



BELLEVUE/NYU PROGRAM
FOR SURVIVORS OF TORTURE



THE CENTER
FOR VICTIMS OF
TORTURE



July 14, 2009

Dear Senator:

We write to you on behalf of the Center for Victims of Torture (CVT), the Bellevue/NYU Program for Survivors of Torture (PSOT), and Physicians for Human Rights (PHR) to impress upon you the substantial health concerns regarding indefinite detention. As the Administration and Congress weigh the possibility of institutionalizing indefinite detention for some detainees the severity of the mental health consequences of indefinite detention must be considered.

Our concerns are based on over 20 years of experience evaluating and caring for thousands of torture victims from all over the world. The current debate regarding the sanctioning of indefinite detention has focused on the legal and moral consequences -- that such a scheme is unconstitutional and antithetical to American values. While we appreciate these arguments, we believe that policy makers must also examine the serious medical repercussions of such detention -- repercussions that indisputably render indefinite detention to be "cruel, inhuman, and degrading" treatment.

Medical knowledge and experience clearly demonstrate that indefinite detention without charge or trial results in harmful mental health consequences including severe depression and anxiety. This is above and beyond the inherent and already quite substantial stressors of incarceration¹. In particular, the pervasive uncertainty of prolonged detention results in profound feelings of despair, hopelessness, anger and frustration. Vegetative symptoms, sleep difficulties, suicidal thoughts are common. Profound depression and vegetative symptoms result from realizing nothing that individuals do matters and that there is no way to end, foreshorten or even know the duration of their suffering.

Psychological studies have demonstrated that periods of temporal uncertainty create severe anxiety and feelings of helplessness.² Furthermore, research on other populations subjected to forms of indefinite detention, including detained asylum seekers in the United States³ Britain⁴ and Australia⁵, and Japanese-Americans⁶ who endured internment during the Second World War also show the severe burden of suffering that this open ended detention causes. Uncertainty in and of itself poses an additional burden of suffering in the context of chronic illnesses.⁷

¹ Haney, C. *Reforming Punishment: Psychological Limits to the Pains of Imprisonment*. 2005. ISBN: 1-59147-317-6

² Monat A et al. *Journal of Personality and Social Psychology* Vol. 24, No. 2, 237. 1972, 248

³ Keller A et al. *From Persecution to Prison: The Health Consequences of Immigration detention for Asylum Seekers in the U.S.* Boston: Physicians for Human Rights, Bellevue/NYU Program for Survivors of Torture. June 2003. available at: <http://physiciansforhumanrights.org/library/report-persprison.html>

⁴ Katy R, Robbins I, Senior V. Psychological distress amongst Immigration detainees. *British Journal of Clinical Psychology*. Vol 48, No. 3. Sept. 2009. 275-286.

⁵ Sheikh M, MacIntyre C Perera S. Preventive Detention: The ethical Ground Where Politics and Health Meet. Focus on Asylum Seekers in Australia. *Journal of Epidemiology and Community Health*. 2008. 62 (6) 480-483.

⁶ Potts M. Long-Term Effects of Trauma: Post-Traumatic Stress Among Civilian internees of the Japanese During World War II. *Journal of Clinical Psychology*. Sept. 1994. Vol 50, No. 5. 681.

⁷ Reich J, et al. Uncertainty of Illness Relationships with Mental Health and Coping Processes in Fibromyalgia Patients. *Journal of Behavioral Medicine*. Vol. 29, No. 4, August 2006. 307-310

Health professionals, including PSOT clinicians who have conducted clinical evaluations of current and former Guantanamo detainees, found that these individuals articulate tremendous despair and hopelessness from not knowing the parameters of their imprisonment. A 2008 study⁸ conducted by Physicians for Human Rights in which former detainees from Abu Ghraib and Guantanamo underwent detailed medical and mental health evaluations found that uncertainty was one of the most stressful factors among detainees ultimately released without ever having been charged. This uncertainty resulted in tremendous anxiety, numbing and disconnecting from feelings of hope. Such individuals see no end in sight and no systemic way of understanding their detention. They stop thinking about the future and become highly numb and detached. Attorneys representing Guantanamo detainees have also articulated these concerns.

We are heartened by the new Administration's and Congress' support for a complete prohibition of the use of torture and cruel, inhuman, and degrading treatment with respect to prisoners detained by the United States, a prohibition robustly supported by Congress. In light of this framework, it would be incongruous for the Administration and Congress to promote a scheme of detention that induces psychiatric trauma which leaves lasting and severe mental health repercussions. A responsible debate of the prospects of indefinite detention in Congress must include open acknowledgement of the serious medical and health consequences of this scheme of detention in the lives of detainees, and the implications of those consequences under the government's own prohibition against torture and cruel, inhuman, and degrading treatment under U.S. law and treaty obligations. Simply stated, if we would not want Americans subjected to indefinite detention, we should not subject others to it.

Sincerely,

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⁸ Hashemian F et al. Broken Laws, Broken Lives. Medical Evidence of Torture by the U.S. Boston: Physicians for Human Rights. Available at www.brokenlives.info