

# **Exhibit 3**

Past Psychiatric History. Mr. Salim reported that beginning at age 14 and continuing up to his capture at age 24, he was a heavy drug user. Substances included Mandrax (generic name Methaqualone, brand name Quaalude in the U.S., also known as "ludes" or "sopers," classified as a sedative/hypnotic). He also smoked marijuana and scorpion venom. He also sniffed gasoline. Sometimes he used more than one of these drugs at the same time. He did this with friends "to feel good." His drug use led him to drop out of school and become a "street boy." His mother objected strenuously to his use of these drugs, but he did them anyway. He hasn't used any of these, or other, drugs since his capture in 2003.

Family Psychiatric History. Mr. Salim's father had a drinking problem. Otherwise, Mr. Salim is unaware of any family history of mental disorder, psychiatric or psychological treatment, or suicide.

Medical History. Mr. Salim reported no significant medical history prior to his arrest in 2003. The injuries he sustained during his captivity and imprisonment have been documented elsewhere. He reported to me that since 2003, he has suffered from photophobia and eyestrain. He has chronic stomach ailments that cause him to feel bloated and nauseated if he eats too much. He has swelling and pain in his knees, back, and waistline, which are exacerbated by physical activity. He has headaches and migraines, which sometimes make him unable to work. All in all, his physical ailments prevent him from his work as a fisherman about 40% of the time that he would like to be working. He attempts to manage his stomach problems with traditional herbal medicine he obtains from his mother. He doesn't smoke tobacco.

Personal History. Mr. Salim was born in Zanzibar, Tanzania, and grew up there and in Dar es Salaam. He was the third of nine siblings and was reared by his mother and father. Growing up his relationship with his mother was good. They got along well, loved each other, and he felt close and cared for by her. Later their relationship was strained by Mr. Salim's drug use. She only ever struck him when he was doing drugs. His mother is still alive today and in good health. His relationship with his father was also close and loving. He never struck him. He died in 1999 from an unknown illness. Mr. Salim got along well with

his siblings, not all of whom are alive today. He was raised a Muslim. He had a happy childhood and enjoyed playing soccer, going fishing, and playing with the family dog Pesa. He didn't particularly like school and left at age 15, by which time he could make money from fishing and didn't see the point in continuing his studies. Plus, as noted above, he was using drugs.

Mr. Salim had friends growing up but no girlfriends, in accordance with the Islamic culture within his family and in Zanzibar. He met his first wife, a Somalian woman, while living in Mogadishu, where he had moved to work as a fisherman. He proposed to her after a brief acquaintance, and she became pregnant soon thereafter. They lived together in Mogadishu from 1998-2003, when he was captured. He married his second wife, Sharifa, whom he met in Zanzibar, in 2011. Sharifa is outgoing, and they have a loving and happy marriage. They have one daughter, Maryam, age 5, to whom Mr. Salim also feels close. Mr. Salim and his wife would like to have 5-10 children.

Occupational History. Mr. Salim's first job was at a clothing store. He then owned a business that traded clothing between Dubai and Zanzibar. When that business collapsed, he started another, bringing bed comforters from Mombasa, Kenya to sell in Dar es Salaam. That business collapsed in 1994. He started yet another business transporting luggage and travelers by boat between Malindi and Lamu, two towns in Kenya. This business continued from 1994-98, until his boat was stolen in Somalia during a trip to bring dried fish to Malindi. Immediately prior to his capture and detainment, he worked as a driver and fisherman in Mogadishu and earned an income of about 1.5 million Tanzanian shillings. Since returning to Zanzibar in 2008, Mr. Salim has continued to make a living as a fisherman, for which he now needs to borrow other peoples' boats. He also sells pigeons. Due to his physical limitations, and to a lesser extent his psychological symptoms, he only works about 60% of the time. Today he earns about 50,000 Tanzanian shillings in a year. Mr. Salim's favorite occupation is fishing.

Legal History. Ms. Salim reported no history of legal involvement other than described above, and the current lawsuit.

Mental Status Examination. Mr. Salim arrived on time for the evaluation. He was well groomed and casually but appropriately

attired. He appeared his stated age of 45. He did not demonstrate psychomotor retardation or agitation. His demeanor was cooperative but reluctant. He appeared to be displeased to be undergoing the evaluation, and at several points he indicated a desire that it end soon. His affect was serious and mildly despondent, but he was able to smile and even laugh at a few points. I did not sense any evidence of symptom fabrication or exaggeration. It was evident that he did not like talking about his past traumatic events. At one point, in an effort to avoid having to do so, he stated, "I'm fine now." When I did not accept that answer, and urged him to tell me more, he began to weep. Other than some trouble with dates and specifics, he was able to provide a useful history. He was fully oriented. His thought processes were well organized and without evidence of loose or bizarre associations. There was no evidence of delusions or hallucinations. His intellectual functions were grossly intact. He appeared to be of average intelligence.

#### Structured Interview Instruments

I attempted to administer *The Clinician-Administered PTSD Scale (CAPS)*, which is currently regarded as the state-of-the-art instrument for assessing the American Psychiatric Association's Diagnostic and Statistical Manual for Mental Disorders, fifth edition (DSM-5) diagnostic criteria for posttraumatic stress disorder (PTSD). However, the CAPS can be difficult to administer because it requires detailed, sometimes hair-splitting, subjective responses from the evaluatee regarding the frequency and intensity of 20 types of PTSD symptoms. If one attempts to administer the CAPS about more than one time point (e.g., when symptoms were at their worst, and again currently), 40 ratings are called for. Many evaluatees become frustrated with the CAPS, but it's uncommon that it can't be completed. Sometimes it is necessary that the administrator press the evaluatee for their best answer. However, when I attempted to do this, Mr. Salim became frustrated and angry. He complained I was doing to him what his interrogators had done, i.e., forcing him to answer questions he was unable to answer. At that point, rather than risk losing rapport, I decided to abandon the CAPS.

In place of the CAPS, I switched to the PTSD module of the *Structured Clinical Interview for DSM-5 (SCID)*. Instead of calling for rating each of the 20 PTSD symptom items on a 0-4

point scale, as the CAPS does, the SCID simply requires that each item be rated as met or not met. Based on the SCID, during the period of his captivity at Cobalt and immediately thereafter, Mr. Salim met all the DSM-5 PTSD criteria, with the exception of D.2, *Persistent (and often distorted) negative beliefs and expectations about oneself or the world*, and D.3, *Persistent distorted blame of self or others for causing the traumatic event or for resulting consequences*. (Blaming only the perpetrator does not qualify). I was unable to assess criterion C.2., viz. *Effortful avoidance of external reminders*, because while he was in Cobalt this was impossible.

Prior to the increased discovery in the current lawsuit, i.e., during 2016, Mr. Salim met all DSM-5 criteria except A.1, *recurrent, intrusive memories*, A.2 *traumatic nightmares*, and A.3, *flashbacks* (all because of infrequency); D.1. and D.2 (as above); and E.2, *self-destructive or reckless behavior*. With the frequent triggers of the current lawsuit's discovery process, his symptoms have intensified somewhat.

On the SCID-5 Major Depressive Disorder (MDD) module, during his captivity at Cobalt, Mr. Salim met 7 of the 9 criteria, with 5 required for the diagnosis. He did not meet criterion #5, *psychomotor agitation or retardation*. I could not assess criterion #3, *significant weight change*, because of the food restriction he was under. Currently, Mr. Salim met only 2 MDD criteria, #4, *insomnia*, and #8, *diminished concentration*.

On the SCID-5, Mr. Salim also met criteria for 9 of the 11 criteria for previous Substance Use Disorder, with only 2 criteria required for the diagnosis.

Deposition. The following is an extract I prepared from the rough transcript of Mr. Salim's deposition.

I was using illicit drugs ... Fahid told me that the only way I can quit using drugs, I can go to Afghanistan - Pakistan and, then, I can learn other ways and I will also learn some Muslim prayers and that will help me to quit drugs, using drugs ... When we arrived to Pakistan, they told me that the school is not there, it's in Afghanistan ... He gave me somebody's name that, when I arrived there, that would be the