

The Effects and Effectiveness of Using Torture as an Interrogation Device: Using Research to Inform the Policy Debate

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Governments sometimes characterize torture as an indispensable interrogation tool for gathering strategic intelligence. In this article, we review the relevant social scientific research on the effectiveness, impact, and causes of torture. First, we summarize research on false confessions and examine the relevance of that research for torture-based interrogations. Next, we review research on the mental health consequences of torture for survivors and perpetrators. Finally, we explore the social-psychological conditions that promote acts of cruelty (such as those seen at Abu Ghraib) and examine the arguments typically offered to justify the use of torture. We argue that any hypothesized benefits from the use of torture must be weighed against the substantial proven costs of torture. These costs include the unreliable information extracted through interrogations using torture, the mental and emotional toll on victims and torturers, loss of international stature and credibility, and the risk of retaliation against soldiers and civilians.

Torture is one of the most extreme forms of human violence, resulting in both physical and psychological consequences. Torture has been used for thousands of years, and is still widespread, occurring throughout much of the world (Amnesty International, 2009). Research has shown that torture can have enduring negative effects on both survivors and perpetrators, and is ineffective for obtaining reliable information in interrogation. Although many international laws and codes have been established to prohibit torture, its widespread use continues as part of internal

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conflicts within nations, as well as in international conflicts. The issue of torture has most recently stirred debate with respect to interrogation practices used by the United States.

In 2003, the world was stunned by a series of photographs of prisoner abuse at Abu Ghraib prison in Iraq. These photos, taken by U.S. soldiers on cell phones and digital cameras, depicted prisoners subjected to cruel and humiliating treatment at the hands of U.S. troops. In one photo, a handcuffed, terrified prisoner is shown cornered by a snarling military dog straining against its leash. In many photos, naked prisoners had been forced to lie on top of one another in a pile or to simulate sexual acts. Several pictures show naked, hooded inmates handcuffed in painful positions to beds and cell bars. Some inmates have bleeding wounds; others appear to have wires attached to their bodies (Hersh, 2004). Some photos were especially disturbing because they show soldiers (both men and women) posing next to the abused prisoners, grinning or giving “thumbs up” signs, appearing to take sadistic pleasure in the abuse. In responding to the outcry created by the photos, soldiers explained that they had been instructed to “soften up” prisoners for more systematic interrogation (Scherer & Benjamin, 2003).

Other revelations followed. Allegations of torture surfaced at the U.S. detention facility at Guantanamo Bay, Cuba and at detention facilities in Afghanistan (Amnesty International, 2004, 2006). In 2005, information about the practice of “extraordinary rendition” became public. This vague, bureaucratic term refers to the U.S. practice of transporting suspected terrorists to secret locations in countries (e.g., Egypt, Jordan, Morocco, or Syria) that are known to use torture. Perhaps the most notorious interrogation technique used by the United States—now referred to as “waterboarding”—has roots in medieval torture chambers. In one variant of the technique, the person being interrogated is tied to a board and the board is tipped so that the prisoner’s head is submerged in a pool of water. In another variant, water is poured down the throat of the restrained prisoner. This simulated execution produces terror as the struggling suspect is forced to experience the sensation of drowning. The procedure can be repeated many times (although suspects may need to be revived if they lose consciousness) and does not leave physical bruises or scars. Porter Goss, former director of the CIA, defended waterboarding as a “professional interrogation technique” (Human Rights Watch, 2005). However, because of the report by the Office of Professional Responsibility related to the “enhanced interrogation techniques” used by CIA officials and the information within the 2004 CIA Inspector General Report, the U.S. Attorney General announced on August 24, 2009, that the Department of Justice would open a preliminary review into whether federal laws were violated in connection with interrogation of detainees held in the custody of the CIA (Holder, 2009).

There can be little doubt that the prisoner abuses at Abu Ghraib, and some of the interrogation techniques used by the United States qualify as torture by the standards of international law. Article 1 of the UN *Convention against Torture*

and other Cruel, Inhuman or Degrading Treatment (CAT) (United Nations, 1984, 1987), which was signed by the United States in 1988 and ratified in 1994, defines torture during interrogation 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 . . . 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 (p. 1)

Further, there is no acceptable justification that releases countries from their obligation to refrain from the use of torture. Article 2 (2) of the Convention states that: “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” (p. 1).

The U.N. definition of “torture” is intentionally broad. It is meant to encompass the brutal and diverse array of specific techniques that have been used to inflict physical and psychological pain on prisoners over the past several centuries. An alternative approach at definition might involve creating a catalog of practices that constitute torture. There are several problems with such an approach. First, because the number of practices is only limited by the sadistic imagination of torturers, no list is likely to be complete. Second, torture techniques are almost always used in combination. Using multiple techniques simultaneously (e.g., beating a blindfolded prisoner) or sequentially (e.g., beating followed by blindfolding) intensifies their impact on a victim. As one researcher put it,

Torture is always administered as a set of abuses. The idea that research might distill some set of torturous abuse (e.g., waterboarding) from nontorturous abuse (e.g., beating a person with a phonebook) neglects this reality. Torture is inflicted in a complete environment, a total institution, in which many forms of abuse are threatened and used; where surprise and fear and futility are engendered; and where the prisoner’s sense of resistance, escape, or obtaining relief is extinguished (Miles, 2009, p. 146).

Third, compiling a catalog of torture techniques might serve the interests of torturers—they could consult the list for new ideas, and if they managed to devise a novel method of inflicting pain, they could then argue that it does not constitute torture because it is not on any official list of torture techniques.

There have been data-based attempts to probe the definition of torture. In a sophisticated empirical study of 432 torture survivors, Metin Basoglu (2009) analyzed the psychological meaning of 46 torture techniques. Statistical analyses revealed seven underlying factors: sexual torture (e.g., rape, genital manipulation), physical torture (e.g., beating, burning), psychological manipulations (e.g., threats of torture, witnessing torture), humiliating treatment (e.g., forced nudity, feces in food), forced stress positions (e.g., forced standing for long periods, binding the body to restrict movement), sensory discomfort (e.g., extreme cold, blindfolding), and deprivation of basic needs (e.g., sleep, food). Among the other important

findings of this study was that “cruel, inhuman, and degrading treatment” was more strongly associated with perceived torture severity and lasting psychological damage than was physical torture. Based on this analysis, Basoglu argues for an inclusive, contextual definition that expands the focus beyond specific techniques and takes into account the loss of control, terror, feelings of helplessness, and lasting psychological damage experienced by victims of torture. He concludes that,

The broader definition of torture implied by these findings cannot be deemed overly inclusive without denying the reality of torture as it is practiced in real life situations. Such views reflect a rather stereotypical image of torture as involving only certain atrocious acts of physical violence. Although such disturbing images might be useful in channeling public reactions against torture, they also foster a skewed image of torture, reinforcing the perception in some people that “cruel, inhuman, and degrading” treatments do not amount to torture (p. 143).

In this article, we accept the U.N. definition because it is enshrined in international law and because the available research indicates that the U.N. definition captures the psychological reality of torture as experienced by survivors of torture.

Since the terrorist attacks of September 11, 2001, the national and international public debate over the use of torture in interrogations has focused on legal and moral issues. Often overlooked is the psychology of torture and the substantial body of empirical research relevant to the debate. This article summarizes that empirical research and places the issue of torture in social-psychological context. We begin by reviewing research on the psychology of coercive interrogations and the problem of false confessions. Next, we summarize the findings of research on the psychological impact of torture on victims and perpetrators. Finally, we place the issue of torture in context by exploring the situational factors that facilitate cruelty and the arguments used by governments and individuals to justify the use of torture.

Is Torture an Effective Interrogation Device?

As early as the third century A.D., the great Roman Jurist Ulpian noted that information obtained through torture was not to be trusted because some people are “so susceptible to pain that they will tell any lie rather than suffer it” (Peters, 1996). This warning about the unreliability of information extracted through the use of torture has echoed across the centuries. As one CIA operative who participated in torture during the Vietnam War put it, “We had people who were willing to confess to anything if we would just stop torturing them” (Andersen, 2004, p. 3). Indeed, the Army Field Manual explains that strategically useful information is best obtained from prisoners who are treated humanely, and that information obtained through torture has produced faulty intelligence (Leahy, 2005).

It is important to acknowledge that torture may sometimes lead to the disclosure of accurate information. That is, confronted with excruciating pain, some

people tell what they know. However, many survivors of torture report that the truthful information they revealed was intentionally incomplete or mixed with false information (Harbury, 2005). The goal was to appease the torturer, not to reveal the truth. And, because the interrogators were not omniscient, they could not discern which bits of information were true and which were false. Misreading their victims, torturers often failed to recognize the truth and continued to inflict pain. Victims continued to disclose, often fabricating information to in an effort to stop the pain (Conroy, 2000; Haritos-Fatouros, 2003). Many survivors of torture report that they would have said anything to “make the torture stop” (Mayer, 2005; McCoy, 2006). And, even in cases where torture may have preceded the disclosure of useful information, it is impossible to know whether less coercive forms of interrogation might have yielded the same or even better results.

False Confessions in the Criminal Justice System

Because torture-based interrogations are generally conducted in secret, there is no direct research on the relationship between torture and false confessions. However, there is irrefutable evidence from the civilian criminal justice system that techniques *much less coercive than torture* have produced verifiably false confessions in a surprising number of cases. An analysis of DNA exonerations of innocent but wrongly convicted criminal defendants revealed that false confessions are a major cause of wrongful convictions, accounting for 24% of the total (see www.innocenceproject.org). In a large-scale study, Drizin and Leo (2004) identified 125 proven false confessions over a 30-year period. Two characteristics of these known false confessions are notable. First, they tended to occur in the most serious cases—80% confessed to the crime of murder, and another 9% confessed to the crime of rape. Second, because only *proven* false confessions were included in the study (e.g., cases in which the confessor was later exonerated by DNA evidence, or cases where the defendant was in another country when the crime occurred); the actual number of false confessions over that period is far higher. The fundamental finding from this and other studies of false confessions is that as the coerciveness of the interrogation increases, so does the probability of eliciting a false confession (Kassin & Gudjonsson, 2004; Leo, 2008; Leo, Costanzo, & Shaked, 2009). Because the amount of coercion in torture-based interrogations is exponentially greater than that in criminal interrogations torture is likely to elicit a substantially higher portion of false confessions.

It is usually very difficult to distinguish between true and false information disclosed by a suspect during interrogation. Torturers may extract large quantities of information, but the proportion of true to false information is difficult to determine. Unfortunately, actions based on false information will waste time, lead in the wrong direction, put soldiers at risk, and put the lives of innocent people in jeopardy. We know from the civilian criminal justice system that people cannot easily recognize false confessions. Indeed, researchers have found that when

criminal defendants falsely confess, then plead “not guilty” and proceed to trial, they are nonetheless convicted 81% of the time (Drizin & Leo, 2004), often on the basis of their confessions alone. Clearly, the truth or falsity of statements made during interrogations is not self-evident to police, prosecutors, judges, or juries.

Deciding Who to Torture

Ideally, the decision to interrogate is based on solid evidence linking a suspect to terrorist activities or indicating that a suspect is in possession of vital information. However, too often, the decision to interrogate is based on whether a suspect seems to fit a “terrorist profile,” behavior that is perceived as suspicious, or association with known or suspected terrorists. In 2002, Maher Arar, a Canadian citizen of Syrian birth, was seized by U.S. officials at Kennedy International Airport. He was subjected to intense interrogation over the course of several days, and then flown to Syria for in-depth interrogation. He was held in a small, dimly lit prison cell and repeatedly beaten over the course of 10 months. To stop the torture, Arar falsely confessed to having received terrorist training in Afghanistan, a country he had never even visited. What precipitated Arar’s harrowing ordeal was his apparent friendship with a man believed to be associated with Al Qaeda. In 2006, after reviewing of all the relevant documents and evidence, the head of a Canadian government commission summarized their findings: “I am able to say categorically that there is no evidence to indicate that Mr. Arar has committed any offence or that his activities constitute a threat to the security of Canada” (O’Connor, 2006, p. 2). Of the more than 700 men held at Guantanamo Bay since 2002, many are now acknowledged as “merely guilty of being in the wrong place at the wrong time.” Originally described as “the worst of the worst,” many were subjected to torture. Now, more than 400 of these men have been released or cleared for release (Center for Constitutional Rights, 2009).

A related complication is that intelligence gathering typically involves the time-consuming and laborious process of sifting through mountains of information to identify suspected terrorists. This process often yields many suspects but few confirmed terrorists. For example, in the two and a half years following the September 11, 2001 terrorist attacks, U.S. intelligence agencies arrested more than 5,000 suspected terrorists. There was sufficient hard evidence to bring formal charges against only three of these suspects and only one of these three was convicted (Scarry, 2005). If the false alarm rate is high, and torture is an interrogation option, it is inevitable that many innocent suspects will be tortured.

Perceived Deception and Torture

Perceived deception often serves as the trigger for the use of torture. Based on good or flawed information, some people become classified as “persons of

interest,” terrorist sympathizers, or threats to national security. These people may then be interrogated. Once an interrogation begins, it will continue or escalate in intensity because interrogators believe that the suspect is lying or withholding valuable information. When torture is an available option, interrogators are likely to resort to torture when they believe a suspect is lying about what he or she knows or does not know. Unfortunately, there is no evidence that interrogators are able to tell whether or not a suspect is lying. On the contrary, there is research demonstrating that trained interrogators are no more accurate than others at discerning truth from deception. As the report of the National Defense Intelligence College (2006) noted, “most studies show that trained and untrained evaluators (police officers and college students) are equally poor at distinguishing between the confessions of guilty and innocent study subjects, even when viewing videotaped interviews from law enforcement situations” (p. 304).

Interrogators are trained to observe a suspect’s verbal and nonverbal behaviors as a means of determining whether the suspect is being truthful or deceptive (Costanzo & Leo, 2007). Consistent with a widely held but misleading “liar stereotype,” behaviors such as closed postures, gaze aversion, nervous or evasive responses to questions, and grooming gestures are mistakenly regarded as indicators of deception (Bond & DePaulo, 2006). Despite this misconception, the most widely used criminal interrogation method claims that, by observing these behavioral cues, interrogators can identify lies with an accuracy rate of 80%–90% (Inbau, Reid, Buckley, & Jayne, 2001). Research does not support this claim. The average person can differentiate lies from truths at a rate only slightly better than chance—around 54% where chance accuracy is 50% (DePaulo et al., 2003). People with relevant professional training (e.g., interrogators, polygraphers, customs officers) do no better; they are also able to detect deception at a level only slightly above chance (Garrido, Masip, & Herrero, 2004; Vrij, 2004; Vrij & Mann, 2001). In an interesting study of lie detection abilities, prison inmates were videotaped offering a true confession to the crime they were incarcerated for, and a false confession to a crime committed by another inmate (Kassin, Meissner, & Norwick, 2005). Police investigators and college students then attempted to judge which confessions were true or false. Students exceeded chance levels of accuracy (53.4%) but police investigators scored below chance (42.1%). Although specialized training in interrogation techniques does not appear to improve the ability to discern lying, it does increase the *confidence* of interrogators in their ability to tell whether a suspect is lying or withholding information (Kassin & Fong, 1999). This high confidence/low accuracy combination places suspects in great peril when torture is an option in the interrogation room. Interrogators who are confident but wrong in their judgment that a suspect is lying are likely to turn to torture as a means of forcing a suspect to tell the “truth.”

In addition, some researchers have identified a troubling perceptual bias among people who have received interrogation training: An increased tendency

to believe that others are lying to them (Masip, Alonso, Garrido, & Anton, 2006). This bias increases the rate of false positives—people who are wrongly believed to be lying when, in fact, they are telling the truth. The presumption that a suspect is lying, in combination with the overconfidence produced by interrogation training, leads to a biased style of questioning that seeks to confirm guilt while ignoring or discounting information that suggests a suspect is being truthful (Meissner & Kassin, 2002). Interrogators are likely to become most coercive when questioning innocent suspects who are perceived to be lying, because these truthful suspects are regarded as resistant and defiant (Kassin, Goldstein, & Savitsky, 2003). Thus, interrogators who have been authorized to use torture may be especially likely to resort to torture when faced with persistent denials by innocent suspects. Under such emotionally charged conditions, there is a real danger that torture may be used to punish a suspect, or simply as an expression of frustration and desperation on the part of the interrogator.

The ability to detect deception is not likely to improve substantially in the foreseeable future. So far, attempts to improve people's lie detection abilities through training have produced only modest gains (and sometimes modest losses) (DePaulo et al., 2003). Furthermore, there appears to be no technological fix on the horizon. So far, technology-based techniques of lie detection including the polygraph, as well as more recent techniques (e.g., brain scans, infrared light, voice stress, and thermal imaging), have not demonstrated high rates of accuracy (Fiedler, Schmid, & Stahl, 2002; Rosenfeld, 2005; Wolpe, Foster, & Langleben, 2005). And, like the polygraph (National Research Council, 2003), these newer methods have unacceptably high false positive rates. The underlying problems with the detection of truth and deception are exacerbated under specific types of interrogation, and can further complicate the ability of investigators to obtain reliable information in national security situations.

Differences between Criminal and National Security Interrogations

In several important respects, civilian criminal interrogations differ from national security interrogations conducted by the military or intelligence agencies. These differences tend to make the risk of eliciting unreliable information greater for national security than for criminal interrogations. Factors such as coerciveness, time focus (past vs. future), suspect resistance, cultural misunderstanding, and the capacity to verify information can affect the process of interrogation in distinct ways.

Coerciveness

As noted earlier, the basic finding from decades of research on criminal interrogations is that strong coercion increases the probability of false confessions

(Kassin & Gudjonsson, 2004). Perhaps the simplest element of coercion is time. One of the most striking features of false confessions is that they were the product of long interrogations. According to an empirical study by Leo (1996), civilian interrogations last, on average, about 2 hours. However, for proven false confessions, the average length of interrogation was 16.3 hours (Drizin & Leo, 2004). Longer interrogations appear to increase the risk of false confessions by wearing down the suspect and thus impairing his or her ability and motivation to resist pressure. As Davis and O'Donahue (2003) point out, exhaustion "may lead to greater interrogative suggestibility via deficits in speed of thinking, concentration, motivation, confidence, ability to control attention, and ability to ignore irrelevant or misleading information" (p. 957). In the case of suspected terrorists, exceedingly long interrogations are the rule rather than the exception. Suspects may be interrogated repeatedly over the course of days, weeks, or even months. Many prisoners have now been held at Guantanamo Bay for a period of years. Because of the secrecy surrounding their captivity, it is impossible to know how many times and how many hours each prisoner has been interrogated.

In the civilian criminal justice system, there are institutional restraints on the behavior of police interrogators. These restraints are designed to reduce coerciveness. Although police interrogations sometimes physically abuse suspects in their custody, such instances are rare and can lead to loss of job and criminal prosecution. A confession can be ruled inadmissible at trial if a judge looking at the "totality of circumstances" surrounding a confession finds that it was coerced (Costanzo & Leo, 2007). For example, a confession might be viewed as coerced if there were promises of leniency, threats of punishment, sleep or food deprivation, or if the interrogation was excessively long. In contrast, it is precisely such tactics—as well as physical and psychological cruelty—that are intentionally employed in torture-based interrogations of terrorist suspects. Indeed, the very conditions that police interrogators must avoid—excessively long interrogations, sleep and food deprivation, explicit threats and promises, infliction of physical pain—are the basic tools of torture-based interrogations.

Future Focus

The task of military interrogators is intrinsically more complex than that of civilian interrogators trying to solve a crime. In the civilian criminal justice system, interrogations are designed to yield a confession that will lead to a conviction. The goal is to get a criminal to admit he or she committed a crime, to fill in details about how the crime was committed, and sometimes to find out where evidence (e.g., money, a weapon, or a body) is hidden. For civilian interrogators, the focus is almost always on a crime that has already occurred. In contrast, when military interrogators interview a terrorist suspect, the focus is primarily on the future. This is the first major difference that creates problems

for interrogators who use torture. The goal is to obtain information that will prevent future terrorist attacks. Although it may be useful to understand how past attacks were carried out, the widely used official rationale for torture-based interrogations is that the information gained through torture makes us safer and saves innocent lives by preventing future attacks. Unfortunately, it is easier to confirm what has already happened than it is to prevent what might happen later. The past holds still but the future does not. If a “high value” person is captured, the future plans of terrorist organizations are likely to be changed (Haritos-Fatouros, 2003).

Suspect Resistance

It has often been noted that Al Qaeda is a highly decentralized organization with many autonomous cells that do not share information about future attacks (CNN, 2006). As with other terrorist organizations, very few people know all the strategically critical information. This fact creates a second problem for the torturer: the people who possess the most valuable information are also the ones most likely to be able to resist torture. That is, the people in possession of vital information are precisely those who have been selected and trained to withhold true information when tortured and to provide disinformation to their captors when interrogated. This kind of training is currently provided worldwide, including in the United States. As part of its Survival, Evasion, Resistance, and Escape (SERE) training program, the U.S. military attempts to teach its “high value” personnel how to withhold or distort vital information during torture-based interrogations (Doran, Hoyt, & Morgan, 2006).

Culture

In the context of the current war on terror, interrogations of suspected terrorists are often complicated by the overlay of culture. Typically, American interrogators are questioning Middle Eastern suspects and, often, questions and answers must go through a translator. People from different cultures vary significantly in their emotional and nonverbal displays (Matsumoto, 2004) and in their tendency to offer false confessions when coerced (Leo et al., 2009). A lack of familiarity with the culture of the suspect amplifies the possibility that interrogators will misinterpret behavior. Research has shown that the ability to tell whether someone is being deceptive is worse when the person making the judgment is from a different culture than the person being judged (Bond, Omar, Mahmoud, & Bonser, 1999). Thus, the overlay of culture is likely to raise the risk of error of the already error-prone judgments about whether a suspect is lying or withholding information. Such judgments may even be influenced by conscious and nonconscious stereotyping and prejudice. Prejudice may lead interrogators to target suspects for torture based

on physical appearance, or to resort to torture on the basis of erroneous stereotypes about behavioral cues.

Verification

In the civilian criminal justice system, evidence must be tested in an adversarial forum. Prosecutors and defenders advocate for alternative views of the evidence and experts testify about the strengths and weaknesses of particular pieces of evidence. Impartial juries deliberate before a verdict is reached. Although research on wrongful convictions shows that the criminal justice system is not infallible (Scheck, Neufeld, & Dwyer, 2001), it does employ several checks and balances to increase the likelihood of reaching a correct decision. In contrast, during times of war, information extracted from interrogations may be acted upon quickly without slow, careful efforts to verify the accuracy of the information. For example, one interrogator who witnessed and participated in torture during the Vietnam War described how the information acquired through torture was translated into military action:

They can say look what we've got. We developed information about a Viet Cong political school and we are going to go in there and bomb the piss out of it . . . You don't know if the information is accurate, but there was information and there was an action based on it, so everybody is happy. You had a reason to go drop all these bombs instead of just dropping them on empty jungle. You had a target. That is what they looked for—body counts and hard targets (Conroy, 2000, p. 113).

Once torture occurs, the mental health consequences for victims, perpetrators, and communities are destructive and far-reaching.

Mental Health Consequences of Torture

Although attempts at justification for torture are often made by falsely claiming that torture is effective and needed to obtain critical information, in fact torture is often intended to break the spirit of a person and a community as a method of punishment or control. The increased use of psychological or physical methods, which leave no or little physical evidence, is part of the process of such control. Though ineffective, these methods cause long-lasting harm to those who are able to survive torture and even to perpetrators, especially those, such as child soldiers, who are forced to become perpetrators as part of war or genocide.

Effects on Torture Survivors

Despite potentially confounding variables, including related stressors (such as refugee experiences or traumatic bereavement), and comorbid conditions (such as anxiety, depression, or physical injury), torture itself has been shown to be

directly linked to posttraumatic stress disorder (PTSD) and many other symptoms and disabilities. The findings from both uncontrolled and controlled studies have documented substantial evidence that for some individuals, torture has serious and long-lasting psychological consequences (Basoglu, 2009; de Jong et al., 2001; Gerrity, Keane, & Tuma, 2001; Keller et al., 2006; Silove, Steel, McGorry, Miles, & Drobny, 2002).

Many of these studies included refugee populations, who are particularly vulnerable to torture because they are often exposed to war situations and because they typically lack the protection of any government as they move from country to country. As the number of refugees increases, so too do the treatment needs of survivors of torture (Keller et al., 2006; Porter & Haslam, 2005).

Comprehensive reviews of the psychological effects of torture (Basoglu, Jaranson, Mollica, & Kastrup, 2001; Gerrity et al., 2001; Quiroga & Jaranson, 2005; Turner, 2004) have systematically evaluated research with torture survivors, examining the unique consequences associated with torture and the complex interaction of social, environmental, and justice-related issues. The psychological problems most commonly reported by torture survivors in research studies include: (a) psychological symptoms (anxiety, depression, irritability or aggressiveness, emotional lability, self-isolation or social withdrawal); (b) cognitive symptoms (confusion or disorientation, impaired memory and concentration); and (c) neurovegetative symptoms (insomnia, nightmares, sexual dysfunction) (Basoglu et al., 2001). Depression, anxiety disorder, panic disorder, and other psychiatric illnesses are also commonly diagnosed following torture (Vinck, Pham, Stover, & Weinstein, 2007).

The effects of torture can extend throughout the life of the survivor affecting his or her psychological, familial, and economic functioning (Basoglu et al., 2005; Bichescu, Neuner, Schauer, & Elbert, 2007; Kahana & Kahana, 2001; Mollica, Caridad, & Massagli, 2007; Steel, Silove, Phan, & Bauman, 2002; Vojvoda, Weine, McGlashan, Becker, & Southwick, 2008). Psychologists involved in the evaluation of survivors of torture experienced at Guantanamo reported severe psychological and physical outcomes (Keller, 2008). Some torture studies focus on the comorbidity of PTSD with other conditions, such as chronic pain (Liedl & Knaevelsrud, 2008), attachment disorders (Solomon, Dekel, & Mikulincer, 2008), and many somatic symptoms (Hollifield, Warner, Krako, Jenkins, & Westermeyer, 2009). A review by Hunt et al. (2008) showed a strong relationship between the torture experiences of former prisoners of war of World War II, Vietnam, and Korea and long-term disability.

Studies conducted over the past 15 years strongly suggest that people who develop PTSD may also experience serious neurobiological changes, including: (a) changes in the body's ability to respond to stress through alterations in stress hormones; (b) changes in attention and arousal through changes in neurotransmitter system; (c) development of an imbalance in the noradrenergic system;

(d) heightened psychophysiological arousal and reactivity; and (e) possible changes in the hippocampus, an area of the brain related to contextual memory (Bonne et al., 2008; Friedman, Keane, & Resick, 2007; Golier, Schmeidler, & Yehuda, 2009; Isaac, Cushway, & Jones, 2006; Nemeroff et al., 2006; Southwick et al., 2007). Clearly, torture-related PTSD has direct implications for the functioning of numerous biological systems essential to human functioning.

The role of dissociation in the experience of trauma and as it relates to treatment success is a significant issue in the current debate about the applicability of the PTSD diagnosis and the complexity of long-term exposure to trauma (Frewen & Lanius, 2006). As described by van der Kolk and his colleagues (van der Kolk, Van der Hart, & Marmar, 1996) dissociation refers to: (a) the intrusion into conscious awareness of fragmented traumatic memories, usually in sensory rather than verbal form (primary dissociation); (b) the experience of mentally leaving the body and observing what is happening while experiencing the trauma (secondary dissociation); and (c) the development of an identity that contains the traumatic experience and its related emotions (tertiary dissociation, which is related to dissociative identity disorder). These experiences are common among torture survivors, and research has focused on the neurobiology of these states (Frewen & Lanius, 2006; Hopper, Frewen, van der Kolk, & Lanius, 2007) as well as treatment effectiveness (Ogden, Pain, & Fisher, 2006). A study by Ray et al. (2006) presents results that link the slowing of brain wave function with the difficulty trauma survivors may have in accessing structured verbal memory—a finding with clear implications for treatment.

Research on children has explored the impact of severe trauma on the brain (Tupler & De Bellis, 2006), and the situational factors that affect children's development and mental health, such as the witnessing of the killing of their parents or participation in war (Baro, 2006; Khan & Margoob, 2006; Qouta, Punamaki, Montgomery, & Sarraj, 2007; Wexler, Branski, & Kerim, 2006). Untreated trauma can lead to lifelong difficulties and disability, and a supportive environment can contribute to resilience and healing (Daud, af Klinteberg, & Rydelius, 2008). Research on disability and daily functioning (in addition to diagnostic symptoms) can provide valuable data for treatment planning and secondary prevention. It can also provide valuable information on the clinical relevance of Western psychiatric constructs that may (or may not) be relevant in particular cultures (Tol et al., 2007), especially when other refugee, asylum, or war-related factors are present.

The political and war-related situations where torture usually occurs can make it difficult to treat torture survivors and to conduct research. Also, because the study of torture victims is a relatively young field of research, the development of valid and reliable instruments is fairly recent, although there are now a few such measures, including the *Harvard Trauma Questionnaire* and the *Hopkins Symptom Checklist-25* (Mollica, McDonald, Massagli, & Silove, 2004). These instruments are being adapted successfully with refugee populations and torture

survivors (Shoeb, Weinstein, & Mollica, 2007; Silove et al., 2007). Despite numerous challenges, many clinicians and researchers continue to be involved in improving the identification and documentation of the effects of torture, either in the country of origin, or with refugees and immigrants in other countries.

Methods for determining the nature and extent of torture vary widely among research studies (Basoglu, 2009; Steel et al., 2009). Studies with torture survivors often use convenience or nonrandom samples, relying on data collected from clinical interviews or self-report questionnaires. Although such studies are critically important to shed light on the experiences of torture survivors, other researchers have also used comparison groups, control groups, standardized measures, and other more rigorous methodology when conditions permitted. The work of Metin Basoglu and his colleagues (Basoglu et al., 2001; Basoglu et al., 2005; Basoglu, Livanou, & Crnobaric, 2007) has examined closely the characteristics of torture and the specific consequences. Most recently, Basoglu (2009) analyzed the results of two large scale studies of torture survivors to more closely examine the definition of torture and its relationship to “cruel, inhuman, and degrading treatment” (CIDT), language that is included in the UN’s definition of torture. As noted earlier, Basoglu utilized multivariate analyses to reveal the complex relationship between CIDT, physical torture, and the consequences. His study showed that CIDT is “not only associated with greater perceived severity of torture but also poses a greater risk for prolonged mental harm” (p. 141). This study also showed the importance of the torture context, emphasizing the inadequacy of focusing on a single technique or trauma type, when in most instances, torture is conducted within an environment of deprivation, isolation, threat, and captivity, often for long periods of time.

Steel and his colleagues (2009) similarly advanced the understanding of the complex impact of torture by conducting a rigorous meta-analysis of 181 epidemiological surveys in the refugee and postconflict mental health field, with a special emphasis on examining the impact of research methodologies on prevalence rates. His results showed that, while prevalence rates of psychological disorders, especially PTSD and depression, could be explained in part by methodological factors, such as sampling and choice of diagnostic instruments, that substantive risk factors were equally and sometimes more important. Steel et al. reported that torture was the strongest substantive factor associated with PTSD and that cumulative exposure to potentially traumatic events was strongly associated with depression. Although other studies (Fazel, Wheeler, & Danish, 2005; Johnson & Thompson, 2008; Porter & Haslam, 2005) have also conducted such reviews and meta-analyses, the Steel et al. study is one of the most comprehensive to date that examines the complex nature of torture within a rigorous examination of methodology.

Most trauma experts, including survivors of torture, mental health researchers, and therapists, agree that the psychiatric diagnosis of PTSD (American Psychiatric

Association, 1994) is very relevant for torture survivors worldwide. The diagnosis of PTSD, as well as other Western psychiatric diagnoses, has been analyzed for its applicability across cultures and in relation to specific types of torture experiences and symptom presentation (Campbell, 2007; Keller et al., 2006). Researchers have found cross-cultural support for the diagnosis of PTSD, especially with regard to symptoms related to hyperarousal. Nonetheless, distinct features of cultural beliefs and symptomatology are critically important in both the assigning of a diagnosis and the development of treatment options (Rasmussen, Smith, & Keller, 2007).

These same experts emphasize that the consequences of torture go beyond psychiatric diagnoses and cultural issues, and researchers must address the distinct features of the torture experience that can have an impact on the psychological, functional, and social consequences of torture. Basoglu (2009) highlights, within a learning theory context, four contextual features of torture that distinguish it from other traumatic events, including: (a) intent; (b) purpose (e.g., to extract information, or apply punishment); (c) exposures to multiple, unpredictable, uncontrollable, and potentially traumatic events; and (d) deliberate attempts to remove control from the person and induce a state of total helplessness. Basoglu emphasizes the necessity of taking all of these features into account when determining the nature, scope, and consequences of torture, and how best to prevent torture and support recovery.

Personal accounts of the experience of torture (Chanin & McConnon, 2008; Graessner, Gurriss, & Pross, 2001; Ortiz, 2002) provide essential perspectives on the profound life-changing consequences of torture. Within the context of diagnosis, the International Classification of Diseases Coding system (ICD-10) attempts to capture the long-term existential consequences of the “tearing up of a social world” that is created by the experience of being tortured, by including a diagnosis of “Enduring Personality Change after Catastrophic Experience” (World Health Organization, 1992).

Effects on Perpetrators of Torture

Research that focuses directly on the psychological consequences of participating in torture as a perpetrator is rare. However, research on the role of health care providers in interrogation, research on specific kinds of war experience that thrust victims into a perpetrator role (including the experiences of child soldiers), and research on the impact of perpetrator impunity on victims of torture shed some light on the impact of torture on those who inflict it.

Robert Jay Lifton (1986) interviewed Nazi doctors who participated in human experimentation and killings, and found them to be “normal professionals” who offered medical justifications for the killings. He argued that while inside an “atrocious-producing” environment, a perpetrator of torture can believe that his or her behavior is normal, even desirable, behavior required or valued by peers

and supervisors. It may be only later, outside of that specific environment, that the torturer may question his or her behavior, and begin to experience psychological damage resulting from involvement in torture and trauma. In these cases, the resulting psychological symptoms are very similar to those of victims, including anxiety, intrusive traumatic memories, and impaired cognitive and social functioning. Interviews with former torturers illustrate the heavy psychological toll that participation in torture can have on perpetrators (Blumenfeld, 2007).

Studies of perpetrators of violent crimes have additional relevance for understanding the impact of torture on the torturers themselves. Evans, Ehlers, Mezey, and Clark (2007) examined the factors that determine whether perpetrators of violent crime develop intrusive memories of their actions. They found that 46% of respondents reported distressing intrusive memories, with 6% diagnosed with PTSD. In this study, dissociation during the trauma also occurred for some perpetrators and was associated with intrusive memories and PTSD, another similarity with victims of violence.

The case of child soldiers is an extreme example of the impact of participation in torture and the potential for perpetrators to be created within a social context. According to the Human Rights Watch (2008) and the Coalition to Stop the Use of Child Soldiers (2004), tens of thousands of children younger than 18 years are participating in military conflicts worldwide. In many instances, developmentally vulnerable children are abducted and forced to commit murder and other atrocities, and are often left physically disabled and psychologically traumatized when the conflict is over. In one study of former child soldiers (Bayer, Klasen, & Adam, 2007), participants who were diagnosed with PTSD were also less open to reconciliation and harbored more feelings of revenge. These children reported being violently recruited at a young age (mean age = 12), had been involved as soldiers for 3 years on average, and were exposed to high levels of potentially traumatic events. Most of the children reported witnessing killings and other atrocities, and a majority reported killing another person. The role of psychological trauma and the complex relationship between their roles as victims and perpetrators are issues that are important to treatment and the healing of these children, their families, and their communities. A more recent study of former child soldiers (Kohrt et al., 2008) showed more severe mental health problems, including depression and PTSD, among the conscripted children as compared to children who had never been conscripted into armed groups. These children were trained at a young age to commit atrocities, and after their release, will face many challenges when they try to resume a more normal development and life.

In his analyses of physicians and other health providers who are involved in forms of military interrogation, Lifton (2004) further elaborates on environments where normal individuals may forsake personal or professional values in an environment where torture is the norm. One element of such environments is the role of power, and the assigning of authority or power to individuals to perpetrate

torture (Keltner, Gruenfeld, & Anderson, 2003). Physicians, psychologists, and other health care professionals may, through their actions and a conflict with “dual loyalties,” transfer legitimacy to a torture situation, supporting an illusion for all participants that some form of therapy or medical purpose is being pursued (Crosby, Apovian, & Grodin, 2007; Kottow, 2006). These issues have been part of the current debate regarding the documented role of psychologists and other health professionals in the interrogation and torture training related to the “war on terror” (Miles, 2006, 2007; Office of the Inspector General of the Department of Defense, 2006). For the victims, seeing individuals such as doctors or psychologists whose professional identity is as a “healer” participating in their torture can damage the legitimate role that physicians or therapists could later provide in offering treatment or social support. This experience could close the door to ethical treatment and social support, which are essential components in the process of recovery for trauma survivors (Office of Surgeon General, 2005; Quiroga & Jaranson, 2005; Sonntag, 2008).

Another relevant situational variable important to recovery is the perceived accountability for the actions of the torturers. Impunity for perpetrators of torture can affect the victim, the perpetrator, and the community. Impunity produces an erosion of moral codes; an implied acceptance of violent behavior in the community; feelings of fear; helplessness and insecurity; and social alienation manifested by feelings of failure and skepticism, frustration, and addictive or violent behavior (Basoglu et al., 2005). Clinical reports have shown the critical significance of this issue for survivors of torture. Where legal justice has occurred, recovery was supported (Rauchfuss & Schmolze, 2008). Cognitive theories of trauma predict such outcomes, in that PTSD is mediated by a violation of previously held assumptions of invulnerability and personal safety (Foa, Steketee, & Rothbaum, 1989; Janoff-Bulman, 1992), inability to find an acceptable explanation for the trauma (Lifton & Olson, 1976), and violation of beliefs that the world is a just and orderly place (Basoglu et al., 2005). Basoglu et al. (2005) examined the impact of sociopolitical processes on the psychiatric and cognitive effects of torture, especially the sense of injustice arising from perpetrator impunity. They found that, even more significant than retribution and reparation, the loss of control and ongoing fear that survivors may experience when torturers are not punished for their actions will affect their recovery. They emphasize that a sense of safety and control in relation to the perpetrators of torture are critical to therapeutic outcomes. The issue of failure to prosecute torturers is even more important in countries where those responsible for human rights violations continue to be in power.

Being forced into committing atrocities during wartime is one way that individuals become torturers. More often, individuals abdicate their own personal beliefs and instead assume the values of an institution or group that promotes torture and other atrocities. Individuals may sometimes become caught up in

situations that facilitate cruelty. At least temporarily, such situations may allow perpetrators of torture to feel justified in their actions.

Situational Forces Promoting Cruelty: Psychological Dynamics at Abu Ghraib

Although the official goal of intelligence gathering opened the door for the torture of prisoners at Abu Ghraib, the photos and accounts of abuse are probably best understood as the result of powerful situational forces that promoted cruelty. Decades of research by social psychologists has demonstrated that strong situational forces can overwhelm an individual's better impulses and cause good people to treat others cruelly (Fiske, Harris, & Cuddy, 2004; Ross & Nisbett, 1991).

A key finding of Milgram's groundbreaking studies of obedience was that the presence of an authority figure who appeared to approve the use of cruelty dramatically increased people's willingness to inflict pain on others (e.g., Milgram, 1974). Clearly, "normal" people can become aggressive and abusive toward others in a context that explains or promotes such behavior. According to first hand accounts from personnel at Abu Ghraib, supervisors at the prison sometimes encouraged and other times simply ignored the abuse of prisoners (Kennedy, 2007). Guards were given vague instructions to "soften up" prisoners for interrogation and to make prisoners "ready to talk" (Frontline, 2006). There was little guidance about how to get prisoners ready to talk, and once the abusive behavior began, there was no forceful attempt to stop the abuse or to hold the abusers accountable. Over time, the abuse escalated, becoming more frequent and more severe.

A lack of clear instructions, a lack of specific training, a lack of direct supervision (particularly during the night shifts), and a lack of accountability all contributed to the extreme and widespread abuse at Abu Ghraib (Einolf, 2009; Gourevitch & Morris, 2008). Group cohesiveness also appears to have played a role. Because, during battle, soldiers must rely on members of their team to protect their lives, each is expected to act as part of a mutually supportive team. This group cohesiveness and strong sense of loyalty to one's group prevented many at Abu Ghraib from reporting the abuse, and even created pressures to participate in the torture of prisoners. Functioning as part of a team, responsibility was diffused among a large group (Mayer, 2008).

Times of intense group conflict amplify the human tendency to negatively stereotype members of opposing groups (Hewstone & Greenland, 2000; Zarate, Garcia, Garza, & Hitlan, 2004). Further, when our own mortality is made salient (as it inevitably is during times of war) we are especially likely to demean and seek to punish people from out-groups who are seen as threats to our basic values and worldviews (Pyszczynski, Solomon, & Jeff Greenberg, 2003). Members of the opposing group become dehumanized—they are regarded as less than human and undeserving of normal compassion. This process of dehumanization is facilitated

if members of an enemy group speak a different language or if they look and act differently than one's own group (Mullen & Rice, 2003). And, if the opposing group is blamed as the source of problems—as they typically are during wartime—aggression against that group is much easier to justify. Indeed, violence against the group may come to be seen as essential for bringing about peace or social justice (Opotow, 2007; Staub, 1989), and the worst atrocities are likely to occur when people believe they are defending their group against an enemy (Haslam & Reicher, 2005).

Prisons tend to facilitate dehumanization. A large power disparity between groups, such as the disparity that exists between prisoners and guards, makes abusive behavior easier (Haney, Banks, & Zimbardo, 1973). Because prisoners of war are often held in crowded, substandard conditions and treated like animals, it becomes easier to view them as less than human. Further, during times of war, animosities from the battlefield cannot be easily switched off when someone who might have been an enemy soldier is now a prisoner. The prison environment is particularly likely to encourage abusive behavior because it offers many opportunities for degradation and cruelty (Darley, 1992; Haritos-Fatouros, 2003).

Whereas dehumanization refers to distorted perceptions of the opposing group, the concept of deindividuation refers to the increased sense of anonymity and decreased self-awareness among perpetrators of violence. Deindividuation reduces inhibitions against cruelty. It is promoted by immersing oneself in a group or by changing one's physical appearance in ways that mute individual identity (Waller, 2002; Zimbardo, 2004). A core aspect of military socialization involves training soldiers to subordinate individual identities and goals to those of the group. Wearing of uniforms, strict rules about personal appearance and hairstyles, and repetitive group drills communicate to individual soldiers that one's own needs and desires must be subservient to those of the group (Dyer, 2004). Although military socialization may be necessary to produce a combat-ready force, it has the secondary effect of making the individual soldier more anonymous and deindividuated. This reduced self-awareness weakens internal controls on shame, guilt, and violent behavior. Just as socialization into the military is a gradual process, so is the process of becoming someone who inflicts torture. It is unusual for people who have never participated in cruelty to suddenly become torturers. For most of those who participated in the Abu Ghraib abuses, the process appears to have begun by witnessing abusive behavior by another soldier. The next step usually involved being part of a group that participated in abuse, and the final step was inflicting physical pain on a prisoner (Kennedy, 2007). For many, full participation in the torture of prisoners was the final, small step in an incremental process.

Compliance with local authorities, dehumanization of the prisoners, deindividuation of the guards, a lack of clear instructions about the treatment of prisoners, and a lack of accountability for abusive behavior, all appear to have contributed to prisoner abuses at Abu Ghraib. These conditions, combined with the situational

stressors of long hours, inadequate staffing, sleep deprivation, fear, and the relentless boredom of working in an enclosed facility created an environment ripe for cruelty. Abu Ghraib serves as a dramatic and disturbing reminder that it is essential for military authorities to issue clear directives on unacceptable practices for the treatment of prisoners (Fay, 2004; Physicians for Human Rights, 2005). These directives need to be combined with appropriate personnel training, effective monitoring, and strict accountability for violations of standards.

We now turn to the justifications that have been used to minimize and rationalize the use of torture. These justifications clear the path for the use of torture and allow torture to continue once its use has been revealed to the public.

The Psychology of Justifying Torture

When torture is used to achieve strategic goals, justifications become necessary. Politicians and government officials must find ways to explain and excuse the use of torture; people asked to implement the policy of torture must find psychological mechanisms for lowering their inhibitions against cruelty; and public advocates of torture must find rhetorical arguments for justifying a practice that is almost universally regarded as immoral.

When used on a large scale, torture is designed to terrorize, intimidate, punish, demoralize, and break the resistance of an enemy (Randall & Lutz, 1991; Miles, 2009). However, when modern democracies have used torture, they have almost always relied on a much more limited justification: that torture is a uniquely effective and indispensable interrogation device. This was the justification when England used torture in Northern Ireland, when Israel used torture against Palestinians, and when the United States used torture as part of its “war on terror” (Harbury, 2005). The assertion is that only torture will enable us to extract valid, “actionable” information from suspected enemies. The use of torture at Guantanamo Bay and at secret, so-called “black sites” in the Middle East was explicitly based on this assertion. And, although the prisoner abuses at Abu Ghraib went beyond the official goal of extracting information, those abuses were set in motion and legitimized by an official directive to prepare prisoners for interrogation (Hersh, 2004).

Political Justification

Scholars have analyzed the elements of the defensive responses common to many governments once their use of torture has been exposed (Conroy, 2000; Crelinsten & Schmid, 1995). Many aspects of these analyses are consistent with the response of the U.S. government to revelations that it used torture during interrogations. Initially, governments may deny that torture has been used. However, once the tactic of simple denial becomes untenable, it is common for governments to claim that their activities do not meet the definition of torture. A government’s

use of torture may be minimized as “vigorous” or “in-depth” or “enhanced” interrogation that does not result in lasting injuries. For example, in a series of memoranda issued from 2001 to 2004, the U.S. Departments of Justice and Defense argued that to qualify as torture, interrogation techniques would need to inflict pain, “. . . equivalent in intensity to the pain accompanying serious physical injury, such as organ failure, impairment of bodily function or even death”; that this “severe pain and suffering must be inflicted with specific intent”; and that, “the provisions of Geneva are not applicable to the interrogation of unlawful combatants” (Center for Constitutional Rights, 2007). Such attempts to narrow the definition of torture are frequently accompanied by attacks on those who revealed the abuses (e.g., journalists and human rights groups) and claims that those who expose or oppose the use of torture are guilty of giving comfort and encouragement to the enemy (Alford, 1990).

Government officials may also attempt to localize the problem in time or localize the problem within a few individuals. The time argument is that, although torture may have been used, it is no longer being used, so people who raise the topic are simply dredging up the past (McGuffin, 1974). The implication is that further discussion of past torture is no longer constructive, and might even be a dangerous distraction from the important task of responding to current and future threats. An especially common way of localizing the problem of torture is to claim that it was the work of a “few bad apples” who exceeded their authority and ignored official policy (Kelman, 2005; Mayer, 2008). This explanation was used at Abu Ghraib to exculpate all but a handful of soldiers in the prisoner abuse scandal. In attributional terms, the “bad apples” explanation offers a dispositional analysis—it lays the blame for cruelty on the flawed character of a few renegade soldiers. Simultaneously, this explanation discounts and diverts attention away from the situational forces that allow or encourage troops to act in abusive ways. Finally, government officials may claim that torture was an essential and effective tool that produced “invaluable” information that prevented attacks and saved countless lives (Conroy, 2000). This claim is impossible to verify because we cannot know why an attack did not occur, or even what information was disclosed as a result of torture.

Advocates of torture often refer to the hypothetical “ticking time bomb scenario” (e.g., Dershowitz, 2003). This widely used rhetorical justification for the use of torture as an interrogation tactic presupposes that a government has in its custody a terrorist who knows where a time bomb is hidden. That bomb will soon explode and kill many thousands of innocent people. Once advocates of torture lay out this scenario, we are asked the following question: Should the interrogator be permitted to use torture on the terrorist to extract information that will avert this impending massacre?

The implausible ticking-time-bomb scenario rests on several questionable assumptions: that a specific piece of “actionable” information could be used to

avert the disaster; that somehow interrogators know for certain that the suspect possesses specific information about the location of the bomb; that the threat is imminent; that only torture would lead to disclosure of the information; and that torture is the fastest means of extracting this valid, actionable information. Of course, part of the appeal of this scenario is that it also portrays the torturer as a principled, heroic figure who reluctantly uses torture to save innocent lives. This carefully rigged, forced-choice scenario pits the temporary pain of one evil person against the deaths of thousands (or even millions) of innocent people. And, once we have acknowledged that there might possibly be a situation where torture could yield precious, life-saving information, it is then a small step to conclude that we are sometimes morally obliged to use torture. While this scenario might provide a useful stimulus for discussion in college ethics courses, or an interesting plot device for a television drama, we can find no evidence that it has ever occurred and it appears highly improbable.

Psychological Justification

The concept of “moral disengagement” is an effort to describe the processes involved in placing some people or groups outside the moral boundaries that apply to one’s own group. According to Bandura (1999), three psychological processes are used to avoid the moral implications of cruelty and to rationalize activities such as torture. First, moral justification involves finding or inventing legitimating reasons for cruelty. Typically, the justification is that torture or killing is essential to create security and safety for one’s own group. The argument is that our group is acting in self-defense, and thus we are morally compelled to protect ourselves. This argument has been the primary justification for the United States’ use of torture in interrogation—that is, we must use torture because it is the only way of getting the information we need to prevent future terrorist attacks.

The second process involves the euphemistic labeling of abhorrent actions as a means of sanitizing, obscuring, or even redefining otherwise morally repugnant behavior. Prisoners are referred to as “detainees,” torture techniques become “alternative interrogation methods,” flying someone halfway around the world so that he can be tortured is labeled “extraordinary rendition.” And instead of pushing a prisoner’s head underwater to the brink of drowning, we are “waterboarding.” Such passive, agentless terminology conveys the impression that cruelty is being carried out by vague forces against unidentified others rather than by some people against other people (Bandura, 2004; McAlister, Bandura, & Owen, 2006).

The third process is the use of exonerating comparisons. By calling attention to cruelty more extreme than our own, our misdeeds are recast as comparatively minor and benign. This tactic is especially effective if it is possible to point to specific actions of the enemy. The 9/11 attacks killed thousands of innocents, and videos of Americans being beheaded in Iraq are available on the Internet.

Advocates of the use of torture have argued that, in comparison to such atrocities, our use of cruelty has been measured, reluctant, and only done to save lives. Governments (and the torturers themselves) may point out that others have used much crueler methods and, compared to those extreme methods, our actions should not even be considered torture.

The belief that torture-based interrogations can be used in a measured, precise way may be facilitated by the hindsight bias (Fischhoff, 1977). After an event occurs, we tend to exaggerate our ability to have foreseen that event. In retrospect, it seems that attacks should have been easily detected and thwarted. But it may not be that easy. In her classic analysis of the attack on Pearl Harbor, Wohlstetter (1962) observed that, in hindsight,

... a signal is always crystal clear; we can now see what disaster it was signaling since the disaster has occurred. But before the event it is obscure and pregnant with conflicting meanings (p. 387).

To use a more recent example of hindsight bias, for about a month prior to 9/11, Zacarius Moussaoui was held in a prison cell in Minnesota. In a request for a search warrant to investigate Moussaoui, a local field supervisor wrote that he was trying to prevent someone from “taking a plane and crashing into the World Trade Center” (Taylor, 2006). However, FBI headquarters failed to take this threat seriously. As the 9/11 Commission noted, our intelligence agencies failed to “connect the dots” that would have led to a recognition of the impending attacks (911 Commission Report). Although it is essential to strive to improve our ability to detect danger, the task may be much more difficult than we imagine. Consequently, the hypothetically precise, “surgical” use of torture against just the right person at just the right time to prevent an attack may never be achievable.

Conclusion: Consequences and Alternatives

Governments that allow for the use of torture typically argue that it is used in a precise, strictly controlled manner. But scholars have found that once torture is authorized, its use is very difficult to contain. The distinguished historian Alfred McCoy (2006) has analyzed the use of torture over several centuries and has concluded that: “Once torture begins, it seems to spread uncontrollably, particularly during times of crisis, in a downward spiral” (p. 209). For example, in 1987 the Landau Commission in Israel authorized interrogators to use “moderate physical pressure” (e.g., shaking, placing suspects in painful positions for hours) but only if necessary to gather information that might prevent terrorist attacks. Sadly, and perhaps predictably, reports by human rights organizations in the 1990s revealed that approximately 85% of Palestinian detainees were being subjected to physical abuse (Evans & Morgan, 1998). In 1999, the Israeli Supreme Court banned the practice of “physical pressure.” It appears that if torture is seen as an

acceptable tool of interrogation, the temptation to use that tool may be too strong to resist.

Although torture does not produce reliable information, it may persist because it satisfies psychological needs in times of stress. Specifically, it counters a sense of desperation, reassures interrogators that they are in control, and bestows a feeling of empowerment, at least in the enclosed world of the interrogation room (Carlsmith & Sood, 2009). As one scholar put it, “Even though torture is not, on balance, effective or rational, it persists through its deep psychological appeal, to the powerful and the powerless alike, in times of crisis” (McCoy, 2006, p. 207). Particularly in the aftermath of a horrible attack, like that which occurred on 9/11/2001, torture may be emotionally appealing. But it is worth considering whether the use of torture is truly motivated by a desire to gain valuable information, or by a desire to overcome a sense of powerlessness and to restore control, or even by a basic desire for revenge.

We do not yet know how many people have been tortured by the United States during its “war on terror.” We also do not yet know the full, long-term consequences of torture for American soldiers and citizens. Clearly, the photos from Abu Ghraib, the reports of abuses at Guantanamo Bay, and the accounts of people who have been tortured at black sites have severely damaged the moral authority of the United States (Kohut, 2007; Malinowski, 2008). But even from a short-term military perspective, the use of torture is likely to have counterproductive effects. The leadership of the Military has acknowledged that, “Not even a beaten enemy will surrender if he knows his captors will torture or kill him. He will resist and make his capture more costly. Fair treatment encourages the enemy to surrender” (Conroy, 2000, p. 115).

Finally, there is the problem of retaliation. In 2003, after the release of the Abu Ghraib photos, a reporter asked a young Iraqi man about the reasons for the rise in violence against U.S. soldiers. His response emphasized the imperative for revenge:

It is a shame for foreigners to put a bag over their heads, to make a man lie on the ground with your shoe on his neck . . . This is a great shame for the whole tribe. It is the duty of that man, and of our tribe, to get revenge on that soldier—to kill that man. Their duty is to attack them, to wash the shame. The shame is a stain, a dirty thing—they have to wash it. We cannot sleep until we have revenge (Danner, 2005, p. 12).

This is not merely the isolated response of one man. Summarizing decades of research on torture survivors, a leading scholar concluded that torture “. . . generates intense hatred and desire for vengeance against the perpetrators, radicalizing even ordinary people with no strong political views” (Basoglu, 2009, p. 142).

New and ongoing national and international efforts are addressing the practice of torture. In the United States, an ongoing legislative effort to help the recovery of survivors of torture, the *Torture Victims Relief Act*, is due to be reauthorized this year. This bill supports assistance for domestic and foreign programs and centers

for the treatment of victims of torture. Additionally, Congressional efforts are underway to close a loophole in legal prosecution of crimes against humanity, and to investigate torture-related actions that may have been in violation of national or international laws.

As was reported to the U.S. Helsinki Commission by representatives of the Physicians for Human Rights (Keller, 2008), policies must be established to undo any illegal actions that have been taken by the United States and its allies. Such policies would include the establishment of uniform codes of conduct prohibiting torture and other cruel, inhuman, and degrading treatment, the reparation for past torture of detainees, investigations of criminal conduct related to torture, and support for the physical and psychological recovery of survivors.

All countries have a responsibility to uphold the international and national human rights treaties that they have signed, and advocacy organizations such as Amnesty International, Physicians for Human Rights, and others work to shed light on abuses and to hold those who violate the treaties accountable. Similarly, international authorities, such as the UN Committee Against Torture, the UN Special Rapporteur on Torture, and the International Committee of the Red Cross, should be supported in their efforts to monitor abuses in places of detention and their findings should be widely reported.

With many policy or political issues, there are ambiguities that lead to the necessity of compromise. This is not the case with the policy of torture. Based on the available facts and research findings, it is clear that the use of torture-based interrogations should end. Torture-based interrogations are ineffective as a means of extracting reliable information and are likely to produce faulty intelligence. Torture has severe, long-term negative consequences for survivors, perpetrators, and communities. More broadly, the use of torture has far-reaching consequences: it damages the reputation of the United States, creates hostility toward our troops, provides a rationale for cruelty against U.S. soldiers and citizens, places the United States in the company of some of the most oppressive regimes in the world, and undermines our credibility when we argue for international human rights or any moral imperative. Any purported benefits of torture must be weighed against these substantial proven costs.

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