Adolescents Task Force of the Ad Hoc Committee on End-of-Life Issues that would be charged with producing a report on practice, research, training, and policy issues for psychologists involved with children and families dealing with the end of life.

B.(16) The Board voted to allocate \$5,000 of its 2002 contingency fund and recommend that Council allocate \$15,000 of its 2002 contingency fund to support publication of a book on Women of Color Leader Psychologists.

XIII. ETHNIC MINORITY AFFAIRS

A.(17) The Board voted to allocate \$20,00 from its 2002 contingency fund to the Office of Ethnic Minority Affairs to support efforts to solicit outside funding for the proposed conference entitled, "Psychology, Public Policy and Communities of Color in the United States and Throughout the World: Critical Issues, Knowledge and Skills."

XIV. INTERNATIONAL AFFAIRS

No items.

XVI. FINANCIAL AFFAIRS

A.(18) The Board voted to recommend that Council approve the following amendments to Association Rule 210-1.1 (bracketed material to be deleted; underlined material to be added):

The Finance Committee shall be composed of seven voting members and up to [three] four non-voting members. Of the voting members, two shall be elected each year for terms of three years; one slate shall be limited to first-year and/or second-year members of Council and the second slate shall be limited to first-year and/or second-year Council members or former or outgoing members of the Finance Committee. No member may serve more than two consecutive terms. The seventh voting member of the Committee is the APA Treasurer, who shall serve as its Chair. The non-voting members shall be representatives from the investment community and are not [necessarily] usually psychologists. The non-voting members will be recommended by the Finance Committee and appointed by the Board of Directors for terms of three years not to exceed three consecutive terms.

B.(19) The Board voted to recommend that Council approve the following amendments to the Association Rules (bracketed material to be deleted; underlined material to be added):

210-2.10 [Contingency] Discretionary funds. The Board of Directors and Council each shall have a [contingency] discretionary fund of up to \$100,000 to be used at their own discretion. After APA Council and Board have adopted a budget, new unbudgeted expenditures to be made from their respective [contingency] discretionary funds shall be approved as follows:

(a) If emerging from Council action, the proposed allocation from the Council [contingency] discretionary fund shall require approval by a simple majority vote of the Council members voting.

(b) If emerging from Board action, the proposed allocation from the Board [contingency] discretionary fund shall require approval by a two-thirds majority of Board members voting.

(c) If either action involves the support of a task force and/or ad hoc committee, the authorization would be for one year only and assigned to the appropriate office/program. If the mission of the task force or committee is to continue beyond one year, it must be reauthorized and funded on a year-to-year basis.

(d) All allocations other than those described in (c) will be sent to Council for review if authorized for an additional period of time.

210-2.11 Special [Contingency] Discretionary Funds. The President and President-Elect shall have a special [contingency] discretionary fund of up to \$35,000 and \$15,000, respectively. Use of these special [contingency] discretionary funds must be approved in advance by the Board of Directors and be limited exclusively to presidential initiatives. Costs related to each initiative must be incurred with the respective President's and President Elect's term (calendar year).

30-1.4 No matter may be properly placed before the Council for its votes that has not been disseminated to the members of Council, in its final form and with a response from the Board of Directors, at least 30 days prior to the meeting at which the matter is to be deliberated.

"Final form" shall mean that all sections of the agenda item are complete. Agenda item sections that must be complete include (1) a description of the issue, (2) a description of the implementation plan, (3) the fiscal implications of passing the main motion or any amended or

substitute motion, (4) the exact wording of the main motion and any amended or substitute motion, and (5) the recommendations of the Board of Directors and any other board or committee that has reviewed the issue. Agenda items that do not meet the definition of "final form" will not be accepted for the Council agenda. The Board of Directors's recommendation is not required in advance of the meeting on any items requesting Council [contingency] discretionary funds at Council's February meeting. The Board of Directors shall make its recommendation regarding such requests at the Council meeting....

50-3.1 The standing boards and committees and continuing committees may, in exceptional circumstances, appoint, for designated time periods, such ad hoc groups (e.g., task forces, work groups, ad hoc committees, subcommittees) as may be necessary.

If funding is already available for an ad hoc group, the Board of Directors shall be informed at its next meeting of the establishment of the group and provided with a description of the following: purpose; progress to date; membership roster (if available); duration of the group's appointment; funding amount and source of funding. If new funding is needed for the ad hoc group, prior approval must be obtained from the Council of Representative or Board of Directors as appropriate. The request for approval shall include a description of the following: purpose; membership roster (if available); duration of the group's appointment; funding amount required and the source from which funding is requested. Requests for Council [contingency] discretionary funds or for funds to be added to the budget require Council approval....

C.(20) The Board voted to accept the updated/revised short and long-term policies as presented. The Board commended the Finance Committee for its outstanding work with investment policies.

XVII. COMMUNICATIONS CONCERNING OUTSIDE ORGANIZATIONS

A.(21) The Board discussed the item "Facilitating APA/ABA Relations."

BOARD OF DIRECTORS

June 10-12, 2005

APPROVED MINUTES

Present: Ronald F. Levant, EdD; Gerald P. Koocher, PhD; Diane F. Halpern, PhD; Ruth Ullmann Paige, PhD; Carol D. Goodheart, EdD; Norman B. Anderson, PhD; Barry S. Anton, PhD; Paul L. Craig, PhD; Jessica Henderson Daniel, PhD, Thomas J. DeMaio, PhD; Michael B. Madson, MSE (APAGS); Ronald H. Rozensky, PhD; and Sandra L. Shullman, PhD.

Absent: None.

I. MINUTES OF MEETING

A.(1) The Board voted to approve the minutes of the February 16 & 17, meeting of the Board of Directors as amended.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(2) The Board voted to recommend that Council approve amending the Association Rules as follows (bracketed material to be deleted; underlined material to be added):

110-5.5 Filling vacancies ([general] Officers). If any candidate for [any APA] the office of President-elect, Recording Secretary or Treasurer withdraws or becomes ineligible before the election results are tabulated or before the start of his or her term of office, the result of the election shall be counted as if his or her name had not been on the ballot. [If an electee withdraws or becomes ineligible before the start of his or her term of office or prior to the first meeting of the board or committee once his or her term has begun, the result of the election shall be counted as if his or her name had not been on the ballot. If any member of a board or committee resigns or becomes ineligible when there is only one meeting of the board or committee left to complete his or her term, the board or committee may make an appointment to fill the vacancy. Otherwise, a substitute shall be elected for the unexpired term by Council with all deliberate speed. A board or committee may make an interim appointment to fill a vacancy until the election is completed.]

110-5.6 Filling vacancies (Board of Directors). Seats vacated by members of the Board of Directors not serving ex officio shall be filled for the unexpired term in accordance with the preferential voting procedure in Association Rule 110-2.2. The winner shall be determined by a new count of the most recent Directors' election that redistributes to the candidates remaining on the ballot the votes of candidates not seated. Thus the determining ballots of any candidate who is seated on the Board of Directors are excluded from the recount. This procedure shall be followed in turn if any winner is ineligible or unwilling to serve.

110-5.7 Filling vacancies (Board and Committee Members Elected by Council). If a candidate for any APA board or committee elected by Council withdraws or becomes ineligible before the election results are tabulated or resigns or cannot serve after election results are certified by the Election Committee or after his or her term has begun, the vote will be recounted as if the resigning member's name had not been on the ballot. Based on the recount, the position shall be offered to the candidates in order of most votes received. If no candidate on the original ballot is eligible or willing to serve, a special election will be held if more than half the term remains, or if less than half the term remains, then the board or committee may appoint a person to fill the vacancy. In the case of appointment or special election, the board or committee shall attempt to choose an appointee or construct a slate of nominees with the same qualifications as originally sought unless the need no longer exists.

110-5.[7] 8 Board and committee chairs. Unless otherwise specified, the chairs of each standing board and committee shall be elected by the group itself. Unless otherwise specified,

chairs of all other boards or committees shall be chosen by the board or committee through which these committees report.

B. In executive session, The Board voted to approve appointing a liaison from the APA Board of Directors to the American Psychological Foundation (APF) Board of Trustees, noting that the liaison shall be a new member of the APA Board who would preferably serve the first two years as liaison and the third year be available to help orient the new liaison begin his or her two-year term. The Board also voted to approve the addition of \$1,000 to the 2005 Final Budget and \$2,000 to the 2006 Preliminary Budget and beyond to cover the cost of the Board liaison's attendance at APF meetings.

Subsequent to the meeting, President Levant appointed Jessica Henderson Daniel, PhD, to serve as the APA Board liaison to APF for a term beginning immediately and ending December 31, 2006.

C. In executive session, the Board approved the following appointments:

1. The Board reappointed Gary W. Smith to serve as a Trustee to APAIT (term January 1, 2006 through December 21, 2008). In accordance with Article IV, Section 1, of the Agreement and Declaration of the Trust, the Board acknowledged that it is important for the business of the Trust that Mr. Smith continue to serve and therefore approved Mr. Smith's appointment for a third consecutive term.
2. The Board appointed Chana Atkins, PhD, and Janice Yoder, PhD, to serve three-year terms (1/1/2006-12/31/2008) on the Committee on Division/APA Relations (CODAPAR). The Board appointed Richard S. Velayo, PhD, to CODAPAR for a term beginning immediately and ending December 31, 2006.

D. In executive session, the Board approved the slates of nominees for APA standing and continuing boards and committees after receiving the report from the Nominations Subcommittee.

III. ETHICS

In executive session, the Board took action on two student affiliate applications.

IV. BOARD OF DIRECTORS

A.(3) The Board voted to recommend approval, in principle, of the following motion:

That Council adopts as APA policy the following revised statement *Health Care for the Whole Person*:

Health Care for the Whole Person Vision and Principles

We, the undersigned health, public health, and health care groups consider the following to be important characteristics of health and health care as it currently exists in the United States:

The conceptual model of health that is dominant in the United States and as a result, the U.S. health care system, artificially separates the mind and the body. This separation has a negative impact on health care access, health care costs, and quality of care with a disproportionate share of the burden falling on women, racial and ethnic minorities, and immigrant populations.

A strong, integrated health care system and approach to public health in both urban and rural areas are the central (and missing) pieces of the health care puzzle.

There is abundant scientific evidence that behavioral, psychological, spiritual, and psychosocial factors are significant determinants of health status, healing, and health care utilization for all ages, including older adults.

Healthy People 2010 selected Leading Health Indicators "on the basis of their ability to motivate action, the availability of data to measure progress, and their importance as public health issues" across the life span. These indicators are:

"Physical Activity

Overweight and Obesity
Tobacco Use
Substance Abuse
Responsible Sexual Behavior
Mental Health
Injury and Violence
Environmental Quality
Immunization
Access to Health Care” (U.S. Department of Health and Human Services, 2000).

The ten most common problems adult patients bring to primary care--chest pain, fatigue, dizziness, headaches, swelling, back pain, shortness of breath, insomnia, abdominal pain, and numbness--together account for 40% of all primary care visits, but only 26% of these have a confirmed biological cause;

Childhood psychosocial dysfunction, viewed twenty-five years ago as a “ new morbidity” is now recognized as the most common, chronic condition of children and adolescents... 50% of these children are identified by their primary care physicians.

Primary health care providers treat 75% of all mental health problems of which depression, anxiety, trauma sequelae, and family stress are the most prevalent;

Seventy percent of patients coming to primary care bring one or more family members, thus presenting an opportunity for family-focused care;

U.S. expenditures on health care are now 14.9% of GDP. Total health care expenditures per capita have almost doubled since 1990 to \$5,440 in 2002; overall health care costs increased at a rate of 7.3 % in 2003; and HMO rate increases were 17% in 2004.

We note that many of the nation’s leading health and health care entities have strongly endorsed new, integrated approaches to health and health care:

Institute of Medicine

“Ensuring cooperation among clinicians is a priority” (Committee on Quality of Health Care in America, 2001)

“A fundamental shift in the national perspective of the value and importance of psychological health...” (p. 117, Goldfrank et al., 2003)

National Institutes of Health

“...behavioral scientists, molecular biologists and mathematicians might combine their research tools, approaches and technologies to more powerfully solve the puzzles of complex health problems such as pain and obesity...with roadblocks to potential collaboration removed, a true meeting of the minds can take place...” (National Institutes of Health, 2004)

President’s New Freedom Commission on Mental Health

“The integration of mental health and physical health is a crucial next step...”

“bridge the differences between the mental and physical health communities...” (Mental Health Commission, 2003)

The Future of Family Medicine

“recognizing fundamental flaws in the fragmented US health care systems and the potential of an integrative, generalist approach...the project identified...a New Model of practice [with the] following characteristics: a patient-centered team approach...patient care in the new Model will be...multidisciplinary team approach...will include behavioral scientists...” (Kahn, 2004)

U.S. Surgeon General

“mental health care should flow in the mainstream of health care ...[to] mend the destructive split between mind and body....” (USDHHS, 1999)

“A balanced community health system balances health promotion, disease prevention, early detection... require(s) a partnership between primary care and mental health.” (USDHHS, 2001)
Therefore, the undersigned health and health care groups endorse the promise of an integrated primary health care system that

Rests on a biopsychosocial model of health and health care;

Meets the definition of quality of care;

Reduces the burden of illness and injury by an evidence-based emphasis on healthy behavior and psychological health in addition to physical health;

Reduces the incidence of untreated mental health problems;

Contributes to more effective use of resources and helps reduce the cost of health care with targeted, focused psychological health services in addition to physical health services;

Improves provider-patient relationships and satisfaction with care; and

Promotes healthy lifestyles and disease prevention.

In addition, integrated health care will help address the adverse health and mental health impact of environmental and psychosocial factors such as prejudice, discrimination, poverty, racism, disability, heterosexism and homophobia, and minority group stress.

We, the undersigned health, public health, and health care groups, believing a healthier population and a more rational health care system will result, affirm our intention to work together toward the development and application of a fully integrated health care system.

Definitions

Integrated care is health care that addresses physical, mental and behavioral health issues at the same time and is optimally provided by a multidisciplinary team of providers.

According to its author, George Engel, MD, the biopsychosocial model adds “the patient, the social context in which he lives, and the complementary system devised by society to deal with the disruptive effects of illness” to traditional medical issues (Engel, 1977; p.135).

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The Board's final recommendation will be provided to Council at the August 2005 Council meeting.

B.(4) The Board voted to recommend that Council approve amending Association Rule 30-6 as follows (underlined material to be added):

30-6. MOTIONS/REPORTS TO COUNCIL

30-6.2 Council may Adopt, Receive, Refer or Reject a report from a board, committee, task force, division or other body of APA. The motion to Adopt a report commits Council to the approval of the opinions and activities described, and thus, constitutes APA policy. However, in order to be implemented, recommendations contained in the report must be further presented to Council as main motions, with the usual accompanying information on fiscal implications and what entity has the responsibility to carry out the actions contemplated. If Council is asked to adopt a report that includes appendices, the motion to Council shall include a recommendation as to whether the appendices shall be received or adopted. The motion to Receive a report or appendix makes it available for reference but commits APA to nothing. A report that has been received by Council, whether posted on the APA web site or distributed in hard copy or other format, shall include a disclaimer on each page of the report stating that the report has been received by Council but has not been adopted as APA policy, and therefore does not commit APA to the opinions or activities described. Recommendations proposed in a report that has been received may be adopted by Council in the manner described above. The motion to Refer a report may send the report back to the originator(s) of the document or to other APA entities to address Council's questions or concerns. Council Rejects a report if it does not Adopt, Receive or Refer the document.

C.(5) The Board voted to approve the following motion regarding the Draft Report of the Task Force on External Funding:

At its December 2004 meeting, the Board received with thanks the Report of the Task Force on External Funding. The Board established the Task Force on External Funding in June 2002 to address the issue of how funds from pharmaceutical companies and other corporate bodies might impact APA and how APA might handle the impact.

Due to the significant information provided in the Task Force Report regarding funding practices of the pharmaceutical industry, the Board requests that the Executive Management Group (EMG) use the Report to advise its decision making in those cases where external funding by a pharmaceutical company or a related entity would exceed \$25,000 in a calendar year. Furthermore, the Board encourages EMG to use the Report to advise its decision making about any pharmaceutical industry funding for the annual APA convention. The Board also requests that such decisions be reported to the Board and to Council on an annual basis.

The Board also recognizes that the Task Force made additional recommendations in other areas (e.g. annual convention, research and journals, continuing education). Therefore, the Board encourages all other APA governance groups to consider the Task Force recommendations when

shaping future policies in relevant areas, and it further requests that the Task Force Report be placed on the members section of the APA website after it has been provided to the Council of Representatives for information. The Report of the Task Force on External Funding will include on each page the standard disclaimer that the report has not been adopted as APA policy by the APA Council and therefore does not commit APA to the activities or opinions described.

D. President Levant updated the Board on his presidential initiatives and other important issues. He also informed the Board about his attendance at recent meetings and events and presidential citations and awards presented in the last few months.

E. APA was presented with the Circle of Humanitarians Award from the American Red Cross in recognition of APA's financial support of the Red Cross Tsunami efforts.

F. Louis Sullivan, MD, Chairman, Morehouse School of Medicine, addressed the Board regarding health disparities, health and behavior and the National Health Museum.

G. The Board discussed the Committee on Early Career Psychologists' (CECP) Response to the Policy and Planning Board's 2005 5-Year Report. The Board noted its appreciation for CECP's thorough and thoughtful response to the P&P report, approved of CECP's interpretation of its charge and encouraged CECP to communicate with boards and committees and explore areas of collaboration.

V. DIVISIONS AND STATE AND PROVINCIAL ASSOCIATIONS

A.(6) The Board voted to accept the 2004 Division annual reports.

B.(7) The Board voted to accept the 5-year reports of Divisions 5, 10, 16, 21, 26, 36, 41, 46 and 51.

VI. ORGANIZATION OF THE APA

C.(8) The Board voted to recommend that Council approve the following motion:

That the following revisions to policies previously adopted by Council and included in the Council Policy Manual be revised (bracketed material to be deleted; underlined material to be added) and that policies adopted by Council be included in the Council Policy Manual (underlined material to be added):

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

1975 (Revise)

[Council approved the following recommendation dealing with the election of members of minority groups to boards and committees:

That the APA Central Office make available to the members of APA a yearly summary of the numbers of men, women, and minority groups (as defined by the U.S. Government and required on EEO-1 reports) who were nominated, and the numbers of men, women, and minority groups who were elected and/or appointed to all APA boards and committees.

In addition,] Council requested that the members of the Council of Editors include routinely in their annual reports a summary of the men, women, and minority groups serving as editors, associate editors, consulting editors, and reviewers. Further, Council requested that the numbers of men, women, and minority groups who leave any of these positions also be made available.

1977 (Update)

(1) The nomination process shall begin in [February] December so that standing boards and committees have access to the recommendations for nominees from the Council of Representatives, divisions, state associations, and the *APA Monitor* solicitation when preparing slates of recommendations for the Board of Directors. All recommendations from all sources would also be included in the summary book of recommendations prepared for the Board Subcommittee on Nominations, as is presently done.

(2) Each standing board and committee shall submit a slate of candidates equal to the number to appear on the ballots, plus an equal number of alternates.

(3) All recommended candidates shall be rank ordered and a rationale provided for each one.

(4) Boards or committees that prepare separate slates for each position shall provide the reasons for doing so.

(5) The phrase "call for nominations" shall be replaced by the phrase "call for recommended candidates for election to boards and committees."

[Additionally, Council concurred with the task force recommendation that the Board Subcommittee on Nominations prepare an annual report to the membership on the nominations procedures and the results in terms of numbers of individuals recommended, the percentage who got on the ballot, and the percentage of those elected from the various sources, this report to be made available to the Council and submitted for publication in the *APA Monitor*. The task force also went on record in support of the Board statement (voted in June 1977) that no candidate should be nominated for a board or committee to run unopposed, except under extraordinary circumstances; when this is done, a full explanation should be presented on the ballot, as was done in the election held in 1977.]

1982 (Revise)

Council adopted the following "General Principles" (developed by the Policy and Planning Board) dealing with the APA election process:

Council rejects any requirement for a hiatus on one year in service on boards and committees. There should be no formal restriction on a person's sequential service on different boards and committees. Preference should be given to "new blood" rather than "old", if other factors as essentially equal, but the primary consideration in all elections or appointments should be, "Who can best serve the needs of APA in this particular assignment or office?"

No member of one standing board or committee or continuing committee shall serve simultaneously on any other continuing or standing board or committee of the Association unless formally authorized by a board or committee, and unless service is on a group that reports to that board or committee. This shall not preclude liaison assignments or consultant relationships, or task forces or commissions, or other ad hoc groupings, and shall not apply to divisions or officers of affiliated organizations.

Individuals serving in the APA Presidency cycle shall not hold offices within the Association other than ex officio positions that accompany the office. Operationally, (a) candidates for the presidency shall be restricted from running for any other elective office, such as division offices, within the Association while they are candidates for the presidency; and (b) a person elected to the APA presidency shall, during the term of president-elect, president, and past president, be restricted from holding any other office in the Association that is not an ex officio extension of the presidential office.

The Council rejects any requirement for providing information on past and current service of candidates for election to boards and committees, endorsing the concept in principle but not adopting it as a hard and fast rule of the Association.

The Council also adopted the following as general principles, but not hard and fast rules: [(5)] (1) person[s] will normally be nominated for election to standing boards or committees only after they have served on an APA continuing committee, task force or commission, or on the Council; and [(6)] (2) continuing committee assignments and those to other appointed groups are considered important avenues for introducing members without prior board or committee experience into APA governance activities, but continuing committees should not be restricted from drawing on experienced members as appropriate to the parent group.

1996 (Insert)

On recommendation of the Board of Directors, Council voted to approve the establishment of a training program for new Council members to take place one day prior to the new members' first Council meeting.

1999 (Insert)

Council voted to approve the following motion regarding reimbursement for presidential candidates to attend the plenary session of Council:

That presidential candidates, who are not members of the current Council of Representatives, no longer be reimbursed for attending the plenary session of Council.

2000 (Update)

Council voted to direct all directorates and governance groups to identify strategies specific to that directorate or governance group and implement appropriate mechanisms that will provide opportunities for newcomers (those who have not previously served on the Council of Representatives or a board or committee, with exception of APAGS) to participate in governance. One of these mechanisms might be to propose a slate comprised solely of members who haven't previously served on the Council of Representatives or board or committee, with the exception of APAGS.

[Council voted to approve the establishment of a task force to be appointed by the President to consider methods of providing that each division and state association have at least one seat on Council. Council requested that the task force come back to Council with a recommendation in February 2001.

Council voted to elect 126 Members to initial Fellow status on the nomination of the indicated divisions and on the recommendation of the Membership Committee and the Board of Directors.

Council voted to approve the inclusion of \$27,000 in the 2001 Preliminary Budget for the establishment of a Task Force on Membership Retention and Recruitment assigned to formulate a systematic plan to foster the retention of members and appropriate outreach to nonmembers. The Task Force, to be composed of up to 15 people to be appointed by the President, will hold conference calls in 2000 and up to 2 meetings in 2001.

Council received an update on the new-business-in-progress item "Creation of a New Membership Category."

Council received an update on the new-business-in-progress item "New Criteria for Dues-Exempt Status."

Council received an update on the new-business-in-progress item "New Member Slates for Committees."]

2004 (Insert)

Council voted to approve the following motion:

Because it believes that racial and ethnic diversity in the membership of Council has not been and is not currently satisfactory, Council finds that a program to provide incentives to Divisions and State, Provincial and Territorial Associations to elect ethnic minorities as Council representatives is in the best interest of APA.

Accordingly APA will reimburse any Division or State/Provincial/Territorial Psychological Association for the expenses incurred by representatives to Council who are ethnic minorities and who are elected during the years 2005-2007, to attend Council meetings. Reimbursement will be provided to Divisions, State, Provincial and Territorial Psychological Associations for transportation, hotel and meal expenses for both the February and August meetings of Council. APA strongly encourages Divisions and State, Provincial and Territorial Associations to submit one or more slates of nominees comprised solely of ethnic minorities.

For purposes of this program, ethnic minority identity is determined by self-identification as a member of one of the following four U.S. ethnic minority groups: African American/Black, American Indian/Alaska Native, Asian American/Pacific Islander, and Hispanic / Latino.

Council requests that the Board conduct a review of the effectiveness of this proposal and provide a recommendation to Council in August 2007 regarding funding its continuance beyond the 2007 election.

III. ETHICS

2002 (Insert)

Council voted to approve Revision Draft 7 of the "Ethical Principles of Psychologists and Code of Conduct" as amended. (Attachment A). Council requested that the APA General Counsel and the Ethics Director ensure that the amendments approved by Council are consistent with the current language of the code throughout with the language of Draft 7.

VI. ORGANIZATION OF THE APA

1990 (Update)

Council voted to instruct the Committee on Structure and Function of Council to schedule a debriefing meeting of all Council members whose terms are expiring and to hold such a session at each [February] August meeting.

VII. PUBLICATIONS AND COMMUNICATIONS

1949 (Revise)

Council approved the following statement of general policy governing the management of the Association's journals:

(a) The Association should consider itself obligated to ensure the opportunity for publication in every major area of the field of psychology.

(b) It is unnecessary and undesirable, however, that all publication outlets be controlled by the Association.

(c) As long as any subdivision of the general field is adequately represented by an independent journal, the Association should not attempt to take over or duplicate the functions of this vehicle.

(d) While all major areas of psychology should be represented within the Association's program or outside of it, the Association is not obligated to provide means for publishing the total output of the membership.

[(e) It is considered right and proper that any profits which may accrue from the sale of heavily subscribed journals be applied to the cost of publishing others which are not completely self-supporting. This rule is subject to exceptions required by legal obligations.]

1971 (Edit)

The following policy concerning advertising in APA journals was adopted:

The publications of APA are published for, and on behalf of, the membership to advance psychology as a science, as a profession, and as a means of promoting human welfare. The Association, therefore, reserves the right to, unilaterally, reject, omit, or cancel advertising which it deems to be not in the best interest of these objectives, or which by its tone, content, or appearance is not in keeping with the essentially scientific or scholarly nature of its publications. Conditions, printed or otherwise, which conflict with this policy will not be binding on the publisher.

1984 (Update)

On the recommendation of the Board of Directors, Council approved the following policy statement:

"Advertising of doctoral programs in APA publications will be restricted to those schools or other institutions fully accredited by regional or other institutional accrediting associations recognized by the [Council on Postsecondary Accreditation (COPA).] US Department of Education."

VIII. CONVENTION AFFAIRS

August 1992 (Update)

Council approved having the dates for the annual convention remain as presently defined by the Board of Convention Affairs from the second [Friday] Thursday in August to the following [Tuesday] Sunday.

X. PROFESSIONAL AFFAIRS

1996 (Revise)

Council voted to approve the following motion regarding Managed Care Accessibility and Reimbursement Criteria:

APA commends those managed care organizations (MCOs) which publish the criteria they use to determine accessibility to, and reimbursement of psychological and neuropsychological services. APA recognizes these MCOs for their responsibility and commitment to publicize their critical decision-making rules.

Correspondingly, APA strongly objects to the practice of any organization that makes healthcare accessibility or reimbursement decisions without publishing the criteria upon which these decisions are based. It is the position of APA that such decision-making criteria should be made accessible so that these critical variables may be subjected to scientific, professional and public review and scrutiny.

Furthermore, it is the position of APA that all MCOs should publish not only their decision-making criteria, but also the process by which these criteria have been developed and applied. To implement the above policy Council requests that the Practice Directorate, on behalf of APA, solicit the MCOs for the release of their criteria and decision-making process. [A progress report on these efforts to elicit criteria from the MCOs will be presented to Council at its February 1997 meeting.]

1986 (Revise)

Be it resolved that the American Psychological Association, in the interest of the public, opposes applications of hypnosis by persons who are not fully trained members or advanced students of health delivery professions and who lack specific, in-depth training in hypnosis. Therefore, be it also resolved that APA opposes the teaching of hypnotic induction techniques or applications of hypnosis that involve treatment or assessment with patients or clients to persons who are not fully trained members or advanced students of a health delivery profession. [Be it resolved further that upon passage of this resolution, its text shall be conveyed to the APA Ethics Committee to consider its incorporation in the APA Code of Ethics. We note that the resolution is consistent with the preamble of Principle 1 of the code as well as the Standards of Providers of Psychological Services (Principles and Implications of Standard, 3).]

1989 (Update)

For almost half a century, psychology has been guided by its own self-developed principles of ethical behavior which are intended to protect uses of psychological knowledge and services. Impairments in the performance of psychologists, induced by mental health problems, substance addiction, and other disturbances, lead to violations of APA's purposes and ethical principles. Prevention programs and early interventions may reduce the incidence and the intensity of impairment. Such actions may best be introduced on the state level. Based on these premises, APA resolves:

to provide information and assistance regarding problems of impaired psychologists to State and Provincial Boards of Examiners, the American Association of State Psychology Boards, and State Psychological Associations;

to provide informational liaison services to the states through its [Office] Board of Professional Affairs;

to encourage the APA and Division program committees to give due consideration to impairment in choosing topics;

to advise the editors of the APA Monitor and state and division newsletters of the importance of the educational role in countering impairment;

to facilitate public information programs through the APA Public Information Office. This will include, but not be limited to, developing a directory of impaired psychologists programs; and

to review periodically, psychology's progress in confronting impairment.

1965 (Revise)

Council reaffirmed the concept that psychology is an independent science and profession and that in his/her work the psychologist and his/her client independently determine the proper application of his/her work in whatever context he/she may be functioning.

XVI. FINANCIAL AFFAIRS

2000 (Update)

Council voted to approve [1] instituting the practice of increasing the APA dues annually by an amount linked to the consumer price index for all urban consumers (CPI-U); and 2) \$4 dues increase from \$215 to \$219 for the 2001 dues year.]

1978 (Revise)

The American Psychological Association affirms its responsibilities in its role as an investor in [the American] corporations to act in a manner consistent with its goals of promoting human welfare. Recognizing that [e] APA investment policies should be aimed at maximizing financial benefits to the Association, the APA Council of Representatives considers it a responsibility of the Association to see that such policies are consistent with the social and moral concerns of the individual psychologists it represents. Therefore, be it resolved that the American Psychological Association, as part owner of [the American] corporations in this country and abroad, will encourage these corporations to act humanely and in a manner which is beneficial to society.

[To accomplish these aims, APA should analyze corporate resolutions in order to vote proxies in a manner that will ameliorate social conditions or reduce past social harms caused by corporate actions. In extreme cases, APA may elect to divest itself of holdings in a corporation when it appears that the corporation is not amenable to influence by its stockholders.]

Note: Due to the extensive time commitment this policy required of staff and in the spirit of the Councils directive (above), the Finance Committee (Nov-Dec 2001) recommended that "APA delegates the voting proxies to their investment managers with the following exceptions:

1. Companies which derive a significant portion of their revenue from the manufacture and sale of tobacco products for human consumption;
2. Companies which derive a significant portion of their revenue from the manufacture, sale, or distribution of alcoholic beverages;
3. Companies which derive a significant portion of their revenue from the manufacture and sale of firearms.

These proxies will be voted by a representative of APA's Public Interest Directorate."

1994 (Update)

Council voted to implement the recommendations contained in the Finance Committee Report to Council on "Responsible Spending" dated June 1994. [The recommendations will be implemented on a phased schedule as appropriate. **[Appendix R - V.1]** (See Appendix R-V.1

current responsible spending policy dated February 2001.) (This policy is reviewed periodically and modified as needed.

B.(9) The Board voted to recommend that Council approve the following motion:

That Council approves the following procedure: When a document is ready for placement on the Council of Representatives agenda, the staff liaison associated with the item will check the references for currency and, working with the document developer, make any changes necessary to the citations and references.

VII. PUBLICATIONS AND COMMUNICATIONS

No items.

VIII. CONVENTION AFFAIRS

No items.

IX. EDUCATIONAL AFFAIRS

A.(10) The Board voted to recommend that Council approve the *National Standards for High School Psychology Curricula* as revised (April 2005).

B.(11) The Board voted to approve the following motion:

The APA Board of Directors appreciates and commends the Board of Educational Affairs (BEA) for carrying out its mandated responsibility to review the APA accreditation process and commends the Advisory Council for its due diligence in making recommendations to the BEA. The Board of Directors looks forward to learning about the work of the upcoming summit meeting on accreditation in the hope that those discussions will help to advance the important work of accreditation of programs in psychology. Operating a high quality federally approved professional accreditation program requires significant economic, technological, and human resources; as well as the ability to successfully negotiate significant legal, regulatory, administrative, and liability complications. APA looks forward to its continuing role in assuring the highest quality education and training of psychologists and its continuing role in facilitating and managing the accreditation process.

C.(11A) The Board voted to recommend that Council renew the recognition of Biofeedback: Applied Psychophysiology as a proficiency in professional psychology until August 2012, as outlined in the *Procedures for Recognition of Specialties and Proficiencies in Professional Psychology*.

D.(11B) The Board voted to recommend that Council renew the recognition of Clinical Child Psychology as a specialty in professional psychology until August 2012, as outlined in the *Procedures for Recognition of Specialties and Proficiencies in Professional Psychology*.

E.(11C) The Board voted to recommend that Council renew the recognition of Counseling Psychology as a specialty in professional psychology until August 2012, as outlined in the *Procedures for Recognition of Specialties and Proficiencies in Professional Psychology*.

F.(11D) The Board voted to recommend that Council approve the recognition of Clinical Psychology as a specialty in professional psychology until August 2012, as outlined in the *Procedures for Recognition of Specialties and Proficiencies in Professional Psychology*.

G.(11E) The Board voted to recommend that Council renew the recognition of Psychoanalysis in Psychology as a specialty in professional psychology for a probationary period of one year, until August 2006, as outlined in the *Procedures for Recognition of Specialties and Proficiencies in Professional Psychology (Section B, Para. 10)*.

H.(11F) The Board voted recommend that Council renew the recognition of School Psychology as a specialty in professional psychology until August 2012, as outlined in the *Procedures for Recognition of Specialities and Proficiencies in Professional Psychology*.

I.(26) The Board received information on APA activities in support of the seven regional psychological associations.

J. The Board voted to establish an APA Board of Directors' Continuing Education Task Force comprised of the chairs of the Board of Educational Affairs, the Committee for the Advancement of Professional Practice and the Continuing Education Committee, a representative of the Council of Executives for State and Provincial Psychological Association and Dr. Paige as the Board of Directors representative. The Board requested that Dr. Paige, with consultation from relevant parties, develop the charge for the task force that is requested to meet by conference call prior to the fall Consolidated Meetings.

X. PROFESSIONAL AFFAIRS

A.(12) The Board voted to approve, in principle, the following motion:

That the Council of Representatives adopts the proposed APA Policy Statement on Evidence-Based Practice in Psychology and receives the Position Paper of the 2005 Presidential Task Force on Evidence-Based Practice.

The Board will provide its final recommendation to Council at the August 2005 Council meeting.

B.(12A) The Board postponed the item "An Amendment to the Model License Law (NBI #37B)" to its August 2005 meeting pending the outcome of the work of the Work Group Following-Up on the Recommendation of the APA Commission on Education and Training Leading to Licensure in Psychology. The Board requested that President Levant send a letter to Stanley R. Graham, PhD, mover of the new business item, informing him of the rationale for the Board's action.

XI. SCIENTIFIC AFFAIRS

No items.

XII. PUBLIC INTEREST

A.(13) The Board voted to recommend that Council adopt the following as APA policy:

Resolution on the 2005 White House Conference on Aging

WHEREAS the decennial White House Conferences on Aging (WHCoA) has been an important forum for aging policy recommendations to the President and Congress and for assisting the public and private sector in the promotion of dignity, health, independence and economic security of the current and future generations of older persons (White House Conference on Aging, 2004); and,

WHEREAS the first group of the 78 million persons which constitutes the demographic phenomenon called the "baby boomers" will turn 65 years of age in 2011 and that 20% of the population will be 65 years or older by the year 2030 (Federal Interagency Forum on Aging-Related Statistics, 2000); and,

WHEREAS it is well-established that mental health and well-being are critical to optimal functioning, physical health, and satisfying social relationships among older adults (Rowe & Kahn, 1998); and,

WHEREAS the report of the President's New Freedom Commission on Mental Health included clear concerns about mental health services for older adults and various recommendations for

improving the current delivery of care, including greater attention to mental health concerns in the primary care setting (President's New Freedom Commission on Mental Health, 2003); and,

WHEREAS the 1999 Surgeon General's Report on Mental Health found that disability due to mental disorders, substance use or cognitive impairments in individuals aged 65 years and older will become a major public health problem in the near future due to aging of the population (Department of Health and Human Services, 1999); and,

WHEREAS 20-25% of older adults may meet criteria for some form of psychological disorder despite the widely recognized adaptive resilience of the aged (Administration on Aging, 2001; Baltes & Baltes, 1990); and,

WHEREAS assessment and interventions for mental and behavioral health in older adults ameliorate these problems, improve quality of life, enhance physical health, improve the quality of relationships of family and friends, and reduce burden on family caregivers of older adults (Gatz, et al., 1998; Scogin & McElreath, 1994; Whitbourne, 2000); and,

WHEREAS the following sites may be appropriate for assessment and treatment of older adult mental health and behavioral health problems: home and community; healthcare settings, particularly primary care; mental health clinics; and assisted living and nursing homes (Administration on Aging, 2001); and,

WHEREAS psychological research provides a solid empirical foundation for understanding and ameliorating late life mental and behavioral health problems, expands knowledge of the normal aging process, tests the efficacy of psychological interventions, and provides clues to the risks and protective factors for mental disorders across the life span (APA, 2004b; Duffy, 1999; National Institute of Mental Health, 2004; Qualls & Abeles, 2000); and,

WHEREAS significant progress has been made in identifying individual and family adaptive mechanisms that promote resilience (Administration on Aging, 2001; Baltes & Baltes, 1990; Pearlin & Skaff, 1995); and,

WHEREAS research on the aging family has shown that it is often the family of the aging person that is essential to the aging individual's mental and physical health (Bengtson & Lowenstein, 2003; Bengtson, et al., 1996; Stephens, et al., 1990); and,

WHEREAS families provide nearly two-thirds of all home and community based-care in the United States (Liu, Manton & Aragon, 2000) and three-quarters of informal caregivers are women (Administration on Aging, 2000); and,

WHEREAS many older adults - particularly those who are ethnic minority, sexual minority, rural-residing, disabled, and economically disadvantaged -- have problems accessing mental health care because of lack of parity between reimbursement for mental and physical health problems, poorly integrated systems of mental and physical health care, and a limited number of culturally competent mental health professionals with training in aging (APA, 2004b; President's New Freedom Commission on Mental Health, 2003; Walkup, 2000); and,

WHEREAS women's longevity is greater than that of men, among Americans age 65 years of age and older, three out of five are women, and after age 80, women outnumber men by almost 3 to 1, and that older women often face different late life issues than older men (Administration on Aging, 2000; APA Working Group on the Older Adult Brochure, 1998); and,

WHEREAS one out of six of older women is a member of a minority group, older women spend more years and a greater proportion of their lives with disabilities, older women are nearly twice as likely as men to live in poverty, and issues faced by older lesbians differ from those of older gay men (Administration on Aging, Department of Health and Human Services, 2000; APA, 2004a; Grossman et al., 2000; Kimmel et al., in press).

THEREFORE BE IT RESOLVED that the American Psychological Association:

Affirms the importance of the White House Conference on Aging as a vital forum for the discussion of issues of aging particularly as American society anticipates an unprecedented number and percentage of citizens who will be 65 years of age and older; and,

Encourages the 2005 White House Conference on Aging to review the current status of mental and behavioral health research and practice and to offer recommendations to the public and private sectors that will promote access to quality mental and behavioral health services for all older Americans, including special attention to the needs of women and subgroups of older Americans such as ethnic minorities, low-income individuals, individuals with disabilities, and lesbians, gay men, and bisexual individuals; and,

Submits nominations of geropsychologists as delegates to the White House Conference on Aging, including a geropsychologist with knowledge and expertise on issues unique to older ethnic minority persons; and,

Recommends that the 2005 White House Conference on Aging support policies that: assure access to an affordable and comprehensive range of quality mental health and substance abuse services to older Americans, including outreach, home and community based care, prevention, intervention, acute care, and long-term care; and, assure that these services are age appropriate and culturally competent; and,

Advocates for endorsement of full parity in mental health coverage equal to that provided for medical and surgical care in both Medicare and private insurance plans.

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B.(14) The Board voted to recommend that Council adopt the following as APA policy:

Resolution on Violence in Video Games and Interactive Media
April 2005

WHEREAS decades of social science research reveals the strong influence of televised violence on the aggressive behavior of children and youth (APA Task Force On Television and Society; 1992 Surgeon General's Scientific Advisory Committee on Television and Social Behavior, 1972); and

WHEREAS psychological research reveals that the electronic media play an important role in the development of attitude, emotion, social behavior and intellectual functioning of children and youth (APA Task Force On Television and Society, 1992; Funk, J. B., et al. 2002; Singer, D. G. & Singer, J. L. 2005; Singer, D. G. & Singer, J. L. 2001); and

WHEREAS there appears to be evidence that exposure to violent media increases feelings of hostility, thoughts about aggression, suspicions about the motives of others, and demonstrates violence as a method to deal with potential conflict situations (Anderson, C.A., 2000; Anderson, C.A., Carnagey, N. L., Flanagan, M., Benjamin, A. J., Eubanks, J., Valentine, J. C., 2004; Gentile, D. A., Lynch, P. J., Linder, J. R., & Walsh, D. A., 2004; Huesmann, L. R., Moise, J., Podolski, C. P., & Eron, L. D., 2003; Singer, D. & Singer, J., 2001); and

WHEREAS perpetrators go unpunished in 73% of all violent scenes, and therefore teach that violence is an effective means of resolving conflict. Only 16 % of all programs portrayed negative psychological or financial effects, yet such visual depictions of pain and suffering can actually inhibit aggressive behavior in viewers (National Television Violence Study, 1996); and

WHEREAS comprehensive analysis of violent interactive video game research suggests such exposure a.) increases aggressive behavior, b.) increases aggressive thoughts, c.) increases angry feelings, d.) decreases helpful behavior, and, e.) increases physiological arousal (Anderson, C.A., 2002b; Anderson, C.A., Carnagey, N. L., Flanagan, M., Benjamin, A. J., Eubanks, J., Valentine, J. C., 2004; Anderson, C.A., & Dill, K. E., 2000; Bushman, B.J., & Anderson, C.A., 2002; Gentile, D. A., Lynch, P. J., Linder, J. R., & Walsh, D. A., 2004); and

WHEREAS studies further suggest that sexualized violence in the media has been linked to increases in violence towards women, rape myth acceptance and anti-women attitudes. Research on interactive video games suggests that the most popular video games contain aggressive and violent content; depict women and girls, men and boys, and minorities in exaggerated stereotypical ways; and reward, glamorize and depict as humorous sexualized aggression against women, including assault, rape and murder (Dietz, T. L., 1998; Dill, K. E., & Dill, J. C., 2004; Dill, K. E., Gentile, D. A., Richter, W. A., & Dill, J.C., in press; Mulac, A., Jansma, L. L., & Linz, D. G., 2002; Walsh, D., Gentile, D. A., VanOverbeke, M., & Chasco, E., 2002); and

WHEREAS the characteristics of violence in interactive video games appear to have similar detrimental effects as viewing television violence; however based upon learning theory (Bandura, 1977; Berkowitz, 1993), the practice, repetition, and rewards for acts of violence may be more conducive to increasing aggressive behavior among children and youth than passively watching violence on TV and in films (Carll, E. K., 1999a). With the development of more sophisticated interactive media, such as virtual reality, the implications for violent content are of further concern, due to the intensification of more realistic experiences, and may also be more conducive to increasing aggressive behavior than passively watching violence on TV and in films (Calvert, S. L., Jordan, A. B., Cocking, R. R. (Ed.) 2002; Carll, E. K., 2003; Turkle, S., 2002); and

WHEREAS studies further suggest that videogames influence the learning processes in many ways more than in passively observing TV: a.) requiring identification of the participant with a violent character while playing video games, b.) actively participating increases learning, c.) rehearsing entire behavioral sequences rather than only a part of the sequence, facilitates learning, and d.) repetition increases learning (Anderson, C.A., 2002b; Anderson, C.A., Carnagey, N. L., Flanagan, M., Benjamin, A. J., Eubanks, J., Valentine, J. C., 2004; Anderson, C.A. & Dill, K. E., 2000); and

WHEREAS the data dealing with media literacy curricula demonstrate that when children are taught how to view television critically, there is a reduction of TV viewing in general, and a clearer understanding of the messages conveyed by the medium. Studies on media literacy demonstrate when children are taught how to view television critically, children can feel less frightened and sad after discussions about the medium, can learn to differentiate between fantasy and reality, and can identify less with aggressive characters on TV, and better understand commercial messages (Brown, 2001; Hobbs, R. & Frost, R., 2003; Hortin, J.A., 1982; Komaya, M., 2003; Rosenkoetter, L.J., Rosenkoetter, S.E., Ozretich, R.A., & Acock, A.C., 2004; Singer & Singer, 1998; Singer & Singer, 1994)

THEREFORE BE IT RESOLVED that APA advocate for the reduction of all violence in videogames and interactive media marketed to children and youth.

BE IT FURTHER RESOLVED that APA publicize information about research relating to violence in video games and interactive media on children and youth in the Association's publications and communications to the public.

BE IT FURTHER RESOLVED that APA encourage academic, developmental, family, and media psychologists to teach media literacy that meets high standards of effectiveness to children, teachers, parents and caregivers to promote ability to critically evaluate interactive media and make more informed choices.

BE IT FURTHER RESOLVED that APA advocate for funding to support basic and applied research, including special attention to the role of social learning, sexism, negative depiction of minorities, and gender on the effects of violence in video games and interactive media on children, adolescents, and young adults.

BE IT FURTHER RESOLVED that APA engage those responsible for developing violent video games and interactive media in addressing the issue that playing violent video games may increase aggressive thoughts and aggressive behaviors in children, youth, and young adults and that these effects may be greater than the well documented effects of exposure to violent television and movies.

BE IT FURTHER RESOLVED that APA recommend to the entertainment industry that the depiction of the consequences of violent behavior be associated with negative social consequences.

BE IT FURTHER RESOLVED that APA (a) advocate for the development and dissemination of a content based rating system that accurately reflects the content of video games and interactive media, and (b) encourage the distribution and use of the rating system by the industry, the public, parents, caregivers and educational organizations.

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B.(15) The Board voted to recommend that Council approve the following motion:

That the Council of Representatives thanks the Task Force on the Psychological Effects of Efforts to Prevent Terrorism for its deliberations, rejects the final report of the Task Force, and refers the report to the Board of Scientific Affairs to provide additional perspective and encourage further development of these topics.

The Board provided the following rationale for recommending rejection of the Report of the Task Force on the Psychological Effects of Efforts to Prevent Terrorism:

1. *Lack of citations*

Throughout the report, a number of statements are made regarding the psychological effects of efforts to prevent terrorism. In many instances, the authors fail to cite relevant literature that would provide scientific evidence for these statements.

In addition, the authors cite the individual manuscripts written by Task Force members specifically for the report. These manuscripts, however, have not been peer-reviewed.

2. *Failure to address the specific comments provided by APA boards and committees*

Following review by Boards and Committees, the Task Force revised its final report. Comments by boards and committees were addressed only in a general fashion. No response was made to the specific comments of each group, as is typical of APA governance documents.

C.(16) The Board voted to recommend that Council receive the Report of the Children and Adolescents Task Force of the Ad Hoc Committee on End-of-Life Issues.

D.(17) The Board voted to recommend that Council approve the following motion:

Pursuant to the original receipt in principle by Council in February, the Council of Representatives receives the annotated version of the UN World Conference Against Racism, Racial Discrimination, Xenophobia and Related Intolerance Declaration and Programme of Action (UN Declaration) and accepts its use as an appendix to the APA Delegation Report. The Introductory Statement is considered a part of the UN Declaration for APA purposes. In completing the work of the Task Force on the World Conference Against Racism Report, Council further calls on the Committee on International Relations in Psychology and the Committee on Ethnic Minority Affairs to take the lead in developing appropriate follow-up processes to the recommendations adopted by Council in February 2005, including follow-up to the APA Delegation Report.

The Board requested that a letter be sent from President Levant to the Chair of the Committee on International Relations in Psychology (CIRP) in response to the request for clarification from CIRP regarding one of the recommendations of the Task Force on the World Conference Against Racism Report.

E.(18) The Board voted to recommend that Council adopt as APA policy the following Resolution on Anti-Semitic and Anti-Jewish Prejudice:

Resolution on Anti-Semitic and Anti-Jewish Prejudice

Introduction

Anti-Semitism is not new. This anti-Jewish hostility has taken various forms over the centuries and has been perpetrated by various groups throughout history. Forced conversions, confiscation of lands and other property, kidnapping of children, false accusations (e.g., that Jews kill Christian children and use their blood for rituals), forced residential confinement (ghettoization), and prohibitions against the observance of Jewish customs and religious laws are among the monstrous offenses committed against Jews over the years.

Existing as it has down through the ages, anti-Semitism has often led to slaughter of Jews, often in more or less officially sanctioned actions. Slaughter occurred during the 12th century Crusades, during the 15th century Inquisition and during the 18th, 19th and 20th centuries' innumerable pogroms in Eastern Europe.

In the twentieth century, the Nazis murdered 6 million Jews, including one and a half million children, out of intense hatred. This event, which has become known as The Holocaust, proceeded without much objection from, and, indeed, with the explicit complicity of much of the rest of the so-called civilized world (Allswang, 1985).

Towards the end of the twentieth and the beginning of the twenty-first centuries, there has been a resurgence of anti-Jewish, anti-Semitic attitudes and anti Jewish or anti-Semitic acts in the U. S., (Anti Defamation League, 2005), Canada (B'nai Brith Canada, 2005) and Europe (U.S. Department of State, 2005). It includes the widespread suppression of memories or outright denial of the history of atrocities against Jews. Recent polls in England, Holland and Sweden, to cite a few (Europe's Resurgent Anti-Semitism, 2005), demonstrate that most young people do not know about the horrors of the Holocaust, especially, but not exclusively, the concentration camps of World War II, where five million people-- including gypsies, homosexuals and the mentally ill and mentally retarded—were exterminated alongside the six million Jews.

Concurrent with the lack of knowledge of the crimes perpetrated against Jews, there is a resurgence of Nazi imagery about Jews and against Jews. The flagrant forgery known as *The Protocols of the Elders of Zion*, a description of a worldwide conspiracy by a group of Jews to “enslave Christian civilization” (Bronner, 2000) was utilized by Hitler in his murderous campaign to mischaracterize and dehumanize Jews. This calumny has resurfaced. It can now be found, in many places on the Internet, including the Palestinian Authority website (Reuters, 2005, May 18), and has been used as a model for a TV program in Egypt (Anti Defamation League, 2005).

The recent increase in anti-Semitism has led to various studies and conferences, by the US (Helsinki commission, 2005) the EU (European Union, 2004) and the UN (United Nations, 2004). In the latter, U.N. Secretary-General Kofi Anan acknowledged that, with regard to anti-Semitism, the “UN's own record on has at times fallen short of the Organization's ideals.” (United Nations, 2004)

The code of ethics of the American Psychological Association (APA) calls for respect for the dignity and worth of all people, the importance of civil and human rights, and freedom of inquiry and expression in research. Psychologists are ethically bound to respect and protect civil and human rights, as well as protect the freedom of inquiry and expression in research (American Psychological Association, 2002). Those principles are called upon in the face of such movements as a campaign based ostensibly on opposition to Israeli politics that has led to the forced resignations of Israeli scholars from the editorial boards of British scholarly publications. Very recently APA took a stand against a more formal version of this deliberate exclusion of Jewish scholars and academics through the boycott proposed by the British Association of University Teachers (AUT) against two universities in Israel. APA agreed with the stance of the American Association of University Professors (AAUP) citing the principle of freedom of conduct of science, promoting equal access to scientific data. This proposed boycott, later rescinded under international pressure, was seen by many as an example of today's “new anti-Semitism”, which pours the old wine of hostility towards Jews into bottles labeled as anti-Israeli politics.

Because anti-Semitism has had a long life and because it operates insidiously, when it is not flagrantly violating human decency, the time has come for APA to call attention to its sometimes shadowy, sometimes blatant existence and to affirm our organizational, professional and personal commitments to its eradication.

WHEREAS prejudice and discrimination based on religion have caused untold human suffering throughout recorded history; and

WHEREAS anti-Jewish hostility, usually called anti-Semitism, has taken various forms over the centuries and has been perpetrated by many groups throughout history (Allswang, 2000); and

WHEREAS the intense prejudice, discrimination and hatred that grew out of long-standing anti-Semitism led to the Holocaust, perpetrated in Europe by the Nazis in the 1940s, which eventuated in the brutal annihilation of six million Jews (Charney, 2000); and

WHEREAS anti-Semitic acts of violence in the United States are increasing alarmingly, with 1,821 reported in 2004, the highest level in nine years and an increase of 17% over the number reported in 2003 (Anti-Defamation League, 2005); and

WHEREAS "The increasing frequency and severity of anti-Semitic incidents since the start of the 21st century, particularly in Europe, has compelled the international community to focus on anti-Semitism with renewed vigor" (U.S. Department of State, 2004); and

WHEREAS the United States Congress has approved the Global Anti-Semitism Awareness/Review Act, which acknowledges a disturbing increase in anti-Semitism and establishes an office in the State Department to monitor and combat anti-Semitism worldwide (U.S. Department of State, 2004); and

WHEREAS the 2005 Survey of American Attitudes Towards Jews in America by the Anti-Defamation League found that 14% of Americans or nearly 35 million adults, hold views about Jews that are "unquestionably anti-Semitic" (Anti-Defamation League, 2005); and

WHEREAS much anti-Semitism today takes the form of "modern" or "new" anti-Semitism, in which actual bias against Jews is denied while prejudiced attitudes exist and prejudiced statements or acts are engaged in (Anti-Semitism worldwide, 2004); and

WHEREAS this form of anti-Semitism is thus more difficult for its perpetrators to identify and challenge, as their beliefs about themselves are that they are not biased against Jews (Gaertner & Dovidio, 1986); and

WHEREAS this form of anti-Semitism is frequently asserted in the context of discourse regarding the actions of the State of Israel, thus further disguising the anti-Semitic nature of the discourse; and

WHEREAS the link between extreme anti-Israel rhetoric and deeds directed against Jewish individuals and communities has become an observable global trend and has at times unleashed demonization and dehumanization of Jews; (Anti-Semitism world-wide, 2004); and

WHEREAS every anti-Semitic act creates a climate of fear, anxiety and insecurity, both for the individual and the community; as such therefore, Jews are exposed to suffering the feelings of vulnerability, anger, depression and other sequelae of victimization (Crandall&Eshleman, 2003; Valent, 2002); and

WHEREAS anti-Semitic acts also harm the perpetrators by desensitizing them to violence, and raises concerns about their generalizing such acts to other groups (Crandall & Eshleman, 2003, Ezequiel, 1995, 2002; Staub, 1990, 2005); and

WHEREAS the American Psychological Association has recognized the profound psychological consequences of hate crimes motivated by prejudice (APA Council of Representatives, 2005); and

WHEREAS the American Psychological Association opposes prejudice and discrimination based upon race, ethnicity, religion, sexual orientation, gender, gender identity or physical condition (American Psychological Association, 2002); and

WHEREAS as psychologists we respect the dignity and worth of all people and are committed to improving the condition of individuals, organizations, and society, we are aware of and respect cultural, individual, and role differences among individuals, including (but not limited to) those based on ethnicity, national origin, and religion (American Psychological Association, 2002); and

WHEREAS psychologists recognize and protect civil and human rights and strive to help the public develop informed judgments and choices concerning human behavior:

THEREFORE BE IT RESOLVED, that the American Psychological Association condemns all anti-Semitic attitudes and actions, both overt and covert, and will use its influence to promote fairness, respect, and dignity for all people, regardless of religion or ethnicity, in all arenas in which psychologists work and practice, and in society at large.

THEREFORE BE IT FURTHER RESOLVED, that the American Psychological Association take a leadership role in opposing anti-Semitism.

THEREFORE BE IT FURTHER RESOLVED, that the American Psychological Association encourages all psychologists to act to eliminate all discrimination of an anti-Semitic nature.

THEREFORE BE IT FURTHER RESOLVED, that the American Psychological Association will include appropriate information on anti-Semitism in its multicultural and diversity training material and activities, and that diversity and multicultural efforts will take cognizance of anti-Semitism, whether subtle or not, and will attempt to overcome it.

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The Board voted to recommend that Council adopt as APA policy the following Resolution on Religious, Religion-Related and/or Religion-Derived Prejudice, pending the addition of an example of Muslim discrimination to the “recent examples of overt discrimination” in the introduction:

Resolution on Religious, Religion-Based and/or Religion-Derived Prejudice

Introduction

Anti-religious prejudice has been, and continues to be, a cause of significant suffering in the human condition. Prejudice directed against individuals and groups based on their religious beliefs, practice, adherence, identification or affiliation has resulted in a wide range of discriminatory practices. Such discrimination has been carried out by individuals, groups and by governments. Examples of non-governmental discrimination based on religion include social ostracism against individuals based on their religion, desecration of religious buildings or sites, and violence or other hate crimes targeted towards adherents of particular faith traditions (U.S. Department of State, 2004). Governmental discrimination based on religion has taken both covert and overt forms. Current examples of covert religious discrimination include government surveillance of religious speech, pejorative labeling by governmental bodies of certain religious groups as ‘cults’ with a resulting loss of religious freedoms, and a lack of legal protection for citizens that are from non-majority faiths who are victims of religious hate crimes (Center for Religious Freedom, 2001, 2003; U.S. Department of State, 2004). Recent examples of overt discrimination include laws prohibiting voluntary conversion to non-majority faiths, Soviet era repression of religious freedoms such as the denial of freedom of assembly, censorship of religious speech. More egregious examples include the murder of over 200,000 clergy and genocides such as the Nazi government’s murder of 6 million Jews in the holocaust or the Turkish government’s murder of over a million Armenian Christians (Armenian Assembly of America, 1988; Balakian, 2004; Marshall, 2000; Yakovlev, 2004). Evidence that such genocidal patterns continue to afflict humanity can be found in the growing effort to purge African Christians and indigenous African faiths from the Sudan (U.S. Committee for Refugees, 2004).

WHEREAS religion is an important influence in the lives of the vast majority of people, is ubiquitous in human cultures, and is becoming increasingly diverse throughout the world (Brown, 2005; Eck, 2001; Hoge, 1996; Genia, 2000; Richards & Bergin, 2000; Shafraanske, 1996); and

WHEREAS the American Psychological Association opposes prejudice and discrimination based upon race, ethnicity, religion, sexual orientation, gender, gender identity or physical condition (American Psychological Association, 2002); and

WHEREAS psychologists respect the dignity and worth of all people and are committed to improving the condition of individuals, organizations, and society; and psychologists are aware of and respect cultural, individual, and role differences among individuals, including (but not limited to) those based on ethnicity, national origin, and religion (American Psychological Association, 2002); and

WHEREAS the American Psychological Association has recognized the profound negative psychological consequences of hate crimes motivated by prejudice (APA Council, 2005), and

WHEREAS prejudice against individuals and groups based on their religion continues to result in various forms of harmful discrimination perpetuated by private individuals, social groups, and governments in both covert and overt forms (Balakian, 2004; Center for Religious Freedom, 2001, 2003; Marshall, 2000; Yakovlev, 2004; U.S. Department of State, 2004); and

WHEREAS the experience of pluralistic cultures which embrace religious liberty shows that a variety of religious faiths and non-religious worldviews can peacefully co-exist while maintaining substantial doctrinal, valuative, behavioral, and organizational differences, (Byrd, 2002; Eck, 2001; Marshall, 2000); and

WHEREAS psychologists may be, as a group, more likely to under appreciate the importance of religion because they are less religious or less conventionally religious than the general population with fewer than half of psychologists expressing belief in God and only one third of psychologists acknowledging that their "whole approach to life is based on...religion" compared to 94% of the general American population expressing belief in God and 72% acknowledging that religion underlies their whole approach to life (Bergin & Jensen, 1990; Gallup & Lindsey, 1999; Hoge, 1996; Miller & Delaney, 2005; Regan, Malony, & Beit-Hallahmi, 1980; Richards & Bergin, 2000;); and

WHEREAS psychotherapy clients and the general population from which research subjects are often drawn in the United States and Canada are statistically likely to be involved in a religious organization or to have meaningful memories of religious ties as only about 9.1% of the North American population and 15.5% of the world population fall into a 'nonreligious' classification (Keller, 2000); and

WHEREAS understanding and respecting patient/client spirituality and religiosity are important in conducting culturally-sensitive psychological assessment and treatment (Hathaway, Scott, & Garver, 2004; McCullough, 1999; Richards & Bergin, 1997; Shafranske, 1996; Worthington & Sandage, 2001); and

WHEREAS evidence exists that religious factors are under-examined in psychological research both in terms of their prevalence within various research populations and in terms of their possible relevance as influential variables (Emmons & Paloutzian, 2003; Hill & Pargament, 2003; King & Boyatzis, 2004; Miller & Thoresen, 2003, Weaver et al., 1998).

THEREFORE BE IT RESOLVED that the American Psychological Association condemns prejudice and discrimination against individuals or groups based on their religious beliefs, practices, adherence or background.

THEREFORE BE IT FURTHER RESOLVED that the American Psychological Association take a leadership role in opposing discrimination based on religion and encouraging commensurate consideration of religion as a diversity variable.

THEREFORE BE IT FURTHER RESOLVED that the American Psychological Association encourages all psychologists to act to eliminate discrimination based on religion.

THEREFORE BE IT FURTHER RESOLVED that the American Psychological Association encourages actions that promote religious tolerance, liberty, and respect, in all arenas in which psychologists work and practice, and in society at large.

THEREFORE BE IT FURTHER RESOLVED that the American Psychological Association will include appropriate information on prejudice and discrimination based on religion in its multicultural and diversity training material and activities.

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F.(19) The Board voted to recommend that Council approve the following motion:

That the APA Council of Representatives approves the addition of \$30,000 in the 2006 Preliminary Budget for the funding and establishment of a Task Force on the Implementation of the APA Guidelines on Multicultural Education, Training, Research, Practice and Organizational Change for throughout APA (“the Multicultural Guidelines”). The task force will include one representative from each of the APA standing boards, COLI and CAPP, two members from the original writing group and a member of the Board of Directors. The task force will be charged with formulating recommendations for the infusion of the Multicultural Guidelines throughout psychology. The task force will report back to the Board on a regular basis on the progress of its work. The members of the task force will be appointed by the APA President. It is hoped that the work of the task force will be suggestive of methodologies for the infusion of other guidelines into psychology.

The Board noted that the Task Force on the Implementation of the APA Guidelines on Multicultural Education, Training, Research, Practice and Organizational Change for Psychologists throughout APA could also serve to provide input to the CEO for the development of the Diversity Implementation Plan.

G.(20) The Board voted to allocate \$7300 from its 2005 discretionary fund to support one meeting of a Committee on Children, Youth and Families’ Conference on Enhancing Family and School Relationships Planning Committee.

H.(21) The Board approved, in principle, the need to continue diversity training and referred the item “Recommendations for Continuing Diversity Training Across APA Governance” to the CEO to be implemented as part of the Diversity Implementation Plan.

I.(27) The Board received as information an update on the APA Presidential Working Group on Incentives for Increasing Multi-Cultural Diversity on Council and Boards and Committees.

XIII. ETHNIC MINORITY AFFAIRS

A.(22) The Board voted to recommend that Council adopt as APA policy the following resolution pending removal of the reference to the Ethics Code:

Resolution Recommending the Immediate Retirement of American Indian Mascots, Symbols, Images, and Personalities by Schools, Colleges, Universities, Athletic Teams, and Organizations

WHEREAS the American Psychological Association has recognized that racism and racial discrimination are attitudes and behavior that are learned and that threaten human development (American Psychological Association, June 2001):

WHEREAS the American Psychological Association has resolved to denounce racism in all its forms and to call upon all psychologists to speak out against racism, and take proactive steps to prevent the occurrence of intolerant or racist acts (American Psychological Association, June 2001);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities undermines the educational experiences of members of all communities-especially those who have had little or no contact with Indigenous peoples (U.S. Commission on Civil Rights, 2001; Society of Indian Psychologists, 1999; Webster, Loudbear, Corn, & Vigue, 1971);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities establishes an unwelcome and often times hostile learning environment for American Indian students that affirms negative images/stereotypes that are promoted in mainstream society (Fryberg, 2003; Fryberg & Markus, 2003; Fryberg, 2004a; Munson, 2001; Society of Indian Psychologists, 1999; Staurowsky, 1999);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities by school systems appears to have a negative impact on the self-esteem of American Indian

children (Eagle and Condor Indigenous People's Alliance, 2003; Fryberg, 2004b; Fryberg & Markus, 2003; Maryland Commission on Indian Affairs, 2001; Society of Indian Psychologists, 1999; The Intertribal Council of the Five Civilized Tribes, 2001);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities undermines the ability of American Indian Nations to portray accurate and respectful images of their culture, spirituality, and traditions (Gone, 1995; Witko, 2005);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities presents stereotypical images of American Indian communities, that may be a violation of the civil rights of American Indian people (U. S. Commission on Civil Rights, 2001);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities is a form of discrimination against Indigenous Nations that can lead to negative relations between groups (U. S. Commission on Civil Rights, 2001; Witko, 2005);

WHEREAS the continued use of American Indian symbols, mascots, images, and personalities is a detrimental manner of illustrating the cultural identity of American Indian people through negative displays and/or interpretations of spiritual and traditional practices (Staurowsky, 1999; Witko, 2005);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities is disrespectful of the spiritual beliefs and values of American Indian nations (Gone, 1995, Staurowsky, 1998);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities is an offensive and intolerable practice to American Indian Nations that must be eradicated (U.S. Commission on Civil Rights, 2001; Society of Indian Psychologists, 1999);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities has a negative impact on other communities by allowing for the perpetuation of stereotypes and stigmatization of another cultural group (Fryberg, 2004b; Gone, 1995; Staurowsky, 1999; U.S. Commission on Civil Rights, 2001);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities is inconsistent with several ethical principles and standards of the American Psychological Association, in particular Principles D and E (American Psychological Association, 2002);

THEREFORE BE IT RESOLVED that the American Psychological Association recognizes the potential negative impact the use of American Indian mascots, symbols, images, and personalities have on the mental health and psychological behavior of American Indian people;

THEREFORE BE IT RESOLVED that the American Psychological Association encourages continued research on the psychological effects American Indian mascots, symbols, images, and personalities have on American Indian communities and others;

THEREFORE BE IT RESOLVED that the American Psychological Association encourages the development of programs for the public, psychologists, and students in psychology to increase awareness of the psychological effects that American Indian mascots, symbols, images, and personalities have on American Indian communities and others;

AND

THEREFORE BE IT RESOLVED that the American Psychological Association supports and recommends the immediate retirement of American Indian mascots, symbols, images, and personalities by schools, colleges, universities, athletic teams, and organizations.

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B.(22A) The Board voted to approve, in principle, the following motions:

1. That Council receives the report of the President's Task Force on Enhancing Diversity in APA.
2. That Council adopts as APA policy the following resolution:

Resolution on Enhancing Diversity in APA

WHEREAS the President of the American Psychological Association (APA) in 2005, Ronald F. Levant, EdD, MBA, appointed a Task Force on Enhancing Diversity in APA (TFED) to suggest ways that APA can be a more welcoming place for psychologists who are members of marginalized groups, and

WHEREAS one charge of the Task Force was to identify a conceptual models for use in reconciling differences when they occur among diverse groups and between majority groups and specific marginalized groups, and

WHEREAS this Task Force also was charged to develop recommendations for how the American Psychological Association can increase its welcomeness to its many diverse constituent members; and

WHEREAS the Task Force was charged to examine dimensions of diversity limited to ethnicity, race, disability status, sexual orientation, aging, religion, and gender, and

WHEREAS many if not most of the Task Force members and members they represent have had experiences where interactions between members of dominant groups and the marginalized groups identified above indicated a lack of sensitivity, an appearance of invisibility, or outright rudeness, and,

WHEREAS conflicts occur not only between the majority and the marginalized groups, but among marginalized groups.

THEREFORE, BE IT RESOLVED that enhancing diversity and increasing the sense of being welcome in APA by diverse groups are top priorities for APA.

BE IT FURTHER RESOLVED that APA's Council of Representatives directs APA's Chief Executive Officer (CEO) to develop a Diversity Implementation Plan to insure that diversity is an integral part of APA structures and activities. In developing this plan, the CEO should consider, among other things, the following recommendations:

Immediate:

- (a) supporting an anti-discrimination policy;
- (b) surveying all governance entities as to "climate" (current level of participation, relative level of comfort) for members of diverse groups;
- (c) enhancing inter-Directorate collaboration through joint columns in the *Monitor* and other collaborative projects;
- (d) adopting the policy of incorporating language and principles from the *APA Guidelines on Multicultural Education, Training, Research, Practice and Organizational Change for psychologists*, the *APA Guidelines for Psychotherapy with Lesbian, Gay and Bisexual Clients*, and the *APA Guidelines for Psychological Practice with Older Adults* into publication and editorial policies/procedures;
- (e) expanding the editorial/publications pipeline with respect to greater inclusion of diverse persons;
- (f) obtaining relevant governance groups feedback to the Office of Accreditation and Program Consultation to support more effective implementation of Domain D of the *Guidelines and Principles for Accreditation of Programs in Professional Psychology*;
- (g) developing a training mechanism for psychological researchers in skills, knowledge, attitudes requisite for conducting research with diverse populations;
- (h) recognizing the needs of convention attendees who are from various marginalized religious groups;
- (i) increasing attentiveness to diversity issues in areas such as awards and the content of membership promotional materials;
- (j) providing favorable consideration of a new Division on Disability;
- (k) conducting a study of barriers facing students with disabilities; and,
- (l) developing a newsletter from the Office of Disability Issues.

Medium-term:

- (a) planning mechanisms for diversity enhancement within the Association;
- (b) all governance groups organizing discussions of having joint meetings to promote collaboration with other governance groups;
- (c) developing experiences and activities to encourage diverse marginalized students and early career psychologists to enter research careers;
- (d) opening opportunities for students from marginalized groups to be mentored as ad hoc journal reviewers;
- (e) developing site visitor training materials relevant to domain D;
- (f) providing educational materials to increase awareness at meetings to diverse religions' food restrictions;
- (g) developing strategies for recruiting and retaining members from marginalized groups;
- (h) initiating a *Monitor* series on international issues;
- (i) improving attention and commitment to issues facing persons with disabilities such as access, resource materials, representation among staff; and,
- (j) examining states' laws and positions that may be oppressive to marginalized groups or insensitive to persons with disabilities relative to decisions about locations of APA meetings.

Long-range:

- (a) all governance groups formulating plans for increasing representation of individuals from marginalized groups;
- (b) developing ideas for increasing APA's involvement with international organizations;
- (c) initiating non-English translations of key APA publications;
- (d) encouraging increased attention under COA's Domain D to tolerance and understanding of religious, sexual orientation, and disability issues;

- (e) expanding efforts related to increasing research training to marginalized students at all levels of the pipeline;
- (f) evaluating the value of reduced dues for marginalized groups;
- (g) increasing the Association's understanding of, and commitment to persons with disabilities, and,
- (h) developing leadership mentoring opportunities for marginalized students at all levels of the pipeline.

BE IT FURTHER RESOLVED that \$10,000 be budgeted in 2005, and \$25,000 in 2006, to facilitate the development of the Diversity Implementation Plan, and that beginning in 2007 a specific line item appear in the annual budget to operationalize the implementation plan in an amount recommended annually by the CEO.

C.(28) The Board received an update on the Commission on Ethnic Minority Recruitment, Retention and Training Grants for Fiscal Years 1999-2005.

XIV. INTERNATIONAL AFFAIRS

No items.

XV. CENTRAL OFFICE

No items.

XVI. FINANCIAL AFFAIRS

A.(23) The Board voted to recommend that Council approve the following motion:

That Council approves the 2006 Preliminary Budget in principle calling for a 2005 probable surplus of \$456,900 and a surplus of \$463,400 for the 2006 Preliminary Budget. This 2006 Preliminary Budget shall serve as the framework for the 2006 Final Budget that will be presented to Council for approval in February of 2006.

On the recommendation of the Finance Committee and Board of Directors, consistent with the actions of Council in August 2000 and 2002 to institute the practice of increasing the APA base member dues and graduate student affiliate fees annually by an amount linked to the consumer price index for all urban consumers (CPI-U), that the Council specifically approve an \$8 member dues increase from \$253 to \$261 for the 2006 dues year, and a \$1 graduate student affiliate fee increase from \$43 to \$44 and that the revenues generated from this increase be added to the APAGS budget.

The Board also voted to support the decision to consider Federal and DC income tax as non-operating activity consistent with the classification of the building gains since the building gains are the primary source of the taxable activities.

B.(24) The Board voted to recommend that Council approve the following motion:

Based on the 2006 Preliminary Budget and the 2006-2008 Financial Forecast, on recommendation of the Finance Committee and Board of Directors, Council adopts the following Net Asset Allocation Plan and Financial Forecast for the period 2006-2008:

1. The goal for attainment of net assets as stated in Association Rule 210-3 is reaffirmed; namely, that the Association strives to maintain net assets equal to at least one year's operating budget.
2. Consistent with accounting practices, conventional wisdom and comparable financial data from other organizations, the Association should not consider any portion of theoretical building equity toward attainment of the net assets goal mentioned in item 1 above.
3. Currently, rather than specifically set aside funds outside the normal budget process for development of programs deemed to be of high priority to the membership, the Association enthusiastically supports consideration of proposals (in the form of a business plan) for new

revenue generating ideas. *[Such proposals for new revenue generating ideas should be thoroughly detailed including all direct costs, indirect costs, and staff costs. Such proposals reviewed by the FC, the BOD and approved by the COR, will be funded out of ongoing revenues or out of the Association's net assets, as necessary, assuming that full consideration is also given to the impact of such funding on progress towards the Association's net assets goal mentioned in item 1 above.]* In the spirit of this policy, the FC recommended and the BOD approved, beginning in 2007, that a specific line item appear in the annual budget to operationalize this policy in an amount recommended annually by the CEO. These funds will be administered by the CEO in support of new non-dues revenue proposals.

4. Each year, based on actual results and an analysis of our net assets, future financial forecasts and the net asset allocation plan will be adjusted accordingly.

5. Once the net assets goals are attained, any number of future actions could be taken including the long-term stabilization of dues; the long-term availability of funds for the development of programs deemed to be of high priority to the membership; further apportionment of building and investment proceeds toward operational expenses, etc.

6. The specific Financial Forecast for 2006 – 2008 is as follows:

- a) Strive to attain a net asset goal equal to at least one year's operating budget consistent with Association Rule 210-3;
- b) Include \$2.5M net cash flow from building operations in the operating budget as a regular source of revenue;
- c) Include full funding in the operating budget for the Public Education Campaign, the Academic Enhancement Initiative, and PSY21, through the forecast period (2006-2008);
- d) Restrict capital expenditures to no more than \$12M over the forecast period;
- e) Continue to reinvest net realized gains/losses from our long-term portfolio activity;
- f) Reinvest all interest/dividends from our long-term portfolio activity;
- g) Treat Federal income tax expenses as non-operating activity;
- h) Treat all real estate cash flow in excess of \$2.5M annually from building operations as an increase to net assets and not available for operations or capital equipment, but rather as a reserve for financial investment and/or debt extinguishment; and,
- i) Work toward eliminating the debt on the Ten G building either by loan reduction and/or substitution of collateral to minimize the tax implications under the UBIT regulations.

C.(25) The Board voted to accept the consolidated audited financial statements for the year ended December 31, 2004, Report to Management, the APA 750 LLC, Ten G LLC and the APAPO financial statements as of December 31, 2004.

The Board was informed the Supplemental Financial Report (OMB Circular A-133) will be forwarded to the Board for acceptance when it is available.

The Board voted to reappoint PricewaterhouseCoopers to conduct the 2005 APA audit.

The Board requested that the name of the Personnel Committee be changed to the Personnel and Compensation Committee.

Dr. Shullman abstained from voting on this item.

D.(29) The Board received information on changes approved by Council to the Responsible Spending Policy.

BOARD OF DIRECTORS

June 9-11, 2000

APPROVED MINUTES

Present: Patrick H. DeLeon, PhD, JD; Norine Johnson, PhD; Richard M. Suinn, PhD; Ronald F. Levant, EdD; Gerald P. Koocher, PhD; Raymond D. Fowler, PhD; Laura H. Barbanel, EdD; J. Bruce Overmier, PhD; Ruth Ullmann Paige, PhD; Nathan W. Perry, PhD; and George P. Taylor, PhD

Absent: Charles L. Brewer, PhD

I. MINUTES OF MEETING

A.(1) The Board voted to approve the minutes of the February 23 & 24, 2000, meeting of the Board Directors.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(2) The Board voted to approve a motion providing presidential candidates the opportunity to speak at lunch during Council's February meeting and requesting that an announcement regarding this opportunity be put in the APA Monitor. The Board also requested that the Election Committee consider the possibility of requiring presidential candidates to submit a brief statement (25 words or less) to be included with the President-elect Nomination Ballot.

B.(3) The Board voted to recommend that Council approve the following substitute motion regarding participation by newcomers in APA governance:

To direct all directorates and governance groups to identify strategies specific to that directorate or governance group and implement appropriate mechanisms that will provide opportunities for newcomers (those who have not previously served on the Council of Representatives or a board or committee, with the exception of APAGS) to participate in governance. One of these mechanisms might be to propose a slate comprised solely of members who haven't previously served on the Council of Representatives or a board or committee, with the exception of APAGS.

C.(3A) The Board postponed to its August 2000 meeting the item "Council Seats for State Associations and Divisions."

D. In executive session, the Board approved the following motions regarding appointments:

1. The Board voted to appoint Angelo S. DeNisi, PhD, and Keith O. Yates, PhD, for three-year terms (1/1/01-12/31/03) to the Committee on Division/APA Relations.

2. The Board voted to approve the recommendation from the Board of Educational Affairs (BEA) that two current members of the Continuing Professional Education Committee (CPEC) remain for a second term on CPEC and that BEA, with recommendations from CPEC, make the final appointments from among those current committee members who state they are willing to serve an additional term.

3. The Board voted to reappoint Dorothy W. Cantor, PsyD, and Julia-Ramos Grenier, PhD, to three-year terms (1/1/01-12/31/03) to the APA Insurance Trust (APAIT).

E. In executive session, the Board approved slates of nominees for APA standing and continuing boards and committees after receiving the report from the Nominations Subcommittee.

III. ETHICS

A.(23) The Board voted to recommend that Council reject a motion which requests that the constituency of policy and public safety psychology/correctional psychology/military psychology be represented through 1) a slate on the Ethics Committee and (2) a seat on the Ethics Code Task Force.

B.(46) The Board received information regarding recent action taken by the Ethics Code Task Force.

C. In executive session, the Board took action on 11 Ethics cases.

D. In executive session, the Board received information on Stipulated Resignations with Admission of Violation.

E. In executive session, the Board received information regarding a proposed Ethics “Rules and Procedures” change.

F. In executive session, the Board received as information the Ethics Committee’s response to a concern the Board of Scientific Affairs raised with the Board of Directors regarding procedures for investigating ethical violations that are scientific/academic in nature.

IV. BOARD OF DIRECTORS

A.(4) The Board voted to recommend that Council reject the motion requesting that Association Rule 60-1 be amended to include a sentence providing that the APA President-elect shall serve as an ex-officio member of CSFC, without vote.

B.(5) The Board voted recommend that Council approve the following revised Guidelines for Council Resolutions:

GUIDELINES FOR COUNCIL RESOLUTIONS

These guidelines apply to all resolutions submitted to Council for consideration. The following information must be provided: (1) The purpose and rationale for the resolution stated clearly, and documenting its relevance to psychology or psychologists; 2) The issue’s importance to psychology or to society as a whole; (3) Any scientific or empirical findings, pro or con, related to the resolution; (4) The likelihood of the resolution having a constructive impact on public opinion or policy.

Resolutions approved by Council are understood to reflect what APA values or believes and, in most cases, does not commit APA to any action. If approval of the resolution requires that specific action be taken, the following information must also be provided: 5) Suggestions on how it should be implemented, if it is passed; (6) Breakdown of staff resources or association funds needed to implement the resolution.

C.(24) The Board voted to recommend that Council reject a motion requesting that members of CSFC who aren’t already serving on Council be reimbursed for transportation, hotel and meal expense for their attendance at the February meeting of Council and for the cost of one night’s stay at the hotel where Council is housed for their attendance at the August meeting of Council.

D.(25) The Board postponed the item “Recommendations of the APAGS Task Force on New Professionals” and requested that it come back to the Board no later than December 2000.

E.(26) The Board discussed the item “Adding Health to APA’s Mission Statement” and requested that Council be informed that the Board unanimously supports adding “health” to APA’s mission statement.

F.(47) The Board received information regarding recent action taken by the Committee on Legal Issues to establish a “Judicial Ambassadors Program” as a mechanism for the dissemination of social science knowledge into the judicial system.

G. Bruce E. Bennett, PhD, and Dorothy Cantor, PsyD, provided the Board with an update on the APA Insurance Trust.

H. George P. Taylor, PhD, provided the Board with an information on the Trilateral Forum on Professional Issues in Psychology.

I. In executive session, the Board discussed an APAGS issue.

J. In executive session, the Board approved the report from the Personnel Committee.

K. In executive session, the Board discussed a proposed joint APAIT/APA membership venture and requested that Raymond D. Fowler, PhD, and Jack McKay work with Bruce Bennett, PhD, Executive Director of APAIT, to explore the proposed plan and come back to the Board in August.

V. DIVISIONS AND STATE AND PROVINCIAL ASSOCIATIONS

A.(6) The Board reviewed the 1999 Division Annual Reports.

B.(7) The Board voted to recommend that Council determine that *the Training Guidelines for Practice in Clinical Geropsychology* poses no undue risk to the Association.

C.(8) The Board approved funding for the following interdivisional grants project as recommended by CODAPAR: Response Theory Home Page; Creating Successful Strategies for Promoting Diversity; Symposium on Training and Simulation; Speakers Clearinghouse; Providing Continuing Education Training in Domestic Violence; Network of Family Members of Gay/Lesbian/Bisexual Individuals.

VI. ORGANIZATION OF THE APA

A.(27) The Board voted to recommend that Council approve the following substitute motion originated by the Board:

That Council approves amending Association Rule 70: Policy and Planning Board as follows (underlined material to be added):

70-1.1 The Policy and Planning Board shall consist of not fewer than nine Members of the Association. One of its members shall be a representative to Council serving in their first or second term on Council.

B. In executive session, the Board voted to recommend that Council approve the following amendments to the Association Rules to become effective on January 1, 2001 (bracketed material to be deleted; underlined material to be added):

50-5. LIST OF CONTINUING COMMITTEES

50-5.1 The list below presents APA continuing committees and their reporting lines.

Reporting directly to Council

Structure and Function of Council

Reporting through the Board of Directors

Constitutional Issues

International Relations in Psychology

Investment

Advancement of Professional Practice

American Psychological Association of Graduate Students

[College of Professional Psychology]

Commission for the Recognition of Specialties and Proficiencies in Professional Psychology

Agenda Planning Group

Division/APA Relations

Reporting through the Publications and Communications Board

Council of Editors

Reporting through the Board of Educational

Accreditation

Continuing Professional Education

Education and Training Awards

Committee of Teachers of Psychology in Secondary Schools

Reporting through the Board of Professional Affairs

Professional Practice and Standards

Reporting through the Board of Scientific Affairs

Animal Research and Ethics

Psychological Tests and Assessment

Scientific Awards

Reporting through the Board for the Advancement of Psychology in the Public Interest

Women in Psychology

Psychology in the Public Interest Award

Lesbian, Gay and Bisexual Concerns

Disability Issues in Psychology

Children, Youth, and Families

Ethnic Minority Affairs

Urban Initiatives

Aging

Reporting through the Committee for the Advancement of Professional Practice

Committee on Rural Health

90-2 COMMITTEE FOR THE ADVANCEMENT OF PROFESSIONAL PRACTICE

90-2.1 There shall be a Committee for the Advancement of Professional Practice whose responsibility it shall be to (a) be the administrative agent of the Board of Directors exercising general governance supervision over the relevant affairs of the [Office of Professional Practice] Practice Directorate, (b) recommend to Council through the Board of Directors procedures for the [protection, defense, and] enhancement of human welfare through the professional practice of psychology, (c) identify projects important to the [protection, defense, and] enhancement of human welfare through the professional practice of psychology, and (d) recommend to the Board of Directors the needed funding for such projects.

The Committee for the Advancement of Professional Practice shall consist of nine regular members and up to two special members. The APA Treasurer shall be an ex officio, nonvoting member of the Committee. The Board of Directors may also appoint such liaisons to the Committee for Advancement of Professional Practice as it deems necessary. Regular members shall be psychologists who provide health care services, who are licensed to practice psychology in at least one state, district, or province, and who pay the annual assessment. In addition to these general qualifications, the regular members of the Committee shall possess experience in service delivery and in the governance of state and/or national psychological organizations, and will have demonstrated expertise in one or more of the following additional areas of experience: (a) advocacy (legislative or legal), (b) marketing, (c) the training of practicing psychologists, and (d) public information and education. Of the nine regular members, three shall be elected each year to serve a term of three years.

Each year, a call for nominations for the three positions that will become vacant in the following year shall be broadly disseminated. Following the call, the Committee shall forward a list, organized into three slates of five candidates each, of fifteen persons deemed qualified to the APA Board of Directors, who shall select therefrom three candidates from each slate to stand for election to the three vacancies on the Committee for the Advancement of Professional Practice. In accordance with established procedure, the Board of Directors' slates of candidates shall then be forwarded to APA Council for inclusion in Council's election of members to APA boards and committees.

In addition to regular members, the Committee for the Advancement of Professional Practice may appoint up to two special members to serve a term not to exceed two years. These special members need not be psychologists and shall be chosen for their expertise in such matters as marketing, advocacy (legislative and legal), public information and education, or such other areas of competency as shall be relevant to the mission of the Committee. Special members may be reappointed for as many terms as the Committee deems their services to be required.

The Committee for the Advancement of Professional Practice shall report to Council through the APA Board of Directors.

[90-2.2 In order to facilitate the activities and to ensure the responsiveness of the Committee for the Advancement of Professional Practice to the needs of the assessed groups, there shall be a Liaison/Consultation Group for Professional Practice, whose responsibilities it shall be to (a) serve as a liaison between the Committee for the Advancement of Professional Practice and both state, district, and provincial psychological associations and those divisions of APA that have an interest in the support and advancement of professional practice; (b) propose such initiatives for the advancement of practice as it deems vital to the profession; (c) actively assist the Committee for the Advancement of Professional Practice and the Office of Professional Practice in explaining and implementing the programs of Office of Professional Practice; and (d) serve as a resource for the review and evaluation of funding criteria and of projects proposed for funding to the Committee for the Advancement of Professional Practice. The Liaison/Consultation Group for Professional Practice shall convene at least once annually at the time of the APA annual convention and shall receive and review quarterly reports from the Office of Professional Practice and all minutes of the meetings of the Committee for the Advancement of Professional Practice.

The Liaison/Consultation Group for Professional Practice shall consist of 106 delegates and the members of the Committee for the Advancement of Professional Practice. Each state, district, and provincial psychological association affiliated with APA shall be entitled to one delegate. Each division of APA, at least 50% of whose members pay the annual assessment and are licensed to practice psychology in at least one state, district, or province shall be entitled to one delegate. The balance of the 106 seats shall be distributed to such eligible divisions on the basis of an apportionment ballot, such ballot to be provided to all APA members who pay the annual assessment and who are licensed to practice psychology in a state, district, or province. Delegates to the Liaison/Consultation Group for Professional Practice shall be selected by the affiliated state, district, or provincial association or the APA division they will represent from nominees elected by the constituency of such association or division, according to such rules as may be established by the constituent organization. Delegations to the Liaison/Consultation Group for Professional Practice shall serve three-year terms, with one-third of the body selected in any one year.]

[90-2.3 All funds generated by the annual assessment of health service psychologists shall be sequestered by the Board of Directors and, in a manner consistent with APA policy, shall be used exclusively for the support of the Office of Professional Practice, for the operation of the Committee for the Advancement of Professional Practice, and for such special projects as are recommended to the APA Board of Directors by the Committee for the Advancement of Professional Practice. This budget shall be reported in the consolidated APA annual budget.]

110-14. RULES GOVERNING SIMULTANEOUS SERVICE ON BOARDS AND COMMITTEES

110-14.1 Members shall not serve simultaneously on any of the following governance groups, except as ex-officio (non-voting) members or if other exceptions are provided below.

Boards

Advancement of Psychology in the Public Interest
Convention Affairs
Educational Affairs
Policy and Planning
Publications and Communications
Professional Affairs (except that one member is also a member
of the Committee on Professional Practice and Standards)
Scientific Affairs

Committees

Accreditation
Advancement of Professional Practice
Aging
Animal Research and Ethics
Approval of Continuing Education Sponsors
Children, Youth and Families
Continuing Professional Education
Disability Issues in Psychology
Division / APA Relations
Employment and Human Resources
Ethics
Ethnic Minority Affairs
Finance(except that two members are also members
of the Investment Committee)
Investment Committee (except that two members are also
members of the Finance Committee)
International Relations in Psychology
Legal Issues(ad hoc)

Lesbian, Gay and Bisexual Concerns
Membership
Professional Practice and Standards(except that one member is
also a member of the Board of Professional Affairs)
Psychology and AIDS(ad hoc)
Public Information
Rural Health
Structure and Function of Council
Psychological Tests and Assessment
Teachers of Psychology in Secondary Schools
Women in Psychology
Urban Initiatives

Other

[College of Professional Psychology]
Commission for the Recognition of Specialties and Proficiencies in Professional Psychology

110-14.2 Members shall not simultaneously run for election(e.g., appear on the board and committee election ballot) for more than one of the following governance groups. In addition, members shall not run for election for one of the following governance groups if the term of service will begin prior to the end of a term the member is currently serving on one of the governance groups listed in Association Rule 110-14.1

Boards

Advancement of Psychology in the Public Interest
Convention Affairs
Education Affairs
Policy and Planning
Publications and Communications
Professional Affairs
Scientific Affairs

Committees

Advancement of Professional Practice
Employment and Human Resources
Ethics
Finance
International Relations in Psychology
Membership
Public Information
Rural Health
Structure and Function of Council

Other

[College of Professional Psychology]
Commission for the Recognition of Specialties and Proficiencies in Professional Psychology

[130.5 COLLEGE OF PROFESSIONAL PSYCHOLOGY

There shall be a College of Professional Psychology. It shall be governed by a Board of Governors. It shall have the authority to certify psychologists in recognized proficiency areas of practice and in other professional practice domains. Psychologists seeking such certification shall be health service providers in psychology who are licensed in a state or Canadian province. The College shall: (a) specify from among recognized practice proficiencies and from among

professional practice domains those for which certificates ought to be made available to providers; such specification will be based on an assessment of need and feasibility that will include an opportunity for the submission of written public comment: designation of all such proficiencies and domains shall be subject to ratification by the Council of Representatives, (b) develop procedures for identifying candidates applying for certification who shall be qualified to sit for examination, (c) develop and refine examinations for evaluating candidates' knowledge and skills, (d) review and select training and continuing education offerings and sequences delivered by APA-approved continuing education vendors that conform to College proficiency education and training criteria, and (e) adopt standards for renewal of certificates.

The College shall consist of 12 members, each of whom shall serve a staggered term of 3 years. CAPP, BPA, BSA, BAPPI, BEA, and the practice divisions, as defined in Association Rule 90-4.2, shall each be represented by two seats on the College Board. One-third of the member shall retire each year. College members shall be limited to two successive full terms of service and may not further succeed themselves without a break in such service.

All members of the Board of Governors shall be APA members and at least 11 of the 12 members shall be licensed psychologists. The non-licensed member may be elected only to a seat representing BSA. The members shall be chosen by the APA Council of Representatives through a nomination process solicited from APA membership in the manner described in Association Rule 110-14.1. The names identified as a result of this solicitation shall be supplied to CAPP, BPA, BSA, BAPPI, BEA, and the practice divisions. CAPP, BPA, BSA, BAPPI, and BEA shall each forward to the College Board of Governors not more than nine, nor less than five names for a vacancy in an appropriately representative seat. The practice divisions may each forward to the College not more than two names for a vacancy in a seat assigned to them.

From the names provided by CAPP, BPA, BSA, BAPPI, BEA and the practice divisions, the College Board of Governors shall prepare ranked slates of five names for each vacancy and shall transmit the proposed slates to the Board of Directors. The Board of Directors shall develop three-person slates for each vacancy. The three-person slates must be taken from the ranked, five-person slates submitted to the Board of Directors by the College Board of Governors. The Board of Directors' slates will be developed in a manner to ensure gender and ethnic diversity of membership and will be submitted to the Council for election in the usual fashion. The College shall report to the Council of Representatives through the Board of Directors.

The College functions will be established administratively within the Central Office, subject to legal consultation to establish policy and procedures that will create appropriate autonomy of the College. The College shall establish rules that govern its procedures, subject to the approval of the Board of Directors acting for Council.]

The Board voted to recommend that Council approve "American Psychological Association Practice Organization" as the name of the companion organization.

VII. PUBLICATIONS AND COMMUNICATIONS

A.(9) The Board voted to recommend that Council adopt the following APA policy statement on the freedom of scientific inquiry and presentation of research results:

That the Council of Representatives adopt the following APA policy statement on freedom of scientific inquiry and presentation of research results:

The American Psychological Association is committed to fostering a vigorous science of psychology through the open exchange of ideas and data. A productive and healthy science requires freedom of inquiry and freedom of expression. Researchers must be free to pursue their scientific investigations within the constraints of the ethical principles, scientific principles, and guidelines of the discipline. Editors, too, after seeking appropriate peer review, must be free to publish that science in their journals even when findings are surprising, disappointing, or controversial.

The publication of a scientific article by a journal of the American Psychological Association does not constitute its endorsement. The Association will not condone any attempt to censor the reporting or discussion of science within its journals so long as it has been conducted ethically and meets the scientific standards of the profession. Further, the Association will neither retract a published paper nor censure authors or editors for ethical scientific activities that yield potentially controversial findings. Scientific investigation is an evolving process: The ultimate evaluation of scientific results depends on a continuous exchange of ideas and reexamination of ideas and findings.

B.(28) The Board voted to recommend that Council allocate \$25,000 from its 2000 contingency fund to support expansion of the number of weekly press releases publicizing psychological science published in APA journals.

C.(29) The Board voted to recommend that Council approve the following motion:

The Council of Representatives supports the recommendations of the Board of Scientific Affairs and the Publications & Communications Board to increase our efforts to attain greater publicity and visibility of research published in APA journals. The Council further votes to approve the annual funding of such efforts (\$100,000 for 2001) through the Office of Publications and Communications. The funding will be provided by the Office of Publications and Communications and the management of this press release effort will be provided by the Public Affairs Office.

D. In executive session, the Board discussed an item regarding increasing participation to underrepresented groups on the Publications and Communications Board. The Board reaffirmed its commitment to increasing diversity in APA and requested that the Executive Management Group work with Bruce Overmier, PhD, Nate Perry, PhD, and Richard M. Suinn, PhD, to come back to the Board with recommendations for increasing diversity in editorial operations.

VIII. CONVENTION AFFAIRS

A.(10) The Board postponed the item "Site Selection for 2007 Convention" to its August 2000 meeting. The Board requested that the Board of Convention Affairs consider the possibility of holding the 2007 Convention in Boston or Atlanta.

IX. EDUCATIONAL AFFAIRS

A.(11) The Board voted to recommend that Council formally confirm the recognition of Behavioral Psychology as a specialty in professional psychology.

B.(11A) The Board postponed the item "Administrative Management of Sponsor Approval System Procedures: Scope of Authority" to its August 2000 meeting.

C.(30) The Board voted to approve the addition of \$5,100 to the 2001 Preliminary Budget for the establishment of the Task Force on the Undergraduate Psychology Major.

D.(31) The item "Task Force on Psychology in Early Education and Care" was withdrawn.

E.(48) The Board received information regarding APA's participation in a new initiative entitled "Shaping the Preparation of Future Social Science and Humanities Faculty: A Future Faculty Program" co-sponsored by the Council of Graduate Schools (CGS) and the Association of American Colleges and Universities (AAC&U).

F.(49) The Board received information regarding the Commission for the Recognition of Specialties and Proficiencies in Professional Psychology's plans to conduct a self-study analysis.

G. Thomas H. Jackson, PhD, and Susan D. Philips, PhD, provided the Board with an annual update on activities of the Committee on Accreditation.

X. PROFESSIONAL AFFAIRS

A.(12) The Board voted to recommend that Council approve the *Criteria for Evaluating Treatment Guidelines*.

B.(12A) The Board voted to approve a motion stating that it is the sense of the Board that existing policy on licensure supports APA's non-involvement in state licensure issues pertaining to other professions so long as the title or practice of psychology is not involved.

C.(32) The Board voted to recommend that Council reject a motion which requests that APA establish a database to enable patients to access their psychological records from their deceased psychologists' estates.

D.(33) The Board voted to recommend that Council reject a motion which requests that Council amend the Association Rules to establish an American Psychological Association Award for Distinguished Contributions to Mental Health Services.

E.(34) The Board voted to recommend that Council approve the following motion:

That the Council approve continuation of funding for the Public Education Campaign at the current level of \$1,000,000 per year for a three-year period (2002-2004), and that a program assessment be conducted so that outcomes and effectiveness can be reviewed in 2003 as part of the consideration of any request for continued funding beyond 2004.

F.(34A) The Board voted to allocate \$15,000 of its 2000 contingency funds to support efforts of state and provincial psychological associations seeking prescriptive authority legislation to consult with their respective state psychology licensing board in furtherance of support for prescription privileges for psychologists.

G.(34B) The Board voted to allocate \$2,000 of its 2000 contingency funds to support the development of a network of thoughtful leaders via a series of informal conference calls with psychologists who are on the leading edge of developing the internet culture.

H.(50) The Board received information regarding a proposal for an APA position on involuntary outpatient commitment.

I. Norine G. Johnson, PhD, provided the Board with an update on the Commission on Education and Training Leading to Licensure in Psychology and the 2001 Healthcare Initiative.

XI. SCIENTIFIC AFFAIRS

A.(13) The Board voted to recommend that Council approve the following amendment to Association Rule 140-5.1:

140-5 Committee on Psychological Tests and Assessment

140.5-1 There shall be a Committee on Psychological Tests and Assessment whose responsibility it shall be to: (a) [consider] address problems regarding sound psychological testing and assessment practices, and initiate discussions with specific agencies and institutions outside APA concerning sound testing and assessment practices; (b) review regularly the [Joint Technical] Standards for Educational and Psychological Testing and recommend revision, when necessary; (c) serve as technical advisors to other APA boards and committees on all issues affecting testing and assessment as it involves policy, practice, and science; (d) monitor actions of government and other organizations concerning regulation and control of assessment and testing practices and make appropriate recommendations; [and], (e) maintain a knowledge of and concern regarding current policy issues on the use of tests and assessment in clinical, counseling, educational, and employment settings, and (f) promote the appropriate use of tests

and sound assessment practices. Insofar as possible, the Committee shall have expertise in the theory, evaluation, and use of tests in clinical, counseling, school, and industrial/organizational psychology and shall represent the concerns of diverse groups that may be affected by testing. This may include but not be limited to persons with disabilities, women, and ethnic minorities. [women and ethnic minority groups]. In order for the Committee to maintain liaison and cooperation with other groups concerned with tests and assessment, it is desirable for some members of the Committee to hold joint membership in APA, the American Educational Research Association, and the National Council on Measurement in Education. The Committee shall consist of nine members appointed by the Board of Scientific Affairs in consultation with the Committee. Three members shall be appointed annually for a term of three years. Members shall be selected by the following process:

In a three year rotation, BPA, BEA, and BAPPI shall submit slates of at least three persons who reflect the orientation of their respective boards and who have expertise in some area of testing and assessment. One person shall be appointed from each slate of three nominees and thus three of the nine committee members shall be appointed in this way.

BSA shall select annually a member from a slate of three persons with expertise in the scientific aspects of testing.

A member shall be appointed annually from a slate of three candidates who combine a technical knowledge of testing with the respective orientations of BPA, BEA, or BAPPI (in a three-year rotation). Each slate shall be reviewed by the board whose views are to be represented.

BSA will be responsible for ensuring that at least two of the nine Committee members shall be ethnic minorities with expertise in one or more content areas of relevance to testing and assessment.

B.(14) The Board voted to recommend that Council approve the Report of the Task Force on Test User Qualifications.

C.(35) The Board voted to recommend that Council approve the following motion:

The Council of Representatives approves adding \$150,000 to the 2001 preliminary budget to fund start-up costs of the Academic Enhancement Initiative activities, and adding \$350,000 to the 2002-2004 budgets for full funding of the Academic Enhancement Initiative. The Council requests program assessment to be conducted so that the outcomes and effectiveness of the Initiative can be reviewed in 2003 as part of the consideration of any request for funding beyond 2004.

D.(36) The Board voted to recommend that Council approve the addition of \$5,000 in the 2001 Preliminary Budget for the establishment of the Working Group on Genetic Issues.

E.(37) The Board voted to recommend that Council approve the addition of \$5,000 in the 2001 Preliminary Budget for the formation of the Working Group on Ethical and Scientific Issues Related to the Conduct of Research Over the Internet.

F.(38) The Board voted to recommend that Council approve the addition of \$8,250 in the 2001 Preliminary Budget for one meeting of the Task Force on Statistical Inference to enable it to carry out its charge.

G.(39) Richard M. McCarty, PhD, informed the Board that the Committee on Animal Research and Ethics has requested permission to meet at all times in executive session, with visits only by members of the Board of Directors and relevant APA staff. This request was prompted by concerns the committee has had that its discussions have been grossly misrepresented by visitors to the committee. There are also frequent discussions about strategies for promoting animal research and individual psychological scientists who might be involved in these activities and the committee does not wish to mention the names of these colleagues in an open meeting for fear that they may be singled out for their involvement

in animal research. This request has been discussed with James McHugh and the Board of Directors had no objections.

XII. PUBLIC INTEREST

A.(15) The Board is asked to recommend that Council adopt the following resolution:

Resolution on Poverty and Socioeconomic Status

WHEREAS, the income gap between the poor and the rich has continued to increase, with the average income of the poorest fifth of the population down 6% and the average income of the top fifth up 30% over the past 20 years (Bernstein, McNichol, Mishel, & Zahradnik, 2000);

WHEREAS, the poverty rate in the United States is higher now than in nearly all years of the 1970s, child poverty (at 18.9% in 1998, representing 13.5 million children) continues to be higher here than in most other industrialized nations, and the proportion of the population living below the poverty line in 1998 was 12.7% (representing 34.5 million people) (Center for Budget and Policy Priorities, 1999; U.S. Census Bureau, 1999);

WHEREAS, although Whites represented the largest single group among the poor in 1998, ethnic groups were overrepresented, with 26.1% of African Americans, 25.6% of Hispanics, 12.5% of Asians and Pacific Islanders, and 31% of American Indians on reservations living in poverty (National Congress of American Indians, 2000; U.S. Census Bureau, 1999), compared with the 8.2% of Whites who were poor;

WHEREAS, families* with a female head of household had a poverty rate of 29.9% in 1998 and comprised the majority of poor families (U.S. Census Bureau, 1999);

WHEREAS, the Task Force on Women, Poverty, and Public Assistance of the APA Society of the Psychology of Women (Division 35) has documented from the social sciences research literature the root causes of poverty and its impact for poor women, children, and their families, and called for a more effective public policy founded on this research base (Division 35 Task Force on Women, Poverty, and Public Assistance, 1998);

WHEREAS, poverty is detrimental to psychological well-being, with NIMH data indicating that low-income individuals are 2 to 5 times more likely to suffer from a diagnosable mental disorder than those of the highest SES group (Bourdon, Rae, Narrow, Manderschild, & Regier, 1994; Regier et al., 1993), and poverty poses a significant obstacle to getting help for these mental health problems (McGrath, Keita, Strickland, & Russo, 1990);

WHEREAS, accumulating research evidence indicates that the greater the income gap between the poorest and the wealthiest in a society, the higher the death rates for infants and adults and the lower the life expectancy for all members of that society, regardless of SES (Kawachi & Kennedy, 1997);

WHEREAS, the impact of poverty on young children is significant and long lasting, limiting chances of moving out of poverty (McLoyd, 1998), poverty is associated with substandard housing, homelessness, inadequate child care, unsafe neighborhoods, and underresourced schools (Fairchild, 1984; Lott & Bullock, in press), and poor children are at greater risk than higher income children for a range of problems, including detrimental affects on IQ, poor academic achievement, poor socioemotional functioning, developmental delays, behavioral problems, asthma, poor nutrition, low birth weight, and pneumonia (Geltman, Meyers, Greenberg, & Zuckerman, 1996; McLoyd, 1998; Parker, Greer, & Zuckerman, 1988);

WHEREAS, low socioeconomic status is associated in women with higher mortality rates and with osteoarthritis, hypertension, cervical cancer, coronary heart disease, AIDS/HIV infection, and other chronic health conditions (Adler & Coriell, 1997), and poor women are sicker and more likely to have disabilities than their nonpoor counterparts, limiting their employment options and straining their financial resources (Falik & Collins, 1996; Olson & Pavetti, 1997);

WHEREAS, women living in poverty are at high risk of all types of violence, including sexual abuse as children (DeParle, 1999), with researchers documenting reports by two thirds of poor mothers of severe violence at the hands of a childhood caretaker and by 42% of child sexual molestation (Browne & Bassuk, 1997), as well as severe and life threatening assaults as adults (Bassuk, Browne, & Buckner, 1996; Brooks & Buckner, 1996; Colten & Allard, 1997; Roper & Weeks, 1993), which presents obstacles to work and self-sufficiency (NOW Legal Defense and Education Fund, 1997; Raphael, 1996);

WHEREAS, lack of affordable health insurance, including mental health and substance abuse coverage, impedes health and well-being, and poor women are over 3 times as likely as higher income women to be uninsured: 36% versus 11%, respectively (National Center for Health Statistics, 1995);

WHEREAS, older adults often live on limited retirement incomes, have limited prospects for future earnings, and frequently face overwhelming health care costs; 13% of older women and 20% of older persons living alone or with nonrelatives in 1998 lived on incomes below the poverty level; and 49% of older African American women living alone lived in poverty in 1998 (U.S. Census Bureau, 1999, cited in U.S. Administration on Aging, 1999);

WHEREAS, lower socioeconomic status among older adults is associated with higher rates of medical and psychological disorders, poor older adults have poorer access to medical care, prescription medications, long-term care, and community-based care (Estes, 1995), and Medicare funds mental health care at a lower rate than medical care, and this further limits the access for older adults in poverty to mental health and substance abuse services;

WHEREAS, migrant families are by the nature of their work and life circumstances poorly served by health and mental health professionals (Portes & Rumbaut, 1996; Wilk, 1986);

WHEREAS, undocumented immigrants are vulnerable to legal actions that inhibit their access to health and mental health services, compounding issues of poverty and limited English language proficiency (Olivera, Effland, & Hamm, 1993);

WHEREAS, research focused on low-income groups including immigrants, ethnic minorities, minimum wage workers, families receiving public assistance, the homeless, migrant workers, and older women is limited;

WHEREAS, low-income groups are the targets of discrimination based on their socioeconomic status as well as other social indicators such as race/ethnicity and gender (Lott, in press);

WHEREAS, perceptions of the poor and of welfare – by those not in those circumstances -- tend to reflect attitudes and stereotypes that attribute poverty to personal failings rather than socioeconomic structures and systems and that ignore strengths and competencies in these groups (Ehrenreich, 1987; Katz, 1989; Quadagno, 1994), and public policy and anti-poverty programs continue to reflect these stereotypes (Bullock, 1995; Furnham, 1993; Furnham & Gunter, 1984; Rubin & Peplau, 1975);

WHEREAS, the safety net that successfully ensured that poor families had basic needs met was seriously eroded with passage of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996;

WHEREAS, psychologists as researchers, service providers, educators, and policy advocates have a responsibility to better understand the causes of poverty and its impact on health and mental health, to help prevent and reduce the prevalence of poverty and to effectively treat and address the needs of low-income individuals and families by building on the strengths of communities;

WHEREAS, psychologists are ethically guided to "respect the fundamental rights, dignity, and worth of all people" (American Psychological Association, Ethical Principles of Psychologists and Code of Conduct, 1992);

WHEREAS, "psychologists are aware of their professional and scientific responsibilities to the community and the society in which they work and live" (American Psychological Association, Ethical Principles of Psychologists and Code of Conduct, 1992);

THEREFORE, Be it resolved that the American Psychological Association:

1. Will advocate for more research that examines the causes and impact of poverty, economic disparity, and related issues such as socioeconomic status, classism, ageism, stereotypes, the stigma and feelings of shame associated with poverty, and mental and physical health problems, including depression, substance abuse, intimate violence, child sexual abuse, and elder abuse, as well as advocate for the broader dissemination of these research findings.
2. Will advocate for more research on prejudicial and negative attitudes toward the poor by others who may individually or collectively perpetuate policies that tolerate poverty and social inequality.
3. Will advocate for more research on special populations who are poor (women and children, immigrants, undocumented immigrants, migrants, ethnic minorities, older people, people with disabilities and other chronic health conditions such as AIDS/HIV infection, and rural and urban populations).
4. Will advocate for research that identifies and learns from indigenous efforts by low-income people to work together to solve personal and shared problems or create organizations that advocate effectively for social justice.
5. Will recommend that where possible and appropriate ethnic minority status and socioeconomic status be identified for subject populations in social sciences research.
6. Will advocate for incorporating evaluation and assessment tools and for encouraging integrative approaches such as the building of public and private community partnerships in programs addressing the issue of poverty and the poor, which psychological research has identified as effective strategies for addressing community level issues and problems.
7. Will encourage in psychological graduate and postgraduate education and training curricula more attention to the causes and impact of poverty, to the psychological needs of poor individuals and families, and to the importance of developing "cultural competence" and sensitivity to diversity around issues of poverty in order to be able to help prevent and reduce the prevalence of poverty and to treat and address the needs of low-income clients.
8. Will support public policy that encourages access for all children to high-quality early childhood education and a high-quality public school education, better equipping individuals for self-sufficiency.
9. Will support public policy that ensures access to postsecondary education and training that allows working families to earn a self-sufficient wage to meet their family's needs.
10. Will support expanding financial support to poor families, will support public policy and programs that ensure access to sufficient food and nutrition and affordable and safe housing, and will support public policy that ensures that all working families have access to working wages that permit self-sufficiency and that keep pace with inflationary costs of living.
11. Will support public policy that ensures access to family-friendly jobs offering good quality health insurance, including coverage for mental health and substance abuse, flexible work schedules, and sufficient family and medical leave.

12. Will support public policy that ensures parity with medical coverage for mental health and substance abuse services under Medicare and Medicaid and ensures for all individuals, regardless of ability to pay, access to health care and mental health and substance abuse treatment that is comprehensive and culturally sensitive, that accommodates the needs of the children of parents seeking treatment, and that addresses the special needs of older adults in poverty, including prescriptions and long-term care.

13. Will support public policy that encourages access for all children to high-quality early health care.

14. Will support public policy that ensures for all working families access to affordable, high-quality child care, which is available year round, for the full day, and for all work shifts, as well as before- and after-school care.

15. Will support public policy that provides early intervention and prevention for vulnerable children and families that enhance parenting, education, and community life so that children can develop the necessary competencies to move out of poverty.

16. Will support public policy that provides early interventions and prevention for vulnerable children and families that are strengths-based, community-based, flexible, sensitive to culture and ethnic values of the family, and that have a long-lasting impact.

*The word *family* should be understood to incorporate the functions of family members rather than their biological sex or sexual orientation, for example, lesbian heads of household.

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B.(16) The Board voted to recommend that Council receive with thanks the *Report from the Working Group on Assisted Suicide and End-of-Life Decisions*.

C.(17) The Board voted to refer the item "Resolution on End-of-Life Issues and Care" to the Fall 2000 Cross-Cutting Agenda and requested that the item come back to the Board in December 2000.

D.(18) The Board voted to refer the item "Resolution on Assisted Suicide" to the Fall 200 Cross-Cutting Agenda and requested that the item come back to the Board in December 2000.

E.(19) The Board received as information comments from the Board for the Advancement of Psychology in the Public Interest regarding the Policy and Planning Board/Blue Ribbon Panel Renaissance Plan.

F.(39) The Board voted to allocate \$5,000 from its 2000 contingency funds and recommend that Council approve the addition of \$5,000 to the 2001 Preliminary Budget to support planning and development of the APA sponsored conference – Sexual Orientation, Human Rights and Mental Health: Toward a Global Psychology.

G.(40) The Board voted to recommend that Council allocate \$13,200 from its 2000 contingency funds to support two, three-day meetings of the Task Force on Advertising and Children.

H.(41) The Board voted to recommend that Council reject a motion requesting approval of funding for the establishment of an Ad Hoc Committee on End-of-Life Issues and a full-time End-of-Life Issues Officer staff position.

XIII. ETHNIC MINORITY AFFAIRS

No items.

XIV. INTERNATIONAL AFFAIRS

No items.

XV. CENTRAL OFFICE

No Items.

XVI. FINANCIAL AFFAIRS

A.(20) The Board voted to recommend that Council reject the following motion:

That the Board of Directors recommend to the Council that respective Boards within each directorate (BEA, BPA, BSA, BAPPI and P&P) review all items requesting contingency funds from the BOD or COR, or having fiscal implications from within the directorate, and provide an overall prioritization and rank-ordering of such requests from the directorate to the BOD and COR.

B.(21) The Board voted to accept the audited financial statements for the year ended December 31, 1999, Report to Management dated March 2000, the Supplemental Financial Report (A-133) dated March 2000, the G Place Limited Partnership, and the Square 677 No. Limited Partnership Financial Statements as of December 31, 1999, and to appoint Arthur Andersen LLP to conduct the 2000 audit.

C.(22) The Board voted to recommend that Council approve the following changes to the Association Rules (bracketed material to be deleted; underlined material to be added):

210-1.1 Finance Committee

210-1.1 The Finance Committee shall be composed of seven voting members[, of whom two shall be elected each year for terms of three years] and up to three non-voting members. Of the voting members, two shall be elected each year for terms of three years; [to be elected each year,] one slate shall be limited to first-year and/or second-year members of Council and the second slate shall be limited to first-year and/or second year Council members or former or outgoing members of the Finance Committee. No member may serve more than two consecutive terms. The seventh voting member of the Committee is the APA Treasurer, who shall serve as its Chair. The non-voting members shall be representatives from the investment community and are not necessarily psychologists. The non-voting members will be recommended by the Finance Committee and appointed by the Board of Directors for terms of three years not to exceed three consecutive terms.

Consistent with the mission of the Finance Committee set forth in Article XI, Section 3 of the APA Bylaws, the Finance Committee shall review and make recommendations on all new business and any old business coming before Council having financial implications that have not already been provided for in the budget. In addition, it is the responsibility of the Committee to (a) recommend overall investment strategy, including, but not limited to, amounts to be invested in equities, bonds, short-term holdings and real estate; (b) monitor the performance of the investment managers, if any; (c) research and develop alternative investments; (d) and advise the Treasurer and appropriate staff on investing funds not entrusted to an investment manager.

[90-4. There shall be an Investment Committee to be appointed by and report to the Board of Directors. The Investment Committee shall consist of six members, at least four of whom are APA members: One of the four shall be the APA Treasurer, who shall serve as chair; one shall be selected from a slate nominated by the Board for the Advancement of Psychology in the Public Interest (BAPPI); and the remaining two shall be current members of the Finance Committee. The other two members are to be representatives of the investment community and are not necessarily psychologists.

It is the responsibility of the Committee to (a) recommend overall investment strategy, including, but not limited to, amounts to be invested in equities, bonds, short-term holdings and real estate; (b) monitor the performance of the investment managers, if any; (c) research and develop alternative investments; (d) and advise the Treasurer and appropriate staff on investing funds not entrusted to an investment manager.

Terms of office shall be as follow: BAPPI representative, a maximum of two three-year terms; the APA Treasurer, consistent with the APA Treasurer's term of office; Finance Committee members, consistent with term on Finance Committee; members from the investment community, maximum of three three-year terms.]

Other related housekeeping changes:

50-5.1 List of Continuing Committees

[Investment Committee]

110-14.1 Members shall not serve simultaneously on any of the following governance groups except as ex-officio (non-voting) members or if other exceptions are provided below.

Finance [except that two members are also members of the Investment Committee]

[Investment Committee (except that two members are also members of the Finance Committee)]

D.(42) The Board requested that the Chief Executive Officer develop a recommendation for consideration by the Finance Committee and Board of Directors to re-design the contingency fund structure to provide for the inclusion of fully loaded projects (direct and indirect costs and staffing). In the interim, the Board recommends that all agenda items with fiscal implications specifically state the "full" cost of the effort and whether the effort can be handle within current staffing.

E.(43) The Board recommended that Council reject a motion which requests that State Psychological and Provincial Associations be added to the list of associations for which a dues discount for dual membership is allowed.

F.(44) The Board vote to recommend that Council reject the main motion submitted by the Finance Committee and approve the following motion substitute motion originated by the Board:

That the Council approve the 2001 Preliminary Budget with a deficit of \$135,100, in principle, including the reclassification of the \$1,000,000 partnership cash flow (historically referred to as the building subsidy). This 2001 Preliminary Budget shall serve as the framework for the 2001 Final Budget that will be presented to Council for approval in February of 2001.

The Board's substitute motion includes modifications to the Finance Committee recommendation as follows:

Net Loss Proposed by Finance Committee (\$115,000)

Fund TF on Undergraduate Psychology Major Competencies	(5,100)
Fund WG on Genetic Research Issues	(5,000)
Fund AG on Ethical & Scientific Issues & Research over the Internet	(5,000)
Support for 2001 Conference on Sexual Orientation, Human Rights and Mental Health: Toward a Global Psychology	<u>(5,000)</u>

Net Loss Proposed by the Board of Directors (Note 1) (\$135,100)

Note 1: The net losses recommended above by both the Board of Directors and the Finance Committee assume the Council's adoption of the \$4 dues increase for 2001. As specified in Association Rule 210-5, Council must take a specific action on all dues increases (see separate agenda item).

G.(45) The Board voted to recommend that Council approve the following motion:

Net Worth Allocation Plan

1. The goal for attainment of net worth as stated in Association Rule 210-3 should be reaffirmed; namely, that the Association strives to maintain a net worth equal to at least one year's operating budget.
2. Consistent with accounting practices, conventional wisdom and comparable financial data from other organizations, the Association should not consider any portion of theoretical building equity toward attainment of the net worth goal mentioned in item 1 above. *[Note: This action is recommended since consideration of building equity in the attainment of our net worth goal makes no additional funds available for operations.]*
3. Currently, rather than specifically set aside funds outside the normal budget process for development of programs deemed to be of high priority to the membership, the Association enthusiastically supports consideration of proposals for new revenue generating ideas. *[Such proposals for new revenue generating ideas should be thoroughly detailed including all direct costs, indirect costs, and staff costs. Such proposals reviewed by the Board of Directors and approved by the Council of Representatives, will be funded out of ongoing revenues or out of the Association's net worth, as necessary, assuming that full consideration is also given to the impact of such funding on progress towards the Association's net worth goal mentioned in item 1 above.]*
4. The specific financial forecast for 2001 – 2003 is as follows:
 - 1) Strive to attain a net worth goal equal to at least one year's operating budget consistent with Association Rule 210-3;
 - 2) Include all net cash flow from building operations in the operating budget as a regular source of revenue (currently, the average net cash flow from building operations is estimated at \$1,000,000 per year during this forecast period);
 - 3) Include funding in the operating budget for the Public Education Campaign through the forecast period (2001-2003);
 - 4) Restrict capital expenditures to no more than \$4,500,000 over the forecast period;
 - 5) Continue to reinvest net gains/losses from our long-term portfolio activity (estimated at \$2,700,000 over the forecast period);
 - 6) Continue to subsidize the operating budget by all interest and dividends generated from our long-term portfolio activity (estimated at \$2,000,000 over the forecast period); and,
 - 7) Continue to treat the advance to Square 677 as a loan rather than as an additional capital contribution and limit the loan principal to no more than \$10 million dollars.
5. Each year based on actual results and an analysis of our net worth, future financial forecasts will be adjusted accordingly.
6. Once the net worth goals are attained, any number of future actions can be taken including the long-term stabilization of dues; the long-term availability of funds for the development of programs deemed to be of high priority to the membership; further apportionment of building and investment proceeds toward operational expenses, etc.

H.(51) The Board was informed of the decision to not purchase the warehouse at the increased sales price and of APA's receipt of reimbursement for the cost of the due diligence effort from the Trammell Crow Company.

Kaplan + Rosen - 1970s - Congress
using sci in policy development

IRS
ISR

[Asked for ex/scenarios]

Foci? Interrogation; consultant in general to nat'l sec

Robert - Reflect increasing need to focus on human intel

Jean Marie - Data call: who to collect?

Blanke - Trug + advice situations (bigger than US military)
Does current APA ethics code apply to needs (has necessary
principles) or are new ones needed

Geller - Keeps referring to greater ambiguity of current threat
Issue of role - are we never psychologists? When acting
as a psychologist

Who is client?

Not just interrogation - even more assessments

Przyce - Assumption is not interrogation implies harm - might be
only discussion; examine what is harmful

Trade offs: how spec ops force US troops to torture for future
challenges; what is greater good issue?

Allegiance issue: DoD ethics vs APA ethics etc

Bouler - Claimed presence of psy reduced problems /

Geller - Psy manner less used for information tx; psy don't interrogate
(which is intell or LE role)

Wessells - Is this exploitation of vulnerability?

Schurck - Always coercive if criminal interview

Psy almost never moves from 1 tech to other - mostly influential
& slow & encouraging - get to Robert's analysis: stethicary

James - Psy as Medical Safety Officer - has legal authority to stop
activities (01/03 gave orders to get med facilities
off Kuwait including records; also Abu Ghraib)

Morgan - Off didn't have med. records then many give diabetic sweet tea + candy
(detainees from 3rd world countries & med assessment) → diabetes
(not made up) coma

2

Safety, legal, ethical, effective (in that order)

Wesseler Which law are we legally bound to? Is APA sound to?
USG has endorsed standards contrary to int'l law -
should APA also do so?

PM - ^{re} list

Medical records: analogy?
18 yr old interrogators...

[Why both sides of table
are needed]
nuance of examples
nuance

Issue of informed consent - third party (identification)

① Saddam Hussein ② detainee assessment /

③ recruiting third party when person present
identification as psy vs identity as psy but don't
act as psy (or do)

Undercover agent role

EO 12333 - must identify
to U.S. citizen

④ when third party not in U.S. +
not a citizen (no int'l law here)

[Who steps in when we do not?]

Public perception that psy consulting to interrogations is unethical +
is not allowed by APA code - behave
+ that this leads to torture etc - Newman

Robert F How can we train psy (young psy) to deal w these issues?

Some of what we can report out - lead to give secrecy or allow for people to speak freely (KSB)

Schemata Confidentiality is worn for psy
day to day issue of deamification - "what we deal c"
helps set up barrier admittedly

Goal: How to enhance util security while also being ethical as psy (Geller)

[Too much fear of open discussions - even statement to effect that some of us might not recognize what is important to keep secret.]

Can list names & attribution; issues of disagreement

[Sat on one side of table did you notice?]

~~Not sitting across the table presence presence presence presence~~
"just taking notes" (Scott)

Should have dealt with issues sooner

Bornick is all about the grey area - no reporting out of complex

There is just an assumption that psychologists can (or is) useful but what evidence do we have on this? And is there ever any evaluation? psy useful (presumably) in other domains - asset evals, technology assessment (cf USA), counseling & risk of disaster/meltdown/death. But what else? At CSSL why not a single interrogator made ref to using psychologists (interpreters, yes).

#

Job + Silberman - report; shift of \$ to sec
humint

25 June

Omitted explicit statement re whether psy does interrogation
claimed part of document in notes + competencies

X Disingenuous paragraph "7th" - distress in res ≠ stress in interrogation

Interesting insights into what psychologists do in military -
expectations of them; various roles (eg know cultural
norms of other cultures) - why are psy so wise? informed?
Maybe because psy have been only available sec scientists -?
Because we psy as safety officers + ethical guardians....

Becomes a question of whether psy can possibly work eth guidelines
being set up

Bad publicity makes commanders want to pull psy out of efforts

[Nationalism is only increasing as time goes on] Scott: "we" "our"

#1 Oral history / memoirs ≠ science

#2 Importance of psy to act'l sec / interrogations: data?

Same issue of being able to talk only to classified community
Old problem again

Supplementary Appendix

This appendix has been provided by the authors to give readers additional information about their work.

Supplement to: Marks JH, Bloche MG. The ethics of interrogation — the U.S. military's ongoing use of psychiatrists. N Engl J Med 2008;359:1090-2.



DEPARTMENT OF THE ARMY
HEADQUARTERS, UNITED STATES ARMY MEDICAL COMMAND
2050 WORTH ROAD
FORT SAM HOUSTON, TX 78234-6000

REPLY TO
ATTENTION OF

MCCG

OTSG/MEDCOM Policy Memo 06-029

Expires 20 October 2008

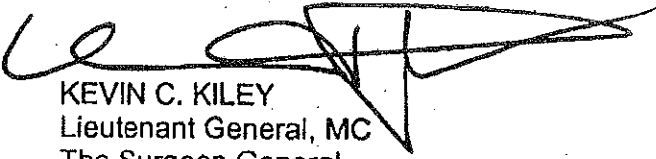
20 OCT 2006

MEMORANDUM FOR Commanders, MEDCOM Major Subordinate Commands

SUBJECT: Behavioral Science Consultation Policy

1. Purpose: To discuss the background, definitions, mission, concept of operations, roles, training requirements, and ethics for personnel providing behavioral science consultation to intelligence collection and detention operations. The mission of a behavioral science consultant is to provide psychological expertise and consultation in order to assist the command in conducting safe, legal, ethical, and effective detention operations, intelligence interrogations, and detainee debriefing operations.
2. Proponent: The proponent for this policy is the Assistant Surgeon General for Force Projection, OTSG.
3. Policy details are attached.
4. The POC for this memorandum is COL Bernard DeKoning, Assistant Surgeon General for Force Projection, at (703) 693-5601.

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KEVIN C. KILEY
Lieutenant General, MC
The Surgeon General

**US ARMY BEHAVIORAL SCIENCE CONSULTATION
TO DETENTION OPERATIONS, INTELLIGENCE INTERROGATIONS,
DETAINEE DEBRIEFING, AND TACTICAL QUESTIONING**

1. References.

- a. The Geneva Conventions of 1949.
- b. DoD Directive (DoDD) 2310.1, DoD Program for Enemy Prisoners of War (EPW) and Other Detainees, 18 Aug 94.
- c. DoDD 5100.77, DoD Law of War Program, 9 Dec 98.
- d. DoDD 3115.09, DoD Intelligence Interrogations. Detainee Debriefings, and Tactical Questioning, 3 Nov 05.
- e. DoDI 2310.08E, Medical Program Support for Detainee Operations, 6 Jun 06.
- f. Health Affairs Policy 05-006, Medical Program Principles and Procedures for the Protection and Treatment of Detainees in the Custody of the Armed Forces of the United States, 3 Jun 05.
- g. Health Affairs Policy Memorandum, Training for Health Care Providers in Detainee Operations (Coordinating Draft).
- h. JP 3-63, Joint Doctrine for Detainee Operations, Final Coordination Draft, 23 Mar 05.
- i. JP 4-02, Health Service Support in Joint Operations, Revised Second Draft, 21 Mar 05.
- j. AR 190-8 (OPNAVIST 3461.6, AFJI 31-304, MCO 3461.1): Enemy Prisoners of War, Retained Personnel, Civilian Internees and Other Detainees, 1 Oct 97.
- k. FM 3-19.40, Internment/Resettlement Operations, 1 Aug 01.
- l. FM 3-19.401/MCRP 4-11.8/NTTP 3-07.8/AFTTP(1) 3-2.51, Multi-service Tactics, Techniques, and Procedures Detainee Operations (Draft).
- m. FM 21-78, Resistance and Escape, 15 Jun 89.
- n. FM 2-22.3, Human Intelligence Collector Operations, Sep 06.

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o. Ethical Principles of Psychologists and Code of Conduct, American Psychological Association, 2002 edition.

p. Report of the American Psychological Association Presidential Task Force on Psychological Ethics and National Security, Jun 05 (Enclosure 1).

q. Military Medical Ethics. Textbooks of Military Medicine, The Borden Institute, Office of The Surgeon General, Department of the Army, 2003.

r. The Principles of Medical Ethics With Annotation Especially Applicable to Psychiatry, American Psychiatric Association, 2001 edition including Nov 03 amendments.

s. Opinions of the Ethics Committee on The Principles of Medical Ethics With Annotation Especially Applicable to Psychiatry, American Psychiatric Association, 2001 edition.

t. Ethics Primer of the American Psychiatric Association, American Psychiatric Association, 2001.

u. Report of the Council on Ethical and Judicial Affairs, CEJA Report 10-A-06, Physician Participation in Interrogation, 2006 (Enclosure 2).

v. US Army Field Manual 34-52, "Intelligence Interrogation, Detainee Debriefings and Tactical Questioning," 3 Nov 05.

2. Background.

a. Although psychologists have supported detention operations and interrogations for many years, the events of September 11, 2001 and the ongoing Global War on Terrorism (GWOT) have required the unprecedented and sustained involvement of Behavioral Science Consultants (BSCs) in support of both detention operations and intelligence interrogations and detainee debriefing operations. Prior to GWOT, support for these missions was provided by personnel organic to the intelligence and special operations communities. However, the expanded demand for BSCs to support these missions has required assignment of psychologists and psychiatrists from other mission areas within the Department of Defense (DoD).

b. The Army is the Executive Agent for the administration of DoD detainee policy. The GWOT has resulted in the detention by US forces of large numbers of detainees. The intelligence interrogation and debriefing of detainees is a vital and effective part of the GWOT and is designed to obtain accurate and timely intelligence in a manner consistent with applicable US and international law, regulations, and DoD policy. Behavioral science personnel provide expertise and consultation to Commanders to directly support the detention and interrogation/ debriefing operations.

c. The United States (US) is a signatory to the Geneva Convention Relative to the Treatment of Prisoners of War (GPW) and the Geneva Convention Relative to the Protection of Civilian Persons in Time of War (GC). The requirements of these conventions are delineated in AR 190-8; this multi-Service regulation is proscriptive for all US military forces, not only for the US Army.). Every BSC who supports detention operations must read and understand the specific requirements contained in AR 190-8. Details from AR 190-8 will not be discussed in detail herein, but the regulation expressly requires the humane treatment of all detainees, regardless of their status. Portions of the regulation are reprinted below:

1-5. General protection policy (AR 190-8):

a. *US policy, relative to the treatment of enemy prisoners of war (EPW), civilian internees (CI) and retained personnel (RP) in the custody of the US Armed Forces, is as follows:*

(1) *All persons captured, detained, interned, or otherwise held in US Armed Forces custody during the course of conflict will be given humanitarian care and treatment from the moment they fall into the hands of US forces until final release or repatriation.*

(2) *All persons taken into custody by US forces will be provided with the protections of the EPW 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, the GC, the Uniformed Code of Military Justice, and the Manual for Courts Martial.*

(4) *The inhumane treatment of EPW, CI, and 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 is to be protected from all threats or acts of violence.

d. Photographing, filming, and videotaping 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.

3. Definitions.

a. Behavioral Science Consultant (BSC). BSCs are psychologists and psychiatrists, not assigned to clinical practice functions, but to provide consultative services to support authorized law enforcement or intelligence activities, including detention and related intelligence, interrogation, and detainee debriefing operations.

(1) BSCs, who by definition are not engaged exclusively in the provision of medical care, may not qualify for special status accorded retained medical personnel by Article 33 of the GPW or carry DoD-issued identification cards identifying themselves as engaged in the provision of healthcare services. Analogous to behavioral science unit personnel of a law enforcement organization or forensic psychiatry or psychology personnel supporting the criminal justice, parole, or corrections systems, BSCs employ their professional training, not in a provider-patient relationship, but in relation to a person who is the subject of a lawful governmental inquiry, assessment, investigation, adjudication, or other proper action.

(2) BSCs function as Special Staff to the Commander in charge of both detention and interrogation operations. BSCs should be aligned to report directly to this Commander, not to a Commander charged solely with command of the detention facility or joint interrogation debriefing center (JDIC). This arrangement enhances the BSCs ability to provide comprehensive consultation regarding all subjects within the BSCs area of expertise on combined aspects of detention operations, intelligence interrogations and detainee debriefings.

b. Behavioral Science Technician (BST). Enlisted mental health technicians with at least 10 years experience in mental health field who have received specific training to function in support of, and under direct supervision of, BSCs. It is important to note that technicians are not licensed to function independently and may not operate except under direct supervision of the BSC. The scope of practice for these technicians will be at a level consistent with their knowledge and skill set and determined by the supervising BSC on site; under no circumstances will their practice exceed the limitations contained in this policy.

c. Behavioral Science Consultation Team (BSCT).

(1) Often behavioral science consultation to detention operations, intelligence interrogations, and detainee debriefings is conducted by individual BSCs working alone.

(2) In other situations, such as at a detention facility, one or more BSCs and one or more BSTs may form a team, the Behavioral Science Consultation Team or BSCT. The senior military BSC serves as team leader for any other military, civilian, or contractor employee, enlisted, or officer behavioral science personnel who serve on or assist the BSCT.

(3) In some situations other personnel, such as Judge Advocate General officers and/or medical officers may be tasked to support the BSCT.

d. Behavioral drift. This is the continual re-establishment of new, often unstated, and unofficial standards in an unintended direction. It often occurs as established, official standards of behavior are not enforced. Ambiguous guidance, poor supervision, and lack of training and oversight contribute to this change in observed standards. Certain psychological and social pressures can greatly increase the likelihood of behavioral drift. This phenomenon is commonly observed in detention and other settings in which individuals have relative control or power over others' activities of daily living or general functioning. Drift is detrimental to the mission and may occur very quickly without careful oversight mechanisms and training (discussed more fully in section on Mission Essential Tasks, Command Consultation).

4. Mission.

a. The mission of a BSC is to provide psychological expertise and consultation in order to assist the command in conducting safe, legal, ethical, and effective detention operations, intelligence interrogations, and detainee debriefing operations.

b. This mission is composed of two complementary objectives:

(1) To provide psychological expertise in monitoring, consultation, and feedback regarding the whole of the detention environment in order to assist the command in ensuring the humane treatment of detainees, prevention of abuse, and safety of US personnel.

(2) To provide psychological expertise to assess the individual detainee and his environment and provide recommendations to improve the effectiveness of intelligence interrogations and detainee debriefing operations.

c. These mission objectives contain four critical components of operations that BSCs must manage as they work in this arena:

(1) Safety. BSCs, like any other military personnel, DoD civilian, or contractor employee help to ensure the safety of both DoD personnel and detainees. BSCs use their knowledge of social psychology, group behavior, and the dynamics of captivity to reduce the likelihood of abuse by providing behavioral science expertise, and to establish processes that reduce the opportunity for behavioral drift and inappropriate behavior.

(2) Law. Although BSCs are not legal experts, they must be familiar with applicable US and international law, regulations, and DoD policies, as well as mission-specific guidance and direction set forth in applicable Execute Orders (EXORDs), Operations Orders (OPORDs), and Operations Plans (OPLANS) that govern detention operations, intelligence interrogations, and detainee debriefing operations. In addition, given their special knowledge; education, training, and experience; and status, as well as their unique vantage point on the conduct of detention operations, intelligence interrogations, and detainee debriefings, BSCs are obligated to report any actual, suspected or possible violations of applicable laws, regulations, and policies, to include allegations of abuse or inhumane treatment in accordance with DoDD 5100.77, DoDD 3115.09, DoDD 2310.08E (Medical Program Support for Detainee Operations) and this policy statement. BSCs shall report those circumstances to the chain of command. BSCs who believe that such a report has not been acted upon properly should also report the circumstances to the technical chain, including the Military Department Specialty Consultant. Technical chain officials may inform the Joint Staff Surgeon or Surgeon General concerned, who then may seek senior command review of the circumstances presented. As always, other reporting mechanisms, such as the Inspector General, criminal investigation organizations, or Judge Advocates, also may be used. BSCs shall make a written record of all reports of suspected or alleged violations in a reportable incident log maintained by the detention facility commander (or other designated senior officer).

(3) Ethics. BSCs must regularly monitor their behavior and remain within professional ethical boundaries as established by their professional associations, by their licensing State, and by the military.

(4) Effectiveness. BSCs add value to detention operations, intelligence interrogation, and detainee debriefing missions because of their ability to provide detailed assessments of individual detainees, their environment, and the interactions between detention facility guards and interrogators and detainees. BSCs enhance detention operations by providing assessments and consultative services to the Command with a view to supporting a safe, stable, and secure detention facility, developing strategies for improving detainee behavior and compliance with camp rules, and increasing positive detainee-guard/staff interactions. Similarly, with regard to interrogators, BSCs assist in maximizing the effectiveness of eliciting accurate, reliable, and relevant information during the interrogation and debriefing processes.

5. Concept of Operations.

a. What BSCs will do:

(1) BSCs adhere to applicable US and international law, regulations, and DoD policies, as well as accepted professional ethical standards with regard to proper and ethical conduct in support of detention operations, intelligence interrogations, and detainee debriefings.

(2) BSCs provide consultative services to detention operations, intelligence interrogations, and detainee debriefings in a manner that:

(a) Supports authorized law enforcement or intelligence activities, including detention, interrogation, and debriefing operations in a manner that promotes the safety and security of both detainees and US personnel.

(b) Is within applicable legal, regulatory, and DoD policy guidelines.

(c) Is within the individual practitioner's professional ethical guidelines.

(d) Increases the effectiveness of the missions.

(3) BSCs function as Special Staff to the Commander in charge of both detention and interrogation operations. BSCs should be aligned to report directly to the Commander, not to a Commander charged solely with command of the detention facility or joint interrogation debriefing center (JIDC). This arrangement enhances the BSCs ability to provide comprehensive consultation regarding all subjects within the BSCs area of expertise on combined aspects of detention operations, intelligence interrogations and detainee debriefings.

(4) No matter the setting, BSCs have a responsibility to report information that constitutes a clear and imminent threat to the lives and welfare of others. Such information acquired from detainees should be treated no differently, and must be reported through proper channels.

(5) BSCs will become aware of all applicable policies and procedures regarding circumstances for protection and release of detainee medical information. The Health Insurance Portability and Accountability Act (HIPAA) does not apply to the medical records of detainees (DoD 6025 C5.1, C7.10, C7.11). Under US and international law and applicable medical practice standards, there is no absolute confidentiality of medical information for any person. However, the handling, disposition, and release of all types of medical records are governed by US Army regulation and theater-specific policies. Generally, only healthcare personnel engaged in a professional provider-patient treatment relationship with detainees shall have access to detainee medical records. However, whenever patient-specific medical information concerning detainees

is disclosed for purposes other than treatment, healthcare personnel shall record the details of such disclosure, including the specific information disclosed, the person to whom it was disclosed, the purpose of the disclosure, and the name of the medical unit commander (or other designated senior medical activity officer) approving the disclosure. Analogous to legal standards applicable to US citizens, permissible purposes include to prevent harm to any person, to maintain public health and order in detention facilities, and any lawful law enforcement, intelligence, or national security related activity. In any case in which the medical unit commander (or other designated senior medical activity officer) suspects that the medical information to be disclosed may be misused, he or she should seek a senior command determination that the use of the information will be consistent with applicable standards. For example, it would likely be necessary to reveal to detention and interrogation/debriefing staff information regarding food restrictions and allergies to ensure no inadvertent harm to a detainee. Likewise guards and interrogation teams would need to be advised about contagious conditions in order to take appropriate precautions to prevent the spread of disease from one detainee to others and to US personnel. It would also be necessary to release medical information to appropriate personnel about medications and other medical conditions prior to travel.

(6) BSCs will be alert for signs of maltreatment or abuse of detainees and report alleged or suspected abuse to proper authorities in accordance with DoDD 5100.77, DoDD 3115.09, and this policy. BSCs are obligated to report any actual, suspected or possible violations of applicable laws, regulations, and policies, to include allegations of abuse or inhumane treatment in accordance with DoDD 5100.77, DoDD 3115.09, and this policy statement. BSCs shall report those circumstances to the chain of command. BSCs who believe that such a report has not been acted upon properly should also report the circumstances to the technical chain, including the Military Department Specialty Consultant. Technical chain officials may inform the Joint Staff Surgeon or Surgeon General concerned, who then may seek senior command review of the circumstances presented. As always, other reporting mechanisms, such as the Inspector General, criminal investigation organizations, or Judge Advocates, also may be used.

(7) BSCs are authorized to make psychological assessments of the character, personality, social interactions, and other behavioral characteristics of detainees, including interrogation subjects, and, based on such assessments, advise authorized personnel performing lawful interrogations and other lawful detainee operations, including intelligence activities and law enforcement.

(8) BSCs may provide advice concerning interrogations of detainees when the interrogations are fully in accordance with applicable law and properly issue interrogation instructions. Sources of information on lawful interrogation procedures include DoDD 3115.09, FM 2-22.3 and other applicable law, regulation, and policy.

(9) BSCs may observe interrogations.

(10) BSCs may provide training for interrogators in listening and communications techniques and skills, results of studies and assessments concerning safe and effective interrogation methods, and potential effects of cultural and ethnic characteristics of subjects of interrogation.

(11) BSCs may advise command authorities on detention facility environment, organization, and functions, ways to improve detainee operations, and compliance with applicable standards concerning detainee operations.

(12) BSCs may advise command authorities responsible for determinations of release or continued detention of detainees of assessments concerning the likelihood that a detainee will, if released, engage in terrorist, illegal, combatant, or similar activities against the interests of the US.

(13) BSCs may consult at any time with the psychology or other applicable specialty consultant designated by The Surgeon General concerned for this purpose regarding the roles and responsibilities of BSCs and procedures for reporting instances of suspected noncompliance with standards applicable to detainee operations.

b. What BSCs will not do:

(1) BSCs will not support intelligence interrogations or detainee debriefings that are not in accordance with applicable law.

(2) BSCs will not use or facilitate the use, directly or indirectly, of physical or mental health information regarding any detainee in a manner that would result in inhumane treatment or would not be in accordance with applicable law.

(3) Although BSCs are qualified as healthcare providers, they do not hold clinical privileges to practice at the local command/staff or detainee healthcare facility (they may, however, maintain privileges at their parent medical facility). BSCs will take necessary steps to avoid multiple relationships that conflict with professional ethical guidelines.

(a) BSCs will not routinely provide medical care or behavioral healthcare to members of the command/staff they support.

(b) BSCs will not ordinarily provide medical care or behavioral healthcare to detainees (except in emergency circumstances in which no other healthcare providers can respond adequately). They may not provide medical screening to detainees (which is a healthcare function), nor be a medical monitor during interrogation.

(c) Absent compelling circumstances requiring an exception to the rule, healthcare personnel shall not within a three-year period serve in the same location both in a clinical function position and as a BSC.

(4) BSCs will not conduct any form of research that involves detainees (DoD 3216.2, para 4.4.2). Research includes any systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge. Certain kinds of descriptive studies and retrospective analyses that are not experimental in nature, but are based on experiences and observations, would not be prohibited.

(5) As in any setting, behavioral science personnel will not perform any duties they believe are illegal, immoral, or unethical. If behavioral science personnel feel they have been ordered to perform such duties, they should voice their concerns to and seek clarification from the chain of command. If the chain of command is unable to resolve the situation, BSCs should seek alternate means of resolution by contacting their Specialty Consultant. As always, other mechanisms, such as the Inspector General, criminal investigation organizations, or Judge Advocates, also may be used.

(6) BSCs will not display recognizable patches or other designations on uniforms identifying them as healthcare providers or medical personnel while supporting detention operations, intelligence interrogations, or detainee debriefings so as to avoid any misperceptions of the BSCs function or role.

(7) BSCs shall not conduct or direct interrogations.

6. Mission Essential Tasks. Understanding the limits of each of the functions below and establishing clear boundaries around these functions will allow BSCs to perform ethically in a field with many potential challenges. These boundaries also assist in establishing clear and proper relationships with command and staff.

a. Interrogation/Debriefing Assessment and Consultation. BSCs function in intelligence interrogation and detainee debriefing assessment is to evaluate the psychological strengths and vulnerabilities of detainees, and to assist in integrating these factors into a successful interrogation/debriefing process. BSCs who consult to the interrogation/debriefing processes are an embedded resource. They consult as the process unfolds and do not simply react to problems or obstacles that arise. This consultative process normally begins well before the actual interrogation.

b. Environmental Setting Consultation. BSCs, with their expertise in human behavior, can act as consultants to advise detention facility guards, military police, interrogators, military intelligence personnel, and the command on aspects of the environment that will assist in all interrogation and detention operations. The detention environment includes physical aspects of the facilities as well as social and behavioral aspects of detained population. The physical environment includes holding cells, hallways, toilet and bathing facilities, vehicles, and interrogation rooms. BSCs can provide insight into the likely effects of this environment and how changes may affect detainees. The social and behavioral aspects of the environment may include access to recreational and social activities, educational incentive programs, disciplinary plans and

procedures and strategies for increasing positive behavior and compliance with camp rules. The goal is to ensure that the environment maximizes effective detention and interrogation/debriefing operations, while maintaining the safety of all personnel, to include detainees. BSCs can assist in ensuring that everything that a detainee sees, hears, and experiences is a part of the overall interrogation plan. The purpose of this consultation is to optimize the conditions and maximize the interventions that elicit accurate and reliable information.

c. Indirect Assessment. BSCs may be called upon to provide psychological assessments of individual detainees. These assessments can be delivered in a written format, but more often are verbally communicated to detention operations/interrogation personnel in an informal and timely manner. These products will routinely address both basic personality characteristics and the detainee's strengths and vulnerabilities. This assessment is usually conducted as part of the interrogation assessment, but may be conducted independently of an interrogation, for example, for purposes of assessing the ability of a particular detainee to integrate with detainees in an established cell-block. This assessment is usually conducted by direct observation rather than direct interaction, interview, or administration of psychometric instruments.

d. Information Operations. BSCs may assist the command in developing and executing information operations plans.

e. Training.

(1) Another key function for BSC personnel is the training of guards, interrogators, interpreters, and other staff. Periodic training sessions reiterate standards and reinforce awareness of the subject matter, as well as foster a culture conducive to behavioral correction, peer monitoring, and self-assessment. The concomitant healthy training environment can prevent "behavioral drift" that, in the long term, would be detrimental to the mission. "Behavioral drift" is the continual reestablishment of new, often unstated and unofficial standards in an unintended direction. In addition, BSCs provide training to other personnel regarding the cultural aspects of behavior that impact on interrogations.

(2) BSCs may also conduct training on topics such as:

(a) Social and cultural characteristics of behavior considered acceptable in the target countries.

(b) Psychological aspects of detention and the impact of confinement.

(c) Psychological aspects of exploitation.

(d) Recognizing the use of resistance techniques by the detainee.

(e) Establishing and clarifying the roles of the supervisor, interrogator, guard, and the BSC.

(f) Identifying, interpreting, and managing behavioral drift.

(g) The psychology of persuasion and influence.

(3) In addition to providing training on the psychological aspects of detention, intelligence interrogation, and detainee debriefing, BSCs also serve as another set of "eyes and ears" for the Commander to ensure that guards and interrogators are regularly conducting training on Standing Operating Procedures. BSCs should identify and recommend to the chain of command areas of training that have either been neglected or are in need of review.

f. Command Consultation. Direct BSC consultation to the chain of command may help prevent the inclination of guards and interrogators to drift behaviorally from the proper execution of their mission. Essential to proper command consultation is the ability of BSCs to access directly, consult with, and advise, all personnel involved in detention operations, intelligence interrogations, and detainee debriefings (from the Commander to the most junior private, including DoD civilians and contractor employees). Ideally, while the BSC must coordinate with and interact productively with all members of the command and staff, as a member of the Commander's Special Staff a BSC must have the means to advise the Commander directly on matters that affect mission integrity. BSCs may serve as the Commander's on-site representatives and should have unrestricted access to detention, interrogation, and debriefing areas. In fact, BSCs should assist the Commander in monitoring as much of the detainee and interrogation/debriefing operations as possible. Behavioral drift can occur extremely rapidly and must be quickly corrected when it occurs. The goal is to address problems with tact and at the lowest level possible, while ensuring that the Command is informed of all issues and concerns noted, when appropriate. Although minor deviations can be corrected at the individual level and typically on the spot, more significant issues or a pattern of deviations should be addressed with the command. Passive oversight reinforces inappropriate behavior. Drift begins in as early as 36 hours without oversight. Again, intervention should occur at the lowest level. Safety should never be compromised. What is tolerated will occur. Issues must be documented as they arise.

g. Psychological Screening. Under some circumstances, it is possible for the BSC to provide screening of DoD military or civilian personnel, contractor employees, and other personnel prior to their assignment to a role interacting with detainees. This can greatly assist, though not eliminate, the risk of inappropriate behavior. The screening of interrogators may include an interview, objective and projective assessment instruments, and an estimate of intellectual functioning. The assessment should evaluate the prospective interrogator's qualities, including, but not limited to, motivation, alertness, patience and tact, credibility, objectivity, self-control, adaptability, perseverance, and personal appearance and demeanor. Individuals considered for an

assignment in which they would be required to interact with detainees also should possess more than adequate ability for conceptualization and problem solving, situational awareness, emotional stability, integrity, and a good self-concept. As well, they should also be open to criticism and feedback and have self-awareness.

7. Training Requirements. Note: any exceptions require approval by Assistant Surgeon General for Force Projection.

a. Prerequisites.

(1) Licensed for independent practice.

(2) Volunteer for the training and BSC mission. This does not imply that the BSC must be a volunteer for a specific assignment, rather that they understand the nature of the mission, the shift from non-combatant to combatant status and, if strongly opposed to the role, be afforded the opportunity to deploy in a non-BSC assignment.

(3) Final TOP SECRET security clearance. (This is not essential for the training, which can be conducted at the SECRET level, but will be essential for actual employment as a BSC).

(4) Completion of training required for designation of Skill Identifier M6 (Repatriation/Reintegration Psychologist). In lieu of this training, psychiatrists may be fellowship trained in forensic psychiatry with graduate level coursework in social psychology and learning theory.

b. Training in Interrogation Support will take approximately 136 hours and be conducted in a combination of distance learning (approximately 40 hours) and in-residence (approximately 12 days) phases. Training includes instruction in the following topics:

(1) US and international law, regulations, and DoD policy applicable to detention operations, intelligence interrogations, and detainee debriefings, including:

(a) AR 190-8.

(b) The Geneva Convention Relative to the Treatment of Prisoners of War and The Geneva Convention Relative to the Protection of Civilian Persons in Time of War.

(c) How to keep abreast of those legal actions and policy decisions that are rendered during an assignment, e.g., policies on legal status of detainees or approved interrogation techniques, that may influence operations or result in procedural changes.

(d) Definitions and standards of acceptable treatment of detainees.

(2) Ethical standards for psychologists or psychiatrists applicable to detention operations, intelligence interrogations, and detainee debriefings. This will include a discussion of common ethical issues and how to resolve ethical conflicts.

(a) Current ethical guidance provided by professional associations.

(b) Discussion of examples of ethical dilemmas.

(3) Fundamentals of US Army doctrine on detainee operations. This includes the structure, organization, and functions of Military Police and other guard force personnel in detention operations.

(4) Fundamentals of US Army doctrine on intelligence interrogation and detainee debriefing operations. This includes the structure, organization, and functions of Military Intelligence within the DoD, as well as reporting mechanisms and systems, nomenclature and missions of Military Intelligence personnel, and security classification guidelines for anticipated assignment location(s).

(5) An overview of information operations and the roles they play in interrogation/detention operations.

(6) Application of the following areas of behavioral science to the interrogation/debriefing processes (note: professional level expertise in these areas is a prerequisite to training).

(a) Personality development with particular attention to relevant cultural factors.

(b) Personality assessment with particular attention to relevant cultural factors.

(c) Learning theory.

(1) Operant conditioning.

(2) Classical conditioning.

(3) Cognitive behavior theories.

(d) Learned helplessness.

(e) Cognitive dissonance theory.

(f) Psychology of influence and persuasion.

(7) Review of the psychology research on the social processes that may lead to detainee abuse. This will include instruction on moral disengagement, the potential of psychological drift, and successful control processes that may reduce the incidence of abuse, as well as a review of the research on the social effects of disparate power relationships.

(8) Instruction on providing psychological oversight of detention operations, intelligence interrogations, and detainee debriefings. This instruction will build on material described in paragraphs noted above and will discuss, in detail, the manner and methods of establishing oversight, and how to put into practical use the theoretical knowledge of the group processes that may lead to detainee abuse.

(9) Review of the psychological aspects of captivity, capitalizing on the previous training the student has received. Particular attention will be paid to the emotional effects of captivity and the use of resistance techniques, including, but not limited to, a discussion of the Al Qaeda Training Manual.

(10) Instruction in the indirect and observational assessment of detainees. This will include a review of personality factors, cultural issues, and an update on current populations.

(11) Instruction and role playing in behavioral science consultation to the interrogation process.

(12) Instruction on providing consultation to Commanders concerning detention operations, intelligence interrogations, and detainee debriefings.

(13) Cultural, religious, and ideological issues regarding the specific populations under consideration, e.g., history of Islam, development of radical Islam and extremism. This would also include the impact of cultural issues on detention operations.

(14) Education on the missions and roles of various US Government departments and Agencies, foreign government organizations, and non-governmental organizations present in the theater.

8. Ethics.

a. Psychologists and psychiatrists are bound by both legal and ethical constraints when supporting detention operations, intelligence interrogations, and detainee debriefings. Every BSC who supports such operations must know the requirements of applicable US and international law, regulation, and DoD policy regarding the treatment of detainees. The BSCs involved in interrogation/debriefing support strive to help DoD to develop informed judgments and choices concerning human behavior. Further, because of the particularly sensitive and dynamic nature of detention operations,

intelligence interrogations and detainee debriefing operations, it is important to emphasize the ethical standards associated with BSC support to such.

b. BSCs have specific knowledge, training, and experience that can ensure the ethical treatment of detainees. A clear understanding of the social and behavioral forces that influence power relationships is essential when operating in this environment. Ethical standards are similar as to the separate professions of psychology and psychiatry, but they are not identical. Because of this, each profession will be addressed separately.

c. Psychologists:

(1) The ethical requirements for psychologists are contained in the American Psychological Association's Ethical Principles of Psychologists and Code of Conduct (APA, 2002) and in the Report on the American Psychological Association Presidential Task Force on Psychological Ethics and National Security (2005).

(2) The ethical principles are guidance for the professional activities of psychologists. The Ethics Code is binding on all psychologists who are members of the APA and all those who are licensed by a State Psychology Licensing board that requires adherence to the code. All military psychologists are required to maintain State licensure. Therefore, the Ethics Code is an applicable guideline for military psychologists. Sanctions for violations of the Ethics Code can include the revocation of a psychologist's State license, placing the psychologist's military standing in jeopardy.

(3) The following identifies several aspects of the Ethics Code that necessitate interpretation, given the practice of support for detention operations, intelligence interrogations, and detainee debriefings: Relevant sections of the Introduction, Preamble, General Principles, and Ethics Code are discussed and interpreted as well as the relevant legal requirements.

(4) The Balance of Law, Duty, and the Ethics Code.

(a) DA military, civilian, and contractor employee psychologists are governed by applicable US and international law, regulations, and DoD policy. The Ethics Code also applies as discussed above.

(b) The Ethics Code pertains only to a psychologist's activities that are "part of their scientific, educational or professional roles" pertaining to the profession of psychology. The Code does not, therefore, have purview over the psychologist's role as a Soldier, civilian, or contractor employee that is unrelated to the practice of psychology. For instance, the dictum for beneficence does not pertain to actions against the enemy in combat.

(c) Conversely, the Ethics Code is broad in its application. It pertains to all psychologists (military, civilian, or contractor employee) in the performance of their profession. US State licensing boards use the Ethics Code as a standard for behavior, requiring compliance with the code to maintain licensure. The Ethics Code does not supersede applicable US and international law, regulations, or DoD policy.

(d) Ignorance of the Ethics Code does not excuse violations. A lack of awareness or misunderstanding of an Ethical Standard is not itself a defense to a charge of unethical conduct.

(e) The method of resolving conflicts between the law and regulations with the Ethics Code are addressed by the Code, as follows: "When the psychologist's responsibilities conflict with the law, regulations, or other governing legal authority, psychologists make known their commitment to this Ethics Code and take steps to resolve the conflict in a responsible manner. If . . . irresolvable . . . , psychologists may adhere to the requirements of the law, regulations . . . in keeping with basic principles of human rights (Introduction; 1.02; 1.03)." A process for maintaining adherence to the Code when it conflicts with applicable law, regulation, and policy is outlined below:

(i) Address and attempt to resolve the issue.

(ii) If initially not resolvable, consult with a psychologist experienced in detention operations/interrogation and debriefing support.

(iii) If the issue continues to elude resolution, adhere to law, regulations, and policy in a responsible manner.

(iv) Again, as noted above, applicable US and international law, regulations, and DoD policy require the humane treatment of all detainees, regardless of status. This tenet is completely consistent with the Ethics Code.

(5) Issues of Harm and Exploitation.

(a) The Ethics Code (3.04), states, "Psychologists take reasonable steps to avoid harming their clients/patients, students, supervisees, research participants, organizational clients, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable."

(b) This is consistent with the GPW, GC, and AR 190-8, all of which require the humane treatment of all detainees. The psychologist must make a reasonable effort to prevent unavoidable harm to detainees and to treat all persons with dignity and respect. One function of the psychologist supporting detention operations, intelligence interrogations, and detainee debriefings is to assist the command in preventing abuse of detainees and in monitoring the detention environment. This does not preclude the psychologist from assisting in interrogations or debriefings, even if they may result in

consequences to the detainee such as: a determination that the detainee will not be recommended for early release prior to the termination of the conflict; or long-term post-trial confinement pursuant to conviction of war crimes or acts of terrorism.

(6) Boundaries of Competence.

(a) The Ethics Code states that "Psychologists provide services . . . with populations and in areas only within the boundaries of their competence, based on their education, training, supervised experience, consultation, study or professional experience (2.01 Boundaries of Competence)." There is no certification process, to date, that exists for detention operations or interrogation/debriefing support. Furthermore, there is little information and research published on this practice. Often, psychologists are pushed forward on the battlefield, beyond readily accessible supervision or consultation, or are otherwise placed in positions without access to other psychologists trained in this area.

(b) As paragraph 2.01 of the Ethics Code states, in those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to ensure the competence of their work and to protect . . . others from harm." Therefore, the psychologist should make attempts to regularly consult with other psychologists experienced in this area. When confronted with an ethical dilemma, the psychologist must make attempts at consultation. If unable to consult because of time constraints, isolation from other psychologists, or Operational Security requirements, the psychologist will later make attempts to seek consultation. The Military Department Specialty Consultant should review, prior to their submission, all recommended policies related to detention operations, interrogations, or debriefings, originating from the individual BSC or BSCT supporting those operations. If mission requirements prevent review, any such documents should be presented to the Specialty Consultant as soon as practicable.

(c) Furthermore, the psychologist must be cognizant of changes and developments within the field of psychological support for detention operations, intelligence interrogations, and detainee debriefings. The psychologist should take every opportunity to "develop and maintain their competence (paragraph 2.03)" in this emerging field. The psychologist has a responsibility to evaluate and improve his or her job performance. The psychologist must be aware of all current policy requirements and command guidance concerning the conduct of interrogations and detention operations. Cultural awareness is also necessary to provide psychological support to interrogation operations.

(7) Multiple Relationships.

(a) While performing the duties related to detention operations, intelligence interrogations, or detainee debriefings, the BSC functions as a Command Psychologist. The client is the command and the DoD. It is not possible, in this environment, to avoid all multiple relationships. Psychologists employed by the military (military, civilian, and

contractor employees), like psychologists in small communities, must be keenly aware of the nature of these multiple relationships.

(b) Except under emergency circumstances, the psychologist consulting for detention or interrogation/debriefing operations does not conduct mental health evaluations or provide mental health treatment to detainees. All medical treatment for detainees, to include mental health evaluation and treatment, is provided by a designated medical element. The psychologist will take all reasonable steps to ensure that he or she is not perceived as a healthcare provider for detainees.

(c) When concerns about health status or medical condition of detainees are raised through observation by the psychologist, through inquiries by others involved in detention operations, by interrogators, or through other reporting mechanisms, these concerns will be conveyed to medical personnel for evaluation, treatment, and disposition.

(d) The issue of multiple relationships is addressed in paragraph 3.05 of the Ethics Code. "A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist's objectivity, competence, or effectiveness . . . or otherwise risks exploitation or harm to the person with whom the professional relationship exists." The Code goes on to say that, "Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical."

(e) Only in case of an emergency (for example, when no other healthcare providers can respond adequately) will the psychologist supporting detention operations, intelligence interrogations, or detainee debriefings break with their function and provide emergency services "to ensure that services are not denied (paragraph 2.02)." Furthermore, "the services are discontinued as soon as the emergency has ended or appropriate services are available (paragraph 2.02)."

(f) Psychologists supporting detention operations, intelligence interrogations, and detainee debriefings must always be alert to the risk of multiple relationships. For example, it would probably be inappropriate for a psychologist to conduct long-term psychological therapy with an interrogator that is working alongside the psychologist. On the other hand, brief consultation with the same interrogator on a personal issue relevant to the interrogators ability to interrogate effectively may be appropriate in certain circumstances. The psychologist, in consultation with other psychologists, if possible, must evaluate each situation and act in order to minimize the risk of harm.

(8) Informed Consent.

(a) Except as discussed above, psychologists supporting detention operations, intelligence interrogations, or detainee debriefings do not have a medical or mental health relationship with detainees. Ordinarily, they do not directly interact with

detainees, they do not provide services to detainees, nor do they routinely engage in psychological testing of detainees. The DoD is the identified client, the organization the psychologist is supporting. Although it is possible for exceptions to be made to the above proscriptions, it should only be done after careful thought and consultation with other experienced psychologists.

(b) The Code of Ethics (3.11(a)) states, "Psychologists delivering services to or through organizations provide information beforehand to clients and when appropriate those directly affected by the services about . . ." Psychologists supporting interrogations will discuss with the organization the limits and purpose of the assessment; it is not appropriate, given the functions of the psychologist in this role and the DoD, to inform the detainee that he is being assessed by a psychologist. In fact, it would increase the likelihood of misunderstanding by the detainee of the psychologist's role.

(c) The Code of Ethics (3.10(b)) also states, "When consent by a legally authorized person is not permitted or required by law, psychologists take reasonable steps to protect the individual's rights and welfare." Any psychologist, whether supporting interrogations or not, has a duty to ensure the humane treatment of all detainees. This duty is not diminished by the nature of the detainee's acts prior to detainment.

(9) The June 2005 Report of the American Psychological Association Presidential Task Force on Psychological Ethics and National Security issued the following twelve statements concerning the work of BSCs to interrogation and detention operations:

(a) Psychologists do not engage in, direct, support, facilitate, or offer training in torture, or other cruel, inhuman, or degrading treatment.

(b) Psychologists are alert to acts of torture and other cruel, inhuman, or degrading treatment and have an ethical responsibility to report these acts to the appropriate authorities.

(c) Psychologists who serve in the role of supporting an interrogation do not use healthcare-related information from an individual's medical record to the detriment of the individual's safety and well-being.

(d) Psychologists do not engage in behaviors that violate the laws of the United States, although psychologists may refuse for ethical reasons to follow laws or orders that are unjust or that violate basic principles of human rights.

(e) Psychologists are aware of and clarify their role in situations where the nature of their professional identity and professional function may be ambiguous.

(f) Psychologists are sensitive to the problems inherent in mixing potentially inconsistent roles such as healthcare provider and consultant to an interrogation and refrain from engaging in such multiple relationships.

(g) Psychologists may serve in various national security-related roles, such as a consultant to an interrogation, in a manner that is consistent with the Ethics Code, and when doing so psychologists are mindful of factors unique to these roles and contexts that require special ethical consideration.

(h) Psychologists who consult on interrogation techniques are mindful that the individual being interrogated may not have engaged in untoward behavior and may not have information of interest to the interrogator.

(i) Psychologists make clear the limits of confidentiality.

(j) Psychologists are aware of and do not act beyond their competencies, except in unusual circumstances, such as set forth in the Ethics Code.

(k) Psychologists clarify for themselves the identity of their client and retain ethical obligations to individuals who are not their clients.

(l) Psychologists consult when they are facing difficult ethical dilemmas.

d. Psychiatrists:

(1) The ethical requirements for psychiatrists are contained in the American Psychiatric Association's Opinions of the Ethics Committee on The Principles of Medical Ethics with annotations especially applicable to Psychiatry (2001) (including November 2003 amendments) and in the Ethics Primer of the American Psychiatric Association (2001), particularly the chapter devoted to Ethics and Forensic Psychiatry. These do not directly address the question of physician involvement in behavioral science consultation, as discussed in this document.

(2) The Council on Ethical and Judicial Affairs of the American Medical Association met in June 2006 and produced a report with the subject of: Physician Participation in Interrogation. This report contains five recommendations. These guidelines are listed and discussed here. The entire report follows as an enclosure.

(a) First Guideline. Physicians may perform physical and mental assessments of detainees to determine the need for and to provide medical care. When so doing, physicians must disclose to the detainee the extent to which others have access to information included in medical records. Treatment must never be conditional on a patient's participation in an interrogation.

(i) Various Opinions in the AMA's Code of Medical Ethics suggest that physician interactions under the authority of third parties are governed by the same ethical principles as interactions involving patients.

(ii) Physicians who provide medical care to detainees should not be involved in decisions whether or not to interrogate because such decisions are unrelated to medicine or the health interests of an individual.

(b) Second Guideline. Physicians must neither conduct nor directly participate in an interrogation, because a role as physician-interrogator undermines the physician's role as healer and thereby erodes trust in the individual physician-interrogator and in the medical profession.

(i) Physicians are not trained as interrogators, and to function as an interrogator would potentially cause significant role confusion that would generalize to other physicians.

(ii) Although physicians who provide medical care to detainees should not be involved in decisions whether or not to interrogate because such decisions are unrelated to medicine or the health interests of an individual, physicians who are not providing medical care to detainees may provide such information if warranted by compelling national security interests.

(iii) Specific guidance by a physician regarding a particular detainee based on medical information that he or she originally obtained for medical purposes constitutes an unacceptable breach of confidentiality. However, a physician functioning as a BSC should never be providing medical care to detainees, and would therefore never obtain medical information for treatment purposes.

(c) Third Guideline. Physicians must not monitor interrogations with the intention of intervening in the process, because this constitutes direct participation in interrogation.

(i) The presence of a physician at an interrogation, particularly an appropriately trained psychiatrist, may benefit the interrogatees because of the belief held by many psychiatrists that kind and compassionate treatment of detainees can establish rapport that may result in eliciting more useful information.

(ii) A physician may be requested or required to treat a detainee to restore capacity to undergo interrogation. If there is no reason to believe that the interrogation was coercive, this is not unethical. As with all patients, physicians should not treat detainees without their consent (see Opinion E-8.08, "Informed Consent"), unless there is an emergency situation. Moreover, in obtaining consent for treatment, implications of restoring health, including disclosure that the patient may be interrogated or an interrogation may be resumed, must be disclosed.

(iii) If a physician identifies physical or psychological injuries that are likely to have occurred during an interrogation, the physician must report such suspected or known abusive practices to appropriate authorities, as must any other service member or DoD employee.

(d) Fourth Guideline. Physicians may participate in developing effective interrogation strategies for general training purposes. These strategies must not threaten or cause physical injury or mental suffering and must be humane and respect the rights of individuals.

(i) The Army defines training as instruction of personnel to increase their capacity to perform specific military functions and associated individual and collective tasks. General training is herein defined as the education, instruction, or discipline of a person or thing that is being trained. The Army conducts general training every day in all environments and after every mission, including interrogations.

(ii) Some physicians, most often psychiatrists, may engage in activities that are closely linked to interrogations. As in the civilian world, physicians sometimes provide consultations to law enforcement officers, for example, in criminal profiling and hostage negotiations.

(iii) Physicians could enhance the likelihood of successful interrogation by identifying useful strategies, by providing information that may be useful during questioning. Furthermore, physicians may protect interrogatees if, by monitoring, they prevent coercive interrogations.

(iv) Physicians have long dealt with problems of dual loyalties in forensic roles and as employees of government and business. The same ethical considerations that guide physicians under those circumstances also guide them in matters related to interrogation. The question of whether it is ethically appropriate for physicians to participate in the development of interrogation strategies may be addressed by balancing obligations to society against those to individuals.

(e) Fifth Guideline. When physicians have reason to believe that interrogations are coercive, they must report their observations to the appropriate authorities. If authorities are aware of coercive interrogations but have not intervened, physicians are ethically obligated to report the offenses to independent authorities that have the power to investigate or adjudicate such allegations.

(i) Any physician involved with individuals who will undergo or have undergone interrogations should have current knowledge of known harms of interrogation techniques. If responsible authorities do not prohibit a clearly harmful interrogation strategy, physicians are ethically obligated to report the offenses to

independent authorities that have the power to investigate or adjudicate such allegations.

(ii) If a physician identifies physical or psychological injuries that are likely to have occurred during an interrogation, the physician must report such suspected or known abusive practices to appropriate authorities.

(iii) A physician may help to develop general guidelines or strategies, as long as they are not coercive and are neither intended nor likely to cause harm, and as long as the physician's role is strictly that of consultant, not as caregiver. It is unethical for a physician to provide assistance in a coercive activity.



DEPARTMENT OF THE ARMY
OFFICE OF THE SURGEON GENERAL
7700 ARLINGTON BOULEVARD
FALLS CHURCH, VIRGINIA 22042-5140

REPLY TO
ATTENTION OF

OTSG/MEDCOM Policy Memo 13-027

DASG-ZB

08 MAY 2013

Expires 8 May 2015

MEMORANDUM FOR COMMANDERS, MEDCOM MAJOR SUBORDINATE
COMMANDS

SUBJECT: Behavioral Science Consultation Policy

1. Purpose: To discuss the background, definitions, mission, concept of operations, roles, training requirements, and ethics for personnel providing behavioral science consultation to intelligence collection and detention operations. The mission of a behavioral science consultant is to provide psychological expertise and consultation in order to assist the command in conducting safe, legal, ethical, and effective detention operations, intelligence interrogations, and detainee debriefing operations.

2. Proponent: The proponent for this policy is the Assistant Surgeon General for Force Projection, Office of The Surgeon General.

3. Policy details are enclosed.

FOR THE SURGEON GENERAL:

A handwritten signature in black ink, appearing to read "R. A. Stone", written over a horizontal line.

RICHARD A. STONE
Major General, US Army
Deputy Surgeon General

5 Encls

1. BSC Policy Details
2. APA PENS Report
3. CEJA Report
4. APA Position Statement
5. AAPL Ethics Guidelines for the Practice of Forensic Psychiatry



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DEPARTMENT OF DEFENSE
HEADQUARTERS, JOINT TASK FORCE GUANTANAMO
U.S. NAVAL BASE, GUANTANAMO BAY, CUBA
APO AE 09360

JTF-GTMO-JIG-BSCT

10 December 2004

MEMORANDUM FOR Joint Intelligence Group, Joint Task Force - Guantanamo, APO AE 09360

SUBJECT: Operational Policy Memorandum # 14, Behavioral Science Consultation Team (BSCT)

1. **Purpose:** The purpose of this instruction is to establish policy for the operations of the Behavioral Science Consultation Team (BSCT), Joint Interrogation Group (JIG), Joint Task Force-Guantanamo Bay, Cuba (JTF-GTMO).

2. **Scope:** This policy document applies to all personnel assigned to the BSCT.

3. **BSCT Personnel:**

a. BSCT Chief (BSCT1): Clinical Psychologist, USA, 73B. Chief, responsible for all issues relating to BSCT operations. Develops detailed BSCT policies and operating procedures. Reports to the Director, JIG; coordinates with the Commander, Joint Detention Operations Group (JDOG); and, as directed, provides special staff officer functions to the Commander, JTF-GTMO.

b. Assistant BSCT Chief (BSCT2): Clinical Psychologist, USAF, 42P3. Assumes duties of BSCT1 in his/her absence. Provides consultation and interrogation support to the Interrogation Control Element (ICE). Works with JDOG-S2 (Counter-Intelligence) to identify trends in detainee behavior (b)(2)

(b)(2) Supports Deployment Cycle Support program by providing training on Posttraumatic Stress and Anger Management for personnel departing JTF-GTMO.

c. BSCT NCOIC (BSCT3): Mental Health Specialist, USA, 91X. Provides consultation and interrogation support to the ICE. Assesses camp climate and provides feedback to BSCT1 on issues and trends.

4. **Mission:** Provide psychological consultation in order to support safe, legal, ethical, and effective interrogation and detention operations at JTF-GTMO.

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JTF-GTMO-JIG-BSCT

SUBJECT: Operational Policy Memorandum # 14, Behavioral Science Consultation Team (BSCT)

5. Objectives:

a. Provide psychological expertise to assess the individual detainee and his environment, and to provide recommendations to enhance the effectiveness of interrogation operations.

b. Use psychological expertise to provide monitoring, consultation, and feedback regarding the entire detainee environment in order to assist the command in ensuring humane treatment of detainees, the prevention of abuse, and the safety of U.S. personnel.

6. Mission Essential Tasks:

a. Provides consultation to interrogation staff in support of the intelligence collection mission.

b. Monitors interrogations and other staff-detainee interactions; provides consultation on policies and strategies for ensuring the safety of detainees and JTF-GTMO personnel; provides direct feedback to command on issues involving psychological risk factors affecting detainee operations.

c. Monitors behavioral trends in the detainee population and integrate findings into consultation in support of interrogation and detention operations.

d. Provides selected JIG and JDOG personnel with training on behavioral, psychological, cultural, and religious issues pertaining to the detainee population.

e. Advises JIG and JDOG on use of materials for the library and sits on the advisory board.

f. Provides assistance in the development of psychological operations plans and consultation on the utilization of products developed by Psychological Operations team.

g. Assists in the development of detention facility behavior management plans.

h. Consults with JTF Commander on detainee issues, staff issues, and camp dynamics, and provides recommendations on ways to improve camp operations.

JTF-GTMO-JIG-BSCT

SUBJECT: Operational Policy Memorandum # 14, Behavioral Science Consultation Team (BSCT)

7. Mental Health and Medical Services:

a. BSCT personnel do not conduct mental health evaluations or provide mental health treatment to detainees or JTF-GTMO personnel. The Joint Medical Group provides all medical treatment, including mental health evaluation and treatment, for detainees and JTF-GTMO personnel. Services for detainees are provided through the Detention Hospital, Detention Clinic, and Detainee Behavioral Health Service. Services for JTF-GTMO personnel are provided through the Combat Stress Control, Joint Aid Station, and U.S. Naval Hospital, GTMO. BSCT Personnel will take all reasonable steps to ensure that they are not perceived as health care providers for detainees or JTF-GTMO personnel.

b. When concerns about health status or medical condition of detainees are raised through observation by BSCT personnel, through inquiries raised by interrogators or other reporting mechanisms, these concerns will be conveyed to medical personnel for evaluation, treatment, and disposition.

8. Point of Contact: The point of contact for this Operational Policy Memorandum is the (b)(6)

(b)(6)

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DEPARTMENT OF DEFENSE
JTF GTMO
GUANTANAMO BAY, CUBA
APO AE 09360

JTF GTMO-BSCT

11 November 2002

MEMORANDUM FOR Record

SUBJECT: BSCT Standard Operating Procedures

1. Purpose. The purpose of this memorandum is to establish procedures for the daily operation and administration of the BSCT working under the Joint Interrogation Group (JIG) of JTF GTMO.

2. Personnel. The BSCT is comprised of the following U.S. Army occupational specialties.
a. 1 Clinical Psychologist, 73B.
b. 1 Psychiatrist, 60W.
c. 1 Mental Health Specialist, 91X.

3. Mission. Provide behavioral science consultation in support of JTF GTMO's interrogation mission.

4. Mission Essential Tasks.

a. Consult on interrogation approach techniques.

1. [REDACTED]

2. [REDACTED]

3. [REDACTED]

b. [REDACTED]

c. [REDACTED]

d. Assist in the development of detention facility behavior management plans.

e. Act as a liaison between the JIG and the JTF GTMO medical assets. Describe the implications of medical diagnoses and treatment for the interrogation process.

f. Support good stress management, morale, cohesion and organizational functioning in the JIG.

b(1)

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JTF GTMO-BSCT
SUBJECT: BSCT SOP

5. Referral Process for Consultations to Support Interrogation. Interrogators may request consultation by contacting any member of the BSCT at [REDACTED] (b)(2)

6. Detainee Mental Health Evaluations and Medical Care.

a. Interrogators should contact the JTF GTMO camp medical clinic at [REDACTED] to request a mental health evaluation for a detainee. (b)(2)

b. The BSCT does not conduct medical evaluation or treatment of detainees and does not participate in determining medical treatment protocols for detainees.

c. The health status of detainees is solely the responsibility of the JTF GTMO medical staff.

d. The BSCT is available on request to observe a detainee to provide input on the appropriateness of a mental health referral for that individual.

7. Security Clearance. All members of the BSCT will have a clearance of Secret or higher.

8. Point of contact for these SOP is [REDACTED] (b)(2), (b)(6)

[REDACTED] (b)(6)

[REDACTED] (b)(6)



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DEPARTMENT OF DEFENSE
HEADQUARTERS, JOINT FORCE COMMAND GUANTANAMO
U.S. NAVAL BASE, GUANTANAMO BAY, CUBA
APO AE 09360

JTF-GTMO-JIG-BSCT

10 December 2004

MEMORANDUM FOR Joint Intelligence Group, Joint Task Force - Guantanamo, APO AB 09360

SUBJECT: Operational Policy Memorandum # 14, Behavioral Science Consultation Team (BSCT)

1. **Purpose:** The purpose of this instruction is to establish policy for the operations of the Behavioral Science Consultation Team (BSCT), Joint Interrogation Group (JIG), Joint Task Force-Guantanamo Bay, Cuba (JTF-GTMO).

2. **Scope:** This policy document applies to all personnel assigned to the BSCT.

3. **BSCT Personnel:**

a. **BSCT Chief (BSCT1):** Clinical Psychologist, USA, 73B. Chief, responsible for all issues relating to BSCT operations. Develops detailed BSCT policies and operating procedures. Reports to the Director, JIG; coordinates with the Commander, Joint Detention Operations Group (JDOG); and, as directed, provides special staff officer functions to the Commander, JTF-GTMO.

b. **Assistant BSCT Chief (BSCT2):** Clinical Psychologist, USAF, 42P3. Assumes duties of BSCT1 in his/her absence. Provides consultation and interrogation support to the Interrogation Control Element (ICE). Works with JDOG-S2 (Counter-Intelligence) to identify trends in detainee behavior.

Supports (6)(2)
Deployment Cycle Support program by providing training on Posttraumatic Stress and Anger Management for personnel departing JTF-GTMO.

c. **BSCT NCOIC (BSCT3):** Mental Health Specialist, USA, 91X. Provides consultation and interrogation support to the ICE. Assesses camp climate and provides feedback to BSCT1 on issues and trends.

4. **Mission:** Provide psychological consultation in order to support safe, legal, ethical, and effective interrogation and detention operations at JTF-GTMO.

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REF: OPFMO-TC-ESCT

SUBJECT: Operational Policy Memorandum # 14, Support and Liaison Functions (ESCT)

I. Objectives:

a. Provide psychological expertise to assess the individual and organizational environment and to provide recommendations to enhance the effectiveness of organizational operations.

b. Use psychological expertise to provide monitoring, recommendations, and feedback regarding the organizational environment in order to assist the command in assessing the operational readiness of personnel, the prevention of stress, and the safety of U.S. personnel.

II. Functional Tasks:

a. Provide coordination to interagency staff in support of the staff liaison and liaison activities.

b. Monitor interagency and other staff liaison functions, provide recommendations, and provide assistance for ensuring the timely coordination and U.S. military personnel, provide direct feedback to command on issues in order to improve the effectiveness of the liaison function.

c. Monitor behavioral needs in the interagency and interagency staff liaison and provide coordination support of interagency and interagency operations.

d. Provide selected JIC and JEOC personnel with training on behavioral, psychological, cultural, and religious issues pertaining to the defined population.

e. Advise JIC and JEOC on use of materials for the library and other on-site library needs.

f. Provide assistance in the development of psychological operations plans and coordination on the execution of operations for the JIC and JEOC.

g. Assist in the development of decision-making and/or management plans.

h. Cooperate with JIC Command on decision-making and/or management and provide recommendations on ways to improve such operations.

UNCLASSIFIED

SECURITY CLASSIFICATION

UNCLASSIFIED//FOR OFFICIAL USE ONLY (U//FOUO)

1. General Description of the Information

a. This document is a... (b)(6)

b. This document is a... (b)(6)

2. Information on the Organization of the Document

(b)(6)

(b)(6)

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**Behavioral Science Consultation Team
Joint Intelligence Group, Joint Task Force-GTMO
Standard Operating Procedures (U)**

28 March 2005

1. (U) Purpose. The purpose of this document is to establish Standard Operating Procedures (SOP) for the daily operation and administration of the Behavioral Science Consultation Team (BSCT), Joint Interrogation Group (JIG), Joint Task Force-Guantanamo Bay, Cuba (JTF-GTMO).

2. (U) Scope. This SOP applies to all personnel assigned to the BSCT and supersedes the previous BSCT SOP.

3. (U) BSCT Personnel.

a. (U) BSCT Chief (BSCT1). Clinical Psychologist, USA, 73B. Chief, responsible for all issues relating to BSCT operations. Develops detailed BSCT policies and operating procedures. Reports to the Director, JIG; coordinates with the Commander, Joint Detention Operations Group (JDOG); and, as directed, provides special staff officer functions to the Commander, JTF-GTMO. In the event that the USAF 42P3 is senior in rank to the USA 73B, JIG Director will designate team chief based on experience and training in interrogation support.

b. (U) Assistant BSCT Chief (BSCT2). Clinical Psychologist, USAF, 42P3. Assumes duties of BSCT1 in his/ her absence. Provides consultation and interrogation support to the Interrogation Control Element (ICE). Works with JDOG-S2 (Counter-Intelligence) to identify trends in detainee behavior

1(2)

may support Deployment Cycle Support program by providing training on Posttraumatic Stress and Anger Management for personnel departing JTF-GTMO.

c. (U) BSCT NCOIC (BSCT3). Mental Health Specialist, USA, 91X. Provides consultation and interrogation support to the ICE. Assesses camp climate and provides feedback to BSCT1 on issues and trends. May provide training in behavioral principles/ management to ICE and JDOG personnel; may support Deployment Cycle Support program by providing training on Posttraumatic Stress and Anger Management for personnel departing JTF-GTMO.

4. (U) Mission. Provide psychological consultation in order to support safe, legal, ethical, and effective detention and interrogation operations at JTF-GTMO.

5. (U) Objectives.

a. (U) Provide psychological expertise to assess the individual detainee and his environment; provide recommendations to enhance the effectiveness of interrogation operations.

b. (U) Use psychological expertise to provide monitoring, consultation, and feedback regarding the entire detainee environment in order to assist the command in ensuring humane treatment of detainees, the prevention of abuse, and the safety of U.S. personnel.

CLASSIFIED BY: JTF-GTMO Classification Guide dated 10 June 2004
REASON: 1.4(C) or Intelligence Activity, Source, or Methods
DECL ON: 28 March 2030

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DODDON-000760

JTF-GTMO-JIG-BSCT
SUBJECT: BSCT SOP (U)

6. (U) Mission Essential Tasks.

a. (U) Provides consultation to interrogation staff in support of the intelligence collection mission.

(1) (S)

[REDACTED]

(b)(1)

(2) (S)

[REDACTED]

(b)(1)

(a) (U//FOUO)

(b)(2)

[REDACTED]

(b) (S)

(b)(1)

[REDACTED]

(b)(1)

(3) (S)

[REDACTED]

b. (U) Monitors interrogations and other staff-detainee interactions; provides consultation on policies and strategies for ensuring the safety of detainees and JTF-GTMO personnel; provides direct feedback to command on issues involving psychological risk factors affecting detainee operations.

(1) (U) Provide psychological oversight to ensure that staff-detainee interactions are safe for both detainees and U.S. personnel. Immediately call attention to and appropriately report any interactions that are considered unsafe, unethical, illegal or in violation of applicable policies and procedures.

(2) (U) Provide feedback to command in verbal or written form to JIG Director, JDOG Commander, or JTF Commander, as appropriate, regarding potential risks to detainees and U.S. personnel at JTF-GTMO.

(3) (U//FOUO)

(b)(2)

[REDACTED]

JTF-GTMO-JIG-BSCT
SUBJECT: BSCT SOP (U)

c. (U) Monitors behavioral trends in the detainee population and integrates findings into consultation in support of interrogation and detention operations.

(b)(1)(1) (S) [REDACTED]

(b)(1) (2) (S) [REDACTED]

(b)(1)(3) (S) [REDACTED]

d. (U) Provides selected JIG and JDOG personnel with training on behavioral, psychological, and cultural issues pertaining to the detainee population.

(b)(2)(1) (U//FOUO) [REDACTED]

(b)(2)(2) (U//FOUO) [REDACTED]

(3) (U//FOUO) Provides training to facilitate the maintenance of a stable and secure detention environment, such as appropriate ways to respond to detainee misbehavior, recognition and reporting of behavior patterns, minimizing transfer of information from guard staff to detainees, and strategies for increasing pro-American sentiment.

(4) (U) Provides training to increase awareness of religious and cultural issues unique to the detainee population, such as proper handling of Qur'ans, ways to demonstrate respect for religious practices, and special practices during religious holidays (e.g., Ramadan).

e. (U) Advises JIG and JDOG on use of materials for the Detainee Library and sits on the Library Advisory Board.

(1) (U) Participates on Library Advisory Board to review library materials and advise JIG and JDOG on future acquisitions.

(2) (U) As a member of the Board, reviews library operations and forwards recommendations to the JIG Director and JDOG commander

(S) [REDACTED] (b)(1)

(1) (S) [REDACTED] (b)(1)

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JTF-GTMO-JIG-BSCT
SUBJECT: BSCT SOP (U)

(2) (S)

(b)(1)

(3) (S)

g. (U) Assists in the development of detention facility behavior management plans.

(1) (U) Consults with JDOG S-3, JDOG S-2, Medical, Behavioral Health, and ICE personnel to develop camp-wide strategies for improving behavioral levels of detainees.

(a) (U) Provides input into the development of strategies for reducing unwanted behavior, such as re-location or movement of detainees, disciplinary actions, structural or procedural changes within the camp.

(b) (U) Provides input into the development of strategies for increasing positive behavior, such as implementation of incentive programs, reinforcement programs for positive behavior, and increasing access to recreational and social activities.

b(1)

(2) (S)

h. (U) Consults with JTF Commander on detainee issues, staff issues, and camp dynamics, and provides recommendations on ways to improve camp operations. BSCT personnel have full and direct access to JTF Commander to consult on all aspects of JTF mission.

i. (U) Other duties as assigned.

7. (U) Mental Health and Medical Services.

a. (U) BSCT personnel shall not conduct mental health evaluations or provide mental health treatment to detainees or JTF-GTMO personnel. BSCT personnel will take all reasonable steps to ensure that they are not perceived as healthcare providers for detainees or JTF-GTMO personnel.

(1) (U) The Joint Medical Group (JMG) provides all medical treatment, including mental health evaluation and treatment, for detainees and JTF-GTMO personnel. Services for detainees are provided through the Detention Hospital, Detention Clinic, and Detainee Behavioral Health Service. Services for JTF-GTMO personnel are provided through the Combat Stress Control, Joint Aid Station, and U.S. Naval Hospital, GTMO.

(2) (U) The JMG is responsible for advising JIG personnel (i.e., BSCT and ICE Operations) if there are any known physical, psychological, or medical conditions; limitations to functioning; or restrictions to usual activities that one is required to consider in order to ensure the safety of the detainee and U.S. personnel, e.g., diabetes, heart condition, special diet, psychological instability, contagious conditions.

b. (U) BSCT personnel will function as Medical Liaison Officers for the intelligence unit based on procedures established in conjunction with Joint Medical Group. When concerns about health status or medical condition of detainees are raised through observation by BSCT personnel, inquiries

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BSCT SOP 4

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JTF-GTMO-JIG-BSCT
SUBJECT: BSCT SOP (U)

raised by interrogators or other reporting mechanisms, BSCT will convey these concerns to appropriate medical personnel for evaluation, treatment, and disposition.

(1) (U) Neither BSCT personnel nor interrogation teams have access to medical records of detainees. The BSCT acts as medical liaison between interrogation teams and medical personnel in order to maintain the separation between medical care and intelligence-collection.

(2) (U) The BSCT will direct requests for information and issues of medical concerns brought up by interrogation teams to the JTF-GTMO-JMG organizational box. From there it will be routed to the appropriate medical/ dental personnel for response to BSCT personnel who will forward to originator of the inquiry.

(3) (U) The kind of information shared will generally fall into two categories. The first is that of physical or medical conditions, or functional limitations, that one is required to consider in order to ensure the safety of the detainee and U.S. personnel, e.g., diabetes, heart condition, special diet, or contagious conditions. The other category of information shared is whether medical personnel were aware of the condition, if it had been evaluated and treated, or if an appointment is pending to address the concern.

(4) (U) The BSCT will meet on a regular basis with the Director, Joint Medical Group; Director, Medical Plans and Operations; OIC, SMO, and other staff from the Detention Hospital and Detainee Behavioral Health Service in order to discuss any issues related to policies and procedures.

8. (U) **Intelligence Collection with Juveniles.** JTF-GTMO does not normally detain Juvenile Enemy Combatants, however, in order to deal with this possibility, special procedures must be established. Juveniles are defined as any person below the age of 16. Gathering intelligence from juveniles will require special precautions and extra care because juveniles are often more vulnerable with less developed coping skills than adults. In order to ensure proper care for the juvenile detainee, the following procedures will be followed:

a. (U) For any person under the age of 16, a BSCT personnel will be present for the entire time of interrogation. A medical provider will evaluate the juvenile prior to and after the interrogation. The interrogation plan must be reviewed by the BSCT psychologist, ICE Regional Team Chief, ICE Chief, and the JIG Director.

b. (S)

[REDACTED]

(b)(1)

c. (S)

[REDACTED]

(b)(1)

(1)(S)

[REDACTED]

(b)(1)

(2) (U) Since many juvenile detainees have come from deprived environments, special effort will be made to ensure their protection, to provide necessary emotional support, and to provide education as available.

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JTF-GTMO-JIG-BSCT
SUBJECT: BSCT SOP (U)

(3) (U) Transportation and the security of the detainees will be organized and implemented by the JDOG personnel. [REDACTED]

(b)(2)

9. (U) **Other Operational Procedures.** The following procedures apply to the daily BSCT operations.

a. (U) **OPSEC.** All operations of the BSCT must conform to guidance set forth in JTF-GTMO General Order Number 2. Specific considerations for BSCT personnel are as follows.

(1) (U) Ensure that classified material (files, papers, photos, disks) are properly secured in the safe designated for BSCT use; at no time shall classified materials be left unattended in BSCT offices.

(2) (U) Do not discuss detainee operations or other classified information over unclassified phone lines.

(3) (U//FOUO) Sanitize uniforms by placing tape over the name when working in or visiting areas where contact with detainees is possible, including detainee blocks, interrogation buildings, and medical facilities.

(4) (U//FOUO) Use a courier bag when transporting classified or sensitive documents. Do not use courier bags for transportation of unclassified or prohibited materials.

(5) (U) Do not discuss detainee operations in areas where individuals without appropriate clearance or need to know could overhear information.

(6) (U) Do not discuss operations, current events, or personal information in the presence of detainees.

(7) (U) Ensure BSCT offices are locked at the end of the day and that the security checklist is completed. The last person leaving the building must also complete the security checklist for the building and ensure the front door is secured using the combination lock.

b. (U) **Vehicle Operations.** Ensure the BSCT vehicle is taken to motor pool for reassignment and routine maintenance NLT the end of each month.

c. (U) **Supplies.** Required office/administrative supplies can be obtained through the ICE Admin office. Other supplies and equipment can be ordered through ICE Admin office by completing the appropriate purchase order request.

10. (U) **Battle Rhythm.** Successful execution of day-to-day mission requirements requires flexibility, self-discipline, and ability to multi-task and prioritize in all BSCT personnel. There are often competing urgencies. Many tasks are self-directed; many demands are made with little or no notice while others are scheduled in advance. Assessments typically require a series of observations in different settings and hours of research. Many day-to-day activities are determined by response to requests for consultation and observation; often, rapid response is required. Some committee meetings and working groups follow established schedules while others are generated by the BSCT for specific purposes.

a. (U) **Ethical and legal responsibilities.** In addition to the other duties and qualifications noted in this document, it is the responsibility of all BSCT personnel to familiarize themselves with and adhere to

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BSCT SOP 6

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JTF-GTMO-JIG-BSCT
SUBJECT: BSCT SOP (U)

the UCMJ, Geneva Conventions, applicable rules of engagement, local policies, as well as professional ethics and standards of psychological practice. All BSCT personnel will be expected to:

- (1) (U) Read and adhere to JTF-GTMO policy memoranda, regulations, and SOPs.
- (2) (U) Immediately report any suspicions of abuse of detainees or misconduct by U.S. personnel to JIG Director who is responsible for further reporting to JTF Commander.
- (3) (U) Consult with colleagues and their chain of command regarding any conflicts that may arise between professional requirements and performance of their duties.

b. (U) **Referral process for consultations.** Interrogators may request consultation to support interrogations or other requirements by contacting any member of the BSCT. This will most typically occur in person at BSCT offices, by telephone, or by email.

c. (U) **Committee Membership.** BSCT personnel participate in the following committees, working groups, and meetings.

- (1) (U) Interrogation Strategy Meeting (ISM, BSCT1): weekly in the JIG conference room.
- (2) (U) JIG Command and Staff Meeting (BSCT1): weekly in the JIG conference room.
- (3) (U) JIG pre-ISM (BSCT1/2): weekly in the JIG conference room.
- (4) (U) ICE Coordination Meeting (BSCT1/2): weekly in the ICE Conference Room.
- (5) (U) JDOG Coordination Meeting (BSCT1/2): weekly in the ICE Conference Room.
- (6) (U) JDOG Company Training (BSCT1/2/3): Camp America Chapel as convened by JDOG.
- (7) (U) ICEbox Review Committee (BSCT1/2/3): ICE Conference Room; convened by BSCT as needed.
- (8) (U) Library Advisory Board (BSCT1/2): Meetings as convened by chair.
- (9) (U) Other committees/ roundtables/ working groups, as appropriate.

11. (U) **Point of Contact.** The point of contact for this SOP is BSCT Chief at [REDACTED]

Attachments:

- Annex A - BSCT Assessment: Guidelines & Format (U)
- Annex B - BSCT Observation Report: Guidelines & Format (U)
- Annex C - BSCT Risk Assessment: Guidelines & Format (U)

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BSCT SOP 7

5368

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DODDON-000766

SUBJECT: BSCT SOP - Annex A
BSCT Assessment: Guidelines & Format (U)

JTF- GTMO- [REDACTED]

Date

MEMORANDUM FOR RECORD

SUBJECT: Behavioral Science Consultation Team Assessment; ISN XXX



4. (U//FOUO) Physical/ medical limitations: Include here a statement of any known physical or medical conditions, or limitations to functioning, that one is required to consider in order to ensure the safety of the detainee and U.S. personnel, e.g., diabetes, heart condition, special diet, or contagious conditions.

5. (U) Social history: [REDACTED]

- a. (S) [REDACTED]
- b. (S) [REDACTED]
- c. (S) [REDACTED]
- d. (S) [REDACTED]

CLASSIFIED BY: JTF-GTMO Classification Guide dated (date of current guide)
REASON: 1.4(C) or Intelligence Activities, Sources, or Methods
DECL ON: (Future date - dependent on report content and Classification Guide noted)
BSCT SOP, Annex A 1

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SUBJECT: BSCT SOP - Annex A
BSCT Assessment: Guidelines & Format (U)



BSCT2
X-####

Note: Sample reports may be found in electronic files.

BSCT SOP, Annex A 2

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FOIA/press Annotation

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28 March 2005 Final Draft

SUBJECT: BSCT SOP - Annex B
BSCT Observation Report: Guidelines & Format (U)

JTF-GTMO-XXXXXXXXXX

Date

MEMORANDUM FOR RECORD

SUBJECT: Behavioral Science Observation Report - ISN XXXXX



BSCT3
X-####

CLASSIFIED BY: JTF-GTMO Classification Guide dated (date of current guide)
REASON: 1.4(C) or Intelligence Activities, Sources, or Methods
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BSCT SOP, Annex B 1

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FOIA(b)(7) - Exemption

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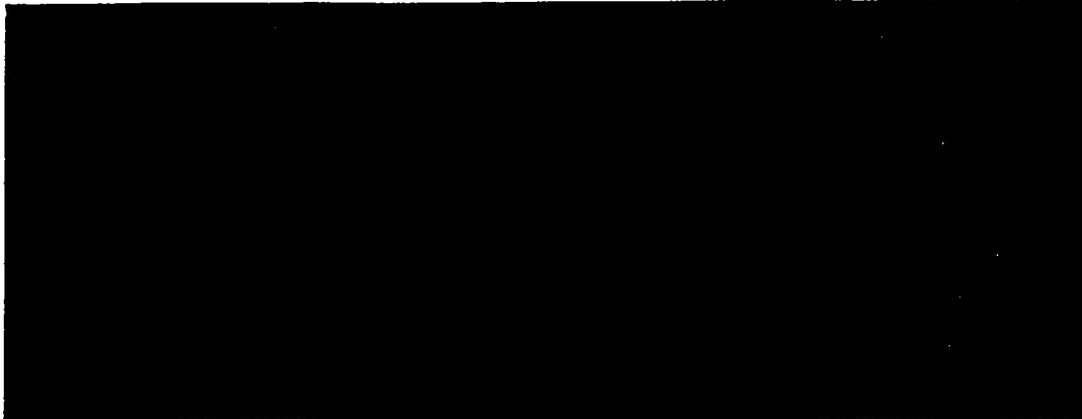
SUBJECT: BSCT SOP - Annex C
BSCT Risk Assessment: Guidelines & Format (U)

JTF-GTMO-

Date

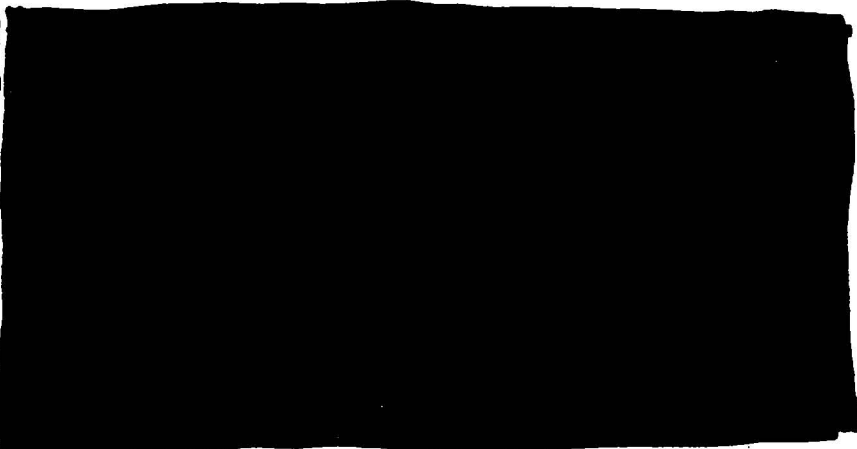
MEMORANDUM FOR RECORD

SUBJECT: Behavioral Science Consultation Team Risk Assessment; ISN XXXXXXXXXX



2. (U) Sources of Information: It is useful to identify in the risk assessment the sources used. There are many potential sources of information for these assessments including:

- a. (U)
- b. (U)
- c. (U)
- d. (U)
- e. (U)
- f. (U)
- g. (U)
- h. (U)



b(2)

CLASSIFIED BY: JTF-GTMO Classification Guide dated (date of current guide)
REASON: 1.4(C) or Intelligence Activities, Sources, or Methods
DECL ON: (Future date - dependent on report content and Classification Guide noted)
BSCT SOP, Annex C 1

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FOIA/Access Annotation

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28 March 2005 Final Draft

SUBJECT: BSCT SOP - Annex C
BSCT Risk Assessment: Guidelines & Format (U)

3. (U//FOUO) **Psychosocial History:** Provide a brief history based on information from database and hard copy files available at the time of review. Include age, place of birth, family of origin, motivations for violent jihad-travels, training/ education, capture, custody; language(s) spoken and fluency.

4. (U//FOUO) **Health Status:** Provide a brief summative statement based on medical and other reports, interviews with medical personnel, and possibly direct observation. A general statement will have been provided to DAB by medical personnel and will be used to develop the assessment as noted below. BSCT will need to use medical summary to identify the three elements of function – physical, cognitive and behavioral.

a. (U//FOUO) **History:** a brief statement of overall medical condition, provided by medical personnel.

b. (U//FOUO) **Treatment:** primary focus of this section will be on treatment provided while in custody but may include prior history if significant. This may include both medical and behavioral health treatment. Medical personnel will provide information necessary for the purposes of the DAB assessment.

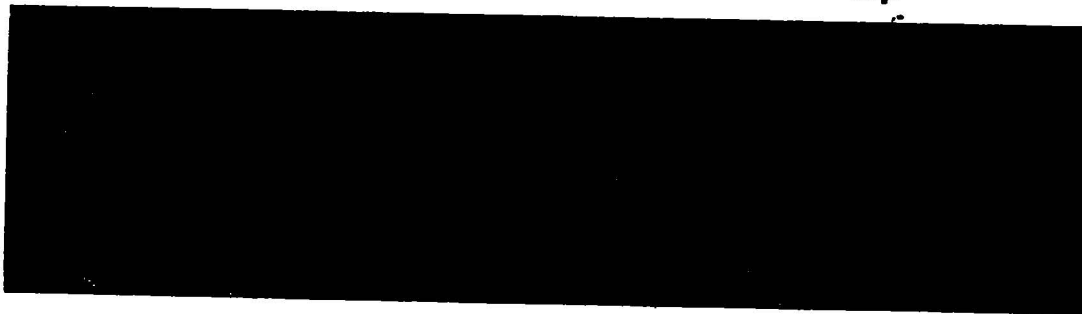
c. (U//FOUO) **Function:** section is comprised of a series of three statements regarding detainee's current level of functioning – physical, cognitive, and behavioral.

(1) (U//FOUO) **Physical:** a statement of overall physical functioning, including any significant limitations.

(2) (U//FOUO) **Cognitive:** a statement of general cognitive functioning including any significant limitations or deficits, and demonstrated intellectual abilities.

(4) (U//FOUO) **Behavioral:** an observationally-based statement of behavioral functioning while in detention.

d. (U//FOUO) **Prognosis:** a statement of prognosis based on current health status.



BSCT SOP, Annex C 2

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FOIA/Privacy Assessment

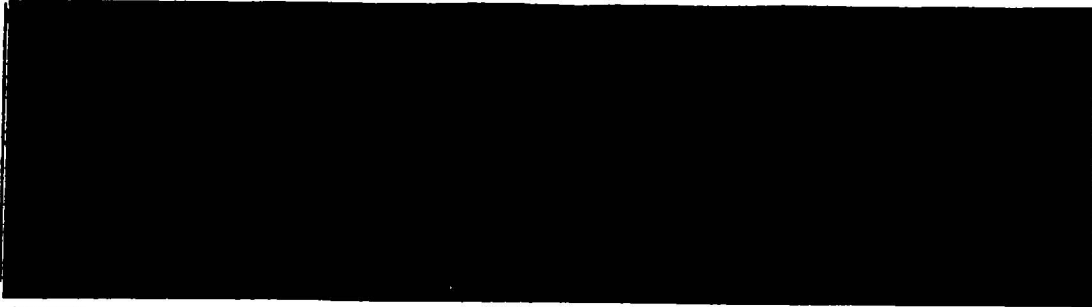
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28 March 2005 Final Draft

SUBJECT: BSCT SOP - Annex C
BSCT Risk Assessment: Guidelines & Format (U)



BSCTI
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Note: Sample reports may be found in electronic files.

BSCT SOP, Annex C 3

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FOIA/Privacy Annotation

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DODDON-000772

MEMORANDUM

To: Steve Behnke
Debbie Carliner

CC: Nathalie Gilfoyle

From: Lindsay Childress-Beatty

Date: August 2, 2002

Re: Gelles Case

I have reviewed the Gelles video, transcripts,¹ and record and have the following legal issues and comments concerning the charges:

Standard 1.15 – Guard against factors that might lead to misuse of their influence
Standard 1.16(a) – Do not participate in activities where it appears likely that their skill or data will be misused by others

- (1) Said there to help him – King starts the interview by clarifying what he wants from the interview (i.e., to know if hypnosis or drugs would help him unlock possible suppressed memories) (Document 6-66). The psychologist’s use of the word “help” the first time is clearly related to the interview having been requested by King (Document 6-65). The second time, his use is in the context of clarifying his role (Document 6-67). Both are shorthand references to hypnosis based on dialogue that follows. At the end of the interview, King agrees that interview has been helpful. (Document 44-64). **This “in-that” as written would support a finding of a violation of Standard 1.15 and 1.16(a) in a factual situation where the psychologist did not explain his connection to the investigation. However, King was aware of the psychologist’s connection to the investigation. He was told that the psychologist worked with the agents and “the system” and the agents were in the room. Under these circumstances, the use of the term “help” by the psychologist does not rise to the level of possible misconduct required for this “in-that” to be legally supportable.**

¹ In citing pages from the transcripts, due to my skepticism regarding the case, I most often use the transcript of the complainant in order to construe the facts in the light most favorable to that position. However, the transcript from the respondent is likely to contain less bias due to the fact that it is an independently transcribed, notarized transcript.

- (2) Encouraged cooperation with agents stating that psychologist and agents were King's friends and he should trust the relationship. The notarized transcript states that the psychologist remarked on how it is funny that one forms a relationship with the agents (under these circumstances) – not that he SHOULD as King's transcript states (Documents 44-48 versus 6-81). King is the one who says agents “are good people” (Document 6-81). **I think this “in-that” is questionable to support the charge and is based solely on inferences drawn from the record. I have a very different reading of the record. However, there is a factual question involved. Whether this charge should go forward to the Committee becomes a policy question for the Ethics Office.**
- (3) Failed to explain about false memories and instead concentrated on suppressed memories – King is the one who starts talking about suppressed memories and hoping that hypnosis might make him recall more than he's already been able to (Document 6-79). King starts the interview by clarifying what he wants (to know if hypnosis or drugs would help him unlock possible suppressed memories) (Document 6-66). The psychologist does explain the origins of false memory syndrome. The psychologist also talks about fantasies and about King's proclivity to use fantasy to escape and his difficulty separating fantasy from fiction (Document 6-80, 6-81, 44-51/6-82). The psychologist states that, if King is hypnotized, “more of the fantasy” might be what is obtained (Document 44-60/6-87). **The psychologist does not say “You might be remembering bits and pieces that are not true memories – but are fantasies or false memories.” However, I do not believe he was required by the Standard to say that directly to be ethical. In addition, the “in that” states that the psychologist failed to explain about false memories and encouraged him to work on releasing the memories. However, the facts in the record show that the psychologist did explain false memories, stated that King's memories might be “fantasy,” and encouraged him to find verifiable “anchors” for any memories he believed he had. The “in-that” is not supported by the facts of the record and a finding of violation would not be legally supportable.**

Standard 1.21(a) – Psychologist providing services at request of third party clarifies nature of relationship with each party including role, probable uses of services or information obtained, and fact of limits to confidentiality

The psychologist did clarify nature of the relationship and his role. He stated that he was asked by the agents to come by (Document 6-65) and was a clinical psychologist working with the agents and “the system” and he conducts hypnotic interviews (Document 6-67). He explains he is screening for suitability for hypnosis (Document 6-70). He explains he is a doctor and not an agent when assessing for suicidality and King is surprised that the line of questioning involves his mental health (Document 6-75). He clarifies his role again during a segment where he talks about King obtaining closure by stating that he

knows about the incident and he and the agents are “obviously not Navy which is an important thing to know” (Document 44-43, Document 6-78). Finally, the agents were physically present in the room throughout the interview. **I think this “in-that” is questionable to support the charge and is based solely on inferences drawn from the record. In order to find that the facts in the record support this charge, one must find that the psychologist had a hidden agenda when working with King that he did not clarify to King. The record provides only very tenuous support for this inference and I believe that the charge stands on relatively weak grounds legally for that reason. However, there is a factual question involved. The policy question of whether this charge should go forward to the Committee should be considered in the context of the relatively weak legal support for the charge.**

Standard 5.01(a) – Failed to discuss limits of confidentiality

The lack of confidentiality was clearly understood based on the situation and did not need to be articulated. The conversation was obviously not confidential since 2 agents were also in room. In fact, King is worried about giving secret information to the psychologist. Also, the psychologist stated that he worked for agents and “the system” up front. **The psychologist would not have fair notice under these facts if it were found that the Standard required a discussion of confidentiality even with the two agents in the room. Therefore, this charge cannot stand.**

Standard 5.01(c) – videotaped without knowledge or permission of client

The Naval Criminal Investigative Service required that the taping be “covert” (Document 18-22). Therefore, the psychologist was precluded by his superiors (and possibly law) from informing King that he was being taped. This then becomes a factual issue of whether the psychologist followed Standard 8.03 (conflict between ethics and organizational demands) rather than whether he violated Standard 5.01(c). (The psychologist states that he did raise issue of consent with NCIS to no avail) (Document 18-F). **Unfortunately, the information concerning the required covert nature of the taping was received after the charge letter was sent and the psychologist was therefore charged under Standard 5.01(c) and was not charged with a violation of Standard 8.03. The psychologist cannot legally be found to have violated Standard 5.01(c) (due to clear evidence in his defense). He cannot now be charged with Standard 8.03 even if it is determined that a factual question exists as to whether his raising the issue of consent with his superiors was enough action to meet the burden of Standard 8.03.**

Standard 1.07(a) and (b) – Providing appropriate information beforehand about nature of services and appropriate information later about results and conclusions. If precluded from this, must inform individual at outset

The psychologist did provide appropriate information about the nature of the services. He stated that he was asked by the agents to come by due to King's request (Document 6-65) and that he was a clinical psychologist working with the agents and "the system" who often conducts hypnotic interviews (Document 6-67). (The understanding was that he was there to answer King's questions about hypnosis and evaluate King's suitability for hypnosis, since King had an interest in being hypnotized and had asked for the interview) (Document 6-67). King starts the interview himself by clarifying what he wants (to know if hypnosis or drugs would help him unlock possible suppressed memories) (Document 6-66). I do not read the facts of the record in such a way as to find that the nature of the psychologist's services was clearly to prime King to give additional information to agents. I interpret the facts to find that the interview is clearly an assessment of suitability for hypnosis and attempt to answer King's questions. **Again, I think this "in-that" is questionable to support the charge and is based solely on inferences drawn from the record. In order to find that the facts in the record support this charge, one must find that the psychologist had a hidden agenda when working with King that he did not clarify to King. The record provides only very tenuous support for this inference and I believe that the charge stands on relatively weak grounds legally for that reason. However, there is a factual question involved. The policy question of whether this charge should go forward to the Committee should be considered in the context of the relatively weak legal support for the charge.**

COMMITTEE ON LEGAL ISSUES
Approved Meeting Minutes
Grand Hyatt Washington, Washington, DC
March 23-24, 2007

MEMBERS PRESENT: Bonita G. Cade, PhD, JD, Chair; David M. Corey, PhD; Kevin S. Douglas, PhD, LLB; Michelle M. Keeney, JD, PhD; Phillip M. Lyons, Jr., JD, PhD; Bradley D. McAuliff, JD, PhD; N. Dickon Reppucci, PhD; James L. Werth, Jr., PhD, MLS

LIAISONS/GUESTS PRESENT: *Lisa R. Grossman, JD, PhD, Board of Directors' liaison to COLI

APA STAFF PRESENT: Donna J. Beavers, COLI Staff Liaison; *Stephen Behnke, PhD, JD, Director, Ethics Office; *Lindsay Childress-Beatty, JD, PhD, Deputy General Counsel; *Nathalie F.P. Gilfoyle, JD, General Counsel; *James L. McHugh, JD, Senior Counsel

ABSENT: Antoinette E. Kavanaugh, PhD
(*Denotes partial attendance)

Unrelated Subject Matter Redacted at Direction of APA



3-f. **PSYCHOLOGIST PARTICIPATION AT US DETENTION CENTERS** (CC-23)

Michelle Keeney took the lead in COLI's review of the Council New Business Item #25D: *Psychologist Participation at US Detention Centers*. The Committee as a whole discussed the proposed resolution calling for a moratorium on psychologists' involvement in centers for foreign detainees, and COLI members participated in the open meeting on Friday, March 23.

COLI noted that the rationale as stated by the sponsor is the perceived ambiguity of the legal framework that governs the treatment of detainees and the impact of this ambiguity on the practice of psychologists.

COLI has strong objections to the resolution in its current form on a number of grounds. Four examples follow. First, the statement focuses on a legal framework. COLI has serious reservations about the American Psychological Association setting forth legal criteria for when psychologists may engage in a particular area of practice. Second, the resolution sponsor has been explicit that the resolution has a political basis. COLI believes that APA members have an obligation to engage in political discussion, debate and advocacy *as citizens*, but it does not believe that Council resolutions are the appropriate place to make political statements, however wide the support for a given political position in the Association may be. COLI believes that grounding a political statement on a legal argument represents a significant departure from APA's objectives as stated in the Bylaws. Third, the resolution is described as intended to "protect" members of a community, representatives of which are indicating that the resolution in its current form will likely be harmful in their efforts to promote the ethical practice of interrogations. Fourth, the resolution does not address conditions of confinement, treatment or interrogation in US correctional facilities in which historically there have been similar concerns regarding treatment of detainees. Despite the resolution sponsor's argument—that US citizens have a right of redress—a resolution addressing conditions of treatment and detention falls significantly short if it does not examine what occurs in US settings.

Michelle Keeney agreed to consolidate all COLI member comments and prepare a more detailed response for submission in May 2007.

COMMITTEE ON LEGAL ISSUES
Approved Meeting Minutes
Renaissance Mayflower Hotel, Washington, DC
November 3-4, 2006

MEMBERS PRESENT: Bonita G. Cade, PhD, JD; Kevin S. Douglas, PhD, LLB; Antoinette E. Kavanaugh, PhD; Michelle M. Keeney, JD, PhD; Daniel A. Krauss, JD, PhD; Randy K. Otto, PhD, MLS, Chair; Phillip M. Lyons, Jr., JD, PhD; James L. Werth, Jr., PhD, MLS; Mark Zelig, PhD

LIAISONS/GUESTS PRESENT: *Lisa R. Grossman, JD, PhD, Board of Directors' liaison to COLI; *Kevin Moriarty, JD and *David Ogden, JD, Wilmer Hale; *Brad Olson, PhD, President, Divisions for Social Justice

APA STAFF PRESENT: Donna J. Beavers, COLI Staff Liaison; *Stephen Behnke, PhD, JD, Director, Ethics Office; *Lindsay Childress-Beatty, JD, PhD, Deputy General Counsel; *Nathalie F.P. Gilfoyle, JD, General Counsel; *James L. McHugh, JD, Senior Counsel

(*Denotes partial attendance)

Unrelated Subject Matter Redacted at Direction of APA



15-S. **MEETING WITH BRAD OLSON, PRESIDENT, DIVISIONS FOR SOCIAL JUSTICE**

Brad Olson, PhD joined with COLI at his request to represent the Divisions for Social Justice (DSJ) and discuss DSJ's proposed amendment to the APA ethics code to address their concerns with how the Ethics Code addresses conflicts that arise between ethics and the law. Brad Olson advised that it is the view of DSJ that a discrepancy currently exists between language in the Introduction and Applicability section of the Ethics Code and Ethical Standard 1.02. To remedy this discrepancy, their recommendation is to add the words "in keeping with basic principles of human rights" to Ethical Standard 1.02. DSJ's proposed revision arises in the context of their concerns pertaining to the ethical responsibilities of psychologists involved in information-gathering activities related to national security. DSJ's position is that by adding the phrase, APA would make clear that human rights are critical in any decision regarding a conflict between the ethics and the law.

COLI discussed with Brad Olson in the presence of APA Ethics Director, Steve Behnke, COLI's views about the possible impact of adding such language to the enforceable section of the Ethics Code. COLI provided concrete examples of how adding the proposed language to enforceable parts of the APA Ethics Code could lead to unanticipated consequences. While "basic principles

of human rights” may appear to have a clear meaning when applied to the current discussion of national security-related activities, it was noted that it may not be as clear when applied in Standard 1.02 to conflicts with law in other contexts, especially given that the APA has yet to define what constitutes “basic principles of human rights.” COLI strongly cautioned against incorporating the proposed language into the APA Ethics Code.

Unrelated Subject Matter Redacted at Direction of APA



**Comments and Feedback Requested on the
Responses of the APA Ethics Committee to Questions, Comments, and Vignettes
Regarding APA Policy on the Role of Psychologists
in National Security-Related Activities**

June 2011

Introduction

The American Psychological Association's (APA's) governing body, the Council of Representatives, directed the Ethics Committee to develop materials to provide guidance related to APA policies that address the role of psychologists in national security-related activities. To fulfill Council's directive, the Ethics Committee sent out a call for vignettes in December 2007 (<http://www.apa.org/monitor/dec07/ethics.aspx>), in which the Committee asked for

examples that will highlight points of ambiguity or aspects where the texts [relevant APA policies] appear to give insufficient direction. The Committee hopes to receive many vignettes, from which it will choose for discussion those that will best help illustrate APA's position and that best speak to where APA may not have provided sufficient clarity.

As explained in the Committee's December 2007 call, the Committee deemed it advisable to wait until Council completed its multiyear process of developing and refining policies related to the role of psychologists in national security-related activities before issuing its responses.

Council's work culminated in adopting two related policies in 2008 and 2009, and in amending the "Ethical Principles of Psychologists and Code of Conduct" (APA, 2002) in 2010. The 2008 Council policy prohibited specific techniques of interrogation and thus helped clarify and elaborate the strict prohibition of torture and other cruel, inhuman, or degrading treatment or punishment contained in previous APA policies, including the 2005 Report of the Presidential Task Force on Psychological Ethics and National Security. In addition, the 2009 Council action adopted as APA policy the petition resolution approved by the APA membership in the fall of the previous year with the title, "Psychologists and Unlawful Detention Settings with a Focus on National Security." Finally, Council took the rare step of amending the APA Ethics Code in 2010 to clarify that the Ethics Code may never be used to justify or defend violating human rights.

Following this most recent action of Council, the Ethics Committee, which had carefully followed Council's actions and deliberations, believed it was in a position to move forward and complete its work on this document. The Committee now seeks comments and feedback on this text. The Committee believes that contributions on this subject from a broad range of perspectives will provide the most comprehensive and rich resource for psychologists facing ethical dilemmas in this area of practice.

The Ethics Committee received questions, comments, and vignettes both orally and in writing, each of which the Ethics Committee responds to herein. In its responses, the Committee relies on the “Ethical Principles of Psychologists and Code of Conduct” (APA, 2002; APA 2010) as well as official APA statements, policies, and resolutions that address the role of psychologists in national security-related activities.

In providing guidance, the Committee’s approach is to comment from the perspective of a psychologist in a dilemma who is requesting an ethics consultation. The Committee’s commentary is thus *prospective* rather than *retrospective*, insofar as the Committee addresses how a psychologist in the situation might move forward in a manner consistent with the APA Ethics Code and APA policy. The Committee thus does not render opinions regarding whether a particular action did or did not violate the Ethics Code but rather, according to the Committee’s usual process of offering consultation, offers guidance for psychologists in difficult and complex situations as psychologists determine what course of action is most consistent with APA policy.

The Committee’s commentary should not be considered practice guidelines for a specific practice area. Offering practice or specialty guidelines would go well beyond the Committee’s scope of expertise. Rather, the Committee’s commentary is meant to offer psychologists guidance in how to apply a thoughtful analysis based on the APA Ethics Code and APA policy. Consistent with its usual practice, the Committee offers *processes* for thinking through challenging situations and not definitive statements regarding specific behaviors. The Committee believes that recommending decision-making processes rather than providing specific directives best equips psychologists to address new situations they may encounter.

In virtually all cases, specific facts and circumstances of an actual situation will be highly relevant in determining an appropriate response. Thus, an actual consultation would address the specific situation in greater detail than is possible in this text. Given these limitations, the Committee’s responses do not represent the issuance of an official policy statement by the APA, the APA Ethics Committee, the APA Ethics Office, or any other APA governance group or component. Rather, official APA policies adopted by Council fulfill this important role.

Readers will encounter certain themes throughout the Committee’s responses. The first such theme is the importance of psychologists engaged in national security-related work becoming familiar with relevant APA policies. These policies were drafted with considerable care by members of APA governance holding various perspectives and working in close collaboration, and each word was chosen deliberately and after much thought. A list of all the APA policies directly relevant to the work of psychologists in national security-related contexts is found at the end of this [Introduction](#), with a link to the APA website. A second related theme is the value of consultation. The Ethics Code highlights the central role of consultation in the professional life of an ethical psychologist, and this guidance fully applies to the issues addressed here. These and other

themes are placed in the context of APA's clear and unequivocal stance against torture, first announced by APA in 1985.

It would defeat the purpose of this text for psychologists to be left with the sense that they must determine for themselves where the boundaries of ethical behavior lie. The Ethics Committee appreciates that the breadth of potential materials is vast and involves numerous APA policies, extensive legal materials, and an expanding body of psychological research. Throughout its responses, the Ethics Committee emphasizes the value of consulting both knowledgeable individuals and relevant texts. Psychologists engaged in this area of work who have questions are encouraged to consult with the APA Ethics Office and Committee to assist in determining the extent and contours of their ethical obligations. The APA Ethics Office and Committee are resources for psychologists who are committed to upholding the highest ethical standards of the profession. The Ethics Committee emphasizes that psychologists should not be left in the untenable position of believing that they will be held to an unrealistic standard of becoming familiar with an ill-defined and evolving body of knowledge. Consultation is thus central to psychologists' fulfilling their ethical responsibilities.

Since the time that many of these questions, comments, and vignettes were submitted to the Ethics Committee, the APA Ethics Code and relevant Council resolutions have been amended, and a petition resolution has been passed by the APA membership and adopted by Council as APA policy. In addition, important changes have taken place in the legal framework surrounding the treatment of detainees, the status of detention sites, and U.S. administration policies and legal analyses regarding interrogation. As a consequence, certain questions and vignettes may be based on a version of the Ethics Code, a Council resolution, or a law, legal analysis, or legal status that has changed. The Ethics Committee makes reference to specific changes in APA policy and the Ethics Code when these changes are relevant.

It is critical for psychologists to understand and appreciate the developmental aspect of APA's position on the role of psychologists in national security-related activities. Since 2005, Council has acted no fewer than five times to adopt policy in this area. Each of Council's actions has resulted from a strong consensus among a broad range of Council representatives and has constituted an important step forward in developing APA's position. As a consequence, APA's policy statements must be read as a whole. Taking any single Council action out of the context of the entirety of Council's work on this issue will inevitably yield an incomplete understanding of APA's position.

Format

For all of the 25 questions, comments, or vignettes that were submitted, the Committee provides the full text of the submission followed by the Committee's response. In certain instances, the Committee combines submissions when a single response addresses the relevant issues. For ease of reading, the questions, comments, and vignettes are provided with a shaded background. The submissions are numbered 1-25 for ease of reference; the ordering has no other significance.

A compilation of materials related to APA's policies and activities can be found on the APA website (<http://www.apa.org/news/press/statements/interrogations.aspx>). Readers are encouraged to read the policies in their entirety, as well as the related materials on the website.

Relevant APA Policies and Statements

Following is a list of relevant APA policies and statements in chronological order. For full citation information, see the References at the end of this document.

“Against Torture: Joint Resolution of the American Psychiatric Association and the American Psychological Association.” 1985.

“American Psychological Association Human Rights Resolution Against Torture.” 1986.

“Report of the American Psychological Association Presidential Task Force on Psychological Ethics and National Security.” 2005.

“Resolution Against Torture and Other Cruel, Inhuman, and Degrading Treatment or Punishment.” 2006.

“Reaffirmation of APA's Position Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment and Its Application to Individuals Defined in the United States Code as 'Enemy Combatants.'” 2007.

“Amendment to the Reaffirmation of the American Psychological Association Position Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment and Its Application to Individuals Defined in the United States Code as 'Enemy Combatants.'” 2008.

“Psychologists and Unlawful Detention Settings With a Focus on National Security.” 2009.

“Ethical Principles of Psychologists and Code of Conduct (2002, Amended June 1, 2010).” 2010.

Submission 1

Psychologists working with police departments may consult with hostage rescue teams. It may occur that a psychologist working with a hostage rescue team would render an assessment that leads to the injury or even death of the hostage taker. How would APA's resolutions against torture and cruel, inhuman, or degrading treatment and punishment apply to such an action by a psychologist?

Ethics Committee Response

In February 2008, the Council of Representatives adopted the "Amendment to the Reaffirmation of the American Psychological Association Position Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment and Its Application to Individuals Defined in the United States Code as 'Enemy Combatants.'" This Council resolution prohibits specific activities. In setting forth its prohibitions, the 2008 resolution invokes several United Nations and World Medical Association texts: the United Nations "Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment;" the "Geneva Conventions;" the "Principles of Medical Ethics Relevant to the Role of Health Personnel, Particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment;" the "Basic Principles for the Treatment of Prisoners;" and the "World Medical Association Declaration of Tokyo" (hereinafter "the five international texts cited in the 2008 resolution").

The Ethics Committee notes that the context of the scenario, a hostage situation, is not the context directly envisioned by Council resolutions prohibiting torture and cruel, inhuman, or degrading treatment or punishment (hereinafter "torture or CID"). Council resolutions were adopted in the context of examining the treatment of detainees in national security settings, which is a markedly different context. The United Nations "Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment" illustrates this point. It states in Article I:

For the purposes of this Convention, the term "torture" means any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity.

The purpose of such an act by the psychologist described in the scenario would not be to

- obtain from the hostage taker or a third person information or a confession,
- punish the hostage taker for an act he or a third person has committed or is suspected of having committed,
- intimidate or coerce the hostage taker or a third person, or

- inflict severe pain or suffering for any reason based on discrimination of any kind.

The purpose of the assessment and communication in the vignette is to assist law enforcement in protecting the safety of the hostages as well as the safety of the hostage taker. For this reason, the Committee concludes that Council's prohibitions against torture and CID are of limited application to this scenario.

The Committee stresses that because this psychologist is acting in a professional capacity, the Ethics Code nonetheless applies to these activities.

The Committee has provided a combined response to Submissions 2 and 3.

Submission 2

A psychologist stationed at Guantanamo observes that new detainees are sent to isolation cells where they are kept for up to two weeks. The psychologist is concerned that, according to the August 2007 Resolution as amended she has an obligation to report the use of this procedure. What constitutes ethical conduct in this situation? If it is unethical for a psychologist to participate in this instance, would a reduced length of isolation render the psychologist's participation ethical? What length of isolation would be acceptable? How extended does the isolation have to be in order for the psychologist's involvement to be regarded as unethical according to the August 2007 Resolution as amended?

Submission 3

A psychologist is sent to Guantanamo to be Chief Psychologist of the Joint Intelligence Group in order to put operating procedures in place for detainees. During the four months he or she is there and responsible for supervising the psychologists that advise on the conditions of detention, the following operating procedures are written and instituted: "4-20. Behavior Management Plan"...a. Phase One Behavior Management Plan (First thirty days or as directed by JIG). The purpose of the Behavior Management Plan is to enhance and exploit the disorientation and disorganization felt by a newly arrived detainee in the interrogation process. It concentrates on isolating the detainee and fostering dependence of the detainee on his interrogator. During the first two weeks at Camp Delta, classify the detainees as Level 5 and house in a Maximum Security Unit (MSU) Block. During this time, the following conditions will apply: ... Restricted contact: No ICRC [Red Cross] or Chaplain contact... No Koran, prayer beads, prayer cap.... "b. Phase Two Behavior Management Plan. The two-week period following Phase 1 will continue the process of isolating the detainee and fostering dependence on the interrogator. Until the JIG Commander changes his classification, the detainee will remain a Level 5 with the following:...Continued MSU...Koran, prayer beads and prayer cap distributed by interrogator ..." --Would it be ethical for a psychologist to write such procedures?-- Would it be ethical for a psychologist to institute such procedures? -- Would it be ethical for a psychologist to supervise psychologists or others instituting such procedures? --- Would it be ethical for a Chief Psychologist to claim that he/she did not know that such

things were written, instituted and/or practiced by psychologists under his/her command?
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Source: Camp Delta Standard Operating Procedures (SOP). 28 March 2003

http://wikileaks.org/wiki/Guantanamo_document_confirms_psychological_torture

Ethics Committee Response

The psychologists in these vignettes should seek consultation regarding how APA resolutions apply to their participation in certain procedures. The 2008 resolution directly addresses the issue of isolation:

BE IT RESOLVED that this unequivocal condemnation includes all techniques considered torture or cruel, inhuman or degrading treatment or punishment under [the five international texts cited in the 2008 resolution]. An absolute prohibition against the following techniques therefore arises from, is understood in the context of, and is interpreted according to these texts: mock executions, waterboarding . . . isolation . . .

As an initial matter, it is imperative to note that the 2008 resolution contains an absolute prohibition. This absolute prohibition is the foundation for the psychologists' behavior. The absolute prohibition in the 2008 resolution is the bedrock from which the psychologist would begin an analysis of the ethical aspects of the situation. The psychologists in the scenarios would therefore need to have a thorough knowledge of the five texts named in the 2008 resolution, which absolutely prohibit torture and CID, given that the resolution states, "An absolute prohibition against the following techniques therefore arises from, is understood in the context of, and is interpreted according to these texts."

In addition, the following three considerations would also be relevant to the psychologists in these scenarios.

First, the psychologists would be familiar with what avenues for reporting are available if their concerns have not been adequately addressed following their consultations and their review of the absolute prohibition and the five texts identified in the 2008 resolution. The psychologists would first bring their concerns to their superiors in the chain of command, including the chief psychologist for their military service. If this does not yield a satisfactory outcome, the psychologists may have other reporting possibilities that include a judge advocate, the appropriate inspector general, a chaplain, and a member of the U.S. Congress.

Second, the psychologists would be familiar with APA Council resolutions relevant to their work, including the 2007 "Reaffirmation of the American Psychological Association Position Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment and Its Application to Individuals Defined in the United States Code as "Enemy Combatants,"" which states:

BE IT RESOLVED that the American Psychological Association commends those psychologists who have taken clear and unequivocal stands against torture and cruel, inhuman or degrading treatment or punishment, especially in the line of duty, . . . and that the American Psychological Association affirms the prerogative of psychologists under the *Ethical Principles of Psychologists and Code of Conduct* (2002) to disobey law, regulations or orders when they conflict with ethics.

Third, the psychologists would be familiar with the 2010 amendment to Standard 1.02 of the APA Ethics Code:

Standard 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority

If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. Under no circumstances may this standard be used to justify or defend violating human rights.

Thus, multiple APA policies are relevant to psychologists determining the most ethical course of action in this situation.

Submission 4

The Army Field Manual (AFM) allows the following interrogation techniques:

- a. Emotional Fear-Up Approach – "In the fear-up approach, the HUMINT collector identifies a preexisting fear or creates a fear within the source. He then links the elimination or reduction of the fear to cooperation on the part of the source."
- b. Emotional Fear-Down Approach – "In the fear-down approach the HUMINT collector mitigates existing fear in exchange for cooperation on the part of the source."
- c. Emotional-Pride and Ego-Up Approach – "It exploits a source's low self-esteem."
- d. Emotional-Pride and Ego-Down Approach- ". . . is based on attacking the source's ego or self image."
- e. Emotional-Futility Approach- ". . . the HUMINT collector convinces the source that resistance to questioning is futile. This engenders a feeling of hopelessness and helplessness on the part of the source."

Is it ethical for psychologists to participate, plan or assist in any of these techniques? If so, which ones? If it is unethical for a psychologist to participate, plan or assist in one or more of these techniques what is the psychologist's ethical responsibility if he/she is aware that such techniques are being used? Is it ethical or unethical for a psychologist to participate, plan or assist in an interrogation of a detainee who previously has been interrogated using any of the above techniques?

Ethics Committee Response

Ethical Standard 3.04 in the 2002 APA Ethics Code states:

3.04 Avoiding Harm

Psychologists take reasonable steps to avoid harming their clients/patients, students, supervisees, research participants, organizational clients, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable.

A series of resolutions adopted by Council beginning in 1985 prohibit psychologist involvement in torture or CID. The techniques identified in this question could be used in such a manner to constitute torture or CID and so could represent a failure to take reasonable steps to avoid harm and violate multiple Council resolutions.

In assessing whether the techniques provided in this submission are used in a manner that constitutes torture or CID, the psychologist can examine a series of questions, including the following:

First, is the technique used in a manner that is harmful to the detainee? Answering this question will entail knowledge of psychological research and the psychologist's having a sufficient opportunity to determine how the detainee is being affected. This question is premised on a thorough knowledge of relevant Council resolutions, especially Council's 2008 resolution and the five international texts cited in the 2008 resolution.

Second, how does a detainee's culture and ethnicity affect whether the application of a technique identified in the submission will be harmful to the detainee?

Third, is the technique being applied in a manner that is consistent with the law? In particular, the *Army Field Manual* provides a test that reads, in part, "If the proposed approach technique were used by the enemy against one of your fellow soldiers, would you believe the soldier had been abused?" According to the *Army Field Manual*, if the answer to this question is yes, "the contemplated action should not be conducted." This test can be very helpful in determining whether a particular technique should not be used.

Fourth, are there data to support that the technique is effective in gathering accurate information?

With the benefit of consultation, the psychologist should explore these and related questions to determine whether the technique is being used in a manner that is consistent with relevant Council resolutions and the Ethics Code. If the psychologist determines that such is not the case, the psychologist should take steps to address the situation, beginning with bringing the matter to the attention of the chain of command. In this instance, the psychologist could request that the APA Ethics Committee provide clarification to the chain of command regarding the appropriate role for psychologists in an interrogation process.

Submission 5

Appendix M of the AFM [Army Field Manual] addresses the restricted interrogation technique of separation (AKA isolation). Separation is allowed as an interrogation technique with unlawful enemy combatants, but not lawful enemy combatants. Thus the AFM allows for the differential treatment of unlawful and lawful enemy combatants. Is it ethical for a psychologist to differentially treat lawful and unlawful enemy combatants?

Is it ethical for a psychologist to be involved in any way (participating, planning assisting) in the interrogation technique of separation of unlawful enemy combatants? If an unlawful enemy combatant has been separated as an interrogation technique is it ethical for a psychologist to participate subsequently, plan or assist in the interrogation of that unlawful enemy combatant? What is a psychologist's ethical responsibility if she/he has heard that separation as in interrogation technique is being used, but the psychologist has no personal knowledge herself/himself?

The AFM allows for separation to last for up to 30 days. If it is ethical for a psychologist to participate, plan or assist in separation as an interrogation technique is there any point in the length of the separation that it becomes unethical for psychologist?

With respect to the question: "What is a psychologist's ethical responsibility if she/he has heard that separation as an interrogation technique is being used, but the psychologist has no personal knowledge herself/himself?"

Ethics Committee Response

The focus of an ethical analysis of an interrogation technique is not the status of the detainee but rather whether the technique is consistent with the APA Ethics Code and APA policy. Thus, participation in a technique that is impermissible under the APA Ethics Code and APA policy does not become permissible by virtue of a detainee's legal status. Put another way, the touchstone for psychologists assessing the appropriateness of an interrogation technique is Ethical Standard 3.04, Avoiding Harm, and APA policies related to interrogation, not legal categories. An interrogation technique cannot be impermissible under the APA Ethics Code and APA policy and become permissible simply by virtue of a legal status. A particular legal status does not transform an unethical interrogation technique into an ethical interrogation technique. A technique is either ethical for both groups or unethical for both groups.

Psychologists working in national security settings may not have access to full information regarding what is occurring throughout the setting. If a psychologist receives information related to activities that appear to be illegal and/or unethical, the psychologist has multiple avenues for addressing concerns about the potentially illegal/unethical activities (see the Committee's response to Submissions 2 and 3).

Submission 6

A psychologist is deployed to a detainee center. The psychologist is familiar with APA Ethics code and in particular, 1.02, as well as APA's 2006 and 2007 Resolutions and the 2008 Amendment to the 2007 Resolution. The psychologist is told by her commanding officer:

"The law that governs the active duty military psychologist is the United States Constitution, Uniform Code of Military Justice (UCMJ), and applicable regulations of the branch of service. The Ethics Code is always subordinate to the law and regulations."

The psychologist knows the 2007 Resolution states:

BE IT RESOLVED that the American Psychological Association affirms that there are no exceptional circumstances whatsoever, whether induced by a state of war or threat of war, internal political instability or any other public emergency, that may be invoked as a justification for torture or cruel, inhuman, or degrading treatment or punishment, including the invocation of laws, regulations, or orders;

The psychologist is ordered to assist interrogators who are employing interrogation techniques that are forbidden by APA's 2007 Resolution and the 2008 Amendment.

The psychologist informs her commanding officer that the techniques are unethical and should be stopped. The response by her CO is that she is to assist the interrogators who continue using these techniques. She is reminded that the Ethics code is subordinate to laws, regulations and orders.

What is the ethical way to resolve the conflict amongst the 2007 Resolution, as amended, Ethical Code 1.02 and the given orders? Which does she follow: the Resolution or Ethics Code 1.02, which allows following orders at odds with ethical standards?

Ethics Committee Response

As a starting point, the psychologist should determine whether these interrogation techniques are prohibited by the *Army Field Manual*. It is critical to note that many of the techniques prohibited by the 2008 resolution are also prohibited by the current version of the *Army Field Manual*.

Second, the psychologist should consider the test for assessing the appropriateness of an interrogation technique under the *Army Field Manual*, which states, "If the proposed approach technique were used by the enemy against one of your fellow soldiers, would you believe the soldier had been abused?" According to the *Army Field Manual*, if the answer to this question is yes, "the contemplated action should not be conducted." This test may provide helpful guidance to the psychologist in this scenario because the techniques in question may fail this test.

Finally, the psychologist would consider the 2010 amendments to the 2002 Ethics Code. In February 2010, the Council of Representatives amended Ethical Standards 1.02 and

1.03. The text in the scenario reflects a prior version of Ethical Standard 1.02, which has been amended. Ethical Standard 1.02 now states:

Standard 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority

If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. Under no circumstances may this standard be used to justify or defend violating human rights.

In this scenario, it would be essential for the psychologist to obtain consultation regarding what techniques are ethical and legal and to bring this information to the attention of the commanding officer.

Submission 7

A psychologist is asked to advise interrogators who are using sensory over-stimulation (or sensory deprivation, isolation, or sleep deprivation) with a detainee. The psychologist is unsure if these four techniques are prohibited by APA. The psychologist wants to know if these four techniques, as interrogation techniques, are always prohibited, regardless of length or intensity, or are they allowed up until a certain point? For instance, can the psychologist consult to an interrogation where the detainee has been subjected to sensory over-stimulation or sensory deprivation or isolation or sleep deprivation for an hour, for four hours, for 12 hours, for 24 hours, for a day, or for any greater length of time? How does the psychologist make this ethical judgment? What is the ethical course of action for the psychologist when he/she knows these techniques are being used?

Ethics Committee Response

The psychologist in this scenario would consider a number of APA policies and other texts in determining how to respond. Primary among these would be Ethical Standard 3.04:

3.04 Avoiding Harm

Psychologists take reasonable steps to avoid harming their clients/patients, students, supervisees, research participants, organizational clients, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable.

The *Army Field Manual's* test for assessing the appropriateness of a technique would also be relevant and provide helpful guidance, "If the proposed approach technique were used by the enemy against one of your fellow soldiers, would you believe the soldier had been abused?" If the answer to this question is yes, "the contemplated action should not be conducted."

The 2008 Council resolution prohibits a number of specific techniques, including “isolation; sensory deprivation and over-stimulation; sleep deprivation.” The resolution states that its absolute prohibition against these specific activities “arises from, is understood in the context of, and is interpreted according to these texts.” The resolution’s prohibition against inflicting torture and CID is therefore placed in the context of the five international texts invoked in the resolution.

A psychologist uncertain about whether a specific interrogation technique is prohibited by the 2008 resolution should become thoroughly familiar with the relevant aspects of the five texts named in the amendment. In addition to these texts, other resources may be available to the psychologist, such as psychological literature relevant to the specific technique, including whether the technique is effective in producing accurate information, as well as literature regarding the role of culture, ethnicity, and religion, and their interaction with the technique in question. This information can then be placed in the context of the texts cited in the amendment to help the psychologist determine the most ethical course of action. Consultation will be an invaluable resource for a psychologist in this situation.

In determining what to do regarding continued concerns about the use of the technique, the psychologist would be familiar with Council’s August 2007 resolution, which states:

BE IT RESOLVED that the American Psychological Association asserts that all psychologists with information relevant to the use of any method of interrogation constituting torture or cruel, inhuman, or degrading treatment or punishment have an ethical responsibility to inform their superiors of such knowledge, to inform the relevant office of inspector generals when appropriate, and to cooperate fully with all oversight activities, including hearings by the United States Congress and all branches of the United States government, to examine the perpetration of torture and cruel, inhuman, or degrading treatment or punishment against individuals in United States custody, for the purpose of ensuring that no individual in the custody of the United States is subjected to torture or cruel, inhuman, or degrading treatment or punishment;

The “Report of the American Psychological Association Presidential Task Force on Psychological Ethics and National Security” (PENS) also imposes an obligation to report unethical behavior.

Thus, the APA Ethics Code, APA resolutions, the texts cited in the 2008 resolution, relevant psychological literature, and the *Army Field Manual*, combined with consultation, are resources available to the psychologist in determining the most ethical response.

The Committee has provided a combined response to Submissions 8, 9, and 10.

Submission 8

A clinical psychologist with a license to practice as a psychologist and health professional is deployed to work with personnel who are interrogating detainees, both lawful and unlawful enemy combatants. In preparing for his work he has read all APA resolutions regarding torture and other cruel, inhuman or degrading treatment or punishment and the documents cited in the 2006 and 2007 Resolutions. Reading *Principles of Medical Ethics relevant to the Role of Health Personnel, particularly physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment* (particularly Principles 3 and 4) he becomes concerned that it is unethical for him to assist in any way with the interrogation of detainees, given that **Principle 3** says “It is a contravention of medical ethics for health personnel, particularly physicians, to be involved in any professional relationship with prisoners or detainees the purpose of which is not solely to evaluate, protect or improve their physical and mental health.”

Additionally, he sees that the interrogations adversely affect the physical or mental health or condition of the detainees, as do the very conditions under which they detainees are being held. Is it ethical for the clinical psychologist to assist in interrogations? If it is ethical, how is it ethical?

Submission 9

A psychologist is assigned to Guantanamo. Upon arrival, she discovers that it is Standard Operating Procedure to place new detainees in prolonged isolation. One of her tasks is to monitor the mental health of these detainees, assess their readiness for interrogation, and watch over them. The psychologist is concerned that to perform this task would be to participate in a procedure that is prohibited by the August, 2007 resolution as amended in February, 2008. First, would it be ethical for a psychologist to be monitoring a detainee’s mental health for the purpose of getting them ready for interrogation and, in particular, as a means of breaking their inner resolve? If so, how does her activity not conflict with the August, 2007 Resolution as amended? If not, what are her options?

Submission 10

Psychologists treat detainees for various forms of mental distress and make notes in the detainees’ medical records. May psychologists share this information with interrogators? The psychologists are aware that the Department of Defense takes the position that medical records are not confidential for the purpose of protecting national security. Even if the psychologists do not share the information what is their ethical responsibility if they know the interrogators have access to the information, regardless of whether the psychologists provided it? If the psychologist knows interrogators are using this information, what is his ethical obligation?

Ethics Committee Response

The role of consultant to an interrogation and the role of health care provider are exclusive and must be kept separate. Separation of these two roles is grounded in the PENS report. According to the PENS report, “Psychologists are sensitive to the problems inherent in mixing potentially inconsistent roles such as health care provider and consultant to an interrogation, and refrain from engaging in such multiple relationships.”

Thus, to respond to the scenario most directly, a psychologist should not both provide health care and consult to an interrogation. The PENS report and the United Nations “Principles of Medical Ethics Relevant to the Role of Health Personnel, Particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment” are consistent on this point. As a consequence, a psychologist would not be in the dual position of providing health care and consulting to an interrogation.

A corollary of the incompatibility between these two roles is that interrogators should not examine a medical record in order to use information the psychologist has entered for the purposes of interrogating a detainee. The implication of the separation of these two roles for the handling of medical records was addressed in the PENS report, Statement 3: “Psychologists who serve in the role of supporting an interrogation do not use health care related information from an individual’s medical record to the detriment of the individual’s safety and well-being.” It will also be essential for the psychologist to be familiar with how relevant Army policy addresses the handling of medical records. If a psychologist becomes aware that interrogators are examining the psychologist’s notes in the medical record, the psychologist would inform the chain of command. Failing a satisfactory response, the psychologist would explore other reporting avenues (see the Ethics Committee’s response to Submissions 2 and 3).

In terms of the setting, the psychologist would be knowledgeable regarding the petition resolution, which Council adopted as APA policy in February 2010 and is titled “Psychologists and Unlawful Detention Settings With a Focus on National Security:”

Be it resolved that psychologists may not work in settings where persons are held outside of, or in violation of, either International Law (e.g., the UN Convention Against Torture and the Geneva Conventions) or the US Constitution (where appropriate), unless they are working directly for the persons being detained or for an independent third party working to protect human rights [or military psychologists providing treatment for military personnel].

Thus, the psychologist should not conduct this activity in an unlawful detention setting. If the detention setting is unlawful, the psychologist should not be involved in interrogations processes of any kind at that setting because the setting is unlawful.

The Committee has provided a combined response to Submissions 11 and 12.

Submission 11

A psychologist is working in a detainee center and notes the following conditions under which the detainees are held: many have been held for up to five years without being charged; they are never given any information regarding the status of their imprisonment; they have had no communication with their families and loved ones and do not know if they are dead or alive; they lack habeas corpus and due process rights; and they have limited, inconsistent and unreliable access to their attorneys. In response to all of this

they have become despondent, hopeless, depressed, demoralized and for some, suicidal. She knows that numerous human rights organizations have decried the lack of rights for detainees as constituting torture or other cruel, inhuman or degrading treatment or punishment. The psychologist concludes that these conditions under which the detainees are held constitute, in and of themselves, torture or other cruel, inhuman degrading treatment or punishment, irrespective of what is happening in interrogations. She concludes it is unethical for her to participate in any way with the interrogation of detainees held under these conditions.

Does her professional organization, the American Psychological Association, reach the same conclusion regarding the ethics of participating in interrogations where detainees are kept in conditions which constitute torture or other cruel, inhuman or degrading treatment or punishment? If not, please explain why these conditions do not fit these criteria and how you would advise the psychologist. The psychologist refuses to participate and is ordered to. What is her ethical responsibility?

Submission 12

A psychologist is ordered to report to a detention center. He reads the APA Resolutions and, in particular, the following in the 2007 Resolution:

“BE IT RESOLVED that the American Psychological Association, in recognizing that torture and other cruel, inhuman or degrading treatment and punishment can result not only from the behavior of individuals, but also from the conditions of confinement, expresses grave concern over settings in which detainees are deprived of adequate protection of their human rights, affirms the prerogative of psychologists to refuse to work in such settings, and will explore ways to support psychologists who refuse to work in such settings or who refuse to obey orders that constitute torture;”

The psychologist, who believes the conditions of confinement for the detainees do result in torture or other cruel inhuman or degrading treatment or punishment, feels that the above paragraph offers him no protection for the repercussions of refusing his duty assignment. He turns to the APA Ethics Office and Committee to conclude, as he has, that such conditions are unethical, as they constitute torture or cruel inhuman or degrading treatment or punishment. What response does he get from the Ethics Committee? The psychologist refuses his assignment, is given an unsatisfactory fitness report and denied promotion. If he turned to the Ethics Committee for help, what would the committee do?

Ethics Committee Response

The 2007 resolution states explicitly that in addition to specific behaviors, the conditions of confinement can also constitute torture and CID:

BE IT RESOLVED that the American Psychological Association, in recognizing that torture and other cruel, inhuman or degrading treatment and punishment can result not only from the behavior of individuals, but also from the conditions of confinement.

In this resolution, Council expressed “grave concern over settings in which detainees are deprived of adequate protection of their human rights,” and affirmed “the prerogative of psychologists to refuse to work in such settings.” Thus, Council explicitly recognized that conditions of confinement can constitute torture and CID, expressed grave concern over a deprivation of human rights, and affirmed the prerogative of psychologists not to work in such settings.

In 2009, Council adopted as APA policy the petition resolution “Psychologists and Unlawful Detention Settings With a Focus on National Security.” The petition resolution addresses directly the legal framework of the setting:

Be it resolved that psychologists may not work in settings where persons are held outside of, or in violation of, either International Law (e.g., the UN Convention Against Torture and the Geneva Conventions) or the US Constitution (where appropriate), unless they are working directly for the persons being detained or for an independent third party working to protect human rights [or providing treatment to military personnel].

It is contrary to APA policy for a psychologist to work in an unlawful detention setting, other than in the specific roles excepted above.

APA has written numerous letters to governmental officials, including U.S. presidents, members of Congress, and heads of federal agencies, to ensure they are informed of APA policy. APA has ensured that the relevant governmental entities are fully informed regarding APA policy. A list of government officials who were contacted by APA is available at <http://www.apa.org/ethics/programs/position/outreach/index.aspx>.

It would also be important to ensure that the psychologist has an accurate understanding of the current legal framework governing *habeas corpus*, following actions by the U.S. Supreme Court and President Obama’s executive order “Ensuring Lawful Interrogations.”

Submission 13

A detainee in isolation suffers from severe symptoms, including suicide attempts. He is referred for mental health treatment and is seen by psychologists who are not part of the interrogation. The detainee begs to be out of isolation. The psychologists can make recommendations, but the interrogators do not have to follow the recommendations. Does the psychologist have an obligation to treat this detainee? Does the psychologist have an obligation to determine if the detainee’s condition is a product of interrogation? Does the psychologist have an obligation to report the conditions of confinement? What should the psychologist do if he concludes that after treating the detainee he will be further exposed to the interrogation techniques that contributed to emotional mental deterioration? What is his ethical responsibility in this case? How can the psychologist protect his/her clinical independence?

Ethics Committee Response

This scenario raises the question of a psychologist's responsibilities when the psychologist is providing health care to a detainee and has reason to believe that the detainee's suicide attempts are the direct result of how the detainee is being treated at the facility.

In this instance, this psychologist would continue to provide health care to the detainee. The psychologist would immediately report concerns about the detainee's mental status. Finally, the psychologist would take the steps necessary to stop any form of interrogation that was resulting in the detainee's suicidal behavior.

In this scenario, the psychologist's ethical responsibility would be to take the immediate steps necessary to protect the detainee's life.

Submission 14

A BSCT [behavioral science consultant] team member (a psychologist) does a psychological evaluation of a detainee, as permitted by current regulations and APA policy, with the proviso that it can't be used for torture or other cruel, inhuman or degrading treatment or punishment. The interrogator says, "Thank you very much" and does not disclose what form of interrogation will be used. What bearing does ignorance of interrogation methods have on the psychologist duty to act ethically? In the same scenario suppose the psychologist asks what interrogation methods are or will be used and the interrogators says, "Sorry, I can't share that information because it is classified." What is the ethical responsibility of the psychologist in this scenario?

Ethics Committee Response

In this scenario, the psychologist is not given information about how the evaluation the psychologist conducted is being used in the interrogation. If the psychologist has reason to believe that methods of interrogation constituting torture and CID are being used in the interrogation, the psychologist will bring these concerns to the chain of command. The psychologist will take this action based, in part, on Council's 2006 resolution, which states:

BE IT RESOLVED that psychologists shall be alert to acts of torture and other cruel, inhuman, or degrading treatment or punishment and have an ethical responsibility to report these acts to the appropriate authorities;

A reporting obligation is also imposed by the PENS report. In accordance with the 2006 resolution and the PENS report, the psychologist should notify the chain of command if the psychologist had cause to believe that the interrogation involved torture or CID. The ethical obligation to report would not be limited to the psychologist's concerns over how the psychological evaluation was being used but would rather extend to the conduct of the interrogation as a whole. If the psychologist was not satisfied with the result of

reporting such concerns, the psychologist would consider other reporting avenues such as the judge advocate and/or the inspector general (see the Ethics Committee's response to Submissions 2 and 3).

The Committee has provided a combined response to Submissions 15 and 16.

Submission 15

A BSCT team member (a psychologist) is asked to advise an interrogator. The psychologist is aware that the detainee was subjected to sleep deprivation and isolation in the past, but the interrogator assures the psychologist that these techniques are not part of the current interrogation plan. Can the psychologist engage in the evaluation? Does it make a difference if the psychologist determines that past use of these methods had a deleterious effect on the detainee? Does the psychologist have an ethical obligation to report the use of sleep deprivation and isolation in the past?

Submission 16

A psychologist works for the CIA. He is assigned to a CIA secret prison—a so-called “black site.” A detainee is brought in for interrogation. For the previous thirty days, he had been confined in a small cell that was totally dark, with no human contact except for meal delivery by men in black whose faces were covered and who refused to answer any questions and never spoke to him. The psychologist is told that he will not be returned to that cell but that, after the interrogation, he will be put in a cell with a light source, though still alone. He will henceforth be allowed an hour of exercise each day and will be able to speak to his guards, though he will have no contact with other prisoners. The psychologist is asked to observe the interrogation through a one-way mirror and afterwards, give his impressions of the mental state of the prisoner and of his veracity. Is it ethical for the psychologist to agree to a consultative role in this interrogation?

Ethics Committee Response

The psychologists in these scenarios would begin with two texts: First, the 2008 APA resolution that imposes an absolute ban on isolation (see the Ethics Committee's response to Submissions 2 and 3); and second (relevant to Submission 16), “Psychologists and Unlawful Detention Settings With a Focus on National Security.” These two texts provide the foundation for the psychologists' response to these scenarios.

The psychologists in these scenarios would also examine Council's 2006 resolution.

BE IT RESOLVED that psychologists shall be alert to acts of torture and other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment and have an ethical responsibility to report these acts to the appropriate authorities;

The PENS report also has a reporting requirement. Thus, in accordance with the 2006 resolution and the PENS report, a psychologist who is aware that torture and CID have occurred should report such acts to the appropriate authorities.

Council's 2006 resolution also states:

BE IT RESOLVED that based upon the APA's long-standing commitment to basic human rights including its position against torture, psychologists shall work in accordance with international human rights instruments relevant to their roles;

Pursuant to this aspect of Council's 2006 resolution, the psychologists would examine Council's 2008 resolution and the five international texts invoked therein. Taking the Council resolutions into account, and with the aid of consultation, the psychologists would determine what manner of proceeding is most consistent with the APA Ethics Code and APA policy.

Regarding the setting, the psychologists would be knowledgeable regarding the petition resolution, which Council adopted as APA policy in February 2010 and is titled "Psychologists and Unlawful Detention Settings With a Focus on National Security:"

Be it resolved that psychologists may not work in settings where persons are held outside of, or in violation of, either International Law (e.g., the UN Convention Against Torture and the Geneva Conventions) or the US Constitution (where appropriate), unless they are working directly for the persons being detained or for an independent third party working to protect human rights [or military psychologists providing treatment for military personnel].

Thus, the psychologists would determine whether the detention setting is a lawful detention setting. If the setting is an unlawful setting, APA policy prohibits the psychologists from working at the setting, except in the roles identified in the petition resolution as exceptions to the prohibition. President Obama's January 2009 executive order, "Ensuring Lawful Interrogations" would be relevant to this determination.

The Committee has provided a combined response to Submissions 17 and 18.

Submission 17

A military psychologist has been assigned to a detention facility (e.g. Gitmo) and has been ordered by his commanding officer to consult with an interrogation team in the pre-interrogation treatment process of a detainee consisting of sleep deprivation, sensory deprivation, over-stimulation and isolation designed to soften the detainee up for interrogations. The psychologist tells his commanding officer that in his opinion the infliction of mental stress involved in this procedure violates his professional code of conduct. His commanding officer responds that in fact the August 2007 APA resolution allows for the infliction of minor or moderate pain or suffering as long as the pain or suffering is not "significant." Part of his role as consultant is to insure the pain or suffering does not obtain at a "significant" level of suffering or that it causes the detainee to "break down." A goal therefore is to actually prevent torture, or cruel, inhuman, or

degrading suffering. He instructs the psychologist that the Commander-in-Chief of the U.S. armed forces has defined “significant” or “severe” pain or suffering (i.e. torture) as treatment that is likely to result in organ failure, death, or permanent bodily damage. Furthermore the Administration’s Office of Legal Council (OLC) has informed the Commander-in-Chief that this threshold for permissible infliction of pain or suffering is legally justified within his Constitutional authority as Commander-in-Chief. The psychologist realizes that if he refuses to participate, APA will “support” his decision not to participate in some vague way, but it does not affirm that his decision is based upon a clear ethical foundation since he could also choose to participate in the order without violating the APA Code of Conduct. If he refuses he realizes his military career is either essentially over or seriously jeopardized. Even if he is not kicked out of the army, his chances for advancement are poor. Note: Re. use of male pronouns: both the psychologist and the commanding officer could be either male or female. This vignette is...based on the opinion that the 2007 Resolution on torture is flawed and should be revised. A separate statement of this opinion will be made later.

Submission 18

First, do no harm. Although, that principle alone should resolve the question, apparently the APA requires other reasons to prohibit its members from engaging in torture. The United Nations Convention Against Torture defines torture as: “any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity. It does not include pain or suffering arising only from, inherent in or incidental to lawful sanctions.” Aiding and abetting so-called “harsh interrogation techniques” is torture. Do not kid yourselves. You are not talking about asking a guy questions for 26 hours. You are talking about torture. Behavior that is just short of “likely to result in organ failure, death, or permanent bodily damage” includes severe beatings, sensory deprivation, rape, waterboarding, kidnapping of children and spouses and other activities that, in the past, the United States has itself prosecuted as war crimes. The American Military and the CIA know from experience that the result of torture is not information, it is confession. While there are many examples, our experiences in Vietnam are the most documented. Our officers found that conventional interrogation was the most effective method of obtaining information and the most likely way to assist with counter-insurgency. Confessions waste time, resources and lives. Torture only produces notoriously unreliable confessions - not information. Thus, the APA’s current position on aiding “harsh interrogation techniques” does not produce the desired result. “Harsh interrogation techniques” also harm the questioner. Torturers are themselves harmed by the events. They suffer psychological effects. Torturers are more likely to become batterers, sexual predators, serial killers, and are more likely to physically harm themselves. Hopefully, the APA will protect its own members from such harmful circumstances. Torture also harms wider society. It represents a breakdown in the rule of law. The perception that you can be picked up and tortured at the whim of the ruler

divorces people from feeling a part of a wider society. Torture breaks down the essential mutual trust necessary for a functioning modern society. Finally, I would refuse treatment from and would urge others to refuse treatment from someone who was a member of an organization that assisted its members in actively harming another person. Even if you do not accept the premise that long-term sleep deprivation, “stress” positions, waterboarding, child/spousal kidnapping (yes, it is documented that it was policy for the US to imprison the spouse and/or children of certain targets to get them to turn themselves in) and other activities used by the Administration in Iraq is torture, there is no argument that it is harmful.

Ethics Committee Response

These vignettes make reference to law that may no longer be valid and to a Council resolution that has been updated. The author of Submission 17 states, “This vignette is . . . based on the opinion that the 2007 Resolution on torture is flawed and should be revised”; whereas the author of Submission 18 addresses “harsh interrogation techniques.” In 2008, Council addressed specific techniques of interrogation.

Council’s 2008 resolution was written precisely to address concerns regarding the 2007 resolution. The 2008 resolution states:

BE IT RESOLVED that this unequivocal condemnation includes all techniques considered torture or cruel, inhuman or degrading treatment or punishment under the United Nations Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment; the Geneva Conventions; the Principles of Medical Ethics Relevant to the Role of Health Personnel, Particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment; the Basic Principles for the Treatment of Prisoners; or the World Medical Association Declaration of Tokyo. An absolute prohibition against the following techniques therefore arises from, is understood in the context of, and is interpreted according to these texts: mock executions; water-boarding or any other form of simulated drowning or suffocation; sexual humiliation; rape; cultural or religious humiliation; exploitation of fears, phobias or psychopathology; induced hypothermia; the use of psychotropic drugs or mind-altering substances; hooding; forced nakedness; stress positions; the use of dogs to threaten or intimidate; physical assault including slapping or shaking; exposure to extreme heat or cold; threats of harm or death; isolation; sensory deprivation and over-stimulation; sleep deprivation; or the threatened use of any of the above techniques to an individual or to members of an individual’s family. Psychologists are absolutely prohibited from knowingly planning, designing, participating in or assisting in the use of all condemned techniques at any time and may not enlist others to employ these techniques in order to circumvent this resolution’s prohibition.

Council agreed with these authors regarding the need to set forth a clear and absolute prohibition on specific interrogation techniques and so in 2008 amended the 2007 resolution.

Submission 19

A psychologist, who recently joined the military, found out that she is being sent to Guantanamo and is assigned to a Behavioral Science Consultation Team (BSCT). Having read that the United Nations Human Rights Commission has determined that treatment equivalent to torture is taking place there and that the International Committee of the Red Cross has said that the conditions of detention in themselves are tantamount to torture, she fears that human rights are being violated in Guantanamo Bay and she is concerned that her work at this site will compromise her and inevitably lead to violations of the APA ethics code. Does being part of this team at such a site violate the APA ethics code?

Ethics Committee Response

Prior to accepting this voluntary assignment, psychologists would be able to consult with the APA Ethics Committee and Office regarding APA policy and the APA Ethics Code as they relate to this work. Council has emphasized the importance of APA's providing such consultation, and a psychologist in this role is encouraged to make use of APA as a resource.

Based on the petition resolution, psychologists may not work in unlawful settings, other than specific roles such as working directly for the person being detained, providing treatment to military personnel, or working for an independent third party. If psychologists have questions regarding whether it is appropriate to work in a particular detention setting, they should examine relevant APA policy and other resources, such as authorities on U.S. and international law, to help make this determination. In 2009, Council adopted as APA policy a petition resolution that directly addresses the issue of unlawful detention settings. The petition resolution, "Psychologists and Unlawful Detention Settings With a Focus on National Security," states:

Be it resolved that psychologists may not work in settings where persons are held outside of, or in violation of, either International Law (e.g., the UN Convention Against Torture and the Geneva Conventions) or the US Constitution (where appropriate), unless they are working directly for the persons being detained or for an independent third party working to protect human rights [or the psychologist is providing treatment to military personnel].

Prior to accepting the assignment, the psychologist should consult if it is unclear whether the detention setting is lawful. In such an instance, consultation would be an important and helpful part of the process in determining whether the detention setting is lawful. If the detention facility is not lawful, the psychologist should request an alternate assignment, in keeping with the petition resolution, unless the psychologist is acting in one of the excepted roles specified in the petition resolution.

Submission 20

According to international instruments and their accompanying jurisprudence, “disappearance,” i.e., the capture and transport of a human being to a place of detention without acknowledgement of the capture or detention, is a form of torture. It is a form of torture directed at both the detainee’s family and the detainee himself or herself. Detainees held at CIA black sites are considered “disappeared” according to the UN definition (i.e., the detainee, “by being subjected to prolonged incommunicado detention in an unknown location, is the victim of torture and cruel and inhuman treatment,” *El-Megreisi v Libya*, Report of the United Nations Human Rights Committee). The Inter-American Court of Human Rights states that, “prolonged isolation and deprivation of communication are themselves cruel and inhuman treatment, harmful to the psychological and moral integrity of the person.” ---- May a psychologist at a CIA black site supervise the interrogation of a detainee kept in such conditions? Or must the psychologist follow the 2006 resolution, which asserts that “should torture or other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment evolve during a procedure where a psychologist is present, the psychologist shall attempt to intervene to stop such behavior, and failing that exit the procedure”? --> Sources: The U.N. Human Rights Committee, the European Court of Human Rights, and the Inter-American Court of Human Rights have all issued decisions on individual petitions that deal with the issue of “disappearances” amounting to possible acts of torture. For example, *Mojica v. Dominican Republic* (“the disappearance of persons is inseparably linked to treatment that amounts to a violation of Article 7”) (449/1991, para 5.7). The European Court of Human Rights has also held that the extreme pain and suffering inflicted on the mother of the “disappeared” person is a violation of Article 3 of the European Convention for the Protection of Human Rights and Fundamental Freedoms (*Kurt v. Turkey*, Eur. Ct. Hum. Rts, Case No.15/1997/799/1002, 25 May 1998, para.134). Similarly, the Inter-American Court of Human Rights, in the well-known case of *Velasquez Rodriguez*, held that “the mere subjugation of an individual to prolonged isolation and deprivation of communication is in itself cruel and inhuman treatment” (Inter-American Court H.R., *Velasquez Rodriguez* case, Judgment of July 29, 1988. Series C N° 4, para. 187)

Ethics Committee Response

First, President Obama’s executive order “Ensuring Lawful Interrogations” is directly relevant to this scenario. In light of this executive order, and as part of the process of obtaining a consultation if the psychologist remained unclear whether a detention setting was lawful, the psychologist would review the petition resolution “Psychologists and Unlawful Detention Settings With a Focus on National Security”:

Be it resolved that psychologists may not work in settings where persons are held outside of, or in violation of, either International Law (e.g., the UN Convention Against Torture and the Geneva Conventions) or the US Constitution (where appropriate), unless they are working directly for the persons being detained or for an independent third party working to protect human rights [or to provide treatment to military personnel].

It is contrary to APA policy for a psychologist to work in a detention setting that is unlawful, with the exceptions noted in the petition resolution. As a consequence, the psychologist in the scenario would need to determine whether the site is a lawful or unlawful detention setting. It would be essential in this circumstance for the psychologist to pay particular attention to executive orders issued by President Barack Obama in January 2009, to determine whether the detention facility in question is consistent with current U.S. law.

Submission 21

In 2003, the CIA acknowledged that it had kidnapped two children of a suspected terrorist, ages 7 and 9, and held them at a CIA “black site.” Before their father was captured, the children were interrogated so that the CIA might discover from them their father’s whereabouts. After their father was captured, the detained children were held as hostages to pressure their father into giving up information. By one account, the two children were pressured into giving up information by having insects put on their legs to scare them. [Testimony of Ali Khan, father of Guantanamo prisoner Majid Khan, submitted to the Combatant Status Review Tribunal at Guantanamo in March 2007.] CIA interrogators stated at the time that, “We have child psychologists on hand at all times and they are given the best of care.” -- Is it ethical for a child psychologist to offer care in such a circumstance? --- Is it ethical for a child psychologist to assert that children who have been kidnapped and are being held as hostages, away from home and family, in order to facilitate the interrogation of their father, be considered to be held under “the best of care”? -- Is it ethical for the child psychologist to allow the dissemination of such a statement to legitimize the governmental use of children for coercive purposes? --> Source: <http://intellnet.org/news/2003/03/08/17655-1.html>

Ethics Committee Response

A psychologist in this situation should be aware that law and APA policy speak directly to the behaviors described: kidnapping children, transporting them to a detention facility, and using insects to scare them in order to assist in an interrogation. APA policy clearly prohibits these activities.

Council’s 2008 resolution directly addresses the involvement of a detainee’s family:

BE IT RESOLVED that this unequivocal condemnation includes all techniques considered torture or cruel, inhuman or degrading treatment or punishment under the [five international texts]. An absolute prohibition against the following techniques therefore arises from, is understood in the context of, and is interpreted according to these texts:... exploitation of fears, phobias or psychopathology...or the threatened use of any of the above techniques to an individual *or to members of an individual’s family* [emphasis added]. Psychologists are absolutely prohibited from knowingly planning, designing, participating in or assisting in the use of all condemned techniques at any time and may not enlist others to employ these techniques in order to circumvent this resolution’s prohibition.

These texts make absolutely clear that the behaviors described in the submission, that is, kidnapping children, transporting them to an unlawful detention facility, and then using insects to scare them in order to aid in the interrogation of a parent, would constitute violations of APA policy.

Submission 22

Two psychologists are interrogating a prisoner using techniques which include isolation, humiliation, forced nakedness, and waterboarding. Their supervisor, also a psychologist, enters the room, sees what the two are doing, and leaves in disgust. The supervisor takes no further action and the interrogation techniques continue. ---What ethical violations, if any, have been committed by the supervisor?

Source: Vanity Fair: Rorschach and Awe

[<http://w.vanityfair.com/politics/features/27/07/torture200707>]

Ethics Committee Response

The psychologist would be familiar with Council's 2006 resolution, which states:

BE IT RESOLVED that psychologists shall be alert to acts of torture and other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment and have an ethical responsibility to report these acts to the appropriate authorities;

The PENS report states "Psychologists are alert to acts of torture and other cruel, inhuman, or degrading treatment and have an ethical responsibility to report these acts to the appropriate authorities."

Thus, the 2005 and 2006 APA policies speak directly to a psychologist's responsibilities in such a scenario.

Submission 23

A prisoner is held in a cell that measures nine feet by seven feet. The windows are covered over ... No pillow is given. There is no sheet. No clock. No calendar. No telephone calls. No visitors. These conditions have continued for two years, during which time he has been denied contact with lawyers. He is fed through a slot in the door. If prison staff enter the cell, their identifying information is covered. In preparation for trial, a psychologist evaluates the prisoner through a rectangular slot in his isolation cell for two minutes. The psychologist concludes, based on that interview and the reports of the guards, that there are no signs of "distress" or "lethality" and there have been no significant changes since a previous assessment two years earlier. This report is offered as testimony that the prisoner is competent to stand trial. -- Is it ethical for the psychologist to neglect to report the isolation and sensory deprivation? -- Is it ethical to make any form of assessment based on such minimal information? -- Is it ethical for the psychologist to support the sensory deprivation plan by not entering the room and by not

identifying him or herself? --> Source: USA Today,
http://www.usatoday.com/printedition/news/20070228/a_padill1a28art.htm

Ethics Committee Response

Several APA policies speak directly to the specific questions raised in this submission. This submission asks whether the psychologist should report isolation and sensory deprivation and whether a 2-minute interview under restricted conditions is sufficient to assess the detainee's mental status and competence to stand trial.

First, it is important to recognize that the 2008 Council resolution prohibits specific activities, including isolation and sensory deprivation:

BE IT RESOLVED that this unequivocal condemnation includes all techniques considered torture or cruel, inhuman or degrading treatment or punishment under the United Nations Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment; the Geneva Conventions; the Principles of Medical Ethics Relevant to the Role of Health Personnel, Particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment; the Basic Principles for the Treatment of Prisoners; or the World Medical Association Declaration of Tokyo. An absolute prohibition against the following techniques therefore arises from, is understood in the context of, and is interpreted according to these texts: . . . isolation; sensory deprivation . . .

With respect to the reporting issue, Council's 2006 resolution states:

BE IT RESOLVED that psychologists shall be alert to acts of torture and other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment and have an ethical responsibility to report these acts to the appropriate authorities.

The PENS report also requires psychologists to notify the chain of command if they believe that an interrogation involves torture or CID.

With respect to the assessment issue, the psychologist would review the literature and research regarding what constitutes an appropriate assessment for rendering an opinion regarding competence to stand trial, and review Ethical Standard 9.01, Bases for Assessments, which states:

9.01 Bases for Assessments

(a) Psychologists base the opinions contained in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, on information and techniques sufficient to substantiate their findings. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)

(b) Except as noted in 9.01c, psychologists provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions. When, despite reasonable efforts, such an examination is not practical, psychologists document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions, and appropriately limit the nature and extent of their conclusions or recommendations. (See also Standards 2.01, Boundaries of Competence, and 9.06, Interpreting Assessment Results.)

(c) When psychologists conduct a record review or provide consultation or supervision and an individual examination is not warranted or necessary for the opinion, psychologists explain this and the sources of information on which they based their conclusions and recommendations.

Thus, in order to determine an ethical course of action regarding the request to assess this detainee, the psychologist would review the 2006 and 2008 Council resolutions, Ethical Standard 9.01, and the relevant literature regarding what examination is adequate to render an opinion regarding the detainee's mental status and competence to stand trial.

Submission 24

According to draft instructions written for military intelligence psychologists at detainee sites, including Guantanamo, operational psychologists supervising interrogations and detention conditions, "assist in helping make sure that the environment maximizes effective detainee operations. The psychologist can assist in making sure that everything that a detainee sees, hears, and experiences is a part of the overall interrogation plan." However, according to a report issued by the United Nations Human Rights Commission, "the general conditions of detention [at Guantanamo], in particular the uncertainty about the length of detention and prolonged solitary confinement, amount to inhuman treatment and to a violation of the right to health as well as a violation of the right of detainees under article 10, paragraph 1, of ICCPR [International Covenant on Civil and Political Rights] to be treated with humanity and with respect for the inherent dignity of the human person." Another report by the U.N. Committee on Torture stated that "The Committee, noting that detaining persons indefinitely without charge, constitutes per se a violation of the Convention [The U.N. Convention on Torture and other Cruel, Inhuman or Degrading Treatment or Punishment], is concerned that detainees are held for protracted periods at Guantanamo Bay, without sufficient legal safeguards and without judicial assessment of the justification for their detention"-- Must operational psychologists at sites such as Guantanamo, where, according to reports by Human Rights First and Amnesty International, a majority of detainees continue to be held in indefinite detention and prolonged isolation, follow the requirements of the 2006 APA resolution, which asserts that "should torture or other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment evolve during a procedure where a psychologist is present, the psychologist shall attempt to intervene to stop such behavior, and failing that exit the procedure"? --- In other words, do APA ethical principles and standards

require operational psychologists at sites where such conditions are chronic and systematic to request transfer? --- How does the APA ethics committee assess a psychologist's "willful ignorance" of such circumstances? For example, is it acceptable for a chief psychologist working at a site where a majority of detainees are held in conditions that the UN deems "inhuman treatment" to state, "I learned a long, long time ago, if I'm going to be successful in the intel community, I'm meticulously - in a very, very dedicated way - going to stay in my lane ... So if I don't have a specific need to know about something, I don't want to know about it. I don't ask about it."? ---- Is such willful ignorance ethical? -> Sources: International Herald Tribune, <http://www.ihrt.com/articles/2006/02/16/america/web.0216un.php>---Human Rights First, <http://www.acsblog.org/guest-bloggers-hamdan-wants-out-from-solitary-confinement-debates-on-classified-evidence.html> ---- CBS News and Associated Press, <http://www.cbsnews.com/stories/2008/02/07/national/main3800426.shtml> ---Amnesty International, Cruel and Inhuman: Conditions of isolation for detainees at Guantanamo Bay <http://web.amnesty.org/library/index/engAMR510512007>--United Nations Committee on Torture, <http://www.ohchr.org/english/bodies/cat/docs/AdvanceVersions/CAT.C.USA.Co.2.pdf>United Nations Human Rights Commission, http://w.ohchr.org/english/bodies/chr/docs/62chr/E.CN.4.2006.120_.pdf

Ethics Committee Response

Psychologists are expected to be aware of and abide by all APA policies related to their roles. Thus, in response to the question about whether psychologists are expected to be familiar with and to follow relevant APA policies, the answer is an emphatic yes.

This vignette addresses several aspects of a legal framework, some of which no longer apply. Policies relevant to the legal framework regarding detention sites include the petition resolution "Psychologists and Unlawful Detention Settings With a Focus on National Security," which states:

Be it resolved that psychologists may not work in settings where persons are held outside of, or in violation of, either International Law (e.g., the UN Convention Against Torture and the Geneva Conventions) or the US Constitution (where appropriate), unless they are working directly for the persons being detained or for an independent third party working to protect human rights [or provide treatment to military personnel].

The petition resolution prohibits psychologists from working at unlawful detention sites unless in roles that are excepted by the resolution.

Submission 25

The 2008 "Amendment to the Reaffirmation of the American Psychological Association Position Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment and Its Application to Individuals Defined in the United States Code as 'Enemy Combatants'" prohibits "forced nakedness." In a detention facility, detainees

may be strip searched when there is cause to believe they may be hiding a weapon.
Would a strip search violate this 2008 amendment?

Ethics Committee Response

The 2008 resolution prohibits specific activities, including forced nakedness.

For the purpose of considering how the prohibition against forced nakedness would apply to a strip search as described in the vignette, the resolution's invocation of the five international texts provides guidance. The resolution states that its absolute prohibition against specific activities, including forced nakedness, "arises from, is understood in the context of, and is interpreted according to these texts."

A strip search as described in the vignette is conducted for the purpose of maintaining a safe detention environment and preventing acts of violence. A psychologist is not involved in conducting the strip search, and the strip search is not part of the process of interrogating the individual. For these reasons, the Committee concludes that the prohibitions against torture and CID are of limited application to a strip search as described in this scenario.

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**Confidential List of Potential Names for the
Task Force to Explore the Ethical Aspects of Psychologists' Involvement and the Use of
Psychology in National Security-Related Investigations**
(List should not be considered exhaustive)

Jean Maria Arrigo, PhD (Recommended by Division 48) Dr. Arrigo is a social psychologist with a focus on the Ethics of Military Intelligence. She has contacts in the US military which could be a valuable source of information to the deliberations of the Task Force. She recently published an article entitled, "A Utilitarian Argument Against Torture Interrogation of Terrorists," in the July 2004 issue of *Science and Engineering Ethics*. She is also co-editor of a special issue of the *Journal of Peace and Conflict* on Military Ethics and Peace Psychology: A Dialogue.

Col. Paul T. Bartone, PhD (Recommended by Division 19) (Member, Divisions 1,8,13,52; Fellow, 19) is the former President of APA's Division 19, Society for Military Psychology, and is currently a Professor of Behavioral Sciences at the National Defense University's Industrial College of the Armed Forces at Fort McNair in Washington, DC. Previous appointments include Director of the U.S. Military Academy's Behavioral Science and Leadership Division, and Commander of the U.S. Army Medical Research Unit-Europe. Bartone's research covers a range of issues related to military personnel performance, including stress, leadership and coping with POW conditions.

John M. Darley, PhD, (Member, Divisions 7 and 41; Fellow, 8 and 9) is the Warren Professor of Psychology at Princeton University. Much of his research has focused on decisions and actions that have moral components or implications. More recently, he has been looking directly at moral decisions, particularly ones involved in the decision to punish another for a transgression. He has a related interest in interpersonal power and how it plays out in social interactions, and how we attempt to manage others with incentive systems.

CDR Anthony (Tony) P. Doran, PsyD. (Member, Divisions 1 and 19) is a psychologist with the Navy Personnel Command's Behavioral Health Program & EFM Program in Tennessee. Division 19's President notes that Commander Doran has had very recent and intensive experience with repatriations, detainees in Cuba, and running a survival and evasion school.

Debra Dunivin, PhD (Member, Divisions 9,18,19,28,35; Fellow, Divisions 31,42,55) is deputy director of the department of psychology and director of training for the Clinical Psychology Residency Program at Walter Reed Army Medical Center in Washington, D.C. Other duties include a clinical practice in psychopharmacology and consultation to Walter Reed's Clinical Breast Care Project, conducting research in psycho-oncology and telehealth. Currently an active duty Army officer, Dunivin previously spent a year as a Fellow in the office of Sen. Daniel K. Inouye (D-HI) and participated in the Department of Defense Psychopharmacology Demonstration Project. Last year she consulted to the APA Board Task Force on Sexual Orientation and Military Service.

Phil Erdberg, PhD (Member, Divisions 12 and 39) An active duty Army psychologist from 1969 to 1974 (clinical psychology internship at Walter Reed Army Medical Center and staff

psychologist at Letterman Army Medical Center). Has continued his involvement with military psychology since leaving active duty, providing yearly training in psychological assessment for Army training programs in the United States and Europe and for the National Navy Medical Center in Bethesda, MD. Significant consultation relationship with FBI. A leading expert on the Rorschach, trained as a research psychoanalyst.

Michael Gelles, PsyD (Member, Divisions 18, 30, 41) Chief Psychologist of the United States Naval Criminal Investigative Service. Co-author, "Ethical Concerns in Forensic Consultation Regarding National Safety and Security."

Dennis Grill, PhD (Fellow, Division 19) Served on the Ethics Code Task Force as representative of Division 19.

Joseph D. Matarazzo, PhD (Member, Division 14; Fellow, Divisions 3,12,19,26,38,40) is a very distinguished research psychologist considered one of the "founding fathers" of health psychology. He currently serves as Professor of Behavioral Neuroscience at Oregon Health & Science University (he was chair of the medical school's Department of Medical Psychology from the late 50's through 90's, when it became the Department of Behavioral Neuroscience). Most well-known for his research in psychological testing and assessment (intelligence testing in particular), Matarazzo's current research interests relate to the domains of behavioral cardiology and of neuropsychology, including studies of neuropsychological functioning of patients following neurotoxic exposure or traumatic injury to the brain. Matarazzo has been extremely active in APA governance over the years.

Arthur G. Miller, PhD (Member, Divisions 8 and 9) is a Professor of Psychology at Miami University. His research interests have been focused primarily on prejudice, stereotyping, and biases in social judgment. In 1979, he was awarded an NIMH senior post-doctoral fellowship to study with Ned Jones at Princeton University. In 1986, he authored a definitive volume concerning the impact of Stanley Milgram's controversial experimental studies of obedience. He is the editor of a recent issue of the Journal of Social Issues entitled "Perspectives on Obedience to Authority: The Legacy of the Milgram Experiments" (Barry Collins of UCLA is second editor on this issue). He has recently conducted a graduate seminar on the social psychology of health, and is currently pursuing research on biases in the processing of health-relevant information. He has published on the subject of college students' attitudes and behaviors toward suntanning, and has given several presentations to the media (print and radio interviews) concerning psychological factors relating to risk-taking in the context of sun-exposure.

Olivia Moorehead-Slaughter, Ph.D (general APA Member) Vice-Chair of APA Ethics Committee. Chair of Massachusetts Licensing Board.

Corahann Okorodudu, Ph.D. (Member, Divisions 9, 35, 45, 48, 52) is Division 48 representative to Council. Co-sponsor of Council of Representatives item on this issue.

Robert (Bob) Roland, PsyD (Member, Divisions 19 and 38) is a clinical psychologist and Professor of Behavioral Sciences and Information Strategy for the Industrial College of the Armed Forces at the National Defense University in Washington, DC. Roland's commissioned

military career spans 30 years and includes organizational consultation, research, administration, direct service mental health and command. His assignments include the Army Medical Command Headquarters in Heidelberg, Command Medical Company Berlin Brigade, Special Operations Command, Special Forces Command, and the Army Intelligence and Security Command. He has worked extensively on clinical and operational issues related to POWs.

David Shapiro, PhD (Member, Division 39) is Professor of Psychology, Director of Clinical Training, Graduate Faculty, New York University. Wrote a letter that Trisha Crawford forwarded to the Council of Representatives listserve regarding activities at Guantanamo Bay.

R. Scott Shumate, PsyD (general APA Member) is the Director of Behavioral Sciences for the Department of Defense's Counterintelligence Field Activity office in the Washington, DC area. Shumate's previous experiences include a long operational career in the intelligence community. He has high level security clearances and participated in the summer 2004 workshop and luncheon meeting on psychology and national security settings coordinated by APA's Geoff Mumford.

Michael Wessells, PhD (Member, Divisions 9, 48, and 52). Received an APA Presidential Citation in 2004 in recognition of his "contribution to the development of peace psychology, including his role as founder and president of Division 48...co-chair of the Joint APA-Canadian Psychological Association presidential initiative on ethno-political warfare, and president of Psychologists for Social Justice."

Col. Tom Williams, PhD (Recommended by Division 19) (Member, Divisions 12,19,47) is Director of the Army Physical Fitness Research Institute (APFRI) at the U.S. Army War College in Carlisle, Pennsylvania. Williams is a clinical psychologist with extensive military operations and ethics experience and comes highly recommended by Division 19.

Linda M. Woolf, PhD (Recommended by Division 48) (President-Elect, Peace Psychology Division 48, APA Secretary, Society for the Teaching of Psychology (Div. 2, APA)). Dr. Linda M. Woolf is a Professor of Psychology at Webster University where she teaches courses related to the Holocaust, genocide, terrorism, human rights, and peace psychology, and is the Coordinator of the Center for the Study of the Holocaust, Genocide, and Human Rights, which she helped found in 1999. Dr. Woolf teaches within the International Human Rights and Multicultural Studies programs at Webster. Dr. Woolf's research concerns the psychosocial roots of mass violence particularly terrorism and genocide. She is also actively involved in the development of curriculum resources related to peace, mass violence, terrorism, torture, refugee studies, and international human rights.

COUNCIL OF REPRESENTATIVES

August 17 & 21, 2005

APPROVED MINUTES

I. MINUTES OF MEETING

A.(1) Council voted to approve the minutes of its February 18-20, 2005, meeting.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(2) Council voted to approve amending the Association Rules as follows (bracketed material to be deleted; underlined material to be added):

110-5.5 Filling vacancies (~~[[general] Officers~~). If any candidate for ~~[any APA] the office of President-elect, Recording Secretary or Treasurer~~ withdraws or becomes ineligible before the election results are tabulated ~~or before the start of his or her term of office~~, the result of the election shall be counted as if his or her name had not been on the ballot. [If an electee withdraws or becomes ineligible before the start of his or her term of office or prior to the first meeting of the board or committee once his or her term has begun, the result of the election shall be counted as if his or her name had not been on the ballot. If any member of a board or committee resigns or becomes ineligible when there is only one meeting of the board or committee left to complete his or her term, the board or committee may make an appointment to fill the vacancy. Otherwise, a substitute shall be elected for the unexpired term by Council with all deliberate speed. A board or committee may make an interim appointment to fill a vacancy until the election is completed.]

110-5.6 Filling vacancies (Board of Directors). Seats vacated by members of the Board of Directors not serving ex officio shall be filled for the unexpired term in accordance with the preferential voting procedure in Association Rule 110-2.2. The winner shall be determined by a new count of the most recent Directors' election that redistributes to the candidates remaining on the ballot the votes of candidates not seated. Thus the determining ballots of any candidate who is seated on the Board of Directors are excluded from the recount. This procedure shall be followed in turn if any winner is ineligible or unwilling to serve.

110-5.7 Filling vacancies (Board and Committee Members Elected by Council). If a candidate for any APA board or committee elected by Council withdraws or becomes ineligible before the election results are tabulated or resigns or cannot serve after election results are certified by the Elections Committee or after his or her term has begun, the vote will be recounted as if the resigning member's name had not been on the ballot. Based on the recount, the position shall be offered to the candidates in order of most votes received. If no candidate on the original ballot is eligible or willing to serve, a special election will be held if more than half the term remains, or if less than half the term remains, then the board or committee may appoint a person to fill the vacancy. In the case of appointment or special election, the board or committee shall attempt to choose an appointee or construct a slate of nominees with the same qualifications as originally sought unless the need no longer exists.

110-5.[7] 8 Board and committee chairs. Unless otherwise specified, the chairs of each standing board and committee shall be elected by the group itself. Unless otherwise specified, chairs of all other boards or committees shall be chosen by the board or committee through which these committees report.

B.(3) Council voted to elect 115 members listed to initial Fellow status, on the nomination of the indicated divisions and on the recommendation of the Membership Committee and the Board of Directors.

C.(31C) A new business item "Separate Slates for Board of Director Candidates Each Year" was referred to the Policy and Planning Board (P&P), the Board for the Advancement of Psychology in the Public Interest (BAPPI), the Board of Educational Affairs (BEA), the Board of Professional Affairs (BPA), the Board of

Scientific Affairs (BSA), the Committee for the Advancement of Professional Practice (CAPP), the Committee on Structure and Function of Council (CSFC), the Publications and Communications Board (P&C) and the Elections Committee.

D.(45) Council received an update on the new-business-in-progress item "Substituting of Candidates Slated for Election to Office."

E.(46) Council received an update on the new-business-in-progress item "APA Dues Credit for Members who are State, Provincial and Territorial Psychological Association Members."

F.(47) Council received an update on the new-business-in-progress item "Enhancing Member Dues Revenue."

G.(48) Council received an update on the new-business-in-progress item "Enhancing Membership Recruitment, Engagement and Retention."

III. ETHICS

No items.

IV. BOARD OF DIRECTORS

A.(4) Council voted to adopt as APA policy the following revised statement Health Care for the Whole Person:

Health Care for the Whole Person Vision and Principles

We, the undersigned health, public health, consumer, and health care groups consider the following to be important characteristics of health, public health, and health care as each currently exists in the United States:

The dominant conceptual model of health in the United States, and as a result, the U.S. health care system, artificially separates the mind and the body. This separation has a negative impact on health care access, health care costs, and quality of care with a disproportionate share of the burden falling on women, racial and ethnic minorities, and immigrant populations. Furthermore, this separation has a negative impact on public health as opportunities for prevention, education, and early intervention are denied.

The structure of the U.S. health care system diverges from the types of symptoms and problems patients and their families bring to their providers. Stigma and reimbursement issues are frequent barriers to appropriate health care.

A strong, integrated health care system and approach to public health in both urban and rural areas are the central (and missing) pieces of the health care puzzle.

There is abundant scientific evidence that behavioral, psychological, spiritual, and psychosocial factors are significant determinants of health status, healing, and health care utilization for all ages, including older adults.

Healthy People 2010 selected Leading Health Indicators "on the basis of their ability to motivate action, the availability of data to measure progress, and their importance as public health issues" across the life span. These indicators are:

"Physical Activity
Overweight and Obesity
Tobacco Use
Substance Abuse

Responsible Sexual Behavior
Mental Health
Injury and Violence
Environmental Quality
Immunization
Access to Health Care" (U.S. Department of Health and Human Services, 2000).

The ten most common problems adult patients bring to primary care--chest pain, fatigue, dizziness, headaches, swelling, back pain, shortness of breath, insomnia, abdominal pain, and numbness--together account for 40% of all primary care visits, but only 26% of these have a confirmed biological cause;

Childhood psychosocial dysfunction, viewed 25 years ago as a "new morbidity" is now recognized as the most common, chronic condition of children and adolescents... 50% of these children are identified by their primary care physicians.

Primary health care providers treat 75% of all mental health problems of which depression, anxiety, trauma sequelae, and family stress are the most prevalent;

Seventy percent of patients coming to primary care bring one or more family members, thus presenting an opportunity for family-focused care and for providers to work in partnership with patients;

U.S. expenditures on health care are now 14.9% of GDP. Total health care expenditures per capita have almost doubled since 1990 to \$5,440 in 2002; overall health care costs increased at a rate of 7.3 % in 2003; and HMO rate increases were 17% in 2004.

We note that many of the nation's leading health and health care entities have strongly endorsed new, integrated approaches to health and health care:

Institute of Medicine

"Ensuring cooperation among clinicians is a priority" (Committee on Quality of Health Care in America, 2001)

"A fundamental shift in the national perspective of the value and importance of psychological health..." (p. 117, Goldfrank et al., 2003)

National Institutes of Health

"...behavioral scientists, molecular biologists and mathematicians might combine their research tools, approaches and technologies to more powerfully solve the puzzles of complex health problems such as pain and obesity...with roadblocks to potential collaboration removed, a true meeting of the minds can take place..." (National Institutes of Health, 2004)

President's New Freedom Commission on Mental Health

"The integration of mental health and physical health is a crucial next step..."

"bridge the differences between the mental and physical health communities..." (Mental Health Commission, 2003)

The Future of Family Medicine

"recognizing fundamental flaws in the fragmented US health care systems and the potential of an integrative, generalist approach...the project identified...a New Model of practice [with the] following characteristics: a patient-centered team approach...patient care in the new Model will be...multidisciplinary team approach...will include behavioral scientists..." (Kahn, 2004)

U.S. Surgeon General

"mental health care should flow in the mainstream of health care ...[to] mend the destructive split between mind and body..." (USDHHS, 1999)

“A balanced community health system balances health promotion, disease prevention, early detection... require(s) a partnership between primary care and mental health.” (USDHHS, 2001)

Therefore, the undersigned health and health care groups endorse the promise of an integrated primary health care system and multidimensional approach to public health that

Rests on a biopsychosocial model of health and health care;

Meets the definition of quality of care;

Reduces the burden of illness and injury by an evidence-based emphasis on healthy behavior and psychological health in addition to physical health;

Reduces the incidence of untreated mental health problems;

Contributes to more effective use of resources and helps reduce the cost of health care with targeted, focused psychological health services in addition to physical health services;

Improves provider-patient relationships and satisfaction with care, and encourages patient-centered care;

Promotes healthy lifestyles and disease prevention.

In addition, integrated health care and biopsychosocial public health will help address the adverse health and mental health impact of environmental and psychosocial factors such as prejudice, discrimination, poverty, racism, disability, heterosexism and homophobia, and minority group stress.

We, the undersigned health, public health, and health care groups, believing a healthier population and a more rational health care system will result, affirm our intention to work together toward the development and application of a fully integrated health care and public health system.

Definitions

Integrated care is health care that addresses physical, mental and behavioral health issues at the same time and is optimally provided by a multidisciplinary team of providers.

According to its author, George Engel, MD, the biopsychosocial model adds “the patient, the social context in which he lives, and the complementary system devised by society to deal with the disruptive effects of illness” to traditional medical issues (Engel, 1977; p.135).

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B.(5) Council voted to approve amending the Association Rules as follows (underlined material to be added):

30-6. MOTIONS/REPORTS TO COUNCIL

30-6.2 Council may Adopt, File, Refer or Reject a report from a board, committee, task force, division or other body of APA. The motion to Adopt a report commits Council to the approval of the opinions and activities described, and thus, constitutes APA policy. However, in order to be implemented, recommendations contained in the report must be further presented to Council as main motions, with the usual accompanying information on fiscal implications and what entity has the responsibility to carry out the actions contemplated. If Council is asked to adopt a report that includes appendices, the motion to Council shall include a recommendation as to whether the appendices shall be filed or adopted. The motion to File a report or appendix makes it available for information and reference but commits APA to nothing. This report that has been filed by Council, whether posted on the APA web site or distributed in hard copy or other format, shall include a disclaimer on each page of the report stating that the report has been filed by Council but has not been adopted as a policy of APA, and therefore does not commit APA to the opinions or activities described therein. Recommendations proposed in a report that has been filed may be adopted by Council in the manner described above. The motion to Refer a report may send the report back to the originator(s) of the document or to other APA entities to address Council's questions or concerns. Council Rejects a report if it does not Adopt, File or Refer the document.

C.(6) Council voted to approve the following proposed revisions to Section IV of the APAPO Bylaws (bracketed material to be deleted; underlined material to be added), which will create a second category of constituents, who are voluntary contributors to the Education Advocacy Trust, and who will be known as "Education Constituents":

ARTICLE IV

MEMBERS

The Corporation shall have [a category] two categories of members. One category of members [consisting of a single class of members,] who are payers of the [special] practice assessment, [titled] shall be known as "Practice Constituents". The second category of members, who are payers to the Education Advocacy Trust, shall be known as "Education Constituents". Practice Constituents and Education Constituents shall not have voting rights.

D.(7) Council took no action on the item "Dates for August Council Meetings."

E.(7A) Council voted to approve the following motions in response to the Report of the Presidential Task Force on Psychological Ethics and National Security (PENS):

1. Council reaffirms the following Resolution Against Torture and Other Cruel, Inhuman, or Degrading Treatment (originally adopted by Council in 1986):

WHEREAS the American psychologists are bound by the Ethical Principles to “respect the dignity and worth of the individual and strive for the preservation and protection of fundamental human rights” and;

WHEREAS the existence of state-sponsored torture and other cruel, inhuman, or degrading treatment has been documented in many nations around the world and;

WHEREAS psychological knowledge and techniques may be used to design and carry out torture and;

WHEREAS torture victims may suffer from long-term, multiple psychological and physical problems,

BE IT RESOLVED that the American Psychological Association condemns torture wherever it occurs, and

BE IT FURTHER RESOLVED that the American Psychological Association supports the U.N. Declaration and Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment and the U.N. Principles of Medical Ethics, as well as the joint congressional Resolution opposing torture that was signed into law by President Reagan on October 4, 1984.

2. Council endorses APA creating a process whereby interested individuals and groups, from in- and outside APA, be asked to comment on the report in order to raise questions or concerns, for the purpose of writing an informative casebook and commentary with illustrative examples, with a comment period until December 31, 2005.

Council also requests that an item be forwarded to the Board at its December meeting that will address funding for a meeting of the PENS Task Force, which will write the casebook and commentary in collaboration with the APA Ethics Committee.

3. Council requests that the APA Ethics Committee, with consultation from the PENS Task Force as appropriate, continues to examine the goodness of fit between the Ethics Code and this area of research and practice.

4. Council requests that the Ethics Committee and Office begin to develop a process to offer ethics consultation to psychologists whose work involves classified material and who seek ethical guidance.

5. Council requests that the Ethics Committee, in consultation with the PENS Task Force, the Board of Professional Affairs, the Board of Scientific Affairs and Division 19, be charged with developing a statement or resolution to be forwarded to Council for adoption that will address further research relevant to national security, including evaluation of the efficacy and effectiveness of methods for gathering information that is accurate, relevant, and reliable. The statement or resolution should make clear that such research should be designed to minimize risks such as emotional distress to research participants and other individuals involved in interrogation processes, and should be consistent with standards of human subject research protection and the APA Ethics Code.

6. Council requests that the Ethics Committee, in consultation with the PENS Task Force, the Board of Professional Affairs, the Board of Scientific Affairs and Division 19, be charged with developing a statement or resolution to be forwarded to Council for adoption, recognizing that

issues involving terrorism and national security affect citizens in all countries and so encouraging behavioral scientists to collaborate across disciplines, cultures, and countries in addressing these critical concerns.

7. Council requests that the APA Central Office explore the feasibility of creating a repository to record psychologists' contributions to national security that will serve as a historical record and a resource concerning how psychologists involved in national security-related activities have met the ethical challenges of their work. Exploring the feasibility of creating such a repository will take into consideration that much of the relevant material may be classified and thus not publicly available.

8. Council requests that the APA Ethics Committee review the discrepancy between the language of the Introduction and Applicability section of the *Ethical Principles of Psychologists and Code of Conduct* and Ethical Standard 1.02, and make a recommendation to the Board of Directors concerning adding the words "in keeping with basic principles of human rights" to Ethical Standard 1.02. Council requests that this process move forward as expeditiously as reasonably possible, recognizing that a proposed amendment to the *Ethical Principles of Psychologists and Code of Conduct* will be subject to the review procedures required by Association Rule 30-8, Standards and Guidelines, and final Council action.

9. Council acknowledges, based on the U.N. Convention Against Torture, that there are no exceptional circumstances whatsoever, whether induced by a state of war or a threat of war, internal political instability or any other public emergency, that may be invoked as a justification for torture, including the invocation of laws, regulations, or orders.

10. Council directs APA to publicize both within and outside APA the 1986 resolution concerning human rights and torture.

11. In light of concerns about the possibility that individuals may have directly or indirectly participated in cruel, inhuman, or degrading treatment or torture at Guantanamo Bay and in other national or international situations, Council directs that any specific allegations against an APA member shall be referred to the Ethics Office.

F.(32) Council received an update on the business pending item "COR/Directorate Communication Regarding COR Priorities for APA."

G.(38) Council received as information the Report of the Task Force on External Funding.

V. DIVISIONS AND STATE AND PROVINCIAL ASSOCIATIONS

A.(31B) A new business item "Requirements for Petitioning for a New Division" was referred to the Committee on Division/APA Relations (CODAPAR), P&P, BSA and P&C.

VI. ORGANIZATION OF THE APA

A.(8) Council voted to approve that the following revisions to policies previously adopted by Council and included in the Council Policy Manual be updated to reflect the revisions (bracketed material to be deleted; underlined material to be added) and that policies adopted by Council be included in the Council Policy Manual (underlined material to be added):

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

1975 (Revise)

[Council approved the following recommendation dealing with the election of members of minority groups to boards and committees:

That the APA Central Office make available to the members of APA a yearly summary of the numbers of men, women, and minority groups (as defined by the U.S. Government and required on

EEO-1 reports) who were nominated, and the numbers of men, women, and minority groups who were elected and/or appointed to all APA boards and committees.

In addition,] Council requested that the members of the Council of Editors include routinely in their annual reports a summary of the men, women, and minority groups serving as editors, associate editors, consulting editors, and reviewers. Further, Council requested that the numbers of men, women, and minority groups who leave any of these positions also be made available.

1977 (Update)

(1) The nomination process shall begin in [February] December so that standing boards and committees have access to the recommendations for nominees from the Council of Representatives, divisions, state associations, and the *APA Monitor* solicitation when preparing slates of recommendations for the Board of Directors. All recommendations from all sources would also be included in the summary book of recommendations prepared for the Board Subcommittee on Nominations, as is presently done.

(2) Each standing board and committee shall submit a slate of candidates equal to the number to appear on the ballots, plus an equal number of alternates.

(3) All recommended candidates shall be rank ordered and a rationale provided for each one.

(4) Boards or committees that prepare separate slates for each position shall provide the reasons for doing so.

(5) The phrase "call for nominations" shall be replaced by the phrase "call for recommended candidates for election to boards and committees."

[Additionally, Council concurred with the task force recommendation that the Board Subcommittee on Nominations prepare an annual report to the membership on the nominations procedures and the results in terms of numbers of individuals recommended, the percentage who got on the ballot, and the percentage of those elected from the various sources, this report to be made available to the Council and submitted for publication in the *APA Monitor*. The task force also went on record in support of the Board statement (voted in June 1977) that no candidate should be nominated for a board or committee to run unopposed, except under extraordinary circumstances; when this is done, a full explanation should be presented on the ballot, as was done in the election held in 1977.]

1982 (Revise)

Council adopted the following "General Principles" (developed by the Policy and Planning Board) dealing with the APA election process:

Council rejects any requirement for a hiatus on one year in service on boards and committees. There should be no formal restriction on a person's sequential service on different boards and committees. Preference should be given to "new blood" rather than "old", if other factors as essentially equal, but the primary consideration in all elections or appointments should be, "Who can best serve the needs of APA in this particular assignment or office?"

No member of one standing board or committee or continuing committee shall serve simultaneously on any other continuing or standing board or committee of the Association unless formally authorized by a board or committee, and unless service is on a group that reports to that board or committee. This shall not preclude liaison assignments or consultant relationships, or task forces or commissions, or other ad hoc groupings, and shall not apply to divisions or officers of affiliated organizations.

Individuals serving in the APA Presidency cycle shall not hold offices within the Association other than ex officio positions that accompany the office. Operationally, (a) candidates for the presidency shall be restricted from running for any other elective office, such as division offices, within the Association while they are candidates for the presidency; and (b) a person elected to the APA

presidency shall, during the term of president-elect, president, and past president, be restricted from holding any other office in the Association that is not an ex officio extension of the presidential office.

The Council rejects any requirement for providing information on past and current service of candidates for election to boards and committees, endorsing the concept in principle but not adopting it as a hard and fast rule of the Association.

The Council also adopted the following as general principles, but not hard and fast rules: [(5)] (1) person[s] will normally be nominated for election to standing boards or committees only after they have served on an APA continuing committee, task force or commission, or on the Council; and [(6)] (2) continuing committee assignments and those to other appointed groups are considered important avenues for introducing members without prior board or committee experience into APA governance activities, but continuing committees should not be restricted from drawing on experienced members as appropriate to the parent group.

1996 (Insert)

On recommendation of the Board of Directors, Council voted to approve the establishment of a training program for new Council members to take place one day prior to the new members' first Council meeting.

1999 (Insert)

Council voted to approve the following motion regarding reimbursement for presidential candidates to attend the plenary session of Council:

That presidential candidates, who are not members of the current Council of Representatives, no longer be reimbursed for attending the plenary session of Council.

2000 (Update)

Council voted to direct all directorates and governance groups to identify strategies specific to that directorate or governance group and implement appropriate mechanisms that will provide opportunities for newcomers (those who have not previously served on the Council of Representatives or a board or committee, with exception of APAGS) to participate in governance. One of these mechanisms might be to propose a slate comprised solely of members who haven't previously served on the Council of Representatives or board or committee, with the exception of APAGS.

[Council voted to approve the establishment of a task force to be appointed by the President to consider methods of providing that each division and state association have at least one seat on Council. Council requested that the task force come back to Council with a recommendation in February 2001.

Council voted to elect 126 Members to initial Fellow status on the nomination of the indicated divisions and on the recommendation of the Membership Committee and the Board of Directors.

Council voted to approve the inclusion of \$27,000 in the 2001 Preliminary Budget for the establishment of a Task Force on Membership Retention and Recruitment assigned to formulate a systematic plan to foster the retention of members and appropriate outreach to nonmembers. The Task Force, to be composed of up to 15 people to be appointed by the President, will hold conference calls in 2000 and up to 2 meetings in 2001.

Council received an update on the new-business-in-progress item "Creation of a New Membership Category."

Council received an update on the new-business-in-progress item "New Criteria for Dues-Exempt Status."

Council received an update on the new-business-in-progress item "New Member States for Committees.]"

2004 (Insert)

Council voted to approve the following motion:

Because it believes that racial and ethnic diversity in the membership of Council has not been and is not currently satisfactory, Council finds that a program to provide incentives to Divisions and State, Provincial and Territorial Associations to elect ethnic minorities as Council representatives is in the best interest of APA.

Accordingly APA will reimburse any Division or State/Provincial/Territorial Psychological Association for the expenses incurred by representatives to Council who are ethnic minorities and who are elected during the years 2005-2007, to attend Council meetings. Reimbursement will be provided to Divisions, State, Provincial and Territorial Psychological Associations for transportation, hotel and meal expenses for both the February and August meetings of Council. APA strongly encourages Divisions and State, Provincial and Territorial Associations to submit one or more slates of nominees comprised solely of ethnic minorities.

For purposes of this program, ethnic minority identity is determined by self-identification as a member of one of the following four U.S. ethnic minority groups: African American/Black, American Indian/Alaska Native, Asian American/Pacific Islander, and Hispanic / Latino.

Council requests that the Board conduct a review of the effectiveness of this proposal and provide a recommendation to Council in August 2007 regarding funding its continuance beyond the 2007 election.

III. ETHICS

2002 (Insert)

Council voted to approve Revision Draft 7 of the "Ethical Principles of Psychologists and Code of Conduct" as amended. (Attachment A). Council requested that the APA General Counsel and the Ethics Director ensure that the amendments approved by Council are consistent with the current language of the code throughout with the language of Draft 7.

VI. ORGANIZATION OF THE APA

1990 (Update)

Council voted to instruct the Committee on Structure and Function of Council to schedule a debriefing meeting of all Council members whose terms are expiring and to hold such a session at each [February] August meeting.

VII. PUBLICATIONS AND COMMUNICATIONS

1949 (Revise)

Council approved the following statement of general policy governing the management of the Association's journals:

(a) The Association should consider itself obligated to ensure the opportunity for publication in every major area of the field of psychology.

(b) It is unnecessary and undesirable, however, that all publication outlets be controlled by the Association.

(c) As long as any subdivision of the general field is adequately represented by an independent journal, the Association should not attempt to take over or duplicate the functions of this vehicle.

(d) While all major areas of psychology should be represented within the Association's program or outside of it, the Association is not obligated to provide means for publishing the total output of the membership.

[(e) It is considered right and proper that any profits which may accrue from the sale of heavily subscribed journals be applied to the cost of publishing others which are not completely self-supporting. This rule is subject to exceptions required by legal obligations.]

1971 (Edit)

The following policy concerning advertising in APA journals was adopted:

The publications of APA are published for, and on behalf of, the membership to advance psychology as a science, as a profession, and as a means of promoting human welfare. The Association, therefore, reserves the right to, unilaterally, reject, omit, or cancel advertising which it deems to be not in the best interest of these objectives, or which by its tone, content, or appearance is not in keeping with the essentially scientific or scholarly nature of its publications. Conditions, printed or otherwise, which conflict with this policy will not be binding on the publisher.

1984 (Update)

On the recommendation of the Board of Directors, Council approved the following policy statement:

"Advertising of doctoral programs in APA publications will be restricted to those schools or other institutions fully accredited by regional or other institutional accrediting associations recognized by the [Council on Postsecondary Accreditation (COPA).] US Department of Education."

VIII. CONVENTION AFFAIRS

August 1992 (Update)

Council approved having the dates for the annual convention remain as presently defined by the Board of Convention Affairs from the second [Friday] Thursday in August to the following [Tuesday] Sunday.

X. PROFESSIONAL AFFAIRS

1996 (Revise)

Council voted to approve the following motion regarding Managed Care Accessibility and Reimbursement Criteria:

APA commends those managed care organizations (MCOs) which publish the criteria they use to determine accessibility to, and reimbursement of psychological and neuropsychological services. APA recognizes these MCOs for their responsibility and commitment to publicize their critical decision-making rules.

Correspondingly, APA strongly objects to the practice of any organization that makes healthcare accessibility or reimbursement decisions without publishing the criteria upon which these decisions are based. It is the position of APA that such decision-making criteria should be made accessible so that these critical variables may be subjected to scientific, professional and public review and scrutiny.

Furthermore, it is the position of APA that all MCOs should publish not only their decision-making criteria, but also the process by which these criteria have been developed and applied. To implement the above policy Council requests that the Practice Directorate, on behalf of APA, solicit the MCOs for the release of their criteria and decision-making process. [A progress report on these efforts to elicit criteria from the MCOs will be presented to Council at its February 1997 meeting.]

1986 (Revise)

Be it resolved that the American Psychological Association, in the interest of the public, opposes applications of hypnosis by persons who are not fully trained members or advanced students of

health delivery professions and who lack specific, in-depth training in hypnosis. Therefore, be it also resolved that APA opposes the teaching of hypnotic induction techniques or applications of hypnosis that involve treatment or assessment with patients or clients to persons who are not fully trained members or advanced students of a health delivery profession. [Be it resolved further that upon passage of this resolution, its text shall be conveyed to the APA Ethics Committee to consider its incorporation in the APA Code of Ethics. We note that the resolution is consistent with the preamble of Principle 1 of the code as well as the Standards of Providers of Psychological Services (Principles and Implications of Standard, 3).]

1989 (Update)

For almost half a century, psychology has been guided by its own self-developed principles of ethical behavior which are intended to protect uses of psychological knowledge and services. Impairments in the performance of psychologists, induced by mental health problems, substance addiction, and other disturbances, lead to violations of APA's purposes and ethical principles. Prevention programs and early interventions may reduce the incidence and the intensity of impairment. Such actions may best be introduced on the state level. Based on these premises, APA resolves:

to provide information and assistance regarding problems of impaired psychologists to State and Provincial Boards of Examiners, the American Association of State Psychology Boards, and State Psychological Associations;

to provide informational liaison services to the states through its [Office] Board of Professional Affairs;

to encourage the APA and Division program committees to give due consideration to impairment in choosing topics;

to advise the editors of the APA Monitor and state and division newsletters of the importance of the educational role in countering impairment;

to facilitate public information programs through the APA Public Information Office. This will include, but not be limited to, developing a directory of impaired psychologists programs; and

to review periodically, psychology's progress in confronting impairment.

1965 (Revise)

Council reaffirmed the concept that psychology is an independent science and profession and that in his/her work the psychologist and his/her client independently determine the proper application of his/her work in whatever context he/she may be functioning.

XVI. FINANCIAL AFFAIRS

2000 (Update)

Council voted to approve [1] instituting the practice of increasing the APA dues annually by an amount linked to the consumer price index for all urban consumers (CPI-U); and 2) \$4 dues increase from \$215 to \$219 for the 2001 dues year.]

1978 (Revise)

The American Psychological Association affirms its responsibilities in its role as an investor in [the American] corporations to act in a manner consistent with its goals of promoting human welfare. Recognizing that[e] APA investment policies should be aimed at maximizing financial benefits to the Association, the APA Council of Representatives considers it a responsibility of the Association to see that such policies are consistent with the social and moral concerns of the individual psychologists it represents. Therefore, be it resolved that the American Psychological Association, as part owner of [the American] corporations in this country and abroad, will encourage these corporations to act humanely and in a manner which is beneficial to society.

[To accomplish these aims, APA should analyze corporate resolutions in order to vote proxies in a manner that will ameliorate social conditions or reduce past social harms caused by corporate actions. In extreme cases, APA may elect to divest itself of holdings in a corporation when it appears that the corporation is not amenable to influence by its stockholders.]

Note: Due to the extensive time commitment this policy required of staff and in the spirit of the Councils directive (above), the Finance Committee (Nov-Dec 2001) recommended that "APA delegates the voting proxies to their investment managers with the following exceptions:

1. Companies which derive a significant portion of their revenue from the manufacture and sale of tobacco products for human consumption;
2. Companies which derive a significant portion of their revenue from the manufacture, sale, or distribution of alcoholic beverages;
3. Companies which derive a significant portion of their revenue from the manufacture and sale of firearms.

These proxies will be voted by a representative of APA's Public Interest Directorate."

1994 (Update)

Council voted to implement the recommendations contained in the Finance Committee Report to Council on "Responsible Spending" dated June 1994. [The recommendations will be implemented on a phased schedule as appropriate. **[Appendix R - V.1]** (See Appendix R-V.1 current responsible spending policy dated February 2001.) (This policy is reviewed periodically and modified as needed.

B.(9) Council voted to approve the following procedure regarding updating references:

When a document is ready for placement on the Council of Representatives agenda, the staff liaison associated with the item will check the references for currency and, working with the document developer, make any changes necessary to the citations and references.

C.(10) Council voted to reject the following motion of new business item #58J:

- 1) That the C/R instructs CSFC to develop a system of assigning each member of Council to be a monitor to the following Bylaws Boards and Committees and Standing Committees that are engaged in policy formulation or policy evaluation on behalf of Council. Included are: BAPPI, BCA, BEA, BPA, BSA, CAPP, CIRP, CoA, COLI, CRSPP, P&C, AND P&P. Council members already elected to serve on a given body shall automatically be assigned to the monitor group for that given body. As monitors, members of Council will receive in advance of scheduled meetings proposed agendas of the group to which each has been assigned and following meeting the minutes of the group.
- 2) That Council directs staff to create listservs so that all members of the Council assigned to a given body can easily exchange views about matters to be deliberated in those bodies.
- 3) That each year, the group of C/R members serving as monitors to a given body, by a process to be developed by CSFC, shall select one of their members to be a Council liaison who shall during the year of his/her tenure attend all meetings of the body.
- 4) That in recognition of their fiduciary responsibility for the Corporation, C/R liaisons shall have that right to attend any executive sessions and all meetings of the given body to whom they are signed.
- 5) That at each Council meeting, the members of the Council assigned to a given body will meet as a group for a minimum of two hours with the Chair of that body during the regularly scheduled meeting of the Council.
- 6) That C/R liaisons shall be charged with receiving suggestions from his/her fellow monitors about proposed agendas so that the concerns of Council can be adequately reflected in the deliberations of Boards and Committees. C/R liaisons shall also use the listserv to provide commentary to his/her fellow monitors following the end of the meetings of Board and Committees.

7) That when a given resolution is to be debated the President shall invite contextual commentary and, if relevant, some observations about a matter's history from the Council liaison(s) to the relevant body or bodies as well as from the Chair of the body or bodies.

The referees for this motion are directed to provide their analysis and response to the Council no later than the Council meeting of August, 2001.

VII. PUBLICATIONS AND COMMUNICATIONS

No items.

VIII. CONVENTION AFFAIRS

No items.

IX. EDUCATIONAL AFFAIRS

A.(11) Council voted to approve the *National Standards for High School Psychology Curricula* as revised (April 2005).

B.(12) Council voted to 1) receive the report of the Board of Directors Work Group on the Recommendations of the Commission on Education and Training Leading to Licensure; 2) authorize distribution of the Work Group report to external communities of interest for review and comment; and 3) request that the proposed policy statement be brought back to Council for action during its February 2006 meeting.

C.(13) Council voted to renew the recognition of Biofeedback: Applied Psychophysiology as a proficiency in professional psychology until August 2012, as outlined in the *Procedures for Recognition of Specialties and Proficiencies in Professional Psychology*.

D.(14) Council voted to renew the recognition of Clinical Child Psychology as a specialty in professional psychology until August 2012, as outlined in the *Procedures for Recognition of Specialties and Proficiencies in Professional Psychology*.

E.(15) Council voted to renew the recognition of Counseling Psychology as a specialty in professional psychology until August 2012, as outlined in the *Procedures for Recognition of Specialties and Proficiencies in Professional Psychology*.

F.(16) Council voted to renew the recognition of Clinical Psychology as specialty in professional psychology until August 2012, as outlined in the *Procedures for Recognition of Specialties and Proficiencies in Professional Psychology*.

G.(17) Council voted to renew the recognition of School Psychology as a specialty in professional psychology until August 2012, as outlined in the *Procedures for Recognition of Specialties and Proficiencies in Professional Psychology*.

H.(18) Council voted to renew the current recognition of Psychoanalysis in Psychology as a specialty in professional psychology for a probationary period of one year, until August 2006, as outlined in the *Procedures for Recognition of Specialties and Proficiencies in Professional Psychology* (Section B, Para 10).

I.(31H) A new business item "Accreditation of Graduate Programs in North America" was referred to BEA and the Committee on Accreditation.

J.(39) Council received as information an update related to recommendations of the Board of Educational Affairs' Advisory Council on Accreditation Report.

X. PROFESSIONAL AFFAIRS

A.(19) Council voted to receive the report of the 2005 Presidential Task Force on Evidence-Based Practice and adopt the following statement as APA policy:

Evidence-based Practice in Psychology¹

Evidence-based practice in psychology (EBPP) is the integration of the best available research with clinical expertise in the context of patient characteristics, culture, and preferences.² This definition of EBPP closely parallels the definition of evidence-based practice adopted by the Institute of Medicine (2001, p. 147) as adapted from Sackett and colleagues (2000): "Evidence-based practice is the integration of best research evidence with clinical expertise and patient values." The purpose of EBPP is to promote effective psychological practice and enhance public health by applying empirically supported principles of psychological assessment, case formulation, therapeutic relationship, and intervention.

Best Research Evidence

Best research evidence refers to scientific results related to intervention strategies, assessment, clinical problems, and patient populations in laboratory and field settings as well as to clinically relevant results of basic research in psychology and related fields. A sizeable body of evidence drawn from a variety of research designs and methodologies attests to the effectiveness of psychological practices. Generally, evidence derived from clinically relevant research on psychological practices should be based on systematic reviews, reasonable effect sizes, statistical and clinical significance, and a body of supporting evidence. The validity of conclusions from research on interventions is based on a general progression from clinical observation through systematic reviews of randomized clinical trials, while also recognizing gaps and limitations in the existing literature and its applicability to the specific case at hand (APA, 2002). Health policy and practice are also informed by research using a variety of methods in such areas as public health, epidemiology, human development, social relations, and neuroscience.

Researchers and practitioners should join together to ensure that the research available on psychological practice is both clinically relevant and internally valid. It is important not to assume that interventions that have not yet been studied in controlled trials are ineffective. However, widely used psychological practices as well as innovations developed in the field or laboratory should be rigorously evaluated and barriers to conducting this research should be identified and addressed.

Clinical Expertise

Psychologists' clinical expertise encompasses a number of competencies that promote positive therapeutic outcomes. These competencies include a) conducting assessments and developing diagnostic judgments, systematic case formulations, and treatment plans; b) making clinical decisions, implementing treatments, and monitoring patient progress; c) possessing and using interpersonal expertise, including the formation of therapeutic alliances; d) continuing to self-reflect and acquire professional skills; e) evaluating and using research evidence in both basic and applied psychological science; f) understanding the influence of individual, cultural, and contextual differences on treatment; g) seeking available resources (e.g., consultation, adjunctive or alternative services) as needed; and h) having a cogent rationale for clinical strategies. Expertise develops from clinical and scientific training, theoretical understanding, experience, self-reflection, knowledge of current research, and continuing education and training.

Clinical expertise is used to integrate the best research evidence with clinical data (e.g., information about the patient obtained over the course of treatment) in the context of the patient's characteristics and preferences to deliver services that have a high probability of achieving the goals of treatment. Integral to clinical expertise is an awareness of the limits of one's knowledge and skills and attention to the heuristics and biases—both cognitive and affective—that can affect clinical judgment. Moreover, psychologists understand how their own characteristics, values, and context interact with those of the patient.

Patients' Characteristics, Values, and Context

Psychological services are most effective when responsive to the patient's specific problems, strengths, personality, sociocultural context, and preferences. Many patient characteristics, such as functional status, readiness to change, and level of social support, are known to be related to therapeutic outcomes. Other important patient characteristics to consider in forming and maintaining a treatment relationship and in implementing specific interventions include a) variations in presenting problems or disorders, etiology, concurrent symptoms or syndromes, and behavior; b) chronological age, developmental status, developmental history, and life stage; c) sociocultural and familial factors (e.g., gender, gender identity, ethnicity, race, social class, religion, disability status, family structure, and sexual orientation); d) environmental context (e.g., institutional racism, health care disparities) and stressors (e.g., unemployment, major life events); and e) personal preferences, values, and preferences related to treatment (e.g., goals, beliefs, worldviews, and treatment expectations). Some effective treatments involve interventions directed toward others in the patient's environment, such as parents, teachers, and caregivers. A central goal of EBPP is to maximize patient choice among effective alternative interventions.

Clinical Implications

Clinical decisions should be made in collaboration with the patient, based on the best clinically relevant evidence, and with consideration for the probable costs, benefits, and available resources and options.³ It is the treating psychologist who makes the ultimate judgment regarding a particular intervention or treatment plan. The involvement of an active, informed patient is generally crucial to the success of psychological services. Treatment decisions should never be made by untrained persons unfamiliar with the specifics of the case.

The treating psychologist determines the applicability of research conclusions to a particular patient. Individual patients may require decisions and interventions not directly addressed by the available research. The application of research evidence to a given patient always involves probabilistic inferences. Therefore, ongoing monitoring of patient progress and adjustment of treatment as needed are essential to EBPP.

APA encourages the development of health care policies that reflect this view of evidence-based psychological practice.

REFERENCES

- American Psychological Association. (2002). Criteria for evaluating treatment guidelines. *American Psychologist, 57*, 1052-1059.
- Institute of Medicine. (2001). *Crossing the quality chasm: A new health system for the 21st century*. Washington, DC: National Academy Press.
- Sackett, D. L., Straus, S. E., Richardson, W. S., Rosenberg, W., & Haynes, R. B. (2000). *Evidence based medicine: How to practice and teach EBM* (2nd ed.). London: Churchill Livingstone.

Footnotes:

¹An expanded discussion of the issues raised in this policy statement, including the rationale and references supporting it, may be found in the Report of the 2005 Presidential Task Force on Evidence-Based Practice, available online at <http://www.apa.org/practice/ebpreport.pdf>.

²To be consistent with discussions of evidence-based practice in other areas of health care, we use the term *patient* to refer to the child, adolescent, adult, older adult, couple, family, group, organization, community, or other populations receiving psychological services. However, we recognize that in many situations there are important and valid reasons for using such terms as *client*, *consumer* or *person* in place of *patient* to describe the recipients of services.

³For some patients (e.g., children and youth), the referral, choice of therapist and treatment, and decision to end treatment are most often made by others (e.g., parents) rather than by the individual who is the target of treatment. This means that the integration of evidence and practice in such cases is likely to involve information sharing and decision-making in concert with others.

B.(31F) A new business item "Infusing the Association Guidelines in the Public Interest Which Have Been Adopted by Council for Psychologists Throughout APA" was referred to BPA, BAPPI, BEA, CAPP, P&C and BSA.

C.(31G) A new business item "Evidence Based Practice As It Applies To Applied Psychology Practitioners/Non Health Care Services" was referred to BPA, BEA, CAPP, CODAPAR and BAPPI.

D.(33) Council received an update on the business pending item "Listing of ABAP Diplomates in APA Directory."

E.(34) Council received an update on the business pending item "Public's Need to Recognize and Identify Specialty Practitioners."

F.(35) Council received an update on the business pending item "Task Force to Develop Guidelines for Psychological Practice with Girls and Women."

G.(49) Council received an update on the new-business-in-progress item "Consultation and Supervision in Sports Psychology."

H.(50) Council received an update on the new-business-in-progress item "Amendment to the Model License Law."

I.(51) Council received an update on the new-business-in-progress item "Licensure Portability for Psychologists Consulting in Multiple Jurisdictions."

J. Council received an update from Russ Newman, JD, PhD, Executive Director for Professional Practice, on the American Psychological Association Practice Organization.

XI. SCIENTIFIC AFFAIRS

A.(31A) A new business item "Convention Programming of Science Sessions" was referred to BSA, the Board of Convention Affairs, P&P and the Membership Committee.

B.(31D) A new business item "NCMRR to Institute Status" was referred to BSA, BPA, BAPPI and the Committee on Disability Issues in Psychology.

C.(31E) A new business item "Task Force for Increasing the Number of Quantitative Psychologists" was referred to BSA, BEA, P&C and the Membership Committee.

XII. PUBLIC INTEREST

A.(20) Council voted to adopt the following Resolution on the 2005 White House Conference on Aging:

Resolution on the 2005 White House Conference on Aging

WHEREAS the decennial White House Conferences on Aging (WHCoA) has been an important forum for aging policy recommendations to the President and Congress and for assisting the public and private sector in the promotion of dignity, health, independence and economic security of the current and future generations of older persons (White House Conference on Aging, 2004); and,

WHEREAS the first group of the 78 million persons which constitutes the demographic phenomenon called the "baby boomers" will turn 65 years of age in 2011 and that 20% of the population will be 65 years or older by the year 2030 (Federal Interagency Forum on Aging-Related Statistics, 2000); and,

WHEREAS psychological research provides a solid empirical foundation for understanding and ameliorating late life mental and behavioral health problems, expands knowledge of the normal aging process, tests the efficacy of psychological interventions, and provides clues to the risks and

protective factors for mental disorders across the life span (APA, 2004b; Duffy, 1999; National Institute of Mental Health, 2004; Qualls & Abeles, 2000); and,

WHEREAS it is well-established that mental health and well-being are critical to optimal functioning, physical health, and satisfying social relationships among older adults (Rowe & Kahn, 1998); and,

WHEREAS the report of the President's New Freedom Commission on Mental Health included clear concerns about mental health services for older adults and various recommendations for improving the current delivery of care, including greater attention to mental health concerns in the primary care setting (President's New Freedom Commission on Mental Health, 2003); and,

WHEREAS the 1999 Surgeon General's Report on Mental Health found that disability due to mental disorders, substance use or cognitive impairments in individuals aged 65 years and older will become a major public health problem in the near future due to aging of the population (Department of Health and Human Services, 1999); and,

WHEREAS 20-25% of older adults may meet criteria for some form of psychological disorder despite the widely recognized adaptive resilience of the aged (Administration on Aging, 2001; Baltes & Baltes, 1990); and,

WHEREAS psychological assessment and interventions for mental and behavioral health in older adults ameliorate these problems, improve quality of life, enhance physical health, improve the quality of relationships of family and friends, and reduce burden on family caregivers of older adults (Gatz, et al., 1998; Scogin & McElreath, 1994; Whitbourne, 2000); and,

WHEREAS the following sites may be appropriate for assessment and treatment of older adult mental health and behavioral health problems: home and community; healthcare settings, particularly primary care; mental health clinics; and assisted living and nursing homes (Administration on Aging, 2001); and,

WHEREAS significant progress has been made in identifying individual and family adaptive mechanisms that promote resilience (Administration on Aging, 2001; Baltes & Baltes, 1990; Pearlin & Skaff, 1995); and,

WHEREAS research on the aging family has shown that it is often the family of the aging person that is essential to the aging individual's mental and physical health (Bengtson & Lowenstein, 2003; Bengtson, et al., 1996; Stephens, et al., 1990); and,

WHEREAS families provide nearly two-thirds of all home and community based-care in the United States (Liu, Manton & Aragon, 2000) and three-quarters of informal caregivers are women (Administration on Aging, 2000); and,

WHEREAS many older adults - particularly those who are ethnic minority, sexual minority, rural-residing, disabled, and economically disadvantaged -- have problems accessing mental health care because of lack of parity between reimbursement for mental and physical health problems, poorly integrated systems of mental and physical health care, and a limited number of culturally competent mental health professionals with training in aging (APA, 2004b; President's New Freedom Commission on Mental Health, 2003; Walkup, 2000); and,

WHEREAS women's longevity is greater than that of men, among Americans age 65 years of age and older, three out of five are women, and after age 80, women outnumber men by almost 3 to 1, and that older women often face different late life issues than older men (Administration on Aging, 2000; APA Working Group on the Older Adult Brochure, 1998); and,

WHEREAS one out of six of older women is a member of a minority group, older women spend more years and a greater proportion of their lives with disabilities, older women are nearly twice as likely as men to live in poverty, and issues faced by older lesbians differ from those of older gay

men (Administration on Aging, Department of Health and Human Services, 2000; APA, 2004a; Grossman et al., 2000; Kimmel et al., in press).

THEREFORE BE IT RESOLVED that the American Psychological Association:

Affirms the importance of the White House Conference on Aging as a vital forum for the discussion of issues of aging particularly as American society anticipates an unprecedented number and percentage of citizens who will be 65 years of age and older; and,

Encourages the 2005 White House Conference on Aging to review the current status of mental and behavioral health research and practice and to offer recommendations to the public and private sectors that will promote access to quality mental and behavioral health services for all older Americans, including special attention to the needs of women and subgroups of older Americans such as ethnic minorities, low-income individuals, individuals with disabilities, and lesbians, gay men, and bisexual individuals; and,

Submits nominations of geropsychologists as delegates to the White House Conference on Aging, including a geropsychologist with knowledge and expertise on issues unique to older ethnic minority persons; and,

Recommends that the 2005 White House Conference on Aging support policies that: assure access to an affordable and comprehensive range of quality mental health and substance abuse services to older Americans, including outreach, home and community based care, prevention, intervention, acute care, and long-term care; and, assure that these services are age appropriate and culturally competent; and,

Advocates for endorsement of full parity in mental health coverage equal to that provided for medical and surgical care in both Medicare and private insurance plans.

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B.(21) Council voted to adopt the following Resolution in Video Games and Interactive Media:

Resolution on Violence in Video Games and Interactive Media

WHEREAS decades of social science research reveals the strong influence of televised violence on the aggressive behavior of children and youth (APA Task Force On Television and Society; 1992 Surgeon General's Scientific Advisory Committee on Television and Social Behavior, 1972); and

WHEREAS psychological research reveals that the electronic media play an important role in the development of attitude, emotion, social behavior and intellectual functioning of children and youth (APA Task Force On Television and Society, 1992; Funk, J. B., et al. 2002; Singer, D. G. & Singer, J. L. 2005; Singer, D. G. & Singer, J. L. 2001); and

WHEREAS there appears to be evidence that exposure to violent media increases feelings of hostility, thoughts about aggression, suspicions about the motives of others, and demonstrates violence as a method to deal with potential conflict situations (Anderson, C.A., 2000; Anderson, C.A., Carnagey, N. L., Flanagan, M., Benjamin, A. J., Eubanks, J., Valentine, J. C., 2004; Gentile, D. A., Lynch, P. J., Linder, J. R., & Walsh, D. A., 2004; Huesmann, L. R., Moise, J., Podolski, C. P., & Eron, L. D., 2003; Singer, D. & Singer, J., 2001); and

WHEREAS perpetrators go unpunished in 73% of all violent scenes, and therefore teach that violence is an effective means of resolving conflict. Only 16 % of all programs portrayed negative

psychological or financial effects, yet such visual depictions of pain and suffering can actually inhibit aggressive behavior in viewers (National Television Violence Study, 1996); and

WHEREAS comprehensive analysis of violent interactive video game research suggests such exposure a.) increases aggressive behavior, b.) increases aggressive thoughts, c.) increases angry feelings, d.) decreases helpful behavior, and, e.) increases physiological arousal (Anderson, C.A., 2002b; Anderson, C.A., Carnagey, N. L., Flanagan, M., Benjamin, A. J., Eubanks, J., Valentine, J. C., 2004; Anderson, C.A., & Dill, K. E., 2000; Bushman, B.J., & Anderson, C.A., 2002; Gentile, D. A., Lynch, P. J., Linder, J. R., & Walsh, D. A., 2004); and

WHEREAS studies further suggest that sexualized violence in the media has been linked to increases in violence towards women, rape myth acceptance and anti-women attitudes. Research on interactive video games suggests that the most popular video games contain aggressive and violent content; depict women and girls, men and boys, and minorities in exaggerated stereotypical ways; and reward, glamorize and depict as humorous sexualized aggression against women, including assault, rape and murder (Dietz, T. L., 1998; Dill, K. E., & Dill, J. C., 2004; Dill, K. E., Gentile, D. A., Richter, W. A., & Dill, J.C., in press; Mulac, A., Jansma, L. L., & Linz, D. G., 2002; Walsh, D., Gentile, D. A., VanOverbeke, M., & Chasco, E., 2002); and

WHEREAS the characteristics of violence in interactive video games appear to have similar detrimental effects as viewing television violence; however based upon learning theory (Bandura, 1977; Berkowitz, 1993),_the practice, repetition, and rewards for acts of violence may be more conducive to increasing aggressive behavior among children and youth than passively watching violence on TV and in films (Carll, E. K., 1999a). With the development of more sophisticated interactive media, such as virtual reality, the implications for violent content are of further concern, due to the intensification of more realistic experiences, and may also be more conducive to increasing aggressive behavior than passively watching violence on TV and in films (Calvert, S. L., Jordan, A. B., Cocking, R. R. (Ed.) 2002; Carll, E. K., 2003; Turkle, S., 2002); and

WHEREAS studies further suggest that videogames influence the learning processes in many ways more than in passively observing TV: a.) requiring identification of the participant with a violent character while playing video games, b.) actively participating increases learning, c.) rehearsing entire behavioral sequences rather than only a part of the sequence, facilitates learning, and d.) repetition increases learning (Anderson, C.A., 2002b; Anderson, C.A., Carnagey, N. L., Flanagan, M., Benjamin, A. J., Eubanks, J., Valentine, J. C., 2004; Anderson, C.A. & Dill, K. E., 2000); and

WHEREAS the data dealing with media literacy curricula demonstrate that when children are taught how to view television critically, there is a reduction of TV viewing in general, and a clearer understanding of the messages conveyed by the medium. Studies on media literacy demonstrate when children are taught how to view television critically, children can feel less frightened and sad after discussions about the medium, can learn to differentiate between fantasy and reality, and can identify less with aggressive characters on TV, and better understand commercial messages (Brown, 2001; Hobbs, R. & Frost, R., 2003; Hortin, J.A., 1982; Komaya, M., 2003; Rosenkoetter, L.J., Rosenkoetter, S.E., Ozretich, R.A., & Acock, A.C., 2004; Singer & Singer, 1998; Singer & Singer, 1994)

THEREFORE BE IT RESOLVED that APA advocate for the reduction of all violence in videogames and interactive media marketed to children and youth.

BE IT FURTHER RESOLVED that APA publicize information about research relating to violence in video games and interactive media on children and youth in the Association's publications and communications to the public.

BE IT FURTHER RESOLVED that APA encourage academic, developmental, family, and media psychologists to teach media literacy that meets high standards of effectiveness to children, teachers, parents and caregivers to promote ability to critically evaluate interactive media and make more informed choices.

BE IT FURTHER RESOLVED that APA advocate for funding to support basic and applied research, including special attention to the role of social learning, sexism, negative depiction of minorities, and gender on the effects of violence in video games and interactive media on children, adolescents, and young adults.

BE IT FURTHER RESOLVED that APA engage those responsible for developing violent video games and interactive media in addressing the issue that playing violent video games may increase aggressive thoughts and aggressive behaviors in children, youth, and young adults and that these effects may be greater than the well documented effects of exposure to violent television and movies.

BE IT FURTHER RESOLVED that APA recommend to the entertainment industry that the depiction of the consequences of violent behavior be associated with negative social consequences.

BE IT FURTHER RESOLVED that APA (a) advocate for the development and dissemination of a content based rating system that accurately reflects the content of video games and interactive media, and (b) encourage the distribution and use of the rating system by the industry, the public, parents, caregivers and educational organizations.

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C.(22) Council voted to receive the Report of the Children & Adolescents Task Force of the Ad Hoc Committee on End-of-Life Issues.

D.(23) Council voted to approve the following motion regarding the Report of the Task Force on the Psychological Effects of Efforts to Prevent Terrorism:

That the Council of Representatives thanks the Task Force on the Psychological Effects of Efforts to Prevent Terrorism and refers the Report of the Task Force to the Board of Scientific Affairs to provide perspective and encourage further development of these topics.

E.(24) Council voted to approve the following motion regarding the Task Force on the World Conference Against Racism Report – Annotated UN Declaration:

Pursuant to the original receipt in principle by Council in February, the Council of Representatives receives the annotated version of the UN World Conference Against Racism, Racial Discrimination, Xenophobia and Related Intolerance Declaration and Programme of Action (UN Declaration) and accepts its use as an appendix to the APA Delegation Report. The Introductory Statement is considered a part of the UN Declaration for APA purposes. In completing the work of the Task Force on the World Conference Against Racism Report, Council further calls on the Committee on International Relations in Psychology and the Committee on Ethnic Minority Affairs to take the lead in developing appropriate follow-up processes to the recommendations adopted by Council in February 2005, including follow-up to the APA Delegation Report.

Council also approved an editorial change to item #58 of the Annotated UN Declaration to include *people of color* and *people with disabilities* to the list of those deemed "undesirable" by the Nazis.

F.(25) Council voted to adopt as APA policy the following Resolution on Anti-Semitic and Anti-Jewish Prejudice:

Resolution on Anti-Semitic and Anti-Jewish Prejudice

Introduction

Anti-Semitism is not new. This anti-Jewish hostility has taken various forms over the centuries and has been perpetrated by various groups throughout history. Forced conversions, confiscation of lands and other property, kidnapping of children, false accusations (e.g., that Jews kill Christian children and use their blood for rituals), forced residential confinement (ghettoization), and prohibitions against the observance of Jewish customs and religious laws are among the monstrous offenses committed against Jews over the years.

Existing as it has down through the ages, anti-Semitism has often led to slaughter of Jews, often in more or less officially sanctioned actions. Slaughter occurred during the 12th century Crusades,

during the 15th century Inquisition and during the 18th, 19th, and 20th centuries' innumerable pogroms in Eastern Europe.

In the twentieth century, the Nazis murdered 6 million Jews, including one and a half million children, out of intense hatred. This event, which has become known as The Holocaust, proceeded without much objection from, and, indeed, with the explicit complicity of much of the so-called civilized world (Allswang, 1985).

Towards the end of the twentieth and the beginning of the twenty-first centuries, there has been a resurgence of anti-Jewish, anti-Semitic attitudes and anti Jewish or anti-Semitic acts in the U. S., (Anti-Defamation League, 2005), Canada (B'nai Brith Canada, 2005) and Europe (U.S. Department of State, 2005). It includes the widespread suppression of memories or outright denial of the history of atrocities against Jews. Recent polls in England, Holland and Sweden, to cite a few (Europe's Resurgent Anti-Semitism, 2005), demonstrate that most young people do not know about the horrors of the Holocaust, especially, but not exclusively, the concentration camps of World War II, where five million people-- including gypsies, homosexuals, people of color, people with disabilities, and the mentally ill and mentally retarded—were exterminated alongside the six million Jews.

Concurrent with the lack of knowledge of the crimes perpetrated against Jews, there is a resurgence of Nazi imagery about Jews and against Jews. The flagrant forgery known as *The Protocols of the Elders of Zion*, a description of a worldwide conspiracy by a group of Jews to "enslave Christian civilization" (Bronner, 2000) was utilized by Hitler in his murderous campaign to mischaracterize and dehumanize Jews. This calumny has resurfaced. It can now be found in many places on the Internet, including the Palestinian Authority website (Reuters, 2005, May 18), and has been used as a model for a TV program in Egypt (Anti-Defamation League, 2005).

The recent increase in anti-Semitism has led to various studies and conferences, by the US (Helsinki commission, 2005) the EU (European Union, 2004) and the UN (United Nations, 2004). In the latter, U.N. Secretary-General Kofi Anan acknowledged that, with regard to anti-Semitism, the "UN's own record has at times fallen short of the Organization's ideals." (United Nations, 2004)

The code of ethics of the American Psychological Association (APA) calls for respect for the dignity and worth of all people, the importance of civil and human rights, and freedom of inquiry and expression in research. Psychologists are ethically bound to respect and protect civil and human rights, as well as protect the freedom of inquiry and expression in research (American Psychological Association, 2002). Those principles are called upon in the face of such movements as a campaign based purportedly on opposition to Israeli politics that has led to the forced resignations of Israeli scholars from the editorial boards of British scholarly publications. Very recently APA took a stand against a more formal version of this deliberate exclusion of Jewish scholars and academics through the boycott proposed by the British Association of University Teachers (AUT) against two universities in Israel. APA agreed with the stance of the American Association of University Professors (AAUP) citing the principle of freedom of conduct of science, promoting equal access to scientific data. This proposed boycott, later rescinded under international pressure, was seen by many as an example of today's "new anti-Semitism", which may pour the old wine of hostility towards Jews into bottles labeled as anti-Israeli politics.

Because anti-Semitism has had a long life and because it operates insidiously, when it is not flagrantly violating human decency, the time has come for APA to call attention to its sometimes shadowy, sometimes blatant existence and to affirm our organizational, professional and personal commitments to its eradication.

WHEREAS prejudice and discrimination based on religion have caused untold human suffering throughout recorded history; and

WHEREAS anti-Jewish hostility, usually called anti-Semitism, has taken various forms over the centuries and has been perpetrated by many groups throughout history (Allswang, 1985); and

WHEREAS the intense prejudice, discrimination and hatred that grew out of long-standing anti-Semitism led to the Holocaust, perpetrated in Europe by the Nazis in the 1940s, which eventuated in the brutal annihilation of six million Jews (Charney, 2000); and

WHEREAS anti-Semitic acts of violence in the United States are increasing alarmingly, with 1,821 reported in 2004, the highest level in nine years and an increase of 17% over the number reported in 2003 (Anti-Defamation League, 2005); and

WHEREAS "The increasing frequency and severity of anti-Semitic incidents since the start of the 21st century, particularly in Europe, has compelled the international community to focus on anti-Semitism with renewed vigor" (U.S. Department of State, 2004); and

WHEREAS the United States Congress has approved the Global Anti-Semitism Awareness/Review Act, which acknowledges a disturbing increase in anti-Semitism and establishes an office in the State Department to monitor and combat anti-Semitism worldwide (U.S. Department of State, 2004); and

WHEREAS the 2005 Survey of American Attitudes Towards Jews in America by the Anti-Defamation League found that 14% of Americans or nearly 35 million adults, hold views about Jews that are "unquestionably anti-Semitic" (Anti-Defamation League, 2005); and

WHEREAS much anti-Semitism today takes the form of "modern" or "new" anti-Semitism, in which actual bias against Jews is denied while prejudiced attitudes exist and discriminatory statements or acts are engaged in (Anti-Semitism Worldwide, 2004); and

WHEREAS this form of anti-Semitism may be more difficult for its perpetrators to identify and challenge, as their beliefs about themselves may be that they are not biased against Jews (Gaertner & Dovidio, 1986); and

WHEREAS this form of anti-Semitism is frequently asserted in the context of discourse regarding the actions of the State of Israel, thus further disguising the anti-Semitic nature of the discourse (Anti-Semitism Worldwide, 2004); and

WHEREAS the link between extreme anti-Israel rhetoric and deeds directed against Jewish individuals and communities has become an observable global trend and has at times unleashed demonization and dehumanization of Jews; (Anti-Semitism Worldwide, 2004); and

WHEREAS every anti-Semitic act creates a climate of fear, anxiety and insecurity, both for the individual and the community; as such therefore, Jews are exposed to suffering the feelings of vulnerability, anger, depression and other sequelae of victimization (Crandall & Eshleman, 2003; Valent, 2002); and

WHEREAS anti-Semitic acts also harm the perpetrators by desensitizing them to violence, and raise concerns about their generalizing such acts to other groups (Crandall & Eshleman, 2003; Ezequiel, 1995, 2002; Staub, 1990, 2005); and

WHEREAS the American Psychological Association has recognized the profound psychological consequences of hate crimes motivated by prejudice (APA Council of Representatives, 2005); and

WHEREAS the American Psychological Association opposes prejudice and discrimination based upon race, ethnicity, religion, sexual orientation, gender, gender identity or physical condition (American Psychological Association, 2002); and

WHEREAS as psychologists we respect the dignity and worth of all people and are committed to improving the condition of individuals, organizations, and society, we are aware of and respect cultural, individual, and role differences among individuals, including (but not limited to) those based on ethnicity, national origin, and religion (American Psychological Association, 2002); and

WHEREAS psychologists recognize and protect civil and human rights and strive to help the public develop informed judgments and choices concerning human behavior:

THEREFORE BE IT RESOLVED, that the American Psychological Association condemns all anti-Semitic attitudes and actions, both overt and covert, and will use its influence to promote fairness, respect, and dignity for all people, regardless of religion or ethnicity, in all arenas in which psychologists work and practice, and in society at large.

THEREFORE BE IT FURTHER RESOLVED, that the American Psychological Association will take a leadership role in opposing anti-Semitism.

THEREFORE BE IT FURTHER RESOLVED, that the American Psychological Association encourages all psychologists to act to eliminate all discrimination of an anti-Semitic nature.

THEREFORE BE IT FURTHER RESOLVED, that the American Psychological Association encourages research to better understand the characteristics, causes, and consequences of anti-Semitic and Anti-Jewish prejudice.

THEREFORE BE IT FURTHER RESOLVED, that the American Psychological Association will include appropriate information on anti-Semitism in its multicultural and diversity training material and activities, and that diversity and multicultural efforts will take cognizance of anti-Semitism, whether subtle or not, and will attempt to overcome it.

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Council voted to 1) refer the Resolution on Religious, Religious-Based and/or Religion-Derived Prejudice to the APA Presidential Working Group on Anti-Semitic, Anti-Jewish and Other Religious-Related and/or Religion-Derived Prejudice for its review and revision; 2) request that the revised Resolution on Religious, Religious-Based and/or Religion-Derived Prejudice be brought back to Council after it has been distributed to boards and committees for comment.

G.(26) Council voted to approve the withdrawal of Council New Business Item #58C: Rural Children's Mental Health.

H.(27) Council voted to approve the following motion:

That the APA Council of Representatives approves the inclusion of \$35,000 in the 2006 Preliminary Budget for the funding and establishment of a Task Force on the Implementation of the APA Guidelines on Multicultural Education, Training, Research, Practice and Organizational Change for throughout APA ("the Multicultural Guidelines"). The task force will include one representative from each of the APA standing boards, APAGS, COLI, CAPP and Division 31/ Council of Executives of State and Provincial Psychological Associations, two members from the original writing group and a member of the Board of Directors. The task force will be charged with formulating recommendations for the infusion of the Multicultural Guidelines throughout psychology. The task force will report back to the Board on a regular basis on the progress of its work. The members of the task force will be appointed by the APA President. It is hoped that the work of the task force will be suggestive of methodologies for the infusion of other guidelines into psychology.

I.(36) Council received an update on the business pending item "Proposed Resolution on Families of Incarcerated Offenders."

J.(40) Council received as information an update on the APA Presidential Working Group on Prejudice and Discrimination in All Its Forms.

K.(41) Council received as information an update on the APA Presidential Working Group on Incentives for Increasing Multi-Cultural Diversity on Council and Boards and Committees.

XIII. ETHNIC MINORITY AFFAIRS

A.(28) Council voted to adopt the following resolution:

**APA Resolution Recommending the Immediate Retirement of
American Indian Mascots, Symbols, Images, and Personalities by
Schools, Colleges, Universities, Athletic Teams, and Organizations**

WHEREAS the American Psychological Association has recognized that racism and racial discrimination are attitudes and behavior that are learned and that threaten human development (American Psychological Association, June 2001);

WHEREAS the American Psychological Association has resolved to denounce racism in all its forms and to call upon all psychologists to speak out against racism, and take proactive steps to prevent the occurrence of intolerant or racist acts (American Psychological Association, June 2001);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities undermines the educational experiences of members of all communities-especially those who have had little or no contact with Indigenous peoples (Connolly, 2000; U.S. Commission on Civil Rights, 2001; Society of Indian Psychologists, 1999; Webster, Loudbear, Corn, & Vigue, 1971);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities establishes an unwelcome and often times hostile learning environment for American Indian students that affirms negative images/stereotypes that are promoted in mainstream society (Clark & Witko, in press; Fryberg, 2003; Fryberg & Markus, 2003; Fryberg, 2004a; Munson, 2001; Society of Indian Psychologists, 1999; Staurowsky, 1999);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities by school systems appears to have a negative impact on the self-esteem of American Indian children (Chamberlin, 1999; Eagle and Condor Indigenous People's Alliance, 2003; Fryberg, 2004b; Fryberg & Markus, 2003; Maryland Commission on Indian Affairs, 2001; Society of Indian Psychologists, 1999; The Inter-Tribal Council of the Five Civilized Tribes, 2001; Vanderford, 1996);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities undermines the ability of American Indian Nations to portray accurate and respectful images of their culture, spirituality, and traditions (Clark & Witko, in press; Davis, 1993; Gone, 2002; Rodriguez, 1998; Witko, 2005);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities presents stereotypical images of American Indian communities, that may be a violation of the civil rights of American Indian people (Dolley, 2003; King, 2001; King & Springwood, 2001; Pewewardy, 1991; Springwood & King, 2000; U. S. Commission on Civil Rights, 2001);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities is a form of discrimination against Indigenous Nations that can lead to negative relations between groups (Cook-Lynn, 2001; Coombe, 1999; U. S. Commission on Civil Rights, 2001; Witko, 2005);

WHEREAS the continued use of American Indian symbols, mascots, images, and personalities is a detrimental manner of illustrating the cultural identity of American Indian people through negative displays and/or interpretations of spiritual and traditional practices (Adams, 1995; Banks, 1993; Nuessel; 1994; Staurowsky, 1999; Witko, 2005);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities is disrespectful of the spiritual beliefs and values of American Indian nations (Churchill, 1994; Gone, 2002; Sheppard, 2004; Staurowsky, 1998);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities is an offensive and intolerable practice to American Indian Nations that must be eradicated (U.S. Commission on Civil Rights, 2001; Society of Indian Psychologists, 1999);

WHEREAS the continued use of American Indian mascots, symbols, images, and personalities has a negative impact on other communities by allowing for the perpetuation of stereotypes and stigmatization of another cultural group (Fryberg, 2004b; Gone, 2002; Staurowsky, 1999; U.S. Commission on Civil Rights, 2001);

THEREFORE BE IT RESOLVED that the American Psychological Association recognizes the potential negative impact the use of American Indian mascots, symbols, images, and personalities have on the mental health and psychological behavior of American Indian people;

THEREFORE BE IT RESOLVED that the American Psychological Association encourages continued research on the psychological effects American Indian mascots, symbols, images, and personalities have on American Indian communities and others;

THEREFORE BE IT RESOLVED that the American Psychological Association encourages the development of programs for the public, psychologists, and students in psychology to increase awareness of the psychological effects that American Indian mascots, symbols, images, and personalities have on American Indian communities and others;

AND

THEREFORE BE IT RESOLVED that the American Psychological Association supports and recommends the immediate retirement of American Indian mascots, symbols, images, and personalities by schools, colleges, universities, athletic teams, and organizations.

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Stephanie A. Fryberg, PhD, presented Council with a summary of her research findings on this issue prior to Council's vote on the item.

B.(28A) Council voted to receive the Report of the President's Task Force on Enhancing Diversity in APA and to affirm its enthusiastic support for the implementation of the Resolution on Enhancing Diversity in APA.

Council voted to adopt the following Resolution on Enhancing Diversity in APA:

Resolution on Enhancing Diversity in APA

WHEREAS in 2005 the President of the American Psychological Association (APA), Ronald F. Levant, EdD, MBA, appointed a Task Force on Enhancing Diversity to suggest ways that APA can be a more welcoming place for psychologists who are members of marginalized groups -- more specifically, members who are African American/Black, American Indian/Alaska Native, Asian American/Pacific Islander, Hispanic/Latino(a); lesbian, gay, bisexual or transgendered; persons with disabilities; older persons; Muslims and others of non-dominant religious orientation or heritage; and women, and

WHEREAS conflicts occur not only between the majority and the marginalized groups, but among marginalized groups, and

WHEREAS one charge of the Task Force was to identify conceptual models for use in reconciling differences when they occur among diverse groups and between majority groups and specific marginalized groups, and

WHEREAS this Task Force also was charged to develop recommendations for how the American Psychological Association can become more welcoming to its many diverse constituent members, and

WHEREAS many of the Task Force members and the members they represent have reported that interactions between members of dominant groups and the marginalized groups identified above sometimes exhibited insensitivity, an appearance of invisibility, or outright rudeness, and

WHEREAS the Task Force has completed its Final Report, which provides the basis for this resolution by: (a) presenting the past and current history of APA and diversity, (b) describing 10 major principles of change, (c) identifying the benefits of change to APA and its majority and marginalized group members, (d) explaining through use of examples, the need for change in APA, (e) outlining specific models of change and specific conflict resolution/reconciliation strategies, (f) recommending prioritized actions for enhancing diversity in APA, and (g) providing reference citations of the report's major concepts and models;

THEREFORE, BE IT RESOLVED that enhancing diversity and increasing the sense of being welcome in APA by diverse groups are top priorities for APA.

BE IT FURTHER RESOLVED that APA's Council of Representatives directs APA's Chief Executive Officer (CEO) to develop a Diversity Implementation Plan to ensure that diversity is an integral part of APA structures and activities. In developing this plan, the CEO should consider, among other things, the Immediate, Medium-term, and Long-range recommendations outlined by the Task Force on Enhancing Diversity in APA that are included as the **Appendix** to this resolution.

BE IT FURTHER RESOLVED that \$10,000 be budgeted in 2005, and \$25,000 in 2006, to facilitate the development of the Diversity Implementation Plan, and that beginning in 2007 a specific line item appear in the annual APA budget to operationalize the Diversity Implementation Plan in an amount recommended annually by the CEO.

APPENDIX

**The APA President's Task Force on Enhancing Diversity in APA
Immediate, Medium-term, and Long-range Recommendations**

Immediate:

- (a) Supporting an anti-discrimination policy.
- (b) Surveying all governance entities as to "climate" (current level of participation, relative level of comfort) and current level of participation of members of diverse groups.

- (c) Enhancing inter-Directorate collaboration through joint columns in the *Monitor* and other collaborative projects.
- (d) Adopting the policy of incorporating language and principles from the *APA Guidelines on Multicultural Education, Training, Research, Practice and Organizational Change for Psychologists*, the *APA Guidelines for Psychotherapy with Lesbian, Gay and Bisexual Clients*, and the *APA Guidelines for Psychological Practice with Older Adults* into publication and editorial policies/procedures.
- (e) Expanding the editorial/publications pipeline with respect to greater inclusion of diverse persons.
- (f) Obtaining relevant governance groups' feedback to the Office of Accreditation and Program Consultation for its consideration in supporting more effective implementation of Domain D of the *APA Guidelines and Principles for Accreditation of Programs in Professional Psychology*.
- (g) Developing a training mechanism for psychological researchers in skills, knowledge, and attitudes requisite for conducting research with diverse populations.
- (h) Recognizing the needs of APA meeting and convention attendees who are from various marginalized religious groups.
- (i) Increasing attentiveness to diversity issues in areas such as awards and the content of membership promotional materials.
- (j) Providing favorable consideration of a new Division on Disability.
- (k) Conducting a study of barriers facing students with disabilities.
- (l) Developing a newsletter from the Office of Disability Issues.

Medium-term:

- (a) Planning mechanisms for diversity enhancement within the Association.
- (b) All governance groups organizing discussions of having joint meetings to promote collaboration with other governance groups.
- (c) Developing experiences and activities to encourage diverse marginalized students and early career psychologists to enter research careers and APA governance/leadership.
- (d) Opening opportunities for students from marginalized groups to be mentored as ad hoc journal reviewers.
- (e) Developing site visitor training materials relevant to the assessment of *APA Guidelines and Principles for Accreditation of Programs in Professional Psychology, Domain D*, for consideration by the APA Committee on Accreditation.
- (f) Providing educational materials to increase awareness at meetings to diverse religions' food restrictions.
- (g) Developing strategies for recruiting and retaining members from marginalized groups.
- (h) Initiating an *APA Monitor* series on international issues.
- (i) Improving attention and commitment to issues facing persons with disabilities such as access, resource materials, and representation among staff.
- (j) Examining states' laws and positions that may be oppressive to marginalized groups or insensitive to persons with disabilities relative to decisions about locations of APA meetings.

Long-range:

- (a) All governance groups formulating plans for increasing representation of individuals from marginalized groups.
- (b) Developing ideas for increasing APA's involvement with international psychological organizations.
- (c) Initiating non-English translations of key APA publications.
- (d) Encouraging increased attention to tolerance and understanding of religious, sexual orientation, and disability issues, especially in psychology education and training.
- (e) Expanding efforts related to increasing research training to marginalized students at all levels of the educational pipeline.
- (f) Evaluating the value of reduced dues for marginalized groups.
- (g) Increasing the Association's understanding of, and commitment to persons with disabilities.
- (h) Developing leadership mentoring opportunities for marginalized students at all levels of the educational pipeline.

C.(37) Council received an update on the business pending item "Council Representation for Four Ethnic Minority Psychological Associations."

D.(41A) Council received an update on the Commission on Ethnic Minority Recruitment, Retention and Training Grants for Fiscal Years 1999-2005.

XIV. INTERNATIONAL AFFAIRS

No items.

XV. CENTRAL OFFICE

No items.

XVI. FINANCIAL AFFAIRS

A.(29) Council voted to approve the 2006 Preliminary Budget in principle calling for a 2005 probable surplus of \$456,900 and a surplus of \$463,400 for the 2006 Preliminary Budget (assumes inclusion of \$2,500,000 cash flow from the buildings).

Consistent with the actions of Council in August 2000 and August 2002 to institute the practice of increasing the APA base member dues and graduate student affiliate fees annually by an amount linked to the consumer price index for all urban consumers (CPI-U), Council specifically voted to approve an \$8 member dues increase from \$253 to \$261 for the 2006 dues year; and a \$1 graduate student affiliate fee increase from \$43 to \$44 and that the revenues generated from this increase be added to the APAGS budget.

B.(30) Based on the 2006 Preliminary Budget and the 2006-2008 Financial Forecast, Council voted to adopt the following Net Asset Allocation Plan and Financial Forecast for the period 2006-2008:

1. The goal for attainment of net assets as stated in Association Rule 210-3 is reaffirmed; namely, that the Association strives to maintain net assets equal to at least one year's operating budget.

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2. Consistent with accounting practices, conventional wisdom and comparable financial data from other organizations, the Association should not consider any portion of theoretical building equity toward attainment of the net assets goal mentioned in item 1 above.

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3. Currently, rather than specifically set aside funds outside the normal budget process for development of programs deemed to be of high priority to the membership, the Association enthusiastically supports consideration of proposals (in the form of a business plan) for new revenue generating ideas. [Such proposals for new revenue generating ideas should be thoroughly detailed including all direct costs, indirect costs, and staff costs. Such proposals reviewed by the FC, the BOD and approved by the COR, will be funded out of ongoing revenues or out of the Association's net assets, as necessary, assuming that full consideration is also given to the impact of such funding on progress towards the Association's net assets goal mentioned in item 1 above.] In the spirit of this policy, the FC recommended and the BOD approved, beginning in 2007, that a specific line item appear in the annual budget to operationalize this policy in an amount recommended annually by the CEO. These funds will be administered by the CEO in support of new non-dues revenue proposals.

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4. Each year, based on actual results and an analysis of our net assets, future financial forecasts and the net asset allocation plan will be adjusted accordingly.

5. Once the net assets goals are attained, any number of future actions could be taken including the long-term stabilization of dues; the long-term availability of funds for the

development of programs deemed to be of high priority to the membership; further apportionment of building and investment proceeds toward operational expenses, etc.

6. The specific Financial Forecast for 2006 – 2008 is as follows:

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- a) Strive to attain a net asset goal equal to at least one year's operating budget consistent with Association Rule 210-3;
- b) Include \$2.5M net cash flow from building operations in the operating budget as a regular source of revenue;
- c) Include full funding in the operating budget for the Public Education Campaign, the Academic Enhancement Initiative, and PSY21, through the forecast period (2006-2008);
- d) Restrict capital expenditures to no more than \$12M over the forecast period;
- e) Continue to reinvest net realized gains/losses from our long-term portfolio activity;
- f) Reinvest all interest/dividends from our long-term portfolio activity;
- g) Treat Federal income tax expenses as non-operating activity;
- h) Treat all real estate cash flow in excess of \$2.5M annually from building operations as an increase to net assets and not available for operations or capital equipment, but rather as a reserve for financial investment and/or debt extinguishment; and,
- i) Work toward eliminating the debt on the Ten G building either by loan reduction and/or substitution of collateral to minimize the tax implications under the UBIT regulations.

C.(42) Council received as information the PricewaterhouseCoopers LLP 2004 Audited Financial Statements.

D.(43) Council received as information the 2004 IRS Tax Form 990.

E.(44) Council received as information the draft minutes of the June 3 & 4, 2005, Finance Committee meeting.

On Wednesday morning, Council received the results of Council's ranking of priorities. Council was informed that the results (top ten priorities as ranked by Council) will be listed on all future new business item forms to guide policy and that the Board will be utilizing these priorities to begin work on a strategic plan for the Association.

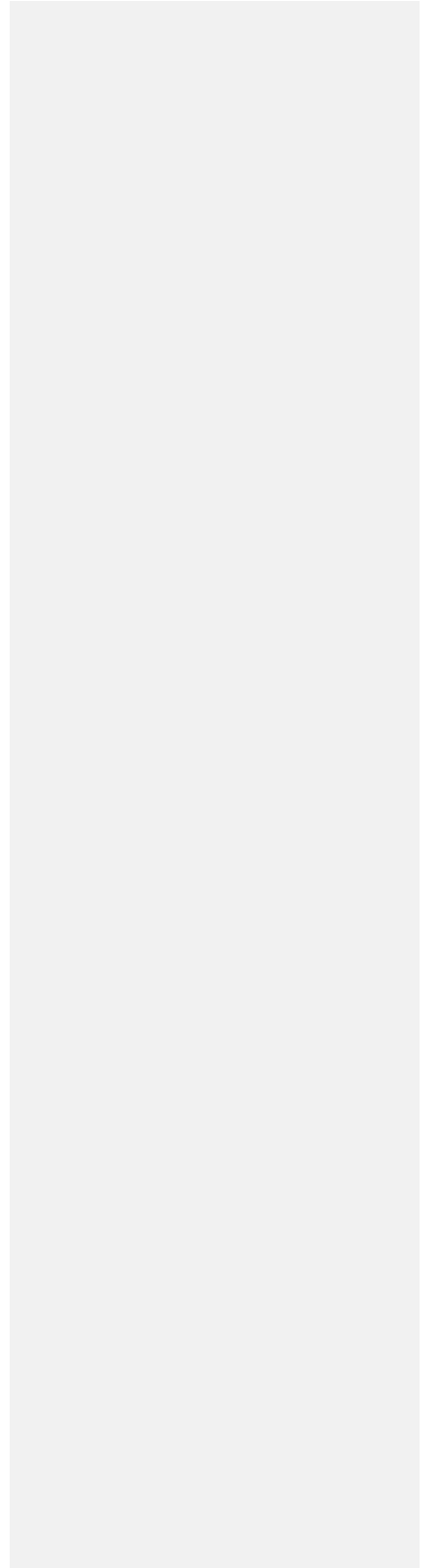
On Wednesday afternoon, the 2005 Raymond D. Fowler Award for Outstanding Contributions to APA – Member, was presented to Richard M. Suinn, PhD.

On Wednesday afternoon, Sandra L. Shullman, PhD, led Council in a follow-up discussion to Council's Multicultural Organizational Leadership Workshop that took place in February 2005.

On Wednesday afternoon, Nancy Gordon Moore, PhD, Executive Director of the Kentucky Psychological Association, gave a brief presentation to Council on the Heads Up Kentucky project.

On Sunday morning, Dorothy Cantor, PsyD, was presented with a presidential citation.

On Sunday morning, the following representatives of the four ethnic-minority associations were introduced and invited to say a few words about their association to Council: Frederick T. L. Leong, PhD, representing the Asian American Psychological Association; James E. Savage, Jr., PhD, representing the Association of Black Psychologists; Azara L. Santiago-Rivera, PhD, representing the National Latina/o Psychological Association; and John Joseph Peregoy, PhD, representing the Society of Indian Psychologists.



COUNCIL OF REPRESENTATIVES

August 3 & 6, 2000

APPROVED MINUTES

I. MINUTES OF MEETING

A.(1) Council voted to approve the minutes of the February 25-27, 2000, Council of Representatives meeting.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(2) Council voted to direct all directorates and governance groups to identify strategies specific to that directorate or governance group and implement appropriate mechanisms that will provide opportunities for newcomers (those who have not previously served on the Council of Representatives or a board or committee, with the exception of APAGS) to participate in governance. One of these mechanisms might be to propose a slate comprised solely of members who haven't previously served on the Council of Representatives or a board or committee, with the exception of APAGS.

B.(3) Council voted to approve the establishment of a task force to be appointed by the President to consider methods of providing that each division and state association have at least one seat on Council. Council requested that the task force come back to Council with a recommendation in February 2001.

C.(3A) Council voted to elect 126 Members to initial Fellow status on the nomination of the indicated divisions and on the recommendation of the Membership Committee and the Board of Directors.

D.(15B) Council voted to approve the inclusion of \$27,000 in the 2001 Preliminary Budget for the establishment of a Task Force on Membership Retention and Recruitment assigned to formulate a systematic plan to foster the retention of members and appropriate outreach to nonmembers. The Task Force, to be composed of up to 15 people to be appointed by the President, will hold conference calls in 2000 and up to 2 meetings in 2001.

E.(40) Council received an update on the new-business-in-progress item "Creation of a New Membership Category."

F.(41) Council received an update on the new-business-in-progress item "New Criteria for Dues-Exempt Status."

G.(42) Council received an update on the new-business-in-progress item "New Member Slates for Committees."

III. ETHICS

A.(16) Council voted to approve the following resolution and the inclusion of \$3,300 in the 2001 Preliminary Budget for the funding of one additional seat on the ECTF for the constituency of Policy and Public Safety, Correctional or Military Psychology:

Whereas the current makeup of the APA's Ethics Committee has no representation from the areas of Police and Public Safety Psychology or Correctional Psychology (areas of specialization reflected by sections in Division 18) nor Military Psychology (Division 19) nor demonstrated expertise in these areas of endeavor;

Whereas the current Ethical Principles of Psychologists and Code of Conduct is silent on many critical issues faced by psychologists who work in these areas and look to the principles and code and to the Ethics Committee for guidance;

And Whereas the issues they face include consultations with immediate life or death outcomes (hostage negotiations, timing of interventions in the presence of SWAT Teams, dual roles by regulation in prison riot situations), coaching of interrogators during investigative interrogation, development of profiles for investigative purposes, and special situations involving confidentiality and prescribed dual roles (working with military clients and their dependents);

Be it resolved that the membership of the task force working on revision of the Ethical Principles and Code of Conduct be expanded to include at least one seat on the ECTF for this constituency.

B.(33) Council received an update regarding recent activities concerning the Ethics Code revision.

C.(33A) Council received information regarding proposed changes to Ethics Adjudication.

IV. BOARD OF DIRECTORS

A.(4) Council voted to approve the following revised Guidelines for Council Resolutions:

GUIDELINES FOR COUNCIL RESOLUTIONS

These guidelines apply to all resolutions submitted to Council for consideration. The following information must be provided: (1) The purpose and rationale for the resolution stated clearly, and documenting its relevance to psychology or psychologists; (2) The issue's importance to psychology or to society as a whole; (3) Representative scientific or empirical findings related to the resolution; (4) The likelihood of the resolution having a constructive impact on public opinion or policy.

Resolutions approved by Council are understood to reflect what APA values or believes and, in most cases, does not commit APA to any action. If approval of the resolution requires that specific action be taken, the following information must also be provided: (5) Suggestions on how it should be implemented, if it is passed; (6) Breakdown of staff resources or association funds needed to implement the resolution.

B.(4A) Council voted to approve the withdrawal of new business item 23D, "Policy Manual."

C.(17) Council voted to reject a motion requesting that members of CSFC who aren't already serving on Council be reimbursed to attend Council meetings.

D.(18) Council discussed the item "Adding Health to APA's mission statement."

E.(32A) The new business item "Council Resolution on Resolutions and Motions" was referred to the Committee on the Structure and Function of Council (CSFC).

F.(32B) The new business item "Resolution on the Death Penalty" was referred to the Ad Hoc Committee on Legal Issues (COLI) and the Board for the Advancement of Psychology in the Public Interest (BAPPI).

G.(32E) The new business item "Turnaround Time for Council Business Items" was referred to CSFC.

H.(32G) The new business item "Systematic Notification and Review of New Business in Progress Items" was referred to CSFC.

I.(34) Council received information regarding the policy for convention expense reimbursement for APA Past Presidents.

J.(43) Council received an update on the new-business-in-progress item "Fostering Career Development of Young Professionals."

K.(44) Council received an update on the new-business-in-progress item "Policy Manual."

L.(45) Council received an update on the new-business-in-progress item "Breakout Sessions at Council Meetings."

M.(46) Council received an update on the new-business-in-progress item "P&P/Panel Recommendation of the Treasurer's Term of Office."

N. In executive session, Council reviewed the 1999 CEO Evaluation.

V. DIVISIONS AND STATE AND PROVINCIAL ASSOCIATIONS

A.(5) Council voted to approve the inclusion of \$7,000 in the 2001 Preliminary Budget for a meeting regarding the Training Guidelines for Practice in Clinical Geropsychology. The meeting will be attended by: two members with expertise in drafting guidelines to be appointed by the Board of Professional Affairs, one of whom shall be a psychologist/attorney; two members appointed by the APA Interdivisional Task Force on Qualifications for Practice in Clinical and Applied Geropsychology; two members appointed by the Board of Directors to represent practice constituencies that have expressed concern regarding the guidelines; and one member of the Board of Directors. The purpose of the meeting is to review the Training Guidelines for Practice in Clinical Geropsychology and make recommendations regarding changes to the Training Guidelines to the APA Interdivisional Task Force on Qualifications for Practice in Clinical and Applied Geropsychology. The Council also voted to request that the Agenda Planning Group consider placing the Training Guidelines for Practice in Clinical Geropsychology on the Fall 2000 cross-cutting agendas to allow an opportunity for boards and committees to provide comments on the current version. The meeting to review the Training Guidelines will take place after the feedback from boards and committees is collected, with the goal of submitting the revised version of the Training Guidelines for Council's review at its February 2001 meeting.

B.(32D) The new business item "Division Petition" was referred to the Policy and Planning Board and the Committee on Division/APA Relations.

C.(47) Council received an update on the new-business-in-progress item "Amend the APA Rule 100-2.1 for Signing Petitions for New Divisions."

VI. ORGANIZATION OF THE APA

A.(5A) In executive session, Council voted to approve the following amendments to the Association Rules (bracketed material to be deleted; underlined material to be added):

50-5. LIST OF CONTINUING COMMITTEES

50-5.1 The list below presents APA continuing committees and their reporting lines.

Reporting directly to Council

Structure and Function of Council

Reporting through the Board of Directors

Constitutional Issues

International Relations in Psychology

Investment

Advancement of Professional Practice

American Psychological Association of Graduate Students

[College of Professional Psychology]

Commission for the Recognition of Specialties and Proficiencies in Professional Psychology

Agenda Planning Group

Division/APA Relations

Reporting through the Publications and Communications Board

Council of Editors

Reporting through the Board of Educational

Accreditation

Continuing Professional Education

Education and Training Awards

Committee of Teachers of Psychology in Secondary Schools

Reporting through the Board of Professional Affairs

Professional Practice and Standards

Reporting through the Board of Scientific Affairs

Animal Research and Ethics

Psychological Tests and Assessment

Scientific Awards

Reporting through the Board for the Advancement of Psychology in the Public Interest

Women in Psychology

Psychology in the Public Interest Award

Lesbian, Gay and Bisexual Concerns

Disability Issues in Psychology

Children, Youth, and Families

Ethnic Minority Affairs

Urban Initiatives

Aging

Reporting through the Committee for the Advancement of Professional Practice

Committee on Rural Health

90-2.1 COMMITTEE FOR THE ADVANCEMENT OF PROFESSIONAL PRACTICE

There shall be a Committee for the Advancement of Professional Practice whose responsibility it shall be to (a) be the administrative agent of the Board of Directors exercising general

governance supervision over the relevant affairs of the [Office of Professional Practice] Practice Directorate, (b) recommend to Council through the Board of Directors procedures for the [protection, defense, and] enhancement of human welfare through the professional practice of psychology, (c) identify projects important to the [protection, defense, and] enhancement of human welfare through the professional practice of psychology, and (d) recommend to the Board of Directors the needed funding for such projects.

The Committee for the Advancement of Professional Practice shall consist of nine regular members and up to two special members. The APA Treasurer shall be an ex officio, nonvoting member of the Committee. The Board of Directors may also appoint such liaisons to the Committee for Advancement of Professional Practice as it deems necessary. Regular members shall be psychologists who provide health care services, who are licensed to practice psychology in at least one state, district, or province, and who pay the annual assessment. In addition to these general qualifications, the regular members of the Committee shall possess experience in service delivery and in the governance of state and/or national psychological organizations, and will have demonstrated expertise in one or more of the following additional areas of experience: (a) advocacy (legislative or legal), (b) marketing, (c) the training of practicing psychologists, and (d) public information and education. Of the nine regular members, three shall be elected each year to serve a term of three years.

Each year, a call for nominations for the three positions that will become vacant in the following year shall be broadly disseminated. Following the call, the Committee shall forward a list, organized into three slates of five candidates each, of fifteen persons deemed qualified to the APA Board of Directors, who shall select therefrom three candidates from each slate to stand for election to the three vacancies on the Committee for the Advancement of Professional Practice. In accordance with established procedure, the Board of Directors' slates of candidates shall then be forwarded to APA Council for inclusion in Council's election of members to APA boards and committees.

In addition to regular members, the Committee for the Advancement of Professional Practice may appoint up to two special members to serve a term not to exceed two years. These special members need not be psychologists and shall be chosen for their expertise in such matters as marketing, advocacy (legislative and legal), public information and education, or such other areas of competency as shall be relevant to the mission of the Committee. Special members may be reappointed for as many terms as the Committee deems their services to be required.

The Committee for the Advancement of Professional Practice shall report to Council through the APA Board of Directors.

[90-2.2 In order to facilitate the activities and to ensure the responsiveness of the Committee for the Advancement of Professional Practice to the needs of the assessed groups, there shall be a Liaison/Consultation Group for Professional Practice, whose responsibilities it shall be to (a) serve as a liaison between the Committee for the Advancement of Professional Practice and both state, district, and provincial psychological associations and those divisions of APA that have an interest in the support and advancement of professional practice; (b) propose such initiatives for the advancement of practice as it deems vital to the profession; (c) actively assist the Committee for the Advancement of Professional Practice and the Office of Professional Practice in explaining and implementing the programs of Office of Professional Practice; and (d) serve as a resource for the review and evaluation of funding criteria and of projects proposed for funding to the Committee for the Advancement of Professional Practice. The Liaison/Consultation Group for Professional Practice shall convene at least once annually at the time of the APA annual convention and shall receive and review quarterly reports from the Office of Professional Practice and all minutes of the meetings of the Committee for the Advancement of Professional Practice.

The Liaison/Consultation Group for Professional Practice shall consist of 106 delegates and the members of the Committee for the Advancement of Professional Practice. Each state, district, and provincial psychological association affiliated with APA shall be entitled to one delegate. Each division of APA, at least 50% of whose members pay the annual assessment and are

licensed to practice psychology in at least one state, district, or province shall be entitled to one delegate. The balance of the 106 seats shall be distributed to such eligible divisions on the basis of an apportionment ballot, such ballot to be provided to all APA members who pay the annual assessment and who are licensed to practice psychology in a state, district, or province. Delegates to the Liaison/Consultation Group for Professional Practice shall be selected by the affiliated state, district, or provincial association or the APA division they will represent from nominees elected by the constituency of such association or division, according to such rules as may be established by the constituent organization. Delegations to the Liaison/Consultation Group for Professional Practice shall serve three-year terms, with one-third of the body selected in any one year.]

[90-2.3 All funds generated by the annual assessment of health service psychologists shall be sequestered by the Board of Directors and, in a manner consistent with APA policy, shall be used exclusively for the support of the Office of Professional Practice, for the operation of the Committee for the Advancement of Professional Practice, and for such special projects as are recommended to the APA Board of Directors by the Committee for the Advancement of Professional Practice. This budget shall be reported in the consolidated APA annual budget.]

110-14. RULES GOVERNING SIMULTANEOUS SERVICE ON BOARDS AND COMMITTEES

110-14.1 Members shall not serve simultaneously on any of the following governance groups, except as ex-officio (non-voting) members or if other exceptions are provided below.

Boards

Advancement of Psychology in the Public Interest
Convention Affairs
Educational Affairs
Policy and Planning
Publications and Communications
Professional Affairs (except that one member is also a member
of the Committee on Professional Practice and Standards)
Scientific Affairs

Committees

Accreditation
Advancement of Professional Practice
Aging
Animal Research and Ethics
Approval of Continuing Education Sponsors
Children, Youth and Families
Continuing Professional Education
Disability Issues in Psychology
Division / APA Relations
Employment and Human Resources
Ethics
Ethnic Minority Affairs
Finance(except that two members are also members
of the Investment Committee)
Investment Committee (except that two members are also
members of the Finance Committee)
International Relations in Psychology
Legal Issues(ad hoc)
Lesbian, Gay and Bisexual Concerns
Membership

Professional Practice and Standards(except that one member is also a member of the Board of Professional Affairs)
Psychology and AIDS(ad hoc)
Public Information
Rural Health
Structure and Function of Council
Psychological Tests and Assessment
Teachers of Psychology in Secondary Schools
Women in Psychology
Urban Initiatives

Other

[College of Professional Psychology]
Commission for the Recognition of Specialties and Proficiencies in Professional Psychology

110-14.2 Members shall not simultaneously run for election(e.g., appear on the board and committee election ballot) for more than one of the following governance groups. In addition, members shall not run for election for one of the following governance groups if the term of service will begin prior to the end of a term the member is currently serving on one of the governance groups listed in Association Rule 110-14.1

Boards

Advancement of Psychology in the Public Interest
Convention Affairs
Education Affairs
Policy and Planning
Publications and Communications
Professional Affairs
Scientific Affairs

Committees

Advancement of Professional Practice
Employment and Human Resources
Ethics
Finance
International Relations in Psychology
Membership
Public Information
Rural Health
Structure and Function of Council

Other

[College of Professional Psychology]
Commission for the Recognition of Specialties and Proficiencies in Professional Psychology

[130.5 COLLEGE OF PROFESSIONAL PSYCHOLOGY

There shall be a College of Professional Psychology. It shall be governed by a Board of Governors. It shall have the authority to certify psychologists in recognized proficiency areas of practice and in other professional practice domains. Psychologists seeking such certification shall be health service providers in psychology who are licensed in a state or Canadian province. The College shall: (a) specify from among recognized practice proficiencies and from among professional practice domains those for which certificates ought to be made available to providers; such specification will be based on an assessment of need and feasibility that will

include an opportunity for the submission of written public comment: designation of all such proficiencies and domains shall be subject to ratification by the Council of Representatives, (b) develop procedures for identifying candidates applying for certification who shall be qualified to sit for examination, (c) develop and refine examinations for evaluating candidates' knowledge and skills, (d) review and select training and continuing education offerings and sequences delivered by APA-approved continuing education vendors that conform to College proficiency education and training criteria, and (e) adopt standards for renewal of certificates.

The College shall consist of 12 members, each of whom shall serve a staggered term of 3 years. CAPP, BPA, BSA, BAPPI, BEA, and the practice divisions, as defined in Association Rule 90-4.2, shall each be represented by two seats on the College Board. One-third of the member shall retire each year. College members shall be limited to two successive full terms of service and may not further succeed themselves without a break in such service.

All members of the Board of Governors shall be APA members and at least 11 of the 12 members shall be licensed psychologists. The non-licensed member may be elected only to a seat representing BSA. The members shall be chosen by the APA Council of Representatives through a nomination process solicited from APA membership in the manner described in Association Rule 110-14.1. The names identified as a result of this solicitation shall be supplied to CAPP, BPA, BSA, BAPPI, BEA, and the practice divisions. CAPP, BPA, BSA, BAPPI, and BEA shall each forward to the College Board of Governors not more than nine, nor less than five names for a vacancy in an appropriately representative seat. The practice divisions may each forward to the College not more than two names for a vacancy in a seat assigned to them.

From the names provided by CAPP, BPA, BSA, BAPPI, BEA and the practice divisions, the College Board of Governors shall prepare ranked slates of five names for each vacancy and shall transmit the proposed slates to the Board of Directors. The Board of Directors shall develop three-person slates for each vacancy. The three-person slates must be taken from the ranked, five-person slates submitted to the Board of Directors by the College Board of Governors. The Board of Directors' slates will be developed in a manner to ensure gender and ethnic diversity of membership and will be submitted to the Council for election in the usual fashion. The College shall report to the Council of Representatives through the Board of Directors.

The College functions will be established administratively within the Central Office, subject to legal consultation to establish policy and procedures that will create appropriate autonomy of the College. The College shall establish rules that govern its procedures, subject to the approval of the Board of Directors acting for Council.]

B(5B). In executive session, Council voted to approve the name "American Psychological Association Practice Organization" as the name of the 501(c)(6) organization.

C.(19) Council voted to approve amending Association Rule 70-1.1. as follows (underlined material to be added):

70-1.1 The Policy and Planning Board shall consist of not fewer than nine Members of the Association. One of its members shall be a representative to Council serving in their first or second term on Council.

D.(48) Council received an update on the new-business-in-progress item "Membership on Standing Boards and Committees and on Continuing Committees."

E.(49) Council received an update on the new-business-in-progress item "P&P/Blue Ribbon Panel (Panel) Governance Renaissance Plan: Board and Committee Structure."

F.(50) Council received an update on the new-business-in-progress item "P&P/Panel Governance Renaissance Plan: Redesign of the Council of Representatives."

G.(51) Council received an update on the new-business-in-progress item “P&P/Panel Governance Renaissance Plan: Using Division Expertise.”

H.(52) Council received an update on the new-business-in-progress item “P&P/Panel Governance Renaissance Plan: Board of Directors.”

I.(53) Council received an update on the new-business-in-progress item “P&P/Panel Governance Renaissance Plan: Policy and Planning Board.”

J.(54) Council received an update on the new-business-in-progress item “P&P/Panel Governance Renaissance Plan: Committee on International Relations in Psychology.”

K.(55) Council received an update on the new-business-in-progress item “P&P/Panel Governance Renaissance Plan: National College of Professional Psychology.”

J.(56) Council received an update on the new-business-in-progress item “P&P/Panel Governance Renaissance Plan: Commission for the Recognition of Specialties and Proficiencies in Professional Psychology.”

K.(57) Council received an update on the new-business-in-progress item “P&P/Panel Governance Renaissance Plan: Committee on Division/APA Relations.”

L.(58) Council received an update on the new-business-in-progress item “P&P/Panel Governance Renaissance Plan: Ad Hoc Committee on Legal Issues.”

M.(59) Council received an update on the new-business-in-progress item “P&P/Panel Governance Renaissance Plan: Assessing Association Priorities.”

N.(60) Council received an update on the new-business-in-progress item “P&P/Panel Recommendation on Review of the Structure and Function of the American Psychological Association’s Operational Units.”

O.(61) Council received an update on the new-business-in-progress item “P&P/Panel Recommendation for an APA Ombudsman.”

P.(62) Council received an update on the new-business-in-progress item “Change in Council’s Name.”

Q.(63) Council received an update on the new-business-in-progress item “Council Seats for State Associations and Divisions.”

R.(64) Council received an update on the new-business-in-progress item “Policy on the Utilization of Technology.”

VII. PUBLICATIONS AND COMMUNICATIONS

A.(6) Council voted to adopt the following APA policy statement on freedom of scientific inquiry and presentation of research results:

The American Psychological Association is committed to fostering a vigorous science of psychology through the open exchange of ideas and data. A productive and healthy science requires freedom of inquiry and freedom of expression. Researchers must be free to pursue their scientific investigations within the constraints of the ethical principles, scientific principles, and guidelines of the discipline. Editors, too, after seeking appropriate peer review, must be free to publish that science in their journals even when findings are surprising, disappointing, or controversial.

The publication of a scientific article by a journal of the American Psychological Association does not constitute its endorsement. The Association will not condone any attempt to censor the reporting or discussion of science within its journals so long as it has been conducted ethically

and meets the scientific standards of the profession. Further, the Association will neither retract a published paper nor censure authors or editors for ethical scientific activities that yield potentially controversial findings. Scientific investigation is an evolving process: The ultimate evaluation of scientific results depends on a continuous exchange of ideas and reexamination of ideas and findings.

B.(20) Council voted to allocate \$25,000 from its 2000 contingency funds to support the expansion of the number of weekly press releases publicizing psychological science published in APA journals.

C.(21) Council voted to support the recommendations of the Board of Scientific Affairs and the Publications & Communications Board to increase our efforts to attain greater publicity and visibility of research published in APA journals. The Council further voted to approve the annual funding of such efforts (\$100,000 for 2001) through the Office of Publications and Communications. The funding will be provided by the Office of Publications and Communications and the management of this press release effort will be provided by the Public Affairs Office.

VIII. CONVENTION AFFAIRS

No items.

IX. EDUCATIONAL AFFAIRS

A.(7) Council voted to formally confirm the recognition of Behavioral Psychology as a specialty in professional psychology.

B.(7A) Jack Plummer, PhD, Chair of the Commission for the Recognition of Specialties and Proficiencies and Professional Psychology (CRSPPP), informed Council of CRSPPP's plans to conduct a self-study of its experience with criteria and procedures for specialty recognition, leading ultimately to such recommendations on criterion and procedure revisions as may be warranted for Council's action.

C.(32C) The new business item "Education and Training Standards" was referred to the Board of Educational Affairs, the Board of Professional Affairs, the Committee for the Advancement of Professional Practice and COLI.

D.(35) Council received information regarding APA's participation in a new initiative entitled *Shaping the Preparation of Future Social Science and Humanities Faculty: A Future Faculty Program*.

E.(65) Council received an update on the new-business-in-progress item "Bar to Service in the Accreditation Process."

F.(66) Council received an update on the new-business-in-progress item "Membership on Accreditation Site Visiting Panels."

G.(67) Council received an update on the new-business-in-progress item "Future Composition of the Committee on Accreditation."

H.(68) Council received an update on the new-business-in-progress item "Internal Review of Committee on Accreditation Effectiveness."

I.(69) Council received an update on the new-business-in-progress item "Greater Autonomy for Committee on Accreditation."

X. PROFESSIONAL AFFAIRS

A.(8) Council voted to approve the *Criteria for Evaluating Treatment Guidelines* which replaces the *Template for Developing Guidelines: Interventions for Mental Disorders and Psychosocial Aspects of Physical Disorders*.

B.(9) Norine G. Johnson, PhD, Ronald F. Levant, EdD, and Ruth Ullmann Paige, PhD, provided Council with an update on the Commission on Education and Training Leading to Licensure in Psychology.

C.(9A) Council voted to endorse the *Practice Parameter: Screening and Diagnosis of Autism*.

D.(9B) Council voted to approve the withdrawal of new business item 30H, "A Taxonomy for Professional Psychology."

E.(22) Council voted to reject a motion requesting that APA establish a database to enable patients to access their psychological records from their deceased psychologists' estates.

F.(23) Council voted to refer to the Board of Directors the item "Proposed Amendment to Association Rule 130-3 to Add the APA Award for Distinguished Contributions to Mental Health Services."

G.(24) Council voted to approve the continuation of funding for the Public Education Campaign at the current level of \$1,000,000 per year as a regular line in the Association's budget with the proviso that the ongoing program assessment be continued and reported to the Finance Committee and Council every three years beginning in 2003.

H.(36) Council was informed of the Board's approval of a motion stating that it is the sense of the Board that existing policy on licensure supports APA's non-involvement in state licensure issues pertaining to other professions so long as the title of practice of psychology is not involved.

I.(36A) Council received an update on the Report of the Task Force on Envisioning, Identifying and Accessing New Professional Roles.

J.(36B) Council received an update on the College's Development of Psychopharmacology Examination: Examination Offered to Qualified Psychologists.

K.(70) Council received an update on the new-business-in-progress item "A Taxonomy for Professional Psychology."

L.(71) Council received an update on the new-business-in-progress item "Coalition Building to Design and to Implement Health Care Reform."

M.(72) Council received an update on the new-business-in-progress item "Information Service for Practitioners."

N.(73) Council received an update on the new-business-in-progress item "Task Force on Implementation of Primary Health Care Policy."

O.(74) Council received an update on the new-business-in-progress item "Coordination of Trauma Activity Within APA."

XI. SCIENTIFIC AFFAIRS

A.(10) Council voted to approve amending Association Rule 140-5.1 as follows (bracketed material to be deleted; underlined material to be added):

140-5 Committee on Psychological Tests and Assessment

140.5-1 There shall be a Committee on Psychological Tests and Assessment whose responsibility it shall be to: (a) [consider] address problems regarding sound psychological testing and assessment practices, and initiate discussions with specific agencies and institutions outside APA concerning sound testing and assessment practices; (b) review regularly the [Joint Technical] Standards for Educational and Psychological Testing and recommend revision, when necessary; (c) serve as technical advisors to other APA boards and committees on all issues affecting testing and assessment as it involves policy, practice, and science; (d) monitor actions

of government and other organizations concerning regulation and control of assessment and testing practices and make appropriate recommendations; [and], (e) maintain a knowledge of and concern regarding current policy issues on the use of tests and assessment in clinical, counseling, educational, and employment settings, and (f) promote the appropriate use of tests and sound assessment practices. Insofar as possible, the Committee shall have expertise in the theory, evaluation, and use of tests in clinical, counseling, school, and industrial/organizational psychology and shall represent the concerns of diverse groups that may be affected by testing. This may include but not be limited to persons with disabilities, women, and ethnic minorities. [women and ethnic minority groups]. In order for the Committee to maintain liaison and cooperation with other groups concerned with tests and assessment, it is desirable for some members of the Committee to hold joint membership in APA, the American Educational Research Association, and the National Council on Measurement in Education. The Committee shall consist of nine members appointed by the Board of Scientific Affairs in consultation with the Committee. Three members shall be appointed annually for a term of three years. Members shall be selected by the following process:

In a three year rotation, BPA, BEA, and BAPPI shall submit slates of at least three persons who reflect the orientation of their respective boards and who have expertise in some area of testing and assessment. One person shall be appointed from each slate of three nominees and thus three of the nine committee members shall be appointed in this way.

BSA shall select annually a member from a slate of three persons with expertise in the scientific aspects of testing.

A member shall be appointed annually from a slate of three candidates who combine a technical knowledge of testing with the respective orientations of BPA, BEA, or BAPPI (in a three-year rotation). Each slate shall be reviewed by the board whose views are to be represented.

BSA will be responsible for ensuring that at least two of the nine Committee members shall be ethnic minorities with expertise in one or more content areas of relevance to testing and assessment.

B.(11) Council voted to approve the Report of the Task Force on Test User Qualifications.

C.(25) Council voted to approve adding \$150,000 to the 2001 Preliminary Budget to fund start-up costs of the Academic Enhancement Initiative activities, and adding \$350,000 per year, beginning in 2002, as a regular line in the Association's budget for full funding of the Academic Enhancement Initiative, with the proviso that an ongoing program assessment be conducted and reported to the Finance Committee and Council every three years beginning in 2003.

D.(75) Council received an update on the new-business-in-progress item "Ethical Principles in the Conduct of Research with Human Participants."

XII. PUBLIC INTEREST

A.(12) Council voted to approve the Resolution on Poverty and Socioeconomic Status as follows:

WHEREAS the income gap between the poor and the rich has continued to increase, with the average income of the poorest fifth of the population down 6% and the average income of the top fifth up 30% over the past 20 years (Bernstein, McNichol, Mishel, & Zahradnik, 2000);

WHEREAS the poverty rate in the United States is higher now than in nearly all years of the 1970s, child poverty (at 18.9% in 1998, representing 13.5 million children) continues to be higher here than in most other industrialized nations, and the proportion of the population living below the poverty line in 1998 was 12.7% (representing 34.5 million people) (Center for Budget and Policy Priorities, 1999; U.S. Census Bureau, 1999);

WHEREAS although Whites represented the largest single group among the poor in 1998, ethnic groups were overrepresented, with 26.1% of African Americans, 25.6% of Hispanics, 12.5% of Asians and Pacific Islanders, and 31% of American Indians on reservations living in poverty (National Congress of American Indians, 2000; U.S. Census Bureau, 1999), compared with the 8.2% of Whites who were poor;

WHEREAS families* with a female head of household had a poverty rate of 29.9% in 1998 and comprised the majority of poor families (U.S. Census Bureau, 1999);

WHEREAS the Task Force on Women, Poverty, and Public Assistance of the APA Society of the Psychology of Women (Division 35) has documented from the social sciences research literature the root causes of poverty and its impact for poor women, children, and their families, and called for a more effective public policy founded on this research base (Division 35 Task Force on Women, Poverty, and Public Assistance, 1998);

WHEREAS poverty is detrimental to psychological well-being, with NIMH data indicating that low-income individuals are 2 to 5 times more likely to suffer from a diagnosable mental disorder than those of the highest SES group (Bourdon, Rae, Narrow, Manderschild, & Regier, 1994; Regier et al., 1993), and poverty poses a significant obstacle to getting help for these mental health problems (McGrath, Keita, Strickland, & Russo, 1990);

WHEREAS accumulating research evidence indicates that the greater the income gap between the poorest and the wealthiest in a society, the higher the death rates for infants and adults and the lower the life expectancy for all members of that society, regardless of SES (Kawachi & Kennedy, 1997);

WHEREAS the impact of poverty on young children is significant and long lasting, limiting chances of moving out of poverty (McLoyd, 1998), poverty is associated with substandard housing, homelessness, inadequate child care, unsafe neighborhoods, and underresourced schools (Fairchild, 1984; Lott & Bullock, in press), and poor children are at greater risk than higher income children for a range of problems, including detrimental affects on IQ, poor academic achievement, poor socioemotional functioning, developmental delays, behavioral problems, asthma, poor nutrition, low birth weight, and pneumonia (Geltman, Meyers, Greenberg, & Zuckerman, 1996; McLoyd, 1998; Parker, Greer, & Zuckerman, 1988);

WHEREAS environmental factors such as environmental contaminants (e.g., lead paint, etc.), crowding, substandard housing, lack of potable water, and so forth have detrimental effects on mental and physical development that perpetuate and contribute to poverty;

WHEREAS low socioeconomic status is associated in women with higher mortality rates and with osteoarthritis, hypertension, cervical cancer, coronary heart disease, AIDS/HIV infection, and other chronic health conditions (Adler & Coriell, 1997), and poor women are sicker and more likely to have disabilities than their nonpoor counterparts, limiting their employment options and straining their financial resources (Falik & Collins, 1996; Olson & Pavetti, 1997);

WHEREAS men living in poverty are at high risk of violence (Reiss & Roth, 1993) and women living in poverty are at high risk of all types of violence, including sexual abuse as children, with researchers documenting reports by two thirds of poor mothers of severe violence at the hands of a childhood caretaker and by 42% of child sexual molestation (Browne & Bassuk, 1997), as well as severe and life threatening assaults as adults (Bassuk, Browne, & Buckner, 1996; Brooks & Buckner, 1996; Colten & Allard, 1997; Roper & Weeks, 1993), which presents obstacles to work and self-sufficiency (NOW Legal Defense and Education Fund, 1997; Raphael, 1996);

WHEREAS lack of affordable health insurance, including mental health and substance abuse coverage, impedes health and well-being, and poor women are over 3 times as likely as higher income women to be uninsured: 36% versus 11%, respectively (National Center for Health Statistics, 1995);

WHEREAS children of teenage pregnancy and single motherhood are at high risk for a life of poverty, and birth control is not covered by health insurance plans for a significant number of women;

WHEREAS older adults often live on limited retirement incomes, have limited prospects for future earnings, and frequently face overwhelming health care costs; 13% of older women and 20% of older persons living alone or with nonrelatives in 1998 lived on incomes below the poverty level; and 49% of older African American women living alone lived in poverty in 1998 (U.S. Census Bureau, 1999, cited in U.S. Administration on Aging, 1999);

WHEREAS lower socioeconomic status among older adults is associated with higher rates of medical and psychological disorders, poor older adults have poorer access to medical care, prescription medications, long-term care, and community-based care (Estes, 1995), and Medicare funds mental health care at a lower rate than medical care, and this further limits the access for older adults in poverty to mental health and substance abuse services;

WHEREAS migrant families are by the nature of their work and life circumstances poorly served by health and mental health professionals (Portes & Rumbaut, 1996; Wilk, 1986);

WHEREAS undocumented immigrants are vulnerable to legal actions that inhibit their access to health and mental health services, compounding issues of poverty and limited English language proficiency (Olivera, Effland, & Hamm, 1993);

WHEREAS research focused on low-income groups including immigrants, ethnic minorities, minimum wage workers, families receiving public assistance, the homeless, migrant workers, and older women is limited;

WHEREAS low-income groups are the targets of discrimination based on their socioeconomic status as well as other social indicators such as race/ethnicity and gender (Lott, in press);

WHEREAS perceptions of the poor and of welfare – by those not in those circumstances -- tend to reflect attitudes and stereotypes that attribute poverty to personal failings rather than socioeconomic structures and systems and that ignore strengths and competencies in these groups (Ehrenreich, 1987; Katz, 1989; Quadagno, 1994), and public policy and anti-poverty programs continue to reflect these stereotypes (Bullock, 1995; Furnham, 1993; Furnham & Gunter, 1984; Rubin & Peplau, 1975);

WHEREAS programs that ensure that poor individuals and families have basic needs met are important in addressing the impact of poverty;

WHEREAS ethnic strife and war disrupt the economic, public health, and social systems comprising the safety net that helps ensure basic needs are met;

WHEREAS psychologists as researchers, service providers, educators, and policy advocates have a responsibility to better understand the causes of poverty and its impact on health and mental health, to help prevent and reduce the prevalence of poverty and to effectively treat and address the needs of low-income individuals and families by building on the strengths of communities;

WHEREAS psychologists are ethically guided to "respect the fundamental rights, dignity, and worth of all people" (American Psychological Association, Ethical Principles of Psychologists and Code of Conduct, 1992);

WHEREAS "psychologists are aware of their professional and scientific responsibilities to the community and the society in which they work and live" (American Psychological Association, Ethical Principles of Psychologists and Code of Conduct, 1992);

THEREFORE Be it resolved that the American Psychological Association:

1. Will advocate for more research that examines the causes and impact of poverty, economic disparity, and related issues such as socioeconomic status, classism, ageism, unintended pregnancy, environmental factors, ethnic strife and war, stereotypes, the stigma and feelings of shame associated with poverty, and mental and physical health problems, including depression, substance abuse, intimate violence, child sexual abuse, and elder abuse, as well as advocate for the broader dissemination of these research findings.
2. Will advocate for more research on prejudicial and negative attitudes toward the poor by other persons who may individually or collectively perpetuate policies that tolerate poverty and social inequality.
3. Will advocate for more research on special populations who are poor (women and children, immigrants, undocumented immigrants, migrants, ethnic minorities, older people, people with disabilities and other chronic health conditions such as AIDS/HIV infection, and rural and urban populations).
4. Will advocate for research that identifies and learns from indigenous efforts by low-income people to work together to solve personal and shared problems or create organizations that advocate effectively for social justice.
5. Will recommend that where possible and appropriate socioeconomic status be identified for published reports of social sciences research.
6. Will advocate for incorporating evaluation and assessment tools and for encouraging integrative approaches such as the building of public and private community partnerships in programs addressing the issue of poverty and the poor, which psychological research has identified as effective strategies for addressing community level issues and problems.
7. Will encourage in psychological graduate and postgraduate education and training curricula more attention to the causes and impact of poverty, to the psychological needs of poor individuals and families, and to the importance of developing "cultural competence" and sensitivity to diversity around issues of poverty in order to be able to help prevent and reduce the prevalence of poverty and to treat and address the needs of low-income clients.
8. Will support public policy that encourages access for all children to high-quality early childhood education and a high-quality public school education, better equipping individuals for self-sufficiency.
9. Will support public policy that ensures access to postsecondary education and training that allows working families to earn a self-sufficient wage to meet their family's needs.
10. Will support public policy and programs that ensure adequate income, access to sufficient food and nutrition, and affordable and safe housing for poor people and all working families.
11. Will support public policy that ensures access to family-friendly jobs offering good quality health insurance, including coverage for comprehensive family planning, mental health and substance abuse services, flexible work schedules, and sufficient family and medical leave.
12. Will support public policy that ensures access to comprehensive family planning in private and public health insurance coverage.
13. Will support public policy that ensures parity with medical coverage for mental health and substance abuse services under Medicare and Medicaid and ensures for all individuals, regardless of ability to pay, access to health care and mental health and substance abuse treatment that is comprehensive and culturally sensitive, that accommodates the needs of the

children of parents seeking treatment, and that addresses the special needs of older adults in poverty, including prescriptions and long-term care.

14. Will support public policy that encourages access for all children to high-quality early health care.

15. Will support public policy that ensures for all working families access to affordable, high-quality child care, which is available year round, for the full day, and for all work shifts, as well as before- and after-school care.

16. Will support public policy that provides early intervention and prevention for vulnerable children and families that enhance parenting, education, and community life so that children can develop the necessary competencies to move out of poverty.

17. Will support public policy that provides early interventions and prevention for vulnerable children and families that are strengths-based, community-based, flexible, sensitive to culture and ethnic values of the family, and that have a long-lasting impact.

*The word *family* should be understood to incorporate the functions of family members rather than their biological sex or sexual orientation, for example, lesbian heads of household.

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B.(13) Council received with thanks the Report from the Working Group on Assisted Suicide and End-of-Life Decisions.

C.(13A) Council voted to approve the withdrawal of new business item 23F, "Need for Coordination of Trauma Activity within APA."

D.(26) Council voted to allocate \$12,400 from its 2000 contingency funds to support two, three-day meetings of the Task Force on Advertising and Children composed of psychologists with expertise in issues including, but not limited to, child development, social influence and media and technology.

E.(27) Council voted to approve the inclusion of \$26,000 in the 2001 Preliminary Budget for the establishment of a cross-constituency 5-person Ad Hoc Committee on End-of-Life Issues directed to provide oversight and leadership in implementing the recommendations of the Working Group on Assisted Suicide and End-of-Life Decisions, and as part of its charge, to explore and apply for external funding to continue implementation of the recommendations of the Working Group.

F.(76) Council received an update on the new-business-in-progress item "Identification, Training and Organizational Responses to Workplace Violence."

G.(77) Council received an update on the new-business-in-progress item "Proposed Resolution on Creating an APA Council Task Force on Pro Bono Affairs."

H.(78) Council received an update on the new-business-in-progress item "Physician Assisted Suicide."

I.(79) Council received an update on the new-business-in-progress item "Convention Projects in Site Cities."

J.(80) Council received an update on the new-business-in-progress item "Implementation of Council Public Interest and Social Policy Resolutions."

K.(81) Council received an update on the new-business-in-progress item "Need for Coordination of Trauma Activity within APA."

XIII. ETHNIC MINORITY AFFAIRS

A.(32F) The new business item "Resolution on Racial Profiling and Other Law Enforcement Activities" was referred to the Committee on Ethnic Minority Affairs, BAPPI, COLI and the Committee on Urban Initiatives.

XIV. INTERNATIONAL AFFAIRS

No items.

XV. CENTRAL OFFICE

No items.

XVI. FINANCIAL AFFAIRS

A.(14) Council voted to reject a motion requesting that respective boards within each directorate review all items requesting contingency funds from the Board or Council, or having fiscal implications from within the directorate and provide an overall prioritization and rank-ordering of such requests from the directorate to the Board or Council.

B.(15) Council voted to approve the following changes to the Association Rules (bracketed material to be deleted; underlined material to be added):

210-1.1 Finance Committee

The Finance Committee shall be composed of seven voting members[, of whom two shall be elected each year for terms of three years] and up to three non-voting members. Of the voting members, two shall be elected each year for terms of three years; [to be elected each year,] one slate shall be limited to first-year and/or second-year members of Council and the second slate shall be limited to first-year and/or second year Council members or former or outgoing members of the Finance Committee. No member may serve more than two consecutive terms. The seventh voting member of the Committee is the APA Treasurer, who shall serve as its Chair. The non-voting members shall be representatives from the investment community and are not necessarily psychologists. The non-voting members will be recommended by the Finance Committee and appointed by the Board of Directors for terms of three years not to exceed three consecutive terms.

Consistent with the mission of the Finance Committee set forth in Article XI, Section 3 of the APA Bylaws, the Finance Committee shall review and make recommendations on all new business and any old business coming before Council having financial implications that have not already been provided for in the budget. In addition, it is the responsibility of the Committee to (a) recommend overall investment strategy, including, but not limited to, amounts to be invested in equities, bonds, short-term holdings and real estate; (b) monitor the performance of the

investment managers, if any; (c) research and develop alternative investments; (d) and advise the Treasurer and appropriate staff on investing funds not entrusted to an investment manager.

[90-4. There shall be an Investment Committee to be appointed by and report to the Board of Directors. The Investment Committee shall consist of six members, at least four of whom are APA members: One of the four shall be the APA Treasurer, who shall serve as chair; one shall be selected from a slate nominated by the Board for the Advancement of Psychology in the Public Interest (BAPPI); and the remaining two shall be current members of the Finance Committee. The other two members are to be representatives of the investment community and are not necessarily psychologists.

It is the responsibility of the Committee to (a) recommend overall investment strategy, including, but not limited to, amounts to be invested in equities, bonds, short-term holdings and real estate; (b) monitor the performance of the investment managers, if any; (c) research and develop alternative investments; (d) and advise the Treasurer and appropriate staff on investing funds not entrusted to an investment manager.

Terms of office shall be as follow: BAPPI representative, a maximum of two three-year terms; the APA Treasurer, consistent with the APA Treasurer's term of office; Finance Committee members, consistent with term on Finance Committee; members from the investment community, maximum of three three-year terms.】

Other related housekeeping changes:

50-5.1.1 List of Continuing Committees

[Investment Committee]

110-14.1 Members shall not serve simultaneously on any of the following governance groups except as ex-officio (non-voting) members or if other exceptions are provided below.

Finance [except that two members are also members of the Investment Committee]

[Investment Committee (except that two members are also members of the Finance Committee)]

C.(15A) Council voted to approve the withdrawal of new business item 30E, "Accountability."

D.(28) Council voted to postpone the item "Dues Equity" to its February 2001 meeting.

E.(29) Council voted to approve 1) instituting the practice of increasing the APA dues annually by an amount linked to the consumer price index for all urban consumers (CPI-U); and 2) a \$4 dues increase from \$215 to \$219 for the 2001 dues year.

F.(30) Council voted to approve the 2001 Preliminary Budget with a deficit of \$198,400, in principle, including the reclassification of the \$1,000,000 partnership cash flow (historically referred to as the building subsidy). The 2001 Preliminary Budget shall serve as the framework for the 2001 Final Budget that will be presented to Council for approval in February 2001.

G.(31) Council voted to approve the following Net Worth Allocation Plan:

Net Worth Allocation Plan

1. The goal for attainment of net worth as stated in Association Rule 210-3 should be reaffirmed; namely, that the Association strives to maintain a net worth equal to at least one year's operating budget subject to the consideration of pressing priorities that may arise.

2. Consistent with accounting practices, conventional wisdom and comparable financial data from other organizations, the Association should not consider any portion of theoretical building equity toward attainment of the net worth goal mentioned in item 1 above. *[Note: This action is recommended since consideration of building equity in the attainment of our net worth goal makes no additional funds available for operations.]*
3. Currently, rather than specifically set aside funds outside the normal budget process for development of programs deemed to be of high priority to the membership, the Association enthusiastically supports consideration of proposals for new revenue generating ideas. *[Such proposals for new revenue generating ideas should be thoroughly detailed including all direct costs, indirect costs, and staff costs. Such proposals reviewed by the Board of Directors and approved by the Council of Representatives, will be funded out of ongoing revenues or out of the Association's net worth, as necessary, assuming that full consideration is also given to the impact of such funding on progress towards the Association's net worth goal mentioned in item 1 above.]*
4. The specific financial forecast for 2001 – 2003 is as follows:
 - 1) Strive to attain a net worth goal equal to at least one year's operating budget consistent with Association Rule 210-3;
 - 2) Include all net cash flow from building operations in the operating budget as a regular source of revenue (currently, the average net cash flow from building operations is estimated at \$1,000,000 per year during this forecast period);
 - 3) Include funding in the operating budget for the Public Education Campaign through the forecast period (2001-2003);
 - 4) Restrict capital expenditures to no more than \$4,500,000 over the forecast period;
 - 5) Continue to reinvest net gains/losses from our long-term portfolio activity (estimated at \$2,700,000 over the forecast period);
 - 6) Continue to subsidize the operating budget by all interest and dividends generated from our long-term portfolio activity (estimated at \$2,000,000 over the forecast period); and,
 - 7) Continue to treat the advance to Square 677 as a loan rather than as an additional capital contribution and limit the loan principal to no more than \$10 million dollars.
5. Each year based on actual results and an analysis of our net worth, future financial forecasts will be adjusted accordingly.
6. Once the net worth goals are attained, any number of future actions can be taken including the long-term stabilization of dues; the long-term availability of funds for the development of programs deemed to be of high priority to the membership; further apportionment of building and investment proceeds toward operational expenses, etc.

H.(37) Council was informed of the decision to not purchase the warehouse at the increased sales price and of APA's receipt of reimbursement for the cost of the due diligence effort from the Trammell Crow Company.

I.(38) Council received as information the Arthur Andersen LLP 1999 Audited Financial Statements.

J.(39) Council received as information the June 2000 Finance Committee meeting minutes.

K.(82) Council received an update on the new-business-in-progress item "Accountability."

L.(83) Council received an update on the new-business-in-progress item "Sale of APA Buildings."

M.(84) Council received an update on the new-business-in-progress item "Priority Setting and Cost-Containment."

On Thursday morning, Cynthia D. Belar, PhD, Executive Director of the Education Directorate, provided a report to Council.

On Thursday afternoon, Ronald F. Levant, EdD, and the Caucus and Coalition Chairs led a Roundtable Discussion regarding the philosophy of the budget and related issues.

On Thursday afternoon, a memorial remembrance was held for Catherine Acuff, PhD.

On Sunday morning, Russ Newman, PhD, JD, Executive Director for the Practice Directorate, provided a report to Council on the Practice Directorate and the Public Education Campaign. Dr. Newman was also presented with a presidential citation.

On Sunday morning, Rosemary Schwartzbard received a presidential citation recognizing her and her colleagues for their work with the Disaster Response Network

On Sunday afternoon, Rachel T. Hare-Mustin, PhD, Parliamentarian, was presented with a presidential citation.

COUNCIL OF REPRESENTATIVES

August 9 & 13, 2006

APPROVED MINUTES

I. MINUTES OF MEETING

A.(1) Council voted to approve the minutes of its February 17-19, 2006, meeting.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(2) Council voted to approve amending the APA Bylaws and Association Rules as follows (bracketed material to be deleted; underlined material to be added):

APA BYLAWS

ARTICLE XI: BOARDS AND COMMITTEES

2. [The Membership Committee shall be composed of Fellows of the Association, not fewer than three in number, elected for terms of not less than three years.] The Membership Board shall consist of no fewer than eight Members and one Affiliate of the Association. At least two of the members shall be Fellows of the Association. The remaining members shall be selected to represent the diverse memberships of the Association. Members of the Board shall serve for staggered terms of three years each, except when filling a vacancy on the Board. The [Committee] Board shall have responsibility for the oversight of membership recruitment and retention activities for the Association. The [Committee] Board shall have the authority to elect qualified persons to initial Member or Associate member status. The Membership Board is responsible for establishing and regulating the APA criteria that the Fellows Committee uses to review and to recommend member nominees for election to Fellow status. The [Committee] Board shall [also review nominations for Fellows and shall report their recommendations on each case] receive nominations from the Fellows Committee and shall forward recommendations without alterations or comments to the Board of Directors.

Council requests that the following statement be included with the Bylaw amendment ballot:

The Council of Representatives asks the Membership to approve the reconstitution of the Membership Committee into a Membership Board, with a newly established Fellows Committee reporting to the Membership Board. The newly established Fellows Committee will review nominations for Fellows and make recommendations to the Board of Directors through the Membership Board, thereby providing the reconstituted Membership Board the opportunity to focus more attention and resources on the Association's membership recruitment, retention and engagements efforts.

Association Rule changes detailing the missions of the Membership Board and Fellows Committee were approved by Council at its August 2006 meeting and will become effective upon the Membership's approval of the proposed Bylaw change.

ASSOCIATION RULES

10-2. MEMBERSHIP [COMMITTEE] BOARD

10-2.1 The Membership [Committee] Board shall consist of [six Fellows] no fewer than eight members and one affiliate of the Association, [two] three of whom shall be elected each year for a term of three years.

10-2.2 Nomination slates for election to the Membership [Committee] Board shall be drawn in such a fashion as to reflect the diverse interests of APA members.

[10-2.3 The terms of the two senior members of the Committee may be extended for up to two years to permit their participation in the committee's meeting at which Fellowship nominations are considered.]

10-2.[4]3 Members shall not serve on a division Fellows Committee, nor endorse initial APA Fellow candidates, during their term on the Membership [Committee] Board.

10-2.[5]4 The Membership [Committee] Board shall oversee Association membership retention, and] recruitment, and engagement activities and make annual reports on these activities to the Council.

10-2.5 In carrying out its mission, the Membership Board will host a summit meeting, on a periodic basis, of governance representatives for a one-day dialogue before the beginning of the Spring Consolidated Meetings. The purpose of the meeting is to gain insight and input from the various constituents on trends, potential opportunities and/or challenges in their respective areas as they relate to the recruitment, retention, and engagement of members and affiliates. This information would then be used to develop the Membership Board's long and short-term strategic plans.

10-3. FELLOWS COMMITTEE

10-3.1 There shall be a Fellows Committee whose mission shall be to review the nominations for Fellows and report their recommendations on each case to the Board of Directors through the Membership Board. The Fellows Committee shall consist of at least four Fellows of the Association, at least one of whom shall be appointed each year for a term of three years. The Fellows Committee shall report to Council through the Membership Board.

10-3.2 Members shall not serve on a division Fellows Committee, nor endorse initial APA Fellow candidates, during their term on the Fellows Committee.

10-3.3 The terms of the two senior members of the Committee may be extended for up to two years to permit their participation in the committee's meeting at which Fellowship nominations are considered.

10-[3]4. APPLICATION PROCEDURES

10-[3].41 Application or nomination forms for Member, Associate member, or Fellow status shall be prescribed by the Membership [Committee] Board, after consultation with other APA committees involved in their use. Such forms are used to collect information sufficient to establish the applicant's ethical and technical qualifications for membership and to create necessary membership records and APA Directory/Register records.

All applicants for Associate member or Member status shall indicate whether or not they have previously been rejected for membership in the Association or had membership voided or have previously been convicted of a felony or sanctioned by any professional ethics body, licensing board, other regulatory body or any professional or scientific organization. All applications for Member or Associate member status shall carry the following statement, which the applicant shall sign:

"In making this application, I subscribe to and will support the objectives of the American Psychological Association as set forth in Article I of the bylaws, and the Ethical Principles of Psychologists and Code of Conduct, as adopted by the Association, and I affirm that the

statements made in this application correctly represent my qualifications for membership, and understand that if they do not, my membership may be voided."

APA may seek evidence from schools and universities that the candidate has attended, state or local psychological associations, professional employers, and/or other appropriate sources of information, when the submitted documentation leaves doubt as to the applicant's qualifications for membership in the Association.

Nominations for Fellow status shall be made by divisions to the [Membership] Fellows Committee. The written nomination shall show that the candidate's doctoral dissertation was on a psychological subject and that the professional experience cited as qualifying an individual for Fellow status was work which the person was properly qualified to perform and that was appropriately supervised. The recommendation shall include the endorsement of at least three, but preferably more, Fellows of the Association. In instances when the nominee is working in a highly specialized area, one of the three endorsers may be a former APA Fellow who is no longer a Member of the Association. The recommendation shall make clear what evidence the division puts forward to support the "unusual and outstanding contribution" of the candidate. The division may assemble the information by whatever means it deems appropriate but shall make reasonable verification of it before submission to the [Membership] Fellows Committee.

(a) With respect to the nomination of Fellows, each division shall, by such means as it shall determine, solicit nominations from its members of those who are deemed worthy of election to this honor. The division may require the nominator to indicate the evidence available in support of the nomination. It shall be the responsibility of the division to select from these nominees and to prepare the recommendations for submission as provided in the previous section.

(b) Divisions shall be informed that it is the assumption of Council that the final list of Members recommended for election to initial Fellow status contains only those Members officially nominated by the relevant divisions. Divisions are responsible for maintaining appropriate review schedules to meet this requirement. This rule does not deny the right of an individual Council member to challenge any nomination on the list.

10-[4]5. INTERPRETATION OF EDUCATIONAL REQUIREMENTS

10-[4]5.1 In acting upon an application for Associate member or Member status in the Association, the Membership [Committee] Board and/or Membership Staff shall be guided by the following interpretation of the requirements stated in the APA Bylaws:

The applicant's graduate or professional school must have full regional accreditation at the time the applicant is elected to membership, although the applicant's training or degree may have been received during the five years prior to full accreditation. A regionally accredited institution is defined as an institution that is listed as fully accredited by the appropriate regional accrediting body in the Directory of Accredited Institutions of Postsecondary Education, published annually by the American Council on Education, or one of equivalent standing outside the United States.

10-[5]6. FELLOW CRITERIA

10-[5]6.1 There can be no single criterion upon which to base nomination for Fellow status. Operational definitions of "unusual and outstanding contribution or performance" differ from division to division. The relative weight given to individual criteria and to combinations of criteria shall be carefully examined by divisions and by the APA [Membership] Fellows Committee when they assess the impact the nominee has had on the field of psychology. Criteria may include, but shall not be limited to, the following: publications, innovations, workshop activity, professional service, demonstrated leadership, journal editorship, and awards. (see Appendix B for the criteria included on the Standard Evaluation Form (Fellow) and on certain division surveys.)

10[5].62 A person may be nominated for initial Fellow status by only one division. If additional division Fellow nominations are submitted at the same time as the initial nomination, Fellow status may take place for these additional divisions upon initial Fellowship election by the Council of Representatives. Any individuals who are nominated by more than one division shall select the division which best represents their work and contributions to psychology. The selected division will become the "nominating division." Such nominees will inform the nominating division of any other divisions which have also expressed interest in nominating them for Fellow status.

10-[7]8. JUSTIFYING A WAIVER OF REQUIREMENTS

10-[7].81 When asking for waivers of the doctoral or experience requirement for Member or Fellow status or a waiver based on distinction in a related field, the applicants must provide reasonably persuasive evidence to support the request. It is not sufficient that such a waiver is recommended by a division, nor is it the responsibility of the Membership [Committee] Board to develop or document the case.

10-[8]9. VOIDING OF MEMBERSHIP

10-[8].91 Membership obtained on the basis of false or fraudulent evidence may be voided at any subsequent time by the Board of Directors. Action to void may be brought either by the Ethics Committee or by the Membership [Committee] Board.

10-[10]11. REINSTATEMENT OR READMISSION

10-[10]11.1 The membership of a person who has voluntarily resigned or who has been dropped for nonpayment of dues may be fully reinstated at any time by the payment of all delinquent and current dues. When fully reinstated, the person's membership dates from the original year of election. This option shall not be available to a former member who was under scrutiny by the Ethics Committee at the time membership was terminated.

10-[10]11.2 The membership of a person who has voluntarily resigned or who has been dropped for nonpayment of dues may also be reinstated upon payment of dues for the current year. Reinstatement is effective as of the current year. The period of nonpayment of dues shall not be counted toward the years needed to attain dues-exempt status. This option can be used only once and shall not be available to former members who were under scrutiny by the Ethics Committee at the time membership was terminated.

10-[10]11.3 A person whose membership has been terminated under the provisions of Article II, Section 17 of the APA Bylaws or who has resigned while under the scrutiny of the Ethics Committee may request reinstatement of membership under the conditions stated in Article II, Section 18. Accordingly, the Membership [Committee] Board will automatically inform the Ethics Committee of all such reinstatement requests and the Ethics Committee shall be responsible for furnishing the Membership [Committee] Board with a recommendation as provided in its Rules and Procedures.

10-[10]11.4 Ordinarily, individuals who have previously resigned or been expelled from membership must reinstate into the previously held membership status and dues category and may not reapply as a new member. Exceptions regarding the membership status and dues category of reinstating members may be made by the chief staff officer or the Membership [Committee] Board.

(Note: Current 10-6 (Division Standards and Procedures for Nomination of Fellows) becomes 10-7; Current 10-9 (Termination of Membership) becomes 10-10; current 10-11 (Life Membership Status/Dues Exemption) becomes 10-12; and subsequent sections are renumbered.)

50-5. LIST OF CONTINUING COMMITTEES

50-5.1 The list below presents APA continuing committees and their reporting lines.

Reporting through the Membership Board

Fellows Committee

90-8. COMMITTEE ON EARLY CAREER PSYCHOLOGISTS

90-8.1 There shall be a Committee on Early Career Psychologists that shall seek to (1) research, organize and institute initiatives to increase the number of student affiliates who transition to full member status, as well as the number of early career psychologists joining the association for the first time; (2) collaborate in the development and implementation of the recruitment and retention initiatives of the Membership [Committee] Board; (3) support the development of new mechanisms and the enhancement of existing mechanisms to increase participation in APA Divisions and State, Provincial and Territorial Psychological Associations among early career psychologists; (4) promote greater awareness of the benefits of APA membership for early career psychologists and work to expand those benefits; and (5) represent the interests and concerns of early career psychologists throughout APA governance and the central office.

The Committee shall consist of six Members of the Association within seven years of the receipt of the doctorate representing Education, Practice, Public Interest and Science focuses and experience in Division and State/Provincial/Territorial Association Early Career Psychologist programs. Committee members will be appointed by the Board of Directors for staggered terms of three years. The Committee shall report to the Board of Directors.

110-14. RULES GOVERNING SIMULTANEOUS SERVICE ON BOARDS AND COMMITTEES

110-14.1 Members shall not serve simultaneously on any of the following governance groups, except as ex-officio (non-voting) members or if other exceptions are provided below.

Boards

Advancement of Psychology in the Public Interest
Convention Affairs
Educational Affairs
Membership
Policy and Planning
Publications and Communications
Professional Affairs (except that one member is also a member
of the Committee on Professional Practice and Standards)
Scientific Affairs

Committees

Accreditation
Advancement of Professional Practice
Aging
Animal Research and Ethics
Children, Youth and Families
Continuing Professional Education
Disability Issues in Psychology
Division/APA Relations
Ethics
Ethnic Minority Affairs

Fellows

Finance

International Relations in Psychology

Legal Issues (ad hoc)

Lesbian, Gay and Bisexual Concerns

[Membership]

Professional Practice and Standards (except that one member is also a member of the Board of Professional Affairs)

Psychology and AIDS (ad hoc)

Rural Health

Structure and Function of Council

Psychological Tests and Assessment

Psychology Teachers at Community Colleges

Teachers of Psychology in Secondary Schools

Women in Psychology

Other

Commission for the Recognition of Specialties and Proficiencies in Professional Psychology

110-14.2 Members shall not simultaneously run for election (e.g., appear on the board and committee election ballot) for more than one of the following governance groups. In addition, members shall not run for election for one of the following governance groups if the term of service will begin prior to the end of a term the member is currently serving on one of the governance groups listed in Association Rule 110-14.1.

Boards

Advancement of Psychology in the Public Interest

Convention Affairs

Educational Affairs

Membership

Policy and Planning

Publications and Communications

Professional Affairs

Scientific Affairs

Committees

Advancement of Professional Practice

Ethics

Finance

International Relations in Psychology

[Membership]

Rural Health

Structure and Function of Council

Other

Commission for the Recognition of Specialties and Proficiencies in Professional Psychology

210-5. DUES

210-5.1 In preparing the annual budget, the Finance Committee shall recommend necessary changes in dues rates. The Finance Committee's recommendation will be reviewed by the Board of Directors and submitted to Council for approval.

210-5.1 In preparing the annual budget, the Finance Committee shall recommend necessary changes in dues rates. The Finance Committee's recommendation will be reviewed by the Board of Directors and submitted to Council for approval.

210-5.2 The annual dues of Members, including Fellows, and Associate Members shall be determined by Council based on recommendations from the Membership [Committee] Board, Finance Committee and Board of Directors. Dues amounts will be based on the following guideline:

Associate member	Step 1	24% of regular Member dues.
Associate member	Step 2	30% of regular Member dues.
Associate member	Step 3	46% of regular Member dues.
Associate member	Step 4+	72% of regular Member dues.
Member (Postdoctoral)	Step 1	20% of regular Member dues.
Member (Postdoctoral)	Step 2	22% of regular Member dues.
Member	Step 3	26% of regular Member dues.
Member	Step 4	28% of regular Member dues.
Member	Step 5	32% of regular Member dues.
Member	Step 6	55% of regular Member dues.
Member	Step 7	77% of regular Member dues.
Member	Step 8+	100% of regular Member dues.

Dues for Members and Associate members who have reached both 65 years of age and 25 years of membership, and have advised Central Office of their choice to begin the dues-reduction process, shall be based on the following schedule. At any step in the process where dues are less than the current subscription price/servicing fee, the latter shall prevail.

Step 1 (first year) – 90% of regular dues
 Step 2 (second year) – 70% of regular dues
 Step 3 (third year) – 50 % of regular dues
 Step 4 (fourth year) – 30 % of regular dues
 Step 5 (fifth year) – full dues exemption

When full dues exemption is attained, the subscription price/servicing fee option becomes available.

210-9. REDUCED DUES STATUS

210-9.1 Any Fellow, Member or Associate member may request reduced dues status by so indicating on the annual dues statement and submitting a written request to the Central Office.

There shall be an annual APA membership maintenance fee for reduced dues status, set by the Membership [Committee] Board. This fee applies to APA dues and assessments. The fee will ordinarily be lower than full dues, with the amount to be determined by the Membership [Committee] Board. Reduced dues status is limited to a total of five years and must be renewed annually, on the member dues statement. Those members requesting reduced dues status may continue to subscribe to APA journals, purchase APA books, and register for the annual convention at the member prices or rates.

Council voted not to include pro/con statements with the Bylaw amendment ballot.

B.(3) Council voted to approve the following amendments to the Association Rules (bracketed material to be deleted; underlined material to be added):

210-5. DUES

210-5.1 In preparing the annual budget, the Finance Committee shall recommend necessary changes in dues rates. The Finance Committee's recommendation will be reviewed by the Board of Directors and submitted to Council for approval.

210-5.2 The annual dues of Members, including Fellows, and Associate Members shall be determined by Council based on recommendations from the Membership [Committee] Board, Finance Committee and Board of Directors. Dues amounts will be based on the following guideline:

Associate member	Step 1	24% of regular Member dues.
Associate member	Step 2	30% of regular Member dues.
Associate member	Step 3	46% of regular Member dues.
Associate member	Step 4+	72% of regular Member dues.
Member (Postdoctoral)	Step 1	[20%] <u>28%</u> of regular Member dues.
Member (Postdoctoral)	Step 2	[22%] <u>36%</u> of regular Member dues.
Member	Step 3	[26%] <u>44%</u> of regular Member dues.
Member	Step 4	[28%] <u>52%</u> of regular Member dues.
Member	Step 5	[32%] <u>62%</u> of regular Member dues.
Member	Step 6	[55%] <u>75%</u> of regular Member dues.
Member	Step 7	[77%] <u>85%</u> of regular Member dues.
Member	Step 8+	100% of regular Member dues.

C.(4) Council voted to elect 129 members listed to initial Fellow status, on the nomination of the indicated divisions and on the recommendation of the Membership Committee and the Board of Directors.

D.(5) Council voted to approve the withdrawal of Council New Business Item #37C: Substituting of Candidates Slated for Election to Office.

E.(25G) A new business item "Encourage Membership Through Convention" was referred to the Membership Committee, the Board of Convention Affairs (BCA) and the Board of Scientific Affairs (BSA).

F.(26) Council received an update on the business pending item "APA Dues Credit for Members Who Are State, Provincial and Territorial Association Members."

G.(27) Council received an update on the business pending item "Enhancing Member Dues Revenue."

H.(29A) Council received an update on Council New Business Item #28A: Listing of American Board of Assessment Psychology (ABAP) Diplomates in the APA Directory.

I.(37) Council received an update on the new-business-in-progress item "Separate Slates for Board of Directors Candidates Each Year."

III. ETHICS

A. Lt. General Kevin C. Kiley, Surgeon General of the U.S. Army, spoke about the work of psychologists in consulting to interrogation teams at the U.S. Navel Station at Guantanamo Bay, Cuba. Lt. General Kiley emphasized his belief that military psychologists are able to do their jobs and adhere to the APA ethics code. Dr. Steven Reisner, a senior faculty member at Columbia University's International Trauma Studies Program, also spoke, expressing his belief that psychologists should not be present in any capacity at Guantanamo or places like it.

Olivia Moorhead-Slaughter, PhD, Chair of the Ethics Committee, provided Council with an update on the Presidential Task Force on Psychological Ethics and National Security (PENS) Commentary and Process.

B(5A). Council voted to adopt the following American Psychological Association 2006 Resolution Against Torture and Other Cruel, Inhuman, and Degrading Treatment or Punishment to replace its 1986 Human Rights Resolution relating to torture as policy of the APA:

WHEREAS the existence of state-sponsored torture and other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment has been documented in many nations around the world (e.g., Genefke, 2004; Human Rights Watch, 2006; U.S. Department of State, 2005);

WHEREAS torture victims and victims of other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment may suffer from long-term, multiple psychological and physical problems (e.g., Carlsson, Mortensen, & Kastrup, 2005; Gerrity, Keane, & Tuma, 2001; Hermansson, Timpka, & Thyber, 2003; Kanninen, Punamaki, & Qouta, 2003; Somnier, Vesti, Kastrup, & Genefke, 1992);

WHEREAS psychological knowledge and techniques (e.g., including but not limited to deprivation and disorientation techniques) may be used to design and carry out torture and other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment (e.g., Conroy, 2000; Hovens & Drozdek, 2002; Mossallanejad, 2000);

WHEREAS the Ethical Principles of the APA *Ethical Principles of Psychologists and Code of Conduct* (2002) call upon members of the APA to respect the inherent dignity and worth of the individual and strive for the preservation and protection of fundamental human rights recognizing the equal and inalienable rights of all members of the human family;

WHEREAS in 2000 APA received consultative status as a non-governmental organization (NGO) at the United Nations (UN) in recognition of evidence provided by APA of its efforts to promote human rights;

WHEREAS as an accredited NGO at the UN, the APA is committed to the spirit, purposes, and principles of the Charter of the UN and other relevant international instruments;

WHEREAS APA's status as an accredited NGO at the UN carries the commitment to promote and protect human rights in accordance with the Charter of the UN and the Universal Declaration of Human Rights and to contribute its expertise and resources to the implementation of the various human rights declarations, conventions and other standards of the UN;

WHEREAS, consistent with its history in supporting human rights, in its 1987 Human Rights Resolution, APA issued a strong statement that "the discipline of psychology, and the academic and professional activities of psychologists, are relevant for securing and maintaining human rights"; and undertook to promote knowledge of and compliance with UN instruments by resolving to commend the main UN human rights instruments and documents to the attention of its boards, committees and membership at large;

WHEREAS in its 1986 Resolution Against Torture, APA supported the United Nations Declaration and Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment¹;

WHEREAS the American Psychological Association 1986 Human Rights Resolution is specific in its support for the United Nations Principles of Medical Ethics relevant to the Role of Health

Personnel, particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment², which includes Principle 4a,

It is a contravention of medical ethics for health personnel . . . to apply their knowledge and skills in order to assist in the interrogation of prisoners and detainees in a manner that may adversely affect the physical or mental health or condition of such prisoners or detainees and which is not in accordance with the relevant international instruments;

WHEREAS the American Psychological Association 1986 Human Rights Resolution is specific in its support for the joint congressional Resolution opposing torture that was signed into law by President Reagan on October 4, 1984;

WHEREAS in August 2005 APA's Council of Representatives approved the motion to acknowledge Principle 2.2 of the United Nations Convention Against Torture and Other Cruel, Inhuman, and Degrading Treatment or Punishment, which states that

[T]here are no exceptional circumstances whatsoever, whether induced by a state of war or threat of war, internal political instability or any other public emergency, that may be invoked as a justification for torture, including the invocation of laws, regulations, or orders;

BE IT RESOLVED that the APA reaffirms its 1986 condemnation of torture and other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment wherever it occurs;

BE IT RESOLVED that the APA reaffirms its support for the United Nations Declaration and Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment and its adoption of Article 2.2, which states

[T]here are no exceptional circumstances whatsoever, whether induced by a state of war or a threat of war, internal political instability or any other public emergency, that may be invoked as a justification of torture;

BE IT RESOLVED that, in accordance with Article I of the United Nations Declaration and Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment,

[T]he term "torture" means any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted upon a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official [e.g., governmental, religious, political, organizational] capacity. It does not include pain or suffering arising only from, inherent in, or incidental to lawful sanctions [in accordance with both domestic and international law];

BE IT RESOLVED, that the term "cruel, inhuman, or degrading treatment or punishment" means treatment or punishment by a psychologist that, in accordance with the McCain Amendment³, is of a kind that would be "prohibited by the Fifth, Eighth, and Fourteenth Amendments to the Constitution of the United States, as defined in the United States Reservations⁴, Declarations and Understandings to the United Nations Convention Against Torture and Other Forms of Cruel, Inhuman or Degrading Treatment or Punishment done at New York, December 10, 1984."

BE IT RESOLVED that, based upon the American Psychological Association 1986 Human Rights Resolution, the APA reaffirms its support for the United Nations Declaration and Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment, Principles of Medical Ethics relevant to the Role of Health Personnel, particularly Physicians, in the Protection

of Prisoners and Detainees against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment as well as the joint congressional Resolution opposing torture that was signed into law by President Reagan on October 4, 1984, and further supports the McCain Amendment, the United Nations Basic Principles for the Treatment of Prisoners⁵, and the United Nations Principles on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment⁶;

BE IT RESOLVED that based upon the APA's long-standing commitment to basic human rights including its position against torture, psychologists shall work in accordance with international human rights instruments relevant to their roles;

BE IT RESOLVED that regardless of their roles, psychologists shall not knowingly engage in, tolerate, direct, support, advise, or offer training in torture or other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment;

BE IT RESOLVED that psychologists shall not provide knowingly any research, instruments, or knowledge that facilitates the practice of torture or other forms of cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment;

BE IT RESOLVED that psychologists shall not knowingly participate in any procedure in which torture or other forms of cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment is used or threatened⁷;

BE IT RESOLVED that should torture or other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment evolve during a procedure where a psychologist is present, the psychologist shall attempt to intervene to stop such behavior, and failing that exit the procedure;

BE IT RESOLVED that psychologists shall be alert to acts of torture and other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment and have an ethical responsibility to report these acts to the appropriate authorities;

BE IT FURTHER RESOLVED that, consistent with the August 2005 action of Council, the APA will continually disseminate and publicize this 2006 Resolution Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment, both within the Association (to boards, committees, and the membership at large) and to the wider public.

¹ The United Nations Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment (http://www.unhcr.ch/html/menu3/b/h_cat39.htm) is an international human rights instrument intended to prevent torture and other similar activities. According to the Convention, torture is defined as, "any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity. It does not include pain or suffering arising only from, inherent in or incidental to lawful sanctions." The Convention also created the UN Committee Against Torture, which focuses on the duties of national leaders to serve in a preventive role concerning the use of torture and other cruel, inhuman, or degrading treatment or punishment.

² The Principles of Medical Ethics relevant to the Role of Health Personnel, particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment (http://www.unhcr.ch/html/menu3/b/h_comp40.htm) is a UN Human Rights Instrument adopted by the General Assembly resolution 37/194 of 18 December 1982. It contains a code of health

personnel ethics relevant to the protection of persons subjected to any form of detention or imprisonment against torture and other cruel, inhuman, or degrading treatment or punishment.

³ McCain Amendment: Amendment No. 1977 HR 2863, the Defense Appropriations Bill of 2006 introduced by Senator John McCain (http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=2005_record&docid=cr05oc05-19).

⁴ Specifically, United States Reservation I.1 of the Reservations, Declarations and Understandings to the United Nations Convention Against Torture (<http://www.unhcr.ch/html/menu2/6/cat/treaties/convention-reserv.htm>) stating, "the term 'cruel, inhuman or degrading treatment or punishment' means the cruel, unusual and inhumane treatment or punishment prohibited by the Fifth, Eighth, and/or Fourteenth Amendments to the Constitution of the United States."

⁵ Basic Principles for the Treatment of Prisoners (<http://www.ohchr.org/english/law/basicprinciples.htm>) is a UN Human Rights Instrument adopted and proclaimed by General Assembly resolution 45/111 of 14 December 1990. It contains the minimum standards for treatment of prisoners as human beings as set forth in the Universal Declaration of Human Rights, the International Covenant on Economic, Social and Cultural Rights, and the International Covenant on Civil and Political Rights and the Optional Protocol.

⁶ The Principles on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment (<http://www.ohchr.org/english/law/investigation.htm>) is a UN Human Rights Instrument recommended by General Assembly resolution 55/89 of 4 December 2000. The Principles outline recommended procedures related to the documentation of torture and other cruel, inhuman, or degrading treatment or punishment particularly by health care professionals.

⁷ Declaration 4 of The World Medical Association Declaration of Tokyo. Guidelines for Physicians Concerning Torture and other Cruel, Inhuman or Degrading Treatment or Punishment in Relation to Detention and Imprisonment (<http://www.wma.net/e/policy/c18.htm>).

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C.(5B) Council voted to approve the following motion:

That the APA President, on behalf of the Council of Representatives, write a letter to be sent to all Military Psychologists, active duty and reservists, and those working in the National Guard and Veterans Administration, to commend them for their many significant contributions and sacrifices. We appreciate the extraordinary challenges these psychologists face in times of war. We recognize our colleagues for their service and psychological expertise in carrying out their responsibilities and in caring for military personnel and their families. We understand that these men and women help military personnel recover from severe physical and emotional injuries, and help military families cope with family disruptions as well as economic hardships. We further appreciate that they do this often at great personal risk and sacrifice and while enduring similar disruptions in their own lives. For these reasons we direct Dr. Koocher to convey our thanks and support.

D.(25D) A new business item "Psychologist Participation at US Detention Centers" was referred to the Ethics Committee, the Board for the Advancement of Psychology in the Public Interest (BAPPI), the Board of Professional Affairs (BPA), the Committee for the Advancement of Professional Practice (CAPP), the Committee on Division/APA Relations (CODAPAR) and the Committee on Legal Issues (COLI).

E.(29B) Council received an update on the implementation of Council's August 2005 actions regarding the PENS Report.

F.(38) Council received an update on the new-business-in-progress item "Torture and Cruel, Inhuman, or Degrading Treatment or Punishment."

IV. BOARD OF DIRECTORS

A.(6) Council voted to adopt the Zero Tolerance Task Force report entitled "*Are Zero Tolerance Policies Effective in the Schools? An Evidentiary Review and Recommendations*" and file Appendix A of the report.

B.(7) Council voted to approve the following motion:

At least on an annual basis, each Directorate include within their report to Council an account of their activities and actions for each of the current top 10 APA priorities, as identified from the current priority list developed by Council with the assistance of CSFC and relevant divisions.

C.(8) Council voted to adopt the report of the Board of Directors Workforce Analysis Study Panel including the following policy statement:

To achieve its mission in advancing psychology as a science and a profession, and as a means of promoting health, education, and human welfare, the APA is committed to the development and maintenance of an ongoing workforce analysis and research capability to assess relationships among the supply, demand, and need for psychologists in society.

D.(25E) A new business item “Responsibilities of Person(s) Submitting New Business Items” was referred to the Committee on Structure and Function of Council.

E.(30) Council received an update on actions taken related to recommendations of the Board of Directors Work Group on Education and Training Leading to Licensure in Psychology.

V. DIVISIONS AND STATE AND PROVINCIAL ASSOCIATIONS

No items.

VI. ORGANIZATION OF THE APA

No items.

VII. PUBLICATIONS AND COMMUNICATIONS

A.(9) Council voted to approve a \$10 increase in the APA Journal Credit from \$45 to \$55.

VIII. CONVENTION AFFAIRS

No items.

IX. EDUCATIONAL AFFAIRS

A.(10) Council voted to renew the recognition of Psychoanalysis in Psychology as a specialty in professional psychology for an additional probationary period of six months.

B.(11) Council voted to adopt as APA policy the *Guidelines for the Undergraduate Psychology Major*.

C.(12) Council voted to approve the following motions:

1) Council recognizes the spirit of compromise implicit in the Accreditation Summit agreement and specifically commends the group for its recognition of the importance of ensuring inclusion of individual and cultural diversity as noted in the following overarching principle from the Summit report:

The Committee on Accreditation (CoA) is committed, to the fullest extent possible, to support diversity in all aspects of the accreditation enterprise. The CoA offers strong encouragement for, and a continuing expectation that, all organizations and groups will nominate individuals representing cultural and individual differences and diversity. The CoA will continuously monitor the nomination and appointment process to insure its ability to maintain diversity on the Commission and will report annually on the diversity of the CoA and its panels to its various publics. (Accreditation Summit Report, p.3)

The Council also strongly encourages solicitation of nominations for the Public Interest: Individual and Cultural Diversity seat from the Board for the Advancement of Psychology in the Public Interest, the ethnic minority psychological associations, and other relevant organizations.

2) Council approves the following amendments to Association Rules 50-5, 110-14, and 120-3 as follows (bracketed material to be deleted, underlined material to be added):

Association Rule 50-5. LIST OF CONTINUING COMMITTEES

50-5.1 The list below presents APA continuing committees and their reporting lines.

Reporting through the Board of Educational Affairs

Commission on Accreditation
Continuing Education
Education and Training Awards
Committee of Teachers of Psychology in Secondary Schools
Committee of Psychology Teachers at Community Colleges

110-14. RULES GOVERNING SIMULTANEOUS SERVICE ON BOARDS AND COMMITTEES

110-14.1 Members shall not serve simultaneously on any of the following governance groups, except as ex-officio (non-voting) members or if other exceptions are provided below.

Boards

Advancement of Psychology in the Public Interest
Convention Affairs
Educational Affairs
Policy and Planning
Publications and Communications
Professional Affairs (except that one member is also a member of the Committee on Professional Practice and Standards)
Scientific Affairs

Committees

[Accreditation]
Advancement of Professional Practice
Aging
Animal Research and Ethics
Children, Youth and Families
Continuing Education
Disability Issues in Psychology
Division/APA Relations
Early Career Psychologists
Ethics
Ethnic Minority Affairs
Finance
International Relations in Psychology
Legal Issues (ad hoc)
Lesbian, Gay and Bisexual Concerns
Membership
Professional Practice and Standards (except that one member is also a member of the Board of Professional Affairs)
Psychology and AIDS (ad hoc)
Rural Health
Structure and Function of Council
Psychological Tests and Assessment
Psychology Teachers at Community Colleges
Teachers of Psychology in Secondary Schools
Women in Psychology

Other

Commission for the Recognition of Specialties and Proficiencies in Professional Psychology
Commission on Accreditation

Association Rule 120-3. [COMMITTEE] COMMISSION ON ACCREDITATION

120-3.1 There shall be a [Committee] Commission on Accreditation that shall evaluate doctoral, internship, and postdoctoral residency programs in professional psychology in accordance with approved accreditation guidelines and procedures. The [committee] commission shall consist of not less than [twenty-one] thirty-two members, appointed by the Board of Educational Affairs. The structure of the [committee] commission, appointments and terms of its members, its functions, authority, and reporting relationship shall conform to the "Policies for Accreditation Governance" adopted by the Council of Representatives.

3) Council approves the following amendments to the APA *Policies for Accreditation Governance* (bracketed material to be deleted; underlined material to be added):

Policies for Accreditation Governance

Section 1: Name and Reporting Line of the Accrediting Body

The governance body responsible for the accreditation of doctoral and internship training programs in professional psychology shall be called the "[Committee] Commission on Accreditation." In a manner consistent with the Bylaws of the American Psychological Association, it shall be appointed by and report to the Board of Educational Affairs.

Section 2: Functions of the [Committee] Commission on Accreditation

The [Committee] Commission on Accreditation shall be responsible for the accreditation of education and training programs in professional psychology consistent with its recognized scope of accreditation practice, and its published policies, procedures, and criteria.¹ In carrying out that responsibility, consistent with recognition provisions of the Commission on Recognition of [Postsecondary Accreditation (CORPA)] Secretary of the U.S. Department of Education and the Council of Higher Education Accreditation (CHEA), the Commission [Committee] on Accreditation shall:

1. Formulate and promulgate accreditation policy that is informed by input from review panels, the annual Accreditation Assembly, and the field in general.
2. Make final program accreditation decisions, taking into account the recommendations received from review panels.
3. Manage, staff, and participate in the panel review process.
4. Organize and convene the annual Accreditation Assembly.

¹ In practice, the scope of accreditation to date has been limited to doctoral-level education and training in professional psychology, in the areas of clinical, counseling, and school psychology (and appropriate combinations thereof). In principle, however, it is not limited to these areas.

5. Maintain and assure quality of the site visitor function and panel review process.
6. Develop and maintain inter-organizational relationships across the full spectrum of psychology education and training entities.
7. Engage in timely and relevant self-studies and self-evaluations for the purpose of enhancing the quality and credibility of the accreditation review process.
8. Hear and adjudicate complaints from individuals and organizations.
9. Participate as prescribed in the accreditation decision appeal process.
10. Assure openness and periodic review of policies and procedures to ensure that innovation is supported.
11. Provide appropriate consultative guidance and general information about the accreditation process and its purposes through the Office of Accreditation.
12. Conduct evaluative and developmental research appropriate to accreditation.
13. Appoint program review panels, consultants, and task forces as needed, within policy and fiscal constraints.
14. Maintain the CoA's status as a recognized professional specialty accrediting body with the U.S. Department of Education and the Commission on Higher Education Accreditation.
 - [a. be responsible for formulating and promulgating its accreditation policies, procedures and criteria;
 - b. be solely responsible for final accreditation decisions on education and training programs of professional psychology;
 - c. undertake timely and appropriate self-study analysis of its own objectives, criteria, policies, procedures, and practices;
 - d. provide appropriate consultative guidance and general information about the accreditation process and its purposes;
 - e. establish guidelines for the selection, training, and evaluation of accreditation site visitors;
 - f. conduct evaluative and developmental research appropriate to accreditation;
 - g. have authority to appoint consultants, program review panels, and task forces in the discharge of its duties, within authorized policy and budget; and,
 - h. discharge such other responsibilities as necessary to comply with the Commission on Recognition of Postsecondary Accreditation "Recognition Provisions" and policies.]

Section 3: Structure of the [Committee] Commission on Accreditation

Inasmuch as postsecondary accreditation pertains to educational institutions and programs, it is essential that graduate educators have a major voice in formulating policies and implementing the process of accreditation for professional education and training. At the same time, there must be appropriate balance of representation from practitioners of the profession, as well as representation of the general public's interest

by persons outside the professional discipline who have an informed, broad-gauged community perspective about matters of higher education. These are fundamental principles pertaining to the composition of accrediting bodies in the professions, and it is upon these that the structure of the [Committee] Commission on Accreditation is based. One additional principle is that appointments to the [Committee] Commission shall reflect the individual and cultural diversity within our society among psychologists, and the breadth of psychology as a discipline.

There shall be no fewer than 21 32 persons appointed to the [Committee] Commission on Accreditation. To achieve appropriate balance between academic institutions and programs, practitioners of the profession, and the publics served by accreditation, appointments to the [Committee] Commission on Accreditation shall represent in addition the following domains of perspective and responsibility with regard to professional education and training in psychology, each of which is essential to the balance of viewpoints expected in accrediting bodies and their activities:

[Domain I academic leadership for graduate education in the discipline of psychology at the departmental level of administration or higher;

Domain II professional education and training program leadership in academic and service settings appropriate to the scope of accreditation in psychology;

Domain III practitioners of the profession representing independent and institutional practice, apart from those involved in the leadership of training programs;

Domain IV the general public, as represented by persons with breadth of community perspective who are not psychologists, and

Domain V consumers of education and training, to be represented by a graduate student of psychology.]

Domain I – Breadth of the Scientific Discipline of Psychology (N=5)

I.A. Academic leadership for graduate education in the discipline of psychology at the departmental level of administration or higher

- Four seats nominated by the executive board of the Council of Graduate Departments of Psychology (COGDOP)

I.B. Representative of the core scientific activities of the discipline of psychology

- One seat nominated jointly by the Association for Psychological Science and the Board of Scientific Affairs of the American Psychological Association (APS/BSA).

Domain II – Professional Education and Training in Psychology (N=16)

II.A. Training program leadership (N=5)

- One seat nominated by the board of the Association of Psychology Postdoctoral and Internship Centers (APPIC)
- One seat nominated by the board of the Council of Counseling Psychology Training Programs (CCPTP)
- One seat nominated by the board of the Council of Directors of School Psychology Programs (CDSPP)
- One seat nominated by the board of the Council of University Directors of Clinical Psychology (CUDCP)
- One seat nominated by the board of the National Council of Schools and Programs of Professional Psychology (NCSPP)

II.B. Leadership in professional education (N=1)

- One seat nominated jointly by the Board of Educational Affairs of the American Psychological Association and the National Council of Schools and Programs of Professional Psychology (BEA/NCSP)

II.C. Professional peers nominated from program review panels (N=10)

- One seat nominated by the appropriate nominating authority from each group of program review panels for the varied areas and levels of training in professional psychology that are accredited.
 - Doctoral Panels (5)
 - One seat nominated by the Academy of Psychological Clinical Science (APCS)
 - One seat nominated by NCSP
 - One seat nominated by CCPTP
 - One seat nominated by CDSPP
 - One seat nominated by CUDCP
 - Internship Panels (4)
 - Two seats nominated by APPIC
 - Two seats nominated by other organizations involved directly in internship training
 - Post-Doctoral Panel (1)
 - One seat to be determined through an open solicitation for nominations from organizations involved directly in postdoctoral training (e.g., CoS, APPIC)

Domain III - Practitioners of the Profession Representing Independent, Institutional, and Specialized Practice – (N=5)

III.A. Independent and institutional practice (4)

- Two seats representing institutional practice and two seats representing independent practice will be nominated jointly by APA's Board of Professional Affairs and Committee for the Advancement of Professional Practice (BPA/CAPP).

III.B. Specialized practice (1)

- One seat nominated by the Council of Specialties (CoS).

Domain IV - Representatives of the Public Interest (N=3)

IV.A. General Public (N=2)

- Nominations for both seats to be solicited at large by the CoA from a broad range of education and public interest groups with nominees to be persons with breadth of community perspective and leadership experience who are not psychologists.

IV.B. Public Interest: Individual and Cultural Diversity (N=1)

- One seat to be determined from an open solicitation of nominations, including from BAPPI, for a psychologist who brings scholarly expertise on issues of individual and cultural diversity in the context of advancing the science and practice of psychology in public service for appointment to a three-year, non-renewable term.

Domain V – Graduate Student Consumers of Education and Training (N=1)

- One seat nominated by the board of the American Psychological Association of Graduate Students (APAGS) for appointment to a one-year term.

Open Seats (N=2)

Without regard to the Domains identified above, the CoA will solicit nominations from groups, organizations, and individuals to identify psychologist nominees for two open seats. Appointments will be made from the range of nominees for three-year, non-renewable terms to allow for greater flexibility and responsiveness to the development and evolution of the field and to provide opportunities to be informed by the annual Accreditation Assembly. Initially, on a three-year cycle, one nominee for an Open Seat

will be appointed in each of the first two years, followed by an appointment of a nominee from Domain IV.B, Public Interest.

[Section 4: Sources and Numbers of Nominations for Appointment

The national organizations of psychologist educators and practitioners listed below shall be formally allocated “seats” (appointed positions) on the Committee on Accreditation, appropriate and proportional to the domains of perspective and responsibility that they represent for professional education and training in psychology. For each vacant seat to be filled, following guidelines set forth in Section 5 of this document, the Board of Educational Affairs will solicit a nomination slate of three candidates from the organizations named below (or will solicit nominations at large, when specified), from which it will make appointments to the Committee:

Domain I: Graduate Departments of Psychology (4 seats)

- slates for all seats shall be solicited from the Council of Graduate Departments of Psychology (COGDOP)

Domain II: Professional Schools and Training Programs (10 seats)

- slates for 2 seats shall be solicited from the Council of University Directors of Clinical Psychology (CUDCP)
- slates for 2 seats shall be solicited from the Council of Counseling Psychology Training Programs (CCPTP)
- slates for 2 seats shall be solicited from Council of Directors of School Psychology Programs (CDSPP)
- slates for 2 seats shall be solicited from the National Council of Schools of Professional Psychology (NCSPP)
- slates for 2 seats shall be solicited from the Association of Psychology Postdoctoral and Internship Centers (APPIC)

Domain III: Professional Practice (4 seats)

- slates for all seats shall be solicited from the governance (Board of Professional Affairs/Committee for the Advancement of Professional Practice) of the APA Practice Directorate.

Domain IV: The General Public (2 seats)

- nominations for both seats shall be solicited at large by the Board of Educational Affairs from a broad range of education and public interest groups to represent the general public; these seats are to be filled by **persons other than psychologists or psychology students**, persons of broad community experience and perspective outside the discipline of psychology

Domain V: Consumers of Education and Training (1 seat)

- a slate for the seat shall be solicited from the American Psychological Association Graduate Students (APAGS) to reflect graduate students as the consumer public of education and training in professional psychology]

² The student member is an exception to the three-year term as described in Section [5]4.

Section [5] 4: Guidelines for the Nomination and Appointment Process

a. Nominations shall be solicited by the Board of Educational Affairs from the appropriate organizations annually for all vacancies to be filled, as specified in Section [4]3 of this document, in accordance with procedures and timelines for APA governance nominations.

b. Three names shall be submitted for each vacancy, with supporting information pertaining to each candidate. Should a call for nominations result in no response, following due notice the Board of Educational Affairs shall appoint an individual or individuals of its own choosing appropriate to the domain at issue.

c. There shall be a three-year term for each member appointed, with eligibility for a maximum of two consecutive terms of service. Terms shall be staggered within each domain such that all seats in that domain shall not be vacant at the same time. ²

d. The student member shall be a graduate student in good standing admitted to doctoral candidacy from a program accredited by the APA. Appointment of the student member shall be for a one-year and shall be eligible to be reappointed for two additional years.

e. Appointments shall reflect individual and cultural diversity and the breadth of psychology as a discipline. In this regard, the Board of Educational Affairs shall review the balance of appointments across all domains and report annually to Council on the outcome of such review.

[f. Slates submitted by the Council of Graduate Departments of Psychology (Domain I) are expected to represent diversity of university psychology department settings (i.e., types and location of universities, colleges and schools, etc.) and breadth of the scientific discipline of psychology.]

g. The allocated seats for professional training programs (Domain II) shall be reviewed by the Board of Educational Affairs on a three-year cycle, in consultation with the Committee on Accreditation, to ensure appropriate representation among types of programs accredited and the scientific basis of assessment and intervention.

h. Of the slates submitted in the area of professional practice (Domain III), two shall represent independent practice and two shall represent institutional practice, apart from professional education and training, with diversity of practice settings, specialty areas of practice, and types of populations served.]

Section 5[6]: Policy and Procedural Authority

a. The Council of Representatives, having full power and authority over the affairs and funds of the Association, has overall authority for accreditation policy. The Council exercises this authority directly when broad or major policies are concerned. On other matters, Council delegates authority to the Board of Directors for approval and implementation of practices consistent with Association policy.

b. The Board of Directors, serving as the administrative agent of the Council, exercises approval authority for accreditation policy and procedural changes, except as otherwise described herein. The Board of Directors, through the Chief Executive Officer, shall ensure that accreditation policies and practices do not violate other policies of the Association, do not exceed authorized budget, and do not expose the Association to undue legal risk.

c. The Board of Educational Affairs shall be responsible to Council, through the Board of Directors, for maintaining consultation with and general oversight of the [Committee] Commission on Accreditation on matters of accreditation policy and procedure. It shall appoint members to the [Committee] Commission on Accreditation in a manner consistent with the Association Bylaws, as specified in this document, and shall serve as the appointing authority for ad hoc accreditation appeal panels. It shall appoint one of its members annually to serve as a non-voting member on the [Committee] Commission on Accreditation for purposes of policy consultation between the Board of Educational Affairs and the [Committee] Commission on Accreditation.

d. The [Committee] Commission Accreditation shall be responsible for formulating, promulgating, and implementing accreditation policies, procedures, and criteria following appropriate public notice, public hearings, and approval. Such public notice shall include the members of the Council of Representatives, the Board of Directors, and the Board of Educational Affairs, as well as those persons and programs potentially affected by any proposed changes in accreditation policies, procedures, or criteria. The [Committee] Commission on Accreditation shall be solely responsible for making final accreditation decisions on professional education and training programs in psychology. In a manner consistent with policies and recognition provisions of the Council of Higher Education Accreditation [Commission on Recognition of Postsecondary Accreditation (CORPA)], the [Committee] Commission on Accreditation shall have authority for the administration of accreditation practices within the guidelines of its recognized scope of practice and its published policies, procedures, and criteria for accreditation. On an annual basis, the [Committee] Commission shall elect its own chair.

D.(13) Council voted to approve amending the Scope of Accreditation section of the *Guidelines and Principles for Accreditation of Programs in Professional Psychology* as follows (bracketed material to be deleted, underlined material to be added):

I. Scope of Accreditation

The accreditation process is intended to promote consistent quality and excellence in education and training in professional psychology. Training provides tangible benefits for prospective students, the local, national, and international publics that are consumers of psychological services, and the discipline of psychology itself.

For the purposes of this document, "professional psychology" [will be] is defined as that part of the discipline in which an individual, with appropriate education and training, provides psychological services to the general public. [Currently, these services primarily involve health and human development]. The Committee reviews programs for accreditation at doctoral, internship, and postdoctoral levels.

[The Committee on Accreditation (CoA) will include in its scope of accreditation: 1) the doctoral graduate training program which, through didactic and experiential training in the science and practice of psychology, affords the student the opportunity to learn the basic competencies necessary to provide psychological services; 2) the internship which, building on professional skills and competencies acquired during doctoral training, provides significant opportunities to take substantial responsibility for carrying out major professional functions, tasks, duties, and roles under appropriate supervision, and 3) postdoctoral residencies in professional psychology which, building on professional skills and competencies acquired during doctoral training and internship, provide education and training in preparation for the practice of professional psychology at an advanced level of competency in a substantive practice area, as defined below.]

A. Scope of Accreditation for Doctoral Programs:

The Committee on Accreditation (CoA) reviews doctoral programs in psychology that provide broad and general training in scientific psychology and in the foundations of practice. Practice areas include clinical psychology, counseling psychology, school psychology, and other developed practice areas. The CoA also reviews programs that combine two or three of the above practice areas.

B. Scope of Accreditation for Internship Programs:

The CoA reviews applications from internship training programs in practice areas including clinical psychology, counseling psychology, school psychology, and other developed practice areas or in general professional psychology.

C. Scope of Accreditation for Postdoctoral Residency Programs:

The CoA reviews applications from postdoctoral residency programs providing education and training in preparation for professional practice at an advanced level of competency in one of the traditional areas of clinical, counseling or school psychology or in another recognized specialty practice area.

[In applying for accreditation, the program identifies the substantive area(s) of professional psychology in which it will prepare students and the educational model it will employ. The CoA will consider applications from **doctoral graduate** and **internship** programs in (a) the traditional substantive professional areas of clinical, counseling, and school psychology; (b) programs that combine more than one of these areas; (c) programs in emerging substantive areas of professional psychology; and, from **postdoctoral residency** programs providing education and training in preparation for entering professional practice at an advanced level of competency in one of the substantive traditional practice areas of clinical, counseling and school psychology or in a substantive specialty practice area.]

E.(14) Council voted to refer the item "Proposal Regarding Concurrent Accreditation with Canada" to APA governance under the leadership and coordination of the Committee on Accreditation.

F.(39) Council received an update on the new-business-in-progress item "Accreditation of graduate programs in North America."

X. PROFESSIONAL AFFAIRS

A.(15) Council voted to reauthorize the Public Education Campaign funding at \$1 million for an additional three years (2007-2009) and requested that the funding be increased up to \$1.5 million if the budget allows during this time, noting that the next triennial review of the campaign will occur in 2009.

B.(16) Council voted to approve the withdrawal of Council New Business Item #33H: Licensure Portability for Psychologists Consulting in Multiple Jurisdictions.

C.(17) Council voted to approve the withdrawal of Council New Business Item #33F: Consultation and Supervision in Sports Psychology.

D.(17A) Council voted to approve the withdrawal of Council New Business Item #31G: Evidence Based Practice As It Applies to Applied Psychology Practitioners/Non Health Care Services.

E.(25A) A new business item “Disseminating Psychological First Aid” was referred to CAPP, BPA, COLI and P&P.

F.(25B) A new business item “National Psychology Week” was referred to CAPP, BAPPI, the Board of Educational Affairs (BEA), BPA, BSA, CODAPAR and the Membership Committee.

G.(25F) A new business item “Ad Hoc Task Force to Investigate the Merits, Needs, and Outcomes of an Evidence Based Practice Policy for Applied Psychologists and the Benefits of Collaborating with International Associations Interested in Establishing EBP Policy Statements for Applied Psychology” was referred to BPA, BSA and CAPP.

H.(28) Council received an update on the business pending item “Guidelines for Psychological Practice with Girls and Women.”

I.(40) Council received an update on the new-business-in-progress item “Infusing the Association Guidelines in the Public Interest which have been adopted by Council for Psychologists throughout APA.”

J.(41) Council received an update on the new-business-in-progress item “Division 55 Pharmacotherapy Practice Guidelines.”

K.(42) Council received an update on the new-business-in-progress item “APA Policy on Health Care Reform.”

L.(43) Council received an update on the new-business-in-progress item “Reclaiming Recognition of Psychology.”

XI. SCIENTIFIC AFFAIRS

A.(18) Council voted to withdraw the item “National Center for Medical Rehabilitation Research to NIH Institute Status.”

B.(25H) A new business item “The Ambassador’s Program of Division 41: A Novel Approach to the Recruitment of Minority Undergraduate Students to Graduate Study in Psychology and Law” was referred to BSA, BAPPI, BEA, CODAPAR and COLI.

C.(31) Council received information on the progress of the Academic Enhancement Initiative which was approved by Council in August 2000.

D.(44) Council received an update on the new-business-in progress item “Convention Programming of Science Sessions.”

XII. PUBLIC INTEREST

A.(19) Council voted to adopt the Report of the Working Group on Psychotropic Medications for Children and Adolescents.

B.(20) Council voted to adopt the final report and recommendations of the Task Force on Socioeconomic Status (SES).

Council also voted to approve the addition of \$115,000 to the 2007 Preliminary Budget and approve the following amendments to the *Association Rules* to establish a continuing Committee on Socioeconomic Status (underlined material to be added):

150-8 COMMITTEE ON SOCIOECONOMIC STATUS

150-8.1 There shall be a Committee on Socioeconomic Status that shall concern itself with furthering the major purpose of the APA – “to advance psychology as a science and a profession and as a means of promoting health, education and human welfare”—by ensuring that issues of Socioeconomic Status receive the full attention of the Association. The Committee will identify and act as a catalyst in the Association’s efforts to address issues of SES, and promote appropriate attention to Socioeconomic Status in psychological research and practice. In this regard, the Committee shall: (a) collect information and documentation concerning SES; (b) promote scientific understanding of the roles of poverty and Socioeconomic Status in health, education, and human welfare; (c) develop approaches to the application of psychology that take into account the effects of Socioeconomic Status on psychological development and well being; and (d) advocate for social policy that will alleviate or reduce the disparities between SES groups.

The Committee shall consist of six members to be appointed for staggered terms of three years. Three of the six committee members will be representatives from the Education, Science and Practice constituencies of APA. The Committee shall report to Council through the Board for the Advancement in the Public Interest.

50-5. LIST OF CONTINUING COMMITTEES

50-5.1 The list below presents APA continuing committees and their reporting lines.

Reporting directly to Council

Structure and Function of Council

Reporting through the Board of Directors

Constitutional Issues
International Relations in Psychology
Advancement of Professional Practice
American Psychological Association of Graduate Students
Commission for the Recognition of Specialties and Proficiencies in Professional Psychology
Agenda Planning Group
Division/APA Relations
Early Career Psychologists

Reporting through the Publications and Communications Board

Council of Editors

Reporting through the Board of Educational Affairs

Accreditation
Continuing Education
Education and Training Awards
Committee of Teachers of Psychology in Secondary Schools
Committee of Psychology Teachers at Community Colleges

Reporting through the Board of Professional Affairs

Professional Practice and Standards

Reporting through the Board of Scientific Affairs

Animal Research and Ethics
Psychological Tests and Assessment
Scientific Awards

Reporting through the Board for the Advancement of Psychology in the Public Interest

Women in Psychology
Psychology in the Public Interest Award
Lesbian, Gay and Bisexual Concerns
Disability Issues in Psychology
Children, Youth, and Families
Ethnic Minority Affairs
Aging
Socioeconomic Status

Reporting through the Committee for the Advancement of Professional Practice

Committee on Rural Health

110-14. RULES GOVERNING SIMULTANEOUS SERVICE ON BOARDS AND COMMITTEES

110-14.1 Members shall not serve simultaneously on any of the following governance groups, except as ex-officio (non-voting) members or if other exceptions are provided below.

Boards

Advancement of Psychology in the Public Interest
Convention Affairs
Educational Affairs
Policy and Planning
Publications and Communications
Professional Affairs (except that one member is also a member of the Committee on Professional Practice and Standards)
Scientific Affairs

Committees

Accreditation
Advancement of Professional Practice
Aging
Animal Research and Ethics
Children, Youth and Families
Continuing Education
Disability Issues in Psychology
Division/APA Relations
Early Career Psychologists
Ethics
Ethnic Minority Affairs
Finance
International Relations in Psychology
Legal Issues (ad hoc)
Lesbian, Gay and Bisexual Concerns
Membership
Professional Practice and Standards (except that one member is also a member of the Board of Professional Affairs)
Psychology and AIDS (ad hoc)
Rural Health
Socioeconomic Status
Structure and Function of Council
Psychological Tests and Assessment
Psychology Teachers at Community Colleges
Teachers of Psychology in Secondary Schools
Women in Psychology

Other

Commission for the Recognition of Specialties and Proficiencies in Professional Psychology

C.(21) Sandra L. Shullman, PhD, provided a report to Council regarding recent diversity trainings conducted by Council and boards and committees. Council voted to approve the following motion regarding future steps related to diversity training:

That CSFC with formal liaison from BAPPI take responsibility for:

1. Submitting an agenda item to the cross-cutting agenda and convening a conference committee at the Fall 2006 Consolidated Meetings to gather input regarding direction, nature, focus, and process by which boards and committees, as part of governance, should continue to enhance its multicultural/diversity capabilities;
2. Gathering input from Council members and caucuses regarding direction, nature, focus, and process by which Council, as part of governance, should continue to enhance its multicultural/diversity capabilities;
3. Request an update report from boards and committees regarding diversity plans presented following the Spring 2006 Consolidated Meetings to include progress, challenges, needed resources, and learnings;
4. Put data together in 1-3 and make recommendations to the Board of Directors for consideration at the December 2006 meeting;
5. Fine tuning regular data collection and implementation strategies for governance diversity activities including updating and making recommendations to the Board of Directors on issues and progress.

D.(25C) A new business item "Emancipating and Rehabilitating Enslaved Persons and Prevention of Future Slavery" was referred to BAPPI, BSA and COLI.

D.(25I) A new business item "Proposed Task Force on the Psychological Effects of War on Children" was referred to BAPPI, BPA, BSA and the Committee in International Relations in Psychology.

E.(29) Council received an update on the business pending item "Proposed Resolution on Families of Incarcerated Offenders."

F.(32) Council received as information the Report of the APA Task Force on Muticultural Training. The report is being submitted to APA boards and committees for review and comment during the Fall 2006 Consolidated Meetings.

G.(33) Council was informed of the Board's decision to authorize staff to cancel APA's contracts to hold future Consolidated meetings in Virginia and to negotiate the least cost to APA of the cancellations.

H.(45) Council received an update on the new-business-in-progress item "Addendum to Resolution on Anti-Semitic and Anti-Jewish Prejudice."

XIII. ETHNIC MINORITY AFFAIRS

No items.

XIV. INTERNATIONAL AFFAIRS

No items.

XV. CENTRAL OFFICE

No items.

XVI. FINANCIAL AFFAIRS

A.(22) Council voted to approve the 2007 Preliminary Budget in principle calling for a 2006 probable surplus of \$142,500 and a surplus of \$32,300 for the 2007 Preliminary Budget. This 2007 Preliminary Budget shall serve as the framework for the 2007 Final Budget that will be presented to Council for approval in February of 2007.

Consistent with the actions of Council in August 2000 and 2002 to institute the practice of increasing the APA base member dues annually by an amount linked to the consumer price index for all urban consumers (CPI-U), Council specifically voted to approve a \$9 increase in the APA base member dues from \$261 to \$270. On recommendation of the American Psychological Association of Graduate Students, Council voted to approve a \$6 increase in the graduate student affiliate fee (a \$5 increase added to the \$1 increase linked to the CPI-U) from \$44 to \$50.

B.(23) Based on the 2007 Preliminary Budget and the 2007–2009 Financial Forecast, Council voted to adopt the following Net Asset Allocation Plan and Financial Forecast for the period 2007–2009:

1. The goal for attainment of net assets as stated in Association Rule 210-3 is reaffirmed; namely, that the Association strives to maintain net assets equal to at least one year's operating budget.
2. Consistent with accounting practices, conventional wisdom and comparable financial data from other organizations, the Association should not consider any portion of theoretical building equity toward attainment of the net assets goal mentioned in item 1 above.
3. Currently, rather than specifically set aside funds outside the normal budget process for development of programs deemed to be of high priority to the membership, the Association enthusiastically supports consideration of proposals (in the form of a business plan) for new revenue generating ideas. *[Such proposals for new revenue generating ideas should be thoroughly detailed including all direct costs, indirect costs, and staff costs. Such proposals reviewed by the FC, the BOD and approved by the COR, will be funded out of ongoing revenues or out of the Association's net assets, as necessary, assuming that full consideration is also given to the impact of such funding on progress towards the Association's net assets goal mentioned in item 1 above.]*
4. Each year, based on actual results and an analysis of our net assets, future financial forecasts and the net asset allocation plan will be adjusted accordingly.
5. Once the net asset goals are attained, any number of future actions could be taken including the long-term stabilization of dues; the long-term availability of funds for the development of programs deemed to be of high priority to the membership; further apportionment of building and investment proceeds toward operational expenses, etc.
6. The specific Financial Forecast for 2007 – 2009 is as follows:
 - a. Strive to attain a net asset goal equal to at least one year's operating budget consistent with Association Rule 210-3;
 - b. Include \$2.5M net cash flow from building operations in the operating budget as a regular source of revenue;
 - c. Include full funding in the operating budget for the Public Education Campaign, the Academic Enhancement Initiative and PSY21, through the forecast period (2007 – 2009);
 - d. Restrict capital expenditures to no more than \$14M over the forecast period;
 - e. Continue to reinvest net realized gains/losses from our long-term portfolio activity;
 - f. Reinvest all interest/dividends from our long-term portfolio activity;
 - g. Treat Federal income tax expenses as non-operating activity;
 - h. Treat all real estate cash flow in excess of \$2.5M annually from building operations as an increase to net assets and not available for operations or capital equipment, but rather as a reserve for financial investment and/or debt extinguishment; and,

i. Continue to pay down the long-term debt as current scheduled. This plan is consistent with our recent long-term debt analysis and anticipates no sale of our real estate over this forecast period. This plan will provide many options for consideration in 2012, when the long-term debt matures.

C.(24) Council voted to approve the Responsible Spending Policy changes as follows: (bracketed material to be deleted; underlined material to be added):

1.0 Frequency and Location of Board Meetings (Regular, and Retreat, etc.)

Meeting schedule as approved by the Council or Representatives:

- February - Regular Meeting - held at time of Council in Washington, D.C.
- April - Retreat Meeting - location determined by the President*
- June - Regular Meeting - held in Washington, D.C.
- August - Regular Meeting - held at time of Council in convention location
- October - Retreat Meeting - location determined by the President*
- December - Regular Meeting - held in Washington, D.C.

* One retreat meeting shall be held in a location selected by the President and the other shall be held in the Washington, D.C. area.

Board members are also encouraged to attend the various Board and committee consolidated meetings [in the] (fall and [the] spring) as well as the four leadership conferences (SLC, DLC, ScLC, ELC). In addition, Board members have a responsibility to fulfill their roles as liaison to the respective groups. The Board may elect to hold an official meeting of the full Board of Directors during the consolidated meetings, if it is deemed necessary.

2.0 Travel and Other Expenses of the Board and the President

2.1 Honoraria [Compensation]:

In light of the ever-increasing pressures, fiduciary responsibility, accountability, time demands, and in recognition that Board of Directors members play active roles in overseeing the business of the Association, APA authorizes annual honoraria payments to the Board as detailed below:

The Board of Directors shall receive honoraria of [compensation as listed below]:

- [President \$25,000
- President-elect, Past President, Secretary and Treasurer \$10,000 (each)]
- President \$35,000
- President-elect 16,000
- Past President 16,000
- Secretary 16,000
- Treasurer 20,000
- Members-at-Large (7) 12,500

[In addition to the amounts listed above, all Board members shall receive compensation of \$2,500 annually to cover any non-reimbursable retreat expenses that they may incur and any office support needed throughout the year to conduct APA business.]

Honoraria payments also include support for non-reimbursable travel-related expenses and any office support needed throughout the year to conduct APA business.

(Beginning in 2008, all honoraria payments provided in this section (2.1) of the Responsible Spending Policy shall be increased annually based on the Consumer Price Index (CPI-U) to recognize the effect of inflation over time. For administrative ease, these inflationary increases shall be rounded to the nearest hundred.)

2.2 Travel

A specific annual budget must be prepared annually for the President and any other Board members to cover travel as required in the conduct of APA business. Travel limits in this clause exclude travel costs of attending regular Board meetings. The budget request must specify the duration, dates and location of each trip, as well as a specific reason for each trip. The travel by presidential officers shall be limited to no more than \$33,000* and allocated as follows:

- \$18,000 for presidential travel
- \$15,000 for the combined travel of the president-elect and past president

** The limit has been revised to reflect the inflationary increases as approved by Council (2/01).*

The travel budget for all other Board members when added together shall not exceed \$15,000* annually.

* Additional funds, if needed, must be requested from the discretionary [contingency] funds.

The CEO must provide the Board with a process for identifying major travel commitments each year and identifying Board representatives to each. A tentative plan shall be available to Board members for input and should be updated as necessary. Travel by all Board members including presidential officers must follow standard APA travel guidelines.

3.0 Special Board and Presidential Initiatives

3.1 Board/Presidential Initiatives:

If it is in the best interest of the Association and the Board and Council feel that such initiatives should be conducted and funded, a specific budget must be developed and a specified dollar ceiling be set. This shall be administered by the CEO to assure that the effort is completed within the year of presidency and within the budgeted ceiling. Such initiatives must not exceed \$35,000 per year and are to be fully funded by the Special Presidential Discretionary [Contingency] fund, exclusive of staff costs.

All Presidential Initiatives that extend beyond the presidential year (and/or before they are assigned to a specific directorate) must be approved by Council.

Members of the 2007 Board of Directors recused themselves from voting on this item.

D.(34) Council received information regarding the Policy on the Use of Funds for the Designation of Net Assets for Convention approved by the Board at its June 9-11, 2006, meeting.

E.(35) Council received as information the 2005 IRS Tax Form 990.

F.(36) Council received as information the June 2 & 3, 2006, draft minutes of the Finance Committee meeting.

G.(36A) Council received as information the PriceWaterhouseCoopers LLP 2005 Audited Financial Statements.

On Wednesday morning, the following former Council members who recently passed away were remembered with a memorial minute: George Albee, PhD, Allan Barclay, PhD, John Conger, PhD, and Nadine Lambert, PhD.

On Sunday morning, the following national ethnic minority associations observers, spoke to Council, expressing their appreciation for the opportunity to serve as observers to Council: Alvin N. Alvarez, PhD, Asian American Psychological Association; Azara L. Santiago-Rivera, PhD, National Latina/o

Psychological Association; Robert L. Atwell, PhD, Association of Black Psychologists. Justin (Doug) McDonald, PhD, Society of Indian Psychologists, was unable to attend the Council meeting due to a death in the family.

On Sunday morning, David Baker, PhD, provided Council with an update on the Archives of the History of American Psychology.

On Sunday morning, Patrick H. DeLeon, PhD, JD, was presented with the 2006 Raymond D. Fowler Award – Member.

On Sunday morning, Joseph White, PhD, spoke in memory of the life of Robert V. Guthrie, PhD.

On Sunday afternoon, Glenn Ally, PhD, thanked APA for its decision to continue to hold the 2006 APA Convention in New Orleans.

On Sunday afternoon, Jeffrey E. Barnett, PsyD, provided Council with an update on Convention, including the total number of registrants.

On Sunday afternoon, Douglas Haldeman, PhD, thanked the Office of General Council for its efforts in supporting lesbian and gay couples and families through legislation in which APA has been engaged, either as a party or an amicus curiae.

COUNCIL OF REPRESENTATIVES

February 14-16, 2003

DRAFT MINUTES

I. MINUTES OF MEETING

A.(1) Council voted to approve the minutes of the August 21 & 25, 2002, Council of Representatives meeting.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(16) Council voted to approve the inclusion of \$83,800 in the 2003 Final Budget to fund the following special projects for membership recruitment and retention in 2003: 1) production and distribution of recruitment packets in collaboration with American Psychological Association of Graduate Students, the Ad Hoc Committee on Early Career Psychologists and the faculty volunteer network for department faculty and student campus representatives; 2) expansion of early career psychologist member communication.

B.(29) A new business item "Information for Potential APA Presidential Candidates" was referred to the Election Committee.

C.(30) A new business item "Orientation for APA Presidents" was referred to the Election Committee.

D.(33) Council received an update on the business pending item "New Criteria for Dues Exempt Status."

E.(45) Council was informed about the programming of a presidential candidates' forum at the convention, beginning with the 2003 convention in Toronto, and the creation of a presidential candidates' website.

F.(58) Council received an update on the new-business-in-progress item "Eligibility for service on the Board of Directors."

III. ETHICS

A.(46) Council received information regarding the completion of the revision of APA's "Ethical Principles of Psychologists and Code of Conduct."

B.(47) Council received information on stipulated resignations.

IV. BOARD OF DIRECTORS

A.(2) Council voted to approve amending Association Rule 30-4.1 as follows (underlined material to be added):

30-4. NEW BUSINESS AND WITHDRAWAL

30-4.1. General procedures: New business shall ordinarily be referred to the appropriate boards or committees to make recommendations at the next session of Council.

New business shall be reviewed by the lead board or committee in a timely way that allows other referral groups to review it prior to the next Council meeting. New business that has not been brought back to Council for action within 18 months of its submission shall be included in the Council agenda at the third Council meeting subsequent to its submission under a section titled, "Business Pending." Council will be provided the opportunity to discuss the matter and act on the item if it so chooses by voting to suspend Association Rule 30-1.4. Action may include approval, rejection, referral, postponement or withdrawal.

At the discretion of Council, the presiding officer shall have final authority to decide whether a newly introduced resolution involves new business or can be considered in relation to old business.

B.(2A) Council voted to approve the withdrawal of new business item #271, "Timely Action By Council on Pending New Business."

C.(17) Council voted to allocate \$13,500 from its 2003 contingency fund to support one meeting of the APA Task Force on Governance.

D.(34) Council received an update on the business pending item "Pro/Con Statements."

E.(59) Council received an update on the new-business-in-progress item "Enhancing Future of APA."

F.(60) Council received an update on the new-business-in-progress item "Accountability to Vision and Goals."

G.(61) Council received an update on the new-business-in-progress item "More Proactive Involvement with Other Disciplines, Organizations, Media and Political Bodies."

H.(62) Council received an update on the new-business-in-progress item "More Involvement from Council Members."

I.(63) Council received an update on the new-business-in-progress item "Institutionalizing Change."

J.(64) Council received an update on the new-business-in-progress item "Future Information."

V. DIVISIONS AND STATE AND PROVINCIAL ASSOCIATIONS

A.(35) Council received an update on the business pending item "Amend the APA Rule 100-2.1 for Signing Petitions to APA Council in Order to Permit Electronic Endorsements for Petitions for New Divisions."

B.(65) Council received an update on the new-business-in-progress item "Better Use of Division and SPPA Members with Communications Talent and Interest."

VI. ORGANIZATION OF THE APA

A.(18) Council voted to reject the following main motion of new business item #27R:

That an Office of Strategic Planning and Vision be set up in Central Office to collect relevant information, particularly regarding futures information, to help Council lead APA.

B.(36) Council received an update on the business pending item "Better Articulation Between the Council of Representatives and its Board and Committee Structure."

C.(66) Council received an update on the new-business-in-progress item "Hiring of an Outside Management Firm to Inform APA Governance Structure and Function."

VII. PUBLICATIONS AND COMMUNICATIONS

A.(48) Council received an update on Publications and Communications (P&C) Board activities. The P&C Board met twice in 2002, on June 1-2 and October 26-27. The P&C Board made 5 editorial appointments in 2002, naming the following to 6-year terms to begin in 2004 (with 2003 as the incoming year): Journal of Family Psychology (Anne E. Kazak); JEP: Animal (Nicholas Mackintosh); **JPSP: Personality** (Charles Carver); **Psychological Assessment** (Milton E. Strauss); **Psychology and**

Aging (Rose T. Zacks). In addition, the untimely death of Lizette Peterson led the P&C Board to appoint Mark B. Sobell as Acting Editor of the **Journal of Consulting and Clinical Psychology** while a new editor search is completed. Dr. Sobell will serve from November 1, 2002 until December 31, 2003. The P&C Board opened searches for the following four journals: **Journal of Consulting and Clinical Psychology**; **Journal of Counseling Psychology**; **Experimental and Clinical Psychopharmacology**; and **JEP: Perception**. The P&C approved the development of a web-based editor search system to aid the P&C Board search chairs and committees in organizing and conducting searches for new editors. The all-electronic publication, **Prevention and Treatment**, was discontinued. The paper publication of four PsycSCANS (**PsycSCAN: Applied**; **Behavioral Analysis and Therapy**; **Developmental**; and **LD/MR**) was discontinued, but the electronic product will continue. The P&C established ad hoc task forces to examine the procedures and content of **Contemporary Psychology** and **Psychology, Public Policy, and Law** in order to improve their economic basis and the relevance of their content to readers. The P&C Board began active discussions of the issues involved and the procedures necessary for storing and electronically linking authors' supplemental material to the PsycARTICLES journal article entries. The P&C Board approved making the Journal Back Office (JBO) manuscript tracking system developed by APA mandatory for new editors and encouraging current editors to utilize the system. All editors will need to move into the JBO by January 1, 2004 in order to sync up with the all-electronic manuscript production system. A request for gratis access to the PsycARTICLES database by a third world country was discussed and a task force established to look into the matter and what funding might be available to cover the costs of such a project. Sales of the **Publication Manual** in 2002 reached \$7 million. The P&C Board continued to examine the architecture of the APA web site and to consider improvements relative to the navigation bars and other tools for assisting people in finding the information they are looking for in the APA site in an intuitively logical manner with as few clicks as possible. The P&C Board provided oversight and input for the APA trade book imprint, APA LifeTools, as well as efforts to expand the number and kind of APA reference book publications (e./g., an electronic version of the lucrative encyclopedia). Two APA LifeTools books were released in 2002. PsycINFO produced approximately 75,000 records in 2002. PsycINFO had 2000+ licenses leases from 11 distributors. PsycARTICLES had 360+ licenses from 6 distributors. APA Books released 53 new titles in 2002, and Magination Press 6 new titles. Book order volume in 2002 totaled \$11,200,000 and approximately 635,000 total copies. The number of paid serial publication subscribers in 2002 was 331,741 (as compared with 367,971 in 2001). (Serial titles include not only the regular primary journals, but also **Psychological Abstracts** and the PsycSCAN series, the **Monitor**, and the **American Psychologist**.) The number of APA members purchasing annual access to one of the electronic information packages from APA reached 9,216. Advertising sales for 2002 were on the order of \$3,325,000 (as compared with \$3,500,000 in 2001).

VIII. CONVENTION AFFAIRS

A.(3) Council was provided with an update regarding the evaluation of the restructuring of the annual convention from Brian L. Wilcox, PhD, Chair of the Board of Convention Affairs. Council will receive an evaluation of the 2003 Convention at its February 2004 meeting.

IX. EDUCATIONAL AFFAIRS

A.(4) Council voted to approve the recognition of Sport Psychology as a proficiency in professional psychology.

B.(5) Council voted to approve the recognition of the Assessment and Treatment of Serious Mental Illness as a proficiency in professional psychology.

C.(6) Council voted to approve the continued recognition of Industrial and Organizational Psychology as a specialty in professional psychology.

D.(7) Council voted to approve the withdrawal of new business item #22, "Internal Review of CoA Effectiveness."

E.(8) Council voted to approve the withdrawal of new business item #581, "Resolution on the Accreditation of the Newly Emerging Substantive Area of Clinical Child Psychology at the Predoctoral Level."

F.(27) A new business item “Rescinding Certain Actions Taken by Council in August 1999” was referred to the Board of Educational Affairs (BEA), the Board of Professional Affairs (BPA) and the Board of Scientific Affairs (BSA).

G.(37) Council received an update on the business pending item “Future Composition of the Committee on Accreditation.”

H.(38) Council received an update on the business pending item “Greater Autonomy for Committee on Accreditation.”

I.(39) Council received an update on the business pending item “Guidelines for Education and Training at the Doctoral and Post-Doctoral Level in Consulting Psychology – Organizational Psychology.”

J.(40) Council received an update on the business pending item “Impact of School Size on Psychological Well-Being and Educational Achievement of Students.”

K.(67) Council received an update on the new-business-in-progress item “Statement on Specialization in Professional Psychology.”

X. PROFESSIONAL AFFAIRS

A.(9) Council voted to approve amending the Bylaws of the Practice Organization as follows (bracketed material to be deleted, underlined material to be added):

Article IV

Members

The Corporation shall have [no members] a category of members consisting of a single class of members, who are payers of the special assessment, titled "Constituents". Constituents shall not have voting rights.

B.(10) Council voted to approve the following substitute motion to new business item #58G, as originated by the Board of Directors:

APA reaffirms its commitment to the designation of health service psychologists as primary health care providers in relevant federal, state, and local regulations, and in federal funding programs designated for primary care practitioners. APA views this as a long-term goal in pursuit of which a variety of actions have already been undertaken and will continue to be undertaken as strategic openings and opportunities can be made available.

C.(10A) Council voted to approve the withdrawal of new business item #27J, “Increase Resources for Communications Mission.”

D.(32B) A new business item “Guidelines for Psychological Practice with Girls and Women” was referred to BPA, BSA, the Board for the Advancement of Psychology in the Public Interest (BAPPI) and the Committee on Legal Issues (COLI).

E.(41) Council received an update on the business pending item “Increasing the Number of APA Members of a State/Provincial/Territorial Association Required for Affiliate Status.”

F.(42) Council received an update on the business pending item “Coalition Building to Design and to Implement Health Care Reform.”

G.(43) Council received an update on the business pending item “Changes in Association Rules

Regarding the Promulgation of Guidelines.”

H.(49) Council received an update regarding BEA’s review of Domain II of the Committee on Accreditation (CoA).

I.(50) Council received information regarding BEA’s plan to address issues pertaining to CoA in the future.

J.(51) Council received information on the programs and activities initiated by the Teachers of Psychology in Secondary Schools to promote psychology awareness at secondary schools.

K.(68) Council received an update on the new-business-in-progress item “Disclaimer for Guidelines Document.”

L.(69) Council received an update on the new-business-in-progress item “Increase Resources for Communications Mission.”

M.(70) Council received an update on the new-business-in-progress item “Culture of Giving.”

XI. SCIENTIFIC AFFAIRS

A.(11) Council voted to adopt the revised Committee on Animal Research and Ethics’ (CARE) *Guidelines for the Use of Animals in Behavioral Projects in Schools (K-12)*. Council was shown the CARE video: *Importance of Laboratory Animal Research in Psychology: Psychopharmacology*.

B.(71) Council received an update on the new-business-in-progress item “Increase Field in the APA Database to Include Categories of Scientific Expertise.”

C.(72) Council received an update on the new-business-in-progress item “Increase Media Staff in Science Writing.”

D.(73) Council received an update on the new-business-in-progress item “Increase Science Directorate Public Policy Staff.”

E.(74) Council received an update on the new-business-in-progress item “Develop Mechanisms to Identify Critical Issues that Need to be Informed by Research.”

F.(75) Council received an update on the new-business-in-progress item “Division 14 Principles for the Validation and Use of Personnel Selection Procedures.”

XII. PUBLIC INTEREST

A.(12) Council voted to adopt the following resolution:

Resolution on the Maltreatment¹ of Children with Disabilities

WHEREAS children with disabilities are a distinct high-risk group for abuse and neglect, and are on average two to three times more likely to be maltreated than are children without disabilities in their homes and in institutions (Sullivan & Knutson, 2000a);

WHEREAS an estimated 175,000 to 300,000 children with disabilities are maltreated each year (Westat, 1993);

WHEREAS disability includes mental retardation and developmental disabilities, learning

¹ Maltreatment includes physical, sexual, and emotional abuse, and neglect.

disabilities, chronic conditions such as juvenile rheumatoid arthritis, HIV/AIDS, and diabetes, speech and language difficulties, physical and orthopedic disabilities, deafness and hearing impairment, visual impairment, and autism (Sullivan & Knutson, 2000a);

WHEREAS the knowledge base on maltreatment of children with disabilities is limited because of the small number of studies, and even more so with regard to the differential impact of race and ethnicity, gender, sexual orientation, or immigration status (Robin et al., 1997; Sedlak & Broadhurst, 1996; Sullivan & Knutson, 1998; Urquiza & Goodlin Jones, 1994);

WHEREAS disability status was not included in the most recent congressionally mandated National Incidence Study of Child Abuse and Neglect (NIS-3), even after the second National Incidence Study (NIS-2) reported that children with disabilities were at increased risk of both abuse and neglect (Westat, 1993);

WHEREAS states are not required to collect data on disability status under the Child Abuse Prevention and Treatment Act (CAPTA; Department of Health & Human Services, 2001), and only 19 states currently collect it in their Central Registries of child abuse and neglect cases (NCCAN, 2001);

WHEREAS data on disability status in state Central Registries, and in national incidence studies of child abuse and neglect, would facilitate research on maltreatment of children with disabilities (Sullivan & Knutson, 1998);

WHEREAS parents of children with disabilities are more likely to report high levels of stress, depression and anger (Little, in press-a);

WHEREAS children with multiple disabilities are at higher risk of abuse and neglect than children with single disabilities (Benedict, White, Wulff, & Hall, 1990; Sullivan & Knutson, 2000a);

WHEREAS children with schizophrenia, affective disorder, anxiety disorder, conduct disorders, and autism are at particularly high risk, being *seven times* more likely to be abused and neglected than their non-disabled counterparts (Council on Children with Behavioral Disorders, 2000; Sullivan & Knutson, 2000a);

WHEREAS support for parents of children with disabilities has been found to facilitate attachment, and lessen parental stress, anger, and depression (Capuzzi, 1989; Kendall-Tackett with Kantor, 1993);

WHEREAS there is an increased need for accessible, culturally competent, scientifically-proven services that are sensitive to youth and family strengths and needs (Report of the Surgeon General's Conference on Children's Mental Health, 2000);

WHEREAS there is currently little coordination between child protective services and organizations that provide services to children with disabilities (Goldson, 1998);

WHEREAS this lack of coordination results in critical gaps in the provision of services to maltreated children with disabilities (Oregon Institute on Disability and Development, 2000).

WHEREAS all children, including those with disabilities, are entitled to care and out-of-home placement that takes into account their culture, ethnicity and disability status (Council for Children with Behavioral Disorders, 2002; Indian Child Welfare Act);

WHEREAS formal partnerships among federal agencies, professional associations, and families and caregivers would facilitate the transfer of knowledge among research, practice, and policy related to children's mental health (Report of the Surgeon General's Conference on Children's Mental Health, 2000);

THEREFORE BE IT RESOLVED that the American Psychological Association:

Recommends the inclusion of disability status in the Child Abuse Registry of all states, and in all national incidence studies of child abuse and neglect;

Recommends support services for families aimed at addressing anger, stress and depression, especially for those families with children at particularly high risk;

Strongly encourages research to clarify the current state of knowledge, identify risk factors, identify the multiple-service needs of children with disabilities and their families, and to track these children as they move through the foster care system (i.e., from family-to-family and from school-to-school);

Strongly encourages collaboration between professionals in the child maltreatment and disability communities (e.g., lawyers, child advocates, mental health professionals), and dissemination of research on the special needs of maltreated children with disabilities to both of these groups and to education and training programs in psychology;

Strongly encourages the development of culturally relevant prevention and treatment models that provide comprehensive child protection and care for maltreated children with disabilities, and dissemination of these models to education and training programs in psychology.

B.(12A) Council voted to approve the withdrawal of new business item #33D, "Diversity Audit Throughout APA."

C.(19) Council voted to approve the following amendments to the Association Rules (bracketed material to be deleted):

[150-7. COMMITTEE ON URBAN INITIATIVES

150-7.1 There shall be a Committee on Urban Initiatives that shall seek: (1) to contribute to a greater understanding and amelioration of those problems associated with urban life; (2) to promote and sustain those aspects of urban life that enhance individual and societal growth, development and well being; and (3) to encourage research, training and practice related to urban initiatives. The committee will pursue its mission through the identification, integration and distribution of scientific research and professional and community knowledge regarding those domains in which psychologists have demonstrated particular expertise: the family, the schools, the community and the work environment. The committee on Urban Initiatives shall seek to address issues of public policy and affect scientific research and professional practice with the intent of enhancing the quality of life for urban residents.

The Committee on Urban Initiatives shall be elected by and report to Council through the Board for the Advancement of Psychology in the Public Interest and shall consist of six Members of the Association, each serving staggered terms of three years, plus one public member who may or may not be an APA member. The public member shall be appointed by the Board for the Advancement of Psychology in the Public Interest and shall also serve a three year term.]

Section 150-8 will be renumbered as 150-7.

50-5. LIST OF CONTINUING COMMITTEES

50-5.1 The list below presents APA continuing committees and their reporting lines.

Reporting directly to Council

Structure and Function of Council

Reporting through the Board of Directors

Constitutional Issues
International Relations in Psychology
Advancement of Professional Practice
American Psychological Association of Graduate Students
Commission for the Recognition of Specialties and Proficiencies in Professional Psychology
Agenda Planning Group
Division/APA Relations

Reporting through the Publications and Communications Board

Council of Editors

Reporting through the Board of Educational Affairs

Accreditation
Continuing Professional Education
Education and Training Awards
Committee of Teachers of Psychology in Secondary Schools
Committee of Psychology Teachers at Community Colleges

Reporting through the Board of Professional Affairs

Professional Practice and Standards

Reporting through the Board of Scientific Affairs

Animal Research and Ethics
Psychological Tests and Assessment
Scientific Awards

Reporting through the Board for the Advancement of Psychology in the Public Interest

Women in Psychology
Psychology in the Public Interest Award
Lesbian, Gay and Bisexual Concerns
Disability Issues in Psychology
Children, Youth, and Families
Ethnic Minority Affairs
[Urban Initiatives]
Aging

Reporting through the Committee for the Advancement of Professional Practice

Committee on Rural Health

110-14. RULES GOVERNING SIMULTANEOUS SERVICE ON BOARDS AND COMMITTEES

110-14.1 Members shall not serve simultaneously on any of the following governance groups, except as ex-officio (non-voting) members or if other exceptions are provided below.

Boards

Advancement of Psychology in the Public Interest
Convention Affairs
Educational Affairs

Policy and Planning
Publications and Communications
Professional Affairs (except that one member is also a member
of the Committee on Professional Practice and Standards)
Scientific Affairs

Committees

Accreditation
Advancement of Professional Practice
Aging
Animal Research and Ethics
Children, Youth and Families
Continuing Professional Education
Disability Issues in Psychology
Division/APA Relations
Employment and Human Resources
Ethics
Ethnic Minority Affairs
Finance
International Relations in Psychology
Legal Issues (ad hoc)
Lesbian, Gay and Bisexual Concerns
Membership
Professional Practice and Standards (except that one member is
also a member of the Board of Professional Affairs)
Psychology and AIDS (ad hoc)
Public Information
Rural Health
Structure and Function of Council
Psychological Tests and Assessment
Psychology Teachers at Community Colleges
Teachers of Psychology in Secondary Schools
Women in Psychology
[Urban Initiatives]

Other

Commission for the Recognition of Specialties and Proficiencies in Professional Psychology

D.(20) Council voted to approve the establishment of a Task Force on Urban Psychology and the inclusion of \$7,500 in the 2003 Final Budget for one meeting of the Task Force in 2003. The members of the Task Force will be appointed by BAPPI to serve for a 1-year term (ending December 31, 2003). The Task Force will be sunset at the end of 2003.

E.(21) Council voted allocate \$15,000 from its 2003 contingency fund to support two meetings of a proposed Children and Adolescents Task Force of the Ad Hoc Committee on End-of-Life Issues that would be charged with producing a report on practice, research, training, and policy issues for psychologists involved with children and families dealing with the end of life.

F.(22) Council voted to allocate \$31,500 from its 2003 contingency fund for two meetings of the Task Force on Psychology's Agenda on Child and Adolescent Mental Health and for associated staff costs.

G.(23) Council voted to allocate \$15,000 from its 2003 contingency fund to support production expenses of a Book on Women of Color Leader Psychologists.

H.(24) Council voted to reject the following main motion of new business item #35:

WHEREAS The American Psychological Association and its membership are dedicated and committed to the promotion of human welfare and well-being, and the fostering of those conditions that encourage and sustain human worth, dignity, and development, and

WHEREAS Three-quarters of American citizens now reside in urban and metropolitan centers, and this population has been associated with greater incidence of societal problems at a time of fewer available resources, and

WHEREAS An unknown, but assumedly vast percentage of psychologists are currently involved in providing volunteer services, and

WHEREAS The Ethical Principles of Psychologists and Code of Conduct, Principle F: Social Responsibility, specifically states that psychologists "are encouraged to contribute a portion of their professional time for little or no personal advantage",

THEREFORE, BE IT RESOLVED

That the American Psychological Association Council endorse, support, and advance a Task Force to study the implementation of a structure to promote and support an APA Center for Pro Bono Services.

I.(28) A new business item "APA Ban on Department of Defense (DOD) Advertising in Publications" was referred to BAPPI, BEA, BPA and COLI.

J.(31) Council voted to allocate \$5,000 from its 2003 contingency fund for on-line and conference call meetings of a Task Force on the Psychological Effects of Efforts to Prevent Terrorism and the publication and the distribution of a report from this Task Force. The Funds will cover phone calls and the presentation of the Task Force's findings.

K.(32C) A new business item "Discrimination Against Lesbian, Gay, and Bisexual Military Personnel" was referred to BAPPI.

L.(32D) A new business item "Proposed Resolution on Families of Incarcerated Offenders" was referred to BAPPI, BSA and COLI.

M.(32E) A new business item "Diversity in Course Content, Publications and Training Programs" was referred to BAPPI.

N.(44) Council received an update on the business pending item "Rural Children's Mental Health Services."

O. Council received the Equal Employment Opportunity/Affirmative Action Report.

XIII. ETHNIC MINORITY AFFAIRS

A.(25) Council voted to allocate \$20,000 from its 2003 contingency fund to the Office of Ethnic Minority Affairs to support grant writing efforts associated with the proposed conference entitled, *Psychology, Public Policy, and Communities of Color in the United States and Throughout the World: Critical Issues, Knowledge, and Skills*.

B.(52) Council received an update on the Commission on Ethnic Minority Recruitment, Retention and Training Grant Program.

XIII. INTERNATIONAL AFFAIRS

A.(13) Council voted to approve the withdrawal of new business item #27B, "Cultural and Gender Awareness in International Psychology."

B.(32A) A new business item "Resolution on Culture and Gender Awareness in International Psychology" was referred to the Committee on International Relations in Psychology, BAPPI, BSA and COLI.

XIV. CENTRAL OFFICE

A.(53) Council received as information the 2002 Report on Environmental Issues.

XVI. FINANCIAL AFFAIRS

A.(14) Council voted to approve amending the APA Association Rules as follows (bracketed material to be deleted; underlined material to be added):

210-2.10 [Contingency] Discretionary funds. The Board of Directors and Council each shall have a [contingency] discretionary fund of up to \$100,000 to be used at their own discretion. After APA Council and Board have adopted a budget, new unbudgeted expenditures to be made from their respective [contingency] discretionary funds shall be approved as follows:

(a) If emerging from Council action, the proposed allocation from the Council [contingency] discretionary fund shall require approval by a simple majority vote of the Council members voting.

(b) If emerging from Board action, the proposed allocation from the Board [contingency] discretionary fund shall require approval by a two-thirds majority of Board members voting.

(c) If either action involves the support of a task force and/or ad hoc committee, the authorization would be for one year only and assigned to the appropriate office/program. If the mission of the task force or committee is to continue beyond one year, it must be reauthorized and funded on a year-to-year basis.

(d) All allocations other than those described in (c) will be sent to Council for review if authorized for an additional period of time.

210-2.11 Special [Contingency] Discretionary Funds. The President and President-Elect shall have a special [contingency] discretionary fund of up to \$35,000 and \$15,000, respectively. Use of these special [contingency] discretionary funds must be approved in advance by the Board of Directors and be limited exclusively to presidential initiatives. Costs related to each initiative must be incurred with the respective President's and President Elect's term (calendar year).

30-1.4 No matter may be properly placed before the Council for its votes that has not been disseminated to the members of Council, in its final form and with a response from the Board of Directors, at least 30 days prior to the meeting at which the matter is to be deliberated.

"Final form" shall mean that all sections of the agenda item are complete. Agenda item sections that must be complete include (1) a description of the issue, (2) a description of the implementation plan, (3) the fiscal implications of passing the main motion or any amended or substitute motion, (4) the exact wording of the main motion and any amended or substitute motion, and (5) the recommendations of the Board of Directors and any other board or committee that has reviewed the issue. Agenda items that do not meet the definition of "final form" will not be accepted for the Council agenda. The Board of Directors's recommendation is not required in advance of the meeting on any items requesting Council [contingency] discretionary funds at Council's February meeting. The Board

of Directors shall make its recommendation regarding such requests at the Council meeting....

50-3.1 The standing boards and committees and continuing committees may, in exceptional circumstances, appoint, for designated time periods, such ad hoc groups (e.g., task forces, work groups, ad hoc committees, subcommittees) as may be necessary.

If funding is already available for an ad hoc group, the Board of Directors shall be informed at its next meeting of the establishment of the group and provided with a description of the following: purpose; progress to date; membership roster (if available); duration of the group's appointment; funding amount and source of funding. If new funding is needed for the ad hoc group, prior approval must be obtained from the Council of Representative or Board of Directors as appropriate. The request for approval shall include a description of the following: purpose; membership roster (if available); duration of the group's appointment; funding amount required and the source from which funding is requested. Requests for Council [contingency] discretionary funds or for funds to be added to the budget require Council approval....

B.(15) Council voted to approve amending the APA Association Rules as follows (bracketed material to be deleted; underlined material to be added):

201-2. BUDGET

210-2.1 In the financial policy of the APA, a distinction shall be made between general programs, direct service programs, and support functions.

General programs (e.g. scientific affairs, public affairs) shall be supported by the dues of the membership and by any surplus of income over expenses generated from the direct service programs. General programs do not render a direct service but rather are activities that are intended to benefit psychology as a whole.

A direct service program provides to individuals or organizations a product, benefit, or service for a fee. [Each direct service program (e.g. Convention, Continuing Professional Education, and Communications) shall have their specific financial goals set annually by the chief executive officer during the budget process but shall be expected to at least produce an excess over expenses.] The goals for each current direct service program are as follows:

Convention Goal: to produce a 12% profit (over allocations) annually over a 5-year period of time.
Sponsor Approval Goal: to produce a 10% profit (over allocations) annually over a 5-year period of time.

CE Credit Programs Goal: to produce a 5% profit (over allocations) annually over a five-year period of time and that the least profitable activities are considered for elimination if it is deemed necessary to meet the established goal.

Communications Goal: shall be set annually by the Chief Executive Officer during the budget process.

These overall financial goals should be considered with APA's commitment to providing programs and services that meet the changing priorities of the association.

C.(26) Council voted to approve the Proposed 2003 Final Budget calling for a surplus of \$385,300. Furthermore, the Council authorizes the CEO to do what is necessary throughout 2003 to ensure that the net from operations stays within the parameters provided for in the 2003 Final Budget.

D.(54) Council was informed that the 2003-2005 Financial Forecast was not yet available due to the pending completion of the tax-exempt portion of the real estate financing.

E.(55) Council received information regarding the refinancing of APA properties.

F.(56) Council received as information the annual employee compensation package.

G.(57) Council received as information the minutes of the December 2002 meeting and the August, September and November conference calls of the Finance Committee.

H.(76) Council received an update on the new-business-in-progress item "Protection of Mortgage Reserve."

On Friday morning, President Robert J. Sternberg, PhD, and Chief Executive Officer Norman B. Anderson, PhD, presented their reports to Council.

On Friday afternoon, Daniel Kahneman, PhD, winner of the Nobel Prize in Economics, addressed Council after receiving a presidential citation.

On Friday and Saturday afternoons, breakout groups were held on the following topics: Task Force on Governance; APA Election Processes; Convention; Membership Recruitment and Retention; How to Increase Diversity in APA Governance; Ideas to Generate Income Producing Revenue/Cost Saving Measures.

On Saturday afternoon, a training session on Diversity and Cultural Sensitivity Training was led by professional facilitator and trainer Sally Jue.

COUNCIL OF REPRESENTATIVES

February 17-19, 2006

APPROVED MINUTES

I. MINUTES OF MEETING

A.(1) Council voted to approve the minutes of its August 17 & 21, 2005, meeting.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(2) Council voted to approve forwarding to the membership for a vote the following amendment to Section 1, Article XI, of the APA Bylaws (bracketed material to be deleted; underlined material to be added):

Article XI

1. The boards and committees of the Association shall consist of the standing boards and committees provided by these Bylaws and such other boards and committees as may be established in accordance with the Association Rules. Members of standing boards and committees, except those serving as ex officio or as other-wise stated in these Bylaws, shall be elected for staggered terms by Council. [The Board of Directors may nominate a single person for not more than one-third of the positions on any standing board or committee, and the Board shall nominate at least two persons for at least two-thirds of the positions.] Nomination of candidates shall be the responsibility of the Board of Directors, after receiving recommendations from the relevant boards and committees. At least two persons shall be included on a slate for each vacancy on the board and committee election ballot. Selections of members to committees other than standing committees and those reporting directly to the Board of Directors and Council shall be the responsibility of the board through which the committee reports, with the approval of the Board of Directors. The respective standing boards shall have the responsibility for the supervision and coordination of the committees of the Association whose activities fall within their scope. Except as otherwise provided in these Bylaws, each standing board and committee shall annually elect its own Chair. Standing boards and committees shall meet not less often than annually at the call of their Chair. They shall report annually in writing to the Board of Directors and Council.

Council voted not to include a pro/con statement with the Bylaw amendment ballot.

Council also voted to approve amending the Association Rule 110-15 as follows (bracketed material to be deleted; underlined material to be added):

110-15.1 Elections of standing board and committee members are conducted by Central Office; nominating candidates for various offices to be filled by election of Council shall be the responsibility of the Board of Directors. [However, the nominations for members of committees reporting through any other board shall be in the first instance the responsibility of that board.] The chief staff officer shall request suggestions of persons to serve on boards or committees from officers of divisions and state associations, chairs of boards and committees, and the general membership. The list of persons shall be available to the various boards and committees when they are preparing nominations.

110-15.2 Candidates are nominated by the Board of Directors according to APA Bylaws, Article XI, Section 1. [Divisions, state associations, Council members, relevant boards or committees, and the membership may suggest nominees. Nominations are timed to be completed by June.] Only APA members may be nominated, unless otherwise specified in the APA Bylaws. In determining the slates of candidates, the Board shall receive recommendations from relevant boards and committees. If the Board is unable to fill the slate from the list of candidates and alternates provided by the board or committee, the Board shall consult with the chair of the board or committee to obtain additional nominees.

B.(3) Council voted to determine that the April 2005 election results for the District of Columbia Council Representative are invalid and to rule that the results of the special election to elect a Council Representative for the District of Columbia Psychological Association (Steven J. Lally, PhD) be accepted and the elected begin his term immediately.

C.(30) Council received an update on the business pending item "Substituting of Candidates Slated for Election to Office."

D.(46) Council received an update on the new-business-in-progress item "APA Dues Credit for Members who are State, Provincial and Territorial Psychological Association Members."

E.(47) Council received an update on the new-business-in-progress item "APA Dues Credit for Members who are State, Provincial and Territorial Psychological Association Members."

F.(48) Council received an update on the new-business-in-progress item "Enhancing Membership Recruitment, Engagement and Retention."

G.(49) Council received an update on the new-business-in-progress item "Separate Slates for Board of Director Candidates Each Year."

III. ETHICS

A.(3A) Olivia Moorehead-Slaughter, PhD, chair of the APA Ethics Committee and who served as chair of the Presidential Task Force on Psychological Ethics and National Security (PENS) Task Force, provided an update to Council on the implementation of Council's August 2005 actions regarding the PENS Report. The Council additionally received a number of recommendations for further action from the Divisions for Social Justice (a coalition of 10 APA Divisions).

Council will receive further updates at its August 2006 meeting.

At the request of some members of Council, Ronald Levant, EdD, Past President, provided Council with a summary of his experiences and observations during his invited visit to Camp Delta, Guantanamo Bay, Cuba, last October.

B.(37) Council received as information an update regarding Ethic's Committees discussion of Council's request that the Ethics Committee consider a proposed revision to add "in keeping with basic principles of human rights" to Ethical Standard 1.02. of the *Ethical Principles of Psychologists and Code of Conduct* (2002).

C.(29C) A new business item "Torture and Cruel, Inhuman or Degrading Treatment or Punishment" was referred to the Ethics Committee, the Board for the Advancement of Psychology in the Public Interest (BAPPI), the Board of Professional Affairs (BPA) and the Policy and Planning Board (P&P).

IV. BOARD OF DIRECTORS

A.(4) Council voted to adopt the following statement as APA policy after voting to reconsider the motion previously adopted during the meeting. The new motion adopted by Council incorporated the fourth paragraph as shown below:

The American Psychological Association affirms the doctorate as the minimum educational requirement for entry into professional practice as a psychologist.

The American Psychological Association recommends that for admission to licensure applicants demonstrate that they have completed a sequential, organized, supervised professional experience equivalent to two years of full-time training that can be completed prior or subsequent to the granting of the doctoral degree. For applicants prepared for

practice in the health services domain of psychology, one of those two years of supervised professional experience shall be a predoctoral internship.

The American Psychological Association affirms that postdoctoral education and training remains an important part of the continuing professional development and credentialing process for professional psychologists. Postdoctoral education and training is a foundation for practice improvement, advanced competence, and inter-jurisdictional mobility.

In adopting the preceding policy statements, the Council supports further development of competency goals and assessment methods in the professional education and training of psychologists.

In response to Council's first vote on the item, William D. Parham, PhD, Council representative from Division 47, Exercise and Sport Psychology, requested that the following statement be included in the Council minutes: "the vote took place without significant and substantive input of those wishing to add balance to the discussion by offering information, data and insights that would have helped tease out the emotional component of the issue from the immediate and long term consequences of what feels like and sounds like putting the cart before the horse."

Morgan Sammons, PhD, recused himself from the discussion and vote on this item.

B.(5) Council voted to approve following motions (bracketed material to be deleted; underlined material to be added):

That Council receives the revised report of the Task Force on Mental Disability and the Death Penalty.

Council [adopts as APA policy the following recommendations of the task force:] amends APA policy adopted in February 2005 on the recommendation of the Task Force, as follows:

The American Psychological Association urges jurisdictions that impose capital punishment not to execute certain persons with mental disabilities under the following circumstances:

1. *Persistent Mental Disability*: Defendants [shall] should not be [sentenced to death or] executed [if they have a persistent mental disability, with onset before the offense, characterized by] or sentenced to death if, at the time of the offense, they had significant limitations in both their intellectual functioning and adaptive behavior, as expressed in [their] conceptual, social, and practical adaptive skills, [;] resulting from mental retardation, dementia, or a traumatic brain injury.

2. *Mental Disorder or Disability at the Time of the Offense*: Defendants [shall] should not be [sentenced to death or] executed or sentenced to death if, at the time of the offense, they had a severe mental disorder or disability that significantly impaired their capacity (a) to appreciate the nature, consequences, or wrongfulness of their conduct, (b) to exercise rational judgment in relation to [the] conduct; or (c) to conform their conduct to the requirements of the law. A disorder manifested primarily by repeated criminal conduct or attributable solely to the acute effects of voluntary use of alcohol or other drugs does not, standing alone, constitute a mental disorder or disability for purposes of this provision[; and].

3. *Mental Disorder or Disability After Imposition of Death Sentence*: [Sentences of death shall be reduced to lesser punishment if prisoners under such sentence are found at any time subsequent to sentencing to have a mental disorder or disability that significantly impairs their ability (a) to understand and appreciate the nature of the punishment or its purpose, (b) to understand and communicate information relating to the death sentence and any proceeding brought to set it aside, or (c) to make rational choices about such proceedings.]

(a) Grounds for Precluding Execution. A sentence of death should not be carried out if the prisoner has a mental disorder or disability that significantly impairs his or her

capacity (i) to make a rational decision to forgo or terminate post-conviction proceedings available to challenge the validity of the conviction or sentence; (ii) to understand or communicate pertinent information, or otherwise assist counsel, in relation to specific claims bearing on the validity of the conviction or sentence that cannot be fairly resolved without the prisoner's participation; or (iii) to understand the nature and purpose of the punishment, or to appreciate the reason for its imposition in the prisoner's own case. Procedures to be followed in each of these categories of cases are specified in (b) through (d) below.

(b) Procedure in Cases Involving Prisoners Seeking to Forgo or Terminate Post-Conviction Proceedings. If a court finds that a prisoner under sentence of death who wishes to forgo or terminate post-conviction proceedings has a mental disorder or disability that significantly impairs his or her capacity to make a rational decision, the court should permit a next friend acting on the prisoner's behalf to initiate or pursue available remedies to set aside the conviction or death sentence.

(c) Procedure in Cases Involving Prisoners Unable to Assist Counsel in Post-Conviction Proceedings. If a court finds at any time that a prisoner under sentence of death has a mental disorder or disability that significantly impairs his or her capacity to understand or communicate pertinent information, or otherwise to assist counsel, in connection with post-conviction proceedings, and that the prisoner's participation is necessary for a fair resolution of specific claims bearing on the validity of the conviction or death sentence, the court should suspend the proceedings. If the court finds that there is no significant likelihood of restoring the prisoner's capacity to participate in post-conviction proceedings in the foreseeable future, it should reduce the prisoner's sentence to a lesser punishment.

(d) Procedure in Cases Involving Prisoners Unable to Understand the Punishment or its Purpose. If, after challenges to the validity of the conviction and death sentence have been exhausted and execution has been scheduled, a court finds that a prisoner has a mental disorder or disability that significantly impairs his or her capacity to understand the nature and purpose of the punishment, or to appreciate the reason for its imposition in the prisoner's own case, the sentence of death should be reduced to a lesser punishment.

Council notes that adoption of the recommendations above is not intended to supersede or alter existing APA policy on the death penalty (e.g., Resolution on the Death Penalty in the United States. Adopted August 2001).

C.(31) Council received an update on the business pending item "COR/Directorate Communication Regarding COR Priorities for APA."

V. DIVISIONS AND STATE/PROVINCIAL/TERRITORIAL ASSOCIATIONS

A.(6) Council voted approve amending Association Rule 100-2 as follows (bracketed material to be deleted; underlined material to be added):

100-2. PETITIONS FOR NEW DIVISIONS

100-2.1 Members interested in forming a new division shall be invited to attend the Division Leadership Conference (DLC) by means of an announcement published annually in the *APA Monitor on Psychology*. A steering committee of a proposed new division may send representatives to the DLC. The steering committee shall also advise APA Central Office, by means of a letter of intent, of (1) its interest in forming a new division; (2) progress toward the formation of the division; (3) evidence of financial and organizational viability; and (4) evidence and materials supporting the need for a new division.

A petition for the formation of a new division, submitted in accordance with Article VI, Section 3 of the APA Bylaws, shall include in its prefatory statement the following: (a) a statement of the proposed name and purpose of the division; (b) relevant evidence that the petitioners "represent an active and functionally unitary interest of a group of Members"; (c) the names of the Members sponsoring the petition or speaking for the petitioners; and (d) a statement that the individual petitioners ask for and will accept membership in the division if it is established. [The names of the petitioners should be followed by their APA mailing address to assist in the unambiguous identification of the signers.]

[Petitioners' signatures must be written on a form stating that (a) the signatory] An APA member who wishes to support the formation of the proposed division may: 1) enter his/her name and member number in a designated members-only section of the APA Web site created for that purpose or 2) complete a petitioners statement distributed by the steering committee with his/her printed name and written signature and APA mailing address (to assist in the unambiguous identification of the signers). The paper version of this statement will be worded exactly the same as the electronic version. Both of these options will inform the signatory that signing means that (a) the signatory will have a continuing interest in the division, that (b) consistent with Association Rule 100-2.1, the signatory ". . . asks for and will accept membership in the division if it is established," and (c) the signatory will automatically be billed for membership in the division upon its establishment (if dues are required).

B.(7) Council voted to approve the establishment of the Division of Trauma Psychology, Division 56 of the American Psychological Association, as a candidate division.

C.(8) Council voted not to approve the establishment of the Society for Human-Animal Studies as a candidate division of the APA.

VI. ORGANIZATION OF THE APA

A.(9) Council voted to approve amending Association Rule 30-8.4 as follows (bracketed material to be deleted; underlined material to be added):

[Relevant boards, committees, divisions, affiliated SPTPA's, Council members and any other relevant groups shall be provided notice no less than two years before a guideline will expire. Appropriate mechanisms for review, revision and action by Council to extend, amend or nullify guidelines before the expiration date shall accompany this notification.]

The Policy and Planning Board shall provide notice no less than two years before a standard/guidelines document will expire to the responsible reviewing body or entity. The reviewing body or entity responsible for review of the document shall recommend to Council that the document be extended, amended along with proposed revisions, nullified or placed in the APA archives. Should the responsible reviewing body or entity wish to extend or amend the document, the review process shall be done in accordance with AR 30-8 as delineated for proposed new standards or guidelines, along with a new expiration date and the rationale for that date. If the responsible reviewing body or entity does not bring the standard/guidelines document to the Council of Representatives within this 2-year period, the standard/guidelines document will automatically sunset and the Policy and Planning Board shall notify the Council of such action.

C.(10) Council voted to approve archiving the following policies:

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

1956

Council approved the following rule regarding awards:

In any one year an award should be given to not more than one person primarily identified with work in the same specialized topic (such as sensory, socialization, or learning); or with the same specialized material (such as animals, children, or abnormal); or with the same specialized technique (such as projective tests, mathematical models, physiological analysis); or with the same particular application (such as educational, industrial, clinical).

Rationale: Out of date.

1965

Council voted that a biographical statement on each candidate accompany ballots for the president-elect of APA.

Rationale: Out of date. The *Guidelines for the Conduct of President-Elect Nominations and Elections* provides that the candidates' statement accompanying the ballot be confined to discussions of issues facing psychology and should not exceed 1,000 words. Additionally, the *APA Monitor on Psychology* provides coverage of the candidates in a question and answer format.

1975

Council approved a motion that the Council apportionment ballot be revised to show individual state or division votes for coalitions; coalitions would be indicated, but votes for each unit of a coalition would then be known.

Rationale: Out of date.

1977

(1) The nomination process shall begin in December so that standing boards and committees have access to the recommendations for nominees from the Council of Representatives, divisions, state associations, and the *APA Monitor* solicitation when preparing slates of recommendations for the Board of Directors. All recommendations from all sources would also be included in the summary book of recommendations prepared for the Board Subcommittee on Nominations, as is presently done.

(2) Each standing board and committee shall submit a slate of candidates equal to the number to appear on the ballots, plus an equal number of alternates.

(3) All recommended candidates shall be rank ordered and a rationale provided for each one.

(4) Boards or committees that prepare separate slates for each position shall provide the reasons for doing so.

(5) The phrase "call for nominations" shall be replaced by the phrase "call for recommended candidates for election to boards and committees."

Rationale: Out of date.

1991

Council voted to change the word limit for APA President-elect candidate's statements in the *APA Monitor* from 2,500 words to 1,000 words.

Rationale: Out of date. The *Guidelines for the Conduct of President-Elect Nominations and Elections* provides that the candidates' statement accompanying the ballot be confined to discussions of issues facing psychology and should not exceed 1,000 words. Additionally, the *APA Monitor on Psychology* provides coverage of the candidates in a question and answer format.

1992

Council voted to approve a motion providing that in cases of coalitions designated on the Apportionment Ballot, the calculation of votes be based on the percentage total for the coalition cumulatively rather than for each state and division individually within the coalition, and that only after the total percentage for the coalition is calculated will the percentage be rounded. This process was initiated with the tabulation of the Apportionment Ballot for the 1993 legislative year.

Rationale: Out of date.

1993

Council considered a motion proposing that for coalitions on the Apportionment Ballot, results be determined based on the total vote allocations for all members of the coalition rather than on the percent of total votes received by, and rounded for, each individual coalition member. On the recommendation of the Board of Directors and the Committee on Structure and Function of Council voted to approve the following, substitute motion, as amended:

That in cases of coalitions designated on the Apportionment Ballot, the calculation of votes be based on the percentage total for the coalition cumulatively rather than for each state and division individually within the coalition. That only after the total percentage for the coalition is calculated will the percentage be rounded. This process will be initiated with the tabulation of the Apportionment Ballot for the 1993 legislative year.]

Rationale: Out of date.

1996

Council voted to reimburse any of the five presidential candidates, who are not members of the current Council and who are not otherwise reimbursed for travel and expenses, up to \$1,000 in accordance with APA policy to attend the Plenary Session at the February meeting of the Council of Representatives.

Rationale: In February 1999, Council voted to approve the following motion regarding reimbursement for presidential candidates to attend the plenary sessions of Council: That presidential candidates, who are not members of the current Council of Representatives, no longer be reimbursed for attending the plenary sessions of Council.

III. ETHICS

1992

Council voted to adopt the March 11, 1992, draft of the APA ethics code, subject to amendments adopted at the August 1992 meeting of Council. Council authorized the Ethics Revision Comments Subcommittee to make any necessary technical changes, not substantive in nature, to incorporate the amendments passed by Council into the code.

Rationale: Council approved a new version of the Ethics Code in August 2002.

VI. ORGANIZATION OF THE APA

1992

Council reviewed several proposals for reinstating the Council break-out groups and voted to adopt the following substitute motion proposed by the Board of Directors:

"At the discretion of the President, in consultation with the Board of Directors, break-out groups may be scheduled but should not be made routine procedure."

Rationale: New policies for breakouts groups were approved in 2004.

1993

On the recommendation of the Board of Directors and the Committee on Structure and Function of Council, Council voted to have each APA directorate provide a written report twice annually of its major issues and activities for inclusion as discussion items in the Council of Representatives agendas and to have the executive directors of the directorates present at Council meetings to answer any questions Council members may have about the reports.

Rationale: The current practice is for the executive directors of the directorates to submit written reports at the time of each Council meeting. The reports are called "Central Office Reports to Council" and they are posted on the governance website, with a notification to Council regarding their posting.

1997

Council voted to approve the following resolution regarding increasing ethnic minority representation on Council and requested that it be included with the Bylaw ballot and *Monitor* article regarding the proposed Bylaw changes:

Opportunity for Council to Increase Ethnic Minority Representation

WHEREAS Council has acknowledged the under representation of ethnic minority persons among the representatives of Council;

WHEREAS The just passed resolution on allocation of seats on the Council of Representatives creates an opportunity to further diversify the representation on Council; and

WHEREAS The Committee on Ethnic Minority Affairs (CEMA) recommended to the Task Force that some of the new seats in the "Wild Card" plan be used to increase the diversity of Council;

THEREFORE BE IT RESOLVED

It is the sense of Council that the change in allocation of seats on the Council offers divisions and state and provincial associations an unprecedented opportunity to effect change. To that end, Council recommends: (a) that those previously unrepresented state and provincial psychological associations and divisions that receive a seat to be encouraged to fill the seat with an ethnic minority person, and (b) those state and provincial psychological associations and divisions with existing seats be encouraged to fill the additional seat with an ethnic minority representative.

Rationale: Current policy reimburses those divisions and state/provincial/territorial associations for expenses incurred by representatives who are ethnic minorities for their attendance at the February and August Council meetings. This policy was adopted by Council in August 2001 and covered ethnic minority representatives serving through 2004. In July 2004, Council extended the policy to cover ethnic minority representatives serving through 2007.

1. February 1996

The current method of selecting and seating regular Council members will remain unchanged; and

The APA will provide expense reimbursement for all traditionally elected and seated council members as at present, and on the same basis for one liaison/observer from any division or state not directly represented on Council (as a division, state or coalition representative);

The APA President be encouraged to give liaison/observers the same opportunity to speak on the floor of Council as regularly seated members;

This proposal will remain in force for a maximum of two years from August 1995. During this period the Committee on Structure and Function of council will evaluate the effects of the participation of the liaison/observers.

Rationale: Out of date.

VIII. CONVENTION AFFAIRS

1977

Council voted that a child care facility be provided as a regular convention service, with APA's paying the unavoidable costs, but that no hourly fees be charged to students registered at the convention or to other convention registrants with annual family incomes under \$10,000. (Hourly rates for others will be according to a sliding scale based on annual family income.)

Rationale: The discontinuation of a child care facility was approved when Council "voted to approve a package of recommended changes as part of the 1999 Preliminary Budget." during its August 13 and 16, 1998 meeting.

1990

Council voted to approve the following resolution concerning student attendance at the convention:

"That the Board of Convention Affairs develop procedures to reduce expenses for students to attend the APA annual meeting. These procedures should include but not be limited to:

- 1) procurement of low-cost housing (e.g., university dormitories, hotels, Y's etc.)
- 2) procurement of low-cost meals (e.g., package housing and meal arrangements through universities, hotels, Y's, etc.)
- 3) procurement of low-cost transportation packages including bus, train, and air specifically for students."

Rationale: Since its establishment as a continuing committee, which focuses specifically on student affairs, APAGS has taken on the responsibility of providing cost-saving information to students interested in attending the APA convention.

IX. EDUCATIONAL AFFAIRS

1954

It is the responsibility of any university offering a doctoral program designed to prepare students to assume professional psychological duties to arrange that each doctoral candidate in clinical or counseling will receive adequate supervised practical experience as an integral part of that program. At the present time the E&T Board adopts the following accreditation standards as desirable for the implementation of this principle.

- (a) A supervised predoctoral internship of not less than one academic year preceded by one or more clerkships.
- (b) A continuing contact between the university and the interning agency during the doctoral candidate's intern period.

Rationale: This policy has been superseded by the *Guidelines and Principles for Accreditation of Programs in Professional Psychology*, which was adopted by Council in August 1995, amended February 1999.

1954

In every case in which a graduate assistantship, scholarship, or fellowship for the next academic year is offered to an actual or prospective graduate student, the student, if he indicates his acceptance before April 15, will still have complete freedom through April 15 to reconsider his acceptance and to accept another fellowship, scholarship, or graduate assistantship. He has committed himself, however, not to resign an appointment after this date unless he is formally released from it.

Rationale: The language of the policy is outdated and policy is superseded by policies instituted by COGDOP and the Council of Graduate Schools, which are published in APA's publication, *Graduate Study in Psychology*.

1961

Although the full year internship in a clinical facility is still considered to be the preferred pattern in most doctoral programs in clinical psychology, a number of universities are experimenting with patterns of part-time practicum experience in a variety of settings, spread over two or more years. The Education and Training Board recommends that fund granting agencies supporting graduate programs adapt their award stipends to facilitate such experimentation in practicum training.

Rationale: Language was determined to be out-of-date.

1978

The procedures and criteria of the Committee on Accreditation of the American Psychological Association require nondiscrimination with respect to religious orientation in faculty hiring and admission of students as a condition of program approval. In the application of this general principle, exceptions with respect to religion may be made in the case of institutions controlled by religious groups, provided that any preferences in student admissions or faculty hiring on religious grounds are explicit and publicly stated.

When an institution meets the requirements for such an exception, the accrediting body should formally record its opinion on whether and in what specific ways training provided by the institution is deficient because of its religious proscriptions and shall refuse accreditation if these deficiencies are judged to be substantial and severe.

Rationale: Amended in 1980

1979

It is the sense of APA Council that APA accreditation reflect our concern that all psychology departments and schools should assure that their students receive preparation to function in a multi-cultural, multi-racial society. This implies having systematic exposure to and contact with a diversity of students, teachers, and patients or clients, such as, for example, by special arrangement for interchange or contact with other institutions on a regular and organized basis.

Rationale: This policy has been superseded by the *Guidelines and Principles for Accreditation of Programs in Professional Psychology*, which was adopted by Council in August 1995, amended February 1999.

1979

It is the intent of the resolution that students in part time programs will be required to meet education and training requirements consistent with APA accreditation criteria and Standards for Providers of Psychological Services.

Rationale: This policy has been superseded by the *Guidelines and Principles for Accreditation of Programs in Professional Psychology*, which was adopted by Council in August 1995, amended February 1999.

1980

The procedures and criteria of the Committee on Accreditation of the American Psychological Association require nondiscrimination with respect to religious orientation in faculty hiring and admission of students as a condition of program approval. In the application of this general principle, however, exceptions with respect to religion may be made in the case of institutions controlled by religious groups, providing that any preferences in student admissions or faculty hiring on religious grounds are explicit and publicly stated.

When an institution applies for an exception, said institution shall document the procedures by which it ensures that the practice of discrimination in the selection of faculty and students and/or the required allegiance to a creedal oath does not adversely affect currently accepted principles of academic freedom, faculty and student rights, and quality of training, teaching, and research. Such documentation shall incorporate procedures for due process and should demonstrate sensitivity to individual rights.

Rationale: This policy has been superseded by the *Guidelines and Principles for Accreditation of Programs in Professional Psychology*, which was adopted by Council in August 1995, amended February 1999.

1984

Council urges APA members who owe debts on educational loans to recognize their moral obligation to repay these loans in a timely fashion.

Rationale: A valid policy, but nonetheless not needed in the *Council Policy Manual*.

1985

In compliance with the *Provisions of Recognition and Guidelines on Interagency Cooperation on Accreditation* set forth by the Council on Postsecondary Accreditation (COPA), the American Psychological Association hereby authorizes its Committee on Accreditation to cooperate as feasible with other COPA-recognized accrediting agencies in the conduct of on-site evaluations, when invited to do so by the host institution and when participating accrediting agencies have substantive interests in common.

Rationale: This policy has been superseded by Policies for Accreditation Governance, which was adopted by Council in August 1991, amended February 1996.

1988

Council voted to reaffirm the APA policy concerning halftime internships listed in the APA Criteria for Accreditation. Council also voted to approve the following resolution:

Many graduate school students and professional school students who are new parents or who must work part-time require greater flexibility from internship centers.

APA encourages internship centers to adapt their programs to the changing needs of selected students and not to discriminate against them; APA encourages internship centers to give consideration to these special cases.

Rationale: This policy has been superseded by the *Guidelines and Principles for Accreditation of Programs in Professional Psychology*, which was adopted by Council in August 1995, amended February 1999.

1989

Council voted to adopt the "Memorandum of Understanding Between APA and the Canadian Psychological Association for Concurrent Accreditation of Doctoral Training Programs and Predoctoral Internship Training Programs in Professional Psychology" as a policy document for APA. **[Appendix K - II.5]**

Rationale: This policy has been superseded by the APA/CPA *Memorandum of Understanding*, which was adopted by Council in August 2002.

1990

Council voted to approve the revised APA "Accreditation Procedures". This action brings the APA Accreditation Procedures into compliance with the policies and procedures of the Council on Postsecondary Accreditation.

Rationale: This policy has been superseded by the Accreditation Operating Procedures, which was adopted by Council in August 1995, amended February 1999.

1990

Resolved, that the criteria and procedures for APA approval of sponsors of continuing education for psychologists be revised to permit credit for programs of one hour or more in duration. This change shall be effective upon passage.

Rationale: This policy has been superseded by the *Criteria and Procedures Manual of the APA Sponsor Approval System* (November 1996).

1993

Council approved the following criteria which pertain to continuing education offerings through or by an APA-approved sponsor's branches or subsidiaries and wishes to offer APA-approved CE credit through the branch or subsidiary, complete oversight and administration of the program must come through the parent, or approved, organization. The approved sponsor must be involved fully in the planning and implementation of CE programs and must assume full responsibility for these programs.

If the above conditions do not apply, the branch or subsidiary must submit a separate application to APA for approval as a continuing education sponsor or must establish a co-sponsor relationship with parent, or approved organization.

Rationale: This policy has been superseded by the *Criteria and Procedures Manual of the APA Sponsor Approval System* (November 1996).

1994

On the recommendation of the Board of Directors and the Board of Educational Affairs, Council approved a motion proposing that the Board of Directors and Council direct increased efforts and resources toward ongoing APA CE efforts to develop longer-term training modules and to be responsive to the education and training needs of practicing psychologists.

Rationale: This was determined to be an administrative directive rather than a policy.

1994

In accordance with existing Committee of Accreditation policy that all interns should receive appropriate stipends and that all internships can be full or half-time, Council reaffirms the existing APA policy on half-time internships by acknowledging, supporting and facilitating compliance with and implementation of this policy.

In addition, in the geographic areas where there is a shortage of half-time internships, Council encourages the development of half-time opportunities to meet such needs.

Rationale: This policy has been superseded by the *Guidelines and Principles for Accreditation of Programs in Professional Psychology*, which was adopted by Council in August 1995, amended February 1999.

1998

Council voted to formally confirm 1) the continued recognition of Clinical Psychology as a specialty in professional psychology and 2) the recognition of Clinical Child Psychology as a specialty in professional psychology. **[Appendix K - XVI.7]**

Rationale: These specialties were reconfirmed in August 2005.

X. PROFESSIONAL AFFAIRS

1980

Compared to its predecessors, and as a generic document, DSM-III represents progress in diagnostic procedure.

However, despite substantive advances in the 'state of the art' of psychopathologic diagnosis, troublesome issues remain. Specifically, some of these issues relate to (1) conceptual obscurity and/or confusion, (2) a questionable broadening of the range and scope of categories classified as mental disorder, (3) use of a 'categorical' rather than 'dimensional' model, and (4) poor applicability to disorders in children. The whole area of diagnostic nomenclature is deserving of further study and research.

The inclusion of several new areas recognizing social and environmental influences on behavior and of a broader empirical data base with consequential increased objectivity and reliability make DSM-III more valuable than the DSM-I and DSM-II for treatment, training, and research.

Rationale: DSM III is the predecessor version of the current DSM IV. It has been superseded and the policy should be archived.

1985

The welfare of the public is best served when the diagnostic processes are used by mental health specialists trained and qualified in mental health diagnosis and/or diagnostic processes concerning mental states. Additionally, the development of consensus within APA is most likely to occur when, prior to APA's adoption of broad and complex policy positions, formal consultation with appropriate governance units occurs. Finally, be it resolved that APA adopt the policy that useful diagnostic nomenclature must be (a) supported by empirical data, (b) based on broadly representative data, and (c) carefully analyzed.

Rationale: DSM III is the predecessor version of the current DSM IV. It has been superseded and the policy should be archived.

1986

WHEREAS: The American Psychiatric Association is proposing a revision of the DSM-III with no collaboration and little input from APA and other mental health organizations; and

WHEREAS: The American Psychiatric Association previously utilized the benefits of research supported, in part, by taxpayers funds, some of which was research conducted by psychologists and other behavioral scientists and thus becomes information within the public domain; and

WHEREAS: The American Psychiatric Association has developed three new, controversial diagnoses for a special appendix (Premenstrual Dysphoric Disorder now called Periluteal Phase Disorder, Masochistic Personality Disorder now called Self-Defeating Personality Disorder, and Sadistic Personality Disorder) without presenting any adequate scientific basis and which are potentially dangerous to women;

BE IT THEREFORE RESOLVED: The American Psychological Association is opposed to the inclusion of these diagnoses, even within an appendix section, and urges its members not to use such diagnoses, and

The Executive Officer of the APA is to inform the American Psychiatric Association of this action and broadly disseminate it to all appropriate governmental agencies, other mental health and relevant health organizations, and the general public.

Rationale: DSM III is the predecessor version of the current DSM IV. It has been superseded and the policy should be archived.

1995

On the recommendation of the Board of Directors and the Board of Professional Affairs, Council voted to approve the "Criteria for Guideline Development and Review," with the exception of the highlighted text shown in draft 2.3cl of the document. [**Appendix L - X.1**]

Rationale: Replaced by Criteria for Practice Guideline Development and Evaluation (08/01).

1996

Council voted to approve the following substitute motion regarding the Bill of Rights for Patients Undergoing Mental Health Treatment:

Council strongly and in principle endorses and encourages continuing consultation between the leadership of APA and leaders of other professional mental health associations in the formulation of a bill of rights for patients or clients receiving mental health treatment. The Board of Directors will have oversight authority of the bill of rights. [The Principles for the Provision of Mental Health Services and Substance Abuse Treatment Services were subsequently agreed upon.] [**Appendix L - V.2**]

Rationale: This task has been completed and therefore the policy may be archived.

XI. SCIENTIFIC AFFAIRS

1966 (Amended 1967)

Council voted to adopt the following statement on "Automated Test Scoring and Interpretation Practices" as a standard for members of the APA and for organizations by whom members are employed:

The advent of sophisticated computer technology and recent psychological research has made it feasible and desirable for consulting and service organizations to offer computer-based scoring and interpretation services for diverse psychological measurement instruments. Since these services will be rendered to clients with varying degrees of training in psychological measurement and since improper use of such interpretations could be detrimental to the well-being of individuals, it is considered proper for the American Psychological Association to establish various conditions which must be met before such services should be offered to clients.

Any organization offering the services described above should, in order to protect the public welfare, have on its staff or as an active consultant (a) in a state having legal certification or licensure, a psychologist qualified to practice under the laws of that state, (b) in a state having nonstatutory certification, a psychologist holding the highest ranked certificate in that state, or (c) in jurisdictions having neither of the above a Diplomate of the American Board of Examiners in Professional Psychology.

Such services will be offered only to individuals or organizations for use under the active supervision of qualified professional personnel with appropriate training. The qualified person must be either a staff member or a responsible, active consultant to the individual or organization receiving such services.

Organizations offering scoring services must maintain an active quality control program to assure the accuracy and correctness of all reported scores.

Organizations offering interpretation services must be able to demonstrate that the computer programs, or algorithms on which the interpretations rest, are based on appropriate research to establish the validity of the programs and procedures used in arriving at interpretations.

The public offering of an automated test interpretation service will be considered as a professional-to-professional consultation. In this the formal responsibility of the consultant is to the consultee but his ultimate and overriding responsibility is to the client.

The organization offering services is responsible that their reports adequately interpret the test materials. They should not misinterpret nor overinterpret the data nor omit important interpretations that the consultee would reasonably expect to be included.

The organization offering services is responsible that their report be interpretable by the consultee. The technical level of the report should be understandable and not misleading to the consultee. The professional consultee is responsible for integrating the report into his client relationship. Where technical interpretations could be misleading, the organization offering service would be responsible either not to accept the referral, to modify the form of their report, or to avoid otherwise its misinterpretation.

Rationale: Out of date.

1979

Council voted to accept the Final Report of the Committee on Psychological Tests and Assessment to the Council on the Use of Tests with Members of Minority Groups and the Disadvantaged. **[Appendix M - XI.2]**

Rationale: The report has been superceded by pertinent sections of Standards for Educational and Psychological Testing (1999) American Educational Research Association, American Psychological Association, National Council on Measurement in Education (1999).

1981

On the recommendation of the Board of Scientific Affairs, the Education and Training Board, and the Board of Directors, Council voted to adopt the revised "Guidelines for the Use of Animals in School Science Behavior Projects". **[Appendix M - I.1]**

Rationale: Out of date.

1990

On the recommendation of the Board of Directors, Board of Scientific Affairs and the Committee on Animal Research and Ethics, Council voted to endorse the American Association for the Advancement of Science Resolution on the Use of Animals in Research, Testing, and Education. **[Appendix M - I.3]**

Rationale: Out of date.

1993

On the recommendation of the Board of Directors, the Board of Scientific Affairs, and the Committee on Animal Research and Ethics, Council approved the revised *Guidelines for Ethical Conduct in the Care and Use of Animals*, as amended to reflect Council's concern for cold-blooded as well as warm-blooded laboratory animals. **[Appendix M - I.4]**

Rationale: Out of date.

1998

Council voted to adopt the Committee on Animal Research and Ethics' (CARE's) *Guidelines for the Use of Animals in Behavioral Projects in Schools*. [**Appendix M - I.5**]

Rationale: Out of date.

XII. PUBLIC INTEREST

1956

Psychology as a science is dedicated to the discovery of truth. Psychology as a profession is dedicated to the application of that scientific knowledge in the interests of human welfare. The American Psychological Association will, therefore, take an active position on any public policy or issue which jeopardizes these fundamental scientific and professional goals.

In areas other than the above, it is not the function of the American Psychological Association to attempt to influence the formulation of public policy. However, it may be appropriate for the Association to take a position with respect to such policy when it is being formally determined or implemented, where the criterion for action is the special competence of psychology as a science and a profession.

Rationale: Out of date. This policy does not reflect the language of APA's current mission statement. APA's mission statement is provided in Article 1 of the APA Bylaws

1965

Council voted the following resolution:

The Council of Representatives of the American Psychological Association is gratified by the passage of Pub. L. No. 89-97 calling for one or more studies of the mental health of children. It believes that many grave national problems, such as crime and delinquency, mental disorders, and social incompetence among adults, may be most effectively dealt with by early identification and intervention in years of childhood and adolescence. It sees the problem as involving a wide range of social agencies--educational, medical, correctional, and welfare--as well as a number of lay groups concerned with human development. It applauds the initiative of the American Psychiatric Association in establishing the Joint Commission on Mental Health of Children. It approves the participation of the American Psychological Association on the Commission on the basis of equal representation on its governing body of the range of organizations that have been actively concerned with the mental health of children (Newman, 1965).

Rationale: Out of date and replaced by the APA Resolution on Children's Mental Health.

1972

Council voted the following resolution:

BE IT RESOLVED that the American Psychological Association call upon President Nixon to reaffirm the national commitment to early child development, as stated by him in April 1969, and to implement the resolution of the White House Conference on Children calling for the permanent establishment of the Office of Child Development; and,

BE IT FURTHER RESOLVED that the American Psychological Association call upon the President and members of Congress to support programs of comprehensive child development.

Rationale: Out of date.

1974

Recognizing that the psychological and moral burdens imposed on U.S. citizens by the war in Indochina - confronting them with profound divisions within their society, with anguish about the

morality of actions taken in their names, with distrust of their national leadership, and with doubts about the justification for the sacrifices imposed upon them - weighed most heavily on the young men who were called upon to participate personally in the fighting in Indochina;

That the usual difficulty experienced by the veteran in the process of transition from military to civilian life, due to psychological traumata and other reasons, "had been markedly greater for the Vietnam veteran because of the controversial nature of the Vietnamese conflict and the rapid social-economic changes that occurred during his absence";

That "studies conducted by the military and the Veterans Administration indicate that serious and prolonged readjustment problems exist in approximately one out of five new veterans, but to a lesser degree, were experienced by all";

That Vietnam veterans as a group and their families have been receiving insufficient moral, psychological, and emotional support to enable them to come to terms with their experiences, to find employment, and to prepare themselves for the future;

And that many thousands of men who, for reasons of conscience, resisted the draft, or disobeyed military orders, or deserted, are now facing psychological problems associated with separation from their families, exclusion from their societies, and stigmatization as lawbreakers,

1. The Council of Representatives of the American Psychological Association endorses legislative and executive action leading to:

- a. Increased benefits for Vietnam veterans and improvements in the administration of such benefits, in order to assure that the educational, occupational, medical, and psychological needs of these men are adequately met, with real-dollar benefits at levels at least as high as those extended to World War II veterans;
- b. A broadened definition of Service-related disabilities, which would give veterans the opportunity, on a wholly voluntary basis, to obtain treatment for psychological problems that do not require hospitalization or that manifest themselves only some time after their return home, and to obtain treatment for members of their families who play a significant role in their readjustment;
- c. Freedom of choice for Vietnam veterans in contracting for psychological treatment, allowing them - whether they are still in service or out of service - the option of receiving payment for such treatment by civilian practitioners of their own choosing, if they feel that their needs cannot be adequately met by mental health personnel working within the military or the Veterans Administration; and
- d. Active participation of Vietnam era veterans in developing and running the programs designed to serve their needs.

2. Council urges APA divisions and state and local psychological associations to establish registers of appropriately qualified psychologists whose skills in therapy, counseling, group leadership, or other psychological services might be useful in the rehabilitation of Vietnam veterans and war resisters, and who are prepared to devote some portion of their time to work with these men and their families, free of charge or at reduced rates. Such registers should be forwarded to Central Office so that they might be maintained centrally. Psychologists should be urged to participate in these programs, indicating both their skills and their time limitations, with the understanding that the existence of the registers will be publicized among prospective clients and that inquiries by such clients would periodically be referred to them.

3. Council requests that the Board of Social and Ethical Responsibility for Psychology generate recommendations for just and humane policies designed to ease the psychological problems faced by war resisters and to help them reestablish themselves within the society.

4. Council urges relevant divisions, boards, and committees within APA to develop mechanisms and provide occasions for discussing and analyzing the psychological and moral implications of the Vietnam War and its effects on the American population and particularly on the generation most directly confronted with it.

5. Council requests that the APA Central Office and relevant boards and committees take active steps to promote and support legislative and executive actions, as well as activities within the profession, designed to implement the above proposals. (1974)

*Quotations taken from a memorandum from the Department of Medicine and Surgery of the Veterans Administration, reproduced in part in the Congressional Record of October 12, 1973.

Rationale: Out of date.

1978

Council voted strongly to endorse the United Nations International Year of the Child and actively to encourage the establishment of a National Commission for the International Year of the Child; further, the Council instructs APA's Representatives to the International Union of Psychological Science (IUPS) to request that the 1978 Assembly of the IUPS to endorse and encourage its member societies to support to the fullest extent possible the objectives and activities with the International Year of the Child (Conger, 1978).

Rationale: Out of date.

1984

Council adopted the following resolution:

The recent International Conference on Psychological Abuse of Children and Youth has presented information that the incidence and prevalence of such acts are so high that concerned individuals need to organize to coordinate necessary efforts in definition, prevention, treatment, and research. The American Psychological Association recognizes the importance of this issue, and to this end invites relevant boards, committees, and divisions/states to explore the major issues of definition, prevention, treatment, and research, and to prepare brief position papers with supporting data, to be forwarded to the Board of Social and Ethical Responsibility for Psychology for consolidation and submission to the Council's January 1985 session.

Rationale: Out of date.

1994

WHEREAS the American Psychological Association recognizes that the family constitutes a basic unit of society; and

WHEREAS the United Nations General Assembly has proclaimed 1994 as the International Year of the Family (IYF) with its theme: "Family--Resources and Responsibilities in a Changing World"; and

WHEREAS the activities for the observation of IYF will be concentrated at the local, national, regional, and international levels with primary focus at the local and national levels; and

WHEREAS the IYF encompasses and addresses the needs of all families recognizing the diversity of families; and

WHEREAS activities for IYF seek to promote human rights and fundamental freedoms for all individuals as set forth by United Nations instruments, whatever the status of each individual and the conditions within a given family; and

WHEREAS IYF policies aim at promoting inherent strengths of families; and

WHEREAS IYF programs support families in the discharge of their functions;

NOW, THEREFORE the American Psychological Association does hereby resolve to join International Year of the Family and asks the Board of Convention Affairs and all directorates of the Association to consider appropriate program initiatives for the 1994 APA convention.

Rationale: Out of date.

1985

WHEREAS, the great majority of research studies have found a relationship between televised violence and behaving aggressively, and

WHEREAS, the conclusion drawn on the basis of 25 years of research and a sizable number of experimental and field investigations (NIMH, 1972, 1982) is that viewing televised violence may lead to increases in aggressive attitudes, values, and behavior, particularly in children, and

WHEREAS, many children's programs contain some form of violence,

BE IT RESOLVED that the American Psychological Association (1) encourages parents to monitor and to control television viewing by children; (2) requests industry representatives to take a responsible attitude in reducing direct imitable violence on 'real life' fictional children's programming or violent incidents on cartoons, and in providing more programming for children designed to mitigate possible effects of television violence, consistent with the guarantees of the First Amendment; and (3) urges industry, government, and private foundations to support relevant research activities aimed at the amelioration of the effects of high levels of televised violence on children's attitudes and behaviors.

Rationale: Replaced by 1994 policy on Violence in Mass Media.

1999

WHEREAS the United Nations has designated the year 2000 as The International Year for the Culture of Peace;

WHEREAS Culture of Peace refers to promoting human welfare within communities, and has been defined by the UN along the lines of the following eight (8) principles: respect for human rights, tolerance, democracy, free flow of information, non-violence, sustainable development, peace education, and equality of men and women;

WHEREAS the membership of this Association seeks to promote human welfare and mental health;

THEREFORE BE IT RESOLVED that the American Psychological Association endorses the declaration of the Year 2000 as The International Year for the Culture of Peace.

Rationale: Outdated policy developed based on a political event/incident that has passed.

1999

Whereas the United Nations has designated 1999 as the International Year of Older Persons;

Whereas this segment of the population is increasing more rapidly than any other worldwide;

Whereas the needs of this segment are often ignored or neglected;

Whereas the membership of this Association affirms the dignity of all persons through the Association statement of mission and its principles of ethical behavior;

Whereas the Association, through actions of its Council of Representatives, has consistently underscored the worth and dignity of all persons;

Whereas the Association members manifest this earnest commitment to promoting healthy aging in the worlds population;

Whereas the Association has established a Standing Committee on Aging to focus on and address these issues;

Therefore, be it Resolved, that the American Psychological Association commends the United Nations for directing world attention to this issue through designating 1999 as the International Year of Older Persons and affirms the United Nations Principles for Older Persons.

Rationale: This is the first of two existing APA policy statements related to aging. It establishes a base for future actions supportive of the health and well being of older persons and of APA as a contributor in efforts to this end.

XIV. INTERNATIONAL AFFAIRS

1975

Council adopted the following resolution on the Use of Psychiatric Diagnosis and Hospitalization to Suppress Political Dissent.

"The Council of Representatives of the American Psychological Association notes with appreciation that the Executive Committee of the International Union of Psychological Science, at its meeting in July of 1974, carefully considered our request that it place 'on its own agenda and on the agenda of the next meeting of the IUPsyS Assembly a resolution condemning the use of psychiatric diagnosis and hospitalization to suppress dissent and a plan to undertake an international survey of the prevalence of this practice.'

We commend the IUPsyS Executive Committee for its statement on scientific and professional ethics and conduct, which it unanimously approved after discussion of the APA Council resolution. We fully support the "Executive Committee's decision to urge adoption and enforcement of codes of ethics by national societies, to collect and disseminate information on existing codes, and to encourage discussion of issues of scientific and professional ethics in various international forums. These plans represent a significant step in the direction of social and ethical responsibility within the international psychological community.

We must, however, express our profound disappointment in the Executive Committee's decision to sidestep the specific issue that we brought before it. We recognize the existence of cultural and political differences and can understand why an international organization may be reluctant to impose a single standard on all of its members. But there are certain minimal principles for the protection of human rights to which the entire international community is committed. We cannot accept the implication that an organization speaking for international psychology, a science and profession dedicated to the promotion of human welfare, must remain neutral toward the participation of psychologists in the suppression and violation of basic human rights. If we are to maintain the moral integrity and legitimacy of international psychology, we must be willing to take an unambiguous stand against blatant abuses of our own discipline.

The Council of the American Psychological Association, through APA's representatives to the IUPsyS Assembly, therefore reaffirms its request that the IUPsyS Executive Committee place our previous resolution on the agenda of the next meeting of the IUPsyS Assembly."

Rationale: Outdated policy developed based on a political event/incident that has passed.

XVI. FINANCIAL AFFAIRS

August 1994

Council voted to implement the recommendations contained in the Finance Committee Report to Council on "Responsible Spending" dated June 1994. The recommendations will be implemented on a phased schedule as appropriate. [Appendix R - V.1]

Rationale: This policy is reviewed and revised periodically with the approval of Council.

2000

Council voted to approve a \$4 dues increase from \$215 to \$219 for the 2001 dues year.

Rationale: Dues increases are considered annually by Council.

C.(11) Council voted to approve amending the Association Rules to include a new section 30-9 and an addition to Association Rule 70-1.4 as follows (underlined material to be added):

30-9 COUNCIL POLICY MANUAL

30-9.1 All motions, resolutions, standards and guidelines approved by Council and designated as policy shall be recorded in the Council Policy Manual.

30-9.2 Policies that are standards and guidelines shall be reviewed pursuant to Association Rule

30-8.4. With regards to all other policies, every five years the Policy and Planning Board will notify the responsible reviewing body or entity of its obligation to review all of the policies recorded in its section of the Council Policy Manual. All such policies shall remain active unless the responsible reviewing body recommends to amend (with proposed revisions), rescind or place the policy in the APA archives. Such recommendations must be approved by Council.

30-9.3 Rescinded policies shall be removed from the Council Policy Manual. Rescinded policies refer to those that have been previously passed and then rescinded by vote of Council.

30-9.4 All materials published in the active and archived sections of the Council Policy Manual shall be maintained on the website of the Association. Each archived policy shall indicate on each page of the document that it is no longer an active policy of the Association.

Under 70. POLICY AND PLANNING BOARD

70-1.4 The Policy and Planning Board shall be responsible for maintaining the Council Policy Manual.

VII. PUBLICATIONS AND COMMUNICATIONS

A.(36) Council received an update on Publications and Communications (P&C) Board activities. The P&C Board met twice in 2005, on May 20-22 and November 4-6. The P&C Board made five editorial appointments in 2005, naming the following to 6-year terms to begin in 2006 as the editor-elect year (and 2007 as the beginning masthead year): *Journal of Experimental Psychology: Learning, Cognition, and Memory* (Randi Martin, PhD); *Professional Psychology* (Michael Roberts, PhD); *Psychology, Public Policy, and Law* (Steven Penrod, PhD); *Clinician's Research Digest* (Thomas Joiner, PhD); *Emotion* (Elizabeth A. Phelps, PhD). The P&C Board opened searches for the following six journals: *Journal of Applied Psychology*, *Psychological Bulletin*, *Journal of Education Psychology*, *Journal of Personality and Social Psychology: Interpersonal Relations and Group Processes*; and *Psychology of Addictive Behaviors*. The P&C Board reviewed and revised its permissions policy to allow authors to reuse for small excerpts of APA copyrighted material and extend permission to digital version, the print version, and "copy of record" match, while leading the way in permissions policy for the scholarly publishing community. During 2005, PsycINFO added 116,036 new records to the overall database, and expanded coverage by adding 111 journals to the coverage list. Over 2,800 full-text articles were added to the PsycARTICLES database during 2005. PsycBOOKS added 181 book title and 2,575 chapter records during 2005. PsycCRITIQUES reviewed 902 books and films in 2005, and PsycEXTRA added 27,000 records to that database in 2005. In 2005, APA

Books released *Concise Rules of APA Style*, the clearest source for compact, indispensable information on how to format scholarly articles and papers according to the rules of APA-Style. *Concise Rules* is in its second printing, and 64,000 copies of *Concise Rules* were sold in 2005, generating \$1.1 million in new revenue. Sales of the *Publication Manual* in 2004 reached \$8 million. In addition, APA Books released over 64 new titles in 2004 and Magination Press released eight new titles. APA Journals published over 37,500 pages in 2004 in 46 journals and four Abstract/Scan publications. Total revenue for APA's core scholarly and professional publishing program exceeded \$64.4 million in 2004. This is the 19th straight year of stable and continuing growth in overall revenue. In 2005, the P&C Board and APA Office of Publications and Databases made PsycARTICLES full-text available to developing countries through HINARI (Health InterNetwork Access to Research Initiative).

VIII. CONVENTION AFFAIRS

A.(39) Council was informed that the Council that the Board of Convention Affairs and the Board of Directors approved changing the days of the 2007 Annual Convention in San Francisco to be Friday to Monday instead of Thursday through Sunday as originally scheduled. The dates of the 2007 convention will be as follows: Friday, August 17 to Monday, August 20.

IX. EDUCATIONAL AFFAIRS

A.(12) Council voted to allocate 18,800 from its 2006 discretionary fund to support one meeting of the joint BEA/CAPP Task Force to Review the APA Psychopharmacology Curricula and Related Policies providing that two psychologists with expertise in child and adolescent psychopharmacology are added to the membership of the task force. The child and adolescent psychopharmacology experts will be appointed by the Interdivisional Task Force on Children's Mental Health.

Dr. Sammons recused himself from the discussion and vote on this item.

B.(12A) Council voted to approve the *American Psychological Association Approval of Sponsors of Continuing Education for Psychologists Policies and Procedures Manual* including the revised appeal procedures and the statement regarding the review and approval process for future edits.

C.(50) Council received an update on the new-business-in-progress item "Consultation and Supervision in Sports Psychology."

D.(51) Council received an update on the new-business-in-progress item, "Accreditation of Graduate Programs in North America."

X. PROFESSIONAL AFFAIRS

A.(13) Council voted to reject the following main motion of Council New Business Item #37B:

The advances in doctoral education for psychologists preparing to work in the area of health delivery particularly in practicum experiences have replaced a paucity of such opportunities that did exist at the time the model evolved. The existence of this requirement has placed our graduates in a poor position to compete with other providers in other professions, which are essential to earning a living.

B.(14) Council voted to allocate \$8,800 from its 2006 discretionary fund to support one meeting of the Task Force to Revise the APA Model Act for State Licensure for Psychologists. Dr. Koocher will welcome input from Council members regarding appointments to the Task Force.

C.(14A) Council voted to approve the withdrawal of New Business Item #28C, "Public's Need to Recognize and Identify Specialty Practitioners."

D.(28) A new business item "APA Policy on Health Care Reform" was referred to the Committee for the Advancement of Professional Practice (CAPP), P&P, the Board of Scientific Affairs (BSA) and P&P.

E.(29A) A new business item “Reclaiming Recognition of Psychology” was referred to CAPP, the Board of Educational Affairs (BEA), BPA, BSA and the P&C.

F.(29B) A new business item “Division 55 Pharmacotherapy Practice Guidelines” was referred to BPA, CAPP and the Committee on Legal Issues.

G.(32) Council received an update on the business pending item “Listing of ABAP (American Board of Assessment Psychology) Diplomates in the APA Directory.”

H.(33) Council received an update on the business pending item “Public’s Need to Recognize and Identify Specialty Practitioners.” (Note item 14A above: Council approved withdrawing this item.)

I.(34) Council received an update on the business pending item “Guidelines for Psychological Practice with Girls and Women.”

J.(52) Council received an update on the new-business-in-progress item “Licensure Portability for Psychologists Consulting in Multiple Jurisdictions.”

K.(53) Council received an update on the new-business-in-progress item “Infusing the Association Guidelines in the Public Interest which have been adopted by Council for psychologists throughout APA.”

L.(54) Council received an update on the new-business-in-progress item “Evidence Based Practice as it Applies to Applied Psychology Practitioners/Non Health Care Services.”

XI. SCIENTIFIC AFFAIRS

A.(15) Council voted to allocate \$9,800 from its 2006 discretionary fund to support the second meeting of the Task Force for Increasing the Number of Quantitative Psychologists.

Dr. Koocher will welcome input from Council members regarding appointments to the Task Force.

B.(55) Council received an update on the new-business-in-progress item “Convention Programming of Science Sessions.”

C.(56) Council received an update on the new-business-in-progress item “NCMRR to Institute Status.”

XII. PUBLIC INTEREST

A.(16) Council voted to adopt as APA policy the following Resolution on Drug Abuse Treatment to Prevent HIV among Injecting Drug Users:

Resolution on Drug Abuse Treatment to Prevent HIV among Injecting Drug Users

WHEREAS the primary routes of HIV transmission among injection drug users (IDUs) is the sharing of contaminated injection equipment and unprotected sex; and

WHEREAS the HIV and hepatitis C epidemics and injection drug use are inextricably linked in American society; and

WHEREAS injection drug use is associated with one-half of hepatitis C cases and almost one-third of all AIDS cases both through direct transmission through shared needles and indirect transmission through sex with HIV-infected injecting drug users (CDC, 2002 and 2002a); and

WHEREAS one million active users of injection drugs live in the United States (CDC, 2002b); and

WHEREAS only a fraction of people who need substance abuse treatment are able to obtain it through public agencies (CDC, 2002b); and

WHEREAS infected injection drug users (IDUs) transmit HIV through the sharing of contaminated syringes and other drug injection equipment (CDC, 2002a); and

WHEREAS injection drug users inject approximately 1000 times per year (Lurie, Jones, and Foley, 1998); and

WHEREAS drug maintenance treatment including methadone maintenance therapy (MMT) and treatment with buprenorphine have been shown to reduce heroin use and drug-related HIV risk behaviors (Sees, Delucchi, Masson et al., 2000; Reynaud-Maurupt et al., 2000; Stock & Shum, 2004; Thiede, Hagan, and Murrill, 2000); and

WHEREAS participation in MMT is associated with a reduction in the number of sexual partners and a reduction in the number of high-risk partners (Sorensen and Copeland, 2000); and

WHEREAS participation in MMT is associated with an increase in the use of condoms (Lollis, Strothers, Chitwood et al., 2000), and

WHEREAS participation in MMT enhanced with harm reduction group therapy is associated with higher rates of abstinence from cocaine and fewer unsafe sexual practices (Avants et al., 2004), and

WHEREAS participation in MMT or buprenorphine treatment are both associated with reduced HIV risk behaviors (Mattick, Ali, White, O'Brien, Wolk, & Danz, 2003), and

WHEREAS participation in MMT (Hartel & Schoenbaum, 1998) or buprenorphine treatment is associated with lower rates of HIV infection (Reynaud-Maurupt et al., 2000; Sorensen and Copeland, 2000), and

WHEREAS participation in MMT provided in primary care settings results in similar HIV risk reduction outcomes as participation in traditional MMT settings (Keen et al., 2003), and

WHEREAS drug-free treatments including long-term residential, intensive outpatient, and short-term inpatient treatment for cocaine, alcohol, and polydrug use are associated with significant reductions in drug use and injection risks that lead to the transmission of HIV (Avins, 1997, Gottheil 1998; Hubbard, 1997; Longshore, 1998; McCusker, 1994; 1998; Sorensen and Copeland, 2000), and some of these drug-free treatments also reduce sexual risk behaviors; and

WHEREAS methadone treatment programs and providers are required to undergo an accreditation and review process that is costly in terms of compliance oversight and funds, and may discourage smaller treatment programs from applying to provide MMT (Department of Health and Human Services, 2001); and

WHEREAS the Drug Abuse Treatment Act of 2000 allows any physician choosing to take a short specialty training course and become certified to prescribe buprenorphine in an office setting, yet few have done so due to financing and services delivery barriers (West et al., 2004); and

WHEREAS access to drug treatment including opioid maintenance is particularly difficult in rural areas (Deck & Carlson, 2004) but in general, the availability of drug maintenance treatments for injection drug users is inadequate and discouraged by regulatory requirements;

THEREFORE BE IT RESOLVED that the American Psychological Association (APA) actively supports and promotes an increase in accessible, available drug treatment for IDUs in traditional substance abuse, mental health, correctional, educational, and medical care settings in both rural and urban areas to prevent the spread of HIV, hepatitis C, and other contagious diseases.

MOREOVER,

Given that psychologists have many areas of relevant practice competence, including assessment, intervention, and prevention skills, that could and should inform the discourse about HIV prevention and substance abuse treatment for IDUs and their significant others; and

Given that psychologists' training in research makes them especially well-qualified to assist policy-makers in making informed judgments based on the best available science;

LET IT BE FURTHER RESOLVED THAT THE APA:

Encourages state governments, Congress, and the executive branch to promote public policies and revise regulations and provide increased training to potential providers to increase available drug treatment for HIV prevention in a variety of settings, and

Promotes increased funding for HIV prevention research that includes drug treatment provided in traditional substance abuse, mental health, correctional, educational, and medical care settings; and

Supports training in HIV prevention interventions, including addiction treatment for injection drug users, within psychology training programs at all levels; and

Promotes and facilitates psychologists' acquisition of competencies in addiction treatment strategies that decrease transmission of HIV infection among injection drug users that are culturally responsive and gender appropriate, including mastery of the literature on treatment of injection drug users and familiarity with effective interventions that are employed to address this problem; and

Encourages psychologists to develop multi-cultural competencies that address the issues of sub-groups of individuals, including various racial, ethnic, and gender groups who use and inject drugs; and

Advocates for reimbursement of psychologists for provision of drug treatment interventions that decrease drug-related HIV risk behavior among IDUs; and

Supports psychologists as they engage in interdisciplinary and international efforts involving other health, mental health, and substance abuse professionals who seek to enhance understanding and treatment of drug dependence and sexual risk behaviors.

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B.(17) Council voted to adopt the following Resolution on Prejudice, Stereotypes and Discrimination:

Resolution on Prejudice, Stereotypes, and Discrimination

WHEREAS prejudices are unfavorable affective reactions to or evaluations of groups and their members, stereotypes are generalized beliefs about groups and their members, interpersonal discrimination is differential treatment by individuals toward some groups and their members relative to other groups and their members, and institutional discrimination involves policies and contexts that create, enact, reify, and maintain inequality (Dovidio, Brigham, Johnson, & Gaertner, 1996; Eagly & Diekmann, 2005; Fiske, 1998; Lott & Maluso, 1995; Mio, Barker-Hackett, & Tumambing, 2006; Myers, 2005; Nelson, 2005; Shih, Pittinsky, & Ambady, 1999); and

WHEREAS interpersonal and institutional discrimination against any group is counter to respect for basic human rights to dignity, equality, and liberty (United Nations High Commission on Human Rights, 1997; United Nations Universal Declaration of Human Rights, 1948); and

WHEREAS the American Psychological Association expressly opposes prejudice (defined broadly) and discrimination based on age, race, ethnicity, religion, sexual orientation, gender, gender identity, disability or other physical conditions, or social class (American Psychological Association, 1998, 2000, 2001, 2002, 2003, 2005a, 2005b; Conger, 1975); and

WHEREAS as psychologists we respect the dignity and worth of all people and are committed to improving the conditions of individuals, groups, and society (American Psychological Association, 2002); and

WHEREAS as psychologists we are aware of and respect cultural, social, and personal diversity, including (but not limited to) those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status (American Psychological Association, 2002); and

WHEREAS manifestations of prejudice, stereotypes, and discrimination may vary over time and context (Diekmann & Eagly, 2000; Devine & Elliot, 1995; Eagly & Karau, 2002; Jackman, 1994; Karlins, Coffman, & Walters, 1969; Schaller, Conway, & Tanchuk, 2002); and

WHEREAS psychological science has revealed that modern forms of prejudice, stereotypes, and discrimination may be automatic, unconscious, and unexamined; can be ambiguous and difficult to detect in individual instances; and include ambivalent mixtures of positive and negative emotions that can result in paternalistic or envious reactions to social groups (Blair, 2001; Clausell & Fiske, 2005; Crosby, 1984; Cunningham, Nezlek, & Banaji, 2004; Darley & Gross, 1983; Devine, 1989; Dovidio & Gaertner, 2004; Dovidio, Kawakami, Johnson, Johnson, & Howard, 1997; Fazio, Jackson, Dunton, & Williams, 1995; Fiske, 1998; Fiske, Cuddy, Glick, & Xu, 2002; Gaertner & Dovidio, 1986; Glick & Fiske, 2001; Greenwald et al., 2002; Levy & Banaji, 2002; Lin, Kwan, Cheung, & Fiske, 2005; Mitchell, Nosek, & Banaji, 2003; Morrison & Morrison, 2002; Taylor, Wright, Moggaddam, & Lalonde, 1990); and

WHEREAS overt, blatant, and hostile forms of prejudice, stereotypes, and discrimination co-exist with modern and with less overt forms (Benokraitis & Feagin, 1995; Dovidio & Gaertner, 2004; Duckitt, 2001; Fiske et al., 2002; Green, Glaser, & Rich, 1998; Green, Strolovitch, & Wong, 1998; Herek, 1992; Pettigrew & Meertens, 1995; Sears & Henry, 2003; Sidanius & Pratto, 1999; Swim, Hyers, Cohen, Fitzgerald, & Bylsma, 2003; Wilson & Schooler, 2000); and

WHEREAS prejudice, stereotypes, and discrimination are directed most commonly at members of stigmatized groups (historically groups low in structural power, including groups defined by gender,

ethnicity, race, social class, sexual orientation, religion, age, physical or psychological impairments, immigration status, or language), including individuals who are members of multiple stigmatized groups (e.g., older women) and members simultaneously of stigmatized and nonstigmatized groups (e.g., gay men) (Adorno, Frenkel-Brunswik, Levinson, & Sanford, 1950; Altemeyer, 1996; Crandall & Eshleman, 2003; Herek, 2002; Fiske et al., 2002; Lott, & Bullock, 2001; Staub, 1996); and

WHEREAS prejudice, stereotypes, and discrimination have the potential to particularly harm individuals who are members of groups that are afforded less societal power to counteract the negative effects of such discrimination (Fiske, 1993; Herek, Gillis, Cogan, & Glunt, 1997; Johnson & Lecci, 2003; Major et al., 2002; Schmitt & Branscombe, 2002; Sidanius & Veniagas, 2000); and

WHEREAS members of groups with high power in one context may find themselves as members of stigmatized groups in other contexts (Constantine, 2001; Linville, 1982; Quinn, 2005; Shih et al., 1999); and

WHEREAS individuals who are members of nonstigmatized groups enjoy significant privileges that members of stigmatized groups do not (Aronson, et al., 1999; Hacker, 1992; Hurtado, 1997; McIntosh, 1989; Walton & Cohen, 2003); and

WHEREAS standards of normative behavior derived from the behavior of nonstigmatized groups can lead to the creation and promotion of institutional discrimination (Feagin & Feagin, 1978; Haney, Banks, & Zimbardo, 1973; Jones, 1997); and

WHEREAS prejudice, stereotypes, and discrimination have been shown to have adverse cognitive, affective, motivational, and behavioral effects for targets of discrimination, particularly those who are members of stigmatized groups, including heightened vigilance; stereotype threat; distress such as anger and anxiety; depressive, anxious, and somatic symptoms; lowered aspirations and reduced effort (Frale, Blackstone, & Scherbaum, 1990; Jennings, Geis, & Brown, 1980; Klonoff, Landrine, & Campbell, 2000; Klonoff, Landrine, & Ullman, 1999; Landrine & Klonoff, 1996; Landrine et al., 1995; Mendoza Denton et al., 2002; Schmader, Major, & Gramzow, 2001; Steele, 1997; Steele & Aronson, 1995; Swim, Hyers, Cohen, & Ferguson, 2001); and

WHEREAS prejudice, stereotypes, and discrimination can be internalized by stigmatized groups' members and can become manifested in reactions such as self-blame for their stigmatized state, acceptance of unfavorable or repressive stereotypes, self-objectification, and associated psychological consequences (e.g., eating disorders), and diminished psychological well-being (e.g., self-esteem among some groups) (Clark & Clark, 1939, 1947; Crocker, Cornwell, & Major, 1993; Crocker, Major, & Steele, 1998; Harrison & Frederickson, 2003; Frederickson & Roberts, 1997; Jost & Banaji, 1994; Kaiser, Major, & McCoy, 2004; Major, Quinton, & Schmader, 2003; Meyer, 2003; Rudman & Heppen, 2003; Sinclair, Huntsinger, Skorinko, & Hardin, 2005); and

WHEREAS prejudice, stereotypes, and discrimination have negative effects on intergroup relations, fostering distrust, and promoting threat (Crocker, Luhtanen, Brodnax, & Blaine, 1999; Dovidio, Gaertner, Kawakami, & Hodson, 2002; Dovidio, Kawakami, & Gaertner, 2002; Hebl, Foster, Mannix, & Dovidio, 2002; Hughes & Johnson, 2001; Pettigrew & Tropp, 2000; Plant & Devine, 2003; Shelton & Richeson, 2005; Stephan & Stephan, 1985; Terrell & Terrell, 1981; Vorauer, Cameron, Holmes, & Pearce, 2003; Word, Zanna, & Cooper, 1974); and

WHEREAS discrimination that is indirect, passive, and occurs by virtue of omission, as well as blatant discrimination, can create hostile environments, including a climate of rejection, fear, anxiety, and insecurity, for both individuals and the target group as a whole (Feagin & Sikes, 1994; Fitzgerald & Ormerod, 1993; Fitzgerald, Swan, & Fischer, 1995; Neimann & Dovidio, 2000; Rudman & Borgida, 1995; Waldo, 1999); and

WHEREAS prejudice, stereotypes, and discrimination can result in the loss of life, profound social, economic, and psychological consequences through violence, ethnic conflict, and genocide (Dutton, Boyanowsky, & Bond, 2005; Dyregrov, Gupta, Gjestad, & Mukanoheli, 2000; Kessler, 2000,

Krippner & McIntyre, 2003; Mautino, 2001; Newman & Erber, 2002; Pham, Weinstein, & Longman, 2004; Staub, 1996; Veale & Doná, 2003); and

WHEREAS the American Psychological Association has recognized the profound psychological consequences for hate crimes motivated by prejudice (American Psychological Association, 1988, 2005a); and

WHEREAS prejudice, stereotypes, and discrimination have been shown to create and maintain historical and contemporary disparities in the areas of education, economics, law, politics, housing, security, and health (Armstead, Lawler, Gorden, Cross, & Gibbons, 1989; Blascovich, Spencer, Quinn, & Steele, 2001; Institute of Medicine, 2003; Jackson, et al., 2004; Lott, 2002; Mays, Coleman, & Jackson, 1996; McNeilly et al., 1996; National Center for Health Statistics, 2004; Office of the Surgeon General, 1999; Panel on Methods for Assessing Discrimination, 2004; Pettigrew, 2004; Steffen, McNeilly, Anderson, & Sherwood, 2003; U.S. Bureau of the Census, 2000; Williams, Neighbors, & Jackson, 2003); and

WHEREAS institutional discrimination is manifested in lack of representation of disadvantaged groups in power positions, lack of access to resources that promote social mobility, and the promotion of the deindividuation and dehumanization of targets thereby creating social contexts and social roles that encourage discriminatory behavior (Apfelbaum, 1999; Blascovich, Mendes, Hunter, Lickel, & Kowai-Bell, 2001; Bullock & Lott, 2001; Catalyst, 2003; Congressional Quarterly, 2005; Fine, 2004; Frable et al., 1990; Jackson, & Inglehart, 1995; Jones, 1997; Lane & Wegner, 1995; Pinel, 1999; Shelton, 2003); and

WHEREAS individuals who are members of multiple oppressed groups may experience unique, additive, or even multiplicative negative consequences from discrimination (Bowman et al., 2001; Espin, 1993, 2005; Greene, 1994, 1997; Greene, & Boyd-Franklin, 1996; Lowe & Mascher, 2001; Miller & Meyers, 1998; Quinn, 2005); and

WHEREAS prejudice, stereotypes, and discrimination have been shown to affect negatively children's psychological well-being and behavior (Nyborg & Curry, 2003; Simons et al., 2002); and

WHEREAS prejudice, stereotypes, and discrimination potentially harm perpetrators' own mental and physical health by interfering with their cognitive functioning; prolonging their stereotypes, hostility, suspicion, vigilance, and intergroup anxiety; which results in depriving them of skills and relationships with groups they disparage; preventing their organizations from full access to available human capital; and creating restrictive roles and intragroup competition for status even within nonstigmatized groups (Iazzo, 1983; King & King, 1997; Richeson et al., 2003; Richeson & Shelton, 2003; Richeson & Trawalter, 2005; Rudman & Fairchild, 2004; Thompson, Gisanti, & Pleck, 1985; Thompson, Pleck, & Ferrera, 1992); and

WHEREAS being a member of a stigmatized group can result in the added stress of needing to be attuned to the possibility of encountering discrimination, particularly if one has a hidden stigma (Frable et al., 1990; Shelton, 2003; Vorauer & Kumhyr, 2001); and

WHEREAS options for coping with prejudice, stereotypes, and discrimination force targets of discrimination to choose among coping responses that have associated psychological costs (e.g., possibly revealing stigma), negative evaluations when reporting discrimination, and psychological or practical costs for complying with discrimination (e.g., rumination and negative self-evaluations); leaving prejudice, stereotypes, and discrimination often unnamed and unchallenged (Kaiser & Miller, 2001; Swim & Thomas, 2005); and

WHEREAS participation in demographically diverse settings, such as groups with mixed racial/ethnic or gender group composition, has the potential to bestow advantages such as preparing individuals to be better citizens in a multicultural democracy, improving educational and economic opportunities for stigmatized individuals, decreasing prejudice against outgroup members, increasing complex learning, increasing group creativity, and consideration for varied

points of views that clearly illuminate the benefits of diversity (Antonio et al., 2004; Gurin, Dey, Hurtado, & Gurin, 2002; Gurin, Nagda, & Lopez, 2004; Nemeth & Nemeth Brown, 2003; Pettigrew & Tropp, 2005, Sommers, in press);

THEREFORE BE IT RESOLVED that the American Psychological Association condemns expressing prejudice, employing stereotypes, and engaging in discrimination in all their forms; and

BE IT FURTHER RESOLVED that the American Psychological Association will:

1. call upon psychologists to educate themselves about the various and evolving manifestations of prejudice, stereotypes, and discrimination;
2. call upon psychologists to eliminate actions and procedures that perpetuate prejudice, stereotypes, and discrimination in research, practice, training, and education;
3. call upon psychologists to examine further the deleterious effects of prejudice, stereotypes, and discrimination upon both targets and perpetrators through research, practice, training, and education;
4. call upon psychologists to use findings from relevant psychological research on prejudice, stereotyping and discrimination to inform their research, practice, training and education with members of diverse populations;
5. call upon psychologists to develop effective interventions against prejudice, stereotypes, and discrimination;
6. support the government's continuing collection of demographic and other statistics that bear upon discrimination;
7. call upon psychologists to use findings from relevant psychological research to inform anti-prejudice, anti-stereotyping and anti-discrimination positions in public and organizational policy;
8. call upon psychologists to use findings from relevant psychological research to advocate anti-prejudice, anti-stereotyping, and anti-discrimination positions in organizations and public policy at local, national, and international levels;
9. promote the effective engagement and advancement of diverse populations to pursue careers in psychology in order to achieve representation that reflects this diversity in all areas and levels of the profession;
10. achieve diverse representation at all levels of APA activities and governance;
11. urge gatekeepers of information dissemination (e.g., educators and editors) to pursue diverse representation in content and among reviewers and authors; and
12. call upon psychologists to be vigilant about the various manifestations of stereotyping, prejudice, and discrimination; to speak out against stereotyping, prejudice, and discrimination; to educate the public about stereotyping, prejudice and discrimination and their impact on individuals, groups and society; and to combat expression of intolerant stereotypes, prejudices, or discriminatory acts among individuals and institutions.

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C.(18) Council voted to allocate \$7,500 from its 2006 discretionary fund for the second of two meetings of the Task Force on the Sexualization of Girls.

D.(19) Council voted to allocate \$12,000 from its 2006 discretionary fund to support two 2-day meetings of the Task Force on Socioeconomic Status.

F.(20) Council voted to allocate \$18,500 from its 2006 discretionary fund for two meetings in 2006 of a Task Force on Guidelines for Assessment and Treatment of Persons with Disabilities.

G.(21) Council voted to allocate \$18,500 from its 2006 discretionary fund for two meetings in 2006 of a Task Force on Training Issues in Psychological Testing and Assessment for Graduate Students with Disabilities.

H.(22) Council voted to allocate \$7,500 from its 2006 discretionary fund to fund one meeting in 2006 of the Task Force on Gender Identity, Gender Variance and Intersex Conditions.

I.(23) Council voted to allocate \$2,500 from its 2006 discretionary fund to support a Multicultural Organizational Leadership Workshop for APA boards and committees during the 2006 Spring Consolidated Meetings.

J.(24) Council voted to allocate \$15,000 from its 2006 discretionary fund to support the National Conference on Training in Professional Geropsychology.

K.(24A) Council voted to allocate \$8,500 from its 2006 discretionary fund for one meeting in 2006 of a Task Force on Mental Health and Abortion. The task force will collect, examine, and summarize the scientific research addressing the mental health factors associated with abortion, including the psychological responses following abortion and produce a report, based upon a review of current research.

L.(27) A new business item, "Addendum to Resolution on Anti-Semitic and Anti-Jewish Prejudice" was referred to BAPPI.

M.(35) Council received an update on the business pending item "Proposed Resolution on Families of Incarcerated Offenders."

XIII. ETHNIC MINORITY AFFAIRS

A.(36) Council voted to approve the following motion regarding Council representation for four ethnic minority associations:

Council asks that the following ethnic minority psychological associations be invited for the next three years, beginning in August 2006, to send a representative to serve as an observer to the APA Council of Representatives: Asian American Psychological Association, Association of Black Psychologists, Society of Indian Psychologists, and National Latina/o Psychological Association.

The observers from the ethnic minority psychological associations shall: (a) receive all except confidential materials provided to the Council of Representatives; (b) attend all Council sessions, workshops and caucuses with the exception of the Executive Sessions of Council; (c) be seated in a portion of the Council chamber designated for their use; (d) speak to agenda items of direct concern to their constituents, if specifically invited to do so by the Presiding Officer; (e) hold membership in both the Association represented and the American Psychological Association; and (f) receive financial assistance for their Council meeting attendance equal to that received by ethnic minority members of Council. The observers shall not be entitled to vote on matters before the Council.

Council further requests that the Policy and Planning Board (P&P) and Committee on the Structure and Function of Council (CSFC) develop Bylaw and Association Rules changes that would provide for the above ethnic minority psychological associations to have a voting seat on the APA Council.

XIV. INTERNATIONAL AFFAIRS

A.(29D) A new business item "United Nations-University Partnerships" was referred to CIRP and BEA.

XV. CENTRAL OFFICE

A.(40) Council received as information the 2005 Report on Environmental Issues.

XVI. FINANCIAL AFFAIRS

A.(25) Council voted to approve the 2006 Final Budget calling for revenues of \$101,219,000 and expenses of \$100,604,900 yielding a surplus of \$614,100.

A request was made by some members of Council that the Finance Committee review and consider changing the current practice of increasing the APA base member dues and graduate student affiliate fees annually by an amount linked to the consumer price index for all urban consumers (CPI-U), paying particular attention to making dues more appealing to Early Career Psychologists. A request was also made that the Finance Committee look into establishing a special fund that could be used for emergencies.

B.(26) Council voted to approve the following amendments to the Association Rules (bracketed material to be deleted; underlined material to be added):

210-2.10 Discretionary funds.

The Board of Directors and Council each shall have a discretionary fund to be used at their own discretion of up to [~~\$100,000~~] \$110,000. After APA Council and Board have adopted a budget, new unbudgeted expenditures to be made from their respective discretionary funds shall be approved as follows:

- (a) If emerging from Council action, the proposed allocation from the Council discretionary fund shall require approval by a simple majority vote of the Council members voting.
- (b) If emerging from Board action, the proposed allocation from the Board discretionary fund shall require approval by a two-thirds majority of Board members voting.
- (c) If either action involves the support of a task force and/or ad hoc committee, the authorization would be for one year only and assigned to the appropriate office/program. If the mission of the task force or committee is to continue beyond one year, it must be reauthorized and funded on a year-to-year basis.
- (d) All allocations other than those described in (c) will be sent to Council for review if authorized for an additional period of time.

[210-2.11 Special Discretionary Funds.] The President and President-Elect shall each have a special discretionary fund of up to [~~\$35,000~~] \$38,500 and [~~\$15,000~~] \$16,500 respectively. Use of these special discretionary funds must be approved in advance by the Board of Directors and be limited exclusively to presidential initiatives. Costs related to each initiative must be incurred within the respective Presidents and President Elects term (calendar year).

The Finance Committee annually shall review and recommend increases as appropriate (inflation, etc.) to the discretionary funds.

C.(40A) Council voted to approve transferring \$7,300 from its 2006 discretionary fund to the Board's 2006 discretionary fund so that the Board could consider a request for funding a Task Force on Evidence-Based Practice for Children & Adolescence.

D.(41) Council received as information the 8th Annual Real Estate Report.

E.(42) Council received information on the allocation of the real estate tax abatement.

F.(43) Council received as information the December 2 & 3, 2005, minutes of the Finance Committee meeting.

G.(44) Council received a report from the Treasurer on the annual APA employee compensation package.

H.(45) Council received as information the 2004 IRS Tax Form 990.

On Friday morning, the following former Council members who recently passed away were remembered with a memorial minute: Jack Annon, PhD, Gregory Kimble, PhD, Nambury Raju, PhD, and Mary Tenopyr, PhD.

On Friday morning, Ronald F. Levant, EdD, reviewed highlights of his presidential year and Jessica Henderson Daniel, PhD, provided Council with an update on Dr. Koocher's *Centering on Mentoring Initiative*. Norman Anderson, PhD, CEO/EVP, and President Koocher also gave reports to Council.

On Friday afternoon, Council discussed the 2005 CEO evaluation in executive session.

On Saturday morning, 3 prominent women who recently passed away and who had a profound effect on some of the issues that psychologists hold dear were remembered: Betty Friedan, Coretta Scott King and Rosa Parks.

On Saturday morning, Nadine Kaslow, PhD, was presented with a presidential citation.

On Saturday afternoon, Council held Diversity Training breakout group discussions.

On Saturday afternoon, Council discussed the Compensation Report in executive session after voting to hold the discussion in executive session.

On Sunday morning, David B. Baker, PhD, gave a report on the Archives of the History of American Psychology.

On Sunday morning, Thomas J. DeMaio, PhD, briefed Council on the APA long-range planning process.

COUNCIL OF REPRESENTATIVES

February 19-21, 2010

APPROVED MINUTES

I. MINUTES OF MEETING

A.(1) Council voted to approve the minutes of its August 5 & 9, 2009, meeting.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(2) Council voted to approve the following motion regarding dues discounts for members:

APA members who also are members of the Association for Psychological Science; the Society for Neuroscience; any one of the organizations that are part of the Federation for the Advancement of Behavioral and Brain Sciences; and the state, provincial and territorial psychological associations and the four national ethnic minority psychological associations recognized by APA, will be entitled to a \$25 credit against their APA base dues beginning in 2012. The effect of these changes will be studied with a report back to Council in 2014.

B.(3) The item "Dual Membership Dues Discount Program: Request to Include the Society for Neuroscience" was withdrawn as the request was addressed in agenda item #2 as noted above.

C.(4) Council voted to postpone the item "Member Dues Schedule Revision: Amendment to Association Rules" to its February 2013 meeting.

D.(26C) A new business item "APA Campaign Finance Reform" was referred to the Membership Board, the Finance Committee, the Elections Committee, the Policy and Planning Board (P&P) and the Committee on the Structure and Function of Council.

E.(30A) Council received information on changes that were approved by the Board of Directors related to methods for conducting the President-elect nominations and elections.

III. ETHICS

A.(5) Council voted to approve the following amendments to the *Ethical Principles of Psychologists and Code of Conduct* (2002):

From the Introduction and Applicability section:

If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to this Ethics Code and take steps to resolve the conflict in a responsible manner [If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing authority] in keeping with basic principles of human rights.

From Ethical Standard 1.02:

1.02 Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority

If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code and take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. [If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing legal authority.] Under no circumstances may this standard be used to justify or defend violating human rights.

From Ethical Standard 1.03:

1.03 Conflicts Between Ethics and Organizational Demands

If the demands of an organization with which psychologists are affiliated or for whom they are working are in conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and [to the extent feasible, resolve the conflict in a way that permits adherence to the Ethics Code.] take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. Under no circumstances may this standard be used to justify or defend violating human rights.

IV. BOARD OF DIRECTORS

A.(6) Council voted to receive the Final Report of the 2009 Presidential Task Force on the Future of Psychology Practice and direct the Committee for the Advancement of Professional Practice (CAPP) to oversee the collection of feedback from boards and committees related to implementing the recommendations of the report.

B.(7) Council voted to approve the following amendments to Association Rule 210-2.10 (bracketed material to be deleted; underlined material to be added):

210-2.10 Discretionary funds.

The Board of Directors and Council each shall have a discretionary fund to be used at their own discretion [of up to \$110,000]. Council shall be responsible for setting the discretionary fund limits. After APA Council and Board have adopted a budget, new unbudgeted expenditures to be made from their respective discretionary funds shall be approved as follows:

(a) If emerging from Council action, the proposed allocation from the Council discretionary fund shall require approval by a simple majority vote of the Council members voting.

(b) If emerging from Board action, the proposed allocation from the Board discretionary fund shall require approval by a two-thirds majority of Board members voting.

(c) If either action involves the support of a task force and/or ad hoc committee, the authorization would be for one year only and assigned to the appropriate office/program. If the mission of the task force or committee is to continue beyond one year, it must be reauthorized and funded on a year-to-year basis.

(d) All allocations other than those described in (c) will be sent to Council for review if authorized for an additional period of time.

[The President and President-Elect shall each have a special discretionary fund of up to \$38,500 and \$16,500 respectively. Use of these special discretionary funds must be approved in advance by the Board of Directors and be limited exclusively to presidential initiatives. Costs related to each initiative must be incurred within the respective Presidents and President Elects term (calendar year).] A special discretionary fund will be allocated for presidential initiatives and must be spent during the first two years of the three-year cycle of each president. Council shall be responsible for setting the discretionary fund limit. The specific allocation of these funds shall be approved in advance by the Board of Directors.

The Finance Committee [annually] regularly shall review and recommend [increases] as appropriate [(inflation, etc.)] limits to the discretionary funds which shall be reviewed by the Board of Directors and submitted to Council for approval.

C.(8) Council participated in a diversity training session on the topic of Current Findings on Discrimination: Causes and Interventions which was entitled "Through the Fly's Eye: An Intersectional View of Inequality" and presented by Lynn Weber, PhD.

D.(31) Council received as information an update on the 2009 Presidential Task Force on the Future of Psychological Science as a STEM Discipline.

E.(32) Council received as information an update on APA's Initiatives to Enhance Diversity.

V. DIVISIONS AND STATE AND PROVINCIAL AND TERRITORIAL ASSOCIATIONS

A.(39) Council received an update on the new-business-in-progress item "Change in Association Rule 90-6 to Clarify Role of CODAPAR in the Agenda Planning Group."

VI. ORGANIZATION OF THE APA

A.(9) Council voted to approve the following core values statement as part of APA's Strategic Plan:

The American Psychological Association commits to its vision through a mission based upon the following values:

Continual Pursuit of Excellence
Knowledge and Its Application Based Upon Methods of Science
Outstanding Service to Its Members and to Society
Social Justice, Diversity, and Inclusion
Ethical Action in All that We Do

B.(10) Council voted to approve the extension of the expiration date for the *Principles for the Validation and Use of Personnel Selection Procedures* to 2015.

C.(11) Council voted to approve the following motions identified through P&P's 5-year review of the Council Policy Manual:

1) Approved an amendment to the 1980 guidelines for divisions to follow with regard to Fellows nominations (bracketed material to be deleted; underlined material to be added):

Council voted to approve the following guidelines with regard to Fellow nominations by division:

That each division employs orderly procedures for ensuring the nominations of appropriate and deserving potential Fellows;

That divisions be encouraged (but not required) to ask nominees to provide a self-generated written statement setting forth their accomplishments that warrant nomination to Fellow status. That evaluators at the division level submit to the Division Fellows Committee a narrative explanation of their decisions and, when the decision is supportive of the nomination, that all materials reviewed by the Division Committee be forwarded to the APA Membership Committee; and

That the Board of Directors continues to review the APA [Membership] Fellows Committee's recommendations, prior to making its recommendations to the Council, as specific in the current APA Bylaws.

2) Approved an amendment to the 1992 policy that extends the Membership Committees charge to recruitment and retention activities nominations (bracketed material to be deleted; underlined material to be added):

Council approved having the Membership [Committee] Board oversee Association membership retention and recruitment activities and make annual reports on these activities to Council.

- 3) Approved an amendment to the 1998 policy regarding the collection of information about representation of women, ethnic minorities, gay men, lesbians, bisexuals, and individuals with disabilities in APA governance (bracketed material to be deleted; underlined material to be added):

Collection of Information about the Representation of Women, Ethnic Minorities, Gay Men, Lesbians, [and] Bisexuals, Transgender Individuals, and Individuals with Disabilities in APA Governance: That staff is directed to 1) annually collect and disseminate information on the number of women, ethnic minorities, gay men, lesbians, bisexuals, transgender individuals and individuals with disabilities serving on Council and boards and committees; 2) at least every five years, collect and disseminate information on the number of women, ethnic minorities, gay men, lesbians, bisexuals, transgender individuals and individuals with disabilities who have been nominated to boards and committees and/or put on a board/committee election slate and to nominees on the Council of Representatives election ballot. The information will be collected by mailing a survey requesting voluntary self disclosure regarding gender, ethnicity, sexual orientation, and disability status from board/committee members and Council members (annually) and board/committee nominees and members running for Council (at least every five years). The results of the survey will be disseminated to APA governance groups and will be used in determining whether further action to increase diversity is warranted based on the results and, if so, at what point in the nomination/election process diversity issues may need to be most vigorously addressed.

Council requested that the APA Research Office be involved in the development of the survey and analysis of the data.

- 4) Approved an amendment to the 1959 policy: Philosophy for Creating New Divisions (bracketed material to be deleted; underlined material to be added):

The policy of the Council with respect to the admission of new divisions shall be a positive one concerned with the spirit and intent of APA to give full recognition to diversity and to growth in the field of psychology. The Council shall not be overly restrained by considerations of orderliness, by fears of centralization, or by the problems created by a sheer increase in size. Council shall naturally satisfy itself that divisional status is warranted under the criteria established in the Bylaws. But, beyond the letter of these rules, Council shall establish that a proposed division represents a new, vigorous, and demonstrably viable interest; that it has achieved recognition in the literature of psychology and in institutional form within departments of psychology, industry, and government; and that it numbers among its members both established psychologists and [younger persons who are not actively working in other divisions] early career psychologists whose professional interest areas are not represented by the current divisions. When such new interests emerge, Council should be prepared to grant divisional status promptly.

- 5) Approved an amendment to the 1961 policy that encourages psychologists to join divisions and that Central Office should facilitate the process (underlined material to be added):

Psychologists should be encouraged to join at least one division of their choice. The Association should make it as easy as possible to apply for membership. This might take the form of a blank included with the annual statement of dues which would be filled out by the applicant, returned to the Central Office with the dues, sorted by Central Office personnel, and forwarded to appropriate division secretaries. The Central Office will utilize new and emerging technologies to facilitate membership applications for divisions.

- 6) Archived the 1985 Policy on Undergraduate Curriculum in Psychology.

7) Archived the 1994 Policy on Half-time Internships.

8) Archived the 2002 Memorandum of Understanding between the APA and CPA for Concurrent Accreditation of Doctoral Training Programs and Predoctoral Internship Training Programs in Professional Psychology.

D.(12) Council postponed the item “Ensuring All Divisions and State, Provincial and Territorial Psychological Associations a Seat on the Council of Representatives” to its August 2010 meeting.

E.(13) Council voted to request that the CEO and the Board of Directors explore alternative legal and financial models for structuring APA and APAPO activities. This study should be conducted within the constraints of our current fiscal circumstances.

VII. PUBLICATIONS AND COMMUNICATIONS

A.(33) Council received an update on Publications and Communications (P&C) Board activities. The P&C Board met twice in 2009, May 1–3 and October 24–25. The P&C Board reported that sales of the fifth and sixth editions of the *APA Publication Manual* combined reached \$12.6 million in 2009. Concurrent with the release of the sixth edition of the *Publication Manual*, APA Books also released revised versions of three other style products: *The Concise Rules of Style*, second edition; *Mastering APA Style: Student Workbook and Training Guide*, sixth edition; and *Mastering APA Style: Instructor's Resource Guide*, sixth edition. In 2009, APA Books also released the *APA College Dictionary of Psychology*. APA Books released 52 new scholarly titles, 6 other book titles, 12 new psychotherapy videotapes, and 9 new Magination Press titles. More than 100 APA Books titles were licensed for translation in 2009. Ten eBooks were released to Kindle in 2009. APA Journals printed and mailed all 2009 issues in 2009, publishing more than 36,000 pages in 56 journals. In 2009, APA launched a new journal about personality disorders, *Personality Disorders: Theory, Research, and Treatment*; acquired the *Journal of Neuroscience, Psychology, and Economics*; and began publishing Division 24's *Journal of Theoretical and Philosophical Psychology*. The P&C Board made seven editorial appointments in 2009 to terms to begin in 2010 as the Editor-elect year (and 2011 as the beginning of the masthead year). The following four individuals were appointed to 6-year terms: *Journal of Consulting and Clinical Psychology*—Arthur M. Nezu, PhD; *Developmental Psychology*—Jacquelynn S. Eccles, PhD; *Psychological Review*—John R. Anderson, PhD; and *History of Psychology*—Wade Pickren, PhD. The following two individuals were appointed to 5-year terms: *Psychology of Violence*—Sherry Lynne Hamby, PhD, and *Journal of Occupational Health Psychology*—Joseph Hurrell, PhD. Ronald Roesch, PhD, agreed to extend his term as Editor of *Psychology, Public Policy, and Law* through 2012. In May, the P&C Board opened searches for the following 12 journals: *Emotion*; *Experimental and Clinical Psychopharmacology*; *International Perspectives in Psychology: Research, Practice, Consultation*; *Journal of Abnormal Psychology*; *Journal of Comparative Psychology*; *Journal of Counseling Psychology*; *Journal of Experimental Psychology: General*; *Journal of Experimental Psychology: Human Perception and Performance*; *Journal of Neuroscience, Psychology, and Economics*; *JPSP: Attitudes and Social Cognition*; *Rehabilitation Psychology*; and *Sport, Exercise and Performance Psychology*. During 2009, PsycINFO added 186,328 new records to the overall database and expanded coverage, bringing the number of journals now covered to 2,456. PsycARTICLES added five new titles and 6,692 full-text articles in 2009. PsycBOOKS contained 1,855 books by the end of 2009. Scanning of books and gray literature for the APA/Akron Archives Project was completed in 2009, and APA and AHAP concluded a contract and began scanning psychological tests for future inclusion in the new PsycTESTS database. PsycEXTRA contained more than 170,000 records by the end of 2009.

VIII. CONVENTION AFFAIRS

A.(13A) Council received an update on the San Diego Convention and the Manchester Grand Hyatt. Council voted to request that Council's August 2010 meeting be moved from the Manchester Grand Hyatt to another venue.

B.(26F) A new business item “APA Convention and Meeting Facility Contract Procedures and Cancellation Clause” was referred to the Committee on Legal Issues (COLI) and the Board of Convention Affairs.

IX. EDUCATIONAL AFFAIRS

A.(14) Council voted to approve the proposed APA Advertising Policy for APA Publications (bracketed material to be deleted; underlined material to be added):

Advertising of educational programs in APA publications and on the APA Web site will be restricted to those schools or other institutions fully accredited by regional or other institutional accrediting associations recognized by the U.S. Department of Education. In addition, for those areas of professional psychology where APA or Canadian Psychological Association accreditation is currently provided (e.g., clinical, counseling, school, combined), APA will restrict advertising to only APA or Canadian Psychological Association accredited programs. Those [doctoral] programs accredited by the American Psychological Association must state that they are APA-accredited and include contact information for the APA Accreditation Office. [Those doctoral programs not accredited by APA must include the following statement in their advertisements: This program is not accredited by the American Psychological Association. Information concerning whether or not a doctoral program is APA-accredited will be required in all print advertising in APA publications and exhibit space at the APA Convention as well as alternative text in all banner advertising.]

X. PROFESSIONAL AFFAIRS

A.(15) Council voted to adopt as APA policy the revised Model Act for State Licensure of Psychologists as amended by Council.

B.(16) Council voted to instruct the CEO and the Executive Management Group of APA to determine the best way to implement and measure the outcomes of the Public Education Campaign, with objectives to be consistent with APA's Strategic Plan. The reauthorization for the resulting PEC is for up to \$1.5 million per year as previously authorized by Council and adds \$117,200 to the 2010 Budget to achieve funding of at least \$1 million per year for the next three years. The annual PEC report will include an evaluation of the PEC's success in meeting Strategic Plan's goals.

C.(17) Council voted to approve APA's development of treatment guidelines, including the establishment of a Steering Committee and Guidelines Development Panel(s) to assist in their development.

D.(18) Council voted to approve the withdrawal of Council New Business Item #25F: Ad Hoc Task Force to Investigate the Merits, Needs, and Outcomes of An Evidence Based Practice Policy for Applied Psychologists and the Benefits of Collaborating with International Associations Interested in Developing EBP Policy for Applied Psychology.

E.(19) Council voted to approve the withdrawal of Council New Business Item #36A: Revision of APA's Statement on Parental Alienation Syndrome.

F.(26D) A new business item "Recognition of Psychotherapy Effectiveness" was referred to the Board of Professional Affairs (BPA), the Board of Scientific Affairs (BSA), and CAPP.

G.(26E) A new business item "The Implications of the Model Licensing Act (MLA) for I/O Psychology" was referred to CAPP, BPA, COLI and the Board of Educational Affairs.

H.(26J) A new business item "Strategies for Education and Training of Psychologists in the Use of ICD-10-CM" was referred to BPA, CAPP, BEA, BSA and the Committee on International Relations in Psychology.

I.(27) Council received an update on the business pending item "Infusing the Association Guidelines in the Public Interest Which Have Been Adopted by Council for Psychologists Throughout APA."

J.(28) Council received an update on the business pending item “Best Practice Guidelines on Prevention, Practice, Research, Training and Social Advocacy for Psychologist.”

K.(40) Council received an update on the new-business-in-progress item “Structure and Function of an Interdisciplinary Team for Persons with Acquired Brain Injury.”

L.(41) Council received an update on the new-business-in-progress item “Submission of Revised Specialty Guidelines for Forensic Psychology for comment, review and revision, consistent with APA Rule 30.8.”

M. Council discussed the APA Practice Organization Annual Report.

XI. SCIENTIFIC AFFAIRS

A.(19A) Council voted to approve the withdrawal of Council New Business Item #23A: Proposal for an American Institute of Psychology.

B.(26G) A new business item “Affirming, Supporting and Disseminating Research on Global Climate Change” was referred to BSA.

C.(26H) A new business item “Affirming Research on Global Climate Change” was referred to BSA.

XII. PUBLIC INTEREST

A.(20) Council voted to receive the Final Report of the Task Force on Psychology’s Contribution to End Homelessness.

B.(26A) A new business item “Revision of APA’s Resolution on Homelessness” was referred to the Committee on Socioeconomic Status.

C.(26B) A new business item “Revision of Guidelines for Psychotherapy with Lesbian, Gay and Bisexual Clients” was referred to the Board for the Advancement of Psychology in the Public Interest, BPA, CAPP and COLI.

D.(29) Council received an update on the business pending item “APA Resolution to Promote Well-Being and Alleviate Psychological Risk Factors for Immigrants.”

E.(30) Council received an update on the business pending item “Value Neutral Language for End-of-Life Choices.”

XIII. ETHNIC MINORITY AFFAIRS

A.(34) Council received as information an update on CEMRRAT2 Task Force 2009 Activities.

XIV. INTERNATIONAL AFFAIRS

No items.

XV. CENTRAL OFFICE

A.(26I) A new business item “Update Annual Report on Environmental Issues” was referred to the Finance Committee.

B.(35) Council received as information the 2009 Report on Environmental Issues.

C.(35A) Council received as information a Report on APA’s Ongoing Efforts to Implement the Petition Resolution Policy.

XVI. FINANCIAL AFFAIRS

A.(21) Council voted to approve a 2010 Budget with Revenues of \$114,424,000 (after recognition of \$3.5 cash flow from the buildings), Expenses of \$113,524,600 and an Operating Safety Margin of \$899,500.

B.(22) Based on the 2010 Budget and the 2010-2012 projections, Council voted to adopt the following Net Asset Allocation Plan including the 2010-2012 Financial Forecast:

1. The goal for attainment of net assets as stated in Association Rule 210-3 is reaffirmed; namely, that the Association strives to maintain net assets equal to at least one year's operating budget..
2. Consistent with accounting practices, conventional wisdom and comparable financial data from other organizations, the Association should not consider any portion of theoretical building equity toward attainment of the net assets goal mentioned in item 1 above.
3. Currently, rather than specifically set aside funds outside the normal budget process for development of programs deemed to be of high priority to the membership, the Association enthusiastically supports consideration of proposals (in the form of a business plan) for new revenue generating ideas. *[Such proposals for new revenue generating ideas should be thoroughly detailed including all direct costs, indirect costs, and staff costs. Such proposals reviewed by the FC, the Board and approved by the Council, will be funded out of ongoing revenues or out of the Association's net assets, as necessary, assuming that full consideration is also given to the impact of such funding on progress towards the Association's net assets goal mentioned in item 1 above.]*
4. Each year, based on actual results and an analysis of our net assets, future financial forecasts and the net asset allocation plan will be adjusted accordingly.
5. Once the net assets goals are attained, any number of future actions can be taken including the long-term stabilization of dues; the long-term availability of funds for the development of programs deemed to be of high priority to the membership; further apportionment of building and investment proceeds toward operational expenses, etc.
6. The specific financial forecast for 2010 – 2012 is as follows:
 - a) Strive to attain a net asset goal equal to at least one year's operating budget consistent with Association Rule 210-3;
 - b) Include \$3.5M net cash flow from building operations in the operating budget as a regular source of revenue (consistent with Council's action of February 2008);
 - c) Restrict capital expenditures to no more than \$10M over the forecast period;
 - d) Continue to reinvest net realized gains/losses from our long-term portfolio activity;
 - e) Rather than reinvesting all interest/dividends from our long-term portfolio activity, the forecast assumes that long-term interest/dividends be transferred to supplement operations during the entire forecast period 2010- 2012;
 - f) Treat Federal income tax expenses as non-operating activity;
 - g) Treat all real estate cash flow in excess of \$3.5M annually from building operations as an increase to net assets (increase to investment and/or debt extinguishment) after the operating line of credit has been paid off;
 - h) Continue to pay down the long-term debt; no sale of our real estate is anticipated during this forecast period;
 - i) To present annual budgets that are consistent with Association Rule 210-2.1 that call for a surplus of between 1% and 2% of budgeted revenues (after consideration of the cash flow from buildings) in order to provide a basis for orderly expansion of operations and services in successive years and to provide a margin of safety against contingencies.

C.(23) Council voted to approve the revised the Long-Term Investment Policy.

D.(24) Council voted to approve the revised Selected Spending Policy Guidelines (formerly referred to as the Responsible Spending Policy). Council also voted to extend the suspension of the annual CPI increase for 2010 and request that the 2010 honoraria for all Board members remain at the 2009 levels.

E.(25) In executive session, Council discussed the report of APA employee contracts and staff compensation.

F.(36) Council received as information the 12th Annual Real Estate Report.

G.(37) Council received as information the 2008 IRS Tax Form 990.

H.(38) Council received as information the minutes of the July 23, 2009, and November 20 & 21, 2009, Finance Committee meetings.

On Saturday afternoon, Council met in Executive Session to receive the Recording Secretary's annual report regarding the CEO performance evaluation and the Treasurer's annual report regarding CEO compensation. The Treasurer also presented the Report of APA Employee Contracts and Staff Compensation provided every third year as mandated by Council.

COUNCIL OF REPRESENTATIVES

February 23-25, 2001

APPROVED MINUTES

I. MINUTES OF MEETING

A.(1) Council voted to approve the minutes of the August 3 & 6, 2000, Council of Representatives meeting.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(2) Council voted to approve amending Association Rule 110-7., Guidelines for the Conduct of President-Elect Nominations and Elections, as follows (underlined material to be added):

A. Eligibility, Published Statements, Campaign Restrictions

3. Call to membership of potential presidential nominees. An announcement will be made in the December *Monitor* informing potential presidential nominees of the opportunity to speak at the February Council meeting and to submit a brief statement (50 words or less) that would accompany the President-Elect Nomination ballot. The deadline for submission of the statement will be January 15.

(Note: Subsequent paragraphs of the Guidelines will be renumbered.)

B.(3) Council voted to approve the withdrawal of new business item #23J, "New Member Slates for Committees."

C.(3A) Council voted to approve the withdrawal of new business item #30D, "Creation of a New Member Category."

D.(53) The new business item "Elections and Nominations for the Board of Directors" was referred to the Election Committee, the Board of Scientific Affairs (BSA), the Policy and Planning Board (P&P), the Committee for the Advancement of Professional Practice (CAPP) and the Committee on the Structure and Function of Council (CSFC)

E.(54) The new business item "Elections to APA Governance by Members of the Council of Representatives other than the Board of Directors" was referred to the Election Committee, CAPP and CSFC.

F.(58A) The new business item "Cost of 2001 APA Directory" was referred to the Membership Committee and the Publications and Communications Board (P&C).

G.(68) Council received an update on the new-business-in-progress item "New Criteria for Dues-Exempt Status."

III. ETHICS

A.(4) Council discussed the report of the Ethics Committee regarding adjudication process reforms. Ethics Chair Robert Kinscherff, PhD, JD, and Board members Ronald F. Levant, EdD, and Ruth Ullmann Paige, PhD, provided brief presentations to the Council prior to its discussion.

B.(59) Council discussed recent activities concerning the Ethics Code Revision. Celia Fisher, PhD, provided a brief presentation to Council prior to its discussion.

C.(60) Council received information on stipulated resignations.

IV. BOARD OF DIRECTORS

A.(5) Council voted to reject the following main motion of new business item #32A:

All Council motions, properly submitted under the rules of the Association, shall be brought to the floor of Council for vote within three years of submission.

B.(6) Council voted to refer the item "Turnaround Time Council Business Items" and the proposed "Resolution on Attending to New Business" to the Committee on the Structure and Function of Council and requested that the item come back to Council in August 2001.

C.(7) Council voted to reject the following main motion of new business item #32G:

That the document listing the new business in progress items be distributed to Council members along with the agenda book, and that Council members be given a form to notify the president that they are requesting that one or more of the items be moved to the agenda for Council's deliberation (prior to the formal adoption of the agenda by Council).

D.(8) Council voted to reject the following main motion of new business item #23K:

Each Council meeting shall include at least one breakout session where members shall discuss current major issues facing the profession and the Association.

E.(9) Council voted to approve the withdrawal of new business item #30A, "Fostering Career Development of Young Professionals."

F.(39) Council voted to approve the addition of the word "health" to APA's Mission Statement, Article 1 of the APA Bylaws (underlined materials to be added):

Article I :Objects

The objects of the American Psychological Association shall be to advance psychology as a science and profession and as a means of promoting health and human welfare by the encouragement of psychology in all its branches in the broadest and most liberal manner; by the promotion of research in psychology and the improvement of research methods and conditions; by the improvement of the qualifications and usefulness of psychologists through high standards of ethics, conduct, education, and achievement; by the establishment and maintenance of the highest standards of professional ethics and conduct of the members of the Association; by the increase and diffusion of psychological knowledge through meetings, professional contacts, reports, papers, discussions, and publications; thereby to advance scientific interests and inquiry, and the application of research findings to the promotion of health and the public welfare.

The amendment will be forwarded to the membership for a vote in April 2001. Council voted to not include a pro/con statement with the Bylaw Amendment Ballot.

G.(40) The item "Request for Contingency Funds to Support a Meeting to Reconsider the APA Policy that Prohibits Advertisements from the U.S. Military in APA Media" was withdrawn.

H.(58E) The new business item "Streamlining the Presentation of Information to Members of Council" was referred to CSFC.

I.(69) Council received an update on the new-business-in-progress item "Resolution on the Death Penalty."

V. DIVISIONS AND STATE AND PROVINCIAL ASSOCIATIONS

A.(10) Council voted to approve the Division of Clinical Child Psychology, Division 53 of the American Psychological Association, as a permanent APA division.

B.(11) Council voted to approve the Division for the Society of Pediatric Psychology, Division 54 of the American Psychological Association, as a permanent APA division.

C.(55) The new business item "Guidelines for Education and Training at the Doctoral and Post-Doctoral Level in Consulting Psychology-Organizational" was referred to the Board of Educational Affairs (BEA), BPA and the Committee on Legal Issues (COLI).

D.(56) The new business item "Guidelines for Provision of Humanistic Psychology" was referred to BPA and COLI.

E.(70) Council received an update on the new-business-in-progress item "Amend APA Rule 100-2.1 for Signing Petitions to APA Council in Order to Permit Electronic Endorsements for Petitions for New Divisions."

F.(71) Council received an update on the new-business-in-progress item "Division Petition."

VI. ORGANIZATION OF THE APA

A.(12) Council voted to reject the following main motion of new business item #26E:

That the Association Rules 110-15.1 and 110-16.1 be amended to describe the composition of standing boards and committees and continuing committees of the association to require that: "Except for members of the public selected to represent societal interests, all those elected to serve on standing boards and committees or continuing committee of the association shall be members of the association. Resignation or expulsion from membership automatically terminates any term of service on such boards or committees."

B.(13) Council voted to approve amending Association Rule 50-3.1 as follows (bracketed material to be deleted; underlined material to be added):

50-3. AD HOC GROUPS

50-3.1 The standing boards and committees and continuing committees [shall] may, in exceptional circumstances, appoint, for designated time periods, such ad hoc groups (e.g., task forces, work groups, ad hoc committees, subcommittees) as may be necessary. [The term of ad hoc groups shall expire at the close of the annual meeting following their appointment, unless they complete their assignment and are discharged earlier. If the appointing board or committee wishes the continuance of an ad hoc group, it shall so report to Council. Ad hoc groups reported by a board or committee may be included in an official list of ad hoc groups. A formal vote by Council is not necessary to establish an ad hoc group, unless the appointing board or committee

requests special powers for the ad hoc group beyond the competence of the board or committee to grant.]

If funding is already available for an ad hoc group, the Board of Directors shall be informed at its next meeting of the establishment of the group and provided with a description of the following: purpose; progress to date; membership roster (if available); duration of the group's appointment; funding amount and source of funding. If new funding is needed for the ad hoc group, prior approval must be obtained from the Council of Representatives or Board of Directors as appropriate. The request for approval shall include a description of the following: purpose; membership roster (if available); duration of the group's appointment; funding amount required and the source from which funding is requested. Requests for Council contingency funds or for funds to be added to the budget require Council approval.

If the appointing body determines that an ad hoc group should continue beyond its initially designated term, the Board of Directors shall be informed at its next meeting and shall be advised of the group's progress; the new designated time period; and the amount and source of funds. If funding is needed for the group's continuance, prior approval must be obtained from the Council of Representatives or Board of Directors as appropriate.

The Council of Representatives shall receive a listing annually of all ad hoc groups as an integral part of the budget document.

C.(14) Council voted to approve the withdrawal of new business item #23B, "Governance Renaissance Plan: Board and Committee Structure."

D.(15) Council voted to approve the withdrawal of new business item # #23E, "Governance Renaissance Plan: Board of Directors."

E.(16) Council voted to approve the withdrawal of new business item # #23F, "Governance Renaissance Plan: Policy and Planning Board."

F.(17) Council voted to approve the withdrawal of new business item #23G, "Governance Renaissance Plan: Committee on International Relations in Psychology."

G.(18) Council voted to approve the withdrawal of new business item #23H, "Governance Renaissance Plan: National College of Professional Psychology."

H.(19) Council voted to approve the withdrawal of new business item #23I, "Governance Renaissance Plan: Commission for the Recognition of Specialties and Proficiencies in Professional Psychology."

I.(20) Council voted to approve the withdrawal of new business item #23J, "Governance Renaissance Plan: Committee on Division/APA Relations."

J.(21) Council voted to approve the withdrawal of new business item #23K, "Governance Renaissance Plan: Committee on Legal Issues."

K.(41) Council voted to approve the following motion:

The Council of Representatives directs the Research Office to develop a method of determining association priorities at a regularly scheduled interval. Data gathering should include a variety of member and APA staff groups similar to those used in the 1998 P&P Information Request. Results of this survey should be reported widely, but specifically to the Policy and Planning Board for its use in long-range planning and to the Board of Directors and the Council of

Representatives for their use in determining association priorities and initiatives. Council allocates \$8,500 from its 2001 contingency fund for the cost of conducting the survey.

L.(42) Council voted to reject the following main motion of new business item #230:

That the Council of Representatives establish an Office of APA Ombudsman to facilitate direct communications with individual members who seek an avenue by which their concerns can be addressed and to publicize the existence of this office in the *APA Monitor* and the *American Psychologist*.

M.(58B) The new business item "Work Group to Study Equity Between Divisions and Affiliates of the Numbers of Members and Representation on Council" was referred to P&P, the Committee on Division/APA Relations (CODAPAR), BSA, CAPP and CSFC.

N.(58J) The new business item "Better Articulation Between the Council of Representatives and its Board and Committee Structure" was referred to CSFC and P&P.

O.(61) Council received as information the Report of the Task Force on Council Representation 2.

P.(72) Council received an update on the new-business-in-progress item "P&P/Panel Governance Renaissance Plan: Redesign of the Council of Representatives."

P.(73) Council received an update on the new-business-in-progress item "P&P/Panel Governance Renaissance Plan: Using Division Expertise."

Q.(74) Council received an update on the new-business-in-progress item "Change in Council's Name."

R.(75) Council received an update on the new-business-in-progress item "Council Seats for State Associations and Divisions."

S.(76) Council received an update on the new-business-in-progress item "APA Policy on Utilization of Technology."

VII. PUBLICATIONS AND COMMUNICATIONS

A.(22) Council voted to approve Division 18's proposal to publish a division journal.

B.(61A) Council received as information a publications update. The Publications and Communications (P&C) Board met twice in 2000: March 31-April 1, 2000 and October 28-29, 2000. Janet Shibley Hyde, PhD, served as 2000 Chair, and Sara Kiesler, PhD, as Co-Chair. The P&C Board continued its policy oversight of the Association's major knowledge and information dissemination programs: The APA Journals program, PsycINFO database products and services, the APA Books program, and APA Internet Services. The P&C Board made 5 editor appointments in 2000 for new editors, naming the following as editors: Steve West, PhD, (**Psychological Methods**); Stephen Lindsay, PhD (**JEP: General**); Phillip L. Ackerman, PhD (**JEP: Applied**); John F. Disterhoft, PhD (**Behavioral Neuroscience**); James T. Becker, PhD (**Neuropsychology**). The P&C Board opened 5 editor searches in 2000 for the following journals: **Journal of Applied Psychology**; **Psychological Bulletin**; **Journal of Educational Psychology**; **Journal of Consulting and Clinical Psychology**; **Journal of Personality and Social Psychology: Interpersonal**. Six APA journal special issues were published in 2000: the January issue of the **American Psychologist** (Special Issue on Happiness, Excellence, and Optimal Human Functioning); a supplemental special issue of the January issue of **Health Psychology** (Maintenance of Behavior Change in Cardiorespiratory Risk Reduction); the June issue of **Professional Psychology: Research and Practice** (Training and Employment of Professional Psychologists); the August issue of **Experimental and Clinical Psychopharmacology** (The Decade of Behavior: Psychopharmacology and

Substance Abuse Research); the September issue of the **Journal of Family Psychology** (Cultural Variation in Families); and the November issue of **Psychological Bulletin** (Psychology in the 21st Century). Three EPF special issues were published in 2000: the January issue of **Group Dynamics** (One Hundred Years of Groups Research); the winter issue of **Consulting Psychology Journal** (Consulting to Team-Based Organizations); and the June issue of **Review of General Psychology** (Adult Attachment). The P&C Board continued to discuss and evaluate policies and practices involving the online display and dissemination of information, revisiting the interim policy on pre-print posting of journal articles and evaluating the APA web sites featuring APA books, journals, and PsycINFO products and services. Digitization for the APA and EPF journals continued in 2000, adding the 1988 records along with the 2000 issues as they came off press. The Full-text Journal Article database will have 12 years of records at the beginning of 2001. The APA Full-Text Article database and the APA-provided PsycINFO abstract database were well used by members in 2000. Over 10,200 individuals requested one of the fee-for-access programs, an increase of 10% from 1999. Subscriptions closed out the year with approximately 356,935 APA and 18,586 EPF paid subscriptions. The APA Books Program released 50 books copyrighted in 2000. Magination Press released 10 new children's books. The 8-volume APA/Oxford University Press encyclopedia came off press in spring 2000. The **APA Monitor** transition to the magazine format **Monitor on Psychology** was completed and the first issue came off press in January 2000. There was a reorganization of the Sales, Advertising, and Marketing department in fall 2000; a new Director of Sales and Marketing and a new Marketing Manager were hired. Sales and marketing staff directly promoting APA information products completed in 2000 one major book catalog, as well as catalogs for Magination Press and APA/EPF journals. More than 25 direct mail campaigns promoted books and journals in specific areas. APA publications were also promoted in bookstore operations and in exhibit booth engagements. The DC convention store gross sales were \$159,557. Total advertising sales for 2000 reached nearly \$3,100,000 or more than \$280,400 above the 1999 year end figure of \$2,819,600. Exhibit sales that were also supported by Advertising staff reached \$441,000 or nearly \$18,000 more than in 1999 when the total was \$423,000. PsycINFO developed a new resource for locating audiovisual productions relevant to psychology. A printed volume, *Videos in Psychology: A Resource Directory*, containing summaries of more than 900 videos, was published in March 2000. PsycVIDEO™, an electronic version of the video publication with more than 2,000 videos, was offered in December 2000 to APA members who purchased access to the Online Member Services platinum package and to the general public in January 2001. *PsycSCAN: Psychopharmacology*, a new searchable online collection of abstracts drawn from the PsycINFO database, was launched in May 2000. It is designed to provide access to the latest research in experimental and clinical psychopharmacology and is being marketed to APA members, non-members, and organizations such as clinics and federal agencies. On October 1, 2000 APA's new pricing model for the PsycINFO® site lease program went into effect. The structure is an annual access fee based on the number of potential users at each site. The model has encouraged small- and mid-sized institutions to lease access to the full PsycINFO database. Also in October, the PsycINFO database became APA's single comprehensive secondary database. The PsycLIT® CD-ROM product was changed to PsycINFO site leasing with a focus on online and Internet access. All PsycLIT customers were migrated to a PsycINFO site lease on their renewal dates. The PsycINFO database began offering weekly updates in June 2000. A fully reloaded database that includes new features such as links to full text, journal publisher location, publisher URL, country of publication, and coverage of electronic journals was sent to vendors in November 2000. As of January 2001, PsycINFO has 2484 institutional leases and licenses. In summer and fall 2000, APA beta-tested PsycARTICLES™—the APA full-text database—with two libraries and one consortium. APA continued to offer the database to APA members via the Online Member Services web site. Colleges participating in the Small College Access program now have subscription rights to the full PsycINFO and PsycARTICLES databases. The 9th Edition of the *Thesaurus of Psychological Index Terms* was added to the PsycINFO database with the November reload and will be off press as a print product in February 2001.

VIII. CONVENTION AFFAIRS

A. Council discussed preliminary information, provided by William C. Howell, PhD, Chair of the Board of Convention Affairs, on plans to restructure the annual convention beginning in 2002. Council was

informed that the Council meeting will take place on Wednesday, August 21 and Sunday, August 25 during the 2002 Convention in Chicago, IL.

IX. EDUCATIONAL AFFAIRS

A.(23) Council voted to approve the proposed changes to the *Approval of Sponsors of Continuing Education for Psychologists: Criteria and Procedures Manual* (bracketed material to be deleted; underlined material to be added):

Section II: TERMS OF APPROVAL

A. Responsibilities of the Approved Sponsor to APA

3. Sponsors must submit [Interim] Status Reports

APA-approved sponsors must submit [Interim] Status Reports of their CE activities after 1 year of approval notice. Status Reports should cover[ing] such items as effectiveness of planning procedures, results of needs assessment and evaluations, any changes in administration or activities since initial application, copies of promotional or informational materials, and responses to issues raised in the most recent letter of approval. "Requirements for [Interim] Status Reports" will be included in a start-up packet sent to newly-approved sponsors. [Interim] Status Reports are due [midway through the approval cycle] from sponsors approved for 2- and 5-year [approvals] cycles after their first year of approved status. Conditionally approved sponsors will not submit [Interim] Status Reports, because they will be reapplying at the end of 1 year. Sponsors will be notified in advance of the due date. Failure to submit [Interim] Status Reports will cause probation and may result in termination of approval.

B. (24) Council voted to reject the following main motion of new business item #26B:

Moved to amend the Policies for Accreditation Governance of the American Psychological Association's Committee on Accreditation to add "Section 6(e): The Committee on Accreditation shall require that all members of site visiting teams be members of the Association.

C.(25) Council voted to reject the following main motion of new business item #33 and the substitute motion which added the phrase "in his or her role as teacher or administrator" after "civil or criminal misconduct" to the end of line 3 of the main motion:

No psychologist whose license to practice psychology has been suspended or revoked by a state or provincial licensing authority; who has been disciplined by the APA Ethics Committee; or who has been adjudicated in state or federal court to have engaged in civil or criminal misconduct causing harm to a student or other person associated with a training program may be permitted to serve in any evaluative capacity associated with the APA accreditation process. This bar to service shall include service on any board, committee, or task force of the Association that has authority for accreditation matters, service as a site visitor, or service as an accreditation trainer for the Association.

D.(26) Council voted to approve the following motion regarding the report and recommendations of the Commission on Education and Training Leading to Licensure in Psychology:

That the Council of Representatives receives the report of the Commission and expresses its gratitude to the Commission for its efforts and that the Council refers the report and recommendations of the Commission to all APA governance groups, Divisions, State and Provincial Psychological Associations, and relevant external organizations, for their discussion and recommendation, with specific instructions to consider ways to ensure eligibility for licensure

for psychologists in all areas of the profession.

Council referral does not imply any endorsement of the Commission report, recommendations, or statement of proposed policy. The products of the Commission do not represent APA policy. Referring the report to APA governance groups, Divisions, SPPAs and relevant external organizations is intended to generate comments to inform further Council discussion and action on the Commission recommendations.

E.(58I) The new business item "Resolution on the Accreditation of the Newly Emerging Substantive Area of Clinical Child Psychology at the Predoctoral Level" was referred to BEA, BAPPI, BPA, P&P and the Committee on Children, Youth and Families (CYF).

F.(58K) The new business item "Impact of School Size on Psychological Well-Being and Educational Achievement of Students" was referred to BEA, BAPPI and CAPP.

G.(77) Council received an update on the new-business-in-progress item "Future Composition of the Committee on Accreditation."

H.(78) Council received an update on the new-business-in-progress item "Interval Review of Committee on Accreditation Effectiveness."

I.(79) Council received an update on the new-business-in-progress item "Greater Autonomy for Committee on Accreditation."

J.(80) Council received an update on the new-business-in-progress item "Education and Training Standards."

X. PROFESSIONAL AFFAIRS

A.(27) Council voted to approve the strategic plan as developed by CAPP of publishing information, developing conference programs and facilitating meetings among parties of interest, for helping to provide a climate within which existing mechanisms for professional mobility can continue to develop.

B.(43) Council voted to approve the affiliation of the Guam Psychological Association with the American Psychological Association.

C.(44) Council voted to allocate \$35,000 from its 2001 contingency fund to strategically assist states well positioned to pass a prescriptive authority bill this year.

D.(57) The new business item "Guidelines for Multicultural Counseling Proficiency for Psychologists" was referred to BPA, BAPPI, BEA, BSA, CAPP, CEMA and COLI.

E.(58D) The new business item "Creation of a Task Force on Health Care Policy" was referred to CAPP, BPA and P&P.

F.(58G) The new business item "Primary Care Psychology" was referred to CAPP, BEA, BPA and BSA.

G.(58H) The new business item "Changes in Association Rules Regarding the Promulgation of Guidelines" was referred to BPA, BEA, BSA, P&P, CAPP, COLI and CODAPAR.

H.(58L) The new business item "Re-Title Guidelines" was referred to BPA and COLI.

I.(62) Council received information regarding the proposed amendment to Association Rule 130-3 to Add the American Psychological Association Award for Distinguished Contributions to Mental Health Services.

J.(62A) Council discussed an update on Guidelines activities.

K.(81) Council received an update on the new-business-in-progress item "Coalition Building to Design and to Implement Health Care Reform."

L.(82) Council received an update on the new-business-in-progress item "Board Certification for Psychologists in Applied Fields of Specialization in Professional Psychology."

M.(83) Council received an update on the new-business-in-progress item "Information Services for Practitioners."

N.(84) Council received an update on the new-business-in-progress item "The Task Force on Implementation of Primary Health Care Policy."

O.(85) Council received an update on the new-business-in-progress item "Coordination of Trauma Activity within APA."

XI. SCIENTIFIC AFFAIRS

A.(28) Council voted to approve amending Association Rule 140-4.1 as follows (bracketed material to be deleted; underlined material to be added):

140-4 COMMITTEE ON ANIMAL RESEARCH AND ETHICS

140-4.1 "There shall be a Committee on Animal Research and Ethics whose responsibility it shall be to (a) safeguard responsible [animal experimentation] research with animals, other than humans, and [to] establish and maintain cooperative relations with [other] organizations sharing common interests, (b) disseminate in cooperation with other organizations accurate information about [animal experimentation] such research, (c) review the ethics of [animal experimentation] such research and recommend guidelines for [the] its ethical conduct [of research, and appropriate care of animals in research], and (d) disseminate, in cooperation with other organizations, guidelines for protecting the welfare of animals, other than humans, that are used in research, teaching, and practical applications, and to consult on the implementation of these guidelines.

The Committee shall consist of six members, two of whom shall be elected each year for a term of three years. The Committee shall report to Council through the Board of Scientific Affairs."

B.(45) The item "Task Force on Psychological Testing on the Internet" was withdrawn.

XII. PUBLIC INTEREST

A.(29) Council voted to reject the following main motion of new business item #21:

Council of Representatives' motions proposing that the American Psychological Association go on record on public interest and/or social policy positions be made into two sections:

1. On the main purpose and intent of the motion; and
2. On specific ways and means of implementation including which APA directorates, departments and committees shall assume the responsibilities.

Consideration of the second motion shall immediately follow the passage of the first or in the best interest of the spirit of the first, be added to the upcoming C/R legislative agenda.

B.(30) Council voted to adopt the following resolution:

Resolution on Assisted Suicide

Whereas the issue of assisted suicide is complex, involving areas of ethics, religion, medicine, psychology, sociology, economics, the law, public policy, and other fields; and

Whereas in the United States there is significant social stratification related to cultural, ethnic, economic, gender, and religious differences; and

Whereas these differences in our society are associated with an equally diverse range of views regarding assisted suicide; and

Whereas in the United States decisions about assisted suicide are made in the context of serious social inequities in access to resources such as basic medical care; and

Whereas autonomy is an important guiding principle in the law and in psychological and medical aspects of decision-making, but in and of itself is insufficient to capture the full range of complex medical, familial, social, financial, psychological, cultural, spiritual, and legal issues involved in the practice of assisted suicide; and

Whereas there is increasing public support for assisted suicide, but this support is weakest among groups who express concerns about being pressured to die (i.e., older adults, people with less education, women, and ethnic minorities) (Blendon, Szalay, & Knox, 1992); and

Whereas reasonable, well-informed people starting from different positions about costs and gains associated with assisted suicide disagree about the potential effects of legalizing the practice; and

Whereas people with different values and priorities can reach different conclusions about the advisability of assisted suicide; and

Whereas some evidence suggests that there are fluctuations in the will to live (Chochinov, Tataryn, Clinch, & Dudgeon, 1999) and in wishes regarding life-sustaining treatments (Weisman, Haas, & Fowler, 1999); and

Whereas pain and clinical depression are frequently under-treated, which can lead to suffering that may result in requests for assisted suicide (Foley, 1995); and

Whereas evidence suggests that some people rescind their requests for assisted suicide when they receive more aggressive and comprehensive care (Ganzini et al., 2000); and

Whereas psychological, familial, social, and financial factors seem to be more important than physical factors in requests for assisted suicide (Breitbart, Rosenfeld, & Passik, 1996; Emanuel, Fairclough, Slutsman, & Emanuel, 2000; Sullivan, Hedberg, & Fleming, 2000); and

Whereas little empirical data exist to determine the effects of assisted suicide on survivors and on society (Cooke et al., 1998); and

Whereas the empirical database, legal developments, and policy discourse related to assisted suicide are evolving rapidly;

Therefore, be it resolved that the American Psychological Association take a position that neither endorses nor opposes assisted suicide at this time.

However,

Given that psychologists have many areas of competence, including assessment, counseling, teaching, consultation, research, and advocacy skills that could potentially enlighten the discourse about assisted suicide, end-of-life treatment, and support for dying persons and their significant others; and

Given that psychologists could be instrumental in helping health care providers to understand and cope with the concerns and needs of dying individuals and their families; and

Given that practicing psychologists may receive requests to be involved in the education of various groups regarding assisted suicide; and

Given that there is one state in which assisted suicide is legal and psychological or psychiatric assessment and consultation is required under certain circumstances; and

Given that practicing psychologists may be part of multidisciplinary end-of-life care teams including ones exploring requests for assisted suicide;

Let it be further resolved that the American Psychological Association will assist in preparing the profession to address the issue of assisted suicide by taking the following actions:

Advocate for quality end-of-life care for all individuals; and

Encourage and promote the development of research on assisted suicide; and

Monitor legal, policy, and research developments that may require or encourage psychologists to involve themselves in assisted suicide cases; and

Promote policies that reduce suffering that could lead to requests for assisted suicide; and

Promote psychologists' involvement in research on ethical dilemmas faced by clinicians and researchers dealing with issues related to assisted suicide; and

Promote psychologists' participation in multidisciplinary teams and ethics committees involved with reviewing end-of-life requests; and

Encourage psychologists to obtain training in the area of ethics as it applies to end-of-life decisions and care; and

Encourage practicing psychologists to inform themselves about criminal and civil laws that have bearing on assisted suicide in the states in which they practice; and

Encourage practicing psychologists to recognize the powerful influence they may have with clients who are considering assisted suicide; and

Encourage psychologists to identify factors leading to assisted suicide requests (including clinical depression, levels of pain and suffering, adequacy of comfort care, and other internal and external variables) and to fully explore alternative interventions (including hospice/palliative care,

and other end-of-life options such as voluntarily stopping eating and drinking) for clients considering assisted suicide; and

Encourage practicing psychologists to be aware of their own views about assisted suicide, including recognizing possible biases about entitlement to resources based on disability status, age, sex, sexual orientation, or ethnicity of the client requesting assisted suicide; and

Encourage psychologists to be especially sensitive to the social and cultural biases which may result in some groups and individuals being perceived by others, and/or being encouraged to perceive themselves, as more expendable and less deserving of continued life (e.g., people with disabilities, women, older adults, people of color, gay men, lesbians, bisexual people, transgendered individuals, and persons who are poor).

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C.(31) Council voted to adopt the following resolution:

Resolution on End-of-Life Issues and Care for Adults

Whereas the nature of dying and death has changed across the twentieth century, occurring primarily in an institutional setting rather than at home (Benoliel & Degner, 1995); and

Whereas death has become more frequently the result of chronic illness (Battin, 1996); and

Whereas medicine and technology have evolved to the point where the terminal period can be significantly prolonged (Field & Cassel, 1997); and

Whereas there are many more people living longer with terminal diagnoses and thus having more time to make end-of-life decisions; and

Whereas end-of-life decision-making is complex, involving areas of ethics, religion, medicine, psychology, sociology, economics, the law, public policy, and other fields; and

Whereas the population of the United States is aging, resulting in larger numbers of people who may request psychological support in making end-of-life decisions; and

Whereas in the United States there is significant social stratification related to cultural, ethnic, economic, gender, and religious differences; and

Whereas this diversity in our society leads to an equally diverse range of views regarding end-of-life care and decisions; and

Whereas reasonable, well-informed people starting from different values and priorities concerning what is valuable at the end of life can and do hold different positions regarding end-of-life care and decisions; and

Whereas autonomy is an important guiding principle in the law and in medical, ethical, and psychological aspects of decision-making, but in and of itself is insufficient to capture the full range of complex medical, familial, social, financial, psychological, cultural, spiritual, and legal issues involved in end-of-life decision-making; and

Whereas there is increasing public support for control over end-of-life decisions but this support is weakest among groups who express concerns about being pressured to die (i.e., older adults, people with less education, women, and ethnic minorities) (Blendon, Szalay, & Knox, 1992); and

Whereas in the United States medical end-of-life decisions are made in a context of serious social inequities in access to resources such as basic medical care; and

Whereas some evidence suggests that there are fluctuations in the will to live (Chochinov, Tataryn, Clinch, & Dudgeon, 1999) and in wishes regarding life-sustaining treatments (Weisman, Haas, & Fowler, 1999); and

Whereas pain and clinical depression are frequently under-treated, which can lead to suffering that may result in requests for, or assent to, medical interventions that affect the timing of death (Foley, 1995); and

Whereas more people are aware of the possible benefits to be gained by using psychological services to help them make end-of-life decisions; and

Whereas psychology has been largely invisible in the end-of-life arena; and

Whereas psychologists have many areas of competence, including assessment, counseling, teaching, consultation, research, and advocacy skills that could potentially contribute to the science of end-of-life care and to the treatment and support of dying persons and their significant others; and

Whereas psychological research on end-of-life issues is limited in comparison with the magnitude of the issue; and

Whereas there have been no systematic efforts to educate psychologists about end-of-life issues; and

Whereas psychologists in clinical practice have not typically been involved in end-of-life decisions to the degree that they could be; and

Whereas psychologists could assume a significant role in helping health care providers to understand and cope with the concerns and needs of dying individuals and their families; and

Whereas psychologists could be instrumental in supporting public education efforts to raise awareness of issues related to dying, death, grief, mourning, and loss;

Therefore, be it resolved that the American Psychological Association, an organization committed to promoting the psychological well-being of individuals across the life span, should redress psychology's historical under-commitment to end-of-life care by actively promoting and supporting psychology's involvement in end-of-life care. In order to advance this involvement, be it further resolved that the American Psychological Association:

Promote and encourage research and training in the area of end-of-life issues within psychology programs at all levels; and

Encourage and promote the development of a research agenda on end-of-life issues; and

Support efforts to increase funding for research associated with end-of-life issues; and

Encourage psychologists to obtain training in the area of ethics as it applies to end-of-life decisions and care; and

Promote and facilitate psychologists' acquisition of competencies with respect to end-of-life issues, including mastery of the literature on dying and death and sensitivity to diversity dimensions that affect end-of-life experiences; and

Encourage practicing psychologists to be aware of their own views about the end of life, including recognizing possible biases about entitlement to resources based on disability status, age, sex, sexual orientation, or ethnicity of the client making end-of-life decisions; and

Encourage psychologists to be especially sensitive to the social and cultural biases which may result in some groups and individuals being perceived by others, and/or being encouraged to perceive themselves, as more expendable and less deserving of continued life (e.g., people with disabilities, women, older adults, people of color, gay men, lesbians, bisexual people, transgendered individuals, and persons who are poor); and

Support interdisciplinary efforts to increase the competency of psychologists and other health care professionals in end-of-life issues; and

Promote quality end-of-life care including palliative care, access to hospice services, support for terminally ill people and family members, accurate assessment of depression and cognitive capabilities of dying persons, and assistance with end-of-life decision-making; and

Advocate for access to, and reimbursement for, professional mental health services for seriously ill individuals and their families; and

Promote and support public policies that provide for the psychosocial services for dying individuals and their families; and

Support psychologists who wish to participate in ethics committees dealing with end-of-life issues; and

Support psychologists as they work cooperatively with caregivers, medical providers, and multidisciplinary teams to enhance understanding of the psychological aspects of dying and death and to improve quality of care for the dying; and

Endorse the following principles on end-of-life care as articulated in the Institute of Medicine Report entitled *Approaching Death: Improving Care at the End of Life* (Field & Cassel, 1997):

- Care for those approaching death is an integral and important part of health care;
- Care for those approaching death should involve and respect both patients and those close to them;
- Good care at the end of life depends on clinicians with strong interpersonal skills, clinical knowledge, technical proficiency, and respect for individuals, and it should be informed by scientific evidence, values, and personal and professional experience;
- The health community has a special responsibility for educating itself and others about the identification, management, and discussion of the last phase of fatal medical problems;
- More and better research [in the areas of biomedical, clinical, psychosocial, and health services] is needed to increase our understanding of clinical, cultural, organizational, and other practices or perspectives that can improve care for those approaching death;
- Changing individual behavior is difficult, but changing a culture or an organization is potentially a greater challenge -- and often is a precondition for individual change.

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sustaining care among persons with AIDS in the Boston Health Study. Medical Decision Making, 19, 16-26.

D.(32) Council voted to approve the withdrawal of new business item #30J, "Convention Projects in Site Cities."

E.(33) Council voted to approve the withdrawal of new business item #34A, "Physician Assisted Suicide."

F.(46) Council voted to allocate \$4,700 from its 2001 contingency fund to support a School Superintendents Forum, to be held in conjunction with APA's 2001 annual convention in San Francisco.

G.(47) Council voted to allocate \$13,200 from its 2001 contingency fund to support two meetings of the APA Task Force on Advertising and Children.

H.(48) Council voted to allocate \$13,200 from its 2001 contingency fund to support two meetings of an APA Task Force on Workplace Violence. The Task Force, housed within the Public Interest Directorate, will be charged with compiling available research information on: 1) the identification of factors that contribute to workplace violence; 2) the impact of workplace violence in today's work force; and 3) features of successful workplace prevention programs which provide suggestions on how to prevent and reduce workplace violence. The Task Force will also be charged with issuing a report which includes an evaluation of current literature on the issue of workplace violence along with recommendations for future actions by APA related to this issue.

I.(58C) The new business item "Rural Children's Mental Health Services" was referred to BAPPI, BPA, CAPP, COLI, CYF and the Committee on Rural Health.

J.(58F) The new business item "APA Commitment to Equal Employment Opportunity and Reporting of EEO/Affirmative Action Statistics" was referred to BAPPI and COLI.

K.(86) Council received an update on the new-business-in-progress item "Proposed Resolution on Creating an APA Council Task Force on Pro Bono Affairs."

XIII. ETHNIC MINORITY AFFAIRS

A.(34) Council voted to adopt the following resolution:

Resolution on Racial/Ethnic Profiling and Other Racial/Ethnic Disparities in Law and Security Enforcement Activities

Whereas psychologists are ethically guided to "respect the fundamental rights, dignity, and worth of all people" (Ethical Principles of Psychologists and Code of Conduct, American Psychological Association, 1992, Principle D, p. 3-4); and

Whereas "psychologists are aware of their professional and scientific responsibilities to the community and the society in which they work and live" (Ethical Principles of Psychologists and Code of Conduct, American Psychological Association, 1992, Principle F, p. 4); and

Whereas the ways in which people react to racial/ethnic differences between themselves and others may reveal racial/ethnic biases; and that the responses to these biases can "operate without conscious intervention or awareness" (Jones, 1997a; Jones, 1997b; Mio & Awakuni, 2000; Ridley, 1995); and

Whereas some law and security enforcement officers may use stereotypical notions to determine alleged suspects of criminal behavior in a variety of circumstances including: traffic stops, border stops, "out of place" stops such as questioning of racial/ethnic minorities in predominantly White

suburban areas and in other locations and venues where law and security officers might perceive ethnic minorities as being “out of place”, disturbances in education environments, and other situations where local, state, or federal law and security enforcement have independent decision making authority (American Civil Liberties Union, 1999; American Psychological Association, 2000; Bachman, 1996; Government Accounting Office, 2000; Harris, 1997; Irving, 1989); and

Whereas it has been reported that members of racial/ethnic minority groups are stopped by police more often than majority group members (American Civil Liberties Union, 1999; Government Accounting Office, 2000; Wordes, Bynum, & Corley, 1994); and

Whereas it has been reported that of people who are stopped, more African Americans and other racial/ethnic minorities report being treated unfairly as compared to White/European Americans (American Civil Liberties Union, 1999; American Psychological Association, 2000; Cervantes, Salgado de Snyder, & Padilla, 1989; Jackson & Volckens, 1998; Norris, 1992; Vrana & Rollock, 1996); and

Whereas reliable statistics regarding the prevalence of racial/ethnic profiling and other racial/ethnic disparities in law and security enforcement activities and research on related psychological effects on victims and communities of color are quite limited (American Psychological Association, 2000);

THEREFORE, be it resolved that the American Psychological Association (APA) advocates for and encourages research efforts to investigate: (a) the role of racial/ethnic bias and stereotyping in traffic stops, other law enforcement activities, and security activities (e.g., airport and border security); (b) the prevalence of racial/ethnic profiling and racial/ethnic disparities in law enforcement and security activities; and (c) related effects on individuals, communities of color, and law and security enforcement officers and agencies. Also, APA should promote programs to increase awareness of local, state, and federal government officials, as well as the public, about issues and concerns related to racial/ethnic profiling and other racial/ethnic disparities in law and security enforcement. APA also should encourage the development of strong community-police relationships. APA also should promote programs that help law/security enforcement agencies recognize and overcome racial/ethnic profiling and other racial/ethnic disparities in law and security enforcement.

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B.(49) Council voted to allocate \$19,800 from its 2001 contingency fund to support one additional meeting in 2001 of the Textbook Guidelines Initiative Work Group.

C.(63) Council received as information the 2nd Annual Progress Report (FY2000: CEMRRAT Grants).

XIV. INTERNATIONAL AFFAIRS

A.(49A) Council voted to adopt the following resolution and allocate \$5,600 from its 2001 contingency fund to support the establishment of a six-person working group as outlined in the resolution.

APA Resolution on UN Convention on the Rights of the Child and the Convention's Optional Protocols

WHEREAS psychologists have ethical duties to promote human dignity and welfare;

WHEREAS the UN Convention on the Rights of the Child provides a comprehensive policy framework for the protection of the dignity of children;

WHEREAS research shows that ratification of the Convention frequently leads to governments' thoughtful review of policies affecting children and to the formation of coalitions of organizations interested in the well-being of children;

WHEREAS the Convention provides for the establishment of systems to monitor the well-being of children in diverse contexts;

WHEREAS psychologists may contribute to the development and enhancement of such systems for data collection and analysis;

WHEREAS psychologists may also contribute to the design and evolution of structures for children's participation in their communities and of programs to enhance respectful service delivery for children and their families;

WHEREAS the Convention recognizes children's right to a family environment and provides support as a matter of human right for the protection of relationships critical to children's healthy development;

WHEREAS the Convention shows due respect for cultural differences in children's lives and for gender equity in resources available to children;

WHEREAS the Convention provides a framework for humane educational, health, mental health, child welfare, and juvenile justice systems;

WHEREAS psychologists can contribute to an understanding of the nature of, and requisites for, children's sense of dignity;

WHEREAS psychologists can also contribute to the design of systems to ensure children's survival and to promote their healthy development;

WHEREAS the American Psychological Association (APA) has declared the development of a national strategy for the protection of children to be "a matter of the highest urgency";

WHEREAS the United States has signed the Convention but is the only country in the world with a working government that has not ratified the Convention;

WHEREAS APA in 1989 endorsed the "spirit and principles of the UN Convention on the Rights of the Child provided that the language is not used to limit freedom of reproductive choice";

WHEREAS the *travaux preparatoires* (drafting history) of the Convention clarify that such a limitation is not addressed or supported by the Convention;

WHEREAS scores of other national professional, civic, and religious organizations have endorsed US ratification of the Convention;

WHEREAS optional protocols to the Convention -- on involvement of children in armed conflict and on the sale of children, child prostitution, and pornography -- were adopted by the UN General Assembly in 2000;

WHEREAS the United States was one of the first countries to sign these protocols;

WHEREAS psychologists abhor the sexual exploitation of children and the targeting of children in armed conflict and recognize the trauma and degradation often experienced by children in such situations;

THEREFORE BE IT RESOLVED that APA reaffirms its support for the spirit and principles of the Convention on the Rights of the Child and calls on the U.S. Senate to ratify it with due urgency;

BE IT FURTHER RESOLVED that APA affirms its support for the optional protocols to the Convention and calls on the U.S. Senate to ratify them with due urgency;

BE IT FURTHER RESOLVED that, until the Senate ratifies the Convention and its protocols, states and municipalities should adopt the principles in the Convention as guides to their own policies and practices affecting children;

BE IT FURTHER RESOLVED that APA encourages state psychological associations to advocate such action by state legislatures, city and county councils, and state and local school boards;

BE IT FURTHER RESOLVED that APA should apply the principles in the Convention in its own work related to children;

THEREFORE BE IT ENACTED that the APA Committee on International Relations in Psychology shall establish and appoint a working group to examine the implications of the principles in the Convention for psychologists' practice, research, education and advocacy.

XV. CENTRAL OFFICE

A.(64) Council received as information the 2000 Report on Environmental Issues.

XVI. FINANCIAL AFFAIRS

A.(35) Council voted to approve the following motion:

That each Executive Director be directed to update its respective board on the status of the Directorate budget as well as the overall condition of the APA budget on a continuing basis to foster ongoing dialogue. To facilitate this process, each group shall annually have a standing item on its agenda to review and discuss priorities, direction and values of its respective area. It is the feeling of Council that this ongoing dialogue will enhance unified progress toward the agreed upon goals.

B.(36) Council voted to approve the following motion:

In order to enhance the effectiveness of APA's Central Office operations and to maximize the effective use of APA's resources, the Council of Representatives directs the CEO to:

1. Design, in cooperation with the Finance Committee and the Board's Budget Subcommittee, a plan for a systematic evaluation of the efficiency of APA's operations;
2. Identify best practices to deliver services and products in the most efficient manner;
3. Identify appropriate external consultation as needed;
4. Implement new structures and procedures as appropriate; and,
5. Submit progress reports to the Board of Directors, the Finance Committee, the Policy and Planning Board and the Council of Representatives in a timely manner.

C.(37) Council voted to reject the following main motion of new business item #23H:

Staff is directed to undertake a study of the feasibility of a sale/leaseback/ownership reversion plan for APA's properties. A cost/benefit analysis of such a plan shall be reported to the C/R no later than August 2000. As part of such analysis, mechanisms by which APA's assets to be made liquid can be suitably preserved and protected for growth.

D.(38) Council voted to approve the following amendment to Article VIII of the APA Bylaws (bracketed material to be deleted; underlined material to be added):

"8. The Treasurer of the Association shall be a Member of the Association, elected by the immediately previous Council following nominations by the Board of Directors. The Treasurer shall take office for a term of three [five] years, beginning at the end of the fiscal year during which his/her election is announced, and shall not succeed himself/herself in this office more than once...."

The amendment will be forwarded to the membership for a vote in November 2001. Council voted to not include a pro/con statement with the Bylaw Amendment Ballot.

E.(50) Council voted to approve the Proposed 2001 Final Budget calling for revenues of \$86,315,100 and expenses of \$86,626,600 for a net bottom-line deficit of \$311,500.

In addition, the Council voted to approve the following 2000 end-of-year reserve setasides to the extent possible within the 2000 Final Budget approved by Council: 1) Ad Council Campaign (\$150,000), 2) Retiree Gap Health Insurance (\$300,000); 3) Education Leadership Initiative (\$110,000); and Adolescent Girls Film Project (\$150,000).

F.(51) Council voted to approve the change to Section 2.2 of the Responsible Spending Policy calling for the presidential travel to be increased from \$12,000 to \$18,000 and that the president-elect and past president combined travel amounts be increased from \$12,000 to \$15,000.

G.(52) Council voted to postpone to its August 2001 meeting the item "Dues Equity."

H.(65) Council received as information the Annual Review of the APA Employee Compensation Package.

I.(66) Council received as information the December 2000 Finance Committee Minutes.

J.(67) Council received information on APA's real estate investments.

On Friday morning, Patrick H. DeLeon, PhD, JD, was presented with a presidential citation lauding the work he has done in several arenas of top importance to psychologists.

On Friday morning, James Jones, PhD, presented the Affirmative Action Report.

On Friday afternoon, breakout sessions were held on Assessing APA's Priorities. Feedback on the breakout groups was provided to Council on Sunday morning.

On Saturday afternoon, breakout sessions were held on the Commission on Education and Training Leading to Licensure in Psychology. Drs. Levant and Paige provided Council with a brief presentation regarding the Commission prior to the breakout group discussions.

On Saturday afternoon, Council was shown the Ad Council video. Presidential Citations were presented to The Advertising Council and Flashpoint Advertising for their work on the ACT (Adults and Children Together) Against Violence Project.

Resolution Against Torture and Other Cruel, Inhuman, and Degrading Treatment or Punishment

Adopted by APA Council of Representatives, August 9, 2006

That Council adopt the American Psychological Association 2006 Resolution Against Torture and Other Cruel, Inhuman, and Degrading Treatment or Punishment to replace its 1986 Human Rights Resolution relating to torture as policy of the APA.

WHEREAS the existence of state-sponsored torture and other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment has been documented in many nations around the world (e.g., Genefke, 2004; Human Rights Watch, 2006; U.S. Department of State, 2005);

WHEREAS torture victims and victims of other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment may suffer from long-term, multiple psychological and physical problems (e.g., Carlsson, Mortensen, & Kastrup, 2005; Gerrity, Keane, & Tuma, 2001; Hermansson, Timpka, & Thyber, 2003; Kanninen, Punamaki, & Qouta, 2003; Somnier, Vesti, Kastrup, & Genefke, 1992);

WHEREAS psychological knowledge and techniques (e.g., including but not limited to deprivation and disorientation techniques) may be used to design and carry out torture and other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment (e.g., Conroy, 2000; Hovens & Drozdek, 2002; Mossallanejad, 2000);

WHEREAS the Ethical Principles of the APA *Ethical Principles of Psychologists and Code of Conduct* (2002) call upon members of the APA to respect the inherent dignity and worth of the individual and strive for the preservation and protection of fundamental human rights recognizing the equal and inalienable rights of all members of the human family;

WHEREAS in 2000 APA received consultative status as a non-governmental organization (NGO) at the United Nations (UN) in recognition of evidence provided by APA of its efforts to promote human rights;

WHEREAS as an accredited NGO at the UN, the APA is committed to the spirit, purposes, and principles of the Charter of the UN and other relevant international instruments;

WHEREAS APA's status as an accredited NGO at the UN carries the commitment to promote and protect human rights in accordance with the Charter of the UN and the Universal Declaration of Human Rights and to contribute its expertise and resources to the implementation of the various human rights declarations, conventions and other standards of the UN;

WHEREAS, consistent with its history in supporting human rights, in its 1987 Human Rights Resolution, APA issued a strong statement that “the discipline of psychology, and the academic and professional activities of psychologists, are relevant for securing and maintaining human rights”; and undertook to promote knowledge of and compliance with UN instruments by resolving to commend the main UN human rights instruments and documents to the attention of its boards, committees and membership at large;

WHEREAS in its 1986 Resolution Against Torture, APA supported the United Nations Declaration and Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment¹;

WHEREAS the American Psychological Association 1986 Human Rights Resolution is specific in its support for the United Nations Principles of Medical Ethics relevant to the Role of Health Personnel, particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment², which includes Principle 4a,

It is a contravention of medical ethics for health personnel . . . to apply their knowledge and skills in order to assist in the interrogation of prisoners and detainees in a manner that may adversely affect the physical or mental health or condition of such prisoners or detainees and which is not in accordance with the relevant international instruments;

WHEREAS the American Psychological Association 1986 Human Rights Resolution is specific in its support for the joint congressional Resolution opposing torture that was signed into law by President Reagan on October 4, 1984;

WHEREAS in August 2005 APA's Council of Representatives approved the motion to acknowledge Principle 2.2 of the United Nations Convention Against Torture and Other Cruel, Inhuman, and Degrading Treatment or Punishment, which states that

[T]here are no exceptional circumstances whatsoever, whether induced by a state of war or threat of war, internal political instability or any other public emergency, that may be invoked as a justification for torture, including the invocation of laws, regulations, or orders;

BE IT RESOLVED that the APA reaffirms its 1986 condemnation of torture and other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment wherever it occurs;

BE IT RESOLVED that the APA reaffirms its support for the United Nations Declaration and Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment and its adoption of Article 2.2, which states

[T]here are no exceptional circumstances whatsoever, whether induced by a state of war or a threat of war, internal political instability or any other public emergency, that may be invoked as a justification of torture;

BE IT RESOLVED that, in accordance with Article I of the United Nations Declaration and Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment,

[T]he term “torture” means any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted upon a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official [e.g., governmental, religious, political, organizational] capacity. It does not include pain or suffering arising only from, inherent in, or incidental to lawful sanctions [in accordance with both domestic and international law];

BE IT RESOLVED, that the term “cruel, inhuman, or degrading treatment or punishment” means treatment or punishment by a psychologist that, in accordance with the McCain Amendment³, is of a kind that would be “prohibited by the Fifth, Eighth, and Fourteenth Amendments to the Constitution of the United States, as defined in the United States Reservations⁴, Declarations and Understandings to the United Nations Convention Against Torture and Other Forms of Cruel, Inhuman or Degrading Treatment or Punishment done at New York, December 10, 1984.”

BE IT RESOLVED that, based upon the American Psychological Association 1986 Human Rights Resolution, the APA reaffirms its support for the United Nations Declaration and Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment, Principles of Medical Ethics relevant to the Role of Health Personnel, particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment as well as the joint congressional Resolution opposing torture that was signed into law by President Reagan on October 4, 1984, and further supports the McCain Amendment, the United Nations Basic Principles for the Treatment of Prisoners⁵, and the United Nations Principles on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment⁶;

BE IT RESOLVED that based upon the APA's long-standing commitment to basic human rights including its position against torture, psychologists shall work in accordance with international human rights instruments relevant to their roles;

BE IT RESOLVED that regardless of their roles, psychologists shall not knowingly engage in, tolerate, direct, support, advise, or offer training in torture or other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment;

BE IT RESOLVED that psychologists shall not provide knowingly any research, instruments, or knowledge that facilitates the practice of torture or other forms of cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment;

BE IT RESOLVED that psychologists shall not knowingly participate in any procedure in which torture or other forms of cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment is used or threatened⁷;

BE IT RESOLVED that should torture or other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment evolve during a procedure where a psychologist is present, the psychologist shall attempt to intervene to stop such behavior, and failing that exit the procedure;

BE IT RESOLVED that psychologists shall be alert to acts of torture and other cruel, inhuman, or degrading treatment or cruel, inhuman, or degrading punishment and have an ethical responsibility to report these acts to the appropriate authorities;

BE IT FURTHER RESOLVED that, consistent with the August 2005 action of Council, the APA will continually disseminate and publicize this 2006 Resolution Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment, both within the Association (to boards, committees, and the membership at large) and to the wider public.

Expected Outcomes/Products:

An updated Resolution on the use of Torture, and Other Cruel, Inhuman, and Degrading Treatment or Punishment

co-sponsor(s):

Divisions for Social Justice and members of COR: Neil Altman, Jean Lau Chin, Martha Banks, Rosie Bingham, Laurie Wagner, Neil Massoth, Janet Swim, Bernice Lott, Jacqueline White, Division 19 (Society for Military Psychology), and approximately 50 other Council Representatives, see attached.

¹The United Nations Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment (http://www.unhcr.ch/html/menu3/b/h_cat39.htm) is an international human rights instrument intended to prevent torture and other similar activities. According to the Convention, torture is defined as, "any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession,

punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity. It does not include pain or suffering arising only from, inherent in or incidental to lawful sanctions." The Convention also created the UN Committee Against Torture, which focuses on the duties of national leaders to serve in a preventive role concerning the use of torture and other cruel, inhuman, or degrading treatment or punishment.

²The Principles of Medical Ethics relevant to the Role of Health Personnel, particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment (http://www.unhcr.ch/html/menu3/b/h_comp40.htm) is a UN Human Rights Instrument adopted by the General Assembly resolution 37/194 of 18 December 1982. It contains a code of health personnel ethics relevant to the protection of persons subjected to any form of detention or imprisonment against torture and other cruel, inhuman, or degrading treatment or punishment.

³McCain Amendment: Amendment No. 1977 HR 2863, the Defense Appropriations Bill of 2006 introduced by Senator John McCain (http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=2005_record&docid=cr05oc05-19).

⁴Specifically, United States Reservation I.1 of the Reservations, Declarations and Understandings to the United Nations Convention Against Torture (<http://www.unhcr.ch/html/menu2/6/cat/treaties/convention-reserv.htm>) stating, "the term 'cruel, inhuman or degrading treatment or punishment' means the cruel, unusual and inhumane treatment or punishment prohibited by the Fifth, Eighth, and/or Fourteenth Amendments to the Constitution of the United States."

⁵Basic Principles for the Treatment of Prisoners (<http://www.ohchr.org/english/law/basicprinciples.htm>) is a UN Human Rights Instrument adopted and proclaimed by General Assembly resolution 45/111 of 14 December 1990. It contains the minimum standards for treatment of prisoners as human beings as set forth in the Universal Declaration of Human Rights, the International Covenant on Economic, Social and Cultural Rights, and the International Covenant on Civil and Political Rights and the Optional Protocol.

⁶The Principles on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment (<http://www.ohchr.org/english/law/investigation.htm>) is a UN Human Rights Instrument recommended by General Assembly resolution 55/89 of 4 December 2000. The Principles outline recommended procedures related to the documentation of torture and other cruel, inhuman, or degrading treatment or punishment particularly by health care professionals.

⁷Declaration 4 of The World Medical Association Declaration of Tokyo. Guidelines for Physicians Concerning Torture and other Cruel, Inhuman or Degrading Treatment or Punishment in Relation to Detention and Imprisonment (<http://www.wma.net/e/policy/c18.htm>).

References

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SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, AND 30				1. REQUISITION NUMBER 0010271888		PAGE 1 OF 16				
2. CONTRACT NO. W81K00-13-P-0072		3. AWARD/EFFECTIVE DATE 19-Dec-2012		4. ORDER NUMBER		5. SOLICITATION NUMBER		6. SOLICITATION ISSUE DATE		
7. FOR SOLICITATION INFORMATION CALL:			a. NAME			b. TELEPHONE NUMBER (No Collect Calls)		8. OFFER DUE DATE/LOCAL TIME		
9. ISSUED BY GREAT PLAINS REGIONAL CONTRACTING OFFICE USA MEDCOM HCAA 3851 ROGER BROOKE DR BLDG 3600 210-916-5190 FORT SAM HOUSTON TX 78234-6200 TEL: 210-916-5190 FAX: 210-916-3040			CODE W81K00		10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED <input type="checkbox"/> SET ASIDE: % FOR <input type="checkbox"/> SB <input type="checkbox"/> HUBZONE SB <input type="checkbox"/> 8(A) <input type="checkbox"/> SVC-DISABLED VET-OWNED SB <input type="checkbox"/> EMERGING SB SIZE STD: \$6.5m NAICS: 813920			11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) 13b. RATING		12. DISCOUNT TERMS Net 30 Days
15. DELIVER TO AMEDD&CS AMEDDC&S 3630 STANLEY ROAD FT. SAM HOUSTON TX 78234			CODE W45M/W2		16. ADMINISTERED BY GREAT PLAINS REGIONAL CONTRACTING OFFICE MCAA GP BAMC J ESPITIA 3851 ROGER BROOKE BLDG 2539 210-221-3490 FORT SAM HOUSTON TX 78234-6200			CODE W81K00		
17a. CONTRACTOR/OFFEROR AMERICAN PSYCHOLOGICAL ASSOCIATION, INC. 750 1ST ST NE STE 605 WASHINGTON DC 20002-8009 TEL. 202-336-5807			CODE 1PLC7		18a. PAYMENT WILL BE MADE BY DFAS-INDY VP GFEB5 8899 E 56TH STREET INDIANAPOLIS IN 46249-3800			CODE HQ0490		
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER			18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a. UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM							
19. ITEM NO.		20. SCHEDULE OF SUPPLIES/ SERVICES			21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT		
		SEE SCHEDULE								
25. ACCOUNTING AND APPROPRIATION DATA See Schedule						26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$14,999.00				
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3, 52.212-5 ARE ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED										
<input type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4, FAR 52.212-5 IS ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED										
28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES <input type="checkbox"/> TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.					29. AWARD OF CONTRACT: REFERENCE <input type="checkbox"/> OFFER DATED YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:					
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)			31c. DATE SIGNED			
				<i>Melissa F. Oliva</i>			20-Dec-2012			
30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)			30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT) MELISSA F. OLIVA / CONTRACTING OFFICER TEL: 210-221-3061 EMAIL: melissa.f.oliva@us.army.mil					

**SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS
(CONTINUED)**

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/ SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
SEE SCHEDULE					

32a. QUANTITY IN COLUMN 21 HAS BEEN
 RECEIVED INSPECTED ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED: _____

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE.	32c. DATE	32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE
32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE	32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE	
	32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE	

33. SHIP NUMBER <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	34. VOUCHER NUMBER	35. AMOUNT VERIFIED CORRECT FOR	36. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	37. CHECK NUMBER
38. S/R ACCOUNT NUMBER	39. S/R VOUCHER NUMBER	40. PAID BY		

41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT	42a. RECEIVED BY (<i>Print</i>)		
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER	41c. DATE	42b. RECEIVED AT (<i>Location</i>)	
		42c. DATE REC'D (<i>YY/MM/DD</i>)	42d. TOTAL CONTAINERS

Section SF 1449 - CONTINUATION SHEET

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	BSCT Instructor-Behnke FFP NON-PERSONAL SERVICE: CONTRACTOR WILL PROVIDE A BEHAVIORAL SCIENCE CONSULTATION TEAM (BSCT) COURSE. THREE (1) DAY TRAINING SESSIONS. Price is inclusive of all travel and per diem expenses. THIS INCLUDES NOTIFICATION AND PREPERATION OF COURSE & COURSE HANDOUTS. IN ACCORDANCE WITH THE PERFORMANCE WORK STATEMENT AND CONTRACTOR MANPOWER REPORTING, REFER TO PAGES 12-16. SPEAKER: STEPHEN BEHNKE (202) 336-5999 COR: CPT RONNIE ROBINSON (210) 221-6150 GOVT ACTIVITY POC: JAMES BURTON (210) 221-6167 ALL TRAVEL AND TRANSPORTATION MUST BE IN ACCORDANCE WITH FAR 31.205-46; JOINT TRAVEL REGULATIONS (JTR). FOB: Destination PURCHASE REQUEST NUMBER: 0010271888	1	Each	\$5,000.00	\$5,000.00
				NET AMT	\$5,000.00
	ACRN AA CIN: GFEB001027188800001				\$5,000.00

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0002	BSCT Instructor-Behnke 2 FFP : COR CPT Ronnie Robinson 210-221-6150 FOB: Destination PURCHASE REQUEST NUMBER: 0010271888	1	Each	\$5,000.00	\$5,000.00

NET AMT \$5,000.00

ACRN AA \$5,000.00
CIN: GFEB001027188800002

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0003	BSCT Instructor-Behnke 3 FFP : COR CPT Ronnie Robinson 210-221-6150 FOB: Destination PURCHASE REQUEST NUMBER: 0010271888	1	Each	\$4,999.00	\$4,999.00

NET AMT \$4,999.00

ACRN AA \$4,999.00
CIN: GFEB001027188800003

DELIVERY INFORMATION

CLIN	DELIVERY DATE	QUANTITY	SHIP TO ADDRESS	UIC
0001	POP 03-JAN-2013 TO 05-JAN-2013	N/A	AMEDD&CS AMEDDC&S 3630 STANLEY ROAD FT. SAM HOUSTON TX 78234 FOB: Destination	W45MW2
0002	POP 06-JUN-2013 TO 08-JUN-2013	N/A	(SAME AS PREVIOUS LOCATION) FOB: Destination	W45MW2

0003 POP 05-SEP-2013 TO N/A (SAME AS PREVIOUS LOCATION) W45MW2
 07-SEP-2013 FOB: Destination

ACCOUNTING AND APPROPRIATION DATA

AA: 09720132013013000018810110106252 S.0006184.1.1.3 6100.9000021001
 COST CODE: A74AA
 AMOUNT: \$14,999.00
 CIN GFEB001027188800001: \$5,000.00
 CIN GFEB001027188800002: \$5,000.00
 CIN GFEB001027188800003: \$4,999.00

CLAUSES INCORPORATED BY REFERENCE

52.212-4 Contract Terms and Conditions--Commercial Items FEB 2012

CLAUSES INCORPORATED BY FULL TEXT

ADDENDUM TO 52.212-4

(u) The non-FAR Part 12 discretionary FAR, DFARS, AFARS, and LOCAL clauses included herein are incorporated into this contract either by reference or in full text. If incorporated by reference, see clause 52.252-2 herein for locations where full text can be found.

CLAUSES INCORPORATED BY REFERENCE

52.204-9	Personal Identity Verification of Contractor Personnel	JAN 2011
52.204-99 (Dev)	System for Award Management Registration (Deviation)	AUG 2012
52.219-6	Notice Of Total Small Business Set-Aside	NOV 2011
52.222-3	Convict Labor	JUN 2003
52.222-21	Prohibition Of Segregated Facilities	FEB 1999
52.222-26	Equal Opportunity	MAR 2007
52.222-36	Affirmative Action For Workers With Disabilities	OCT 2010
52.222-50	Combating Trafficking in Persons	FEB 2009
52.223-18	Encouraging Contractor Policies To Ban Text Messaging While Driving	AUG 2011
52.225-13	Restrictions on Certain Foreign Purchases	JUN 2008
52.232-33	Payment by Electronic Funds Transfer--Central Contractor Registration	OCT 2003
52.232-99 (Dev)	Providing Accelerated Payment to Small Business Subcontractors (Deviation)	AUG 2012
52.233-3	Protest After Award	AUG 1996

52.233-4	Applicable Law for Breach of Contract Claim	OCT 2004
252.201-7000	Contracting Officer's Representative	DEC 1991
252.203-7000	Requirements Relating to Compensation of Former DoD Officials	SEP 2011
252.203-7002	Requirement to Inform Employees of Whistleblower Rights	JAN 2009
252.204-7003	Control Of Government Personnel Work Product	APR 1992
252.232-7003	Electronic Submission of Payment Requests and Receiving Reports	JUN 2012
252.232-7010	Levies on Contract Payments	DEC 2006

CLAUSES INCORPORATED BY FULL TEXT

52.219-28 POST-AWARD SMALL BUSINESS PROGRAM REREPRESENTATION (APR 2012)

(a) Definitions. As used in this clause--

Long-term contract means a contract of more than five years in duration, including options. However, the term does not include contracts that exceed five years in duration because the period of performance has been extended for a cumulative period not to exceed six months under the clause at 52.217-8, Option to Extend Services, or other appropriate authority.

Small business concern means a concern, including its affiliates, that is independently owned and operated, not dominant in the field of operation in which it is bidding on Government contracts, and qualified as a small business under the criteria in 13 CFR part 121 and the size standard in paragraph (c) of this clause. Such a concern is "not dominant in its field of operation" when it does not exercise a controlling or major influence on a national basis in a kind of business activity in which a number of business concerns are primarily engaged. In determining whether dominance exists, consideration shall be given to all appropriate factors, including volume of business, number of employees, financial resources, competitive status or position, ownership or control of materials, processes, patents, license agreements, facilities, sales territory, and nature of business activity.

(b) If the Contractor represented that it was a small business concern prior to award of this contract, the Contractor shall rerepresent its size status according to paragraph (e) of this clause or, if applicable, paragraph (g) of this clause, upon the occurrence of any of the following:

(1) Within 30 days after execution of a novation agreement or within 30 days after modification of the contract to include this clause, if the novation agreement was executed prior to inclusion of this clause in the contract.

(2) Within 30 days after a merger or acquisition that does not require a novation or within 30 days after modification of the contract to include this clause, if the merger or acquisition occurred prior to inclusion of this clause in the contract.

(3) For long-term contracts--

(i) Within 60 to 120 days prior to the end of the fifth year of the contract; and

(ii) Within 60 to 120 days prior to the date specified in the contract for exercising any option thereafter.

(c) The Contractor shall rerepresent its size status in accordance with the size standard in effect at the time of this rerepresentation that corresponds to the North American Industry Classification System (NAICS) code assigned to this contract. The small business size standard corresponding to this NAICS code can be found at <http://www.sba.gov/content/table-small-business-size-standards>.

(d) The small business size standard for a Contractor providing a product which it does not manufacture itself, for a contract other than a construction or service contract, is 500 employees.

(e) Except as provided in paragraph (g) of this clause, the Contractor shall make the rerepresentation required by paragraph (b) of this clause by validating or updating all its representations in the Online Representations and Certifications Application and its data in the Central Contractor Registration, as necessary, to ensure that they reflect the Contractor's current status. The Contractor shall notify the contracting office in writing within the timeframes specified in paragraph (b) of this clause that the data have been validated or updated, and provide the date of the validation or update.

(f) If the Contractor represented that it was other than a small business concern prior to award of this contract, the Contractor may, but is not required to, take the actions required by paragraphs (e) or (g) of this clause.

(g) If the Contractor does not have representations and certifications in ORCA, or does not have a representation in ORCA for the NAICS code applicable to this contract, the Contractor is required to complete the following rerepresentation and submit it to the contracting office, along with the contract number and the date on which the rerepresentation was completed:

The Contractor represents that it (X) is, () is not a small business concern under NAICS Code 813920- assigned to contract number W81K00-13-P-0072.

(Contractor to sign and date and insert authorized signer's name and title).

(End of clause)

52.252-2 CLAUSES INCORPORATED BY REFERENCE (FEB 1998)

This contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. Also, the full text of a clause may be accessed electronically at this/these address(es):

<http://farsite.hill.af.mil>

(End of clause)

52.252-6 AUTHORIZED DEVIATIONS IN CLAUSES (APR 1984)

(a) The use in this solicitation or contract of any Federal Acquisition Regulation (48 CFR Chapter 1) clause with an authorized deviation is indicated by the addition of "(DEVIATION)" after the date of the clause.

(b) The use in this solicitation or contract of any "DoD FAR Supplement (48 CFR Chapter 2)" clause with an authorized deviation is indicated by the addition of "(DEVIATION)" after the name of the regulation.

(End of clause)

252.204-7008 EXPORT-CONTROLLED ITEMS (APR 2010)

(a) Definition. Export-controlled items, as used in this clause, means items subject to the Export Administration Regulations (EAR) (15 CFR parts 730-774) or the International Traffic in Arms Regulations (ITAR) (22 CFR parts 120-130). The term includes:

(1) Defense items, defined in the Arms Export Control Act, 22 U.S.C. 2778(j)(4)(A), as defense articles, defense services, and related technical data, and further defined in the ITAR, 22 CFR part 120.

(2) Items, defined in the EAR as "commodities, software, and technology," terms that are also defined in the EAR, 15 CFR 772.1.

(b) The Contractor shall comply with all applicable laws and regulations regarding export-controlled items, including, but not limited to, the requirement for Contractors to register with the Department of State in accordance with the ITAR. The Contractor shall consult with the Department of State regarding any questions relating to compliance with the ITAR and shall consult with the Department of Commerce regarding any questions relating to compliance with the EAR.

(c) The Contractor's responsibility to comply with all applicable laws and regulations regarding export-controlled items exists independent of, and is not established or limited by, the information provided by this clause.

(d) Nothing in the terms of this contract adds to, changes, supersedes, or waives any of the requirements of applicable Federal laws, Executive orders, and regulations, including but not limited to--

(1) The Export Administration Act of 1979, as amended (50 U.S.C. App. 2401, et seq.);

(2) The Arms Export Control Act (22 U.S.C. 2751, et seq.);

(3) The International Emergency Economic Powers Act (50 U.S.C. 1701, et seq.);

(4) The Export Administration Regulations (15 CFR parts 730-774);

(5) The International Traffic in Arms Regulations (22 CFR parts 120-130); and

(6) Executive Order 13222, as extended.

(e) The Contractor shall include the substance of this clause, including this paragraph (e), in all subcontracts.

(End of clause)

252.212-7001 CONTRACT TERMS AND CONDITIONS REQUIRED TO IMPLEMENT STATUTES OR EXECUTIVE ORDERS APPLICABLE TO DEFENSE ACQUISITIONS OF COMMERCIAL ITEMS (DEC 2010) (DEVIATION)

(a) In addition to the clauses listed in paragraph (b) of the Contract Terms and Conditions Required to Implement Statutes or Executive Orders--Commercial Items clause of this contract (FAR 52.212-5) (OCT 2010) (DEVIATION), the Contractor shall include the terms of the following clause, if applicable, in subcontracts for commercial items or commercial components, awarded at any tier under this contract:

- 252.237-7010 Prohibition on Interrogation of Detainees by Contractor Personnel (NOV 2010) (Section 1038 of Pub. L. 111-84).
- 252.237-7019 Training for Contractor Personnel Interacting with Detainees (SEP 2006) (Section 1092 of Pub. L. 108-375).

252.247-7003	Pass-Through of Motor Carrier Fuel Surcharge Adjustment to the Cost Bearer (JUL 2009) (Section 884 of Public Law 110-417)
252.247-7023	Transportation of Supplies by Sea (MAY 2002) (10 U.S.C. 2631)
252.247-7024	Notification of Transportation of Supplies by Sea (MAR 2000) (10 U.S.C. 2631)

(End of clause)

WIDE AREA WORKFLOW (WAWF) ARMY ELECTRONIC INVOICING INSTRUCTIONS
 Electronic Submission of Payment Request

Contractor shall submit payment request using the following method as mutually agreed to by the Contractor, the Contracting Officer, the contract administration office, and the payment office.

Wide Area Workflow –Receipt and Acceptance (WAWF-RA) (see instructions below)
WAWF customer svc phone: 1 (801) 605-7095

DFAS POC and Phone: **DFAS/INDY VP GFEBS, Customer Service (888) 332-7366 Opt 2 Opt 2**
Paying Office code: HQ0490 **Office Hrs: 07:30am/eastern to 4:30 pm/eastern**

WAWF-RA is the method to electronically process vendor request for payment. This application allows DOD vendors to submit and track Invoices and Receipt/Acceptance documents electronically. Contractor electing to use WAWF-RA shall (i) register to use WAWF-RA at <https://wawf.eb.mil> and (ii) ensure an electronic business point of contract (POC) is designated in the Central Contractor Registration site at <http://www.ccr.gov> within ten (10) calendar days after award of this contract/order.

WAWF- RA Instructions

Questions concerning payments should be directed to the Defense Finance and Accounting Service (Block 18a of your purchase order/contract) at

DFAS – INDY VP GFEBS (HQ0490)
 8899 E 56th STREET
 INDIANAPOLIS IN 46249-3800
 TEL: 1-888-332-7366 or (801) 605-7095 PAYMENT OFFICE FISCAL STATION CODE: **021001**
 FAX: 1-877-701-5069

(Same as Block 18a. of your Purchase Order/Contract)
 Please have your purchase order/contract number ready when calling about payments.

You can easily access payment and receipt information using the DFAS web site at <http://www.dfas.mil/money/vendor>. Your purchase order/contract number or invoice number will be required to inquire status of your payment.

The following codes and information will be required to assure successful flow of WAWF-RA documents.

TYPE OF DOCUMENT [X the appropriate block]

Invoice and Receiving Report (COMBO)

Invoice as 2-in-1 (Services Only)

CAGE CODE: 530R3

ISSUE BY DODAAC: W81K00

ADMIN BY DODAAC: W81K00

INSPECT BY DODAAC: W45MW2

ACCEPT BY DODAAC: W45MW2

SHIP TO DODAAC: W45MW2

LOCAL PROCESSING OFFICE DODDAC: N/A

PAYMENT OFFICE FISCAL STATION CODE: 021001

Paying Office: HQ0490 DFAS/INDY

EMAIL POINTS OF CONTACT LISTING: (Use Group e-mail accounts if applicable)

INSPECTOR: james.burton@amedd.army.mil

Telephone: 210-221-6167

ACCEPTOR: james.burton@amedd.army.mil

RECEIVING OFFICE POC: james.burton@amedd.army.mil

CONTRACT ADMINISTRATOR: joann.espitia@amedd.army.mil

CONTRACTING OFFICER: melissa.oliva@amedd.army.mil

ADDITIONAL CONTACT: sonia.garcia@amedd.army.mil

END OF ADDENDUM 52.212-4

52.212-5 CONTRACT TERMS AND CONDITIONS REQUIRED TO IMPLEMENT STATUTES OR EXECUTIVE ORDERS--COMMERCIAL ITEMS (NOV 2012) (DEVIATION)

(a) Comptroller General Examination of Record. The Contractor shall comply with the provisions of this paragraph (a) if this contract was awarded using other than sealed bid, is in excess of the simplified acquisition threshold, and does not contain the clause at 52.215-2, Audit and Records-Negotiation.

(1) The Comptroller General of the United States, or an authorized representative of the Comptroller General, shall have access to and right to examine any of the Contractor's directly pertinent records involving transactions related to this contract.

(2) The Contractor shall make available at its offices at all reasonable times, the records, materials, and other evidence for examination, audit, or reproduction, until 3 years after final payment under this contract or for any shorter period specified in FAR Subpart 4.7, Contractor Records Retention, of the other clauses of this contract. If this contract is completely or partially terminated, the records relating to the work terminated shall be made available for 3 years after any resulting final termination settlement. Records relating to appeals under the disputes clause or to litigation or the settlement of claims arising under or relating to this contract shall be made available until such appeals, litigation, or claims are finally resolved.

(3) As used in this clause, records include books, documents, accounting procedures and practices, and other data, regardless of type and regardless of form. This does not require the Contractor to create or maintain any record that the Contractor does not maintain in the ordinary course of business or pursuant to a provision of law.

(b)(1) Notwithstanding the requirements of any other clause in this contract, the Contractor is not required to flow down any FAR clause, other than those in this paragraph (b)(i) in a subcontract for commercial items. Unless otherwise indicated below, the extent of the flow down shall be as required by the clause-

(i) 52.203-13, Contractor Code of Business Ethics and Conduct (APR 2010) (Pub. L. 110-252, Title VI, Chapter 1 (41 U.S.C. 251 note).

(ii) 52.219-8, Utilization of Small Business Concerns (DEC 2010) (15 U.S.C. 637(d)(2) and (3)), in all subcontracts that offer further subcontracting opportunities. If the subcontract (except subcontracts to small business concerns) exceeds \$650,000 (\$1.5 million for construction of any public facility), the subcontractor must include 52.219-8 in lower tier subcontracts that offer subcontracting opportunities.

(iii) Reserved.

(iv) 52.222-26, Equal Opportunity (MAR 2007) (E.O. 11246).

(v) 52.222-35, Equal Opportunity for Special Disabled Veterans, Veterans of the Vietnam Era, and Other Eligible Veterans (SEP 2006) (38 U.S.C. 4212).

(vi) 52.222-36, Affirmative Action for Workers with Disabilities (JUN 1998) (29 U.S.C. 793).

(vii) 52.222-40, Notification of Employee Rights Under the National Labor Relations Act (DEC 2010) (E.O. 13496). Flow down required in accordance with paragraph (f) of FAR clause 52.222-40.

(viii) 52.222-41, Service Contract Act of 1965 (Nov 2007) (41 U.S.C. 351, et seq.).

(ix) 52.222-50, Combating Trafficking in Persons (FEB 2009) (22 U.S.C. 7104(g)).

Alternate I (AUG 2007) of 52.222-50 (22 U.S.C. 7104(g)).

(x) 52.222-51, Exemption from Application of the Service Contract Act to Contracts for Maintenance, Calibration, or Repair of Certain Equipment--Requirements (Nov 2007) (41 U.S.C. 351, et seq.).

(xi) 52.222-53, Exemption from Application of the Service Contract Act to Contracts for Certain Services--Requirements (FEB 2009) (41 U.S.C. 351, et seq.).

(xii) 52.222-54, Employment Eligibility Verification (JUL 2012).

(xiii) 52.226-6, Promoting Excess Food Donation to Nonprofit Organizations. (MAR 2009) (Pub. L. 110-247). Flow down required in accordance with paragraph (e) of FAR clause 52.226-6.

(xiv) 52.247-64, Preference for Privately Owned U.S.-Flag Commercial Vessels (FEB 2006) (46 U.S.C. Appx 1241(b) and 10 U.S.C. 2631). Flow down required in accordance with paragraph (d) of FAR clause 52.247-64.

(2) While not required, the contractor may include in its subcontracts for commercial items a minimal number of additional clauses necessary to satisfy its contractual obligations.

(End of clause)

PERFORMANCE WORK STATEMENT

1. Provide Behavioral Science Consultation Team (BSCT) Course. Will provide three, three -day training sessions. The first course session will be held from 3-5 January 2013, second session from 5-7 June of 2013 and third session 11-13 September 2013. The training will be conducted at Ft. Huachuca at the Intelligence Center and School. The target audience is composed of military psychologists (psychiatrists occasionally) and enlisted behavioral health specialists assigned in support of interrogation/detainee operations.

2. The services required to meet the agency's needs are to provide behavioral health personnel training in support of interrogation/detainee operations. Topics to be addressed and therapeutic materials:

- Ethics involved in performing duties as a BSCT
- American Psychological Association's view on torture
- American Psychiatric Association's view on torture
- MEDCOM / OTSG Policy on utilizing BSCTs
- FM2-22.3 Human Intelligence Operations
- How to remain Safe, Legal, Ethical and Effective as a BSCT

3. The QASP utilizes one or more of the following methods of surveillance: customer complaints, periodic reviews, and 100% total surveillance. Customer complaints: No more than three (3) customer complaints. The COR will validate the customer complaint. Only valid complaints will be presented to the contractor. If the service can be re-performed, request the contractor to re-accomplish the service in accordance with FAR 52.212-4 Inspection of Services – Fixed Price clause. The complaint and its resolution must be completely documented. Periodic Reviews: The QAP will perform periodic reviews. See the QASP Service Delivery Summary (SDS) for the frequency and procedure required for each performance objective. 100% total surveillance: Performance Objectives indicating 100% total surveillance will be inspected each time the service occurs. See the QASP SDS to determine performance objectives under this method of surveillance.

4. This is a non-personnel services contract to provide Instruction and Subject Matter Expertise to the BSCT course. The Government shall not exercise any supervision or control over the contract service providers performing the services herein. Such contract service providers shall be accountable solely to the Contractor who, in turn is responsible to the Government.

4.1 Description of Services/Introduction: The contractor shall provide all personnel, equipment, supplies, facilities, transportation, tools, materials, supervision, and other items and non-personal services necessary to perform Instruction and consultation as defined in this Performance Work Statement except for those items specified as government furnished property and services. The contractor shall perform to the standards in this contract.

4.3 Objectives: The Department of Behavioral Health Sciences (DBHS), of the Army Medical Department Center and School (AMEDDC&S), requests approval to solicit a sole source acquisition as outlined in FAR 6.302-1, for the purchase of training and consultation of the Behavioral Science Consultation Team (BSCT) course, subject matter expert (SME) on ethics. This new contract will be a firm-fixed priced contract, using AMAP funds, and will include three (2 day) trainings of 12 - 16 students per training iteration, at Fort Huachuca, Arizona. OTSG/MEDCOM policy Memo 09-053 (Behavioral Science Consultation Policy) requires that all active duty Psychologist, Forensic Psychiatrist, and Behavioral Science Technicians, serving in a BSCT role be trained in the core principles of interrogation and the psychology of persuasion.

4.4 Scope: This contract will consist of training conducted on "Ethical Decision Making" under guidance and direction. The trainer and facilitator will provide guidance, education and knowledge in learning and application of ethical principles within Behavioral Science Consultants Teams. Once trained, BSTC will provide safe, legal, ethical and effective consultative services to Interrogators, Detention Guards, Intelligence Commanders and Detention Commanders using the sound ethical principles.

4.5 Quality Control: The contractor shall develop and maintain an effective quality control program to ensure services are performed in accordance with this PWS. The contractor shall develop and implement procedures to identify, prevent, and ensure non-recurrence of defective services. The contractor's quality control program is the means by which he/she assures himself/herself that his/her work complies with the requirement of the contract. After

acceptance of the quality control plan the contractor shall receive the contracting officer's acceptance in writing of any proposed change to his QC system.

4.5.1 Quality Assurance: The government shall evaluate the contractor's performance under this contract in accordance with the Quality Assurance Surveillance Plan (QASP). This plan is primarily focused on what the Government must do to ensure that the contractor has performed in accordance with the performance standards. It defines how the performance standards will be applied, the frequency of surveillance, and the minimum acceptable defect rate(s).

4.5.3 Place of Performance: Services for this contract will be provided at government facilities.

4.5.4 Security Requirements: Work under this PWS is UNCLASSIFIED and a security clearance will not be required. Contractor personnel shall comply with all applicable Department of Defense (DoD) security regulations and procedures during the performance of work. Contractor personnel shall not disclose and must safeguard computer systems and data, Privacy Act data, and other Government documents and work products that are obtained or generated in the performance of this PWS. This includes dissemination of protocols and papers not generally available through the public literature. Should contractor personnel come into contact with classified material, the contractor shall notify the Contracting Officer or COR immediately. The Contractor shall not disclose or disseminate any information concerning operations of military activities. Such action(s) could result in violation of the contract and possible legal actions. Contractor personnel shall present a neat, professional appearance and be easily identifiable. This shall be accomplished by the wearing of distinctive clothing bearing the company name or by wearing appropriate badges that contain the company name and employee's name.

4.5.5 Physical Security: The contractor shall be responsible for safeguarding all government equipment, information and property provided for contractor use. At the close of each work period, government facilities, equipment, and materials shall be secured.

4.5.6 Post Award Conference/Periodic Progress Meetings: The Contractor agrees to attend any post award conference convened by the contracting activity or contract administration office in accordance with Federal Acquisition Regulation Subpart 42.5. The Contracting Officer (KO), Contracting Officers' Representative (COR), and other Government personnel, as appropriate, may meet periodically with the contractor to review the contractor's performance. At these meetings the contracting officer will apprise the contractor of how the government views the contractor's performance and the contractor will apprise the Government of problems, if any, being experienced. Appropriate action shall be taken to resolve outstanding issues. These meetings shall be at no additional cost to the government.

4.5.7 Contracting Officer Representative (COR): The (COR) will be identified by separate letter. The COR monitors all technical aspects of the contract and assists in contract administration. The COR is authorized to perform the following functions: assure that the Contractor performs the technical requirements of the contract; perform inspections necessary in connection with contract performance; maintain written and oral communications with the Contractor concerning technical aspects of the contract; issue written interpretations of technical requirements, including Government drawings, designs, specifications; monitor Contractor's performance and notifies both the Contracting Officer and Contractor of any deficiencies; coordinate availability of government furnished property, and provide site entry of Contractor personnel. A letter of designation issued to the COR, a copy of which is sent to the Contractor, states the responsibilities and limitations of the COR, especially with regard to changes in cost or price, estimates or changes in delivery dates. The COR is not authorized to change any of the terms and conditions of the resulting order. All inquiries, comments or complaints arising from any matter observed, experienced, or learned of as a result of or in connection with the performance of this contract, the resolution of which may require the dissemination of official information, shall be directed to the COR and the Contracting Officer (KO). The Contractor shall only conduct business with designated government personnel listed as points of contact (POCs). Contractor personnel shall conform to standards of conduct and a code of ethics, which are consistent with those applicable to Government employees as provided by the Joint Ethics Regulation 5500.7.R.

4.5.8 Key Personnel: The following personnel are considered key personnel by the government: [Contracting Officer (KO) and the Contracting Officer Representative (COR)]. The contractor shall provide a contract manager who shall be responsible for the performance of the work. The name of this person and an alternate who shall act for the contractor when the manager is absent shall be designated in writing to the contracting officer. The contract manager or alternate shall have full authority to act for the contractor on all contract matters relating to daily operation of this contract. The contract manager or alternate shall be available between [i.e., 8:00 a.m. to 4:30p.m.], Monday thru Friday except Federal holidays or when the government facility is closed for administrative reasons. Qualifications for all key personnel are specified within this contract.

4.5.9 Identification of Contractor Employees: All contract personnel attending meetings, answering Government telephones, and working in other situations where their contractor status is not obvious to third parties are required to identify themselves as such to avoid creating an impression in the minds of members of the public that they are Government officials. They must also ensure that all documents or reports produced by contractors are suitably marked as contractor products or that contractor participation is appropriately disclosed. Contractor personnel will not be required to obtain and wear government issued badges in the performance of this service.

4.5.10 Contractor Travel: Contractor will be required to travel CONUS during the performance of this contract to provide training.

4.5.11 Data Rights . The Government will have unlimited access to all documents/material produced under this contract. All documents and materials, to include the source codes of any software, delivered under this contract shall be Government owned and are the property of the Government. These documents and materials that become Government property may not be used or sold by the contractor without written permission from the Contracting Officer. This right does not abrogate any other Government rights.

4.5.12 Organizational Conflict of Interest: Contractor and subcontractor personnel performing work under this contract may receive, have access to or participate in the development of proprietary or source selection information (e.g., cost or pricing information, budget information or analyses, specifications or work statements, etc.) or perform evaluation services which may create a current or subsequent Organizational Conflict of Interests (OCI) as defined in FAR Subpart 9.5. The Contractor shall notify the Contracting Officer immediately whenever it becomes aware that such access or participation may result in any actual or potential OCI and shall promptly submit a plan to the Contracting Officer to avoid or mitigate any such OCI. The Contractor's mitigation plan will be determined to be acceptable solely at the discretion of the Contracting Officer and in the event the Contracting Officer unilaterally determines that any such OCI cannot be satisfactorily avoided or mitigated, the Contracting Officer may affect other remedies as he or she deems necessary, including prohibiting the Contractor from participation in subsequent contracted requirements which may be affected by the OCI.

DEFINITIONS & ACRONYMS to be familiar with in this SDT contract are noted below.

5. DEFINITIONS AND ACRONYMS

5.1. DEFINITIONS:

5.1.1. CONTRACTOR. A supplier or vendor awarded a contract to provide specific supplies or service to the government. The term used in this contract refers to the prime.

5.1.2. CONTRACTING OFFICER. A person with authority to enter into, administer, and or terminate contracts, and make related determinations and findings on behalf of the government. Note: The only individual who can legally bind the government.

5.1.3. CONTRACTING OFFICER'S REPRESENTATIVE (COR). An employee of the U.S. Government appointed by the contracting officer to administer the contract. Such appointment shall be in writing and shall state the scope of authority and limitations. This individual has authority to provide technical direction to the Contractor as long as that direction is within the scope of the contract, does not constitute a change, and has no funding implications. This individual does NOT have authority to change the terms and conditions of the contract.

5.1.4. DEFECTIVE SERVICE. A service output that does not meet the standard of performance associated with the Performance Work Statement.

5.1.5. DELIVERABLE. Anything that can be physically delivered, but may include non-manufactured things such as meeting minutes or reports.

5.1.6. KEY PERSONNEL. Contractor personnel that are evaluated in a source selection process and that may be required to be used in the performance of a contract by the Key Personnel listed in the PWS. When key personnel are used as an evaluation factor in best value procurement, an offer can be rejected if it does not have a firm commitment from the persons that are listed in the proposal.

5.1.7. PHYSICAL SECURITY. Actions that prevent the loss or damage of Government property.

5.1.8. QUALITY ASSURANCE. The government procedures to verify that services being performed by the Contractor are performed according to acceptable standards.

5.1.9. QUALITY ASSURANCE Surveillance Plan (QASP). An organized written document specifying the surveillance methodology to be used for surveillance of contractor performance.

5.1.10. QUALITY CONTROL. All necessary measures taken by the Contractor to assure that the quality of an end product or service shall meet contract requirements.

5.1.11. SUBCONTRACTOR. One that enters into a contract with a prime contractor. The Government does not have privity of contract with the subcontractor.

5.1.12. WORK DAY. The number of hours per day the Contractor provides services in accordance with the contract.

5.1.12. WORK WEEK. Monday through Friday, unless specified otherwise.

5.2. ACRONYMS:

ACOR	Alternate Contracting Officer's Representative
AFARS	Army Federal Acquisition Regulation Supplement
AR	Army Regulation
CCE	Contracting Center of Excellence
CFR	Code of Federal Regulations
CONUS	Continental United States (excludes Alaska and Hawaii)
COR	Contracting Officer Representative
COTR	Contracting Officer's Technical Representative
COTS	Commercial-Off-the-Shelf
DA	Department of the Army
DD250	Department of Defense Form 250 (Receiving Report)
DD254	Department of Defense Contract Security Requirement List
DFARS	Defense Federal Acquisition Regulation Supplement
DMDC	Defense Manpower Data Center
DOD	Department of Defense
FAR	Federal Acquisition Regulation
HIPAA	Health Insurance Portability and Accountability Act of 1996
KO	Contracting Officer
OCI	Organizational Conflict of Interest
OCONUS	Outside Continental United States (includes Alaska and Hawaii)
ODC	Other Direct Costs
PIPO	Phase In/Phase Out
POC	Point of Contact
PRS	Performance Requirements Summary
PWS	Performance Work Statement
QA	Quality Assurance
QAP	Quality Assurance Program
QASP	Quality Assurance Surveillance Plan
QC	Quality Control
QCP	Quality Control Program

QUALITY ASSURANCE SURVEILLANCE PLAN (QASP)

The following minimum Quality Assurance Plan applies. The Government may modify inspection methods in accordance with site specific requirements.

Performance Objective	PWS	Performance Standard	Accuracy Rate	Method of Assessment
Professional Conduct		100% compliance	100%	COR Surveillance
Meet all training Objectives listed.	2	100% compliance.	95%	COR Surveillance

Customer Complaints. No more than 3 valid customer complaints per session	3	100% compliance	96%	COR Surveillance
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STANDARD	MEASUREMENT	PAST PERFORMANCE ASSESSMENT
99% to 100%	Excellent	Document Past Performance
96% to 98%	Very Good	Assessment Report, paying
91% to 95%	Satisfactory	particular attention to
92% to 94%	Marginal	performance that exceeds
92% or Less	Unsatisfactory	the standard

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, AND 30				1. REQUISITION NUMBER 0010109443		PAGE 1 OF 11	
2. CONTRACT NO W81K00-12-P-0090		3. AWARD/EFFECTIVE DATE 20-Dec-2011		4. ORDER NUMBER		5. SOLICITATION NUMBER	
7. FOR SOLICITATION INFORMATION CALL:		a. NAME				b. TELEPHONE NUMBER (No Collect Calls)	
9. ISSUED BY GREAT PLAINS REGIONAL CONTRACTING OFFICE USA MEDCOM HCAA 3851 ROGER BROOKE DR BLDG 3600 210-916-5190 FORT SAM HOUSTON TX 78234-6200 TEL: 210-916-5190 FAX: 210-916-3040		CODE W81K00		10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED <input checked="" type="checkbox"/> SET ASIDE: 100% FOR <input checked="" type="checkbox"/> SB <input type="checkbox"/> HUBZONE SB <input type="checkbox"/> 8(A) <input type="checkbox"/> SVC-DISABLED VET-OWNED SB <input type="checkbox"/> EMERGING SB SIZE STD: \$6.5m NAICS: 813920		11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) 13b. RATING 14. METHOD OF SOLICITATION <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP	
15. DELIVER TO US ARMY MED DEPT CTR SCH ATTN G4 PBO RECEIVING SECTION 2105 11TH STREET BLDG 4191A DR 32 FORT SAM HOUSTON TX 78234-5064		CODE W45MV2		16. ADMINISTERED BY GREAT PLAINS REGIONAL CONTRACTING OFFICE MCAA GP BAMC J ESPITIA 3851 ROGER BROOKE BLDG 2539 210-221-3490 FORT SAM HOUSTON TX 78234-6200		CODE W81K00	
17a. CONTRACTOR/OFFEROR BEHNKE, STEPHEN PRIVACY REDACTION TEL. 202-547-4859		CODE 530R3		18a. PAYMENT WILL BE MADE BY DFAS-INDY VP GFEB5 8899 E 56TH STREET INDIANA POLIS IN 46249-3800		CODE HQ0490	
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER				<input type="checkbox"/> 18b. SUBMIT INVOICES TO A ADDRESS SHOWN IN BLOCK 18a. UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM			
19. ITEM NO.		20. SCHEDULE OF SUPPLIES/ SERVICES		21. QUANTITY		22. UNIT	
		SEE SCHEDULE				23. UNIT PRICE	
						24. AMOUNT	
25. ACCOUNTING AND APPROPRIATION DATA See Schedule						26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$15,000.00	
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1. 52.212-4. FAR 52.212-3. 52.212-5 ARE ATTACHED.				ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED			
<input type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED.				ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED			
28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN <input type="checkbox"/> TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.				29. AWARD OF CONTRACT: REFERENCE <input type="checkbox"/> OFFER DATED . YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:			
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) <i>Sharon I. Holmes</i>		31c. DATE SIGNED 20-Dec-2011	
30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)		30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT) SHAROD I. HOLMES / CONTRACTING OFFICER TEL: 210-221-3081 EMAIL: sharod.holmes@us.army.mil			

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS
(CONTINUED)

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/ SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
SEE SCHEDULE					

32a. QUANTITY IN COLUMN 21 HAS BEEN <input type="checkbox"/> RECEIVED <input type="checkbox"/> INSPECTED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED: _____					
32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE		32c. DATE	32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE		
32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE			32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE		
			32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE		
33. SHIP NUMBER	34. VOUCHER NUMBER	35. AMOUNT VERIFIED CORRECT FOR	36. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		37. CHECK NUMBER
38. S/R ACCOUNT NUMBER	39. S/R VOUCHER NUMBER	40. PAID BY			
41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT		42a. RECEIVED BY (<i>Print</i>)			
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER		41c. DATE	42b. RECEIVED AT (<i>Location</i>)		
			42c. DATE REC'D (<i>YY/MM/DD</i>)	42d. TOTAL CONTAINERS	

Section SF 1449 - CONTINUATION SHEET

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	BSCT Guest Speaker - Behnke FFP	3	Each	\$5,000.00	\$15,000.00 NTE
<p>NON-PERSONAL SERVICE CONTRACTOR WILL PROVIDE BEHAVIORAL SCIENCE CONSULTATION TEAM COURSE IN THREE (1) DAY TRAINING SESSIONS. Price is inclusive of all travel and per diem expenses. THIS INCLUDES NOTIFICATION AND PREPARATION OF COURSE, COURSE HANDOUTS. IN ACCORDANCE WITH THE PERFORMANCE WORK STATEMENT AND CONTRACTOR MANPOWER REPORTING, REFER TO PAGES 10-11. BSCT Guest Speaker - Stephen Behnke (3) one day training sessions. TRAINING DATES: 1ST SESSION (04-06 JAN 2012); 2ND SESSION(06-08 JUN 2012); 3RD SESSION (05-07 SEP 2012). PERIOD OF PERFORMANCE 20 DEC 2011 THRU 30 SEP 2011. CERTIFIED PROFESSIONAL SPEAKER: STEPHEN BEHNKE (202) 336-5999 GOVT ACTIVITY POC: JAMES PATRICK BURTON (210) 221-6761 OR 221-6150</p> <p>ALL RECEIPTS MUST BE SUBMITTED WITH PROPER INVOICE FOR REIMBURSEMENT. THIS IS IN ACCORDANCE WITH FAR 31.205-46; JOINT TRAVEL REGULATIONS (JTR). FOB: Destination PURCHASE REQUEST NUMBER: 0010109443</p>					
NET AMT					\$15,000.00
ACRN AA CIN: GFEB001010944300001					\$15,000.00

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0002	CONTRACTOR MANPOWER REPORTING FFP FOB: Destination PURCHASE REQUEST NUMBER: 0010109443	1	Each		NSP
NET AMT					
ACRN AA					\$0.00
CIN: GFEB001010944300002					

DELIVERY INFORMATION

CLIN	DELIVERY DATE	QUANTITY	SHIP TO ADDRESS	UIC
0001	POP 20-DEC-2011 TO 30-SEP-2012	N/A	US ARMY MED DEPT CTR SCH ATTN G4 PBO RECEIVING SECTION 2105 11TH STREET BLDG 4191A DR 32 FORT SAM HOUSTON TX 78234-5064 FOB: Destination	W45MW2
0002	POP 20-DEC-2011 TO 30-SEP-2012	N/A	(SAME AS PREVIOUS LOCATION) FOB: Destination	W45MW2

ACCOUNTING AND APPROPRIATION DATA

AA: 09720122012013000018810110106252 600081.37020431 6100.9000021001
 COST CODE: A74AA
 AMOUNT: \$15,000.00
 CIN GFEB001010944300001: \$15,000.00
 CIN GFEB001010944300002: \$0.00

CLAUSES INCORPORATED BY REFERENCE

52.212-4 Contract Terms and Conditions--Commercial Items JUN 2010

CLAUSES INCORPORATED BY FULL TEXT

ADDENDUM TO 52.212-4

(u) The non-FAR Part 12 discretionary FAR, DFARS, AFARS, and LOCAL clauses included herein are incorporated into this contract either by reference or in full text. If incorporated by reference, see clause 52.252-2 herein for locations where full text can be found.

CLAUSES INCORPORATED BY REFERENCE

52.204-9	Personal Identity Verification of Contractor Personnel	JAN 2011
52.219-6	Notice Of Total Small Business Set-Aside	JUN 2003
52.219-28	Post-Award Small Business Program Rerepresentation	APR 2009
52.222-3	Convict Labor	JUN 2003
52.222-21	Prohibition Of Segregated Facilities	FEB 1999
52.222-26	Equal Opportunity	MAR 2007
52.222-36	Affirmative Action For Workers With Disabilities	OCT 2010
52.222-50	Combating Trafficking in Persons	FEB 2009
52.223-18	Encouraging Contractor Policies To Ban Text Messaging While Driving	AUG 2011
52.225-13	Restrictions on Certain Foreign Purchases	JUN 2008
52.232-33	Payment by Electronic Funds Transfer--Central Contractor Registration	OCT 2003
52.233-3	Protest After Award	AUG 1996
52.233-4	Applicable Law for Breach of Contract Claim	OCT 2004
252.201-7000	Contracting Officer's Representative	DEC 1991
252.203-7000	Requirements Relating to Compensation of Former DoD Officials	SEP 2011
252.203-7002	Requirement to Inform Employees of Whistleblower Rights	JAN 2009
252.204-7003	Control Of Government Personnel Work Product	APR 1992
252.232-7003	Electronic Submission of Payment Requests and Receiving Reports	MAR 2008
252.232-7010	Levies on Contract Payments	DEC 2006

CLAUSES INCORPORATED BY FULL TEXT

52.252-2 . CLAUSES INCORPORATED BY REFERENCE (FEB 1998)

This contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. Also, the full text of a clause may be accessed electronically at this/these address(es):

<http://farsite.hill.af.mil>

<http://ACQ.OSD.MIL/DPAP/DFARS/DFARSPGI/CURRENT/INDEX.HTML>

(End of clause)

52.252-6 AUTHORIZED DEVIATIONS IN CLAUSES (APR 1984)

(a) The use in this solicitation or contract of any Federal Acquisition Regulation (48 CFR Chapter 1) clause with an authorized deviation is indicated by the addition of "(DEVIATION)" after the date of the clause.

(b) The use in this solicitation or contract of any **"DoD FAR Supplement (48 CFR Chapter 2)"** clause with an authorized deviation is indicated by the addition of "(DEVIATION)" after the name of the regulation.

(End of clause)

252.204-7008 EXPORT-CONTROLLED ITEMS (APR 2010)

(a) Definition. Export-controlled items, as used in this clause, means items subject to the Export Administration Regulations (EAR) (15 CFR parts 730-774) or the International Traffic in Arms Regulations (ITAR) (22 CFR parts 120-130). The term includes:

(1) Defense items, defined in the Arms Export Control Act, 22 U.S.C. 2778(j)(4)(A), as defense articles, defense services, and related technical data, and further defined in the ITAR, 22 CFR part 120.

(2) Items, defined in the EAR as "commodities, software, and technology," terms that are also defined in the EAR, 15 CFR 772.1.

(b) The Contractor shall comply with all applicable laws and regulations regarding export-controlled items, including, but not limited to, the requirement for Contractors to register with the Department of State in accordance with the ITAR. The Contractor shall consult with the Department of State regarding any questions relating to compliance with the ITAR and shall consult with the Department of Commerce regarding any questions relating to compliance with the EAR.

(c) The Contractor's responsibility to comply with all applicable laws and regulations regarding export-controlled items exists independent of, and is not established or limited by, the information provided by this clause.

(d) Nothing in the terms of this contract adds to, changes, supersedes, or waives any of the requirements of applicable Federal laws, Executive orders, and regulations, including but not limited to--

(1) The Export Administration Act of 1979, as amended (50 U.S.C. App. 2401, et seq.);

(2) The Arms Export Control Act (22 U.S.C. 2751, et seq.);

(3) The International Emergency Economic Powers Act (50 U.S.C. 1701, et seq.);

(4) The Export Administration Regulations (15 CFR parts 730-774);

(5) The International Traffic in Arms Regulations (22 CFR parts 120-130); and

(6) Executive Order 13222, as extended.

(e) The Contractor shall include the substance of this clause, including this paragraph (e), in all subcontracts.

(End of clause)

252.212-7001 CONTRACT TERMS AND CONDITIONS REQUIRED TO IMPLEMENT STATUTES OR EXECUTIVE ORDERS APPLICABLE TO DEFENSE ACQUISITIONS OF COMMERCIAL ITEMS (DEC 2010) (DEVIATION)

(a) In addition to the clauses listed in paragraph (b) of the Contract Terms and Conditions Required to Implement Statutes or Executive Orders--Commercial Items clause of this contract (FAR 52.212-5) (OCT 2010) (DEVIATION), the Contractor shall include the terms of the following clause, if applicable, in subcontracts for commercial items or commercial components, awarded at any tier under this contract:

252.237-7010	Prohibition on Interrogation of Detainees by Contractor Personnel (NOV 2010) (Section 1038 of Pub. L. 111-84).
252.237-7019	Training for Contractor Personnel Interacting with Detainees (SEP 2006) (Section 1092 of Pub. L. 108-375).
252.247-7003	Pass-Through of Motor Carrier Fuel Surcharge Adjustment to the Cost Bearer (JUL 2009) (Section 884 of Public Law 110-417)
252.247-7023	Transportation of Supplies by Sea (MAY 2002) (10 U.S.C. 2631)
252.247-7024	Notification of Transportation of Supplies by Sea (MAR 2000) (10 U.S.C. 2631)

(End of clause)

WIDE AREA WORKFLOW (WAWF) ARMY ELECTRONIC INVOICING INSTRUCTIONS

Electronic Submission of Payment Request

Contractor shall submit payment request using the following method as mutually agreed to by the Contractor, the Contracting Officer, the contract administration office, and the payment office.

Wide Area Workflow –Receipt and Acceptance (WAWF-RA) (see instructions below)

WAWF customer svc phone: 1 (801) 605-7095

Other (please specify) _____

DFAS POC and Phone: **DFAS/INDY VP GFEBBS, Customer Service (888) 332-7366 Opt 2 Opt 2**

Paying Office code: HQ0490 Office Hrs: 07:30am/eastern to 4:30 pm/eastern

WAWF-RA is the method to electronically process vendor request for payment. This application allows DOD vendors to submit and track Invoices and Receipt/Acceptance documents electronically. Contractor electing to use WAWF-RA shall (i) register to use WAWF-RA at <https://wawf.eb.mil> and (ii) ensure an electronic business point of contract (POC) is designated in the Central Contractor Registration site at <http://www.ccr.gov> within ten (10) calendar days after award of this contract/order.

WAWF- RA Instructions

Questions concerning payments should be directed to the Defense Finance and Accounting Service (Block 18a of your purchase order/contract) at

DFAS – INDY VP GFEBs (HQ0490)
8899 E 56th STREET
INDIANAPOLIS IN 46249-3800
TEL: (801) 605-7095

PAYMENT OFFICE FISCAL STATION CODE: **021001**

Please have your purchase order/contract number ready when calling about payments.

You can easily access payment and receipt information using the DFAS web site at <http://www.dfas.mil/money/vendor>. Your purchase order/contract number or invoice number will be required to inquire status of your payment.

The following codes and information will be required to assure successful flow of WAWF-RA documents.

TYPE OF DOCUMENT [X the appropriate block]

Invoice and Receiving Report (COMBO)

Invoice as 2-in-1 (Services Only)

CAGE CODE: **530R3**

ISSUE BY DODAAC: **W81K00**

ADMIN BY DODAAC: **W81K00**

INSPECT BY DODAAC: **W45MW2**

ACCEPT BY DODAAC: **W45MW2**

SHIP TO DODAAC: **W45MW2**

LOCAL PROCESSING OFFICE DODDAC: N/A

PAYMENT OFFICE FISCAL STATION CODE: **021001**

Paying Office: **HQ0490 DFAS/INDY**

EMAIL POINTS OF CONTACT LISTING: (Use Group e-mail accounts if applicable)

INSPECTOR: **jamesp.burton@amedd.army.mil**

ACCEPTOR: **jamesp.burton@amedd.army.mil**

RECEIVING OFFICE POC: **jamesp.burton@amedd.army.mil**

CONTRACT ADMINISTRATOR: **joann.espitia@amedd.army.mil**

CONTRACTING OFFICER: **melissa.oliva@amedd.army.mil**

ADDITIONAL CONTACTS: **jarret.thomas@amedd.army.mil**

MAJ. Jarrett, Thomas (210) 221-6150

fancher.peggy@amedd.army.mil

MAJ. Fancher, Peggy (210) 221-6346

END OF ADDENDUM 52.212-4**52.212-5 CONTRACT TERMS AND CONDITIONS REQUIRED TO IMPLEMENT STATUTES OR EXECUTIVE ORDERS--COMMERCIAL ITEMS (AUG 2011) (DEVIATION)**

(a) Comptroller General Examination of Record. The Contractor shall comply with the provisions of this paragraph (a) if this contract was awarded using other than sealed bid, is in excess of the simplified acquisition threshold, and does not contain the clause at 52.215-2, Audit and Records-Negotiation.

(1) The Comptroller General of the United States, or an authorized representative of the Comptroller General, shall have access to and right to examine any of the Contractor's directly pertinent records involving transactions related to this contract.

(2) The Contractor shall make available at its offices at all reasonable times, the records, materials, and other evidence for examination, audit, or reproduction, until 3 years after final payment under this contract or for any shorter period specified in FAR Subpart 4.7, Contractor Records Retention, of the other clauses of this contract. If this contract is completely or partially terminated, the records relating to the work terminated shall be made available for 3 years after any resulting final termination settlement. Records relating to appeals under the disputes clause or to litigation or the settlement of claims arising under or relating to this contract shall be made available until such appeals, litigation, or claims are finally resolved.

(3) As used in this clause, records include books, documents, accounting procedures and practices, and other data, regardless of type and regardless of form. This does not require the Contractor to create or maintain any record that the Contractor does not maintain in the ordinary course of business or pursuant to a provision of law.

(b)(1) Notwithstanding the requirements of any other clause in this contract, the Contractor is not required to flow down any FAR clause, other than those in this paragraph (b)(i) in a subcontract for commercial items. Unless otherwise indicated below, the extent of the flow down shall be as required by the clause-

(i) 52.203-13, Contractor Code of Business Ethics and Conduct (APR 2010) (Pub. L. 110-252, Title VI, Chapter 1 (41 U.S.C. 251 note).

(ii) 52.219-8, Utilization of Small Business Concerns (DEC 2010) (15 U.S.C. 637(d)(2) and (3)), in all subcontracts that offer further subcontracting opportunities. If the subcontract (except subcontracts to small business concerns) exceeds \$650,000 (\$1.5 million for construction of any public facility), the subcontractor must include 52.219-8 in lower tier subcontracts that offer subcontracting opportunities.

(iii) Reserved.

(iv) 52.222-26, Equal Opportunity (MAR 2007) (E.O. 11246).

(v) 52.222-35, Equal Opportunity for Special Disabled Veterans, Veterans of the Vietnam Era, and Other Eligible Veterans (SEP 2006) (38 U.S.C. 4212).

(vi) 52.222-36, Affirmative Action for Workers with Disabilities (JUN 1998) (29 U.S.C. 793).

(vii) 52.222-40, Notification of Employee Rights Under the National Labor Relations Act (DEC 2010) (E.O. 13496). Flow down required in accordance with paragraph (f) of FAR clause 52.222-40.

(viii) 52.222-41, Service Contract Act of 1965 (Nov 2007) (41 U.S.C. 351, et seq.).

(ix) 52.222-50, Combating Trafficking in Persons (FEB 2009) (22 U.S.C. 7104(g)).

Alternate I (AUG 2007) of 52.222-50 (22 U.S.C. 7104(g)).

(x) 52.222-51, Exemption from Application of the Service Contract Act to Contracts for Maintenance, Calibration, or Repair of Certain Equipment--Requirements (Nov 2007) (41 U.S.C. 351, et seq.).

(xi) 52.222-53, Exemption from Application of the Service Contract Act to Contracts for Certain Services--Requirements (FEB 2009) (41 U.S.C. 351, et seq.).

(xii) 52.222-54, Employment Eligibility Verification (JAN 2009).

(xiii) 52.226-6, Promoting Excess Food Donation to Nonprofit Organizations. (MAR 2009) (Pub. L. 110-247). Flow down required in accordance with paragraph (e) of FAR clause 52.226-6.

(xiv) 52.247-64, Preference for Privately Owned U.S.-Flag Commercial Vessels (FEB 2006) (46 U.S.C. Appx 1241(b) and 10 U.S.C. 2631). Flow down required in accordance with paragraph (d) of FAR clause 52.247-64.

(2) While not required, the contractor may include in its subcontracts for commercial items a minimal number of additional clauses necessary to satisfy its contractual obligations.

(End of clause)

PERFORMANCE WORK STATEMENT

1. The action for which approval is sought is a selected source contract for a guest instructor/SME for the Behavioral Science Consultation Team (BSCT) Course. Must be nationally recognized expert in the ethics education, from the American Psychological Association (APA). Will provide three, one-day training sessions. The courses will be held from January 4- 22, 2011, then again in June of 2011 and September 2012. The training will be conducted at Ft. Huachuca at the Intelligence Center and School. The target audience is composed of military psychologists (psychiatrists occasionally) and enlisted behavioral health specialists assigned in support of interrogation/detainee operations.

2. The services required to meet the agency's needs are: to use the subject matter expertise of consultant to provide training to behavioral health personnel in support of interrogation/detainee operations.

3. The statutory authority permitting other than full and open completion is 10 U.S. C. 2304 (c) (1)-FAR 6.302-1, only one responsible source.

4. The proposed contractor's unique qualifications and the nature of the acquisition dictates use of the authority cited for the following reasons:

U.S. Army/Air Force/Navy behavioral health personnel are integral to ensuring safe, legal, ethical, and effective interrogation/detainee operations. The Office of the Army Surgeon General has set policy mandating special training be conducted to prepare personnel for these high visibility assignments. Trainers in this field are difficult to find, especially those with working knowledge/experience with military operations. Training will assist in BSCT personnel in performing their duties more effectively.

Contractor Manpower Reporting (CMR)

The Office of the Assistant Secretary of the Army (Manpower & Reserve Affairs) operates and maintains a secure Army data collection site where the contractor shall report ALL contractor manpower (including subcontractor manpower) required for performance of this contract. The contractor shall completely fill in all the information in the format using the following web address: <https://contractormanpower.army.pentagon.mil>. The required information includes: (1) Contracting Office, Contracting Officer, Contracting Officer's Technical Representative; (2) Contract number, including task or delivery order number; (3) Beginning and ending dates covered by reporting period; (4) Contractor name, address, phone number, e-mail address, identity of contractor employee entering data; (5) Estimated direct labor hours (including sub-contractors); (6) Estimated direct labor dollars paid this reporting period (including sub-contractors); (7) Total payments (including sub-contractors); (8) Predominant Federal Service Code (FSC) reflecting services provided by contractor (and separate predominant FSC for each sub-contractor if different); (9) Estimated data collection cost; (10) Organizational title associated with Unit Identification Code (UIC) for the Army Requiring Activity (the Army Requiring Activity is responsible for providing the contractor with its UIC for the purposes of reporting this information); (11) Locations where contractor and sub-contractors perform the work (specified by zip code in the United States and nearest city, country, when in an overseas location, using standardized nomenclature provided on website); (12) Presence of deployment or contingency contract language; and (13) Number of contractor and sub-contractor employees deployed in theater this reporting period (by country). As part of its submission, the contractor shall also provide the estimated total cost (if any) incurred to comply with this reporting requirement. Reporting period will be the period of performance not to exceed 12 months ending 30 September of each government fiscal year and must be reported by 31 October of each calendar year. Contractors may use a direct XML data transfer to the database server or fill in the fields on the website. The XML direct transfer is a format for transferring files from a contractor's systems to the secure web site without the need for separate data entries for each required data element at the web site. The specific formats for the XML direct transfer may be downloaded from the website.

NOTE: Contractor shall coordinate all the information required from the COR and the Contracting Office as required for CMR Reporting. All other information can be found on the award document. Beginning and ending dates for item 3 above may be found under the delivery schedule listed in for each respective CLIN.

Information for items 4 through 9 must be provided by the Contractor.

Organizational title for item 10 above is: Army Medical Department. The Unit Identifier Code shall be provided by the COR.

QUALITY ASSURANCE SURVEILLANCE PLAN (QASP) – Behavioral Science Consultation Team (BSCT) Course

The following minimum Quality Assurance Surveillance Plan applies. The Government may modify inspection methods in accordance with site specific requirements.

PERFORMANCE OBJECTIVE	PERFORMANCE STANDARD	REF PWS	METHOD OF ASSESSMENT
Service requirement	Comply 100% of the time	2.	Observation by COR
Instructor qualifications	Comply 100% of the time	1. & 4.	Observation by COR

STANDARD	MEASUREMENT	PAST PERFORMANCE ASSESSMENT
99% to 100%	Excellent	Document Past Performance
96% to 98%	Very Good	Assessment Report, paying
95%	Satisfactory	particular attention to
91% to 94%	Marginal	performance that exceeds
90% or Less	Unsatisfactory	the standard



REPLY TO
ATTENTION OF

DEPARTMENT OF THE ARMY
HEALTH CARE ACQUISITION ACTIVITY
SOUTHERN REGIONAL CONTRACTING OFFICE – W (PROVISIONAL)
3551 Roger Brooke Drive, Building 1103
Fort Sam Houston, TX 78234-6200

MCAA-GP

20 December 2011

MEMORANDUM FOR Commander, AMEDD CTR & School, Department of Behavioral Health Sciences, ATTN: MAJ. Peggy Fancher, 2107 17th Street Bldg 4197, Ft Sam Houston Tx 78234

SUBJECT: Appointment of Contracting Officer's Representative (COR) and/or Alternate Contracting Officer's Representative for Contract No. **W81K00-12-P-0090**

1. Under the authority vested in me by Certificate of Appointment as Contracting Officer dated **01 April 2011**, and pursuant to the Defense Federal Acquisition Regulation Supplement (DFARS) 201.602-2, you are hereby designated as the Contracting Officer's Representative (COR)/ACOR in administration of the subject contract with authority conferred by the Contracting Officer (KO). A COR/ACOR must be an employee, military or civilian, of the US Government, a foreign government, or NATO/Coalition partners. In no case shall contractor personnel serve as CORs. This designation is based on your qualifications to perform the specific duties as shown below as a COR, which includes your status as a government employee.

Contract Number: **W81K00-12-P-0090**

For (enter item/system/services): **Speaker**

Contractor: **Stephen Behnke**

Contract Period: 1st session (04-06 Jan 12), 2nd session (06-08 Jun 12), 3rd session (05-07 Sep 12)

2. You are authorized by this designation to take action with respect to the following:

a. Verify that the contractor performs the technical requirements of the contract in accordance with the contract terms, conditions and specifications. Specific emphasis should be placed on the quality provisions, for both adherence to the contract provisions and to the contractor's own quality control program, if applicable.

b. Perform, or cause to be performed, inspections necessary in connection with paragraph 2.a and verify that the contractor has corrected all deficiencies. Perform acceptance for the Government of services performed under this contract. You are the designated Government Official to receive and certify invoices for payment in the appropriate DFAS office (usually via Wide Area Workflow). It is understood that you have taken the required training at www.wawftraining.com. You are advised that all invoices shall be reviewed as to completeness, accuracy and in accordance with the contract as awarded and by signing the acceptance, you are attesting that the invoice is valid and accurate.

c. Maintain liaison and direct communications with the contractor. Written communications with the contractor and other documents pertaining to the contract shall be signed as "Contracting Officer's Representative" and a copy shall be furnished to the contracting officer.

d. Monitor the contractor's performance; notify the contractor of deficiencies observed during surveillance and direct appropriate action to effect correction. Record and report to the

KO incidents of faulty or nonconforming work, delays or problems. In addition, you are required to submit a quarterly report concerning performance of services rendered under this contract to the KO.

e. Maintain an expenditure log with the value of the contract, period of performance, the available funding, the invoices submitted and the amount paid by DFAS. If the contract is for multiple positions (e.g. nurses, physicians, technicians), the log will break out each different labor category, the hours allowed and the cost per hour. The log must be kept current and shall be forwarded to the KO quarterly, unless directed otherwise by the KO. If you find a discrepancy with any items, immediately bring it to the KO's attention, including any excess funding.

f. Coordinate site entry for contractor personnel, and insure that any Government-furnished property is available when required.

g. Register in the Contractor Manpower Reporting Application at <https://cmra.army.mil> and make the inputs as required.

3. The scope of your authority is subject to the following limitations. You are **not authorized to** (unless specified above in paragraph 2):

a. Award, agree to or sign any contract (including delivery orders) or contract modifications or in any way obligate (to include the promise of payment) the Government in any way.

b. Make any commitments or changes that affect price, quality, quantity, delivery, the period of performance or other terms and conditions of the contract or delivery order.

c. Make any changes to deliverables required by the contract or the delivery order. This includes extending or condensing the period of performance.

e. Alter the contract or delivery order in any way, either directly or by implication.

f. Issue instructions to the contractor to stop or start work.

g. Order or accept goods, services or performance not expressly required by the contract. This includes the allowance of the contractor not to perform certain tasks within the contract or directing the contractor to perform additional tasks not included in the contract.

h. Render a decision under the Disputes Clause.

i. Authorize delivery or disposition of Government property not authorized by the contract or delivery order.

j. Discuss acquisition plans or provide any advance information that might give one contractor an advantage over another contractor in forthcoming procurements.

k. Re-delegate your COR authority.

l. Treat the contractor employee as a government employee.

MCAA-GP

SUBJECT: Appointment of COR and/or ACOR

You are advised that you can be held personally and financially liable for any unauthorized acts. If a situation arises where you are unsure of how to proceed, contact the undersigned or current KO immediately for guidance.

3. This designation as a COR/ACOR will remain in effect through the life of the contract, unless revoked sooner in writing by the KO or unless you are separated from Government service. If you are to be reassigned or to be separated from Government service, you must notify the KO sufficiently in advance of reassignment or separation to permit timely selection and designation of a successor COR. If your designation is revoked for any reason before completion of this contract, turn your records over to the successor COR or obtain disposition instructions from the KO. The file shall be produced for review at any time upon demand by the KO or the KO's designated representative.
4. You are required to maintain adequate records to sufficiently describe the performance of your duties as a COR/ACOR during the life of this contract and to dispose of such records as directed by the KO. As a minimum, the COR file must contain the following:
 - a. A copy of your letter of appointment from the KO, or any amendments thereto.
 - b. A copy of the contract or the appropriate part of the contract and all contract modifications.
 - c. A copy of the applicable Quality Assurance Surveillance Plan (QASP).
 - d. All correspondence pertaining to this contract, including Memorandums of Record for meetings, contractor discussions, etc.
 - e. Records relating to the contractor's quality control system and plan, and the results of the quality control effort.
 - f. A copy of the surveillance schedule.
 - g. Documentation pertaining to your acceptance of performance of services, including reports and other data.
5. All Government personnel engaged in contracting and related activities shall conduct business dealings with industry in a manner above reproach in every aspect and shall protect the U.S. Government's interest, as well as maintain its reputation for fair and equal dealings with all contractors. DoD 5500.7-R sets forth standards of conduct for all personnel directly and indirectly involved in contracting.
6. A COR/ACOR who may have direct or indirect financial interest which would place the COR/ACOR in a position where there is a conflict between the COR/ACOR's private interests and public interests of the United States shall advise the supervisor and KO of the conflict so the appropriate actions may be taken. COR/ACOR's shall avoid the appearance of a conflict of interest to maintain public confidence in the U.S. Government's conduct of business with the private sector.
7. This letter of appointment shall be in full force and effect until revoked by me or my successor in the same manner it is hereby granted. This appointment cannot be delegated. You are required to acknowledge receipt of this designation on the duplicate copy and return it to me. Your signature also serves as certification that you have read and understand the contents of DoD 5500.7-R. The original copy of this designation should be retained in your file.
8. For further information and explanation of COR duties and responsibilities go to the site below. This site will take you to the acceptance and login pages, then to the COR Guide and all forms.

MCAA-GP
SUBJECT: Appointment of COR and/or ACOR

Please direct any questions to the undersigned at 210-221-3061.

End:

MELISSA OLIVA

Contracting Officer

1. COR Expenditure Log w/Instructions
2. COR Appointment Back-up References
3. Sample CPAR
4. Quarterly Contractor Performance Assessment Report

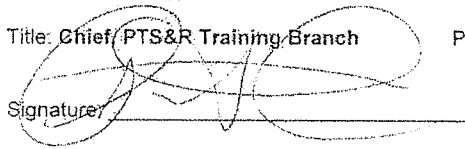
COR/ACOR ACKNOWLEDGEMENT:

I have read, understand and shall comply with the COR/ACOR Appointment Letter and the Joint Ethics Regulation DOD 5500.7R. I have completed and provided evidence of the required training. I understand that the above duties will be added to my performance objectives and be evaluated during my rating period. I also understand that I do not have the authority to obligate the government.

COR Name: MAJ Peggy Fancher

Title: Chief, PTS&R Training Branch

Phone: 210-221-6370

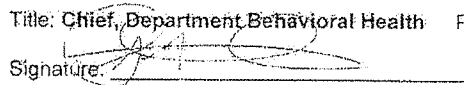
Signature: 

I have read and understand that the above individual will perform the duties of a COR/ACOR. This will be a critical duty and the performance objectives for this individual will reflect the responsibilities set out in this appointment letter. The above individual's performance appraisal will reflect his/her performance as a COR/ACOR, and he/she will be rewarded for or counseled/terminated as appropriate.

SUPERVISOR: Name: LTC Steve Lewis

Title: Chief, Department Behavioral Health

Phone: 210-221-6370

Signature: 

CONTRACTOR COPY FURNISHED:

According to DFARS 201.602-2 (2) (v), a copy of the COR appointment is furnished to the Contractor through the following means (select one or more):

Email

FAX

MAIL

Hand-Carry

Note: Evidence of the above is contained in the contract file.

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, AND 30				1. REQUISITION NUMBER 0010029696		PAGE 1 OF 10					
2. CONTRACT NO. W81K00-11-P-0073		3. AWARD/EFFECTIVE DATE 22-Dec-2010		4. ORDER NUMBER		5. SOLICITATION NUMBER		6. SOLICITATION ISSUE DATE			
7. FOR SOLICITATION INFORMATION CALL:			a. NAME			b. TELEPHONE NUMBER (No Collect Calls)		8. OFFER DUE DATE/LOCAL TIME			
9. ISSUED BY GREAT PLAINS REGIONAL CONTRACTING OFFICE MCAA GP BAMC 3851 ROGER BROOKE L31-9V 210-916-5190 FORT SAM HOUSTON TX 78234-6200 TEL: 210-916-5190 FAX: 210-916-3040			CODE W81K00	10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED <input checked="" type="checkbox"/> SET ASIDE: 100% FOR <input checked="" type="checkbox"/> SB <input type="checkbox"/> HUBZONE SB <input type="checkbox"/> 8(A) <input type="checkbox"/> SVC-DISABLED VET-OWNED SB <input type="checkbox"/> EMERGING SB SIZE STD: \$6.5M NAICS: 813920			11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS Net 30 Days		
15. DELIVER TO AMEDDC&S ATTN: CALVIN WTT 2250 STANLEY RD ATTN: PAT BURTON FORT SAM HOUSTON SAN ANTONIO TX 78234			CODE W45MW2	16. ADMINISTERED BY GREAT PLAINS REGIONAL CONTRACTING OFFICE MCAA GP BAMC J ESPITIA 3851 ROGER BROOKE BLDG 2539 210-221-3490 FORT SAM HOUSTON TX 78234-6200				CODE W81K00		13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)	
17a. CONTRACTOR/OFFEROR BEHNKE, STEPHEN PRIVACY REDACTION TEL. 202-547-4859			CODE 530R3	18a. PAYMENT WILL BE MADE BY DFAS-INDY VP GFEB5 8899 E 56TH STREET INDIANA POLIS IN 46249-3800				CODE HQ0490		13b. RATING	
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER			<input type="checkbox"/> 18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a. UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM							14. METHOD OF SOLICITATION <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP	
19. ITEM NO.		20. SCHEDULE OF SUPPLIES/ SERVICES			21. QUANTITY		22. UNIT	23. UNIT PRICE	24. AMOUNT		
SEE SCHEDULE											
25. ACCOUNTING AND APPROPRIATION DATA See Schedule							26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$7,497.00				
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1. 52.212-4. FAR 52.212-3. 52.212-5 ARE ATTACHED.					ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED						
<input checked="" type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED.					ADDENDA <input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED						
28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN <input type="checkbox"/> TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.					29. AWARD OF CONTRACT: REFERENCE <input type="checkbox"/> OFFER DATED . YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:						
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)			31c. DATE SIGNED				
				<i>Sharon I. Holmes</i>			22-Dec-2010				
30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)			30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT) SHAROD I. HOLMES / CONTRACTING OFFICER TEL: 210-221-3081 EMAIL: sharod.holmes@us.army.mil						

**SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS
(CONTINUED)**

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/ SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
SEE SCHEDULE					

32a. QUANTITY IN COLUMN 21 HAS BEEN
 RECEIVED INSPECTED ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED: _____

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE	32c. DATE	32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE
--	-----------	---

32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE	32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE
	32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	34. VOUCHER NUMBER	35. AMOUNT VERIFIED CORRECT FOR	36. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	37. CHECK NUMBER
--	--------------------	---------------------------------	--	------------------

38. S/R ACCOUNT NUMBER	39. S/R VOUCHER NUMBER	40. PAID BY
------------------------	------------------------	-------------

41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT	42a. RECEIVED BY (<i>Print</i>)		
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER	41c. DATE	42b. RECEIVED AT (<i>Location</i>)	
		42c. DATE REC'D (<i>YY/MM/DD</i>)	42d. TOTAL CONTAINERS

Section SF 1449 - CONTINUATION SHEET

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001		3	Each	\$2,499.00	\$7,497.00 NTE

Guest Speaker

FFP.

NON PERSONAL SERVICES FOR LICENSED PROFESSIONAL CONSULTANT TO PROVIDE BEHAVIORAL SCIENCE COURSE FOR (3) ONE DAY TRAINING SESSIONS. DATE TO BEGIN JANUARY 04-22, 2011 AND THEN AGAIN IN JUNE OF 2011. IAW PROFORMANCE WORK STATEMENT AND CONTRACTOR MANPOWER REPORTING REFER TO PAGE 8.

Session 1: 4 to 22 Jan 2011 : Session 2: 6 to 25 Jun 2011

CONSULTANT POC: STEPHEN BEHNKE (202) 547-4859 OR (202) 336-5999

GOVT ACTIVITY POC: Quentin Perkins, 210 221-6572

ALL RECEIPTS MUST BE SUBMITTED WITH PROPER INVOICE FOR REIMBURSEMENT.

THIS IS IN ACCORDANCE WITH FAR 31.205-46; JOINT TRAVEL REGULATIONS (JTR).

FOB: Destination

PURCHASE REQUEST NUMBER: 0010029698

NET AMT

\$7,497.00

ACRN AA

CIN: GFEB001002969800001

\$7,497.00

DELIVERY INFORMATION

CLIN	DELIVERY DATE	QUANTITY	SHIP TO ADDRESS	UIC
0001	05-JAN-2011	3	AMEDDC&S ATTN: CALVIN WITT 2250 STANLEY RD ATTN: PAT BURTON FORT SAM HOUSTON SAN ANTONIO TX 78234 210 808-2886 FOB: Destination	W45MW2

ACCOUNTING AND APPROPRIATION DATA

AA: 097201120110130000011010625274AA0136 000000050460 6100.9000021001
 COST CODE: A74AA
 AMOUNT: \$7,497.00
 CIN GFEB001002969800001: \$7,497.00

CLAUSES INCORPORATED BY REFERENCE

52.212-4 Contract Terms and Conditions--Commercial Items JUN 2010

CLAUSES INCORPORATED BY FULL TEXT

ADDENDUM TO 52.212-4

(u) The non-FAR Part 12 discretionary FAR, DFARS, AFARS, and LOCAL clauses included herein are incorporated into this contract either by reference or in full text. If incorporated by reference, see clause 52.252-2 herein for locations where full text can be found.

CLAUSES INCORPORATED BY REFERENCE

52.219-6	Notice Of Total Small Business Set-Aside	JUN 2003
52.222-3	Convict Labor	JUN 2003
52.222-50	Combating Trafficking in Persons	FEB 2009
52.223-18	Contractor Policy to Ban Text Messaging While Driving.	SEP 2010
52.225-13	Restrictions on Certain Foreign Purchases	JUN 2008
52.232-33	Payment by Electronic Funds Transfer--Central Contractor Registration	OCT 2003
52.233-3	Protest After Award	AUG 1996
52.233-4	Applicable Law for Breach of Contract Claim	OCT 2004
252.203-7000	Requirements Relating to Compensation of Former DoD Officials	JAN 2009
252.203-7002	Requirement to Inform Employees of Whistleblower Rights	JAN 2009
252.204-7003	Control Of Government Personnel Work Product	APR 1992
252.232-7003	Electronic Submission of Payment Requests and Receiving Reports	MAR 2008
252.232-7010	Levies on Contract Payments	DEC 2006

CLAUSES INCORPORATED BY FULL TEXT

52.252-2 CLAUSES INCORPORATED BY REFERENCE (FEB 1998)

This contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. Also, the full text of a clause may be accessed electronically at this/these address(es):

<http://www.arnet.gov/far>
<http://farsite.hill.af.mil>

(End of clause)

52.252-6 AUTHORIZED DEVIATIONS IN CLAUSES (APR 1984)

(a) The use in this solicitation or contract of any Federal Acquisition Regulation (48 CFR Chapter 1) clause with an authorized deviation is indicated by the addition of "(DEVIATION)" after the date of the clause.

(b) The use in this solicitation or contract of any **"DoD FAR Supplement (48 CFR Chapter 2)"** clause with an authorized deviation is indicated by the addition of "(DEVIATION)" after the name of the regulation.

(End of clause)

CLAUSES INCORPORATED BY REFERENCE

252.204-7008 Export-Controlled Items APR 2010

CLAUSES INCORPORATED BY FULL TEXT

252.212-7001 CONTRACT TERMS AND CONDITIONS REQUIRED TO IMPLEMENT STATUTES OR EXECUTIVE ORDERS APPLICABLE TO DEFENSE ACQUISITIONS OF COMMERCIAL ITEMS (JUN 2010) (DEVIATION)

(a) In addition to the clauses listed in paragraph (b) of the Contract Terms and Conditions Required to Implement Statutes or Executive Orders--Commercial Items clause of this contract (FAR 52.212-5) (JUL 2010) (DEVIATION), the Contractor shall include the terms of the following clause, if applicable, in subcontracts for commercial items or commercial components, awarded at any tier under this contract:

- 252.237-7019 Training for Contractor Personnel Interacting with Detainees (SEP 2006) (Section 1092 of Pub. L. 108-375).
- 252.247-7003 Pass-Through of Motor Carrier Fuel Surcharge Adjustment to the Cost Bearer (JUL 2009) (Section 884 of Public Law 110-417)
- 252.247-7023 Transportation of Supplies by Sea (MAY 2002) (10 U.S.C. 2631)
- 252.247-7024 Notification of Transportation of Supplies by Sea (MAR 2000) (10 U.S.C. 2631)

(End of clause)

WIDE AREA WORKFLOW (WAWF) ARMY ELECTRONIC INVOICING INSTRUCTIONS

Electronic Submission of Payment Request

Contractor shall submit payment request using the following method as mutually agreed to by the Contractor, the Contracting Officer, the contract administration office, and the payment office.

Wide Area Workflow –Receipt and Acceptance (WAWF-RA) (see instructions below)
WAWF customer svc phone: 1 (801) 605-7095

Other (please specify) _____

DFAS POC and Phone: **DFAS/INDY VP GFEBS, Customer Service (888) 332-7366 Opt 2 Opt 2**
Paying Office code: HQ0490 Office Hrs: 07:30am/eastern to 4:30 pm/eastern

WAWF-RA is the method to electronically process vendor request for payment. This application allows DOD vendors to submit and track Invoices and Receipt/Acceptance documents electronically. Contractor electing to use WAWF-RA shall (i) register to use WAWF-RA at <https://wawf.eb.mil> and (ii) ensure an electronic business point of contract (POC) is designated in the Central Contractor Registration site at <http://www.ccr.gov> within ten (10) calendar days after award of this contract/order.

WAWF- RA Instructions

Questions concerning payments should be directed to the Defense Finance and Accounting Service (Block 18a of your purchase order/contract) at

DFAS – INDY VP GFEBS (HQ0490)
 8899 E 56th STREET
 INDIANAPOLIS IN 46249-3800
 TEL: (801) 605-7095

PAYMENT OFFICE FISCAL STATION CODE: **021001**

Please have your purchase order/contract number ready when calling about payments.

You can easily access payment and receipt information using the DFAS web site at <http://www.dfas.mil/money/vendor>. Your purchase order/contract number or invoice number will be required to inquire status of your payment.

The following codes and information will be required to assure successful flow of WAWF-RA documents.

TYPE OF DOCUMENT [X the appropriate block]

Invoice and Receiving Report (COMBO)

Invoice as 2-in-1 (Services Only)

CAGE CODE: **530R3**

ISSUE BY DODAAC: **W81K00**

ADMIN BY DODAAC: **W81K00**

INSPECT BY DODAAC: **W45MW2**

ACCEPT BY DODAAC: **W45MW2**

SHIP TO DODAAC: W45MW2

LOCAL PROCESSING OFFICE DODDAC: N/A

PAYMENT OFFICE FISCAL STATION CODE: 021001

Paying Office: HQ0490 DFAS/INDY

EMAIL POINTS OF CONTACT LISTING: (Use Group e-mail accounts if applicable)

INSPECTOR: jamesp.burton@amedd.army.mil

ACCEPTOR: jamesp.burton@amedd.army.mil

RECEIVING OFFICE POC: jamesp.burton@amedd.army.mil

CONTRACT ADMINISTRATOR: joann.espitia@amedd.army.mil

CONTRACTING OFFICER: melissa.oliva@amedd.army.mil

ADDITIONAL CONTACTS: cindi.geeslin@amedd.army.mil

melissa.lee@amedd.army.mil

END OF ADDENDUM 52.212-4

52.212-5 CONTRACT TERMS AND CONDITIONS REQUIRED TO IMPLEMENT STATUTES OR EXECUTIVE ORDERS--COMMERCIAL ITEMS (JUL 2010) (DEVIATION)

(a) Comptroller General Examination of Record. The Contractor agrees to comply with the provisions of this paragraph (a) if the contract was awarded using other than sealed bid, is in excess of the simplified acquisition threshold, and does not contain the clause at 52.215-2, Audit and Records-Negotiation.

(1) The Comptroller General of the United States, or an authorized representative of the Comptroller General, shall have access to the right to examine any of the Contractor's directly pertinent records involving transactions related to this contract.

(2) The Contractor shall make available at its offices at all reasonable times, the records, materials, and other evidence for examination, audit, or reproduction, until 3 years after final payment under this contract or for any shorter period specified in FAR Subpart 4.7, Contractor Records Retention, of the other clauses of this contract. If this contract is completely or partially terminated, the records relating to the work terminated shall be made available for 3 years after any resulting final termination settlement. Records relating to appeals under the disputes clause or to litigation or the settlement of claims arising under or relating to this contract shall be made available until such appeals, litigation, or claims are finally resolved.

(3) As used in this clause, records include books, documents, accounting procedures and practices, and other data, regardless of form. This does not require the Contractor to create or maintain any record that the Contractor does not maintain in the ordinary course of business or pursuant to a provision of law.

(b)(1) Notwithstanding the requirements of any other clause in this contract, the Contractor is not required to flow down any FAR clause, other than those in this paragraph (b)(i) in a subcontract for commercial items. Unless otherwise indicated below, the extent of the flow down shall be as required by the clause-

(i) 52.203-13, Contractor Code of Business Ethics and Conduct (APR 2010) (Pub. L. 110-252, Title VI, Chapter 1 (41 U.S.C. 251 note).

(ii) 52.219-8, Utilization of Small Business Concerns (May 2004) (15 U.S.C. 637(d)(2) and (3)), in all subcontracts that offer further subcontracting opportunities. If the subcontract (except subcontracts to small business concerns) exceeds \$550,000 (\$1,000,000 for construction of any public facility), the subcontractor must include 52.219-8 in lower tier subcontracts that offer subcontracting opportunities.

(iii) Reserved.

(iv) 52.222-26, Equal Opportunity (MAR 2007) (E.O. 11246).

(v) 52.222-35, Equal Opportunity for Special Disabled Veterans, Veterans of the Vietnam Era, and Other Eligible Veterans (SEP 2006) (38 U.S.C. 4212).

(vi) 52.222-36, Affirmative Action for Workers with Disabilities (JUN 1998) (29 U.S.C. 793).

(vii) Reserved.

(viii) 52.222-41, Service Contract Act of 1965 (Nov 2007) (41 U.S.C. 351, et seq.).

(ix) 52.222-50, Combating Trafficking in Persons (FEB 2009) (22 U.S.C. 7104(g)).

Alternate I (AUG 2007) of 52.222-50 (22 U.S.C. 7104(g)).

(x) 52.222-51, Exemption from Application of the Service Contract Act to Contracts for Maintenance, Calibration, or Repair of Certain Equipment--Requirements (Nov 2007) (41 U.S.C. 351, et seq.).

(xi) 52.222-53, Exemption from Application of the Service Contract Act to Contracts for Certain Services--Requirements (FEB 2009) (41 U.S.C. 351, et seq.).

(xii) 52.222-54, Employment Eligibility Verification (JAN 2009).

(xiii) 52.226-6, Promoting Excess Food Donation to Nonprofit Organizations. (MAR 2009) (Pub. L. 110-247). Flow down required in accordance with paragraph (e) of FAR clause 52.226-6.

(xiv) 52.247-64, Preference for Privately Owned U.S.-Flag Commercial Vessels (FEB 2006) (46 U.S.C. Appx 1241(b) and 10 U.S.C. 2631). Flow down required in accordance with paragraph (d) of FAR clause 52.247-64.

(2) While not required, the contractor May include in its subcontracts for commercial items a minimal number of additional clauses necessary to satisfy its contractual obligations.

(End of clause)

PROFORMANCE WORK STATEMENT

Dr. Steve Behnke

1. The action for which approval is sought is a selected source contract for Dr. Steve Behnke as guest instructor/SME for the Behavioral Science Consultation Team (BSCT) Course. He is a nationally recognized expert

in the ethics education, from the American Psychological Association (APA). He will provide three, one-day training sessions. The courses will be held from January 4- 22, 2011, and then again in June of 2011. The training will be conducted at Ft. Huachuca at the Intelligence Center and School. The target audience is composed of military psychologists (psychiatrists occasionally) and enlisted behavioral health specialists assigned in support of interrogation/detainee operations.

2. The services required to meet the agency's needs are: to use the subject matter expertise of Dr. Behnke to provide training to behavioral health personnel in support of interrogation/detainee operations.

3. The statutory authority permitting other than full and open completion is 10 U.S. C. 2304 (c) (1)-FAR 6.302-1, only one responsible source.

4. The proposed contractor's unique qualifications and the nature of the acquisition dictates use of the authority cited for the following reasons:

U.S. Army/Air Force/Navy behavioral health personnel are integral to ensuring safe, legal, ethical, and effective interrogation/detainee operations. The Office of the Army Surgeon General has set policy mandating special training be conducted to prepare personnel for these high visibility assignments. Trainers in this field are difficult to find, especially those with working knowledge/experience with military operations. Training will assist in BSCT personnel in performing their duties more effectively.

Dr. Behnke is Director of Ethics for the APA. He has been associated with the BSCT course since its inception several years ago. He is viewed as an expert in this field. He has lectured/consulted extensively throughout the United States. He has also lectured to previous military audiences.

Contractor Manpower Reporting (CMR)

The Office of the Assistant Secretary of the Army (Manpower & Reserve Affairs) operates and maintains a secure Army data collection site where the contractor shall report ALL contractor manpower (including subcontractor manpower) required for performance of this contract. The contractor shall completely fill in all the information in the format using the following web address: <https://contractormanpower.army.pentagon.mil>. The required information includes: (1) Contracting Office, Contracting Officer, Contracting Officer's Technical Representative; (2) Contract number, including task or delivery order number; (3) Beginning and ending dates covered by reporting period; (4) Contractor name, address, phone number, e-mail address, identity of contractor employee entering data; (5) Estimated direct labor hours (including sub-contractors); (6) Estimated direct labor dollars paid this reporting period (including sub-contractors); (7) Total payments (including sub-contractors); (8) Predominant Federal Service Code (FSC) reflecting services provided by contractor (and separate predominant FSC for each sub-contractor if different); (9) Estimated data collection cost; (10) Organizational title associated with Unit Identification Code (UIC) for the Army Requiring Activity (the Army Requiring Activity is responsible for providing the contractor with its UIC for the purposes of reporting this information); (11) Locations where contractor and sub-contractors perform the work (specified by zip code in the United States and nearest city, country, when in an overseas location, using standardized nomenclature provided on website); (12) Presence of deployment or contingency contract language; and (13) Number of contractor and sub-contractor employees deployed in theater this reporting period (by country). As part of its submission, the contractor shall also provide the estimated total cost (if any) incurred to comply with this reporting requirement. Reporting period will be the period of performance not to exceed 12 months ending 30 September of each government fiscal year and must be reported by 31 October of each calendar year. Contractors may use a direct XML data transfer to the database server or fill in the fields on the website. The XML direct transfer is a format for transferring files from a contractor's systems to the secure web site without the need for separate data entries for each required data element at the web site. The specific formats for the XML direct transfer may be downloaded from the website.

NOTE: Contractor shall coordinate all the information required from the COR and the Contracting Office as required for CMR Reporting. All other information can be found on the award document. Beginning and ending dates for item 3 above may be found under the delivery schedule listed in for each respective CLIN.

Information for items 4 through 9 must be provided by the Contractor.

Organizational title for item 10 above is: Army Medical Department. The Unit Identifier Code shall be provided by the COR.

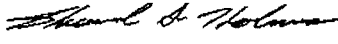
QUALITY ASSURANCE SURVEILLANCE PLAN (QASP) –

Behavioral Science Consultation Team (BSCT) Course

The following minimum Quality Assurance Surveillance Plan applies. The Government may modify inspection methods in accordance with site specific requirements.

PERFORMANCE OBJECTIVE	PERFORMANCE STANDARD	REF PWS	METHOD OF ASSESSMENT
Service requirement	Comply 100% of the time	2.	Observation by COR
Instructor qualifications	Comply 100% of the time	1. & 4.	Observation by COR

STANDARD	MEASUREMENT	PAST PERFORMANCE ASSESSMENT
99% to 100%	Excellent	Document Past Performance
96% to 98%	Very Good	Assessment Report, paying
95%	Satisfactory	particular attention to
91% to 94%	Marginal	performance that exceeds
90% or Less	Unsatisfactory	the standard

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, AND 30				1. REQUISITION NUMBER 0010636667		PAGE 1 OF 17			
2. CONTRACT NO. W81K00-15-P-0205		3. AWARD/EFFECTIVE DATE 17-Feb-2015		4. ORDER NUMBER		5. SOLICITATION NUMBER		6. SOLICITATION ISSUE DATE	
7. FOR SOLICITATION INFORMATION CALL:			a. NAME			b. TELEPHONE NUMBER (No Collect Calls)		8. OFFER DUE DATE/LOCAL TIME	
9. ISSUED BY W40M USA MEDCOM HCAA SOUTHERN REG CONTR OFC 3551 ROGER BROOK DR BLDG 3600 FORT SAM HOUSTON TX 78234-6200 TEL: FAX:			CODE W81K00		10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED OR <input type="checkbox"/> SET ASIDE: _____ % FOR: <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS (WOSB) <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> ECONOMICALLY DISADVANTAGED WOMEN-OWNED SMALL BUSINESS (EDWOSB) NAICS: 611430 <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> 8(A) SIZE STANDARD: 11,000.00				
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE			12. DISCOUNT TERMS Net 30 Days			13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)		13b. RATING	
15. DELIVER TO AMEDDC&S AMEDDC&S 3599 SCOTT ROAD FORT SAM HOUSTON 78234			CODE W45MV2		16. ADMINISTERED BY W40M USA MEDCOM HCAA SOUTHERN REG CONTR OFC POC: MONA MCFADDED 3551 ROGER BROOK DR BLDG 3600 FORT SAM HOUSTON TX 78234-6200				
17a. CONTRACTOR/OFFEROR AMERICAN PSYCHOLOGICAL ASSOCIATION, INC. 750 1ST ST NE STE 605 WASHINGTON DC 20002-8009 TELEPHONE NO.			CODE 1PLC7		FACILITY CODE		18a. PAYMENT WILL BE MADE BY DFAS-INDY VP GFEB5 8899 E 56TH STREET INDIANAPOLIS IN 46249-3800		
17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER <input type="checkbox"/>					18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a. UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM				
19. ITEM NO.		20. SCHEDULE OF SUPPLIES/ SERVICES			21. QUANTITY		22. UNIT	23. UNIT PRICE	24. AMOUNT
		SEE SCHEDULE							
25. ACCOUNTING AND APPROPRIATION DATA See Schedule						26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$10,000.00			
27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3, 52.212-5 ARE ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED									
27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4, FAR 52.212-5 IS ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED									
28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED. <input type="checkbox"/>					29. AWARD OF CONTRACT: REF. OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS: <input type="checkbox"/>				
30a. SIGNATURE OF OFFEROR/CONTRACTOR					31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) 				
30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)			30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT) SHAROD I. HOLMES / CONTRACTING OFFICER TEL: 210-221-3081 EMAIL: sharod.i.holmes.civ@mail.mil			31c. DATE SIGNED 17-Feb-2015	

**SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS
(CONTINUED)**

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/ SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
SEE SCHEDULE					

32a. QUANTITY IN COLUMN 21 HAS BEEN
 RECEIVED INSPECTED ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED: _____

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE	32c. DATE	32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE
--	-----------	---

32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE	32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE
	32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	34. VOUCHER NUMBER	35. AMOUNT VERIFIED CORRECT FOR	36. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	37. CHECK NUMBER
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38. S/R ACCOUNT NUMBER	39. S/R VOUCHER NUMBER	40. PAID BY
------------------------	------------------------	-------------

41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT	42a. RECEIVED BY (<i>Print</i>)	
	41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER	
	42b. RECEIVED AT (<i>Location</i>)	
41c. DATE	42c. DATE REC'D (<i>YY/MM/DD</i>)	42d. TOTAL CONTAINERS

Section SF 1449 - CONTINUATION SHEET

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	Behavioral Science Consultation Course FFP	1	Each	\$5,000.00	\$5,000.00
	<p>Non-personal services: Provide Behavioral Science Consultation Course per performance work statement. Training will be at the Intelligence Center and School at Ft. Huachuca on Feb 24 & 26, 2015. Price includes training, travel, lodging, and per diem in accordance with FAR 31.205-46. Maximum per diem rates in effect at the time of travel as set forth in the Federal Regulation, prescribed by General Services Administration (www.gsa.gov). Government POC is Mr. J. Patrick Burton, 210-221-6761. Vendor POC is Steven Kleinman, 831-392-5653. FOB: Destination PURCHASE REQUEST NUMBER: 0010636667 FOB: Destination PURCHASE REQUEST NUMBER: 0010636667</p>				
				NET AMT	\$5,000.00
	ACRN AA CIN: GFEBS001063666700010				\$5,000.00

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0002	Behavioral Science Consultation Course FFP Non-personal services: Provide Behavioral Science Consultation Course per performance work statement. Training will be at the Intelligence Center and School at Ft. Huachuca on July 14 & 16, 2015. Price includes training, travel, lodging, and per diem in accordance with FAR 31.205-46. Maximum per diem rates in effect at the time of travel as set forth in the Federal Regulation, prescribed by General Services Administration (www.gsa.gov). Government POC is Mr. J. Patrick Burton, 210-221-6761. Vendor POC is Steven Kleinman, 831-392-5653. FOB: Destination FOB: Destination PURCHASE REQUEST NUMBER: 0010636667	1	Each	\$5,000.00	\$5,000.00

NET AMT \$5,000.00

ACRN AA \$5,000.00
CIN: GFEBS001063666700020

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0003	Contract Manpower Report FFP IAW Paragraph 4 of the PWS FOB: Destination	1	Each		NSP

NET AMT

INSPECTION AND ACCEPTANCE TERMS

Supplies/services will be inspected/accepted at:

CLIN	INSPECT AT	INSPECT BY	ACCEPT AT	ACCEPT BY
0001	N/A	N/A	N/A	Government
0002	N/A	N/A	N/A	Government

DELIVERY INFORMATION

CLIN	DELIVERY DATE	QUANTITY	SHIP TO ADDRESS	UIC
0001	POP 24-FEB-2015 TO 26-FEB-2015	N/A	AMEDDC&S AMEDDC&S 3599 SCOTT ROAD FORT SAM HOUSTON 78234 FOB: Destination	W45MW2
0002	POP 14-JUL-2015 TO 16-JUL-2015	N/A	(SAME AS PREVIOUS LOCATION) FOB: Destination	W45MW2
0003	31-OCT-2014	1	(SAME AS PREVIOUS LOCATION) FOB: Destination	W45MW2

ACCOUNTING AND APPROPRIATION DATA

AA: 09720152015013000018810110106252 S.0018542.4.9.5.25 6100.9000021001
COST CODE: A74AA
AMOUNT: \$10,000.00
CIN GFEBS001063666700010: \$5,000.00
CIN GFEBS001063666700020: \$5,000.00

CLAUSES INCORPORATED BY REFERENCE

52.212-4 Contract Terms and Conditions--Commercial Items DEC 2014

CLAUSES INCORPORATED BY FULL TEXT

ADDENDUM TO 52.212-4

(v) The non-FAR Part 12 discretionary FAR, DFARS, AFARS, and LOCAL clauses included herein are incorporated into this contract either by reference or in full text. If incorporated by reference, see clause 52.252-2 herein for locations where full text can be found.

CLAUSES INCORPORATED BY REFERENCE

52.222-3	Convict Labor	JUN 2003
52.222-21	Prohibition Of Segregated Facilities	FEB 1999
52.222-26	Equal Opportunity	MAR 2007
52.222-50	Combating Trafficking in Persons	FEB 2009
52.223-18	Encouraging Contractor Policies To Ban Text Messaging While Driving	AUG 2011
52.225-13	Restrictions on Certain Foreign Purchases	JUN 2008
52.232-33	Payment by Electronic Funds Transfer--System for Award Management	JUL 2013
52.232-39	Unenforceability of Unauthorized Obligations	JUN 2013
52.233-3	Protest After Award	AUG 1996
52.233-4	Applicable Law for Breach of Contract Claim	OCT 2004
252.201-7000	Contracting Officer's Representative	DEC 1991
252.203-7000	Requirements Relating to Compensation of Former DoD Officials	SEP 2011
252.203-7002	Requirement to Inform Employees of Whistleblower Rights	SEP 2013
252.204-7000	Disclosure Of Information	AUG 2013
252.204-7003	Control Of Government Personnel Work Product	APR 1992
252.216-7009	Allowability of Legal Costs Incurred in Connection With a Whistleblower Proceeding	SEP 2013
252.232-7003	Electronic Submission of Payment Requests and Receiving Reports	JUN 2012
252.232-7010	Levies on Contract Payments	DEC 2006
252.244-7000	Subcontracts for Commercial Items	JUN 2013

CLAUSES INCORPORATED BY FULL TEXT

52.219-28 POST-AWARD SMALL BUSINESS PROGRAM REREPRESENTATION (JULY 2013)

(a) Definitions. As used in this clause--

Long-term contract means a contract of more than five years in duration, including options. However, the term does not include contracts that exceed five years in duration because the period of performance has been extended for a cumulative period not to exceed six months under the clause at 52.217-8, Option to Extend Services, or other appropriate authority.

Small business concern means a concern, including its affiliates, that is independently owned and operated, not dominant in the field of operation in which it is bidding on Government contracts, and qualified as a small business under the criteria in 13 CFR part 121 and the size standard in paragraph (c) of this clause. Such a concern is "not dominant in its field of operation" when it does not exercise a controlling or major influence on a national basis in a kind of business activity in which a number of business concerns are primarily engaged. In determining whether dominance exists, consideration shall be given to all appropriate factors, including volume of business, number of employees, financial resources, competitive status or position, ownership or control of materials, processes, patents, license agreements, facilities, sales territory, and nature of business activity.

(b) If the Contractor represented that it was a small business concern prior to award of this contract, the Contractor shall rerepresent its size status according to paragraph (e) of this clause or, if applicable, paragraph (g) of this clause, upon the occurrence of any of the following:

(1) Within 30 days after execution of a novation agreement or within 30 days after modification of the contract to include this clause, if the novation agreement was executed prior to inclusion of this clause in the contract.

(2) Within 30 days after a merger or acquisition that does not require a novation or within 30 days after modification of the contract to include this clause, if the merger or acquisition occurred prior to inclusion of this clause in the contract.

(3) For long-term contracts--

(i) Within 60 to 120 days prior to the end of the fifth year of the contract; and

(ii) Within 60 to 120 days prior to the date specified in the contract for exercising any option thereafter.

(c) The Contractor shall rerepresent its size status in accordance with the size standard in effect at the time of this rerepresentation that corresponds to the North American Industry Classification System (NAICS) code assigned to this contract. The small business size standard corresponding to this NAICS code can be found at <http://www.sba.gov/content/table-small-business-size-standards>.

(d) The small business size standard for a Contractor providing a product which it does not manufacture itself, for a contract other than a construction or service contract, is 500 employees.

(e) Except as provided in paragraph (g) of this clause, the Contractor shall make the representation required by paragraph (b) of this clause by validating or updating all its representations in the Representations and Certifications section of the System for Award Management (SAM) and its other data in SAM, as necessary, to ensure that they reflect the Contractor's current status. The Contractor shall notify the contracting office in writing within the timeframes specified in paragraph (b) of this clause that the data have been validated or updated, and provide the date of the validation or update.

(f) If the Contractor represented that it was other than a small business concern prior to award of this contract, the Contractor may, but is not required to, take the actions required by paragraphs (e) or (g) of this clause.

(g) If the Contractor does not have representations and certifications in SAM, or does not have a representation in SAM for the NAICS code applicable to this contract, the Contractor is required to complete the following rerepresentation and submit it to the contracting office, along with the contract number and the date on which the rerepresentation was completed:

The Contractor represents that it () is, () is not a small business concern under NAICS Code 611430- assigned to contract number W81K00-15-P-0205.

(Contractor to sign and date and insert authorized signer's name and title).

(End of clause)

52.252-2 CLAUSES INCORPORATED BY REFERENCE (FEB 1998)

This contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. Also, the full text of a clause may be accessed electronically at this/these address(es):

<http://farsite.hill.af.mil>

(End of clause)

52.252-6 AUTHORIZED DEVIATIONS IN CLAUSES (APR 1984)

(a) The use in this solicitation or contract of any Federal Acquisition Regulation (48 CFR Chapter 1) clause with an authorized deviation is indicated by the addition of "(DEVIATION)" after the date of the clause.

(b) The use in this solicitation or contract of any DoD FAR Supplement (48 CFR Chapter 2) clause with an authorized deviation is indicated by the addition of "(DEVIATION)" after the name of the regulation.

(End of clause)

WIDE AREA WORKFLOW (WAWF) ARMY ELECTRONIC INVOICING INSTRUCTIONS

Electronic Submission of Payment Request

Contractor shall submit payment request using the following method as mutually agreed to by the Contractor, the Contracting Officer, the contract administration office, and the payment office.

Wide Area Workflow –Receipt and Acceptance (WAWF-RA) (see instructions below)

WAWF customer svc phone: 1 (801) 605-7095

Web Invoicing System (WInS)

American National Standards Institute (ANSI) X.12 electronic data interchange (EDI) formats

Other (please specify) _____

DFAS POC and Phone: DFAS/INDY VP GFEBs, Customer Service (888) 332-7366 Opt 2 Opt 2

Paying Office code: HQ0490

Office Hrs: 07:30am/eastern to 4:30 pm/eastern

WAWF-RA is the method to electronically process vendor request for payment. This application allows DOD vendors to submit and track Invoices and Receipt/Acceptance documents electronically. Contractor electing to use WAWF-RA shall (i) register to use WAWF-RA at <https://wawf.eb.mil> and (ii) ensure an electronic business point of contract (POC) is designated in the System For Award Management site at <https://www.sam.gov> within ten (10) calendar days after award of this contract/order.

WAWF- RA Instructions

Questions concerning payments should be directed to the Defense Finance and Accounting Service (Block 18a of your purchase order/contract) at

DFAS – INDY VP GFEBs (HQ0490)

8899 E 56th STREET

INDIANAPOLIS IN 46249-3800

TEL: (801) 605-7095

PAYMENT OFFICE FISCAL STATION CODE: 021001

Please have your purchase order/contract number ready when calling about payments.

You can easily access payment and receipt information using the DFAS web site at <http://www.dfas.mil/money/vendor>. Your purchase order/contract number or invoice number will be required to inquire status of your payment.

The following codes and information will be required to assure successful flow of WAWF-RA documents.

TYPE OF DOCUMENT [X the appropriate block]

Commercial Item Financing

Construction Invoice (Contractor Only)

Invoice (Contractor Only)

Invoice and Receiving Report (COMBO)

Invoice as 2-in-1 (Services Only)

Performance Based Payment (Government Only)

Progress Payment (Government Only)

Cost Voucher (Government Only)

Receiving Report (Government Only)

Receiving Report With UID Data (Government Only)

Summary Cost Voucher (Government Only)

CAGE CODE: 1PLC7

ISSUE BY DODAAC: W81K00

ADMIN BY DODAAC: W81K00

INSPECT BY DODAAC: W45MW2

ACCEPT BY DODAAC: W45MW2

SHIP TO DODAAC: W45MW2

LOCAL PROCESSING OFFICE DODDAC: n/a

PAYMENT OFFICE FISCAL STATION CODE: 021001

EMAIL POINTS OF CONTACT LISTING: (Use Group e-mail accounts if applicable)

INSPECTOR: james.p.burton8.civ@mail.mil

ACCEPTOR: james.p.burton8.civ@mail.mil

RECEIVING OFFICE POC: james.p.burton8.civ@mail.mil

CONTRACT ADMINISTRATOR: mona.m.mcfadden.mil@mail.mil

CONTRACTING OFFICER: sharod.i.holmes.civ@mail.mil

(End of clause)

52.212-5 CONTRACT TERMS AND CONDITIONS REQUIRED TO IMPLEMENT STATUTES OR EXECUTIVE ORDERS--COMMERCIAL ITEMS (DEC 2014)

(a) The Contractor shall comply with the following Federal Acquisition Regulation (FAR) clauses, which are incorporated in this contract by reference, to implement provisions of law or Executive orders applicable to acquisitions of commercial items:

(1) 52.209-10, Prohibition on Contracting with Inverted Domestic Corporations (Dec 2014)

(2) 52.222-50, Combating Trafficking in Persons (FEB 2009) (22 U.S.C. 7104(g)).

___ Alternate I (Aug 2007) of 52.222-50 (22 U.S.C. 7104(g)).

(3) 52.233-3, Protest After Award (AUG 1996) (31 U.S.C. 3553).

(4) 52.233-4, Applicable Law for Breach of Contract Claim (OCT 2004) (Public Laws 108-77 and 108-78 (19 U.S.C. 3805 note)).

(b) The Contractor shall comply with the FAR clauses in this paragraph (b) that the Contracting Officer has indicated as being incorporated in this contract by reference to implement provisions of law or Executive orders applicable to acquisitions of commercial items: (Contracting Officer check as appropriate.)

___ (1) 52.203-6, Restrictions on Subcontractor Sales to the Government (Sept 2006), with Alternate I (Oct 1995) (41 U.S.C. 4704 and 10 U.S.C. 2402).

___ (2) 52.203-13, Contractor Code of Business Ethics and Conduct (Apr 2010) (41 U.S.C. 3509).

___ (3) 52.203-15, Whistleblower Protections under the American Recovery and Reinvestment Act of 2009 (June 2010) (Section 1553 of Pub. L. 111-5). (Applies to contracts funded by the American Recovery and Reinvestment Act of 2009.)

___ (4) 52.204-10, Reporting Executive Compensation and First-Tier Subcontract Awards (July 2013) (Pub. L. 109-282) (31 U.S.C. 6101 note).

___ (5) [Reserved]

___ (6) 52.204-14, Service Contract Reporting Requirements (JAN 2014) (Pub. L. 111-117, section 743 of Div. C).

___ (7) 52.204-15, Service Contract Reporting Requirements for Indefinite-Delivery Contracts (JAN 2014) (Pub. L. 111-117, section 743 of Div. C).

____ (8) 52.209-6, Protecting the Government's Interest When Subcontracting with Contractors Debarred, Suspended, or Proposed for Debarment. (Aug, 2013) (31 U.S.C. 6101 note).

____ (9) 52.209-9, Updates of Publicly Available Information Regarding Responsibility Matters (July 2013) (41 U.S.C. 2313).

____ (10) [Reserved]

____ (11)(i) 52.219-3, Notice of HUBZone Set-Aside or Sole-Source Award (NOV 2011) (15 U.S.C. 657a).

____ (ii) Alternate I (NOV 2011) of 52.219-3.

____ (12) (i) 52.219-4, Notice of Price Evaluation Preference for HUBZone Small Business Concerns (OCT 2014) (if the offeror elects to waive the preference, it shall so indicate in its offer) (15 U.S.C. 657a).

____ (ii) Alternate I (JAN 2011) of 52.219-4.

____ (13) [Reserved]

____ (14)(i) 52.219-6, Notice of Total Small Business Set-Aside (NOV 2011) (15 U.S.C. 644).

____ (ii) Alternate I (NOV 2011).

____ (iii) Alternate II (NOV 2011).

____ (15)(i) 52.219-7, Notice of Partial Small Business Set-Aside (June 2003) (15 U.S.C. 644).

____ (ii) Alternate I (Oct 1995) of 52.219-7.

____ (iii) Alternate II (Mar 2004) of 52.219-7.

____ (16) 52.219-8, Utilization of Small Business Concerns (OCT 2014) (15 U.S.C. 637(d)(2) and (3)).

____ (17)(i) 52.219-9, Small Business Subcontracting Plan (OCT 2014) (15 U.S.C. 637(d)(4)).

____ (ii) Alternate I (Oct 2001) of 52.219-9.

____ (iii) Alternate II (Oct 2001) of 52.219-9.

____ (iv) Alternate III (OCT 2014) of 52.219-9.

____ (18) 52.219-13, Notice of Set-Aside of Orders (NOV 2011) (15 U.S.C. 644(r)).

____ (19) 52.219-14, Limitations on Subcontracting (NOV 2011) (15 U.S.C. 637(a)(14)).

____ (20) 52.219-16, Liquidated Damages—Subcontracting Plan (Jan 1999) (15 U.S.C. 637(d)(4)(F)(i)).

____ (21) 52.219-27, Notice of Service-Disabled Veteran-Owned Small Business Set-Aside (NOV 2011) (15 U.S.C. 657f).

____ (22) 52.219-28, Post Award Small Business Program Rerepresentation (July 2013) (15 U.S.C. 632(a)(2)).

____ (23) 52.219-29, Notice of Set-Aside for Economically Disadvantaged Women-Owned Small Business (EDWOSB) Concerns (July 2013) (15 U.S.C. 637(m)).

____ (24) 52.219-30, Notice of Set-Aside for Women-Owned Small Business (WOSB) Concerns Eligible Under the WOSB Program (July 2013) (15 U.S.C. 637(m)).

____ (25) 52.222-3, Convict Labor (June 2003) (E.O. 11755).

____ (26) 52.222-19, Child Labor—Cooperation with Authorities and Remedies (JAN 2014) (E.O. 3126).

____ (27) 52.222-21, Prohibition of Segregated Facilities (Feb 1999).

____ (28) 52.222-26, Equal Opportunity (Mar 2007) (E.O. 11246).

____ (29) 52.222-35, Equal Opportunity for Veterans (Jul 2014)(38 U.S.C. 4212).

____ (30) 52.222-36, Equal Opportunity for Workers with Disabilities (July 2014) (29 U.S.C. 793).

____ (31) 52.222-37, Employment Reports on Veterans (July 2014) (38 U.S.C. 4212).

____ (32) 52.222-40, Notification of Employee Rights Under the National Labor Relations Act (Dec 2010) (E.O. 13496).

____ (33) 52.222-54, Employment Eligibility Verification (Aug 2013). (Executive Order 12989). (Not applicable to the acquisition of commercially available off-the-shelf items or certain other types of commercial items as prescribed in 22.1803.)

____ (34)(i) 52.223-9, Estimate of Percentage of Recovered Material Content for EPA–Designated Items (May 2008) (42 U.S.C. 6962(c)(3)(A)(ii)). (Not applicable to the acquisition of commercially available off-the-shelf items.)

____ (ii) Alternate I (May 2008) of 52.223-9 (42 U.S.C. 6962(i)(2)(C)). (Not applicable to the acquisition of commercially available off-the-shelf items.)

____ (35) (i) 52.223-13, Acquisition of EPEAT® Registered Imaging Equipment (Jun 2014)+(E.O.s 13423 and 13514).

____ (ii) Alternate I (Jun 2014) of 52.223-13.

____ (36)(i) 52.223-14, Acquisition of EPEAT® Registered Televisions (Jun 2014) (E.O.s 13423 and 13514).

____ (ii) Alternate I (Jun 2014) of 52.223-14.

____ (37) 52.223-15, Energy Efficiency in Energy-Consuming Products (Dec 2007) (42 U.S.C. 8259b).

____ (38)(i) (i) 52.223-16, Acquisition of EPEAT® -Registered Personal Computer Products (Jun 2014) (E.O.s 13423 and 13514).

____ (ii) Alternate I (Jun 2014) of 52.223-16.

____ (39) 52.223-18, Encouraging Contractor Policies to Ban Text Messaging While Driving (Aug 2011) (E.O. 13513).

____ (40) 52.225-1, Buy American--Supplies (May 2014) (41 U.S.C. chapter 83).

____ (41) (i) 52.225-3, Buy American--Free Trade Agreements--Israeli Trade Act (May 2014) (41 U.S.C. chapter 83, 19 U.S.C. 3301 note, 19 U.S.C. 2112 note, 19 U.S.C. 3805 note, 19 U.S.C. 4001 note, Pub. L. 103-182, 108-77, 108-78, 108-286, 108-302, 109-53, 109-169, 109-283, 110-138, 112-41, 112-42, and 112-43).

- _____ (ii) Alternate I (May 2014) of 52.225-3.
- _____ (iii) Alternate II (May 2014) of 52.225-3.
- _____ (iv) Alternate III (May 2014) of 52.225-3.
- _____ (42) 52.225-5, Trade Agreements (Nov 2013) (19 U.S.C. 2501, et seq., 19 U.S.C. 3301 note).
- _____ (43) 52.225-13, Restrictions on Certain Foreign Purchases (June 2008) (E.O.'s, proclamations, and statutes administered by the Office of Foreign Assets Control of the Department of the Treasury).
- _____ (44) 52.225-26, Contractors Performing Private Security Functions Outside the United States (Jul 2013) (Section 862, as amended, of the National Defense Authorization Act for Fiscal Year 2008; 10 U.S.C. 2302 Note).
- _____ (45) 52.226-4, Notice of Disaster or Emergency Area Set-Aside (Nov 2007) (42 U.S.C. 5150)
- _____ (46) 52.226-5, Restrictions on Subcontracting Outside Disaster or Emergency Area (Nov 2007) (42 U.S.C. 5150).
- _____ (47) 52.232-29, Terms for Financing of Purchases of Commercial Items (Feb 2002) (41 U.S.C. 4505, 10 U.S.C. 2307(f)).
- _____ (48) 52.232-30, Installment Payments for Commercial Items (Oct 1995) (41 U.S.C. 4505, 10 U.S.C. 2307(f)).
- _____ (49) 52.232-33, Payment by Electronic Funds Transfer—System for Award Management (July 2013) (31 U.S.C. 3332).
- _____ (50) 52.232-34, Payment by Electronic Funds Transfer—Other than System for Award Management (July 2013) (31 U.S.C. 3332).
- _____ (51) 52.232-36, Payment by Third Party (MAY 2014) (31 U.S.C. 3332).
- _____ (52) 52.239-1, Privacy or Security Safeguards (Aug 1996) (5 U.S.C. 552a).
- _____ (53)(i) 52.247-64, Preference for Privately Owned U.S.-Flag Commercial Vessels (Feb 2006) (46 U.S.C. Appx. 1241(b) and 10 U.S.C. 2631).
- _____ (ii) Alternate I (Apr 2003) of 52.247-64.

(c) The Contractor shall comply with the FAR clauses in this paragraph (c), applicable to commercial services, that the Contracting Officer has indicated as being incorporated in this contract by reference to implement provisions of law or Executive orders applicable to acquisitions of commercial items: (Contracting Officer check as appropriate.)

- _____ (1) 52.222-41, Service Contract Labor Standards (MAY 2014) (41 U.S.C. chapter 67).
- _____ (2) 52.222-42, Statement of Equivalent Rates for Federal Hires (MAY 2014) (29 U.S.C. 206 and 41 U.S.C. chapter 67).
- _____ (3) 52.222-43, Fair Labor Standards Act and Service Contract Labor Standards--Price Adjustment (Multiple Year and Option Contracts) (MAY 2014) (29 U.S.C. 206 and 41 U.S.C. chapter 67).
- _____ (4) 52.222-44, Fair Labor Standards Act and Service Contract Labor Standards--Price Adjustment (MAY 2014) (29 U.S.C. 206 and 41 U.S.C. chapter 67).

_____ (5) 52.222-51, Exemption from Application of the Service Contract Labor Standards to Contracts for Maintenance, Calibration, or Repair of Certain Equipment--Requirements (MAY 2014) (41 U.S.C. chapter 67).

_____ (6) 52.222-53, Exemption from Application of the Service Contract Labor Standards to Contracts for Certain Services--Requirements (MAY 2014) (41 U.S.C. chapter 67).

_____ (7) 52.222-17, Nondisplacement of Qualified Workers (MAY 2014) (E.O. 13495).

_____ (8) 52.226-6, Promoting Excess Food Donation to Nonprofit Organizations (MAY 2014) (42 U.S.C. 1792).

_____ (9) 52.237-11, Accepting and Dispensing of \$1 Coin (Sept 2008) (31 U.S.C. 5112(p)(1)).

_____ (10) 52.222-55, Minimum Wages Under Executive Order 13658 (DEC 2014) (Executive Order 13658).

(d) Comptroller General Examination of Record. The Contractor shall comply with the provisions of this paragraph (d) if this contract was awarded using other than sealed bid, is in excess of the simplified acquisition threshold, and does not contain the clause at 52.215-2, Audit and Records--Negotiation.

(1) The Comptroller General of the United States, or an authorized representative of the Comptroller General, shall have access to and right to examine any of the Contractor's directly pertinent records involving transactions related to this contract.

(2) The Contractor shall make available at its offices at all reasonable times the records, materials, and other evidence for examination, audit, or reproduction, until 3 years after final payment under this contract or for any shorter period specified in FAR Subpart 4.7, Contractor Records Retention, of the other clauses of this contract. If this contract is completely or partially terminated, the records relating to the work terminated shall be made available for 3 years after any resulting final termination settlement. Records relating to appeals under the disputes clause or to litigation or the settlement of claims arising under or relating to this contract shall be made available until such appeals, litigation, or claims are finally resolved.

(3) As used in this clause, records include books, documents, accounting procedures and practices, and other data, regardless of type and regardless of form. This does not require the Contractor to create or maintain any record that the Contractor does not maintain in the ordinary course of business or pursuant to a provision of law.

(e) (1) Notwithstanding the requirements of the clauses in paragraphs (a), (b), (c), and (d) of this clause, the Contractor is not required to flow down any FAR clause, other than those in this paragraph (e)(1) in a subcontract for commercial items. Unless otherwise indicated below, the extent of the flow down shall be as required by the clause—

(i) 52.203-13, Contractor Code of Business Ethics and Conduct (APR 2010) (41 U.S.C. 3509).

(ii) 52.219-8, Utilization of Small Business Concerns (OCT 2014) (15 U.S.C. 637(d)(2) and (3)), in all subcontracts that offer further subcontracting opportunities. If the subcontract (except subcontracts to small business concerns) exceeds \$650,000 (\$1.5 million for construction of any public facility), the subcontractor must include 52.219-8 in lower tier subcontracts that offer subcontracting opportunities.

(iii) 52.222-17, Nondisplacement of Qualified Workers (MAY 2014) (E.O. 13495). Flow down required in accordance with paragraph (l) of FAR clause 52.222-17.

(iv) 52.222-26, Equal Opportunity (MAR 2007) (E.O. 11246).

(v) 52.222-35, Equal Opportunity for Veterans (JUL 2014) (38 U.S.C. 4212).

- (vi) 52.222-36, Equal Opportunity for Workers with Disabilities (Jul 2014) (29 U.S.C. 793).
- (vii) 52.222-37, Employment Reports on Veterans (Jul 2014) (38 U.S.C. 4212).
- (viii) 52.222-40, Notification of Employee Rights Under the National Labor Relations Act (Dec 2010) (E.O. 13496). Flow down required in accordance with paragraph (f) of FAR clause 52.222-40.
- (ix) 52.222-41, Service Contract Labor Standards (May 2014), (41 U.S.C. chapter 67).
- (x) 52.222-50, Combating Trafficking in Persons (Feb 2009) (22 U.S.C. 7104(g)).

_____ Alternate I (Aug 2007) of 52.222-50 (22 U.S.C. 7104(g)).

(xi) 52.222-51, Exemption from Application of the Service Contract Labor Standards to Contracts for Maintenance, Calibration; or Repair of Certain Equipment--Requirements (May 2014) (41 U.S.C. chapter 67.)

(xii) 52.222-53, Exemption from Application of the Service Contract Labor Standards to Contracts for Certain Services--Requirements (May 2014) (41 U.S.C. chapter 67)

(xiii) 52.222-54, Employment Eligibility Verification (Aug 2013).

(xiv) 52.225-26, Contractors Performing Private Security Functions Outside the United States (Jul 2013) (Section 862, as amended, of the National Defense Authorization Act for Fiscal Year 2008; 10 U.S.C. 2302 Note).

(xv) 52.226-6, Promoting Excess Food Donation to Nonprofit Organizations. (May 2014) (42 U.S.C. 1792). Flow down required in accordance with paragraph (e) of FAR clause 52.226-6.

(xvi) 52.247-64, Preference for Privately-Owned U.S. Flag Commercial Vessels (Feb 2006) (46 U.S.C. Appx 1241(b) and 10 U.S.C. 2631). Flow down required in accordance with paragraph (d) of FAR clause 52.247-64.

(xvii) 52.222-55, Minimum Wages Under Executive Order 13658 (DEC 2014) (Executive Order 13658).

(2) While not required, the contractor May include in its subcontracts for commercial items a minimal number of additional clauses necessary to satisfy its contractual obligations.

(End of clause)

PERFORMANCE WORK STATEMENT

Contractor will provide two, three-day training sessions. The courses will be held from 23 February 2015 till 13 March 2015 and then again from 13 to 31 July 2015. The training will be conducted at Ft. Huachuca at the Intelligence Center of Excellence. The target audience is composed of military psychologists (psychiatrists occasionally) and enlisted behavioral science technicians assigned in support of interrogation/detainee operations.

2. The services required to meet the agency's needs are: to use the subject matter expertise to provide training to behavioral health personnel in support of interrogation/detainee operations.

3. The statutory authority permitting other than full and open completion is 10 U.S. C. 2304 (c) (1)-FAR 6.302-1, only one responsible source.

4. Contractor Manpower Reporting (CMR)

The Office of the Assistant Secretary of the Army (Manpower & Reserve Affairs) operates and maintains a secure Army data collection site where the contractor shall report ALL contractor manpower (including subcontractor manpower) required for performance of this contract. The contractor shall completely fill in all the information in the format using the following web address:

<https://contractormanpower.army.pentagon.mil>. The required information includes: (1) Contracting Office, Contracting Officer, Contracting Officer's Technical Representative;

(2) Contract number, including task or delivery order number; (3) Beginning and ending dates covered by reporting period; (4) Contractor name, address, phone number, e-mail address, identity of contractor employee entering data;

(5) Estimated direct labor hours (including sub-contractors); (6) Estimated direct labor dollars paid this reporting period (including sub-contractors); (7) Total payments (including sub-contractors); (8) Predominant Federal Service Code (FSC) reflecting services provided by contractor (and separate predominant FSC for each sub-contractor if different); (9) Estimated data collection cost; (10) Organizational title associated with Unit Identification Code (UIC) for the Army Requiring Activity (the Army Requiring Activity is responsible for providing the contractor with its UIC for the purposes of reporting this information); (11) Locations where contractor and sub-contractors perform the work (specified by zip code in the United States and nearest city, country, when in an overseas location, using standardized nomenclature provided on website); (12) Presence of deployment or contingency contract language; and (13) Number of contractor and sub-contractor employees deployed in theater this reporting period (by country). As part of its submission, the contractor shall also provide the estimated total cost (if any) incurred to

comply with this reporting requirement. Reporting period will be the period of performance not to exceed 12 months ending 30 September of each government fiscal year and must be reported by 31 October of each calendar year. Contractors may use a direct XML data transfer to the database server or fill in the fields on the website. The XML direct transfer is a format for transferring files from a contractor's systems to the secure web site without the need for separate data entries for each required data element at the web site. The specific formats for the XML direct transfer may be downloaded from the website.

NOTE: Contractor shall coordinate all the information required from the COR and the Contracting Office as required for CMR Reporting. All other information can be found on the award document.

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, AND 30				1. REQUISITION NUMBER 0010459378		PAGE 1 OF 16					
2. CONTRACT NO. W81K00-14-P-0112		3. AWARD/EFFECTIVE DATE 22-Jan-2014		4. ORDER NUMBER		5. SOLICITATION NUMBER		6. SOLICITATION ISSUE DATE			
7. FOR SOLICITATION INFORMATION CALL:			a. NAME			b. TELEPHONE NUMBER (No Collect Calls)		8. OFFER DUE DATE/LOCAL TIME			
9. ISSUED BY W40M USA MEDCOM HCAA SOUTHERN REG CONTR OFC 3551 ROGER BROOK DR BLDG 3600 FORT SAM HOUSTON TX 78234-6200 TEL: FAX:			CODE W81K00		10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED <input type="checkbox"/> SET ASIDE: % FOR <input type="checkbox"/> SB <input type="checkbox"/> HUBZONE SB <input type="checkbox"/> 8(A) <input type="checkbox"/> SVC-DISABLED VET-OWNED SB <input type="checkbox"/> EMERGING SB SIZE STD: 14 MIL NAICS: 813920			11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE <input type="checkbox"/> 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) 13b. RATING 14. METHOD OF SOLICITATION <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP		12. DISCOUNT TERMS NET 30 DAYS	
15. DELIVER TO AMEDDC&CS AMEDDC&S 3830 STANLEY ROAD SAN ANTONIO TX 78234			CODE W45MV2		16. ADMINISTERED BY W40M USA MEDCOM HCAA SOUTHERN REG CONTR OFC POC: JANET C. RINDORF 3551 ROGER BROOK DR BLDG 3600 FORT SAM HOUSTON TX 78234-6200			CODE W81K00			
17a. CONTRACTOR/OFFEROR AMERICAN PSYCHOLOGICAL ASSOCIATION, INC. 750 1ST ST NE STE 605 WASHINGTON DC 20002-8009 TEL:			CODE 1PLC7		18a. PAYMENT WILL BE MADE BY DFAS-INDY VP GFEB5 8899 E 56TH STREET INDIANA POLIS IN 46249-3800			CODE HQ0490			
FACILITY CODE											
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH A ADDRESS IN OFFER					<input type="checkbox"/> 18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a. UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM						
19. ITEM NO.		20. SCHEDULE OF SUPPLIES/ SERVICES			21. QUANTITY		22. UNIT	23. UNIT PRICE		24. AMOUNT	
		SEE SCHEDULE									
25. ACCOUNTING AND APPROPRIATION DATA See Schedule							26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$10,000.00				
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1. 52.212-4. FAR 52.212-3. 52.212-5 ARE ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED							<input checked="" type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA <input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED				
28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES <input type="checkbox"/> TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.					29. AWARD OF CONTRACT: REFERENCE <input type="checkbox"/> OFFER DATED . . . YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:						
30a. SIGNATURE OF OFFEROR/CONTRACTOR					31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)			31c. DATE SIGNED			
					<i>Melissa F. Oliva</i>			30-Jan-2014			
30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)			30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT) MELISSA F. OLIVA / CONTRACTING OFFICER TEL: 210-221-3061 EMAIL: melissa.f.oliva.civ@mail.mil						

**SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS
(CONTINUED)**

PAGE 2 OF 16

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/ SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
SEE SCHEDULE					

32a. QUANTITY IN COLUMN 21 HAS BEEN
 RECEIVED INSPECTED ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED: _____

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE	32c. DATE	32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE
--	-----------	---

32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE	32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE
32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE	

33. SHIP NUMBER <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	34. VOUCHER NUMBER	35. AMOUNT VERIFIED CORRECT FOR	36. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	37. CHECK NUMBER
--	--------------------	---------------------------------	--	------------------

38. S/R ACCOUNT NUMBER	39. S/R VOUCHER NUMBER	40. PAID BY
------------------------	------------------------	-------------

41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT	42a. RECEIVED BY (<i>Print</i>)		
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER	41c. DATE	42b. RECEIVED AT (<i>Location</i>)	
		42c. DATE REC'D (YY/MM/DD)	42d. TOTAL CONTAINERS

Section SF 1449 - CONTINUATION SHEET

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	BSCT - SME Instructor DSB - FEB 14 FFP NON-PERSONAL SERVICE: CONTRACTOR WILL PROVIDE A BEHAVIORAL SCIENCE CONSULTATION TEAM (BSCT) COURSE. THREE (1) DAY TRAINING SESSIONS. Price is inclusive of all travel and per diem expenses. THIS INCLUDES NOTIFICATION AND PREPERATION OF COURSE & COURSE HANDOUTS. IN ACCORDANCE WITH THE PERFORMANCE WORK STATEMENT AND CONTRACTOR MANPOWER REPORTING, REFER TO PAGES 12-16. SPEAKER: STEPHEN BEHNKE (202) 336-5999 COR: CPT RONNIE ROBINSON (210) 221-6150 GOVT ACTIVITY POC: JAMES BURTON (210) 221-6167 ALL TRAVEL AND TRANSPORTATION MUST BE IN ACCORDANCE WITH FAR 31.205-46; JOINT TRAVEL REGULATIONS (JTR).COR CPT Ronnie Robinson 210-221-6150, ronnie.robinson1@us.army.mil FOB: Destination PURCHASE REQUEST NUMBER: 0010459378	1	Each	\$5,000.00	\$5,000.00

NET AMT \$5,000.00

ACRN AA \$5,000.00
CIN: GFEB001045937800001

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0002	BSCT - SME Instructor DSB - AUG 2014 FFP FOB: Destination	1	Each	\$5,000.00	\$5,000.00

NET AMT \$5,000.00

ACRN AA \$5,000.00
CIN: GFEB001045937800002

DELIVERY INFORMATION

CLIN	DELIVERY DATE	QUANTITY	SHIP TO ADDRESS	UIC
0001	POP 25-FEB-2014 TO 14-MAR-2014	N/A	AMEDD&CS AMEDDC&S 3630 STANLEY ROAD SAN ANTONIO TX 78234 FOB: Destination	W45MW2
0002	POP 05-AUG-2014 TO 07-AUG-2014	N/A	(SAME AS PREVIOUS LOCATION) FOB: Destination	W45MW2

ACCOUNTING AND APPROPRIATION DATA

AA: 09720142014013000018810110106252 S.0018542.4.9.5.25 6100.9000021001
 COST CODE: A74AA
 AMOUNT: \$10,000.00
 CIN GFEB001045937800001: \$5,000.00
 CIN GFEB001045937800002: \$5,000.00

CLAUSES INCORPORATED BY REFERENCE

52.212-4 Contract Terms and Conditions--Commercial Items SEP 2013

CLAUSES INCORPORATED BY FULL TEXT

ADDENDUM TO 52.212-4

(Insert here your specific changes to this contract which deviate from the basic clause paragraphs (a) through (u)).

(v) The non-FAR Part 12 discretionary FAR, DFARS, AFARS, and LOCAL clauses included herein are incorporated into this contract either by reference or in full text. If incorporated by reference, see clause 52.252-2 herein for locations where full text can be found.

CLAUSES INCORPORATED BY REFERENCE

52.222-3	Convict Labor	JUN 2003
52.222-21	Prohibition Of Segregated Facilities	FEB 1999
52.222-26	Equal Opportunity	MAR 2007

52.222-50	Combating Trafficking in Persons	FEB 2009
52.223-18	Encouraging Contractor Policies To Ban Text Messaging While Driving	AUG 2011
52.225-13	Restrictions on Certain Foreign Purchases	JUN 2008
52.232-33	Payment by Electronic Funds Transfer--System for Award Management	JUL 2013
52.232-39	Unenforceability of Unauthorized Obligations	JUN 2013
52.233-3	Protest After Award	AUG 1996
52.233-4	Applicable Law for Breach of Contract Claim	OCT 2004
252.201-7000	Contracting Officer's Representative	DEC 1991
252.203-7000	Requirements Relating to Compensation of Former DoD Officials	SEP 2011
252.203-7002	Requirement to Inform Employees of Whistleblower Rights	SEP 2013
252.204-7000	Disclosure Of Information	AUG 2013
252.204-7003	Control Of Government Personnel Work Product	APR 1992
252.216-7009	Allowability of Legal Costs Incurred in Connection With a Whistleblower Proceeding	SEP 2013
252.232-7003	Electronic Submission of Payment Requests and Receiving Reports	JUN 2012
252.232-7010	Levies on Contract Payments	DEC 2006
252.244-7000	Subcontracts for Commercial Items	JUN 2013

CLAUSES INCORPORATED BY FULL TEXT

52.219-28 POST-AWARD SMALL BUSINESS PROGRAM REREPRESENTATION (JULY 2013)

(a) Definitions. As used in this clause--

Long-term contract means a contract of more than five years in duration, including options. However, the term does not include contracts that exceed five years in duration because the period of performance has been extended for a cumulative period not to exceed six months under the clause at 52.217-8, Option to Extend Services, or other appropriate authority.

Small business concern means a concern, including its affiliates, that is independently owned and operated, not dominant in the field of operation in which it is bidding on Government contracts, and qualified as a small business under the criteria in 13 CFR part 121 and the size standard in paragraph (c) of this clause. Such a concern is "not dominant in its field of operation" when it does not exercise a controlling or major influence on a national basis in a kind of business activity in which a number of business concerns are primarily engaged. In determining whether dominance exists, consideration shall be given to all appropriate factors, including volume of business, number of employees, financial resources, competitive status or position, ownership or control of materials, processes, patents, license agreements, facilities, sales territory, and nature of business activity.

(b) If the Contractor represented that it was a small business concern prior to award of this contract, the Contractor shall rerepresent its size status according to paragraph (e) of this clause or, if applicable, paragraph (g) of this clause, upon the occurrence of any of the following:

(1) Within 30 days after execution of a novation agreement or within 30 days after modification of the contract to include this clause, if the novation agreement was executed prior to inclusion of this clause in the contract.

(2) Within 30 days after a merger or acquisition that does not require a novation or within 30 days after modification of the contract to include this clause, if the merger or acquisition occurred prior to inclusion of this clause in the contract.

(3) For long-term contracts--

(i) Within 60 to 120 days prior to the end of the fifth year of the contract; and

(ii) Within 60 to 120 days prior to the date specified in the contract for exercising any option thereafter.

(c) The Contractor shall rerepresent its size status in accordance with the size standard in effect at the time of this rerepresentation that corresponds to the North American Industry Classification System (NAICS) code assigned to this contract. The small business size standard corresponding to this NAICS code can be found at <http://www.sba.gov/content/table-small-business-size-standards>.

(d) The small business size standard for a Contractor providing a product which it does not manufacture itself, for a contract other than a construction or service contract, is 500 employees.

(e) Except as provided in paragraph (g) of this clause, the Contractor shall make the representation required by paragraph (b) of this clause by validating or updating all its representations in the Representations and Certifications section of the System for Award Management (SAM) and its other data in SAM, as necessary, to ensure that they reflect the Contractor's current status. The

Contractor shall notify the contracting office in writing within the timeframes specified in paragraph (b) of this clause that the data have been validated or updated, and provide the date of the validation or update.

(f) If the Contractor represented that it was other than a small business concern prior to award of this contract, the Contractor may, but is not required to, take the actions required by paragraphs (e) or (g) of this clause.

(g) If the Contractor does not have representations and certifications in SAM, or does not have a representation in SAM for the NAICS code applicable to this contract, the Contractor is required to complete the following rerepresentation and submit it to the contracting office, along with the contract number and the date on which the rerepresentation was completed:

The Contractor represents that it () is, () is not a small business concern under NAICS Code 813920- assigned to contract number W81K00-14-P-0112.

(Contractor to sign and date and insert authorized signer's name and title).

(End of clause)

52.252-2 CLAUSES INCORPORATED BY REFERENCE (FEB 1998)

This contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. Also, the full text of a clause may be accessed electronically at this/these address(es):

<http://farsite.hill.af.mil>

(End of clause)

52.252-6 AUTHORIZED DEVIATIONS IN CLAUSES (APR 1984)

(a) The use in this solicitation or contract of any Federal Acquisition Regulation (48 CFR Chapter 1) clause with an authorized deviation is indicated by the addition of "(DEVIATION)" after the date of the clause.

(b) The use in this solicitation or contract of any DoD FAR Supplement (48 CFR Chapter 2) clause with an authorized deviation is indicated by the addition of "(DEVIATION)" after the name of the regulation.

(End of clause)

WIDE AREA WORKFLOW (WAWF) ARMY ELECTRONIC INVOICING INSTRUCTIONS

Electronic Submission of Payment Request

Contractor shall submit payment request using the following method as mutually agreed to by the Contractor, the Contracting Officer, the contract administration office, and the payment office.

Wide Area Workflow –Receipt and Acceptance (WAWF) (see instructions below)

WAWF customer svc phone: 1 (801) 605-7095

Web Invoicing System (WInS)

American National Standards Institute (ANSI) X.12 electronic data interchange (EDI) formats

Other (please specify) _____

DFAS POC and Phone: **DFAS/INDY VP GFEBs, Customer Service (888) 332-7366 Opt 2 Opt 2**

Paying Office code: HQ0490

Office Hrs: 07:30am/eastern to 4:30 pm/eastern

WAWF-RA is the method to electronically process vendor request for payment. This application allows DOD vendors to submit and track Invoices and Receipt/Acceptance documents electronically. Contractor electing to use WAWF-RA shall (i) register to use WAWF at <https://wawf.eb.mil> and (ii) ensure an electronic business point of contract (POC) is designated in the System For Award Management site at <http://www.sam.gov> within ten (10) calendar days after award of this contract/order.

WAWF Instructions

Questions concerning payments should be directed to the Defense Finance and Accounting Service (Block 18a of your purchase order/contract) at

DFAS – INDY VP GFEBs (HQ0490)
8899 E 56th STREET
INDIANAPOLIS IN 46249-3800
TEL: (801) 605-7095

PAYMENT OFFICE FISCAL STATION CODE: **021001**

Please have your purchase order/contract number ready when calling about payments.

You can easily access payment and receipt information using the DFAS web site at <http://www.dfas.mil/money/vendor>. Your purchase order/contract number or invoice number will be required to inquire status of your payment.

The following codes and information will be required to assure successful flow of WAWF documents.

TYPE OF DOCUMENT [X the appropriate block]

Commercial Item Financing

Construction Invoice (Contractor Only)

Invoice (Contractor Only)

Invoice and Receiving Report (COMBO)

Invoice as 2-in-1 (Services Only)

Performance Based Payment (Government Only)

Progress Payment (Government Only)

Cost Voucher (Government Only)

Receiving Report (Government Only)

Receiving Report With UID Data (Government Only)

Summary Cost Voucher (Government Only)

CAGE CODE: **1PLC7**

ISSUE BY DODAAC: **W81K00**

ADMIN BY DODAAC: **W81K00**

INSPECT BY DODAAC: **W45MW2**

ACCEPT BY DODAAC: **W45MW2**

SHIP TO DODAAC: **W45MW2**

LOCAL PROCESSING OFFICE DODDAC: N/A

PAYMENT OFFICE FISCAL STATION CODE: **021001**

Paying Office: **HQ0490 DFAS/INDY**

EMAIL POINTS OF CONTACT LISTING: (Use Group e-mail accounts if applicable)

INSPECTOR: **ronnie.p.robinson.mil@mail.mil 210-221-6150**

ACCEPTOR: **ronnie.p.robinson.mil@mail.mil 210-221-6150**

RECEIVING OFFICE POC: ronnie.p.robinson.mil@mail.mil 210-221-6150

CONTRACT ADMINISTRATOR: janet.rindorf@amedd.army.mil

CONTRACTING OFFICER: melissa.oliva@amedd.army.mil

ADDITIONAL CONTACT:

END OF ADDENDUM 52.212-4

52.212-5 CONTRACT TERMS AND CONDITIONS REQUIRED TO IMPLEMENT STATUTES OR EXECUTIVE ORDERS—COMMERCIAL ITEMS (DEVIATION 2013-O0019) (JAN 2014)

(a) *Comptroller General Examination of Record.* The Contractor shall comply with the provisions of this paragraph (a) if this contract was awarded using other than sealed bid, is in excess of the simplified acquisition threshold, and does not contain the clause at [52.215-2](#), Audit and Records—Negotiation.

(1) The Comptroller General of the United States, or an authorized representative of the Comptroller General, shall have access to and right to examine any of the Contractor's directly pertinent records involving transactions related to this contract.

(2) The Contractor shall make available at its offices at all reasonable times the records, materials, and other evidence for examination, audit, or reproduction, until 3 years after final payment under this contract or for any shorter period specified in FAR [Subpart 4.7](#), Contractor Records Retention, of the other clauses of this contract. If this contract is completely or partially terminated, the records relating to the work terminated shall be made available for 3 years after any resulting final termination settlement. Records relating to appeals under the disputes clause or to litigation or the settlement of claims arising under or relating to this contract shall be made available until such appeals, litigation, or claims are finally resolved.

(3) As used in this clause, records include books, documents, accounting procedures and practices, and other data, regardless of type and regardless of form. This does not require the Contractor to create or maintain any record that the Contractor does not maintain in the ordinary course of business or pursuant to a provision of law.

(b) (1) Notwithstanding the requirements of any other clauses of this contract, the Contractor is not required to flow down any FAR clause, other than those in this paragraph (b) (1) in a subcontract for commercial items. Unless otherwise indicated below, the extent of the flow down shall be as required by the clause—

(i) [52.203-13](#), Contractor Code of Business Ethics and Conduct (Apr 2010) ([41 U.S.C. 3509](#)).

(ii) [52.219-8](#), Utilization of Small Business Concerns (Dec 2010) ([15 U.S.C. 637\(d\)\(2\)](#) and (3)), in all subcontracts that offer further subcontracting opportunities. If the subcontract (except subcontracts to small business concerns)

exceeds \$650,000 (\$1.5 million for construction of any public facility), the subcontractor must include 52.219-8 in lower tier subcontracts that offer subcontracting opportunities.

(iii) 52.222-17, Nondisplacement of Qualified Workers (JAN 2013) (E.O. 13495). Flow down required in accordance with paragraph (l) of FAR clause 52.222-17.

(iv) 52.222-26, Equal Opportunity (Mar 2007) (E.O. 11246).

(v) 52.222-35, Equal Opportunity for Veterans (Sep 2010) (38 U.S.C. 4212).

(vi) 52.222-36, Affirmative Action for Workers with Disabilities (Oct 2010) (29 U.S.C. 793).

(vii) 52.222-40, Notification of Employee Rights Under the National Labor Relations Act (Dec 2010) (E.O. 13496). Flow down required in accordance with paragraph (f) of FAR clause 52.222-40.

(viii) 52.222-41, Service Contract Act of 1965 (Nov 2007) (41 U.S.C. Chapter 67).

(ix) 52.222-50, Combating Trafficking in Persons (Feb 2009) (22 U.S.C. 7104(g)).

____ Alternate I (Aug 2007) of 52.222-50 (22 U.S.C. 7104(g)).

(x) 52.222-51, Exemption from Application of the Service Contract Act to Contracts for Maintenance, Calibration, or Repair of Certain Equipment-Requirements (Nov 2007) (41 U.S.C. Chapter 67).

(xi) 52.222-53, Exemption from Application of the Service Contract Act to Contracts for Certain Services-Requirements (Feb 2009) (41 U.S.C. Chapter 67).

(xii) 52.222-54, Employment Eligibility Verification (E.O. 12989) (JUL 2012).

(xiii) 52.225-26, Contractors Performing Private Security Functions Outside the United States (Jul 2013) (Section 862, as amended, of the National Defense Authorization Act for Fiscal Year 2008; 10 U.S.C. 2302 Note).

(xiv) 52.226-6, Promoting Excess Food Donation to Nonprofit Organizations (Mar 2009) 42 U.S.C. 1792). Flow down required in accordance with paragraph (e) of FAR clause 52.226-6.

(xv) 52.247-64, Preference for Privately Owned U.S.-Flag Commercial Vessels (Feb 2006) (46 U.S.C. Appx. 1241(b) and 10 U.S.C. 2631). Flow down required in accordance with paragraph (d) of FAR clause 52.247-64.

(2) While not required, the contractor may include in its subcontracts for commercial items a minimal number of additional clauses necessary to satisfy its contractual obligations.

(End of clause)

PERFORMANCE WORK STATEMENT

1. Provide Behavioral Science Consultation Team (BSCT) Course. Will provide two, (3 – day) training sessions. The first course session will be held from 25 - 27 February 2014; the second session will be conducted in the month of August 2014 (dates to be determined). The training will be conducted at Ft. Huachuca at the Intelligence Center of Excellence. The target audience is composed of military psychologists (psychiatrists occasionally) and enlisted behavioral science technicians assigned in support of interrogation/detainee operations.

2. The services required to meet the agency's needs are to provide behavioral health personnel training in support of interrogation/detainee operations. Lesson Plans to be addressed and materials:

- Ethics involved in performing duties as a BSCT
- American Psychological Association's view on torture
- American Psychiatric Association's view on torture
- MEDCOM / OTSG Policy on utilizing BSCTs
- FM2-22.3 Human Intelligence Operations
- How to remain Safe, Legal, Ethical and Effective as a BSCT

3. The QASP utilizes one or more of the following methods of surveillance: customer complaints, periodic reviews, and 100% total surveillance. Customer complaints: No more than three (3) customer complaints. The COR will validate the customer complaint. Only valid complaints will be presented to the contractor. If the service can be re-performed, request the contractor to re-accomplish the service in accordance with FAR 52.212-4 Inspection of Services – Fixed Price clause. The complaint and its resolution must be completely documented. Periodic Reviews: The QAP will perform periodic reviews. See the QASP Service Delivery Summary (SDS) for the frequency and procedure required for each performance objective. 100% total surveillance: Performance Objectives indicating 100% total surveillance will be inspected each time the service occurs. See the QASP SDS to determine performance objectives under this method of surveillance.

4. This is a non-personnel services contract to provide Instruction and Subject Matter Expertise to the BSCT course. The Government shall not exercise any supervision or control over the contract service providers performing the services herein. Such contract service providers shall be accountable solely to the Contractor who, in turn is responsible to the Government.

4.1 Description of Services/Introduction: The contractor shall provide all personnel, equipment, supplies, facilities, transportation, tools, materials, supervision, and other items and non-personal services necessary to perform instruction and consultation as defined in this Performance Work Statement except for those items specified as government furnished property and services. The contractor shall perform to the standards in this contract.

4.3 Objectives: The Department of Behavioral Health Sciences (DBHS), of the Army Medical Department Center and School (AMEDDC&S), requests approval to solicit a sole source acquisition as outlined in FAR 6.302-1, for the purchase of training and consultation of the Behavioral Science Consultation Team (BSCT) course, subject matter expert (SME) on ethics. This new contract will be a firm-fixed priced contract, using AMEDDC&S Core funds, and will include two (3 day) trainings of 12 - 16 students per training iteration, at Fort Huachuca, Arizona. This contract is over a base plus four option years. OTSG/MEDCOM policy Memo 09-053 (Behavioral Science Consultation Policy) requires that all active duty Psychologist, Forensic Psychiatrist, and Behavioral Science Technicians, serving in a BSCT role be trained in the core principles of interrogation and the psychology of persuasion.

4.4 Scope: This contract will consist of training conducted on "Ethical Decision Making" under guidance and direction. The trainer and facilitator will provide guidance, education and knowledge in learning and application of ethical principles within Behavioral Science Consultants Teams. Once trained, BSTC will provide safe, legal, ethical and effective consultative services to Interrogators, Detention Guards, Intelligence Commanders and Detention Commanders using the sound ethical principles.

4.5 Quality Control The contractor shall develop and maintain an effective quality control program to ensure services are performed in accordance with this PWS. The contractor shall develop and implement procedures to identify, prevent, and ensure non-recurrence of defective services. The contractor's quality control program is the means by which he/she assures himself/herself that his/her work complies with the requirement of the contract. After acceptance of the quality control plan the contractor shall receive the contracting officer's acceptance in writing of any proposed change to his QC system.

4.5.1 Quality Assurance: The government shall evaluate the contractor's performance under this contract in accordance with the Quality Assurance Surveillance Plan (QASP). This plan is primarily focused on what the Government must do to ensure that the contractor has performed in accordance with the performance standards. It defines how the performance standards will be applied, the frequency of surveillance, and the minimum acceptable defect rate(s).

4.5.3 Place of Performance: Services for this contract will be provided at government facilities.

4.5.4 Security Requirements: Work under this PWS is UNCLASSIFIED and a security clearance will not be required. Contractor personnel shall comply with all applicable Department of Defense (DoD) security regulations and procedures during the performance of work. Contractor personnel shall not disclose and must safeguard computer systems and data, Privacy Act data, and other Government documents and work products that are obtained or generated in the performance of this PWS. This includes dissemination of protocols and papers not generally available through the public literature. Should contractor personnel come into contact with classified material, the contractor shall notify the Contracting Officer or COR immediately. The Contractor shall not disclose or disseminate any information concerning operations of military activities. Such action(s) could result in violation of the contract and possible legal actions. Contractor personnel shall present a neat, professional appearance and be easily identifiable. This shall be accomplished by the wearing of distinctive clothing bearing the company name or by wearing appropriate badges that contain the company name and employee's name.

4.5.5 Physical Security: The contractor shall be responsible for safeguarding all government equipment, information and property provided for contractor use. At the close of each work period, government facilities, equipment, and materials shall be secured.

4.5.6 Post Award Conference/Periodic Progress Meetings: The Contractor agrees to attend any post award conference convened by the contracting activity or contract administration office in accordance with Federal Acquisition Regulation Subpart 42.5. The Contracting Officer (KO), Contracting Officers' Representative (COR), and other Government personnel, as appropriate, may meet periodically with the contractor to review the contractor's performance. At these meetings the contracting officer will apprise the contractor of how the government views the contractor's performance and the contractor will apprise the Government of problems, if any, being experienced. Appropriate action shall be taken to resolve outstanding issues. These meetings shall be at no additional cost to the government.

4.5.7 Contracting Officer Representative (COR): The (COR) will be identified by separate letter. The COR monitors all technical aspects of the contract and assists in contract administration. The COR is authorized to perform the following functions: assure that the Contractor performs the technical requirements of the contract; perform inspections necessary in connection with contract performance;

maintain written and oral communications with the Contractor concerning technical aspects of the contract; issue written interpretations of technical requirements, including Government drawings, designs, specifications; monitor Contractor's performance and notifies both the Contracting Officer and Contractor of any deficiencies; coordinate availability of government furnished property, and provide site entry of Contractor personnel. A letter of designation issued to the COR, a copy of which is sent to the Contractor, states the responsibilities and limitations of the COR, especially with regard to changes in cost or price, estimates or changes in delivery dates. The COR is not authorized to change any of the terms and conditions of the resulting order. All inquiries, comments or complaints arising from any matter observed, experienced, or learned of as a result of or in connection with the performance of this contract, the resolution of which may require the dissemination of official information, shall be directed to the COR and the Contracting Officer (KO). The Contractor shall only conduct business with designated government personnel listed as points of contact (POCs). Contractor personnel shall conform to standards of conduct and a code of ethics, which are consistent with those applicable to Government employees as provided by the Joint Ethics Regulation 5500.7.R.

4.5.8 Key Personnel: The following personnel are considered key personnel by the government: [Contracting Officer (KO) and the Contracting Officer Representative (COR)]. The contractor shall provide a contract manager who shall be responsible for the performance of the work. The name of this person and an alternate who shall act for the contractor when the manager is absent shall be designated in writing to the contracting officer. The contract manager or alternate shall have full authority to act for the contractor on all contract matters relating to daily operation of this contract. The contract manager or alternate shall be available between [i.e., 8:00 a.m. to 4:30p.m.], Monday thru Friday except Federal holidays or when the government facility is closed for administrative reasons. Qualifications for all key personnel are specified within this contract.

4.5.9 Identification of Contractor Employees: All contract personnel attending meetings, answering Government telephones, and working in other situations where their contractor status is not obvious to third parties are required to identify themselves as such to avoid creating an impression in the minds of members of the public that they are Government officials. They must also ensure that all documents or reports produced by contractors are suitably marked as contractor products or that contractor participation is appropriately disclosed. Contractor personnel will not be required to obtain and wear government issued badges in the performance of this service.

4.5.10 Contractor Travel: Contractor will be required to travel CONUS during the performance of this contract to provide training.

4.5.11 Data Rights . The Government will have unlimited access to all documents/material produced under this contract. All documents and materials, to include the source codes of any software, delivered under this contract shall be Government owned and are the property of the Government. These documents and materials that become Government property may not be used or sold by the contractor without written permission from the Contracting Officer. This right does not abrogate any other Government rights.

4.5.12 Organizational Conflict of Interest: Contractor and subcontractor personnel performing work under this contract may receive, have access to or participate in the development of proprietary or source selection information (e.g., cost or pricing information, budget information or analyses, specifications or work statements, etc.) or perform evaluation services which may create a current or subsequent Organizational Conflict of Interests (OCI) as defined in FAR Subpart 9.5. The Contractor shall notify the Contracting Officer immediately whenever it becomes aware that such access or participation may result in any actual or potential OCI and shall promptly submit a plan to the Contracting Officer to avoid or mitigate any such OCI. The Contractor's mitigation plan will be determined to be acceptable

solely at the discretion of the Contracting Officer and in the event the Contracting Officer unilaterally determines that any such OCI cannot be satisfactorily avoided or mitigated, the Contracting Officer may affect other remedies as he or she deems necessary, including prohibiting the Contractor from participation in subsequent contracted requirements which may be affected by the OCI.

DEFINITIONS & ACRONYMS to be familiar with in this SDT contract are noted below.

5. DEFINITIONS AND ACRONYMS

5.1. DEFINITIONS:

5.1.1. **CONTRACTOR.** A supplier or vendor awarded a contract to provide specific supplies or service to the government. The term used in this contract refers to the prime.

5.1.2. **CONTRACTING OFFICER.** A person with authority to enter into, administer, and or terminate contracts, and make related determinations and findings on behalf of the government. Note: The only individual who can legally bind the government.

5.1.3. **CONTRACTING OFFICER'S REPRESENTATIVE (COR).** An employee of the U.S. Government appointed by the contracting officer to administer the contract. Such appointment shall be in writing and shall state the scope of authority and limitations. This individual has authority to provide technical direction to the Contractor as long as that direction is within the scope of the contract, does not constitute a change, and has no funding implications. This individual does NOT have authority to change the terms and conditions of the contract.

5.1.4. **DEFECTIVE SERVICE.** A service output that does not meet the standard of performance associated with the Performance Work Statement.

5.1.5. **DELIVERABLE.** Anything that can be physically delivered, but may include non-manufactured things such as meeting minutes or reports.

5.1.6. **KEY PERSONNEL.** Contractor personnel that are evaluated in a source selection process and that may be required to be used in the performance of a contract by the Key Personnel listed in the PWS. When key personnel are used as an evaluation factor in best value procurement, an offer can be rejected if it does not have a firm commitment from the persons that are listed in the proposal.

5.1.7. **PHYSICAL SECURITY.** Actions that prevent the loss or damage of Government property.

5.1.8. **QUALITY ASSURANCE.** The government procedures to verify that services being performed by the Contractor are performed according to acceptable standards.

5.1.9. **QUALITY ASSURANCE Surveillance Plan (QASP).** An organized written document specifying the surveillance methodology to be used for surveillance of contractor performance.

5.1.10. **QUALITY CONTROL.** All necessary measures taken by the Contractor to assure that the quality of an end product or service shall meet contract requirements.

5.1.11. **SUBCONTRACTOR.** One that enters into a contract with a prime contractor. The Government does not have privity of contract with the subcontractor.

5.1.12. **WORK DAY.** The number of hours per day the Contractor provides services in accordance with the contract.

5.1.12. **WORK WEEK.** Monday through Friday, unless specified otherwise.

5.2. ACRONYMS:

ACOR	Alternate Contracting Officer's Representative
AFARS	Army Federal Acquisition Regulation Supplement
AR	Army Regulation
CCE	Contracting Center of Excellence
CFR	Code of Federal Regulations
CONUS	Continental United States (excludes Alaska and Hawaii)
COR	Contracting Officer Representative

COTR	Contracting Officer's Technical Representative
COTS	Commercial-Off-the-Shelf
DA	Department of the Army
DD250	Department of Defense Form 250 (Receiving Report)
DD254	Department of Defense Contract Security Requirement List
DFARS	Defense Federal Acquisition Regulation Supplement
DMDC	Defense Manpower Data Center
DOD	Department of Defense
FAR	Federal Acquisition Regulation
HIPAA	Health Insurance Portability and Accountability Act of 1996
KO	Contracting Officer
OCI	Organizational Conflict of Interest
OCONUS	Outside Continental United States (includes Alaska and Hawaii)
ODC	Other Direct Costs
PIPO	Phase In/Phase Out
POC	Point of Contact
PRS	Performance Requirements Summary
PWS	Performance Work Statement
QA	Quality Assurance
QAP	Quality Assurance Program
QASP	Quality Assurance Surveillance Plan
QC	Quality Control
QCP	Quality Control Program

QUALITY ASSURANCE SURVEILLANCE PLAN (QASP)

The following minimum Quality Assurance Plan applies. The Government may modify inspection methods in accordance with site specific requirements.

Performance Objective	PWS	Performance Standard	Accuracy Rate	Method of Assessment
Professional Conduct		100% compliance	100%	COR Surveillance
Meet all training Objectives listed.	2	100% compliance.	95%	COR Surveillance
Customer Complaints. No more than 3 valid customer complaints per session	3	100% compliance	96%	COR Surveillance

STANDARD	MEASUREMENT	PAST PERFORMANCE ASSESSMENT
99% to 100%	Excellent	Document Past Performance
96% to 98%	Very Good	Assessment Report, paying
91% to 95%	Satisfactory	particular attention to
92% to 94%	Marginal	performance that exceeds

92% or Less

Unsatisfactory

the standard

Contractor Manpower Reporting

"ACCOUNTING FOR CONTRACT SERVICES-The Office of the Assistant Secretary of the Army (Manpower & Reserve Affairs) operates and maintains a secure Army data collection site where the contractor will report ALL contractor manpower (including subcontractor manpower) required for performance of this contract. The contractor is required to completely fill in all the information in the format using the following web address "<https://cmra.army.mil>." The required information includes: (1) Contracting Office, Contracting Officer, Contracting Officer's Technical Representative; (2) Contract number, including task and delivery order number; (3) Beginning and ending dates covered by reporting period; (4) Contractor name, address, phone number, e-mail address, identity of contractor employee entering data; (5) Estimated direct labor hours (including sub-contractor); (6) Estimated direct labor dollars paid this reporting period (including sub-contractor); (7) Total payments (including sub-contractor); (8) Predominant Federal Service Code (FSC) reflecting services provided by contractor (and separate predominant FSC for each sub-contractor if different); (9) Organizational title associated with the Unit Identification Code (UIC) for the Army Requiring Activity (the Army Requiring Activity is responsible for providing the contractor with its UIC for the purposes of reporting this information); (10) Locations where contractor and sub-contractors perform the work (specified by zip code in the United States and nearest City, Country, when in an overseas location, using standardized nomenclature provided on website); (11) Presence of deployment or contingency contract language, and, (12) Number of contractor and sub-contractor employees deployed in theater this reporting period (by country). (13) As part of its submission, the contractor will also provide the estimated total cost (if any) incurred to comply with this reporting requirement. Reporting period will be the period of performance not to exceed 12 months ending September 30 of each government fiscal year and must be reported by 31 October of each calendar year. The contractor shall notify the Contracting Officer's Representative (COR) by the 5th working day of November whether or not they have completed this report. If the COR is unavailable, the contractor will notify the Contracting Officer."

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT				1. CONTRACT ID CODE	PAGE OF PAGES	
				J	1	3
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO.		5. PROJECT NO. (If applicable)	
		25-Jan-2013	0010271888			
6. ISSUED BY		CODE	7. ADMINISTERED BY (If other than item 6)		CODE	
GREAT PLAINS REGIONAL CONTRACTING OFFICE USA MEDCOM HCAA 3851 ROGER BROOKE DR BLDG 3600 210-916-5190 FORT SAM HOUSTON TX 78234-6200		W81K00	GREAT PLAINS REGIONAL CONTRACTING OFFICE MCAA GP BAMC J ESPITIA 3851 ROGER BROOKE BLDG 2539 210-221-3490 FORT SAM HOUSTON TX 78234-6200		W81K00	
8. NAME AND ADDRESS OF CONTRACTOR (No., Street, County, State and Zip Code)				9A. AMENDMENT OF SOLICITATION NO.		
AMERICAN PSYCHOLOGICAL ASSOCIATION, INC. 750 1ST ST NE STE 605 WASHINGTON DC 20002-8009						
				9B. DATED (SEE ITEM 11)		
				X 10A. MOD. OF CONTRACT/ORDER NO. W81K00-13-P-0072		
CODE 1PLC7				FACILITY CODE		X 10B. DATED (SEE ITEM 13) 19-Dec-2012
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS						
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offer <input type="checkbox"/> is extended, <input type="checkbox"/> is not extended						
Offer must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted, or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified						
12. ACCOUNTING AND APPROPRIATION DATA (If required)						
13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.						
A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.						
B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(B).						
X C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF: IAW 52.212-4(c) Changes						
D. OTHER (Specify type of modification and authority)						
E. IMPORTANT: Contractor <input type="checkbox"/> is not, <input checked="" type="checkbox"/> is required to sign this document and return <u>1</u> copies to the issuing office.						
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.) Modification Control Number: da09b01133217 1. THE PURPOSE OF THIS MODIFICATION IS TO CORRECT DELIVERY DATES. SEE SUMMARY OF CHANGES. 2. All other terms and conditions remain the same.						
Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.						
15A. NAME AND TITLE OF SIGNER (Type or print)				16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
				TEL: _____ EMAIL: _____		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA		16C. DATE SIGNED
_____ (Signature of person authorized to sign)				BY _____ (Signature of Contracting Officer)		

SECTION SF 30 BLOCK 14 CONTINUATION PAGE

SUMMARY OF CHANGES

SECTION SF 1449 - CONTINUATION SHEET

SOLICITATION/CONTRACT FORM

The contractor organization has changed from
AMERICAN PSYCHOLOGICAL ASSOCIATION, INC.

750 1ST ST NE STE 605
WASHINGTON DC 20002-8009

to

AMERICAN PSYCHOLOGICAL ASSOCIATION, INC.
750 1ST ST NE STE 605
WASHINGTON DC 20002-8009

SUPPLIES OR SERVICES AND PRICES

CLIN 0001

The CLIN extended description has changed from NON-PERSONAL SERVICE: CONTRACTOR WILL PROVIDE A BEHAVIORAL SCIENCE CONSULTATION TEAM (BSCT) COURSE. THREE (1) DAY TRAINING SESSIONS. Price is inclusive of all travel and per diem expenses. THIS INCLUDES NOTIFICATION AND PREPERATION OF COURSE & COURSE HANDOUTS. IN ACCORDANCE WITH THE PERFORMANCE WORK STATEMENT AND CONTRACTOR MANPOWER REPORTING, REFER TO PAGES 12-16.

SPEAKER: STEPHEN BEHNKE (202) 336-5999

COR: CPT RONNIE ROBINSON (210) 221-6150

GOVT ACTIVITY POC: JAMES BURTON (210) 221-6167

ALL TRAVEL AND TRANSPORTATION MUST BE IN ACCORDANCE WITH FAR 31.205-46; JOINT TRAVEL REGULATIONS (JTR). to NON-PERSONAL SERVICE: CONTRACTOR WILL PROVIDE A BEHAVIORAL SCIENCE CONSULTATION TEAM (BSCT) COURSE. THREE (1) DAY TRAINING SESSIONS. Period of Performance: 03, 04, 05 Jan 2013.

Price is inclusive of all travel and per diem expenses.

THIS INCLUDES NOTIFICATION AND PREPERATION OF COURSE & COURSE HANDOUTS. IN ACCORDANCE WITH THE PERFORMANCE WORK STATEMENT AND CONTRACTOR MANPOWER REPORTING, REFER TO PAGES 12-16.

SPEAKER: STEPHEN BEHNKE (202) 336-5999

COR: CPT RONNIE ROBINSON (210) 221-6150

GOVT ACTIVITY POC: JAMES BURTON (210) 221-6167

ALL TRAVEL AND TRANSPORTATION MUST BE IN ACCORDANCE WITH FAR 31.205-46; JOINT TRAVEL REGULATIONS (JTR)..

CLIN 0002

The CLIN extended description has changed from : COR CPT Ronnie Robinson 210-221-6150 to Period of Performance: 06, 07, 08 Jan 2013. COR CPT Ronnie Robinson 210-221-6150.

CLIN 0003

The CLIN extended description has changed from : COR CPT Ronnie Robinson 210-221-6150 to Period Performance: 05, 06, 07 Sep 2013. COR CPT Ronnie Robinson 210-221-6150.

(End of Summary of Changes)



Department of Defense DIRECTIVE

NUMBER 3216.2

March 25, 2002

DDR&E

SUBJECT: Protection of Human Subjects and Adherence to Ethical Standards in
DoD-Supported Research

- References:
- (a) DoD Directive 3216.2, "Protection of Human Subjects in DoD-Supported Research, "January 7, 1983 (hereby canceled)
 - (b) Section 980 of title 10, United States Code
 - (c) Title 32, Code of Federal Regulations, Part 219, "Protection of Human Subjects," current edition
 - (d) [DoD Directive 6200.2](#), "Use of Investigational New Drugs for Force Health Protection," August 1, 2000
 - (e) through (m), see enclosure 1

1. REISSUANCE AND PURPOSE

This Directive:

1.1. Reissues reference (a) to update policies for protecting the rights and welfare of humans as subjects of study in Department of Defense (DoD)-supported research, development, test and evaluation, and other related activities hereafter referred to as "research."

1.2. Implements 10 U.S.C. 980 (reference (b)).

1.3. Supports implementation of 32 CFR Part 219 (reference (c)), referred to as the "Common Rule."

1.4. Establishes other DoD policies for the ethical conduct of research.

2. APPLICABILITY AND SCOPE

This Directive:

2.1. Applies to the Office of the Secretary of Defense, the Military Departments, the Chairman of the Joint Chiefs of Staff, the Combatant Commands, the Office of the Inspector General of the Department of Defense, the Defense Agencies, the DoD Field Activities and all other organizational entities in the Department of Defense (hereafter referred to collectively as "the DoD Components").

2.2. Applies to research involving human subjects, as defined herein, conducted by a DoD Component (i.e., intramural) and other research that is supported by a DoD Component (i.e., extramural) through a contract, grant, cooperative agreement, or other arrangement.

2.3. Does not apply to the use of investigational new drugs, biological products, or devices for purposes of Force Health Protection. Such use is not research and is governed by DoD Directive 6200.2 (reference (d)).

2.4. Does not apply to accepted medical practice, including the use of investigational products in such practice, undertaken for purposes of treatment, not research. Such medical practice is not research and is not subject to this Directive.

3. DEFINITIONS

Terms used in this Directive are as defined in enclosure 2.

4. POLICY

It is the policy of the Department of Defense that:

4.1. Protection of Human Subjects in Research. The rights and welfare of human subjects in research supported or conducted by DoD Components shall be protected. This protection encompasses basic respect for persons, beneficence, and justice in the selection of subjects.

4.2. Informed Consent. In general, as required by reference (b), no DoD Component may conduct or use appropriated funds to support research involving a human being as an experimental subject without the prior informed consent of the subject.

4.2.1. In the case of research intended to be beneficial to the subject, if the subject lacks capacity, due to age, condition, or other reason, to make a decision regarding consent to participate in the research, prior consent may be provided by a legal representative of the subject. In any such case, the determination that research is intended to be beneficial to the subject must be made by an Institutional Review Board (IRB) under reference (c).

4.2.2. Consistent with 10 U.S.C. 980(b) (reference (b)), the requirement for prior informed consent under paragraphs 4.2. or 4.2.1. may be waived by the Head of a DoD Component with respect to a specific research project to advance the development of a medical product necessary to the Armed Forces if the research project may directly benefit the subject and is carried out in accordance with all other applicable laws and regulations, including 21 CFR 50.24 (reference (j)).

4.3. Applicability of Federal Policy for Protection of Human Subjects in Research

4.3.1. The Department of Defense has joined with other Federal Agencies to adopt the "Common Rule" Federal policy for protection of human subjects in research. Reference (c) is the Department of Defense's implementation of the Common Rule. All DoD-supported and -conducted research shall comply with reference (c) and this Directive.

4.3.2. The IRBs of DoD Components established under reference (c) shall consist of members who are either Federal employees, individuals covered under the Intergovernmental Personnel Act (IPA), or consultants consistent with the requirements established by 5 U.S.C. 3109 (reference (e)).

4.3.3. All human subject research supported or conducted by the Department of Defense shall be conducted under an assurance of compliance acceptable to the funding agency. Research performed at DoD facilities and funded by the Department of Defense shall have a DoD assurance of compliance. The DoD Components conducting or supporting research must ensure that the investigators are familiar with the Nuremberg Code, the Belmont Report, 32 CFR Part 219 (reference (c)), this Directive, and any related requirements.

4.4. Additional Protections for Certain Categories of Research. In addition to the requirements of reference (c), the following requirements apply to research involving certain subjects or purposes.

4.4.1. Research supported or conducted by the Department of Defense that affects vulnerable classes of subjects shall meet the additional protections of 45 CFR

Part 46, Subparts B, C, and D (reference (f)) (e.g., fetuses, pregnant women, human in vitro fertilization, prisoners, or children). For purposes of this paragraph, actions authorizing or requiring any action by an official of the Department of Health and Human Services (HHS) with respect to any requirements of reference (f) shall be under the authority of the Director, Defense Research and Engineering.

4.4.2. The involvement of prisoners of war as human subjects of research is prohibited.

4.4.3. For research involving more than minimal risk (as defined in 32 CFR 219.102(i), reference (c)) to subjects, an independent medical monitor shall be appointed by name. Medical monitors shall be physicians, dentists, psychologists, nurses, or other healthcare providers capable of overseeing the progress of research protocols, especially issues of individual subject/patient management and safety. Medical monitors shall be independent of the investigative team and shall possess sufficient educational and professional experience to serve as the subject/patient advocate.

4.4.3.1. Depending on the nature of the study, the medical monitor may be assigned to assess one or more of the following phases of a research project: subject recruitment, subject enrollment, data collection, or data storage and analysis.

4.4.3.2. At the discretion of the IRB, the medical monitor may be assigned to discuss research progress with the principal investigator, interview subjects, consult on individual cases, or evaluate adverse event reports. Medical monitors shall promptly report discrepancies or problems to the IRB. They shall have the authority to stop a research study in progress, remove individual subjects from a study, and take whatever steps are necessary to protect the safety and well-being of research subjects until the IRB can assess the medical monitor's report.

4.4.4. For research involving more than minimal risk and also involving military personnel, unit officers and noncommissioned officers (NCOs) shall not influence the decisions of their subordinates to participate or not to participate as research subjects. Unit officers and senior NCOs in the chain of command shall not be present at the time of research subject solicitation and consent during any research recruitment sessions in which members of units under their command are afforded the opportunity to participate as research subjects. When applicable, officers and NCOs so excluded shall be afforded the opportunity to participate as research subjects in a separate recruitment session. During recruitment briefings to a unit where a percentage of the unit is being recruited to participate as a group, an ombudsman not connected in any way with the proposed research or the unit shall be present to monitor that the

voluntary nature of individual participants is adequately stressed and that the information provided about the research is adequate and accurate.

4.4.5. Research involving use of human subjects for testing of chemical or biological agents is generally prohibited by 50 U.S.C. 1520a (reference (g)), subject to possible exceptions for research for prophylactic, protective, or other peaceful purposes. Any such research shall comply with reference (g).

4.5. Education and Training on Protection of Human Subjects in Research. Awareness of human subjects protection requirements shall be established for all DoD personnel involved in the conduct, review, or approval of research covered by this Directive.

4.5.1. Awareness activities shall be commensurate with the duties and responsibilities of the participants in the process of protection of human subjects of research, and compatible with Office of Human Research Protections (OHRP) policies.

4.5.2. Research ethics training shall be incorporated into the continuing education program at all DoD Component activities that conduct research involving human subjects.

4.6. Inclusion of Women and Minorities in Clinical Research Projects. The selection of subjects reflecting gender and minority participation as appropriate shall comply with section 252 of Pub. L. 103-160 (reference (h)). The Head of the DoD Component concerned may exercise the waiver authority under this law.

4.7. Fetal Tissue Research. Fetal tissue research supported or conducted by the Department of Defense shall comply with 42 U.S.C. 289g - 289g-2 (reference (i)).

4.8. Research Misconduct. All DoD Components shall establish procedures to monitor and review the ethical conduct of research. The DoD Components that conduct or support research shall ensure that data and data collection are conducted in an ethical manner. In cases in which data are not collected in an appropriate manner, the DoD Component shall determine if the misconduct was intentional or reckless; was an isolated event or part of a pattern; had significant impact on the research record; or had significant impact on other researchers or institutions. The DoD Component shall initiate and carry through on any actions that are necessary to ensure resolution of misconduct findings. All findings of serious research misconduct under this section shall be reported to the Director, Defense Research and Engineering.

4.9. Relationship to Other Requirements. Some activities subject to this Directive may also be subject to regulations of other Federal Agencies, organizations,

and non-U.S. entities. Examples include: Food and Drug Administration policies regarding investigational drugs, vaccines, biological products, or devices; multi-agency research; and international research. Activities subject to this Directive and one or more of these other requirements shall comply with all applicable requirements (e.g., references (c) (32 CFR 219.101(g) and (h)), (j), (k), and (l)).

4.10. Non-compliance. Issues related to non-compliance with this Directive by any DoD Component, subordinate, or supported activity shall be referred initially to the next higher management echelon to take deliberate action to resolve. All findings of serious non-compliance under this section shall be reported to the Director, Defense Research and Engineering.

5. RESPONSIBILITIES

5.1. The Director, Defense Research and Engineering, under the Under Secretary of Defense (Acquisition, Technology and Logistics):

5.1.1. Shall be the single point of contact within the Department of Defense for all matters relating to the Department of Defense's compliance with the "Common Rule" and act as the principal DoD liaison with Agencies outside the Department of Defense on matters pertaining to protection of human subjects in research.

5.1.2. May initiate updates to reference (c) and issue any DoD Instructions or other guidance necessary to implement this Directive. With respect to matters affecting medical research, this shall be done in coordination with the Assistant Secretary of Defense (Health Affairs) (ASD(HA)).

5.1.3. Shall establish a committee to coordinate DoD Component activities in the protection of human subjects. The committee shall be composed of representatives from the DoD Components' human subject protection offices.

5.1.4. Shall exercise the authorities of the Secretary of Defense under reference (c), except for matters not delegable, reserved, or covered by another specific delegation.

5.1.5. Shall establish procedures and standards, consistent with the Federal Policy on Research Misconduct (reference (m)), for the prevention of research misconduct in the Department of Defense.

5.1.6. May grant exceptions to policy under this Directive if justified by special circumstances and consistent with law. Records shall be maintained on exceptions granted under this Directive.

5.2. The Assistant Secretary of Defense for Health Affairs, under the Under Secretary of Defense for Personnel and Readiness shall:

5.2.1. Advise the Director, Defense Research and Engineering on matters related to the involvement of human subjects in research, especially, regarding medical safety, ethics, and standards of professional care and conduct.

5.2.2. Serve as the DoD representative on matters relating to implementation of Food and Drug Administration regulatory requirements (references (j) and (k)).

5.3. The Heads of the DoD Components shall:

5.3.1. Develop, issue, and monitor implementing policies to ensure compliance with this Directive and with any implementing Instructions issued under the authority of this Directive. In research undertakings in which more than one DoD Component is involved, the Heads of the Components shall determine and jointly assign executive responsibility for compliance.


5.3.2. Maintain adequate documentation of DoD-supported or -conducted research involving human subjects and establish procedures for supporting DoD reporting requirements.

5.3.3. Delegate authorities and responsibilities under this Directive to levels of command or authority appropriate to ensure compliance. This shall include procedures for the investigation and resolution of allegations of non-compliance, and may include procedures for headquarters-level administrative review of research. A DoD Component may delegate headquarters-level research review responsibility to another DoD Component for purposes of efficiency and consolidation of functional offices.

5.3.4. With respect to research for which primary involvement is from the Department of Defense, establish the required administrative procedures to protect human subjects from medical expenses (not otherwise provided or reimbursed) that are the direct result of participation in a research project involving more than minimal risk. For this purpose the determination of primary involvement shall be based on consideration of the DoD portion of the total involvement (i.e., funding, personnel, facilities, and all other resources) in the research.

6. EFFECTIVE DATE

This Directive is effective immediately.



Paul Wolfowitz
Deputy Secretary of Defense

Enclosures - 2

1. References, continued
2. Definitions

E1. ENCLOSURE 1

REFERENCES, continued

- (e) Section 3109 of title 5, United States Code, "Employment of Experts and Consultants, Temporary or Intermittent"
- (f) Title 45, Code of Federal Regulations, Part 46, "Protection of Human Subjects," Subparts B, C and D
- (g) Section 1520a of title 50, United States Code, "War and National Defense"
- (h) Section 2358 note of title 10, United States Code, "National Defense Authorization Act for Fiscal Year 1994," (Public Law 103-160, Sec. 252)
- (i) Sections 289g - 289g-2 of title 42, United States Code, "Public Health and Welfare"
- (j) Title 21, Code of Federal Regulations, Subchapters A, D, F, and H, "Food and Drug Administration"
- (k) Memorandum of Understanding between the Food and Drug Administration and the Department of Defense, "Concerning Investigational Use of Drugs, Antibiotics, Biologicals, and Medical Devices by the Department of Defense," May 1, 1987
- (l) [DoD Directive 6000.8](#), "Funding and Administration of Clinical Investigation Program," November 3, 1999
- (m) Federal Policy on Research Misconduct, Office of Science and Technology Policy, 65 Federal Register 76260-76264 (December 6, 2000)

E2. ENCLOSURE 2

DEFINITIONS

E2.1.1. Common Rule. The regulation adopted by multiple Federal Agencies for the protection of human subjects in research. The Department of Defense's implementation of the Common Rule is at 32 CFR 219, "Protection of Human Subjects" (reference (c)).

E2.1.2. Research. Any systematic investigation, including research, development, testing, and evaluation (RDT&E), designed to develop or contribute to generalizable knowledge.

E2.1.3. Research Involving a Human Being as an Experimental Subject. An activity, for research purposes, where there is an intervention or interaction with a human being for the primary purpose of obtaining data regarding the effect of the intervention or interaction (32 CFR 219.102(f), reference (c)). Examples of interventions or interactions include, but are not limited to, a physical procedure, a drug, a manipulation of the subject or subject's environment, the withholding of an intervention that would have been undertaken if not for the research purpose. This does not include:

E2.1.3.1. Activities carried out for purposes of diagnosis, treatment, or prevention of injury and disease in members of the Armed Forces and other mission essential personnel under Force Health Protection programs of the Department of Defense.

E2.1.3.2. Authorized health and medical activities as part of the reasonable practice of medicine or other health professions.

E2.1.3.3. Monitoring for compliance of individuals and organizations with requirements applicable to military, civilian, or contractor personnel or to organizational units. This includes such activities as drug testing, occupational health and safety monitoring, and security clearance reviews.

E2.1.3.4. Activities exempt under 32 CFR Part 219 (reference (c)).

E2.1.4. Support. Unless otherwise clarified in a specific paragraph of this Directive, this term generally means the provision of funding, personnel, facilities, and all other resources.



Department of Defense INSTRUCTION

NUMBER 2310.08E

June 6, 2006

USD(P&R)

SUBJECT: Medical Program Support for Detainee Operations

- References:
- (a) Assistant Secretary of Defense (Health Affairs) Memorandum, "Medical Program Principles and Procedures for the Protection and Treatment of Detainees in the Custody of the Armed Forces of the United States," June 3, 2005 (hereby canceled)
 - (b) DoD Directive 5100.77, "DoD Law of War Program," December 9, 1998
 - (c) DoD Directive 2310.01E, "The DoD Detainee Program," August 18, 1994, under revision
 - (d) DoD Directive 5136.1, "Assistant Secretary of Defense for Health Affairs (ASD(HA))," May 27, 1994
 - (e) through (k) see Enclosure 1

1. PURPOSE

This Instruction:

- 1.1. Reissues Reference (a) as a DoD Instruction.
- 1.2. Establishes policy and assigns responsibility, consistent with References (b) through (d), DoD Directive 3115.09, and Section 1403 of the Detainee Treatment Act of 2005 (References (e) and (f)) for medical program support for detainee operations.
- 1.3. Reaffirms the responsibility of health care personnel to protect and treat, in the context of a professional treatment relationship and established principles of medical practice, all detainees in the control of the Armed Forces during military operations. This includes enemy prisoners of war, retained personnel, civilian internees, and other detainees.

2. APPLICABILITY AND SCOPE

This Instruction applies to the Office of the Secretary of Defense, the Military Departments, the Chairman of the Joint Chiefs of Staff, the Combatant Commands, the Office of the Inspector General of the Department of Defense, the Defense Agencies, the DoD Field Activities, and all

other organizational entities in the Department of Defense (hereafter referred to collectively as the “DoD Components”).

3. DEFINITIONS

3.1. Behavioral Science Consultants (BSCs). Health care personnel qualified in behavioral sciences who are assigned exclusively to provide consultative services to support authorized law enforcement or intelligence activities (similar to behavioral science unit personnel of a law enforcement organization or forensic psychology or clinical social work practitioners supporting the criminal justice, parole, or corrections systems).

3.2. Detainee. The definition in Reference (c) applies to this Instruction.

3.3. Health Care Personnel. An individual who has received special training or education in a health-related field and who performs services in or for the Department of Defense in that field. A health-related field may include administration, direct provision of patient care, or ancillary or other support services. Health care personnel include, but are not limited to, individuals licensed, certified, or registered by a government agency or professional organization to provide specific health services. Health care personnel covered by this Instruction include those assigned as BSCs and also include members of the Uniformed Services, civilian employees, and contractor personnel in a health-related field acting in support of any DoD Component.

4. POLICY

It is DoD policy that:

4.1. Basic Principles. Health care personnel (particularly physicians) perform their duties consistent with the following principles.

4.1.1. Health care personnel have a duty in all matters affecting the physical and mental health of detainees to perform, encourage, and support, directly and indirectly, actions to uphold the humane treatment of detainees and to ensure that no individual in the custody or under the physical control of the Department of Defense, regardless of nationality or physical location, shall be subject to cruel, inhuman, or degrading treatment or punishment, in accordance with and as defined in U.S. law.

4.1.2. Health care personnel charged with the medical care of detainees have a duty to protect detainees’ physical and mental health and provide appropriate treatment for disease. To the extent practicable, treatment of detainees should be guided by professional judgments and standards similar to those applied to personnel of the U.S. Armed Forces.

4.1.3. Health care personnel shall not be involved in any professional provider-patient treatment relationship with detainees the purpose of which is not solely to evaluate, protect, or improve their physical and mental health.

4.1.4. Health care personnel, whether or not in a professional provider-patient treatment relationship, shall not apply their knowledge and skills in a manner that is not in accordance with applicable law or the standards set forth in Reference (c).

4.1.5. Health care personnel shall not certify, or participate in the certification of, the fitness of detainees for any form of treatment or punishment that is not in accordance with applicable law, or participate in any way in the administration of any such treatment or punishment.

4.1.6. Health care personnel shall not participate in any procedure for applying physical restraints to the person of a detainee unless such a procedure is determined to be necessary for the protection of the physical or mental health or the safety of the detainee, or necessary for the protection of other detainees or those treating, guarding, or otherwise interacting with them. Such restraints, if used, shall be applied in a safe and professional manner.

4.2. Medical Records. Accurate and complete medical records on all detainees shall be created and maintained. Medical records must be maintained for all medical encounters, whether in fixed facilities or through medical personnel in the field.

4.3. Treatment Purpose. Health care personnel engaged in a professional provider-patient treatment relationship with detainees shall not participate in detainee-related activities for purposes other than health care. Such health care personnel shall not actively solicit information from detainees for other than health care purposes. Health care personnel engaged in non-treatment activities, such as forensic psychology, behavioral science consultation, forensic pathology, or similar disciplines, shall not engage in any professional provider-patient treatment relationship with detainees (except in emergency circumstances in which no other health care providers can respond adequately to save life or prevent permanent impairment).

4.4. Medical Information. Health care personnel shall safeguard patient confidences and privacy within the constraints of the law. Under U.S. and international law and applicable medical practice standards, there is no absolute confidentiality of medical information for any person. Detainees shall not be given cause to have incorrect expectations of privacy or confidentiality regarding their medical records and communications. However, whenever patient-specific medical information concerning detainees is disclosed for purposes other than treatment, health care personnel shall record the details of such disclosure, including the specific information disclosed, the person to whom it was disclosed, the purpose of the disclosure, and the name of the medical unit commander (or other designated senior medical activity officer) approving the disclosure. Similar to legal standards applicable to U.S. citizens, permissible purposes include preventing harm to any person, maintaining public health and order in detention facilities, and any lawful law enforcement, intelligence, or national security-related activity.

4.4.1. When the medical unit commander (or other designated senior medical activity officer) suspects the medical information to be disclosed may be misused, or if there is a disagreement between such medical activity officer and a senior officer requesting disclosure, the medical activity officer shall seek a senior command determination on the propriety of the

disclosure or actions to ensure the use of the information will be consistent with applicable standards.

4.4.2. Consistent with applicable command procedures, International Committee of the Red Cross physicians shall be given access to review medical records of detainees during visits to detention facilities.

4.5. Reportable Incident Requirements. Any health care personnel who in the course of a treatment relationship or in any other way observes or suspects a possible violation of applicable standards, including those prescribed in References (b), (c), and (e), for the protection of detainees shall report those circumstances to the chain of command. Health care personnel who believe such a report has not been acted upon properly should also report the circumstances to the medical program leadership, including the Command Surgeon or Military Department specialty consultant. Officials in the medical program leadership may inform the Joint Staff Surgeon or Surgeon General concerned, who then may seek senior command review of the circumstances presented. Other reporting mechanisms, such as the Inspector General, criminal investigation organizations, or Judge Advocates, also may be used.

4.5.1. Health care personnel involved in clinical practice activities shall make a written record of all reports of suspected or alleged violations in a reportable incident log maintained by the medical unit commander or other designated senior medical activity officer.

4.5.2. Health care personnel carrying out BSC functions under Enclosure 2 shall also comply fully with the reportable incident requirements of paragraph 4.5. They shall make a written record of all reports of suspected or alleged violations in a reportable incident log maintained by the detention facility commander or other designated senior officer.

4.6. Training. The Secretaries of the Military Departments and, as appropriate, Combatant Commanders shall ensure health care personnel involved in the treatment of detainees or other detainee matters receive appropriate training on applicable policies and procedures regarding the care and treatment of detainees. This training shall include at least the following elements:

4.6.1. A basic level of training for all military health care personnel who may be deployed in support of military operations and whose duties may involve support of detainee operations or contact with detainees. The overall purpose of this training is to ensure a working knowledge and understanding of the requirements and standards for dealing with health care of detainees.

4.6.2. Periodic provision of refresher training consistent with the basic level of training.

4.6.3. Additional training for health care personnel assigned to support detainee operations, commensurate with their duties.

4.7. Consent for Medical Treatment or Intervention. In general, health care will be provided with the consent of the detainee. To the extent practicable, standards and procedures for obtaining consent will be consistent with those applicable to consent from other patients.

Standard exceptions for lifesaving emergency medical care provided to a patient incapable of providing consent or for care necessary to protect public health, such as to prevent the spread of communicable diseases, shall apply.

4.7.1. In the case of a hunger strike, attempted suicide, or other attempted serious self-harm, medical treatment or intervention may be directed without the consent of the detainee to prevent death or serious harm. Such action must be based on a medical determination that immediate treatment or intervention is necessary to prevent death or serious harm, and, in addition, must be approved by the commanding officer of the detention facility or other designated senior officer responsible for detainee operations.

4.7.2. Involuntary treatment or intervention under subparagraph 4.7.1. in a detention facility must be preceded by a thorough medical and mental health evaluation of the detainee and counseling concerning the risks of refusing consent. Such treatment or intervention shall be carried out in a medically appropriate manner, under standards similar to those applied to personnel of the U.S. Armed Forces.

4.7.3. Detention facility procedures for dealing with cases in which involuntary treatment may be necessary to prevent death or serious harm shall be developed with consideration of procedures established by Title 28, Code of Federal Regulations, Part 549 (Reference (g)).

4.8. Role of the Armed Forces Medical Examiner (AFME) in Death Investigations. As required by the Secretary of Defense Memorandum dated June 9, 2004 (Reference (h)), if a detainee dies, the commander of the facility (or if the death did not occur in a facility, the commander of the unit that exercised control over the individual) shall immediately report the death to the cognizant Military Criminal Investigation Organization (MCIO). The MCIO shall contact the Office of the AFME, which shall, consistent with Reference (h), Section 1471 of title 10, United States Code, and DoD Instruction 5154.30 (References (i) and (j)), determine whether an autopsy will be performed. The body will be handled as directed by the Office of the AFME. The determination of the cause and manner of death will be the sole responsibility of the AFME or other physician designated by the AFME.

4.9. Health Care Personnel Management. As a matter of personnel management policy, except as provided in this paragraph, health care personnel's support of detainee operations is limited only to providing health care services in a professional provider-patient treatment relationship in approved clinical settings, conducting disease prevention and other approved public health activities, advising proper command authorities regarding the health status of detainees, and providing direct support for these activities. Medical personnel shall not be used to supervise, conduct, or direct interrogations. Health care personnel assigned as, or providing direct support to, BSCs, consistent with Enclosure 2, or AFME personnel, are the only authorized exceptions to this paragraph. The Assistant Secretary of Defense for Health Affairs (ASD(HA)), or designee, must approve any other exceptions to this paragraph.

4.10. BSCs. Standards and procedures for BSCs are established in Enclosure 2.

4.11. Effect on Legal Obligations. Nothing in this Instruction may be construed to alter any legal obligations of health care personnel under applicable law.

5. RESPONSIBILITIES

5.1. The ASD(HA), under the Under Secretary of Defense for Personnel and Readiness, shall:

5.1.1. Supervise implementation of this Instruction and provide supplementary direction, as necessary.

5.1.2. Coordinate with the Chairman of the Joint Chiefs of Staff, the Under Secretary of Defense for Policy, the Under Secretary of Defense for Intelligence, the General Counsel of the Department of Defense, the Secretary of the Army as Executive Agent for administration of detainee operations policy under Reference (c), and, as appropriate, with other Heads of DoD Components regarding activities under this Instruction.

5.2. The Secretaries of the Military Departments shall:

5.2.1. Implement training programs consistent with paragraph 4.6.

5.2.2. Ensure health care personnel assigned to duties as BSCs have been appropriately trained, consistent with the standards and procedures in Enclosure 2.

5.2.3. In assigning health care personnel to duties as BSCs under Enclosure 2, allow health care personnel to volunteer for the assignment, to the extent practicable and consistent with mission requirements.


5.2.4. Establish systems and procedures to ensure the ability of all health care personnel to comply with all requirements of this Instruction and any additional implementing guidance.

5.3. The Secretary of the Army, as Executive Agent, consistent with DoD Directive 5101.1 (Reference (k)), for administration of detainee operations policy under Reference (c), shall establish training and certification standards for the training required by paragraph 4.6.

5.4. The Commanders of the Combatant Commands through the Chairman of the Joint Chiefs of Staff, shall plan for, execute, and oversee medical program support for detainee operations within their respective commands in accordance with this Instruction.

6. EFFECTIVE DATE.

This Instruction is effective immediately.


William Winkenwerder, Jr., M.D.
Assistant Secretary of Defense (Health Affairs)

Enclosures – 2

E1. References, continued

E2. Standards and Procedures for BSCs

E1. ENCLOSURE 1

REFERENCES, continued

- (e) DoD Directive 3115.09, "DoD Intelligence Interrogations, Detainee Debriefings, and Tactical Questioning," November 3, 2005
- (f) Section 1403 of the Detainee Treatment Act of 2005, Pub. L. No. 109-163, Title XIV
- (g) Title 28, Code of Federal Regulations, Part 549, Subpart E, "Hunger Strikes, Inmate," current edition
- (h) Secretary of Defense Memorandum, "Procedures for Investigation into Deaths of Detainees in the Custody of the Armed Forces of the United States," June 9, 2004
- (i) Section 1471 of title 10, United States Code
- (j) DoD Instruction 5154.30, "Armed Forces Institute of Pathology Operations," March 18, 2003
- (k) DoD Directive 5101.1, "DoD Executive Agent," September 3, 2002

E2. ENCLOSURE 2

STANDARDS AND PROCEDURES FOR BSCs

E2.1. BSCs are authorized to make psychological assessments of the character, personality, social interactions, and other behavioral characteristics of detainees, including interrogation subjects, and, based on such assessments, advise authorized personnel performing lawful interrogations and other lawful detainee operations, including intelligence activities and law enforcement. They employ their professional training not in a provider-patient relationship, but in relation to a person who is the subject of a lawful governmental inquiry, assessment, investigation, interrogation, adjudication, or other proper action. Requirements in this Instruction applicable to BSCs are also applicable to other health care personnel providing direct support to BSCs.

E2.1.1. BSCs may provide advice concerning interrogations of detainees when the interrogations are fully in accordance with applicable law and properly issued interrogation instructions.

E2.1.2. BSCs may observe, but shall not conduct or direct, interrogations.

E2.1.3. BSCs may provide training for interrogators in listening and communications techniques and skills and on results of studies and assessments concerning safe and effective interrogation methods and potential effects of cultural and ethnic characteristics of subjects of interrogation.

E2.1.4. BSCs may advise command authorities on detention facility environment, organization and functions, ways to improve detainee operations, and compliance with applicable standards concerning detainee operations.

E2.1.5. BSCs may advise command authorities responsible for determinations of release or continued detention of detainees of assessments concerning the likelihood that a detainee will, if released, engage in terrorist, illegal, combatant, or similar activities against the interests of the United States.

E2.1.6. BSCs shall not support interrogations that are not in accordance with applicable law.

E2.1.7. BSCs shall not use or facilitate directly or indirectly the use of physical or mental health information regarding any detainee in a manner that would result in inhumane treatment or not be in accordance with applicable law.

E2.1.8. To ensure that detainees do not obtain the mistaken impression that health care personnel engaged in clinical care of detainees are also assisting in interrogations, BSCs shall not allow themselves to be identified to detainees as health care providers. BSCs shall not provide medical care for staff or detainees (except in emergency circumstances in which no other health care providers can respond adequately to save live or prevent permanent impairment). BSCs

shall not provide training in first aid, sanitation, or other health matters. Absent compelling circumstances requiring an exception to the rule, health care personnel shall not within a three-year period serve in the same location both in a clinical function position and as a BSC.

E2.1.9. BSCs shall not provide medical screening (which is a health care function) to detainees, nor act as medical monitors during interrogation.

E2.1.10. BSCs may consult at any time with the psychology or other applicable specialty consultant designated by the Surgeon General concerned for this purpose regarding the roles and responsibilities of BSCs and procedures for reporting instances of suspected noncompliance with standards applicable to detainee operations.

E2.2. As a matter of professional personnel management, physicians are not ordinarily assigned duties as BSCs, but may be so assigned, with the approval of ASD(HA), in circumstances when qualified psychologists are unable or unavailable to meet critical mission needs.

Ethics Code Task Force
Meeting Agenda
April 9—11, 1999

As stated at its March 27-29, 1998 meeting, the ECTF qualifies work at meetings with the following statement: "We are conducting a critical self-evaluation. All comments are working comments, tentative and subject to change."

In the discussion of this item and Item 6, comments are coded by the primary recommendation of each reviewer: "Y" for include in the revision and "N" for do not include. Both reviewers recommending do not include is "NN," both recommending include is "YY," and disagreement is "YN."

The ECTF discussed efficient and useful procedures for integrating the comment review and standard revision process. The ECTF approved the following plan:

1. There will be an initial review of each comment by 2 ECTF members.
2. As in the past, all ECTF members will continue to receive all comments, as well as all comment review forms.
3. Comments rated YN are discussed by the ECTF to determine whether to include, and to identify the broad topics to use for assignment for revision.
4. There will be no further review of comments rated as NN, unless requested by any other ECTF member.
5. Using the comment review forms, staff will catalogue YY comments, and any comments that remained YN after discussion, under broad topics, e.g., retention of records.
6. These YY and YN comments are assigned to the appropriate drafting subgroup(s) based on the general topic.
7. The full ECTF will review subgroups' drafts of standards.

The ECTF discussed the comment review form, and made minor changes, primarily to facilitate the identification of critical incidents. Additionally, under Category N: Do Not Consider for Revision, the criteria was added: "Does not need a standard." Attachment 1 is the revised form.

The ECTF received as information a table summarizing members' evaluations of newly received comments on the Code. Attachment 2 is a revised version of that table, changed to reflect ECTF discussion at the meeting.

The ECTF discussed (and made the following decisions regarding) comments that

had been rated YN, or that had been designated for discussion with legal counsel in executive session:

Comment 119: After discussion in executive session, the ECTF kept this comment coded as YY.

Comment 121: If it is determined that the code (Standard 1.21) covers this situation, is the code requirement clear enough?

Comment 122: Change to NN

Comment 123: This comment needs to be reviewed in terms of a combination of 1.06 and 4.09b. If these are judged to handle the concern, is it clear enough?

Comment 127: After discussion in executive session, the coding was changed to NN.

Comment 128: This (resubmitted) comment was previously addressed by the ECTF as Comment 70.

Comment 131: An ECTF discussion is needed regarding a section or combination of standards regarding suicide, assisted suicide, and related issues. (Unrelated to this comment in particular.)

Comment 132a: Change to NN. Consider "civility" as a topic for the General Principles.

Comment 132e: Change to NN. Emphasis by ECTF on ensuring input by industrial/organizational (I/O) psychologists.

Comment 132h: Change to NN. Address as format.

Comment 133: Include with discussion of suicide issues.

Comment 134: Include with student-faculty group and supervision; format issue.

Comment 135a & c: Change to NN. Discuss under ethical decision making.

Comment 136: Change to NN

Comment 139: Change to NN.

Comment 142: During discussion in executive session, it was determined that this comment was coded in error as needing legal review.

Item #6. Process for Reviewing Critical Incidents.

The ECTF discussed how to evaluate the critical incidents that have been submitted. The ECTF voted to use Option A (as detailed in the agenda) for evaluation of new incidents. Later in the meeting, in reviewing deadlines required to move drafting forward, the ECTF reconsidered that decision and elected Option B: Staff will catalogue the general topic(s) of each critical incident and assign to appropriate subgroup(s). Each subgroup incorporates consideration of the the critical incident into its decision making/standard revision processes, (or if subgroup deems the incident to be erroneously cataloged, sends the incident back to staff to be reassigned.)

Item #7. Format of the Code: Ethical Standards.

The ECTF discussed the adequacy of the current sections and section titles of the 1992 Ethics Code and possible alternative organizations of standards into sections that can adequately reflect the ethical issues that arise across various psychological activities, roles, work contexts, clients, colleagues, and other persons impacted by the psychologist's work. ECTF members' "assignment" reports were used to guide discussion.

Reasons for organizing several standards into a separate section, rather than placing the standards into a larger, less differentiated section, include a) helping users to find information; b) keeping together standards that are context specific; and c) emphasizing particular issues to psychologists, the public, or others.

Discussion of format included the comment that many psychologists do not appear to read the Ethics Code. One suggestion was to develop continuing education materials, that could be marketed by the APA continuing education program, the APA College, and/or the APA Insurance Trust.

The ECTF discussed methods for elaborating the information included in the Code, such as via a companion document, or through APA (or other) documents independent of the Ethics Code.

Questions considered and notes of relevant discussion follow. As previously noted, all comments are working comments, tentative and subject to change:

- a. Are General Standards (1.01-1.27) adequately reflected in other sections. Are there advantages to a parallel structure for these issues? (Assignment Report: Drs. Nathan, Swenson, Ramos-Grenier.)

Three possible changes were discussed. There was general agreement to move all standards sections that are "general" to the beginning, all prior to the more context-specific sections. The sentence that introduces the current sections for General Standards and Privacy and Confidentiality (i.e., "These ... Standards are potentially applicable to the professional and scientific activities of all psychologists.") would be modified or deleted. A proposal to modify the structure of the Ethics Code ("Change #3" of the assignment report) to place the General Standards under the most relevant General Principle was not accepted, in part due to the perception that this would increase the length of the Code.

- b. Are Privacy and Confidentiality Standards (5.01-5.11) and the concept of Informed Consent adequately reflected in other sections? Are there advantages to a parallel structure for these issues? (Assignment Report: Drs. Nathan, Vasquez, and Oakland.)

The Privacy and Confidentiality section is proposed to remain a separate section, grouped with the other "general" sections. Informed Consent will continue to be addressed in individual context-specific sections. There was some consideration to grouping some sections or standards together, possibly with regard to the psycho-legal context.

- c. Can current section headings adequately reflect ethical issues involving:
 1. Third Parties (Assignment Report: Drs. Koocher and Brown.)

Do not create a special section. Might be treated in general section.

2. Organized Systems (including but not limited to schools, businesses, managed care organizations, and military and law enforcement. Assignment Report: Drs. Oakland and Bennett.)

Based on feedback from Dr. Bennett regarding the conclusions of the CAPP task force regarding ethics and managed care, the tentative decision is not to have a special section of standards on this topic in the Code. During drafting and review, each standard in the Code will be reviewed as to its relevance to these areas. These areas will also be considered with regard to standards regarding "third parties" and Standard 8.03.

3. Group and Family Practice (Assignment Report: Ms. Moody and Dr. Koocher.)

Do not create a special section. Consider change of title of 4.03 to "Multiple Client Therapies." Include such standards in the therapy section primarily. During drafting and review, all standards in the Code will be reviewed regarding whether they address the concerns raised. APA Divisions specializing in these issues should be consulted to determine if concerns are being addressed.

4. Social Interventions (Assignment Report: Drs. Wilcox and Daniel.) Is there a meaningful distinction between the terms "Intervention" in Standard 2 and "Therapy" in Standard 4?

Discussion suggested a subgroup within the area of general standards (or separately) titled Working With Institutions, Communities, and Organizations. This was later adopted as a proposed structure.

5. Culture Fair Practices (Assignment Report: Drs. Ramos-Grenier and Daniel.)

The recommendation is not to have a special section, but to review several standards needing revision. During the meeting there was a discussion regarding institutional racism, led by Drs. Ramos-Grenier and Henderson Daniel. Dr. Henderson Daniel will provide some readings on the concept of white power. It was agreed generally that all ECTF members need to recognize and be sensitive to bias and to consider all sections of the Ethics Code (not just the General Principles) with regard to issues of diversity and bias. The process of review of

the Code for institutional racism should include consideration of the history of psychology as it relates to racist or discriminatory practices, and consideration of the disenfranchised person's point of view. It is not only ECTF members of color who should identify such issues. The discussion also encompassed diversity issues beyond ethnicity.

6. Vulnerable Populations (children, cognitively impaired, prisoners)

Do not create a special section. During drafting and review, each standard in the Code will be reviewed as to its relevance to these areas.

7. New & Emerging Areas (e.g., telehealth, media psychology).

Do not create a special section. Discussion did not indicate that any one current or proposed section of standards is a best fit for all these topics.

d. What are the advantages to combined vs separate sections on Teaching and Research?

The tentative decision is to reorganize standards currently in section 6 into two sections, one for the teaching area and the other for Research and Publication, with later consideration as to whether to separate publication, or place it (or elements of it) elsewhere (such as advertising). There was no decision regarding a tentative name for the teaching and supervision section. There was objection to the term "training" as a modifier, but no objection to the scope of the section covering only supervision for an educational/preparatory purpose. The teaching section covers formal education and continuing education activities.

e. Should the Code continue to have a separate section on Forensic issues?

The tentative decision is to keep the section. The rationale is that a) there continues to be a high incidence of complaints and need for guidance and b) there are many inexperienced providers, in part due to therapists who are not providing forensic services being called to testify regarding forensic matters, and due to this being a popular area for expanding practice.

f. Other issues.

No other areas were identified for discussion.

Item #8. Format of the Code: Working Format for Ethical Standards.

The ECTF agreed on the following as a "working" format for the standards sections, to guide the subgroups which will be assigned to revise specific standards:

I General Sections

Resolving Ethical Issues (Include 1.01 and 1.02; 8.01-8.07 [not 8.03])
Competence (1.03-1.07)
Human Relations (1.08-1.14,1.17-1.20)
Privacy and Confidentiality (5.01-5.11)
Advertising and Other Public Statements (3.01-3.06)
Working With Institutions, Communities, and Organizations. (1.15, 1.16,1.21, 1.22, 8.03)
Fees/Business (1.23-1.27)

II Specific Sections

Teaching and Training Supervision (6.01-6.05)
Research and Publication (6.06-6.26)
Assessment (2.01-2.10)
Therapy (4.01-4.09)
Forensic Activities (7.01-7.06)

Attachment 3 shows the subgroup assignments based upon this working format. Comments and critical incidents regarding new, emerging, or not readily apparent standards/areas will be assigned to the Chair.

The ECTF discussed whether individual members could consult with other groups in drafting standards. There was agreement to route through the Ethics Office any requests to be made of groups; individuals may consult others, but should not represent the input in the context of the consulted person providing the draft language.

Item #9. Format of the Code: General Principles.

The ECTF discussed the purpose of the General Principles, and the ECTF's rationale for revising the current General Principles. Several questions posed in a memorandum from Dr. Bennett and an "assignment" report on the General Principles from Drs. Brown and Appleby were used to guide the discussion.

The tentative list of General Principles, arranged in alphabetical order, is:

- Beneficence
- Fidelity - Tom -
- Integrity - } Elizabeth
- Justice - } Peter A
- Nonmaleficence
- Respect for Others' Rights and Dignity Julia

A review of each of the current General Principles resulted in the following recommendations:

- Do not keep competence, since it is not an overriding value; it is an activity that can fulfill values.
- Integrity: keep.
- Professional and Scientific Responsibility: will become Fidelity
- Rights and Dignity...: keep.
- Concern for others' welfare: will become Beneficence
- Social responsibility: some elements of this section fit Beneficence and others Justice. Overarching aspect to go into the preamble.

Item #10. Criteria for Revising and Writing Standards.

Dr. Bennett's memo served as a departure point for the ECTF's discussion of criteria for revising and writing standards. Evaluation of standards include decisions to keep a standard as is, modify, add something new, or delete. The purpose of standards was described as to set forth enforceable rules of conduct. Discussion led to the "Guide for Drafting Standards" (Attachment 4).

A "Standard Drafting Form" (Attachment 5) was also developed for use in drafting and providing rationale. The rationale section was seen as helpful as

record for future reviewers, and as rationale to forward to reviewers of the ECTF product (for example, Ethics Committee, Board of Directors, and Council of Representatives).

Item #11. Modeling the Review and Revision Process.

The ECTF reviewed several standards or issues to model the review process by which reviewers would propose revisions. Following are notes relevant to topics and discussion:

Whether the Ethics Code should have a standard requiring a specific time period for retention of records.

Do not add a requirement for retention of records for a specific number of years. In part this is due to there being no apparent ethical basis for a specific number of years. Also, the Code requires compliance with any laws requiring retention of records, and very brief retention of records would be likely to violate state law and therefore the Code.

Combine 1.23 and 1.24; Include confidentiality of records in 1.23/1.24 instead of 5.04, 5.07, 5.09.

Add see also regarding 1.23 (or whatever would reference confidentiality of records) in 5.02.

Whether the Ethics Code should have a standard requiring informed consent for psychological evaluation, assessment, and diagnosis.

Comments on both sides. Some argue that the consent may be assumed and is not needed explicitly. Draft test standards (which included wording that would require informed consent for assessment, with exceptions) were consulted. The ECTF asked that the subgroup for assessment write a draft standard requiring informed consent

Whether existing standards adequately address ethical issues associated with the use of translators/interpreters in assessment and psychotherapy.

Key Words: Culture, Language, Diverse population, interpreters, translators, supervision, assessment.

Discussion regarding adding something about translators and interpreters to

2.04 and cross referencing from 2.01, 2.02, 2.08, 2.09, and 1.22. Add language to 2.03. Believe that last sentence of 2.05 addresses the issue. Question regarding deleting 2.06 (pose to CPTA).

Whether standards relevant to competence should address the manner in which psychological activities are conducted?

Is 1.14 sufficient to deal with incompetent work? Generally yes, but consider whether 1.06 can use language more like 6.06a.

Whether Standard 1.04c is sufficient to deal with therapists using experimental or unusual treatments?

Consider informed consent reference on 1.04c (e.g. to 4.01a and 4.02a)?
Concluded by planning to put in explicit informed consent requirement for experimental treatments.

Whether the use of word "reasonable" in Standard 6.03a can be improved.

This appears okay.

Regarding "reasonable" in Standard 6.03b.

"Make reasonable efforts" discussed and no change recommended. Discussion noted that previous consideration included that this standard includes an "eye of the beholder" element and that deleting "reasonable" (to leave "make efforts") would actually weaken the standard.

Regarding Standard 8.03.

The ECTF discussed the following alternative wording, and after the discussion below, took no action pending a recommendation from the reviewers.

"In addition to complying with provisions in the Ethics Code, when demands of an organization with which psychologists are affiliated conflict with this Ethics Code, psychologists clarify the nature of the conflict and make known their commitment to the Ethics Code."

Issues to be considered include:

Whether the alternative wording adds an additional responsibility for organizationally based psychologists to address conflicts.

Whether organizationally based psychologists must, in the end, follow the

Ethics Code.

If it does not require them to comply with the Code in the end, one rationale for such a policy is that this might keep psychologists who are advocating for change in such settings, rather than forcing the psychologist's resignation or dismissal.

Whether, if it does not require them to comply with the Code in the end, it is problematic that this may mean that other psychologists (such as private practitioners) must meet a higher standard.

Whether to have no provision regarding such matters.

Relevant General Principles. Fidelity, Integrity, Nonmaleficence.

Regarding how diversity is handled throughout the Code:

4.01d re "to address misunderstandings"

4.01d modified above and add cross reference to new diverse population standard in therapy

4.02c or new add something re interpreters and language. With reference to 1.22, which should also add something re interpreters.

4.03 add cross reference to one or more of these new ones.

4.08

5.01 add something.

5.02 add cross reference from 1.22?

7.02b cross reference 1.22 and diversity.

Item #12. Formation of an Ethical Decision Making Model.

The ECTF discussed the addition of a decision making model to the Ethics Code. The "assignment" report from Drs. Appleby and Vasquez was used to guide discussion. Nathalie Gilfoyle, J.D., Deputy General Counsel, provided information regarding legal issues to keep in mind regarding a decision making model.

The ECTF agreed to include an ethical decision making model and to make it a "severable" recommendation, subject to acceptance or rejection by the Council of Representatives.

Agenda Item #13. Prohibition of Sex with Former Clients.

The ECTF discussed the prohibition against sexual involvement with former therapy clients. Drs. Bennett and Wilcox were assigned to report from the standpoints of "almost never" and "in perpetuity."

The current rule was evaluated in terms of the type of psychological service. Regarding "more than one contact" psychotherapy with a DSM diagnosis, a straw vote indicated that the ECTF does not currently see Standard 4.07 as adequate. The ECTF discussed whether the current Standard is adequate regarding contacts that are not (or probably not) "therapy" as addressed by standards in section 4 of the current Ethics Code (e.g. outplacement counseling or smoking cessation treatment). Part of the concern expressed is whether the current rule is correctly understood by psychologists and the public.

Drs. Vasquez and Bennett have been assigned as the subgroup to review Therapy standards, and will explore an "in perpetuity" standard for real therapy (defining therapy?) and a "non-perpetuity" standard for other areas of practice. Other suggestions included placing the current 4.07b before 4.07a to emphasize the "almost never" aspect of the standard.

Item #14. Sex with Current and Likely Students and Supervisees.

The ECTF discussed the issue of sex with current and "likely" students and supervisees, and direct and indirect teaching authority. The "assignment" report from Dr. Swenson and Ms. Moody served as a point of departure for discussion.

The ECTF tentatively agreed on the following text for Standard 1.19, still tentatively titled "Exploitative Relationships":

- (a) Psychologists do not exploit persons over whom they have supervisory, evaluative, or other authority such as students, supervisees, employees, research participants, and clients or patients. (See also Standards 4.05 -

4.07 regarding sexual involvement with clients or patients.) Add "see also" or other reference to part b, as revised and moved below.

Move part b to the teaching section. (b) Psychologists do not engage in sexual relationships with students or supervisees in training who are in their department or over whom the psychologist has or is likely to have evaluative, direct, or indirect authority, because such relationships are so likely to impair judgment or be exploitative.

Item #15. Review for Urgent Need for Interim Revision.

The ECTF reviewed comments 79, 84, 118-123, 126-137, 139, and 141-152 and voted that there is no urgent concern about the Ethics Code that cannot be delayed until the major revision.

Item #16. Report from Legal Counsel.

The ECTF received privileged and confidential memoranda from legal counsel on a variety of topics requested by the ECTF, and discussed the memoranda with counsel in executive session.

Item #17. Information Gathering Status Report.

The ECTF's information gathering activities thus far have included publication of a call for comments in the January through August 1998 issues of *APA Monitor*, a 3,000-member random sample critical incident survey, a 500-student-affiliate critical incident survey distributed at the 1998 convention, and memoranda to State and Provincial Psychological Association Presidents and APA Division Presidents requesting formal input from their organizations and to State and Provincial Psychological Association Ethics Committee Chairs, requesting input from themselves and members of their Committees.

Additionally, there was reference to the code revision in the APAGS spring 1998 newsletter (albeit followed up by additional information via the APAGS campus representatives' listserv when it was discovered that the actual "call" article was accidentally omitted from the newsletter). Also, the Ethics Committee is responding to the ECTF's request for input, including solicitation of comments from former Ethics Committee members and associates.

The ECTF received the information that ECTF information (including mention of the call for comment) has been distributed in the form of information items to the Council and Consolidated/Cross-Cutting meetings. Staff liaisons to APA Boards and Committees were informed of the availability of ECTF minutes from the October 1997 meeting.

After review of the remaining planned steps for information gathering (reported in the ECTF October 1997 minutes and supplemented by the Ethics Committee at its November 1997 meeting), the ECTF voted to complete only the request for input from ASPPB, National Register, and ABPP. Requests for input from other groups originally identified will be implemented once drafts are available for comment.

The ECTF received information regarding the demographic analysis of response to the ECTF critical incident survey. The Committee discussed the response rate from ethnic minorities (32 responses from 300 sample) and estimated the oversampling used. The ECTF noted that good response was received from academic settings, and that while ethnic minority and industrial/organizational psychologists' numbers appeared low, the level of response did in fact proportionally reflect APA's membership.

The ECTF discussed the low number of responses received from the surveys distributed to students at the convention (5 responses from 500 surveys), and the previous omission of the "call for comments" article in an APAGS newsletter that carried an article encouraging comment. The ECTF asked that the APAGS staff person receive an expression of its disappointment that the call article was omitted in the summer newsletter, and that there was such a low response to the student survey. The communication is not intended to be criticism of the staff person specifically, since the ECTF has not determined why the problems occurred. A copy of the communication is to be sent to Marcia Moody as the APAGS representative to the ECTF.

The ECTF agreed that the "call for comments" article should run in the January issue of the APAGS newsletter (deadline for submission of materials: November 30, 1998).

Item #18. Updates from Ethics Committee, Board of Directors, and Council of

Representatives.

The ECTF received the information that, in accordance with the Board of Directors' June 1998 action recommending that all task force, working group, and ad hoc committee meetings be reduced by one in 1999, the ECTF will hold two meetings in 1999. (Three had been requested by the ECTF.) The meeting dates for 1999 are April 9-11, 1999 and October 1-3, 1999.

A memorandum regarding support of the ECTF, from Celia B. Fisher, Ph.D., Chair of the ECTF, to George Stricker, Ph.D., Chair of the Ethics Committee, was provided to Norine G. Johnson, Ph.D., Board of Directors' Liaison to the Ethics Committee and Gerald P. Koocher, Ph.D., Board of Directors' Representative to the ECTF.

The ECTF received information items sent to the Ethics Committee, Board of Directors, Council of Representatives, and Consolidated Meetings.

Item #19. Plans for 1999 and 2000.

As noted above, the ECTF has two meetings scheduled for 1999. The ECTF reviewed the time frame for its project and recommends that it hold 3 meetings in 2000. The Chair will provide a memorandum to the Ethics Committee at its November 1998 meeting, providing rationale for three meetings.

The ECTF discussed plans for its 1999 meetings, as well as plans for reporting its activities.

The ECTF asked that Drs. Fisher and Wilcox make another presentation to Council in February 1999, and discussed possible content. A presentation should also be requested for the August 1999 Council meeting. The ECTF noted that information items are provided for each Council meeting, and include the ECTF minutes.

The minutes of the March 1998 and October 1998 ECTF meetings and a verbal report from Dr. Swenson will be provided to the Ethics Committee at its November 1998 meeting.

The ECTF requested that staff convey to the Ethics Committee that it has noted in

its information gathering that mandatory participation by students in experiential training remains an area of ethical concern. The ECTF suggests that the Ethics Committee consider distributing any relevant policy statement to all APA accredited programs.

The ECTF plans a one hour informational report to the membership at the 1999 convention, and generally plans to hold a two hour meeting at the convention once drafts are available.

The ECTF discussed *APA Monitor* articles and other information to be sent to various groups. Minutes are provided to staff liaisons and the ECTF asked that they also be sent to monitors to the Ethics Committee. The ECTF also requested a brief article in the *APA Monitor*, to remind the membership of the current plan for revision of the Ethics Code.

Dr. Fisher, and possibly other ECTF members, have been interviewed for an article in the *National Psychologist* regarding the revision.

The ECTF asked that staff arrange to provide information regarding the revision via the APA web site.

Staff will assign critical incidents to ECTF members for drafting based on topical area. The primary drafter will review all incidents, comments, and standards in the assigned area, and draft revised standards using the standard drafting form. Staff will send an email request mid-January, asking for email feedback on how the process is going. Forms will be sent by the primary drafter to the secondary reviewer by February 1, 1999. Secondary reviewers will complete their reviews and send the form back to the primary drafter by February 15. The primary drafter will submit materials to the Ethics Office by March 1, 1999. The Chair, working with staff, will integrate materials. Materials for the April meeting are targeted for mailing by April 1, 1999.

At the meeting, each member was provided a computer disk copy of the Ethics Code and the "Standard Review Form."

The ECTF was informed that Deborah Felder has been hired to coordinate the Ethics Code revision process and provide staff support for the ECTF. She will join the Ethics Office on November 2, 1998. Ms. Felder was in attendance as an

observer at this meeting.

The Chair and the ECTF thanked Emily Laumeier for her excellent contributions to the work of the ECTF.

Item #20. Ethics Of Research with Human Participants.

The ECTF received the Ethics Committee's comment to the task force regarding this document, and also received the comments of Drs. Fisher and Jones. Dr. Jones indicated that the draft was being forwarded to BSA for direction on how to proceed, including the question of whether the original mission of the task force would be pursued and the draft proposed as guidelines through the Council of Representatives. The ECTF discussed the comments and asked that a memo be sent to BSA indicating that the ECTF has great concerns about the failure of this work to adequately reflect the current Ethics Code in relationship to research, and strongly recommends against its use as guidelines in its present version.

Item #21. Communication With Ethics Committee Regarding Issues Raised by CEMA.

The ECTF received as information a memo dated August 5, 1998 written by Drs Ramos Grenier and Jones to address the issue as raised by CEMA's inquiries to the Ethics Committee. No further response from the ECTF to the Ethics Committee is planned at this time.

Item #22. Terms of ECTF Members.

The ECTF received the information that Dr. Wilcox was reelected to Council, and thus his appointment to the ECTF continues.

As indicated by the Ethics Committee's Plan for Next Review of the Ethics Code, the ECTF members formerly known as liaisons are to be reappointed as needed in order to ensure that each representative is a current member of the represented group. Dr. Wilcox's new term ends December 31, 2001. Other representatives' terms are as follows: Gerald P. Koocher, Ph.D., December 31, 1999; Elizabeth V. Swenson Ph.D., J.D., December 31, 1999. The term of Marcia J. Moody M.Ed. on APAGS ends December 31, 2000. At Ms. Moody's appointment APAGS indicated that it would use the same reappointment policy. There is, however, no

Ethics Committee or ECTF policy regarding continuity of APAGS terms. Unlike the other APA constituencies represented on the ECTF, APAGS does not vote on the eventual revision.

Item #23. American Psychologist Article.

The ECTF received the Ethics Committee's annual report, as published in the August 1998 issue of *American Psychologist*. The report included a summary of ECTF activities, which was completed in consultation with Dr. Fisher.

The ECTF discussed the Ethics Committee policy (reflected in point number 5 of the "guiding principles" on page 969) regarding avoidance of disciplinary investigations or actions in response to notifications of disciplinary action taken by state boards and similar entities, where loss of APA membership is not likely to result.

Item #24. Mailings Received.

The ECTF received as information a recap of substantive mailings sent to the task force members following the March 1998 ECTF meeting.

Attachments:

- Attachment 1: ECTF Comment/Critical Incident Review Form
- Attachment 2: Comment Review Summary Table, ECTF 10/98
- Attachment 3: Reviewer Assignments Table
- Attachment 4: Guide for Drafting Standards
- Attachment 5: Standard Drafting Form

ECTF COMMENT/ CRITICAL INCIDENT REVIEW FORM: REVISED NOVEMBER 6, 1998

Disclaimer: The following reflects working comments that are subject to future reevaluation by the evaluator and discussion by the ECTF

COMMENT/ INCIDENT # _____ ECTF REVIEWER _____

RELEVANT PRINCIPLE(S) OR STANDARD(S) (letters or numbers)::

SUMMARY OR GIST OF COMMENT and (optional) ECTF member's additional suggestions:

If incident, is this a good illustrative incident to include in future educative documents?
Yes _____ No _____

REVIEWER RECOMMENDATION

Check ONE category below (1-7) that fits the comment(s); use additional sheets if multiple points in comment

Category N: Do NOT Consider for Revision

- 1. Comment/suggestion is not clear to ECTF 1 _____
2. Comment covered adequately by current Ethics Code 2 _____
3. Issue for APA guidelines, not the Ethics Code 3 _____
4. Comment/suggestion is inimical to the spirit of ethics 4 _____
5. Change would be likely unenforceable 5 _____
6. Does not need a standard 6 _____

Category Y: Consider Including in Revision

- 7. Consider including and discuss 7 _____
8. Consider including, but do not discuss--topic already under consideration 8 _____
Provide reference below to the similar previous comments:

CHECK HERE TO REQUEST LEGAL REVIEW

Briefly describe issue for legal review:

LEGAL REVIEW * _____

Write "Confidential" at the top of this form

CHECK HERE IF COMMENT WARRANTS DISCUSSION FOR URGENT REVISION?: * _____

Write "Confidential" at the top of this form

Excerpt from Minutes of the October 24-26, 1997 Meeting of the ECTF:

"The ECTF discussed the following criteria for the review of urgent need for interim revision. Interim revision would be recommended if the comment under consideration indicated that the 1992 Ethics Code was causing (1) unreasonable legal exposure to the organization, (2) significant harm to the public, or (3) significant harm to APA membership or the profession of psychology."

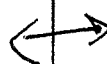
If legal review is requested or comment warrants discussion for urgent review, this is a confidential document

The following review of comments is tentative to further consideration of other comments and to further review by the ECTF

Comment Number	Relevant Principles or Standards	Status	Reviewer	Reviewer	Urgent Review?	Legal Review
079	1.17, 1.18, 4.05	Y	Oakland	None	N	N
084	6.06,6.07,6.08,6.10, 6.14,6.15,6.25	Y	Koocher	None	N	N
118	1.04,1.13,1.14	NN	Ramos-Grenier	Daniel	N	N
119	B,D,E Preamble,1.10	YY	Appleby	Nathan	N	Y
120	6.19,6.25	NN	Appleby	Moody	N	N
121	1.07,1.21	YN	Oakland	Koocher	N	N
122	5.11	NN	Brown	Vasquez	N	N
123	A,1.05,1.06,4.09b	NY	Bennett	Nathan	N	N
126	1.08,1.14,2.01,2.02, 2.04,2.5,New	YY	Ramos-Grenier	Vasquez	N	N
127	8.02,5.05,5.03	NN	Moody	Swenson	N	Y
128	6.23	YN	Swenson	Moody	N	N
129	5.05a	NN	Wilcox	Bennett	N	N
130	New	YY	Brown	Vasquez	N	N
131	1.14,1.04,(Many)	YN	Moody	Daniel	N	N
132	Many	NN	Swenson	Ramos-Grenier	N	N
132a	B	NN	Swenson	Ramos-Grenier	N	N
132e	7.04a,7.06	NN	Swenson	Ramos-Grenier	N	N
132h	1.19b	NN	Swenson	Ramos-Grenier	N	N
133	5.05a	NY	Wilcox	Koocher	N	N
134	6.many, B	NY	Vasquez	Moody	N	N
135	Preamble,gp's	NN	Moody	Bennett	N	N
135a		NN	Moody	Bennett	N	N
135c		NN	Moody	Bennett	N	N
136	Preamble	NN	Brown	Bennett	N	N
137	1.17	NN	Brown	Daniel	N	N
139	D,E	NN	Appleby	Wilcox	N	N
141	2.02,2.10	YY	Ramos-Grenier	Vasquez	N	N
142	6.15	YY	Swenson	Bennett	N	N
143	5.10,5.02,5.03,5.04	YY	Oakland	Nathan	N	N
144	1.24,5.04,2.01,5.02, 3.10	NN	Wilcox	Daniel	N	N
145		YY	Appleby	Nathan	N	N
146	1.04,1.17,1.18	YY	Swenson	Oakland	N	N
147	All	YY	Brown	Koocher	N	N
148	GP's	NN	Appleby	Swenson	N	N
149	3.06,4.08	YY	Bennett	Koocher	N	N
150	6.many	NN	Wilcox	Nathan	N	N
151	2.02,2.09,2.10	YY	Ramos-Grenier	Oakland	N	N
152	General	Y	Appleby	None	N	N

Reviewer Assignments*
Drafted October 24, 1998
 Revised November 6, 1998

*WORKING DRAFT FOR PROCESSES OF CRITICAL SELF EVALUATION, TENTATIVE AND SUBJECT TO FURTHER
 REVIEW AND MODIFICATION BY ECTF*

	Standards Included	Reviewer	
		Primary	Secondary
I General Sections			
1. Resolving Ethical Issues	Include 1.01 and 1.02; 8.01-8.07 [Not 8.03]	Appleby	Wilcox 
2. Competence	1.03-1.07	Daniel	Nathan
3. Human Relations	1.08-1.14, 1.17-1.20	Brown	Vasquez
4. Privacy and Confidentiality	5.01-5.11	Swenson	Koocher
5. Advertising and Other Public Statements	3.01-3.06	Koocher	Appleby
6. Working With Institutions, Communities, and Organizations.	1.15, 1.16, 1.21, 1.22, 8.03	Bennett	Oakland
7. Fees/Business	1.23-1.27	Nathan	Moody
II Specific Sections			
8. Teaching and Training Supervision	6.01-6.05	Moody	Daniel
9. Research and Publication	6.06-6.26	Wilcox	Swenson
10. Assessment	2.01-2.10	Oakland	Ramos-Grenier
11. Therapy	4.01-4.09	Vasquez	Bennett
12. Forensic Activities	7.01-7.06	Ramos-Grenier	Brown

*Comments and critical incidents regarding new, emerging, or not readily apparent standards/areas will be assigned to the Chair

Guide for Drafting Standards
 Drafted 10/24/98
 Last Revised 11/06/98

*WORKING DRAFT FOR PROCESSES OF CRITICAL SELF EVALUATION, TENTATIVE AND SUBJECT
 TO FURTHER REVIEW AND MODIFICATION BY ECTF*

Each reviewer will review all comments and critical incidents that have been coded as relevant to the topic/standards being considered. The reviewer will also consult the "commentary" book regarding the standard.

Modifiers: If the standard involves use of one of the "modifiers" ("reasonable," "appropriate," "potentially," "seek")¹, consider the following approach. Modifiers should be used if their absence would:

- Remove professional judgment from the Ethics Committee.
- Create situations that would lead to injustice.
- Impose a one-size-fits-all mentality to the Ethics Code.

For each standard, ask whether it is demonstrated that a change would:

1. Have a significant positive impact on the educational value of the EC
2. Significantly increase the enforceability of the EC
3. Result in an ethical rule that is too vague or ambiguous to be enforceable (would a "reasonably intelligent member of the profession" understand that the document in question is unethical?)
4. Significantly enhance the justice achieved in enforcing the EC
5. Result in a rule that is arbitrary or capricious (is there adequate evidence to support the rule or a violation of the rule?)
6. Be contrary to public policy (do the rules conflict with societal values that rise to the level of public policy?)
7. Significantly increase the degree of positive personal conduct on the part of APA members in the specific ethical situation being addressed.
8. Violate antitrust laws (would it restrict the manner in which members can compete with each other to either restrict price competition or do procompetitive effects outweigh anticompetitive effects?)
- ? 9. Comment 158 Undue Burden on P - impede gd practice
 Stand. shd not proscribe more than 1 beh. *Educator*

¹ "Strive to" was deleted, since it does not appear in the enforceable standards.

If a change meets the above tests, ask whether the change is not appropriate based on:

1. Change for change sake should always be avoided.
2. Change proposed to make a Standard "tighter," or "better," but not more enforceable, would not be acceptable.
3. Change proposed only to make a Standard "clearer" should be justified based on substantive feedback from diverse groups reviewing the EC (i.e., a lack of clarity on the part of one or a few APA members does not justify modification of any particular Standard).
4. Likewise to suggest that a Standard might be improved when the changes would have no impact on psychologists' ultimate conduct would not be efficient.
5. To add Standards that are redundant with existing Standards in order to emphasize the specific behavior may only serve to confuse the issue. Redundancy should be avoided. A better cross referencing mechanism would serve the same purpose.
6. Change should not increase the length of the Code unnecessarily.

Review the standard with reference to its conformity with the morals and values embodied in the new Principles below; is it demonstrable that each standard promotes these overarching values for both the psychologist and the consumers of psychological services.

1. Beneficence
2. Fidelity
3. Integrity
4. Justice
5. Nonmaleficence
6. Respect for Others' Rights and Dignity

Review the standard with reference to institutional racism and other historical or current forms of disempowerment:

1. Is this an area of past/present misuse or neglect by psychologist.
2. Attempt to review the standard from the perspective of disempowered or disenfranchised group members.
3. Recognize limits of the Code's applicability to personal behavior.

Standard Drafting Form
Drafted 10/24/98, Revised 11/06/98

Disclaimer: The following reflects working comments that are subject to future reevaluation by the evaluator and discussion by the ECTF

Date Submitted (after review by both primary and secondary): _____

Primary Drafter:

Secondary Reviewer:

Numbers of relevant comments/critical incidents:

Would any critical incidents be good illustrative examples to include in future educative documents?

Original Standard # _____ Name:

New # (or "New") _____ Name (if changed):

Current Text:

Recommended Text:

Comparison of Current and Recommended Text (New text underlined; deleted text in []'s or use strikeout):

Rationale and Consequences of Changing the Standard:

Consequences of Not Changing the Standard:

Relevant General Principles. Beneficence Fidelity Integrity Justice Nonmaleficence Respect

Key Words:

Standards to Cross Reference from this Standard:

Standards to Cross Reference to this Standard:

The following are working comments that are subject to future reevaluation by the evaluators and discussion by the ECTF.

Identifying 7 Title?

As the confederates?

Reverse order

is this enforceable?

8. RESOLVING ETHICAL ISSUES	18. RESOLVING ETHICAL ISSUES
<p>1.01 Applicability of the Ethics Code. The activity of a psychologist subject to the Ethics Code may be reviewed under these Ethical Standards only if the activity is part of his or her work-related functions or the activity is psychological in nature. <u>Personal activities having no connection to or effect on psychological roles are not subject to the Ethics Code.</u></p>	<p>1.01 Applicability of the Ethics Code. No changes recommended. <i>What about if connected to soliciting child prostitutes? Breaking other cases?</i></p>
<p>1.02 Relationship of Ethics and Law. If psychologists' ethical responsibilities conflict with law, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict in a responsible manner.</p>	<p>1.02 Relationship of Ethics and Law. No changes recommended. <i>EC Statement: shd military be referenced?</i></p>
<p>8.01 Familiarity With Ethics Code. Psychologists have an obligation to be familiar with this Ethics Code, other applicable ethics codes, and their application to psychologists' work. Lack of awareness or misunderstanding of an ethical standard is not itself a defense to a charge of unethical conduct.</p>	<p>8.01 Familiarity With Ethics Code. No changes recommended.</p>
<p>8.02 Confronting Ethical Issues. When a psychologist is uncertain whether a particular situation or course of action would violate this Ethics Code, the psychologist ordinarily consults with other psychologists knowledgeable about ethical issues, with state or national psychology ethics committees, or with other appropriate authorities in order to choose a proper response.</p>	<p>8.02 Confronting Ethical Issues. No changes recommended.</p>
<p>8.04 Informal Resolution of Ethical Violations. When psychologists believe that there may have been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved.</p>	<p>8.04 Informal Resolution of Ethical Violations. No changes recommended.</p>
<p>8.05 Reporting Ethical Violations. If an apparent ethical violation is not appropriate for informal resolution under Standard 8.04 or is not resolved properly in that fashion, psychologists take further action appropriate to the situation, unless such action conflicts with confidentiality rights in ways that cannot be resolved. Such action might include referral to state or national committees on professional ethics or to state licensing boards.</p>	<p>8.05 Reporting Ethical Violations. No changes recommended.</p>
<p>8.06 Cooperating With Ethics Committees. Psychologists cooperate in ethics investigations, proceedings, and resulting requirements of the APA or any affiliated state psychological association to which they belong. In doing so, they make reasonable efforts to resolve any</p>	<p>8.06 Cooperating With Ethics Committees. No changes recommended.</p>

<p>issues as to confidentiality. Failure to cooperate is itself an ethics violation.</p>	
<p>8.07 Improper Complaints. Psychologists do not file or encourage the filing of ethics complaints that are frivolous and are intended to harm the respondent rather than to protect the public.</p>	<p>8.07 Improper Complaints. No changes recommended.</p>
	<p><u>New standard needed on protection for whistleblowers. Task force assistance with wording requested.</u></p>

See sexual harassment phrasing

Low

*Does section hold together?
Is title of section appropriate?*

Ethics Code Task Force
Reference Booklet Part 5

April 9—11, 1999

Comments 138, 153—170

Comment Review Forms

Standard Drafting Forms

Patrick J Harrington
PRIVACY REDACTION

166

FEB 0 9 1999

January 31, 1999

Ethics Code Revision APAGS Call,
APA Ethics Office
750 First St, N.E.
Washington DC 20002-4242

Dear Ethics Office:

Enclosed are two situations that ~~that~~ have occurred (and I have been involved in) that I believe are ethical dilemmas to be addressed in the revised ethical principles.

1) The head of the clinical psychology program (chairperson of clinical area) at a major university engages in a sexual relationship with a clinical area graduate student. This student does not work directly with the professor but may get evaluated by the professor (e.g., possible letters of recommendation, letter of readiness for internship) during their graduate studies. In addition, the student was actively involved in a relationship with another graduate student who was directly working for the professor.

I would like to see wording explicitly stating that it is not permissible for students and any professors in the same area of study (e.g., clinical department) to engage in sexual relations.

2) As a military psychologist I had the situation arise in which a Brigadier General wanted the name, rank, squadron, and brief description of the problem for all new mental health patients seen in our clinic, ostensibly to help assure that they were getting all of the "help" needed from various on - base agencies.

I would like to see explicit wording in the ethical principles regarding confidentiality for both civilian and active duty patients seen in military healthcare settings. While there are clearly examples of when confidentiality needs to be broken due to security or safety reasons that are special to the military, I would like to see specific wording stating that unless specific criteria are met psychologists should not disclose patient information. A potential problem lies in the different military laws that apply (e.g., commanding officer "orders" you to give information and if you don't obey you could have charges brought against you).

Sincerely,



Patrick Harrington

Ethics Code Task Force
Reference Book Part 9
June 22—24, 2001

Web Comments 1—424 with
Reviews (Tab 1)

Statistical Reports on Web
Submissions (Tab 2)

Hard Copy Comments 331—
437 (Tab 3)

Hard Copy Comment Reviews
(Tab 4)

Comment ID = 201 Gucker, Donald

1.01 (a) Misuse of Psychologists' Work

The term "misused" is not applicable to courtroom work since we all recognize that lawyers will try to distort our work - thus by this standard we should not participate in court related work.

ECTF Review: Nabil El-Ghoroury

Comment covered adequately by current draft of Code

Comment ID = 252 Sapadin, Linda

1.01 (a) Misuse of Psychologists' Work

My comments relate to what I find to be ironic in this too long, too complex code (not just this section). If psychologists should not do things when it appears likely that their skills or data will be misused or misrepresented by others, what about this code? It has been noted by attorneys that this code is used against psychologists on a routine basis in court actions. This is true because there is so much evasive language, i.e. "appropriate" and "reasonable". Certainly litigants will use these comments against psychologists. So what are you doing to take "corrective measures" to protect us?

ECTF Review: Brian Wilcox

Comment is inimical to spirit of ethics

Comment ID = 258 Gottlieb, Michael

1.01 (a) Misuse of Psychologists' Work

This section is vague. For example, is "appears likely" more, less or equally stringent in comparison to reasonably foreseeable? Also, what other corrective measures could be taken outside of a legal context?

ECTF Review: Samuel Knapp

Change would not likely be enforceable

Comment ID = 85 Maierle, John Paul

1.02 Conflict Between Ethics and Law, Regulations, or Other Governing Legal Authority

This subsection attempts to reconcile the potentially unreconcilable. In its present form, the text suggests that it is always ethical to obey a law if the law conflicts with the Code and no obvious resolution can be found. A more appropriate approach might be to indicate that, in such (hopefully rare) circumstances, the psychologist will be forced to make a choice and take the consequences. I would suggest the following text, which may (a) preserve the integrity of the Code; (b) stipulate that any violation of the Code is in fact a violation of the code; and (c) allow for some flexibility at the point at which sanctions might be imposed. Suggested text: If the conflict is unresolvable via such means, the psychologist **WOULD PROBABLY [may], BY ADHERING [adhere] to the...legal authority, VIOLATE ONE OR MORE PROVISIONS OF THE CODE. IN SUCH INSTANCES, THE PSYCHOLOGIST WOULD BE ADVISED TO PLEAD EXTENUATING CIRCUMSTANCES IF CHARGES OF ETHICAL CODE VIOLATIONS ARE BROUGHT.** I'm concerned that the text, in its present form, reads too much like the "I was only following orders" excuse that has been used to disastrous and inhuman effect in the past.

ECTF Review: Julia Ramos Grenier

Comment is inimical to spirit of ethics

Comment ID = 313 Laxton, Travis

1.02 Conflict Between Ethics and Law, Regulations, or Other Governing Legal Authority

I am glad to see an explicit and clear statement about what one's practice should be when the law and ethics are in conflict.

ECTF Review: Jessica Daniel

Comment covered adequately by current draft of Code

Comment ID = 342 Hawken, Leanne

1.02 Conflict Between Ethics and Law, Regulations, or Other Governing Legal Authority

If the conflict is unresolvable via such means, the psychologist may adhere to the requirements of the law, regulations, or other governing legal authority. This statement concerns me- I understand that as law abiding citizens, we need to follow regulations put forth by state and other governing bodies. However, also feel that individuals that make laws regarding how psychologists should practice do not always have a clear understanding of what is actually going on in the field. A case in point is the recent legislation (IDEA) mandating functional behavioral assessment for all special education students at risk for expulsion for more than ten days. As a practitioner- I know that functional assessment is not always an appropriate tool for students in these situations.

ECTF Review: Thomas Oakland

Comment is not clear

Comment ID = 371 Kinney, Ed.D., Peter

1.02 Conflict Between Ethics and Law, Regulations, or Other Governing Legal Authority

HIPAA supercedes state laws, so in the event of apparent conflict. psychologists should be guided by the federal standard.

ECTF Review: Julia Ramos Grenier

Comment is not clear

Comment ID = 375 Paez, Karen

1.02 Conflict Between Ethics and Law, Regulations, or Other Governing Legal Authority

The addition that specifies protocol for dealing with conflict between law and ethics was of critical importance. Clarifying this possibly frequent quandry helps in creating a more applicable set of ethical codes.

ECTF Review: Samuel Knapp

Comment does not require a standard

Comment ID = 388 Katz, Maya

1.02 Conflict Between Ethics and Law, Regulations, or Other Governing Legal Authority

Please find some suggestions/comments on the proposed APA ethics: 1) Could you provide more clarification on how to format and present mental health issues or information on the internet, as well as how to maintain, disseminate, and dispose of confidential records if communication between psychologist-client is done over the internet, to what extent should communication be blocked or password-protected, what should never be sent over the internet, etc. 2) The section below is still unclear about the steps to follow when a psychologist is placed in conflict with the Ethical Code and applicable laws. In the process of making decisions regarding their professional behavior, psychologists must consider this Ethics Code in addition to applicable laws and psychology board regulations. If the Ethics Code establishes a higher standard of conduct than is required by law, psychologists must meet the higher ethical standard. If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict in a responsible manner. If the conflict is unresolvable via such means, the psychologist may adhere to the requirements of the law, regulations, or other governing authority. If neither law nor the Ethics Code resolves an issue, psychologists should consider other professional materials and the dictates of their own conscience, as well as seek consultation with others within the field. It seems that this statement addresses the issue but does not specify what resolving the conflict in a responsible manner means. Clarification on this would be helpful. In addition, when you say that, "If the conflict is unresolvable via such means, the psychologist may adhere to the requirements of the law, regulations, or other governing authority. If neither law nor the Ethics Code resolves an issue," it is not clear to me why a psychologist is at first directed to follow law over ethics if the conflict cannot be resolved in a reasonable manner (which, as discussed above, is unclear itself), and then directed to other sources if neither law nor ethics can resolve an issue. How does adhering to the requirements of the law, regulations, or other governing authority resolve the issue in a reasonable manner? In sum, the wording in this passage in

minoritized peoples, including LGBTQ. Psychologists should be required to educate themselves about theories of racism, sexism, homophobia, classism, and ablism, so that they do not continue to behave in ways which betray both the people they claim to be able to help, and their LGBTQ colleagues in psychology.

ECTF Review: Thomas Oakland

Comment covered adequately by current draft of Code

Comment ID = 80 Massey, Ronald

2.01 Boundaries of Competence

Good job!

ECTF Review: Dennis Grill

Comment covered adequately by current draft of Code

Comment ID = 254 Sapadin, Linda

2.01 (a) Boundaries of Competence

Did Einstein or Freud get "proper" training from teachers, or was it assumed that once they were well trained, they could come up with new ideas, theories, techniques, competencies all on their own? We are already highly trained professionals. Why do we have to document every new area we deal with? Couldn't we read books and papers on our own and talk to peers and learn things from our own clinical practice that make it okay for us to "know" a new area? Does every new area we deal with require formal training? Isn't the cutting edge of any field taking our present knowledge and applying it in a creative way? Let's not make us factory workers! We are highly trained professionals that can use our mind and expertise without documenting every new thing we do!

ECTF Review: Julia Ramos Grenier

Comment is inimical to spirit of ethics

Comment ID = 63 LoPresti, Rona

2.01 (b) Boundaries of Competence

Research hasn't shown that "training, experience, consultation, or supervision " have any effect on competency with respect to working with many of these groups, has it? Shouldn't our Ethics Code be based on science and not on "ideals"? My understanding of the literature on competency in working with "minorities" is that proximate variables such as personal experience (such as friendships and other informal interactions) predict competence whereas distal variables such as education and training do not.

ECTF Review: Samuel Knapp

Comment covered adequately by current draft of Code

Comment ID = 74 Seligman, Martin

2.01 (b) Boundaries of Competence

This statute confounds the political leanings of many of the members, with what is known scientifically. In fact (Having just reviewed this literature for the last edition of my Abnormal textbook) there is very little in the way of hard facts to guide different approaches to patients depending on ethnicity, race, and socioeconomic status. There is quite a lot on gender and sexual orientation, however. So the word "significantly" is a vast overstatement, and the inclusion of race, socioeconomic status, and ethnicity, reflects what many of our members might wish for politically, but does not reflect the science. GET THE POLITICS OUT OF THE ETHICS CODE.

ECTF Review: Julia Ramos Grenier

Comment is inimical to spirit of ethics

Comment ID = 74 Seligman, Martin

2.01 (b) Boundaries of Competence

This statute confounds the political leanings of many of the members, with what is known scientifically.

Mumford, Geoff

From: Mumford, Geoffrey
Sent: Saturday, June 25, 2005 11:30 AM
To: Behnke, Stephen
Subject: With input from Mel and Russ



Handwritten text in a dark box, possibly a signature or note.

Psychologists have the obligation to utilize psychological knowledge derived from recognized authoritative sources (e.g. research, experience to inform professional judgement) in the furtherance of their scientific and professional activities. (e.g. efficacy of using positive reinforcement vs. negative reinforcement).

Psychologists support research to evaluate the efficacy of methods for gathering accurate and reliable information. Such research should be designed to minimize the risk/benefit ratio and emotional/physical distress to research participants consistent with existing standards of human subjects research protections and the APA ethics code.

Because disclosing the results of such research in certain contexts could compromise the development of enhanced sources and methods, it may not always serve the interests of national security to explain deception used in the research design or to include the debriefing standards contained in 8.07 and 8.08.

From: **Bennett Johnson, Suzanne** <sbjohnson@apa.org>
Date: Wed, Oct 31, 2012 at 3:47 PM
Subject: RE: Follow-up to Open Letter from Trudy Bond and Steven Reisner
To: **Trudy Bond**, **Steven Reisner**

Dear Drs. Bond and Reisner:

I am in receipt of your October 23rd communication, as well as your September 18th correspondence. Both letters have been shared with members of the APA Board of Directors, the Ethics Office and senior staff. I would like to take this opportunity to respond to the concerns that you raised about the workings of the APA Ethics Office.

APA's ethics process is designed to protect the welfare of the public, while safeguarding the privacy interests of the individual filing an ethics complaint, as well as those of the psychologist against whom a complaint is made. The rules and procedures that govern the APA ethics process (<http://www.apa.org/ethics/code/committee.aspx>) require that the process moves forward in a confidential manner. This typically includes not confirming that a complaint has been filed or discussing its specifics. For this reason, it is not always possible to correct inaccuracies in the public domain related to the Committee's work, and I am therefore unable to directly address much of the content of your September letter. What I can report is that after a review of the allegations, it was determined that no action against Dr. Michael Gelles or Dr. Larry James was warranted. These determinations were made in 2002 and 2007, respectively.

As we have communicated in past correspondence, because the burden of proving the allegations in a complainant case rests on the Ethics Committee, the Committee focuses on primary (such as findings from a legal proceeding) rather than secondary sources (such as media reports). Licensing boards, courts, and legislative committees generally have the ability to subpoena witnesses and compel testimony, which APA does not. For this reason, when the behavior of a psychologist against whom a complaint has been made is also the subject of a legal proceeding, the ethics matter may be placed on hold pending the outcome of the legal proceeding. It is to the advantage of all parties involved to wait until APA obtains the best evidence available to make its determination. Once the relevant legal proceedings are complete, APA moves forward to resolve the complaint. For such reasons, the ethics process can be lengthy.

You should also be aware that the Ethics Committee has been considering language to extend the statute of limitations as recommended by the APA Presidential Advisory Group on the Implementation of the Petition Resolution. When a final decision is made on this possible change in the statute of limitations policy, APA will be pleased to share that information with you and with the general membership. Please note, however, that the committee's current statute of

limitations policies played no role in the committee's findings concerning Drs. Gelles or James.

Thank you again for taking the time to communicate your concerns. I hope this further information is helpful to you.

Sincerely,

Suzanne Bennett Johnson
2012 APA President

The following are working comments that are subject to future reevaluation by the evaluators and discussion by the ECTE. The left column is the original Draft 3 standard with grammatical suggestions indicated in bold type. The middle column are revisions for ECTF consideration based upon suggestions received from or questions raised by commentors on Draft 3. The right column highlights relevant comments or CBF's questions and concerns.

1. RESOLVING ETHICAL ISSUES		
<p>1.01 Misuse of Psychologists' Influence. Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence.</p>	<p><i>interest</i> 1.01 Avoiding Conflicts of Interest <i>guard against</i> (a) Psychologists do not engage in activities in which their professional obligations are in conflict with personal, financial, social, organizational, or political factors that might reasonably be expected to lead to misuse of their influence. <i>disclosure -</i></p>	<p>Comment # 299 (Div 42): Is this aspirational?. I am concerned that we can not operationalize "alert" and "guard." I would suggest this goes under Beneficence & Nonmaleficence in aspirational principle section. Can we create a genuine conflict of interest standard?</p>
	<p>(b) If a psychologist becomes aware that a potentially harmful conflict of interest has arisen, the psychologist attempts to resolve it.</p>	<p><i>makes a reasonable effort</i></p>
<p>1.02 Misuse of Psychologists' Work (a) Psychologists do not participate in activities in which it appears likely that their skills or data will be misused or misrepresented by others, unless corrective mechanisms are available. (See also Standard 11.07, Truthfulness and Candor.)</p>	<p>1.02 Misuse of Psychologists' Work. (a) Psychologists do not participate in activities in which it appears likely that their skills or data will be misused or misrepresented by others, unless corrective mechanisms are available <u>such as those provided in legal proceedings.</u> (See also Standard 11.07, Truthfulness and Candor.)</p>	<p>Comment # 299 (Div 42) noted that it is not clear what corrective mechanisms are. In deliberations last time the ECTF did note that that corrective mechanisms applied to legal proceedings. Are there any other specific venues that we could mention to be more directive to psychologists? <i>See Kovacs version</i></p>
<p>(b) If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation.</p>	<p>No change.</p>	<p><i>Should term "materially" be inserted?</i></p>
<p>1.03 Relationship of Ethics and Law. If psychologists' ethical responsibilities conflict with law, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict in a responsible manner.</p>	<p>No change. <i>law, regulations, or other legal authority</i></p>	<p>Div. 18</p>
<p>1.04 Conflicts Between Ethics and Organizational Demands. If the demands of an organization with which psychologists are affiliated conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and to the extent feasible, seek to resolve the conflict in a way that permits the fullest adherence to the Ethics Code.</p>	<p>No change.</p>	<p><i>organization or work setting</i></p>
<p>1.05 Informal Resolution of Ethical Violations.</p>	<p>No change.</p>	

MPA DTT2

<p>When psychologists believe that there has been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual if an informal resolution <u>appears</u> appropriate and the intervention does not violate any <u>confidentiality</u> rights that may be involved.</p>		
<p>1.06 Reporting Ethical Violations. If an apparent ethical violation is not appropriate for informal resolution under Standard 1.05 or is not resolved properly in that fashion, psychologists take <i>shall</i> further action appropriate to the situation, unless such action conflicts with confidentiality rights in ways that cannot be resolved. Such action might include referral to state or national committees on professional ethics, to state licensing boards, or to the appropriate institutional authorities.</p>	<p>No change.</p>	
<p>1.07 Cooperating With Ethics Committees. Psychologists cooperate in ethics investigations, proceedings, and resulting requirements of the APA or any affiliated state psychological association to which they belong. In doing so, they make reasonable efforts to resolve any issues as to confidentiality. Failure to cooperate is itself an ethics violation.</p>	<p>Remove</p>	<p><i>Comment # 299 (Div 42): Is this constitutional? Is this an ethical issue or should it be in the Association's By-Laws rather than in the Ethics Code or Ethics Committee Rules & Procedures. Is it already in the bylaws? Probably not.</i></p>
<p>1.08 Improper Complaints. Psychologists do not file or encourage the filing of ethics complaints that are frivolous and are intended to harm the respondent rather than address an ethical violation.</p>	<p>No change.</p>	
<p>1.09 Unfair Discrimination Against Complainants and Respondents Psychologists do not deny persons employment, advancement, admissions to academic or other programs, tenure, or promotion, based solely upon their having made, or their being the subject of an ethics complaint. This does not preclude taking action based upon the outcome of such proceedings or consideration of other appropriate information.</p>	<p><i>shall</i></p>	<p><i>Is term "outcome" clear? Should we add "adverse" outcome? SJ</i></p>

April 2007

Confidential Working Draft, Ethics Code Revision, October 2001

The following are working comments that are subject to future reevaluation by the evaluators and discussion by the ECTF. The left column is Draft 6, October 2001. The middle column provides revisions for ECTF consideration based upon suggestions received from or questions raised by commentors on Draft 6. The right column highlights relevant comments or Celia's questions and concerns.

Draft 6, October 21, 2001	CBF Proposal with Redline	CBF Rationale
ETHICAL PRINCIPLES OF PSYCHOLOGISTS AND CODE OF CONDUCT		
TABLE OF CONTENTS [To be added in final.]		
INTRODUCTION AND APPLICABILITY		
<p>The American Psychological Association's (APA's) Ethical Principles of Psychologists and Code of Conduct (hereinafter referred to as the Ethics Code) consists of an Introduction, a Preamble, five General Principles (A – E), and specific Ethical Standards. The Introduction discusses the intent, organization, procedural considerations, and scope of application of the Ethics Code. The Preamble and General Principles are aspirational goals to guide psychologists toward the highest ideals of psychology. Although the Preamble and General Principles are not themselves enforceable rules, they should be considered by psychologists in arriving at an ethical course of action. The Ethical Standards set forth enforceable rules for conduct as psychologists. Most of the Ethical Standards are written broadly, in order to apply to psychologists in varied roles, although the application of an Ethical Standard may vary depending on the context. The Ethical Standards are not exhaustive. The fact that a given conduct is not specifically addressed by the <u>Ethics Code</u> does not mean that it is necessarily either ethical or unethical.</p>	<p>The fact that a given conduct is not specifically addressed by <u>an ethical standard</u> the Ethics Code does not mean that it is necessarily either ethical or unethical.</p>	<p>Div 42 raised question of whether we clearly distinguish between the principles and standards in the introductory text. I believe for the most part we do. However, I have underlined places where we use the term "CODE" when I think we may need to clarify if we are referring to the entire Code or to just the standards.</p> <p>Do we mean standards or Code here?</p>
This Ethics Code applies only to psychologists' activities that are part of their scientific, educational,		

<i>Draft 6, October 21, 2001</i>	<i>CBF Proposal with Redline</i>	<i>CBF Rationale</i>
<p>or professional roles as psychologists. Areas covered include but are not limited to the clinical, counseling, and school practice of psychology; research; teaching; supervision of trainees; public service; policy development; social intervention; development of assessment instruments; conducting assessments; educational counseling; organizational consulting; forensic activities; program design and evaluation; and administration. This Ethics Code applies to these activities across a variety of contexts, such as in person, postal, telephone, internet, and other electronic transmissions. These activities shall be distinguished from the purely private conduct of psychologists, which is not within the purview of the Ethics Code.</p>		
<p>Membership in the APA commits members and student affiliates to comply with the APA Ethics Code and to the rules and procedures used to enforce it. Lack of awareness or misunderstanding of an ethical standard is not itself a defense to a charge of unethical conduct.</p>		<p>Do we mean compliance with principles and standards or just standards?</p>
<p>The procedures for filing, investigating, and resolving complaints of unethical conduct are described in the current Rules and Procedures of the APA Ethics Committee. APA may impose sanctions on its members for violations of the Ethics Code, including termination of APA membership, and may notify other bodies and individuals of its actions. Actions that violate the Ethics Code may also lead to the imposition of sanctions on psychologists or students whether or not they are APA members by bodies other than APA, including state psychological associations, other professional groups, psychology boards, other state or federal agencies, and payors for health services. In addition, APA may take action against a member after his or her conviction of a felony, expulsion or suspension from an affiliated state psychological association, or suspension or loss of licensure.</p>		<p>Since APA cannot impose sanctions for violations of the Principles, is using the term "Code" here correct? Do we mean Code or standards here?</p> <p>Stan: If the "Code" defines a violation as transgression of a Standard, then violation of the Code is violation of a standard and violation of a standard IS violation of the Code.</p> <p>As a matter of the style of implementing the Code, letters have always referred to violation of specific elements of the document and to the version (e.g. violation of Standard 1.14 of the 1992 Ethics Code).</p> <p>The substantive concern in this section by Div 42 should be whether anything APA says (in this paragraph) makes it any more or less likely that another group can make more than the standards a basis for sanction.</p>

<i>Draft 6, October 21, 2001</i>	<i>CBF Proposal with Redline</i>	<i>CBF Rationale</i>
<p>endorsed by scientific and professional psychological organizations; they may also consider the dictates of their own conscience, as well as consult with others within the field.</p>	<p>unresolvableirresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing authority in keeping with basic principles of human rights. If neither law nor this Ethics Code resolves an issue, psychologists may consider other materials and guidelines that have been adopted or endorsed by scientific and professional psychological organizations; they may also consider the dictates of their own conscience, as well as consult with others within the field.</p>	<p>My spell check said unresolvable was not a word?</p>
<p>The ECTF has not completed revision of the section immediately below on History and Effective date. The section of these 34 lines (number of section lines as published in the APA Monitor) will be revised and updated upon presentation of a final draft to Council for approval.] History and effective date. This version of the APA Ethics Code was adopted by the American Psychological Association's Council of Representatives during its meeting, _____, and is effective beginning _____. Inquiries concerning the substance or interpretation of the APA Ethics Code should be addressed to the Director, Office of Ethics, American Psychological Association, 750 First Street, NE, Washington, DC 20002-4242. This Ethics Code will be used to adjudicate complaints brought concerning alleged conduct occurring on or after the effective date. Complaints regarding conduct occurring prior to the effective date will be adjudicated on the basis of the version of the Ethics Code that was in effect at the time the conduct occurred, except that no provisions repealed in June 1989, will be enforced even if an earlier version contains the provision. <u>The Ethics Code will undergo continuing review and study for future revisions; comments on the Ethics Code may be sent to the above address.</u> The APA has previously published its Ethical Standards as follows: American Psychological</p>	<p><u>The standards in t</u>t<u>his Ethics Code will be used to adjudicate complaints brought concerning alleged conduct occurring on or after the effective date.</u></p>	<p>Is Code appropriate here? The Principles serve as a framework for the standards, but is it correct to say that the principles will be used to adjudicate complaints?</p> <p>Do we know if it is APA policy to have a continuing review and study for future revisions? The continuing review was I believe a reaction to the 22 outstanding amendments from the 1992 Code. I do not think there is a continuing policy (either does Stan). In fact, the ECTF recommended to and the EC agreed that there would be no more review of comments calling for "urgent" revision. Without any policy I think this sentence should be deleted?</p>

Draft 6, October 21, 2001	CBF Proposal with Redline	CBF Rationale
<p>Psychologists are committed to increasing scientific and professional knowledge of behavior and people's understanding of themselves and others and to the use of such knowledge to improve the condition of individuals, organizations, and society. Psychologists respect and protect civil and human rights and the central importance of freedom of inquiry and expression in research, teaching, and publication. They also strive to help the public in developing informed judgments and choices concerning human behavior. In doing so, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist, and expert witness. This Ethics Code provides a common set of values upon which psychologists build their professional and scientific work.</p>	<p>Psychologists are committed to increasing scientific and professional knowledge of behavior and people's understanding of themselves and others and to the use of such knowledge to improve the condition of individuals, organizations, and society. Psychologists respect and protect civil and human rights and the central importance of freedom of inquiry and expression in research, teaching, and publication. They also strive to help the public in developing informed judgments and choices concerning human behavior. In doing so, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist, and expert witness. This Ethics Code provides a common set of values <u>and decision rules</u> upon which psychologists build their professional and scientific work.</p>	<p>Is "also" necessary?</p> <p>Does the term "values" sufficiently include the standards?</p>
<p>This Ethics Code is intended to provide specific standards to cover most situations encountered by psychologists. It has as its goals the welfare and protection of the individuals and groups with whom psychologists work and the education of members, students, and the public regarding ethical standards of the discipline.</p>		
<p>The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment to a lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues; and to consult with others concerning ethical problems. Psychologists supplement, but do not violate, the Ethics Code's values and rules on the basis of guidance drawn from personal values, culture, and experience.</p>	<p>The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment to <u>and</u> lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues; and to consult with others concerning ethical problems. <u>Psychologists supplement, but do not violate, the Ethics Code's values and rules on the basis of guidance drawn from personal values, culture, and experience.</u></p>	<p>Clarity?</p> <p>Is this sentence necessary? Informative? What does "supplement" mean? If we maintain sentence, does "culture" add or detract? E.g., we do not mean cultural relativism, personal values are shaped by culture.</p>
<p>GENERAL PRINCIPLES</p>		
<p>This section consists of General Principles. General Principles, as opposed to Ethical Standards, are aspirational in nature. Their intent is to guide and inspire psychologists toward the very highest ethical</p>		

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<p>ideals of the profession. General Principles, in contrast to Ethical Standards, do not represent obligations and should not form the basis for imposing sanctions. Relying upon General Principles for either of these reasons distorts both their meaning and purpose.</p>		
<p>PRINCIPLE A: BENEFICENCE AND NON-MALEFICENCE Psychologists strive to benefit those with whom they work, and take care to do no harm. In their professional actions, psychologists seek to safeguard the welfare and rights of those with whom they interact professionally and other affected persons, and the welfare of animal subjects of research. When conflicts occur among psychologists' obligations or concerns, they attempt to resolve these conflicts in a responsible fashion that avoids or minimizes harm. Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence. Psychologists strive to be sensitive to the possible negative consequences of personal impairment that might harm those with whom they work.</p>	<p>PRINCIPLE A: BENEFICENCE AND NON-MALEFECIENCE Psychologists strive to benefit those with whom they work, and take care to do no harm. In their professional actions, psychologists seek to safeguard the welfare and rights of those with whom they interact professionally and other affected persons, and the welfare of animal subjects of research. When conflicts occur among psychologists' obligations or concerns, they attempt to resolve these conflicts in a responsible fashion that avoids or minimizes harm. Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence. Psychologists strive to be sensitive to the possible <u>effect of their own physical and mental health on the their ability to help</u> negative consequences of personal impairment that might harm those with whom they work.</p>	<p>Comment #479 Council rep for Penn psychologists was concerned about the negative wording of the last sentence. He suggested "Psychologists strive to be sensitive to the necessity to take care of their personal needs in a way that will optimize their ability to help others." Below I try to provide language that is positive but that does not intrude on the "purely private conduct of psychologists" that the Introduction to the Code says the Code does not address.</p> <p>Another less wordy option: Psychologists strive to care for their personal needs to the extent that their fitness affects their work.</p>
<p>PRINCIPLE B: FIDELITY AND RESPONSIBILITY Psychologists establish relationships of trust with those with whom they work. In the course of their work, psychologists are aware of their professional and scientific responsibilities to society and to the specific communities in which they work. Psychologists uphold professional standards of conduct, clarify their professional roles and obligations, accept appropriate responsibility for their behavior, and seek to manage conflicts of interest that could lead to exploitation or harm. Psychologists consult with, refer to, or cooperate with other professionals and institutions to the extent needed to serve the best interests of those</p>	<p>PRINCIPLE B: FIDELITY AND RESPONSIBILITY Psychologists establish relationships of trust with those with whom they work. In the course of their work, psychologists are aware of their professional and scientific responsibilities to society and to the specific communities in which they work. Psychologists uphold professional standards of conduct, clarify their professional roles and obligations, accept appropriate responsibility for their behavior, and seek to manage conflicts of interest that could lead to exploitation or harm. Psychologists consult with, refer to, or cooperate with other professionals and institutions to the extent needed to serve the best interests of those</p>	<p>#605 & 468 RECOMMEND PRO BONO</p>

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with whom they work. Psychologists are concerned about the ethical compliance of their colleagues' scientific and professional conduct.	with whom they work. Psychologists They are concerned about the ethical compliance of their colleagues' scientific and professional conduct. <u>Psychologists strive to contribute a portion of their professional time for little or no compensation or personal advantage.</u>	
<p>PRINCIPLE C: INTEGRITY Psychologists seek to promote accuracy, honesty, and truthfulness in the science, teaching, and practice of psychology. In these activities psychologists do not steal, cheat, or engage in fraud, subterfuge, or intentional misrepresentation of fact.. Psychologists strive to keep their promises and to avoid unwise or unclear commitments. In situations in which deception may be ethically justifiable to maximize benefits and minimize harm, psychologists have a serious obligation to consider the need for, the possible consequences of, and their responsibility to correct any resulting mistrust or other harmful effects that arise from the use of such techniques.</p>		
<p>PRINCIPLE D: JUSTICE Psychologists recognize that fairness and justice entitle all persons to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists. Psychologists exercise reasonable judgment and take precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust practices.</p>		
<p>PRINCIPLE E: RESPECT FOR PEOPLE'S RIGHTS AND DIGNITY Psychologists respect the dignity and worth of all people, and t the rights of individuals to privacy, confidentiality, self-determination, and autonomy. Psychologists are aware that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision-making. Psychologists</p>	<p>PRINCIPLE E: RESPECT FOR PEOPLE'S RIGHTS AND DIGNITY Psychologists respect the dignity and worth of all people, and t the rights of individuals to privacy, confidentiality, <u>and</u> self-determination, and <u>autonomy</u>. Psychologists are aware that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision-making.</p>	SK Self determination is redundant to autonomy

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<p>Regulations, or Other Governing Legal Authority. If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict. If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing legal authority.</p>	<p>Regulations, or Other Governing Legal Authority. If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict. If the conflict is unresolvable <u>irresolvable</u> via such means, psychologists may adhere to the requirements of the law, regulations, or other governing legal authority.</p>	<p>"regulations?"</p> <p>My spell checker said unresolvable is not a word</p> <p>COLI recommends <i><u>"remove the last sentence because the words "may adhere" seem to imply that psychologists may disregard the law."</u></i></p> <p><i>I think that the last sentence is informative and helpful to psychologists.</i></p>
<p>1.03 Conflicts Between Ethics and Organizational Demands. If the demands of an organization with which psychologists are affiliated or for whom they are working conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and to the extent feasible, resolve the conflict in a way that permits adherence to the Ethics Code.</p>		<p>COLI rationale <i>Standard 1.03 was amended to provide psychologists with greater flexibility when resolving conflicts between the Ethics Code and their work-related activities. For example, such a situation may apply in the context of a psychologist employed with a private adoption organization that does not place children in families of different ethnic origin or with same sex parents. If the adoption agency is private and not government funded, it may be difficult for the psychologist to comply both with the rules of the agency and "fully adhere" to the Ethics Code (i.e., Ethical Standard 3.01: "Unfair Discrimination").</i></p> <p>1.03 Conflicts Between Ethics and Organizational Demands. If the demands of an organization with which psychologists are affiliated or for whom they are working conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and [to the extent feasible,] <u>resolve the conflict in a [way that permits the fullest adherence to the Ethics Code] responsible manner.</u></p> <p>I think the COLI recommendation makes the standard meaningless, since "responsible manner" can mean anything.</p>

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	substantially harm a person or organization and is not appropriate for or resolved by informal resolution under Standard 1.04 , psychologists take reasonable steps to refer the situation to state or national committees on professional ethics, to state licensing boards, or to other appropriate institutional authorities if the intervention does not violate confidentiality or other legal rights or obligations or when psychologists have been retained to review the work of another psychologist whose professional conduct is in question.	
<p>1.06 Cooperating With Ethics Committees. Psychologists cooperate in ethics investigations, proceedings, and resulting requirements of the APA or any affiliated state psychological association to which they belong. In doing so, they make reasonable efforts to resolve any issues as to confidentiality. Failure to cooperate is itself an ethics violation.</p>	<p>1.06 Cooperating With Ethics Committees. Psychologists cooperate in ethics investigations, proceedings, and resulting requirements of the APA or any affiliated state psychological association to which they belong. In doing so, they <u>do not violate</u> make reasonable efforts to resolve any issues as to confidentiality. Failure to cooperate is itself an ethics violation.</p>	<p>Div 42 wants to add "Asserting a right to a postponement of ethics committee action until any legal proceedings are resolved shall not in itself be considered a failure to cooperate."</p> <p>By including "reasonable efforts" were we inadvertently or intentionally condoning violation of confidentiality</p> <p>The EC has found this standard in the 1992 Code useful. According to EC a psychologist's reasonable request to postpone resolution of an ethics complaint may be taken into account and is not ruled out by the last sentence. With the Div 42 recommendation, a psychologist could ask for an indefinite postponement depending on the number and extent of legal activity and would severely tie the hands of the EC.</p>
<p>1.07 Improper Complaints. Psychologists do not file or encourage the filing of ethics complaints that are made with reckless disregard for or willful ignorance of facts that would disprove the allegation.</p>		
<p>1.08 Unfair Discrimination Against Complainants and Respondents. Psychologists do not deny persons employment, advancement, admissions to academic or other programs, tenure, or promotion, based solely upon their having made, or their being the subject of an ethics complaint. This does not preclude taking</p>		<p>Is the term "Unfair" necessary in the title?, since according to the text any discrimination prior to a finding or other appropriate information is discriminatory?</p>

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action based upon the outcome of such proceedings or consideration of other appropriate information.		
2. COMPETENCE		
2.01 Boundaries of Competence. (a) Psychologists provide services, teach, and conduct research with populations and in areas only within the boundaries of their competence, based on their education, training, supervised experience, consultation, study, or professional experience.		
(b) Where scientific or professional knowledge in the discipline of psychology establishes that an understanding of age, gender, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status is essential for effective implementation of services or research, psychologists have or obtain the training, experience, consultation, or supervision necessary to ensure the competence of their services, or they make appropriate referrals, except as provided in Standard 2.02, Providing Services in Extraordinary Circumstances.	(b) Where scientific or professional knowledge in the discipline of psychology establishes that an understanding of <u>factors associated with</u> age, gender, <u>gender identity and expression</u> , race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status is essential for effective implementation of <u>their services</u> or research, psychologists have or obtain the training, experience, consultation, or supervision necessary to ensure the competence of their services, or they make appropriate referrals, except as provided in Standard 2.02, Providing Services in Extraordinary Circumstances.	Div 42 CLGBC Is every one of these necessary? To refer to the activities of the particular psychologist
(c) Psychologists planning to provide services, teach, or conduct research involving populations, areas, techniques, or technologies new to them undertake relevant education, training, supervised experience, consultation, or study.		
(d) In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists protect clients/patients, students, supervisees, research participants, organizational clients, and others from harm.		Do we need this standard? We decided to eliminate the wording from the 92 Code because we decided that if the area is emerging psychologists could not “nevertheless take reasonable steps to ensure the competence of their work.” We already have a standard about harm and standard 2.04 requires that any activities must be based in scientific or professional knowledge of the discipline. What is and is not an “emerging area?” What would be lost if this standard was eliminated? How might the way we have now changed the wording of this standard support the work of charlatans?
(e) When assuming forensic roles, psychologists		

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are or become reasonably familiar with the judicial or administrative rules governing their roles.		
<p>2.02 Providing Services in Extraordinary Circumstances.</p> <p>(a) In emergencies, when psychologists are asked to provide services to individuals for whom appropriate mental health services are not available and for which psychologists have not obtained the competence necessary, psychologists may provide such services in order to ensure that services are not denied.</p>	<p>2.02 Providing Services in Extraordinary Circumstances.</p> <p>(a) In emergencies, when psychologists are asked to provide services to individuals for whom <u>other appropriate</u> mental health services are not available and for which psychologists have not obtained the <u>competence necessary training</u>, psychologists may provide such services in order to ensure that services are not denied.</p> <p><i>Division 42 also had comments regarding (b). I would like to suggest that the ECTF consider the following wording for a standard 2.02 that would cover both (a) and (b)</i></p> <p><u>In emergencies or other situations in which psychologists are asked to provide services to individuals for whom other mental health services are not available and for which psychologists have not obtained the necessary training, psychologists may provide such services if they make a reasonable effort to obtain the competence required by consulting relevant research, securing additional training or consultation, or engaging in further training or study.</u></p>	<p><u>Div 42. I have used some of the Division 42 language. Div 42 also recommended "May use their best judgment and provide such services until a consultation can be obtained"</u> The ECTF has previously rejected language referring to the psychologist's best judgment.</p> <p>#621 recommended giving examples, e.g., underserved populations and locations, however I do not think this is what we meant in the final version of this standard, since even well-served populations might need greater assistance in emergencies and we did not want to suggest that anyone could provide services to underserved ethnic minority populations.</p> <p>Div 14 this standard is too vague</p> <p>Also note Div 14's concern about limiting this to mental health services.</p>
(b) When psychologists are asked to provide services to individuals for whom appropriate mental health services are not available and for which psychologists have not obtained the competence necessary, psychologists with closely related prior training or experience may provide such services in order to ensure that services are not denied if psychologists make a reasonable effort to obtain the competence required by using relevant research, training, consultation, or study.		<p>Is (b) necessary if we make changes above?</p> <p>Div 14, why are we limiting this to mental health services, it is also true for coaching and assessment</p>
2.03 Maintaining Expertise. Psychologists undertake ongoing efforts to maintain competence in the skills they use.	2.03 Maintaining Expertise. Psychologists undertake ongoing efforts to maintain competence in the <u>knowledge and skills</u> they use.	<u>Div 42</u>
2.04 Bases for Scientific and Professional		

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	<p><u>In oral or written communications regarding their work-related activities, psychologists do not knowingly make false statements or fail to disclose material information regarding the bases for their activities, findings, or recommendations, except under circumstances where the welfare of a client or the safety of the psychologist or others would justify doing so, or except when the false statements are provided in research covered by Standard 8.07 Deception in Research..</u></p> <p><i>If we include this standard all the numbering in this section would have to be changed. We could place it last, although it seems to belong at the beginning??</i></p>	<p>unambiguous standard promoting honesty.” They recommended the wording below. I thought their examples were too specific and under-inclusive and thus changed some of the wording. In addition, I don’t think that in all circumstances “remedying” the deception would be appropriate. Does “the welfare of the client” capture paradoxical therapy? <i>Here is the EC’s wording:</i> <u>In oral and written communications regarding their work-related activities, psychologists do not knowingly make false statements or fail to disclose material information regarding the bases for their activities, findings or recommendations.</u> <u>Psychologists who do so bear the burden of demonstrating unusual circumstances that would justify so doing, such as: (a) the need to withhold information to manage an emergency situation; (b) an overriding legal duty or other imperative; or (c) the scientific merit of a research project.</u> <u>Psychologists bear the burden of demonstrating that they have taken appropriate steps to remedy the deception at the first practicable opportunity to do so.</u></p>
<p>3.01 Unfair Discrimination. In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.</p>	<p>3.01 Unfair Discrimination. In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, <u>gender identity and expression</u>, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.</p>	<p>CLGBC</p>
<p>3.02 Sexual Harassment. Psychologists do not engage in sexual harassment. Sexual harassment is sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with the psychologist’s activities or roles as a psychologist, and that either (1) is unwelcome, is offensive, or creates a hostile workplace or educational environment, and the psychologist knows or is told this or (2) is sufficiently severe or intense to be</p>		

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<p>abusive to a reasonable person in the context. Sexual harassment can consist of a single intense or severe act or of multiple persistent or pervasive acts. (See also Standard 1.08, Unfair Discrimination Against Complainants and Respondents.)</p>		
<p>3.03 Other Harassment. Psychologists do not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact in their work based on factors such as those persons' age, gender, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status.</p>	<p>3.03 Other Harassment. Psychologists do not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact in their work based on factors such as those persons' age, gender, <u>gender identity and expression</u>, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status.</p>	<p>CLGBC SK eliminate "interact in their" EC noted that cases in which the psychologist's behavior had been harassing or demeaning regarding factors other than those listed could not be pursued under this standard. The EC recommended adding the phrase "including but not limited to..." The ECTF discussed this issue at previous meetings. It was of concern that in some circumstances, especially in teaching settings and perhaps some assessment and practice settings, what feels harassing or demeaning to a student or client may in fact be an honest statement of shortcomings. Thus a wide-open standard would place an undue burden on psychologists.</p>
<p>3.04 Avoiding Harm. Psychologists take reasonable steps to avoid harming their clients/patients, students, supervisees, research participants, organizational clients, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable.</p>		
<p>3.05 Multiple Relationships. (a) A multiple relationship occurs when a psychologist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom they have the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person. A psychologist refrains from entering into a multiple relationship if the multiple relationship could</p>		<p>Div 42 is concerned that the term "reasonably" is not clear enough to protect the psychologist. I think in this case "reasonably" protects the psychologist and raises the threshold for violation.</p>

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<p>reasonably be expected to impair the psychologist's objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.</p> <p>Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.</p>		
<p>(b) If a psychologist finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the psychologist attempts to resolve it with due regard for the best interests of the affected person and maximal compliance with the Ethics Code.</p>	<p>(b) If a psychologist finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the psychologist <u>attempts</u> takes <u>reasonable steps</u> to resolve it with due regard for the best interests of the affected person and maximal compliance with the Ethics Code.</p>	<p>The EC indicated that "attempt" is too low a standard and would hamper the ability of the EC to pursue valid charges against a psychologist.</p>
<p>(c) When psychologists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, at the outset they clarify role expectations and the extent of confidentiality and thereafter as changes occur (See also Standards 3.04, Avoiding Harm, and 3.07, Third-Party Requests for Services.)</p>		<p>What is an example of an "extraordinary circumstance that would not be covered by law or institutional policy?"</p>
<p>3.06 Conflict of Interest. Psychologists refrain from taking on a professional role when personal, scientific, professional, legal, financial, or other interests or relationships could reasonably be expected (1) to impair their objectivity, competence, or effectiveness in performing their functions as psychologists or (2) to expose the person or organization with whom the professional relationship exists to harm or exploitation.</p>		
<p>3.07 Third-Party Requests for Services. When psychologists agree to provide services to a person or entity at the request of a third party, psychologists attempt to clarify at the outset of the service the nature of the relationship with each party (i.e., individuals or organizations). This clarification includes the role of the psychologist (such as therapist, consultant, diagnostician, or expert witness), the probable uses of the services provided</p>	<p>3.07 Third-Party Requests for Services. When psychologists agree to provide services to a person or entity at the request of a third party, psychologists attempt <u>take reasonable steps</u> to clarify at the outset of the service the nature of the relationship with each party (i.e., individuals or organizations). This clarification includes the role of the psychologist (such as therapist, consultant, diagnostician, or expert witness), <u>an identification of</u></p>	<p><i>The following standards use either the phrase "limits to" or "limits of." Does the ECTF want to change these to be consistent? 3.07, 3.10a,c, 3.11a, 4.02, 10.03.</i></p> <p>EC recommended "take reasonable steps" for rationale given above.</p> <p>EC thought it important that an individual receiving</p>

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<p>in the activity that reasonably might affect his or her willingness to participate including limits of confidentiality and monetary or other costs or reimbursements, (3) is aware of the voluntary nature of participation and has freely and without undue influence expressed consent, and (4) has had the opportunity to ask questions and receive answers regarding the activities. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)</p>	<p><i>capacity to consent, (2) has been provided information concerning participation in the activity that reasonably might affect his or her willingness to participate including <u>the nature and purpose of the activity, known or reasonably foreseeable risks and benefits or participation, limits of confidentiality and monetary or other costs or reimbursements, (3) is aware of the voluntary nature of participation and has freely and without undue influence expressed consent, and (4) has had the opportunity to ask questions and receive answers regarding the activities.</u> (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)</i></p>	<p>capacity to consent." I am not sure those statements can be adjudicated. In addition in 3.10b we address the issue of when someone is legally incapable of giving consent. Furthermore, the listing of information that needs to be in informed consent is redundant to the special section informed consents. For me, the EC comments about adding more information underscores the fact that the details of what should be in informed consent may be better left for the special sections.</p> <p>If we do decide to keep this part then see EC comments below.</p> <p>The EC recommended that we include the following: <u>(3) has been provided information regarding the nature and purposes of the proposed treatment or research, the known or reasonably foreseeable risks and benefits of the proposed treatment or research, reasonable alternatives to the proposed treatment or research, and the prognosis with and without treatment;</u> I think that reasonable alternatives and the language of treatment and research is too specific for this standard and this language does appear in the informed consent standard for intervention research 8.02b. I recommend we discuss informing clients about alternative treatments and the prognosis in psychotherapy when we discuss Standard 10.01.</p>
<p>(b) For persons who are legally incapable of giving informed consent, psychologists nevertheless (1) provide an appropriate explanation, (2) seek the individual's assent, (3) consider such persons' preferences and best interests, and (4) obtain appropriate permission from a legally authorized person, if such substitute consent is permitted or required by law. When consent by a legally authorized person is not permitted or required by law, psychologists take reasonable steps to protect the individual's rights and welfare.</p>		

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(c) When psychological services are court ordered or otherwise mandated, psychologists inform the individual of the nature of the anticipated services, including whether the services are court ordered or mandated and any limits of confidentiality , before proceeding.		
(d) Psychologists appropriately document written or oral consent, permission, and assent. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)		
<p>3.11 Psychological Services Delivered To or Through Organizations.</p> <p>(a) Psychologists delivering services to or through organizations provide to clients and when appropriate those directly affected by the services, information beforehand about (1) the nature and objectives of the services, (2) the intended recipients, (3) which of the individuals are clients, (4) the relationship the psychologist will have with each person and the organization, (5) the probable uses of services provided and information obtained, (6) who will have access to the information, and (7) limits to confidentiality. As soon as feasible, they provide information about the results and conclusions of such services to appropriate persons.</p>		<p>Look for Draft 5 wording (div 14). Dierdre mentioned it was simpler, but I believe she was also saying that its simplicity might be over or under interpreted?</p> <p>This was the Draft 5 version. I think D5 version confuses group with individual services and skirts the issue of what information needs to be provided.</p> <p>3.11 Describing the Nature and Results of Psychological Services.</p> <p>(a) When psychologists provide program evaluation, supervision, consultation, or scientific or other psychological services to an individual, a group, or an organization, they provide, using language that is reasonably understandable to the recipients of those services, information beforehand about the nature of such services and information later about results and conclusions. (See also Standard 9.10, Explaining Assessment Results.)</p>
(b) If psychologists will be precluded by law or by organizational roles from providing such information to particular individuals or groups, they so inform those individuals or groups at the outset of the service.		
3.12 Interruption of Psychological Services. Unless otherwise covered by contract, psychologists make reasonable efforts to plan for facilitating services in the event that psychological services are interrupted by factors such as the		

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<p>psychologist's illness, death, unavailability, or relocation or by the client's/patient's relocation or financial limitations. (See also Standard 6.02c, Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work.)</p>		
<p>4. PRIVACY AND CONFIDENTIALITY</p>		
<p>4.01 Maintaining Confidentiality. Psychologists have a primary obligation and take reasonable precautions to protect confidentiality rights, recognizing that they may be established by law, institutional rules, or professional or scientific relationship. (See also Standard 2.05, Delegation of Work to Others and Use of Interpreters.)</p>	<p>4.01 Maintaining Confidentiality. Psychologists have a primary obligation and take reasonable precautions to protect confidentiality information obtained through or stored in any media rights, recognizing that they extent and limits of confidentiality may be established by law, institutional rules, or the professional or scientific relationship. (See also Standard 2.05, Delegation of Work to Others and Use of Interpreters.)</p> <p><u>(b) Psychologists obtain consent to use and disclose confidential information in accordance with the requirements of law (See also Standards 3.10, Informed Consent; 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)</u></p> <p>If we accept (b) the first paragraph will become (a)</p>	<p>As indicated in my notes below I was concerned that without a reference to electronic media in 4.01, 4.02c might not sufficiently alert psychologists to their responsibility to take specific steps to protect the confidentiality of internet, fax, etc information</p> <p>HIPAA normally requires consent or authorization for the use and disclosure of confidential information. There was some concern that the standards on informed consent might lead psychologists to ignore some of the more detailed and specific HIPAA regulations on consent that we would not want to include in the Code itself if this standard was not included. I am still getting feedback on this issue and will have more information at the meeting.</p>
<p>4.02 Discussing the Limits of Confidentiality. (a) Psychologists discuss with persons (including, to the extent feasible, persons who are legally incapable of giving informed consent and their legal representatives) and organizations with whom they establish a scientific or professional relationship (1) the relevant limitations on confidentiality and (2) the foreseeable uses of the information generated through their psychological activities. (See also Standard 3.10, Informed Consent.)</p>		
<p>(b) Unless it is not feasible or is contraindicated, the discussion of confidentiality occurs at the outset of the relationship and thereafter as new circumstances may warrant.</p>		
<p>(c) Psychologists who offer services, products, or information via electronic transmission inform</p>		<p>See 4.01 above. Does this inadvertently suggest that psychologists are not responsible for taking</p>

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clients/patients of the risks to privacy and limitations on confidentiality.		precautions when using electronic media and that all they need do is warn about limitations? 4.01 does not mention different media.
4.03 Recording. Psychologists obtain permission before recording the voice or image of individuals to whom they provide services. (See also Standards 8.03, Informed Consent for Recording Voice and Images in Research; 8.05, Dispensing with Informed Consent for Research; and 8.07, Deception in Research.)	4.03 Recording. Psychologists obtain permission before recording the voice or image of individuals to whom they provide services, <u>psychologists obtain permission from all such persons or their legal representatives.</u> (See also Standards 8.03, Informed Consent for Recording Voice and Images in Research; 8.05, Dispensing with Informed Consent for Research; and 8.07, Deception in Research.)	#625
4.04 Minimizing Intrusions on Privacy. (a) Psychologists include in written and oral reports and consultations, only information germane to the purpose for which the communication is made.		
	(b) Psychologists discuss confidential information obtained in their work only for appropriate scientific or professional purposes, and only with persons clearly concerned with such matters, and as permitted by law. (See also Standard 4.05)	What does this standard refer to that is different from 4.05a? Can a psychologist discuss confidential information for these purposes without the consent of the client or for any situations described in 4.05b? Is this standard for office personnel?
4.05 Disclosures. (a) Psychologists may disclose confidential information with the appropriate consent of the organizational client, the individual client/patient, or of another legally authorized person on behalf of the client/patient unless prohibited by law.	4.05 Disclosures (a) Psychologists may disclose confidential information with the appropriate consent of the organizational client, the individual client/patient, or of another legally authorized person on behalf of the client/patient unless prohibited by law.	Including the "may" might lead psychologists to violate HIPAA laws that may require disclosure in these instances. However, if we delete the "may" we make this mandatory. Do we want this standard?
(b) Psychologists disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law or for a valid purpose such as to (1) provide needed professional services, (2) obtain appropriate professional consultations, (3) protect the client/patient, psychologist, or others from harm, or (4) obtain payment for services from a client/patient, in which instance disclosure is limited to the minimum that is necessary to achieve the purpose. (See also Standard 6.04c, Fees and Financial Arrangements.)	(b) Psychologists disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law or <u>and</u> for a valid purpose such as to (1) provide needed professional services, (2) obtain appropriate professional consultations, (3) protect the client/patient, psychologist, or others from harm, or (4) obtain payment for services from a client/patient, in which instance disclosure is limited to the minimum that is necessary to achieve the purpose. (See also Standard 6.04c, Fees and Financial Arrangements.)	A "valid purpose" is not sufficient for a disclosure unless the disclosure is also permitted by law.
4.06 Consultations. When consulting with colleagues, (1) psychologists		

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do not disclose confidential information that reasonably could lead to the identification of a client/patient, research participant, or other person or organization with whom they have a confidential relationship unless they have obtained the prior consent of the person or organization or the disclosure cannot be avoided, and (2) they disclose information only to the extent necessary to achieve the purposes of the consultation. (See also Standard 4.01, Maintaining Confidentiality.)		
<p>4.07 Use of Confidential Information for Didactic or Other Purposes.</p> <p>Psychologists do not disclose in their writings, lectures, or other public media, confidential, personally identifiable information concerning their clients/patients, students, research participants, organizational clients, or other recipients of their services that they obtained during the course of their work, unless (1) they take reasonable steps to disguise the person or organization; (2) the person or organization has consented in writing; or (3) there is other ethical or legal authorization for doing so.</p>	<p>4.07 Use of Confidential Information for Didactic or Other Purposes.</p> <p>Psychologists do not disclose in their writings, lectures, or other public media, confidential, personally identifiable information concerning their clients/patients, students, research participants, organizational clients, or other recipients of their services that they obtained during the course of their work, unless (1) they take reasonable steps to disguise the person or organization; (2) the person or organization has consented in writing; or (3) there is other ethical or legal authorization for doing so.</p>	<p>Separate the listed items by commas rather than semicolons because there is no internal punctuation?</p> <p>Does "ethical" add anything?</p>
<p>5. ADVERTISING AND OTHER PUBLIC STATEMENTS</p>		
<p>5.01 Avoidance of False or Deceptive Statements.</p> <p>(a) Public statements include but are not limited to paid or unpaid advertising, product endorsements, grant and credentialing applications, brochures, printed matter, directory listings, personal resumes or curriculum vitae, or comments for use in media such as print or electronic transmission, statements in legal proceedings, lectures and public oral presentations, and published materials.</p> <p>Psychologists do not knowingly make public statements that are false, deceptive, or fraudulent, concerning their research, practice, or other work activities or those of persons or organizations with which they are affiliated.</p>		<p>EC suggested highlighting for members that this standard includes "licensing applications." I think this is redundant to 'credentialing.'</p>
<p>(b) Psychologists do not make false, deceptive, or fraudulent statements concerning (1) their training, experience, or competence; (2) their academic</p>		

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degrees; (3) their credentials; (4) their institutional or association affiliations; (5) their services; (6) the scientific or clinical basis for, or results or degree of success of, their services; (7) their fees; or (8) their publications or research findings.		
(c) Psychologists claim degrees as credentials for their mental health services only if those degrees (1) were earned from a regionally accredited educational institution or (2) were the basis for psychology licensure by the state in which they practice.		
5.02 Statements by Others. (a) Psychologists who engage others to create or place public statements that promote their professional practice, products, or activities retain professional responsibility for such statements.		
(b) Psychologists do not compensate employees of press, radio, television, or other communication media in return for publicity in a news item. (See also Standard 1.01, Misuse of Psychologists' Work.)		
(c) A paid advertisement relating to psychologists' activities must be identified or clearly recognizable as such.		
5.03 Descriptions of Workshops and Non-Degree-Granting Educational Programs. To the degree to which they exercise control, psychologists responsible for announcements, catalogs, brochures, or advertisements describing workshops, seminars, or other non-degree-granting educational programs ensure that they accurately describe the audience for which the program is intended, the educational objectives, the presenters, and the fees involved.		
5.04 Media Presentations. When psychologists provide public advice or comment via print, internet, or other electronic transmission, they take precautions to ensure that (1) the statements are based on their professional knowledge , training, or experience in accord with appropriate psychological literature and practice, (2) the statements are otherwise consistent with this	5.04 Media Presentations. When psychologists provide public advice or comment via print, internet, or other electronic transmission, they take precautions to ensure that <u>statements</u> (1) the statements are based on their professional knowledge , training, or experience in accord with appropriate psychological literature and practice, (2) the statements are otherwise	<i>Separate the listed items by semicolons rather than commas because there is internal punctuation.</i> SK changes eliminates redundancy

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Ethics Code, and (3) the statements do not indicate that a professional relationship has been established with the recipient. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)	consistent with this Ethics Code, and (3) the statements do not indicate that a professional relationship has been established with the recipient. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)	
5.05 Testimonials. Psychologists do not solicit testimonials from current therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence.		
5.06 In-Person Solicitation. Psychologists do not engage, directly or through agents, in uninvited in-person solicitation of business from actual or potential therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence. However, this prohibition does not preclude (1) attempting to implement appropriate collateral contacts for the purpose of benefiting an already engaged therapy client/patient or (2) providing disaster or community outreach services.		
6. RECORD KEEPING AND FEES		
6.01 Documentation of Professional and Scientific Work and Maintenance of Records. Psychologists create, and to the extent the records are under their control, maintain, disseminate, store, retain, and dispose of records and data relating to their professional and scientific work in order to (1) facilitate provision of services later by them or by other professionals, (2) allow for replication of research design and analyses, (3) meet institutional requirements, (4) ensure accuracy of billing and payments, and (5) ensure compliance with law. (See also Standard 4.01, Maintaining Confidentiality.)		
6.02 Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work. (a) Psychologists maintain confidentiality in creating, storing, accessing, transferring, and disposing of records under their control, whether	6.02 Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work. (a) Psychologists maintain confidentiality in creating, storing, accessing, transferring, and disposing of records under their control, whether	

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these are written, automated, or in any other medium. (See also Standard 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.)	these are written, automated, or in any other medium. (See also Standards <u>4.01 Maintaining Confidentiality and 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.</u>)	
(b) If confidential information concerning recipients of psychological services is entered into databases or systems of records available to persons whose access has not been consented to by the recipient, psychologists use coding or other techniques to avoid the inclusion of personal identifiers.		
(c) Psychologists make plans in advance to facilitate the appropriate transfer and to protect the confidentiality of records and data in the event of psychologists' withdrawal from positions or practice.	(c) Psychologists make plans in advance to facilitate the appropriate transfer and to protect the confidentiality of records and data in the event of psychologists' withdrawal from positions or practice., <u>recognizing that such procedures may be established by law or institutional rules. (See also Standard 3. Interruption of Services.)</u>	
6.03 Withholding Records for Nonpayment. Psychologists may not withhold records under their control that are requested and needed for a client's/patient's emergency treatment solely because payment has not been received.	6.03 Withholding Records for Nonpayment. Psychologists may not withhold records under their control that are requested and needed for a client's/patient's emergency treatment solely because payment has not been received, <u>recognizing that rules governing withholding of records may be established by law.</u>	Withholding of records for non-payment allowed by HIPAA? Is prohibited. Also MA law requires release of records. Does this pertain to neuropsychology or other types of assessments? Do we want this standard to include adhering to the law?
6.04 Fees and Financial Arrangements. (a) As early as is feasible in a professional or scientific relationship, psychologists and the client/patient or other recipient of psychological services reach an agreement specifying the compensation and the billing arrangements.	6.04 Fees and Financial Arrangements. (a) As early as is feasible in a professional or scientific relationship, psychologists and the client/patient or other recipients of psychological services reach an agreement specifying the compensation and the billing arrangements.	Eliminate redundancy?
(b) Psychologists' fee practices are consistent with law.		
(c) Psychologists do not misrepresent their fees.		
(d) If limitations to services can be anticipated because of limitations in financing, this is discussed with the client/patient or other recipient of services as early as is feasible. (See also Standards 10.09, Interruption of Services, and 10.10, Terminating Therapy.)	(d) If limitations to services can be anticipated because of limitations in financing, this is discussed with the client/patient or other recipient of services as early as is feasible. (See also Standards 10.09, Interruption of Services, and 10.10, Terminating Therapy.)	Redundancy?
(e) If the client/patient or other recipient of services	(e) If the client/patient or other recipient of services	Redundancy?

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<p>does not pay for services as agreed, and if psychologists intend to use collection agencies or legal measures to collect the fees, psychologists first inform the person that such measures will be taken and provide that person an opportunity to make prompt payment. (See also Standards 4.05, Disclosures; 6.03, Withholding Records for Nonpayment; and 10.01, Informed Consent to Therapy.)</p>	<p>does not pay for services as agreed, and if psychologists intend to use collection agencies or legal measures to collect the fees, psychologists first inform the person that such measures will be taken and provide that person an opportunity to make prompt payment. (See also Standards 4.05, Disclosures; 6.03, Withholding Records for Nonpayment; and 10.01, Informed Consent to Therapy.)</p>	
<p>6.05 Barter With Clients/Patients. Barter is the acceptance of goods, services, or other nonmonetary remuneration from clients/patients in return for psychological services. Psychologists may barter only if (1) it is not clinically contraindicated, and (2) the resulting arrangement is not exploitative. (See also Standards 3.05, Multiple Relationships, and 6.04, Fees and Financial Arrangements.)</p>		
<p>6.06 Accuracy in Reports to Payors and Funding Sources. In their reports to payors for services or sources of research funding, psychologists take reasonable steps to ensure the accurate reporting of the nature of the service provided or research conducted, the fees, charges, or payments, and where applicable, the identity of the provider, the findings, and the diagnosis. (See also Standards 4.01, Maintaining Confidentiality; 4.04, Minimizing Intrusions on Privacy; and 4.05, Disclosures.)</p>		
<p>6.07 Referrals and Fees. When psychologists pay, receive payment from, or divide fees with another professional, other than in an employer-employee relationship, the payment to each is based on the services provided (clinical, consultative, administrative, or other) and is not based on the referral itself. (See also Standard 3.09, Cooperation with Other Professionals.)</p>		
<p>7. EDUCATION AND TRAINING</p>		
<p>7.01 Design of Education and Training Programs. Psychologists responsible for education and training programs take reasonable steps to ensure that the</p>		

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<p>programs are designed to provide the appropriate knowledge and proper experiences, and to meet the requirements for licensure, certification, or other goals for which claims are made by the program. (See also Standard 5.03, Descriptions of Workshops and Non-Degree-Granting Educational Programs.)</p>		
<p>7.02 Descriptions of Education and Training Programs. Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including participation in required course- or program-related counseling, psychotherapy, experiential groups, consulting projects, or community service), training goals and objectives, stipends and benefits, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties.</p>		
<p>7.03 Accuracy in Teaching (a) Psychologists take reasonable steps to ensure that course syllabi are accurate regarding the subject matter to be covered, bases for evaluating progress, and the nature of course experiences. This standard does not preclude an instructor from modifying course content or requirements when the instructor considers it pedagogically necessary or desirable, so long as students are made aware of these modifications in a manner that enables them to fulfill course requirements. (See also Standard 5.01, Avoidance of False or Deceptive Statements.)</p>		
<p>(b) When engaged in teaching or training, psychologists present psychological information accurately. (See also Standard 2.03, Maintaining Expertise.)</p>		
<p>7.04 Student Disclosure of Personal Information. Psychologists do not require students or supervisees to disclose personal information, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment, and</p>		

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relationships with parents, peers, and spouses or significant others except if (1) the program or training facility has clearly identified this requirement in its admissions and program materials or (2) the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their work-related activities in a competent manner or posing a threat to the students or others.		
7.05 Mandatory Individual or Group Therapy or Experiential Activities.		
(a) When individual or group therapy is a program or course requirement, psychologists responsible for that program allow students in undergraduate and graduate programs the option of selecting such therapy outside the program. (See also Standard 7.02, Descriptions of Education and Training Programs.)		What does "outside" the program mean? Can we be more specific? Do we mean from service providers unaffiliated with the program? Non-faculty? Is the program allowed to approve the therapist?
(b) Faculty who are or are likely to be responsible for evaluating students' academic performance do not themselves provide that therapy. (See also Standard 3.05, Multiple Relationships.)		
7.06 Assessing Student and Supervisee Performance. (a) In academic and supervisory relationships, psychologists establish a timely and specific process for providing feedback to students and supervisees. Information regarding the process is provided to the student at the beginning of supervision.		
(b) Psychologists evaluate students and supervisees on the basis of their actual performance on relevant and established program requirements.		
7.07 Sexual Relationships with Students and Supervisees. Psychologists do not engage in sexual relationships with students or supervisees who are in their department, agency, or training center or over whom psychologists have or are likely to have		

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evaluative authority. (See also Standard 3.05, Multiple Relationships.)		
8. RESEARCH AND PUBLICATION		
<p>8.01 Institutional Approval.</p> <p>Psychologists obtain from host institutions, or organizations approval prior to conducting research, and they provide accurate information about their research proposals. They conduct the research in accordance with the approved research protocol.</p>	<p>8.01 Institutional Approval.</p> <p><u>When institutional approval is required, Psychologists provide accurate information about their research proposals and obtain approval from host relevant institutions, or organizations approval</u> prior to conducting research, and they provide accurate information about their research proposals. They conduct the research in accordance with the approved research protocol.</p>	<p>At Council, a member was concerned that draft 6 wording of 8.01 would require institutional approval for undergraduate experimental course lab assignments. Since institutions may vary in requirements regarding course work and since it would be cumbersome to write language that would distinguish between which courses should (e.g., masters and Ph.D. experiments) and should not have institutional approval. I thought this language might address the issue. The 92 Code used the term "appropriate approval" which the ECTF took out, I believe in an effort not to use qualifiers when possible. I substituted the word "relevant" for "host" because psychologists may need to seek approval from both their home institution and the site at which data is collected. Does "host" cover both?</p>
<p>8.02 Informed Consent to Research.</p> <p>(a) When obtaining informed consent as required in Standard 3.10, Informed Consent, psychologists inform participants about (1) the purpose of the research, expected duration, and procedures; (2) their right to decline to participate and to withdraw from the research once participation has begun; (3) the foreseeable consequences of declining or withdrawing; (4) reasonably foreseeable factors that may be expected to influence their willingness to participate such as potential risks, discomfort, or adverse effects; (5) any prospective research benefits; (6) limitations on confidentiality; (7) incentives for participation; and (8) whom to contact for questions about the research and research participants' rights. (See Standards 8.05, Dispensing with Informed Consent for Research, and 8.07, Deception in Research.)</p>	<p>8.02 Informed Consent to Research.</p> <p>(a) When obtaining informed consent as required in Standard 3.10, Informed Consent, psychologists inform participants about (1) the purpose of the research, expected duration, and procedures; (2) their right to decline to participate and to withdraw from the research once participation has begun; (3) the foreseeable consequences of declining or withdrawing; (4) reasonably foreseeable factors that may be expected to influence their willingness to participate such as potential risks, discomfort, or adverse effects; (5) any prospective research benefits; (6) limitations on confidentiality; (7) <u>incentives compensation</u> for participation; and (8) whom to contact for questions about the research and research participants' rights. <u>They provide opportunity for the prospective participant to ask questions and receive answers.</u> (See Standards 8.05, Dispensing with Informed Consent for Research, and 8.07, Deception in Research.)</p>	<p>As you can see, 8.02 is highly redundant as well as more expansive to the elements of 3.10. I added the last sentence in case we decide to eliminate that section of 3.10.</p> <p><u>Please note that in several sections of the draft we use the term "limits of confidentiality" here we use "limitations on confidentiality" which does the ECTF prefer for consistency?</u></p> <p>Compensation is the preferred term.</p>

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<p>(b) Psychologists conducting intervention research involving the use of experimental treatments, clarify to participants at the outset of the research the experimental nature of the treatment, the services that will or will not be available to the control group(s) if appropriate, the means by which assignment to treatment and control groups will be made, and available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun.</p>	<p>b) Psychologists conducting intervention research involving the use of experimental treatments, clarify to participants at the outset of the research <u>(1) the experimental nature of the treatment;</u> <u>(2) the services that will or will not be available to the control group(s) if appropriate;</u> <u>(3) the means by which assignment to treatment and control groups will be made;</u> <u>and (4) available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun;</u> <u>(5) compensation or monetary costs of participating including if appropriate, whether reimbursement from the participant or a third party payor will be sought; and (6) the extent of the participants' right of access to their research records. (see also Standard 8.02a.)</u></p>	
<p>8.03 Informed Consent for Recording Voice and Images in Research. Psychologists obtain informed consent from research participants prior to recording their voice or image unless (1) the research consists solely of naturalistic observations in public places and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm or (2) the research design includes deception and consent is obtained during debriefing. (See also Standard 8.07, Deception in Research.)</p>	<p>8.03 Informed Consent for Recording Voices and Images in Research. Psychologists obtain informed consent from research participants prior to recording their voices or images <u>for data collection</u> unless (1) the research consists solely of naturalistic observations in public places and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm or (2) the research design <u>does not involve treatment</u>, includes deception, and consent is obtained during debriefing. (See also Standard 8.07, Deception in Research.)</p>	<p><i>Change the word "Voice" to plural in title and make appropriate changes in text.</i></p> <p>Div 14. Some researchers record the consent and then cease taping if the individual refuses. Is there a way we can address this.</p>
<p>8.04 Client/Patient, Student, and Subordinate Research Participants. (a) When psychologists conduct research with clients/patients, students, or subordinates as participants, psychologists take steps to protect the prospective participants from adverse consequences of declining or withdrawing from participation.</p>		
<p>(b) When research participation is a course requirement or opportunity for extra credit, the prospective participant is given the choice of equitable alternative activities.</p>		
<p>8.05 Dispensing With Informed Consent for</p>	<p>8.05 Dispensing With Informed Consent for</p>	<p>This seemed so long and unreadable, I tried to</p>

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<p>Research. Psychologists may dispense with informed consent only where permitted by law, applicable federal or institutional regulations or where research (1) is conducted in commonly accepted educational settings and involves the study of normal educational practices, instructional strategies, or effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods and that would not reasonably be assumed to create distress or harm; (2) involves only anonymous questionnaires, naturalistic observations, or certain kinds of archival research for which participants' confidentiality is protected and for which disclosure of the participants' responses would not place them at risk of criminal or civil liability or be damaging to the participants' financial standing, employability, or reputation or that would not reasonably be assumed to create distress or harm; or (3) is conducted in organizational settings and concerns factors related to job or organization effectiveness for which there is no risk to participants' employability or future academic progress, and confidentiality is protected.</p>	<p>Research. Psychologists may dispense with informed consent only where permitted by law, applicable federal or institutional regulations, or where research <u>would not reasonably be assumed to create distress or harm and involves</u> (1) <u>is conducted in commonly accepted educational settings and involves the study of normal educational practices, instructional strategies, or effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods conducted in educational settings</u> and that would not reasonably be assumed to create distress or harm; (2) involves only anonymous questionnaires, naturalistic observations, or certain kinds of archival research for which participants' confidentiality is protected and for which disclosure of the participants' responses would not place them <u>participants</u> at risk of criminal or civil liability or be damaging to their <u>participants'</u> financial standing, employability, or reputation, and confidentiality is protected or that would not reasonably be assumed to create distress or harm; or (3) is conducted in organizational settings and concerns <u>the study of factors related to job or organization effectiveness conducted in organizational settings</u> for which there is no risk to participants' employability or future academic progress, and confidentiality is protected.</p>	<p><u>eliminate redundancies</u></p> <p><i>Below is what the adjacent changes would look like</i></p> <p>Psychologists may dispense with informed consent only where permitted by law, federal or institutional regulations, or where research would not reasonably be assumed to create distress or harm and involves (1) the study of normal educational practices, curricula, or classroom management methods conducted in educational settings; (2) only anonymous questionnaires, naturalistic observations, or archival research for which disclosure of responses would not place participants at risk of criminal or civil liability or damage their financial standing, employability, or reputation, and confidentiality is protected; or (3) the study of factors related to job or organization effectiveness conducted in organizational settings for which there is no risk to participants' employability, and confidentiality is protected.</p> <p>Div 14 "future academic process does not make sense</p>
<p>8.06 Offering Inducements for Research Participants. (a) When offering professional services as an inducement to obtain research participants, psychologists make clear the nature of the services, as well as the risks, obligations, and limitations. (See also Standard 6.05, Barter With Clients/Patients.)</p>	<p>8.06 Offering Inducements <u>Compensation</u> for Research Participants. (a) When offering professional services as an <u>inducement compensation</u> to obtain for research participants, psychologists make clear the nature of the services, as well as the risks, obligations, and limitations. (See also Standard 6.05, Barter With Clients/Patients.)</p>	<p>There has been recent debate at NIH/NIMH to avoid the terms incentives and inducements as implying "coercion"</p>
<p>(b) Psychologists make reasonable efforts to avoid offering excessive or inappropriate financial or other inducements to obtain research participants when such inducements are likely to coerce participation.</p>		

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<p>8.07 Deception in Research. (a) Psychologists do not conduct a study involving deception unless they have determined that the use of deceptive techniques is justified by the study's significant prospective scientific, educational, or applied value and that effective nondeceptive alternative procedures are not feasible.</p>		
<p>(b) Psychologists do not deceive prospective participants about research that is reasonably expected to cause physical pain or severe emotional distress.</p>		
<p>(c) Psychologists explain any deception that is an integral feature of the design and conduct of an experiment to participants as early as is feasible, preferably at the conclusion of their participation, but no later than at the conclusion of the data collection, and permit participants to withdraw their data. (See also Standard 8.08, Debriefing.)</p>		
<p>8.08 Debriefing. (a) Psychologists provide a prompt opportunity for participants to obtain appropriate information about the nature, results, and conclusions of the research, and psychologists take reasonable steps to correct any misconceptions that participants may have of which the psychologists are aware.</p>		
<p>(b) If scientific or humane values justify delaying or withholding this information, psychologists take reasonable measures to reduce the risk of harm.</p>		
<p>(c) When psychologists become aware that research procedures have harmed a participant, they take reasonable steps to minimize the harm.</p>		
<p>8.09 Humane Care and Use of Animals in Research. (a) Psychologists acquire, care for, use, and dispose of animals in compliance with current federal, state, and local laws and regulations, and with professional standards.</p>		
<p>(b) Psychologists trained in research methods and experienced in the care of laboratory animals supervise all procedures involving animals and are responsible for ensuring appropriate consideration</p>		

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of their comfort, health, and humane treatment.		
(c) Psychologists ensure that all individuals under their supervision who are using animals have received instruction in research methods and in the care, maintenance, and handling of the species being used, to the extent appropriate to their role. (See also Standard 2.05, Delegation of Work to Others and Use of Interpreters.)		
(d) Psychologists make reasonable efforts to minimize the discomfort, infection, illness, and pain of animal subjects.		
(e) Psychologists use a procedure subjecting animals to pain, stress, or privation only when an alternative procedure is unavailable and the goal is justified by its prospective scientific, educational, or applied value.		
(f) Psychologists perform surgical procedures under appropriate anesthesia and follow techniques to avoid infection and minimize pain during and after surgery.		
(g) When it is appropriate that an animal's life be terminated, psychologists proceed rapidly, with an effort to minimize pain and in accordance with accepted procedures.		
8.10 Reporting Research Results.		
(a) Psychologists do not fabricate data. (See also Standard 5.01a, Avoidance of False or Deceptive Statements.)		
(b) If psychologists discover significant errors in their published data, they take reasonable steps to correct such errors in a correction, retraction, erratum, or other appropriate publication means.		

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<p>8.11 Plagiarism. Psychologists do not present portions of another's work or data as their own, even if the other work or data source is cited occasionally.</p>		<p>The EC suggested that there be a general category of plagiarism. The ECTF discussed this in great detail at its last meeting. Below is an explanation of our rationale for not having a general plagiarism standard that was sent to another commenter.</p> <p>The task force very carefully considered the issue of compartmentalization for every standard in the code. Where certain types of requirements were similar across different sections of the code, standards were written in language that could reflect the contexts in which the behavior would occur. The ECTF spent considerable time discussing how best to address situations in which a psychologist might inappropriately present the work of others as his or her own in non-research/publication settings. It was recognized that in some settings it is appropriate to summarize the status of the field without making specific references to the work of others when the psychologists is not declaring that the body of work is his or her own. After extensive deliberation the ECTF concluded that Standards 5.01 (a) and (b) in draft 6 adequately covers the types of behaviors that would be unethical in these settings.</p>
<p>8.12 Publication Credit. (a) Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have substantially contributed.</p>		
<p>(b) Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institutional position, such as department chair, does not justify authorship credit. Minor contributions to the research or to the writing for publications are acknowledged appropriately, such as in footnotes or in an introductory statement.</p>		
<p>(c) Except under exceptional circumstances, a student is listed as principal author on any multiple-authored article that is substantially based on the</p>		

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student's doctoral dissertation. Faculty advisors discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate.		
8.13 Duplicate Publication of Data. Psychologists do not publish, as original data, data that have been previously published. This does not preclude republishing data when they are accompanied by proper acknowledgment.		
8.14 Sharing Research Data for Verification. (a) After research results are published, psychologists do not withhold the data on which their conclusions are based from other competent professionals who seek to verify the substantive claims through reanalysis and who intend to use such data only for that purpose, provided that the confidentiality of the participants can be protected and unless legal rights concerning proprietary data preclude their release. This does not preclude psychologists from requiring that such individuals or groups be responsible for costs associated with the provision of such information.		
(b) Psychologists who request data from other psychologists to verify the substantive claims through reanalysis may use shared data only for that purpose. Psychologists obtain prior agreement for other uses of the data.	(b) Psychologists who request data from other psychologists to verify the substantive claims through reanalysis may use shared data only for that purpose. <u>The requesting Psychologists</u> obtains prior agreement for other uses of the data.	Div 14
8.15 Professional Reviewers. Psychologists who review material submitted for publication, grant, or other research proposal review respect the confidentiality of and the proprietary rights in such information of those who submitted it.		
9. ASSESSMENT		
9.01 Bases for Assessments. (a) Psychologists base their assessments, recommendations, reports, opinions, and diagnostic or evaluative statements on information and techniques sufficient to substantiate their findings. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)		
(b) Except as noted in 9.01 (c) and (d),		Stan: Just a flag here as I was looking back from

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psychologists provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions.		your comment on d. Is there an unintended effect of applying this to all assessment (not just forensic). It is common, is it not, for therapists to give opinions about clients before they have data to truly support the opinions? While the context generally makes it clear that the "opinion" is a hypothesis, this rule could be a problem.
(c) When, despite reasonable efforts, such an examination is not practical, psychologists document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions, and appropriately limit the nature and extent of their conclusions or recommendations. (See also Standards 2.01, Boundaries of Competence, and 9.06, Interpreting Assessment Results.)		
(d) When psychologists conduct a record review and an individual examination is not warranted or necessary for the opinion, psychologists explain this and the bases upon which they arrived at this opinion in their conclusions and recommendations.		<p>The EC gave the rationale below for wanting the following inclusions. I am not sure that their concerns are relevant to the term "record review" which I believe has a special meaning and would be appropriate even if it were possible for a psychologist to see a client. I think there concerns are adequately addressed in (b) and (c) above. I would recommend our original language</p> <p>(d) When psychologists conduct a record review and an individual examination is <u>not possible or is not warranted or necessary for the opinion,</u> psychologists explain this and the bases upon which they arrived at this opinion in their conclusions and recommendations. <u>Psychologists explain any relevant limitations of their relying solely upon record review and limit their findings, recommendations, and opinions accordingly.</u></p> <p>Here is the EC rationale There are circumstances in which an individual examination is not possible (e.g, the person is dead or refusing to speak with the psychologist). The additional language covers this situation. The</p>

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<p>except when (1) testing is mandated by law or governmental regulation; (2) informed consent is implied because testing is conducted as a routine educational, institutional, or organizational activity (e.g., when participants voluntarily agree to assessment when applying for a job); or (3) one purpose of the testing is to evaluate decisional capacity.</p>	<p>except when (1) testing is mandated by law or governmental regulation; (2) informed consent is implied because testing is conducted as a routine educational, institutional, or organizational activity (e.g., when participants voluntarily agree to assessment when applying for a job); or (3) one purpose of the testing is to evaluate decisional capacity. <u>Informed consent includes an explanation of the nature and purpose of the assessment, fees, involvement of third parties, and limits of confidentiality and sufficient opportunity for the client/patient to ask questions and receive answers.</u></p>	<p>CPTA “The standard is unclear. If the intention of exception (3) is to exclude situations in which the client is too impaired to grant informed consent, then (3) should be phrased in terms of capacity rather than in terms of the purpose of testing. “</p> <p><i>I believe the intention of #3 was to address Division 40’s concern that neuropsychologists are conducting an assessment to evaluate an individual’s competence such that the consent capacity is unknown at the time of testing.</i></p>
<p>(b) Psychologists inform persons with questionable capacity to consent or for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed.</p>		
<p>(c) Psychologists using the services of an interpreter obtain informed consent from the client/patient to use that interpreter, ensure that confidentiality of test results and test security are maintained, and discuss any limitations on the data obtained. (See also Standards 2.05, Delegation of Work to Others and Use of Interpreters; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments; and 9.07, Assessment by Unqualified Persons.)</p>		

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<p>9.04 Release of Test Data. Test data refer to the test protocols, record forms, scores and notes regarding an individual's responses to test items in any media. Psychologists may release test data to other psychologists or other qualified professionals based on a client/patient release. Psychologists refrain from releasing test data to persons who are not qualified to use such information, except (1) as required by law or court order, (2) to an attorney or court based on a client/patient release or (3) to the client/patient as appropriate. Psychologists may refrain from releasing test data to protect a client/patient from harm or to protect test security. (See also Standards 1.02, Conflict Between Ethics and Law, Regulations, or Other Governing Legal Authority, and 2.01, Boundaries of Competence.)</p>	<p><u>9.04 Release of Raw [Test] Data</u> -- replace entire Draft 6 proposed text with the following --COLI</p> <p>(a) The term "raw data" refers to client/patient responses to psychological test questions or stimuli, and to a psychologist's contemporaneous notes concerning client/patient statements and behavior during an examination. Psychological test materials are not considered "raw data." (See Standard 9.11)</p> <p>(b) Pursuant to a client/patient release, psychologists provide raw data to: (1) the client/patient; (2) another licensed or certified mental health professional; and/or (3) any other person or party as permitted by law.</p> <p>(c) In the absence of a client/patient release, psychologists provide raw data only upon court order designating the materials to be released and the parties to whom the materials are to be released.</p> <p>If the provision of raw data would risk substantial harm to a patient/client or others, psychologists may take steps as permitted by law to refrain from doing so.</p>	<p><i>Grammatical Correction & commas.</i> COLI recommendation supported by CPTA & Div 12. COLI rationale is this column under 9.11</p> <p>"scores" not included.</p> <p>(a) The enhanced definition of notes is a good idea since it avoids any confusion of the term "notes" with "psychotherapy notes" which receive more protection by HIPAA and assessment notes which are not.</p> <p>The COLI recommendations for 9.04 and 9.11 do not give guidance and may cause confusion regarding instances where raw data and test materials are intricately entwined (e.g., Rorschach)</p> <p>Regarding COLI (b) do we want to require a client/patient release before a psychologist releases data to a client/patient?</p> <p>(b)(2) COLI thought that including the term Licensed or certified mental health professional would end dispute over "qualification" by requiring the psychologist to get a license number or calling the state. Is one option more burdensome or impractical than the other? The ECTF in the past has discussed the fact that in some instances it may be appropriate to provide health practitioners with raw data.</p> <p>HPAA mandates release of data (except psychotherapy notes) to client upon their release. Psychologists could technically refuse to release it to a second party who is not a personal representative. However, COLI b3 opens the door to release of raw data to attorneys and anyone the client signs a release for as long as "test materials." are not included and it actually broadens the people who can receive the raw data.</p>

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		<p>HIPAA allows a client to appeal if a health provider withholds PHI and the standard for supporting the health provider is "serious and imminent harm" (so mental health of patient not suffice) thus HIPAA has a higher threshold even than "<u>Psychologists may refrain from releasing test data to protect a client/patient</u>" in current Draft 6.04 . HIPAA will not recognize test security as a reason to withhold PHI and therefore is misleading. Therefore COLI (d) is a more accurate reflection of what psychologists can or cannot do.</p> <p>Div 41 also notes that some states have laws prohibiting the release of test protocols</p> <p>When the Ethics Code permits (but does not require) a psychologist to do something and a state law prohibits something, no conflict exists for the psychologist. He/She can follow state law and also not violate the ethics code. There is no conflict between the Ethics Code and law, because the Ethics Code is not requiring the psychologist to do something that is prohibited under state law.</p> <p>HIPAA requires that a psychologist release protected health information (i.e. raw data) to a patient upon request in virtually all instances. If a state law is contrary to HIPAA and gives FEWER rights to the patient than HIPAA (for example, prohibits release of protected health information to a patient when HIPAA requires such release), the most likely outcome is that the state law will be preempted by HIPAA. In the rare situation where the psychologist is not dealing with PHI (as, for example, when he/she is an I/O psychologist and is therefore not dealing with PHI covered by HIPAA) and the Ethics Code required release, but the state law did not permit release, the Ethics Code has the standard that instructs the psychologist to follow the state law.</p>

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		<p>Under HIPAA, if the test protocol has individually identifiable information on it (like the psychologist's notes on the assessment or the patient's responses), then it would be PHI and would need to be released. If the test protocol is "clean", it would not. (COLI, for example, sees this issue as one of educating psychologists not to write on the test protocols so that the protocols do not have to be turned over.)</p> <p>In addition to the rationale that COLI provided to us I would like to add a few comments on Draft 6 of 9.04</p> <p>In Draft 6 2nd sentence of draft 6 is redundant to 3rd sentence and in some ways with 4.05a.</p> <p>The ECTF might also wish to consider what the goal of this standard is in light of and in relationship to other standards. Test security is addressed in 9.11. Confidentiality & Disclosures are addressed in section 4. In the 92 Code the standard was presented as protecting the <u>misuse</u> of assessments by others: <i>2.02 Competence and Appropriate Use of Assessments and Interventions.</i> <i>(b) Psychologists refrain from misuse of assessment techniques, interventions, results, and interpretations and take reasonable steps to prevent others from misusing the information these techniques provide. This includes refraining from releasing raw test results or raw data to persons, other than to patients or clients as appropriate, who are not qualified to use such information. (See also Standards 1.02, Relationship of Ethics and Law, and 1.04, Boundaries of Competence.)</i></p> <p><u>I don't see how Boundaries of competence relates to 9.04 which is now limited to release to others.</u></p>

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<p>9.05 Test Construction. Psychologists who develop and conduct research with tests and other assessment techniques use appropriate psychometric procedures and current scientific or professional knowledge for test design, standardization, validation, reduction or elimination of bias, and recommendations for use.</p>	<p>9.05 Test Construction. Psychologists who develop and conduct research with tests and other assessment techniques use appropriate psychometric procedures and current scientific or professional knowledge for test design, standardization, validation, reduction or elimination of bias, and recommendations for use.</p>	<p>Isn't this standard only addressed to test construction?</p>
<p>9.06 Interpreting Assessment Results. When interpreting assessment results, including automated interpretations, psychologists take into account the purpose of the assessment as well as the various test factors, test taking abilities, and other characteristics of the person being assessed, such as situational, personal, linguistic, and cultural differences, that might affect psychologists' judgments or reduce the accuracy of their interpretations. They indicate any significant reservations they have about the accuracy or limitations of their interpretations. (See also Standards 2.01 b and c, Boundaries of Competence, and 3.01, Unfair Discrimination.)</p>		
<p>9.07 Assessment by Unqualified Persons. Psychologists do not promote the use of psychological assessment techniques by unqualified persons, except when such use is conducted for training purposes with appropriate supervision. (See also Standard 2.05, Delegation of Work to Others and Use of Interpreters.)</p>		
<p>9.08 Obsolete Tests and Outdated Test Results. (a) Psychologists do not base their assessment or intervention decisions or recommendations on data or test results that are outdated for the current purpose.</p>	<p>9.08 Obsolete Tests and Outdated Test Results. (a) Psychologists do not base their assessment or intervention decisions or recommendations on <u>tests, measures, data,</u> or test results that are outdated for the current purpose.</p>	<p>Does this adequately combine the points in (a) and (b)?</p>
<p>(b) Similarly, psychologists do not base such decisions or recommendations on tests and measures that are obsolete and not useful for the current purpose.</p>	<p>(b) Similarly, pPsychologists do not base such decisions or recommendations on tests and measures that are obsolete and not useful for the current purpose.</p>	<p>SK Eliminate (b) if above works</p>
<p>9.09 Test Scoring and Interpretation Services. (a) Psychologists who offer assessment or scoring services to other professionals accurately describe the purpose, norms, validity, reliability, and</p>		

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applications of the procedures and any special qualifications applicable to their use.		
(b) Psychologists select scoring and interpretation services (including automated services) on the basis of evidence of the validity of the program and procedures as well as on other appropriate considerations. (See also Standard 2.01 b and c, Boundaries of Competence.)		
(c) Psychologists retain responsibility for the appropriate application, interpretation, and use of assessment instruments, whether they score and interpret such tests themselves or use automated or other services.		
<p>9.10 Explaining Assessment Results. Regardless of whether the scoring and interpretation are done by psychologists, by employees or assistants, or by automated or other outside services, psychologists take reasonable steps to ensure that explanations of results are given to the individual or designated representative unless the nature of the relationship precludes provision of an explanation of results (such as in some organizational consulting, pre-employment or security screenings, and forensic evaluations), and this fact has been clearly explained to the person being assessed in advance.</p>		
<p>9.11 Maintaining Test Security. Psychologists make reasonable efforts to maintain the integrity and security of tests and other assessment techniques consistent with law, contractual obligations, and in a manner that permits adherence to this Ethics Code. (See also Standards 1.02, Conflict Between Ethics and Law, Regulations, and Other Governing Legal Authority, and 9.04, Release of Test Data.)</p>	<p><u>9.11 Release of Test Materials</u> (Maintaining Test Security) -- replace entire Draft 6 proposed text with the following --COLI</p> <p>"Test Materials" include instruments, protocols, psychological test questions or stimuli, not including "raw data" as defined in Standard 9.04.</p> <p>Unless compelled by court order, psychologists provide test materials only to another licensed or certified mental health professional.</p> <p>Prior to or after receiving a court order directing release of test materials to persons other than licensed or certified mental health professionals,</p>	<p>COLI recommendation <u>COLI Rationales for Amendments to Standards 9.04 and 9.11</u> COLI drafted new versions of Standards 9.04 and 9.11 in an attempt to maintain test security to the greatest extent possible while also recognizing that HIPAA has changed the legal landscape.</p> <p>COLI's recommendation is restricted issues related to 9.04 whereas I believe 9.11 was intended to be broader (e.g., don't coach patients on tests). I am not sure about the relevance of (b) outside of a client/patient's test scores? (c) although permissive, may still create a burden on psychologists who may see themselves at legal risk by test companies if</p>

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	<u>psychologists may first seek a protective order or other legal relief in order to protect test security.</u>	they do not seek a protective order or other legal relief.
10. THERAPY		DIV 42 RECOMMENDED THE TERM "PSYCHOTHERAPY" HOWEVER IN PREVIOUS DISCUSSIONS THE ECTF AND RUSS NEWMAN FELT THAT WOULD BE TOO LIMITING
10.01 Informed Consent to Therapy. (a) When obtaining informed consent to therapy as required in Standard 3.10, Informed Consent, psychologists inform clients/patients as early as is feasible in the therapeutic relationship about appropriate information, including the nature and anticipated course of therapy, fees, involvement of third parties, and confidentiality. (See also Standards 4.02, Discussing the Limits of Confidentiality, and 6.04, Fees and Financial Arrangements.)	10.01 Informed Consent to Therapy. (a) When obtaining informed consent to therapy as required in Standard 3.10, Informed Consent, psychologists inform clients/patients as early as is feasible in the therapeutic relationship about appropriate information, including the nature and anticipated course of therapy, fees, involvement of third parties, and <u>limits of confidentiality and provides sufficient opportunity for the client/patient to ask questions and receive answers.</u> (See also Standards 4.02, Discussing the Limits of Confidentiality, and 6.04, Fees and Financial Arrangements.)	Is "appropriate information" informative? Does it create an undue burden? I included part about questions and answers assuming that we eliminate it from 3.10. EC suggested that in the 3.10 informed consent include requirement to inform individual of (a) known and reasonably foreseeable risks and benefits, (b) alternatives to treatment and (c) prognosis without treatment. We do require discussion of alternatives in 3.01b where treatment in an evolving are is used. I am not sure the EC requirements would be universally appropriate.
(b) When obtaining informed consent for treatment involving emerging areas in which generally recognized techniques and procedures have not been established, psychologists inform their clients/patients of the developmental nature of the treatment, the potential risks involved, alternative treatments that may be available, and the voluntary nature of their participation. (See also Standards 2.01d, Boundaries of Competence, and 3.10, Informed Consent.)		Is it obvious in (b) that the psychologist also has to do everything in (a)?
(c) When the therapist is a trainee and the legal responsibility for the treatment provided resides with the supervisor, the client/patient, as part of the informed consent procedure, is informed that the therapist is in training and is being supervised and is given the name of the supervisor.		
10.02 Therapy Involving Couples or Families. (a) When psychologists agree to provide services to several persons who have a relationship (such as spouses, significant others, or parents and	10.02 Therapy Involving Couples or Families. (a) When psychologists agree to provide services to several persons who have a relationship (such as spouses, significant others, or parents and	SK "they" EC recommendation based upon earlier rationale

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children), psychologists attempt to clarify at the outset (1) which of the individuals are clients/patients and (2) the relationship the psychologist will have with each person. This clarification includes the psychologist's role and the probable uses of the services provided or the information obtained. (See also Standard 4.02, Discussing the Limits of Confidentiality.)	children), psychologists <u>they attempt take reasonable steps</u> to clarify at the outset (1) which of the individuals are clients/patients and (2) the relationship the psychologist will have with each person. This clarification includes the psychologist's role and the probable uses of the services provided or the information obtained. (See also Standard 4.02, Discussing the Limits of Confidentiality.)	
(b) If it becomes apparent that psychologists may be called on to perform potentially conflicting roles (such as family therapist and then witness for one party in divorce proceedings), psychologists attempt to clarify and modify, or withdraw from, roles appropriately. (See also Standard 3.05c, Multiple Relationships.)	(b) If it becomes apparent that psychologists may be called on to perform potentially conflicting roles (such as family therapist and then witness for one party in divorce proceedings), psychologists attempt <u>take reasonable steps</u> to clarify and modify, or withdraw from, roles appropriately. (See also Standard 3.05c, Multiple Relationships.)	EC recommendation based upon earlier rationale
10.03 Group Therapy When psychologists provide services to several persons in a group setting, psychologists describe at the outset the roles and responsibilities of all parties and the limits of confidentiality .	10.03 Group Therapy When psychologists provide services to several persons in a group setting, psychologists <u>they</u> describe at the outset the roles and responsibilities of all parties and the limits of confidentiality .	SK
10.04 Providing Therapy to Those Served by Others. In deciding whether to offer or provide services to those already receiving mental health services elsewhere, psychologists carefully consider the treatment issues and the potential client's/patient's welfare. Psychologists discuss these issues with the client/patient, or another legally authorized person on behalf of the client/patient, in order to minimize the risk of confusion and conflict, consult with the other service providers when appropriate, and proceed with caution and sensitivity to the therapeutic issues.		
10.05 Sexual Intimacies With Current Therapy Clients/Patients. Psychologists do not engage in sexual intimacies with current therapy clients/patients.		
10.06 Sexual Intimacies with Relatives or Significant Others of Current Therapy Clients/Patients. Psychologists do not engage in sexual intimacies	10.06 Sexual Intimacies with Relatives or Significant Others of Current Therapy Clients/Patients. Psychologists do not engage in sexual intimacies	<u>Div 42</u>

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with individuals they know to be the parents, guardians, spouses, significant others, children, or siblings of current clients/patients. Psychologists do not terminate therapy to circumvent this standard.	with individuals they know to be the <u>close relatives</u> parents, guardians, spouses, or significant others, children, or siblings of current clients/patients. Psychologists do not terminate therapy to circumvent this standard.	
10.07 Therapy With Former Sexual Partners. Psychologists do not accept as therapy clients/patients persons with whom they have engaged in sexual intimacies.		
10.08 Sexual Intimacies With Former Therapy Clients/Patients. (a) Psychologists do not engage in sexual intimacies with a former client/patient for at least two years after cessation or termination of therapy.	10.08 Sexual Intimacies With Former Therapy Clients/Patients. (a) Psychologists do not engage in sexual intimacies with a former clients/patients for at least two years after cessation or termination of therapy.	<i>Change client/patient to plural for consistency with (b).</i>
(b) Psychologists do not engage in sexual intimacies with former clients/patients even after a two-year interval except in the most unusual circumstances. Psychologists who engage in such activity after the two years following cessation or termination of therapy and of having no sexual contact with the former client/patient bear the burden of demonstrating that there has been no exploitation, in light of all relevant factors, including (1) the amount of time that has passed since therapy terminated, (2) the nature, duration, and intensity of the therapy, (3) the circumstances of termination, (4) the client's/patient's personal history, (5) the client's/patient's current mental status, (6) the likelihood of adverse impact on the client/patient, and (7) any statements or actions made by the therapist during the course of therapy suggesting or inviting the possibility of a post-termination sexual or romantic relationship with the client/patient. (See also Standard 3.05, Multiple Relationships.)		
10.09 Interruption of Therapy. When entering into employment or contractual relationships, psychologists make reasonable efforts to provide for orderly and appropriate resolution of responsibility for client/patient care in the event that the employment or contractual		

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relationship ends, with paramount consideration given to the welfare of the client/patient. (See also Standard 3.12, Interruption of Psychological Services.)		
10.10 Terminating Therapy . (a) Psychologists must terminate therapy when it becomes reasonably clear that the client/patient no longer needs the service, is not likely to benefit, or is being harmed by continued service.	10.10 Terminating Therapy . (a) Psychologists must terminate therapy when it becomes reasonably clear that the client/patient no longer needs the service, is not likely to benefit, or is being harmed by continued service.	The EC was not clear why the ECTF used the word "must" in this standard when it has not used such obligatory or imperative language in other standards.
(b) Psychologists may terminate therapy when threatened or otherwise endangered by the client/patient or another person with whom the client/patient has a relationship.		
(c) Except where precluded by the actions of clients/patients or third party payors, prior to termination psychologists provide pretermination counseling and suggest alternative service providers as appropriate.		