

EXHIBIT

A

decreasing order rank their subjective severity, i.e., how badly they affected him. Mr. Salim produced the following list.

1. Being placed in a dark room for a long period (i.e. several weeks) with loud music playing continuously (Tie with #2),
 2. Being hanged by his arms from the ceiling for longer nearly two days (Tie with #1),
 3. Being raped in Djibouti (Tie with #4),
 4. Being laid on a plastic sheet, having cold water poured on him, and then being wrapped in the sheet (Tie with #3),
 5. Being confined in a small box,
 6. Being shackled to the wall unable to stand or sit,
 7. Being tied on a table and then turned,
 8. Being washed by the guards like a baby (which Mr. Salim found very humiliating),
 9. Being asked questions while naked,
 10. Being beaten,
- (According to Mr. Salim, all the above except #3 happened at Cobalt)
11. Having a gun put to his head (at the Salt Pit),
 12. Being compelled to give untrue answers to questions.

Unranked event: After the above list had been completed, Mr. Salim also mentioned another traumatic event at Cobalt. A cloth was wrapped around his neck, and he was thrown against a wall, and he was punched and kicked.

During his captivity at Cobalt, Mr. Salim developed nightmares in which he thought he was being possessed by "djinnns" (demons).

himself to do it. He was unable to work for as long as he had before.

H) *Disturbance not attributable to the physiological effects of a substance or another medical condition.* Criterion met. No evidence of this.

Mr. Salim's symptoms appeared to be at their worst while he was imprisoned at Cobalt. At that time, his PTSD would be characterized as extreme. Over the 13 years since then, he has experienced a very substantial improvement. Prior to having his symptoms stirred up by the current lawsuit's discovery process, he was able to cope fairly well through avoidance. So long as he kept himself busy, he hardly thought about his captivity for months at a time. However, he remained vulnerable to becoming emotionally distressed should these memories be triggered, as in current lawsuit's discovery process. I anticipate that when this process has run its course, Mr. Salim's PTSD will return to the level it was at during 2016. As with most cases of PTSD, Mr. Salim's prognosis is also favorable for further, gradual improvement over the years. However, given the prior extreme nature of his PTSD, and the continuing vulnerability to its becoming triggered by reminders, I expect that he will continue to meet the criteria for diagnosable PTSD into the indefinite future. The possibility of his PTSD worsening upon further stressful events in his life will always be with him.

The question arises as to what portion of Mr. Salim's PTSD was caused by the use on him of the enhanced interrogation techniques (EITs) recommended to the CIA by Defendants, as spelled out in Memorandum from Jim Mitchell on Subject, "Description of Physical Pressure," July 9, 2002. Mr. Salim never met Defendants Mitchell and Jessen. Nor were they present any time he was being interrogated. Plaintiffs claim that techniques Mitchell and Jessen previously devised were used in their absence on Mr. Salim. Under History above, I have documented Mr. Salim's ranking (with no direction from me) of his most traumatic experiences, in *descending* order. According to his own rankings, and the subsequent symptoms he reported, most of Mr. Salim's PTSD seems to have derived from events that were either a) not part of Defendants' EITs, e.g., being raped in Djibouti, being doused with cold water, being asked questions while naked, being beaten, being tied on a table and turned,

being shackled to the wall unable to stand or sit, and having a gun put to his head at the Salt Pit; or b) gross exaggerations of Defendants' EITs performed in the absence of Defendants' supervision. For example, per the Memorandum from Jim Mitchell on Subject, "Description of Physical Pressure," July 9, 2002, "walling," consists of the individual's being pulled forward and then quickly and firmly pushed into the wall." It does not include being punched and kicked, which Mr. Salim reported was done to him while he was being "walled."

For another example, per Mitchell and Jessen, "stress positions" are supposed to "focus on producing mild physical discomfort from prolonged muscle use, rather than pain associated with contortions or twisting of the body." Examples given include "the subject sitting on the floor with legs extended straight out in front of him with his arms raised above his head," and "having the subject kneel on the floor and lean back at a 45 degree angle." Stress positions recommended by Defendants do not include the subject's being hung from the ceiling by his arms with only his forefeet touching the ground, and left in that position for nearly two days. On the other hand, being confined in a small box was an EIT recommended by Mitchell and Jessen that was #5 in Mr. Salim's ratings.

The fact that Mr. Salim ranked several events that occurred during his arrest and captivity as having been more traumatic supports the conclusion that only a relatively small portion of his PTSD is attributable to the administration of Defendants' recommended EITs.

At the height of his PTSD, Mr. Salim also met DSM-5 criteria for Major Depressive Disorder, severe. Although the DSM-5 does not recognize a cause for MDD, it is my impression that his MDD was precipitated by his confinement in general, and the specific traumatic events described above that caused his PTSD. In about half of persons with PTSD, MDD is also present. At its worst point, while Mr. Salim was confined in Cobalt, he hoarded medications with the intention of taking an overdose, but his plan was foiled. Presently, his MDD is largely in remission, with the only residual symptoms being insomnia and trouble concentrating. He is now glad he did not have the opportunity to kill himself.