



Seton Hall University School of Law

# Center for Policy & Research

## **THE GUANTANAMO DIET: ACTUAL FACTS ABOUT DETAINEE WEIGHT CHANGES**

### **Mark Denbeaux**

Professor, Seton Hall University School of Law  
Director, Seton Hall Law Center for Policy & Research  
Counsel to Guantanamo detainees

### **Paul Taylor & Sean Kennedy**

Co-Authors & Research Fellows

**Sean Camoni, Kelly Ann Taddonio,  
Meghan Chrisner, Brian Beroth, Kelli Stout,  
Chrystal Loyer, Nick Stratton,  
Lauren Winchester, Phillip Taylor**  
Contributors & Research Fellows

## Executive Summary

- On May 13, 2011, Senator Jim Inhofe (R) of Oklahoma asserted that the US should not allow detainees at Guantánamo Bay Detention Facility any family visits because they are already treated too well.
- In support of this, Inhofe cited an alleged obesity epidemic at Guantánamo, because “They're eating better than they've ever eaten before.”
- Senator Inhofe’s claim that obesity is the number one problem at the Guantánamo Bay Detention Facility is factually unsupportable.
- From October 2006 to March 2007, of the 428 detainees weighed, only 68 detainees—less than 16%—qualified as obese.
- This snapshot obscures the reality that detainees’ weights varied so wildly that many detainees have been obese briefly and under-nourished at other times.
- Nearly the same percentage of Guantánamo detainees have become underweight at some point as have become obese at some point.
- Comparatively, any obesity “problem” at Guantánamo is less severe than obesity in the United States and far less severe than obesity in Oklahoma.
- Insofar as obesity has increased in Guantánamo over time, this is due to the government’s own release patterns, which release earlier those who are least overweight, thus emphasizing obesity.
- Therefore, there is no objective basis for the recurrent claims that detainees are increasingly overweight or obese.

## ***Introduction — Fattening Up in Paradise***

In an interview with *Fox & Friends* host Brian Kilmeade on May 13, 2011, Senator Jim Inhofe (R) of Oklahoma responded to a question regarding the possibility of family visits for detainees at the Guantánamo Bay Detention Facility, where the US currently holds 171 alleged terrorists and enemy combatants. Senator Inhofe responded that the US should not allow the detainees any family visits because they are already treated too well. In support of this, Inhofe said,

"Let's keep in mind, these detainees, they have things they've never had before. **You know what the biggest problem in Gitmo is right now? It's obesity.** They're eating better than they've ever eaten before, they have better medical care, they have legal counsel. You gotta draw the line somewhere, let's draw it here."<sup>1</sup>

When Inhofe was pressed by the Washington Post for documentation for his claims, his spokesman, Jared Young, provided news articles from 2006 that pointed to detainees gaining an average of twenty pounds during their detention.<sup>2</sup> The data Inhofe relied on claimed that most detainees came to Guantánamo underweight and were normal to mildly overweight by 2006. This and similar conclusions have never been supported by any statistical evidence. After an in-depth review of the available data, the Center for Policy & Research has concluded that claims of an obesity epidemic at Guantánamo are unfounded.

## ***The Recurring Claim of Weight Gain***

The claim of Guantánamo inmates gaining weight is nothing new and reports have fluctuated since 2004 ranging from an average of 13 lbs to 20 lbs depending upon the source. None of the claims have been substantiated by statistical data, including the 2006 documentation on which Senator Inhofe's office based its claim.

---

<sup>1</sup> Senator Inhofe made two claims in addition to obesity, to justify denying detainees family visitation. Both rely upon several highly questionable premises, all centered on the detainee's purported high quality of life. And, in any event, both are as true for convicted domestic prisoners, who have visitation rights, as for detainees.

First, Inhofe claims that the detainees have access to "better medical care." While perhaps true for some, it is not likely to be true for all. Most important, there are serious questions about the appropriateness of medical care for detainees. The extreme variations in detainee weight in themselves strongly indicate a failure to properly care for detainees. In addition, the mandatory, blanket use of a massive dose of the neuropsychiatric drug mefloquine suggests reckless disregard for detainee health.<sup>1</sup>

Second, Senator Inhofe claims that detainees are treated too well because they have access to legal counsel. This claim presupposes the possibility that none of the detainees would have the ability to obtain legal counsel outside of Guantanamo. Similarly, Inhofe does not address the fact that the detainees' need for legal counsel is a direct condition of their confinement. Again, legal counsel, much like medical treatment, is not a privilege; it is a legal obligation imposed by the Supreme Court in *Boumediene v. Bush*.

<sup>2</sup> Glenn Kessler, *Inhofe's claim that 'obesity' is the biggest problem at Guantanamo Bay*, WASH. POST, May, 21, 2011, [http://www.washingtonpost.com/blogs/fact-checker/post/inhofes-claim-that-obesity-is-the-biggest-problem-at-guantanamo-bay/2011/05/16/AFjjmF5G\\_blog.html](http://www.washingtonpost.com/blogs/fact-checker/post/inhofes-claim-that-obesity-is-the-biggest-problem-at-guantanamo-bay/2011/05/16/AFjjmF5G_blog.html).

The claim of weight gain among Guantánamo detainees appears to be perennial. News stories of weight gain, most based upon DOD assertions, have been running since at least 2003, citing average weight change that differs over time, but always showing a weight gain.<sup>3</sup>

Senator Inhofe's office cited documentation he received, dated March 23, 2009, that states that "Detainee meals meet their cultural and dietary needs ... Each detainee receives 6,500-6,800 calories per day and have six menus to choose from."<sup>4</sup> However, this assertion runs contrary to both the Guantánamo spokeswoman who stated that the detainees eat 4,000 calories per day,<sup>5</sup> as well as the GTMO Medical SOP, which dictates that detainees receive a balanced 2,000 kcal/day diet plan.<sup>6</sup>

In response to Senator Inhofe's central contention, the Center for Policy & Research has conducted a thorough review of the height and weight data released by the Department of Defense in March 2007. The Center for Policy & Research has analyzed this data by compiling the monthly weighings of each detainee—a total of over 27,000 cells of data. The data reveals a very different picture than that described by Senator Inhofe.

### ***US Governmental Control and Responsibility***

Obesity is a serious medical condition that can greatly affect a person's health and well-being. To the extent that there is an obesity problem in Guantánamo, it is a serious health issue that requires medical treatment. Normally, medical treatment of obesity is limited to a large degree by the patient's failure to follow treatment regimens.<sup>7</sup> However, this cannot be the case in Guantánamo because the medical staff have complete control over all detainees, and can limit all food intake if medically indicated.

Additionally, food is often used in Guantánamo as a reward for cooperation with interrogators. Interrogators can either provide additional food for cooperation or restrict a detainee's food intake to a bare minimum.

It is true that medical staff can override intelligence personnel's control of the detainee's diet. They can increase or decrease the detainee's intake and can even order force feedings. Furthermore, the medical staff controls how many times a day the detainees eat, at what time they eat and what type of foods they eat. The GTMO Medical SOP 2004 states that detainees will be fed 2000 kcal/day of proteins, vitamins and minerals. Claims that detainees are fed between 4000 and 6800 calories per day, if correct, would indicate serious violation of Medical SOPs.

---

<sup>3</sup> See Appendix B.

<sup>4</sup> Kessler, *supra* note 2. The document referred to appears to be a public relations pamphlet published by Joint Task Force Guantanamo, available at <http://upload.wikimedia.org/wikipedia/commons/5/57/JTFGBrochurePg4.pdf>.

<sup>5</sup> Kessler, *supra* note 2.

<sup>6</sup> SOP 014: Detainee Weight Management and Nutrition Program GITMO MEDICAL SOPS, OCT. 15, 2003, at 81, available at [http://www.dod.mil/pubs/foi/detainees/GITMO\\_MedicalSOPs.pdf](http://www.dod.mil/pubs/foi/detainees/GITMO_MedicalSOPs.pdf).

<sup>7</sup> Laura Epstein & Jane Ogden, *A Qualitative Study of GPs' Views of Treating Obesity*, 55 Br J Gen Pract. 519, 750-54 (2005).

Detainees are weighed monthly. If a detainee has a BMI over 35, he is placed on a weight management and nutrition program that consists of a physical examination, thyroid testing, a weight loss strategy plan, and is subjected to bi-weekly weighings. In short, the medical staff at Guantánamo has complete control of the detainees’ eating habits and treatment regimens.

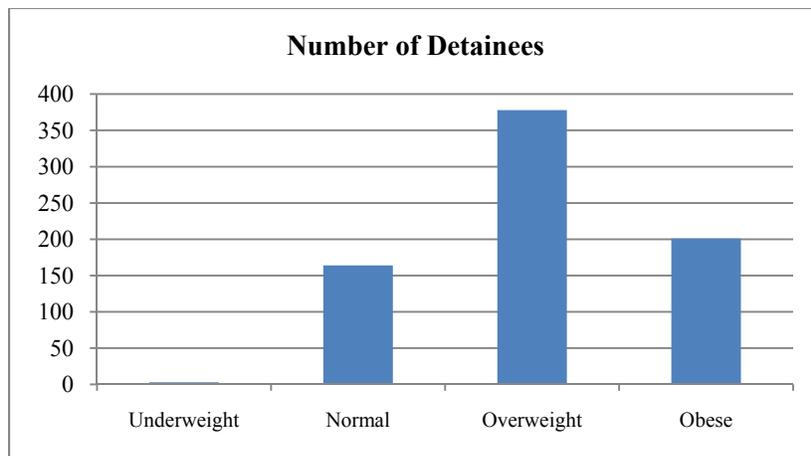
But is it true that there is significant obesity at Guantánamo? If so how is it evidenced?

***A Misleading Increase in Obesity Levels***

If there is an obesity problem at Guantánamo, it is accompanied by an emaciation problem. Of the 746 detainees for whom the Center has both height and weight data, calculation of detainees’ body mass index (BMI) shows that approximately 26.9% of detainees have met the World Health Organization’s definition of obese at some point during their time at Guantánamo, while approximately 50.7% at some point qualified as overweight.

**Table: Maximum weight class over detention history**

WHO BMI Classification	Number of Detainees	% of Total
Underweight	3	0.40%
Normal	164	21.98%
Overweight	378	50.67%
Obese	201	26.94%



**Chart: maximum weight class over detention history**

Among those still remaining as of 2007, the picture appears to change for the worse, with the proportion of overweight remaining relatively constant, but the proportion who have been obese at some time increases to 35%. However, this is misleading for two reasons. First, this percentage reflects all of those who have ever been obese at any point in time, rather than the number who are concurrently obese during any single period of time. In other words, this percentage accounts for any detainee that ever reached the point of obesity regardless of whether or not he subsequently lost weight. Thus, this information seems to make the obesity levels of the detainees appear more severe than they actually are.

**Table: maximum weight class over detention history**  
(Detainees remaining as of 2007)

WHO BMI Classification	Number of Detainees	% of Total
Underweight	2	0.49%
Normal	66	16.06%
Overweight	199	48.42%
Obese	144	35.04%

Furthermore, the detainees' weight varies so wildly that many detainees have been obese briefly and underweight at other times. In fact, nearly the same percentage of Guantánamo detainees have become underweight (BMI<18.5) at some point as have become obese (BMI>30). Approximately 27% of detainees have been obese while 25% of detainees have been malnourished. Indicative of the massive weight variation in the camp is the fact that 30% of detainees have a history of swinging from normal to obese, or underweight to overweight or obese.

**Table: Minimum Weight Class Over Detention History**

WHO BMI Classification	Number of Detainees	% of Total
Underweight	185	24.80%
Normal	494	66.22%
Overweight	61	8.18%
Obese	6	0.80%

Second, this apparent increase in obesity from 27% to 35% results from an odd pattern of release or transfer from Guantánamo to other countries: Those with the highest BMI class are released less often than those with lower BMI classes. This release pattern removes those least overweight, thus driving up the proportion of remaining detainees who are obese. We are not suggesting any causal relationship between weight and release, merely that there is a correlation that explains the apparent increase in detainee obesity.

**Table: Detainee Release by Maximum Weight Class**

WHO BMI Classification	Release Rate
Underweight	0.33
Normal	0.60
Overweight	0.47
Obese	0.28

To reinforce that point, the opposite pattern is true when the releases are viewed in terms of minimum weight class. Those who have always been obese are much more likely to be released than those who have at some point been less overweight. This means that the obese detainees who have been released are overwhelmingly those who have always been obese, while those whose weight has fluctuated more have generally not been released. Essentially, detainees that either increase or decrease in weight class are held for longer periods than those who remain close to their original weight class.

Thus, by holding detainees that become obese and releasing detainees that remain either obese or underweight, the release pattern artificially inflates the “obesity problem” in Guantánamo. Simply put, if the government released detainees who remain underweight while keeping detainees that become obese, it makes sense that the obesity rates would increase as more detainees are released.

**Table: Detainee Release by Minimum Weight Class**

WHO BMI Classification	Release Rate
Underweight	0.35
Normal	0.43
Overweight	0.57
Obese	0.67

Regardless of whether obesity is increasing at Guantánamo, two questions remain. First, what explains the rate of obesity? Second, is it appropriate to label the level of obesity in the camp as a problem?

The former question can be explained in part by the fact that food is often used in Guantánamo as a reward for cooperation with interrogators. The seeming increase in incidence of obesity may therefore reflect the fact that intelligence value is one of the reasons for continued detention. Those who cooperate with interrogators, and thus are given endless superabundance of high-calorie foods, may be considered of higher intelligence value. For example, if a detainee arrived in Guantánamo at a normal weight class and began cooperating with interrogators, he is likely to have been rewarded with extra food. If the detainee continued to cooperate, he would likely continue to receive extra food. Because of the cooperation with interrogators, the detainee may be kept longer for intelligence value and continue to consume the extra food. Thus, this detainee that arrived having a normal weight class may become obese through continued cooperation.

Another explanation may be that some detainees become obese following the end of a hunger strike. Several major hunger strikes have occurred at Guantánamo, including in 2002, 2003, and 2005-06. Several of these hunger strikes were severe enough to significantly lower the aggregate mean weight of the camp for the duration of the strike. Following each major strike, the mean weight of the camp increased beyond the pre-strike level. This is most likely a result of post-hunger strike weight gain. Because detainees with high variance in their weight are likely to be released later, hunger strikers who later gain weight would be treated differently than other overweight or obese detainees.

### ***Length of Detention Unrelated to Obesity***

An alternative hypothesis supporting Senator Inhofe’s contention of an obesity epidemic is that detainees become obese over time. Those released earlier thus would have less chance to reach higher BMI levels.

However, this would appear to contradict the Center’s findings that those who exhibit greater weight variation are likely to be released later, regardless of when their greatest weight fluctuation occurred. This is not simply a product of greater opportunity for variance among those kept longer: comparing weight variance with the date of weighing shows that the weighings with the most variance did not necessarily occur later, but often occurred prior to 2004.

Further, the alternative hypothesis can be verified or refuted by a strong positive correlation of a detainee’s BMI at a given weighing to the number of days he has been held at that time. However, a logistic regression shows that there is absolutely zero correlation between obesity and either the date on which the detainee was weighed or the amount of time that the detainee has been held. Therefore, based on the data released by the government, while some individuals gained weight since arrival at Guantánamo, *it is clearly not the case that detainees have generally become obese over time.*

Despite various questionable reports in the media that most detainees arrived at Guantánamo underweight and thereafter quickly gained weight, the Center’s research has shown, based on the information provided by the government, that only 6.6% of detainees were underweight when they arrived. Nearly 66% were normal upon arrival and 23% were overweight. Claims of an average twenty-pound increase in weight are unsupported by the data. Additionally, insofar as there was any substantial weight gain by October 2006, it is most likely as a result of weight gain following the end of the 2005 hunger strike. Similar weight gain was seen after the 2003 hunger strike but with less magnitude.

Senator Inhofe’s implication that the alleged obesity epidemic in Guantánamo is due to the detainees’ not having had access to adequate food prior to their detention would also require that a substantial number of detainees have arrived underweight and raised three class levels. However, this is simply not the case.

In fact, less than one percent of detainees exhibited such an extreme weight change from their first recorded weight. Less than 5% have raised 2 or more weight classes. Indeed, the majority of detainees (55%) have had no classification change between their first and last weighing, while another 32% increased only one class level. The majority of the latter group went from normal to merely overweight.

**Table: Detainee BMI Class Change from First to Last Weighing**

Change in Class	Number of Detainees	% of Total
-2	2	0.27%
-1	55	7.37%
0	411	55.09%
1	242	32.44%
2	33	4.42%
3	3	0.40%

Simply put, almost none of the detainees who arrived underweight or normal became obese during their detention in Guantánamo. The implication that access to adequate or even

abundant food has created an obesity problem for detainees cannot be supported from the data provided by the government.

***Not Quite “OK”: GTMO Obesity Levels in Relation to U.S. Obesity Levels***

Once the determination of the extent of obesity is made, the remaining question is whether it is a problem, especially in light of rising obesity levels in the United States generally. Focusing on the last six-month period for which public information exists, October 2006 to March 2007, less than 16% of the 428 detainees weighed qualified as obese, only 68 detainees. Therefore, most of the 35% of detainees still in custody at that time who had at some point had become obese had become so at some earlier time.

**Table: Maximum Weight Class**

WHO BMI Classification	Number of Detainees	% of Total
Underweight	6	1.40%
Normal	162	37.85%
Overweight	192	44.86%
Obese	68	15.89%

In short, detainee obesity may be measured either in terms of the 6-month snapshot—16%—or in terms of the 27% of those held at Guantánamo between 2002 and 2007 have become obese at any point in time. In either event, two thirds of US States have a similar or substantially worse record. Among the worst of these, with over 30% of its population qualifying as obese is Senator Inhofe’s own Oklahoma. This is a very conservative comparison since, unlike the Guantánamo data, the US numbers exclude those who are no longer obese.

**Table: Percentage of Those with BMI Over 30**

	>25%	25% -30%	>30%
# US States	33	24	9
% US States	66%	48%	18%

Source: CDC (2009 data)

In other words, the total amount of detainees that were ever obese at any point in time in Guantánamo is less than or equal to the current level of obesity in over two-thirds of US States. Ironically, Senator Inhofe has claimed that detainees should not have visitation rights because of the obesity problem in Guantánamo, when the actual fact is that Guantánamo detainees have a significantly lower obesity rate than that of the Senator’s home state.

**Conclusion**

Senator Inhofe’s claim that obesity is the number one problem at the Guantánamo Bay Detention Facility is factually unsupportable. The obesity problem at Guantánamo is no worse than that facing the majority of US jurisdictions. Insofar as the situation in Guantánamo has

deteriorated over time, this is due to the government's own release patterns, which have resulted in earlier release for those whose weight was most consistently in the "normal" range.

## Appendix A

### Body Mass Index (BMI):

A commonly used proxy for human body fat based on an individual's weight and height.

$$\text{BMI} = (\text{lb} \times 704) / \text{in}^2.$$

This report uses the same formula used by DoD formula, which is likely to overestimate obesity, as compared to the standard formula,  $\text{BMI} = (\text{lb} \times 703) / \text{in}^2$ .

**Table: The International Classification of adult underweight, overweight and obesity according to BMI**

Classification	BMI(kg/m <sup>2</sup> )	
	Principal cut-off points	Additional cut-off points
Underweight	<18.50	<18.50
Severe thinness	<16.00	<16.00
Moderate thinness	16.00 - 16.99	16.00 - 16.99
Mild thinness	17.00 - 18.49	17.00 - 18.49
Normal range	18.50 - 24.99	18.50 - 22.99
		23.00 - 24.99
Overweight	≥25.00	≥25.00
Pre-obese	25.00 - 29.99	25.00 - 27.49
		27.50 - 29.99
Obese	≥30.00	≥30.00
Obese class I	30.00 - 34.99	30.00 - 32.49
		32.50 - 34.99
Obese class II	35.00 - 39.99	35.00 - 37.49
		37.50 - 39.99
Obese class III	≥40.00	≥40.00

Source: Adapted from WHO, 1995, WHO, 2000 and WHO 2004.

### BMI\_Class:

A classification variable that shows the WHO BMI classification of the detainee at the time of the individual weighing:

- 1 if BMI < 18.5
- 2 if 18.5 <= BMI < 25
- 3 if 25 <= BMI < 30
- 4 if 30 <= BMI

### BMI\_Class\_Max:

A classification variable that shows the maximum WHO BMI classification of the detainee at any time weighed:

$$\text{BMI\_Class\_Max} = \text{maximum of BMI\_Class across individual's weighings}$$

**BMI\_Class\_Min:**

A classification variable that shows the minimum WHO BMI classification of the detainee at any time weighed:

BMI\_Class\_Min = minimum of BMI\_Class across individual's weighings

## Appendix B

The following is a brief sample of news stories from three different points of time, in which claims that Guantánamo detainees gain weight on average. As is clear in the sample below, this claim is most often found in conjunction with other assertions of posh conditions.

*Between April 2002 and March 2003, the Joint Task Force returned to Afghanistan 19 of the approximately 664 men (from 42 countries) who have been held in the detention camps at the U.S. Naval Base in Guantanamo Bay. . . . During their stay (14-months on average), the detainees (nearly all of them) had gained an average of 13 pounds. . . . The official voice of GTMO [Chief Warrant Officer (CW4) James Kluck] was clearly quite happy to tell the story of weight gain among the detainees—it's evidence, perhaps, that the prisoners' treatment can't have been so bad if they managed to put on a few pounds.<sup>8</sup>*

*[T]his week Secretary Donald Rumsfeld 's speechwriters tried to help, sending out 'Ten Facts About Guantanamo' to highlight what a nice place it is. . . . The second [fact] says 'More money is spent on meals for detainees than' on U.S. troops stationed there. 'The average weight gain per detainee is 20 pounds.' Fact No. 8, probably one of the most important, notes that, contrary to what you might have heard, the prisoners actually really want to be in Guantanamo. "The mother of a detainee stated: 'Of course they wanted to stay there. . . . They had human rights and good living standards there. They had dentists and good meals -- everything they wanted.'" Turns out, this quote from a March 2004 edition of the London Times was a Russian mother comparing Guantanamo with Russian jails.<sup>9</sup>*

*Where better to keep them than at Gitmo, at the far end of Cuba, which is warm, isolated and secure. Geneva Conventions prevail. Detainees are well fed (the average weight-gain is 18 lbs. a year), can pray to their heart's content, don't have to answer questions and, if they are good chaps, are occasionally rewarded with ice cream cones. Close Gitmo, and al Qaida detainees may claim cruel and unusual punishment.<sup>10</sup>*

It is not readily apparent where any of these asserted facts comes from, but the claim of an average 18 pound weight gain was widely cited in the press in 2006 and 2007. However, most of the sources state that this is the average weight change since entering GTMO, not the average

---

<sup>8</sup> Manny Howard, *The Guantanamo Thirteen*, SLATE, May 29, 2003, <http://www.slate.com/id/2083612/>

<sup>9</sup> Al Kamen, *10 Things to Know About Guantanamo*, WASH. POST, Sept. 15, 2006, <http://www.washingtonpost.com/wp-dyn/content/article/2006/09/14/AR2006091401478.html>. The original DOD document, "10 Things to Know About Guantanamo", does not appear to be publicly available. An edited version, which omits the Russian mother, was published by the DOD under the title "Ten Facts about Guantanamo" was still available in January 2010, but has since been removed.

<sup>10</sup> Peter Worthington, *Detainees belong in Gitmo*, CAN. FREE PRESS, Feb. 26, 2008, <http://www.canadafreepress.com/index.php/article/2055>.

change per year.<sup>11</sup> Indeed, if detainees gained an average of 18 pounds per year, most detainees would be approximately 150 heavier than when they arrived. This is clearly not the case.

---

<sup>11</sup> Additionally, many sources include with this statement such information as the availability of Harry Potter books and arrows painted toward Mecca—not mentioned in the 2010 version of “Ten Facts about Guantanamo”—which suggests that yet another version of “Ten Facts about Guantanamo” claimed the average weight change was 18 pounds.

## Appendix C

