On the People Who Were Not Asked

A Meditation on Necessity, Consent, and the Human Being Beneath the State

There is a word by which institutions have sometimes sought to make the extraordinary appear ordinary.

Necessary.

It is a small word.

It can be entered into a memorandum, placed beneath a classification marking, or carried from one office to another by people who believe themselves to be acting responsibly.

It can describe an emergency.

It can describe a precaution.

It can describe a decision made under conditions of genuine uncertainty.

And sometimes it is true.

But necessity is not a person.

It cannot suffer.

It cannot consent.

And it cannot assume responsibility for an injury merely because its name was invoked before the injury occurred.

There is another word that frequently accompanies it.

Protection.

The physician protects.

The military protects.

The intelligence service protects.

The state protects.

These are not inherently dishonest claims. Much of the work undertaken by public institutions is necessary, and much of it is performed by people whose service is sincere.

But protection is not established by its declaration.

It must be examined in relation to the people who bear its consequences.

For a person may be protected from one danger while being exposed to another.

They may be protected in name while their freedom is diminished in practice.

And they may be told that what happened to them was necessary long after the possibility of refusing it has disappeared.

We should therefore examine several occasions in the American historical record when the language of public purpose came into conflict with the rights of particular human beings.

Not as evidence of a single design.

Not as proof that every institution is incapable of good.

But as distinct histories through which a recurring question may be considered:

At what point does the authority to protect a person become confused with the authority to use them?

I. The Voice That Was to Be Obtained

In the autumn of 1947, the United States Navy began a program known as Project CHATTER.

Its purpose was to investigate substances that might facilitate interrogation and the recruitment of intelligence agents.

The project arose partly in response to reports concerning Soviet experimentation with substances believed capable of inducing speech.

Among the materials investigated were scopolamine, mescaline, and compounds associated with the plant *Anabasis aphylla*.

The research included experiments involving animals and human subjects, including work conducted overseas.

The program expanded during the Korean War and ended in 1953.[1]

We should distinguish what the surviving congressional record establishes from what it does not.

It documents the program's purposes, the substances investigated, and the use of human subjects.

It does not establish that every participant was unaware of the research or that every experiment lacked informed consent.

Those questions require more specific evidence.

But the purpose of the investigation presents an ethical difficulty of its own.

The researchers wished to discover whether a substance could make someone speak.

Not necessarily because the person wished to speak.

Not because trust had been established.

Not because an ordinary exchange of information had become possible.

But because the substance might alter the conditions under which silence was maintained.

We should consider what it means to regard another person's speech as something that may be obtained.

A person speaks for many reasons.

To tell the truth.

To conceal it.

To ask for help.

To protect someone.

To express fear.

To refuse a demand.

To preserve a confidence.

But speech is not made truthful merely because it has been produced.

A chemically altered person may speak.

That does not establish that their words are accurate.

Nor does it establish that their disclosure was voluntary.

The ability to cause a person to answer is not the same as the ability to determine whether the answer is true.

And neither establishes the moral authority to obtain that answer by whatever means are available.

There is a difference between inviting someone to speak and making their silence an obstacle to be overcome.

In the first, the person remains a participant in the exchange.

In the second, the person risks becoming an instrument from which information is extracted.

A government may have legitimate reasons to seek intelligence.

It may investigate threats, question suspects, and attempt to obtain information necessary for public safety.

But the seriousness of the question does not settle the legitimacy of every method used to obtain an answer.

Nor should the apparent usefulness of an answer erase the circumstances under which it was produced.

The phrase *truth serum* suggests a substance capable of resolving uncertainty by bypassing the judgment of the person questioned.

Yet a person's mind is not a sealed container of facts that becomes reliably accessible whenever chemical restraint is removed.

Memory may be incomplete.

Perception may be mistaken.

A person may become suggestible.

And speech obtained under altered conditions may require greater scrutiny rather than less.

The search for truth therefore cannot be separated from the means by which testimony is obtained.

A person made to speak has not necessarily been heard.

And an answer obtained without respecting the speaker may tell us less than the institution believes it has learned.

II. The Care That Was a Disguise

In 1950, the Central Intelligence Agency approved Project BLUEBIRD.

Its purposes included investigating methods of resisting hostile interrogation, protecting intelligence personnel against coercive techniques, improving memory, and exploring whether an individual's behavior could be influenced through specialized interrogation methods.

In August 1951, the program was renamed ARTICHOKE.

Its work included experiments involving drugs, hypnosis, and unconventional interrogation techniques.

Some internal experiments involved volunteers.

Other activities included overseas interrogations employing chemical and hypnotic methods.[2]

These distinctions matter.

Not every ARTICHOKE activity occurred under the same circumstances.

Not every participant occupied the same position.

And the existence of voluntary research within a program does not establish that all its activities were voluntary.

Declassified records nevertheless describe cases in which the appearance of medical care was used to conceal interrogation.

A July 1952 CIA memorandum described interrogations of suspected double agents involving drugs and hypnosis under psychiatric-medical cover.

A memorandum dating to approximately March 1954 described the interrogation of an intelligence asset at a safe house.

The operation combined hypnotic techniques with substantial quantities of chemicals administered under the pretense of treating influenza.

The memorandum recorded that the subject remained under ARTICHOKE techniques for approximately twelve hours, including a period of direct interrogation.

Those reviewing the operation acknowledged the risks associated with the chemical dosages while expressing the view that the results justified the measures employed.[2]

We should not confuse the investigators' assessment of success with independent evidence of safety, reliability, or consent.

But there is something particularly troubling in the use of medical care as an instrument of deception.

For medicine occupies a special place in ordinary human life.

We seek it when we are ill.

We accept examinations because we hope to understand what is happening to our bodies.

We may allow a physician to touch us, question us, or administer substances under circumstances in which we would ordinarily refuse the same actions by a stranger.

This permission is not unlimited.

It is given for a purpose.

And that purpose matters.

A person who accepts what appears to be treatment for an illness has not thereby consented to a chemically assisted interrogation.

The appearance of care cannot supply permission for an undisclosed procedure.

Nor does the presence of medical personnel transform every act performed in a medical setting into treatment.

Consider the moment at which the deception becomes complete.

The subject is offered an explanation.

The explanation appears familiar.

There is illness.

There is an examination.

There may be a substance administered for what appears to be a therapeutic purpose.

The person encounters the ordinary signs of medical attention.

Yet the institution administering the procedure possesses another objective.

The person believes they are receiving care.

The institution is seeking information.

And the trust that makes treatment possible has become part of the mechanism through which the person is deceived.

This is more than the concealment of an investigator's identity.

It is the appropriation of a relationship in which vulnerability is ordinarily met by a duty of care.

The ethical injury does not depend upon establishing that every technique worked as its designers hoped.

It arises in part from the decision to use another person's expectation of medical assistance as an opportunity for undisclosed intervention.

A clinician's instruments do not become instruments of care merely because they are used in a clinic.

A substance does not become medicine merely because it is presented as treatment.

And a person's trust does not become consent merely because the institution has learned how to obtain it.

The appearance of care is not the fulfillment of care.

And the willingness of a vulnerable person to seek help should never be mistaken for permission to use that vulnerability against them.

III. The Mind That Was Made Available

In 1953, the Central Intelligence Agency established MKULTRA, a program of research into methods of influencing human behavior.

Its activities included experiments involving psychoactive substances, among them LSD, sometimes administered to people without their knowledge or informed consent.

MKULTRA was not simply another name for the Navy's CHATTER program.

Nor should its relationship to ARTICHOKE be described as an uncomplicated succession in which one effort ended precisely when the next began.

The programs had different administrative histories, and some of their interests and activities overlapped.

In 1973, substantial portions of MKULTRA's documentation were destroyed.

Additional records discovered in 1977 prompted further congressional investigation.[3]

There is something deeply troubling in the assumption that a human mind may become an instrument of experimentation without the knowledge of the person inhabiting it.

The researcher possesses the purpose.

The subject experiences the consequences.

The institution records what it considers useful.

And somewhere between these acts, the distinction between a person and experimental material may disappear.

A substance enters the body.

The body responds.

The observer takes note.

Yet the body's owner was not permitted to decide whether the experiment should occur.

One may ask what knowledge was obtained.

What methods proved effective.

What conclusions the investigators reached.

But there is a question that precedes the scientific inquiry.

Who gave them permission?

And if permission was deliberately withheld from the person affected, by what authority was that person's mind made available?

The destruction of records introduces another difficulty.

We cannot reconstruct everything that occurred.

We cannot identify every affected person.

We cannot determine every consequence.

That uncertainty must not be filled with invented facts.

But neither should the disappearance of evidence be mistaken for the disappearance of responsibility.

For the person whose autonomy was disregarded may now be required to establish an injury through records maintained, withheld, or destroyed by the institution responsible for the experiment.

And an archive that cannot account for what happened cannot provide the consent that was never obtained.

IV. The Treatment That Was Not Given

In Macon County, Alabama, the United States Public Health Service began a study in 1932 concerning the progression of untreated syphilis.

Six hundred Black men were enrolled.

Of these, 399 had syphilis and 201 did not.

The researchers did not deliberately infect the participants.

That distinction matters.

What occurred was different, and sufficiently grave without alteration.

The men did not provide informed consent. Those with syphilis were not offered effective treatment even after penicillin became widely available.

The study continued until 1972.[4]

Forty years.

A child could have been born, grown to adulthood, and become a parent during the period in which the study continued.

The calendar turned.

Medical knowledge advanced.

Physicians elsewhere began treating a disease that the researchers continued observing.

And the men remained within an investigation whose objective depended upon the continuation of untreated illness.

There is a particular danger when the welfare of a patient becomes subordinate to the usefulness of the patient's suffering.

The disease becomes data.

The absence of treatment becomes a condition of observation.

And the person before the physician becomes more valuable to the study as someone who remains ill than as someone who might recover.

But the men were not born to become an illustration in the history of medical ethics.

Their lives existed before the study.

Their suffering mattered before it was publicly acknowledged.

They were fathers, sons, husbands, neighbors, and members of a community whose significance did not begin when the government eventually admitted wrongdoing.

The apology mattered.

The compensation mattered.

The medical care subsequently offered mattered.

But none could restore the years during which treatment had been withheld.

An acknowledgment of injury may be necessary to justice.

It is not the reversal of time.

And the possibility of a future apology cannot justify an injury in the present.

V. The Child Whose Guardian Was the State

Between 1985 and 2005, children in New York City's foster-care system participated in clinical trials and other research concerning HIV and AIDS.

An independent investigation by the Vera Institute of Justice identified 532 children enrolled in 88 studies, including 65 trials involving new medications.

The investigation documented failures involving authorization, consent records, and compliance with established oversight procedures.

It also found that some serious allegations were unsupported. Reviewers found no evidence that children had been removed from their families for the purpose of entering the trials or that trial medications had caused their deaths.

The investigation identified instances of serious medication-related side effects, while also documenting medical responses to those effects. Its review was limited by incomplete records and restricted access to some research and medical information.[5]

These findings must be held together.

The research concerned a serious disease for which improved treatments were urgently needed.

The development of pediatric HIV therapies was not inherently illegitimate.

Children living with HIV deserved effective medical care, including opportunities to benefit from ethically conducted research.

But the seriousness of the disease did not remove the obligation to protect them.

Nor could the vulnerability of children in foster care reduce the standard of protection owed.

There is a particular difficulty when the institution responsible for a child's welfare also exercises authority over decisions concerning that child's participation in research.

The child may be too young to understand.

Their parents may be unavailable to exercise ordinary decision-making authority.

The institution may possess legal power to authorize treatment or research participation under specified conditions.

Yet the possession of authority does not establish that the authority has been properly exercised.

And a legitimate medical purpose does not eliminate the need to distinguish treatment from research.

We should not describe documented failures of oversight as proof of deliberate poisoning where an independent investigation did not establish that conclusion.

But neither should the absence of the most serious alleged outcome be treated as proof that every protective procedure functioned adequately.

There is a difference between demonstrating that a child was not deliberately poisoned and demonstrating that the child's participation was properly authorized, monitored, and protected.

Both questions deserve answers.

The children had names.

They had bodies that could suffer.

They had futures not yet determined.

And their dependency upon the state created obligations that could not be discharged merely by placing an administrative description beside their names.

Ward.

Dependent.

Case.

Placement.

Custody.

These may be necessary legal terms.

None is a complete description of a human being.

A child does not become less entitled to protection because the state has assumed responsibility for them.

Indeed, that assumption creates additional duties.

To become the guardian of a child is not to become the owner of the child's future.

VI. The Air That Was Not Asked

During the 1950s and 1960s, the United States Army conducted atmospheric dispersion tests in American communities, including St. Louis, Missouri.

The tests involved releases of zinc cadmium sulfide particles intended to help researchers understand how aerosols might spread through populated environments.

The substance served as a tracer for modeling the dispersion of biological warfare agents.

Residents had not been individually informed and asked to consent to the releases.

Decades later, concerns arose about possible health consequences.

A 1997 National Research Council review examined the available evidence and concluded that the estimated exposures were extremely unlikely to have caused the illnesses attributed to them. The review also recognized limitations in the surviving exposure evidence.[6]

We should preserve this distinction.

A documented release is not, by itself, proof of a particular illness.

A disturbing experiment is not automatically evidence of every consequence subsequently alleged.

Scientific conclusions must be assessed according to the evidence supporting them.

Yet the question of exposure is not the only question.

Who may decide that the air entering another person's lungs is available for an undisclosed experiment?

Air is an unusual kind of boundary.

It passes into us without ceremony.

We do not negotiate each breath.

We cannot individually refuse an exposure whose existence has been concealed from us.

A person may close a window.

But they cannot meaningfully decline what they have no reason to know is occurring.

The Army sought information concerning the possible movement of particles during an attack.

The people beneath the releases did not participate in that decision.

And a later assessment that estimated exposures were unlikely to cause illness does not, by itself, settle the ethics of the original authorization.

An action may present little demonstrated physical danger and still raise serious questions concerning consent, public authority, and the distribution of risk.

To preserve that distinction is not to weaken the inquiry.

It is to keep the inquiry honest.

For the truth does not need our assistance in becoming more dramatic.

It needs our willingness to describe it accurately.

VII. The Weapon That Remained

Another intelligence program was known as MKNAOMI.

Through cooperation between the CIA and the Army's Special Operations Division at Fort Detrick, the program supported the development, testing, and maintenance of biological agents and delivery systems.

Its purposes included maintaining materials and specialized dissemination capabilities for potential clandestine use.

Congressional investigations subsequently examined the program, including questions surrounding the retention and control of dangerous agents and toxins.[7]

Here the moral inquiry changes.

The evidence concerns capabilities, preparation, secrecy, and failures of control.

It does not establish that every prepared substance was used against a human being.

We must not describe an act as completed merely because the means to accomplish it existed.

But preparation is not ethically empty.

The decision to develop a capability is an action.

The decision to maintain it is an action.

The decision to preserve it beyond an authorized purpose is an action.

And when an institution cannot reliably account for what remains within its possession, secrecy has begun to interfere with governance itself.

A government may legitimately protect information whose disclosure would create serious danger.

Yet secrecy must not remove accountability among those entrusted with exercising power.

A classified record may be inaccessible to the public.

It should not therefore become inaccessible to every lawful mechanism capable of examining the institution's conduct.

For the ability to conceal something is not proof of the authority to do it.

And the authority to prepare for danger is not an unlimited license to create danger.

VIII. The Record and the Voice

There are other means by which the conditions of public judgment may be altered.

Not through a substance.

Not through withheld treatment.

Not through material released into the air.

But through interference with the systems by which people learn what has occurred.

The history commonly associated with *Operation Mockingbird* requires particular care.

A documented CIA activity called *Project Mockingbird* involved telephone surveillance of two Washington-based journalists in 1963.

The Senate's Church Committee separately documented covert relationships between the CIA and American journalists or media personnel.

These findings do not establish every broader allegation subsequently associated with the name *Operation Mockingbird*, nor do they demonstrate that American journalism was directed by a single, unified program bearing that name.[8]

The verified history remains important.

A society cannot meaningfully examine public authority if every effort to investigate that authority must first receive its permission.

Journalists may be mistaken.

Their sources may be incomplete.

Their institutions may possess biases and failures.

The press is not infallible.

But the independence of inquiry cannot survive if the state may secretly control the conditions under which its own conduct becomes known.

There is an additional danger.

Once a documented abuse has been established, it may become tempting to treat every subsequent suspicion as confirmation of the same pattern.

Yet this would surrender the evidentiary discipline that made the original abuse discoverable.

A documented act is not evidence that every similar allegation is true.

An incomplete archive is not permission to invent the missing pages.

And a government capable of deception is not proof that every statement made by that government is false.

The distinction between evidence, allegation, and uncertainty is not a concession to power.

It is one of the means by which power can be examined.

The answer to a concealed falsehood is not an unexamined accusation. It is evidence that can withstand examination.

IX. The Injury That Was Proposed

In March 1962, the United States Joint Chiefs of Staff transmitted a memorandum proposing possible pretexts for military intervention in Cuba.

The document became known as Operation Northwoods.

Its proposals included staged incidents and deceptive accounts intended to create the appearance of Cuban aggression.

The plan was not implemented.

That fact is essential.[9]

Yet the surviving document permits us to examine an extraordinary proposition.

A government institution had formally considered manufacturing the appearance of injury in order to justify the exercise of military force.

First, the event would be constructed.

Then the event would be presented as a grievance.

Finally, the grievance would be offered as justification for action.

The public would be asked to accept a response without possessing a truthful account of the circumstances said to require it.

Such reasoning places the relationship between government and governed in grave difficulty.

A government has legitimate duties to protect its people from danger.

But the power to respond to danger is not the power to invent it.

And the seriousness of the proposal does not depend upon pretending that it was executed.

The memorandum is evidence of what was contemplated.

It is not evidence of a completed attack.

That distinction is itself an argument for preserving records.

An archive can establish that something occurred.

It can also establish that something was proposed but did not occur.

Both findings matter.

For if the public cannot distinguish an accomplished injury from an unrealized proposal, it loses the ability to judge either accurately.

Truth does not become more powerful when we give it events that never happened.

X. The Place That Was Called Humane

And now we come to Florida.

Not to a declassified memorandum from the Cold War.

Not to an experiment reconstructed decades after its conclusion.

But to a detention facility that began receiving people on July 3, 2025, at the Dade-Collier Training and Transition Airport in the Everglades.

Officially known as the Florida Soft-Sided Facility, it became widely known as *Alligator Alcatraz*.

It was established by Florida to expand immigration detention capacity.

Its operation involved state and federal authorities whose respective responsibilities would later become a subject of scrutiny.

Immigration detention may be authorized by law.

But detention is the exercise of extraordinary power over an individual human being.

The person cannot simply leave.

Their movements are controlled.

Their access to medical care, legal resources, family contact, and ordinary necessities depends substantially upon the institution holding them.

That dependency creates obligations.

And those obligations do not disappear because the detention is described as temporary.

On January 21, 2026, the Department of Homeland Security's Office of Inspector General conducted an unannounced inspection.

Its findings were published on September 11, 2026.

Inspectors found that facility officials could not consistently identify the detention standards governing their operations.

The inspector general examined applicable state and federal standards and identified deficiencies involving environmental health and safety, special management units, medical care, food service, hygiene, and recreation.

The facility was found compliant with the intake and use-of-force standards included in the inspection.[10]

Consider the difficulty.

The institution had authority to confine people.

Custody existed.

The inability to leave existed.

Yet the officials responsible for administering that custody could not consistently identify the standards by which its conditions were to be judged.

Authority was present.

The clarity of its obligations was not.

The inspector general found that general housing units provided approximately twenty-eight square feet per detainee at full capacity, below the seventy-five-square-foot requirement under the Florida standard used for comparison.

Detainees spent much of their time in windowless structures.

Inspectors also identified deficiencies concerning recreation, shower access, drinking water, and hygiene.[10]

These are measurements.

They can be entered into tables.

Compared against requirements.

Assigned findings and recommendations.

But someone must live inside the measurements.

Twenty-eight square feet is not merely a fraction of seventy-five.

It is the space within which a person wakes.

Waits.

Attempts to sleep.

Attends to bodily needs.

And endures hours over which they possess little control.

A legal standard cannot contain the entire meaning of that experience.

But it can establish an obligation independent of the institution's preference.

It can make visible the distance between what was required and what was provided.

Then the inspectors examined the small metal enclosures.

Facility records showed that seventy-nine people had been held in enclosures measuring approximately eighteen square feet between July 17, 2025, and January 18, 2026.

The recorded periods ranged from several minutes to nearly two hours.

Facility staff described these structures as *calming areas*.

They maintained that detainees could request to use them and were not locked inside.

Inspectors nevertheless observed locking mechanisms, and facility records documented at least one instance suggesting possible disciplinary use.

The inspector general described the practice as unprecedented among the detention facilities its office had inspected and inconsistent with humane-treatment standards.[10]

We should preserve what the report establishes.

It does not independently verify every allegation concerning the enclosures.

Nor does it permit us to assume that every person held there experienced identical conditions.

But it establishes that the enclosures existed.

That people were held in them.

And that federal inspectors found their use inconsistent with humane detention standards.

Then there is the posted policy.

The words at the top read:

Respect, Care and Dignity.

Below that declaration, the policy explained that the holding space was intended to help detainees reflect upon their behavior, manage their emotions, and reduce stress.

It established a maximum period of two hours.

And among its provisions was the following:

***Detainees will be provided water upon request.*[10]**

Water.

Upon request.

We should not claim that this sentence proves water was withheld from everyone confined in those enclosures.

It does not.

The inspectors themselves distinguished what they could verify from allegations they could not independently resolve.

But the words remain.

They appear beneath a declaration of dignity, upon a policy governing the confinement of a human being inside a small metal space.

And perhaps this is where we ought to examine the distance between an institution's language and its conduct.

For dignity is not established by placing the word above a door.

Respect is not established by entering it into policy.

And care is not established merely because the institution has written down the conditions under which it intends to provide it.

The words may be sincere.

The stated purpose may be benevolent.

Yet their ethical significance depends upon what happens to the person beneath them.

A person in custody is not made less human by the necessity of confinement.

Nor does immigration status eliminate the protections that law requires authorities to provide.

The person may be subject to removal proceedings.

Their detention may be lawful.

Their legal claims may ultimately fail.

None of these circumstances makes humane treatment an optional courtesy.

XI. The Door Through Which a Person Must Be Heard

There was another question concerning the South Florida facility.

Access to legal counsel.

On March 27, 2026, a federal district court granted a preliminary injunction requiring improved access to confidential legal communications for people detained there.

The order required timely, free, confidential, unmonitored, and unrecorded outgoing legal calls, together with written and publicly accessible procedures governing attorney-client communication.[11]

The court was not deciding every allegation concerning the facility.

Nor did the injunction resolve the immigration status of every person detained.

It concerned the ability of people in custody to communicate meaningfully with those representing them.

This is different from the question of informed consent in medical research.

Lawful detention does not depend upon obtaining a person's permission before every exercise of custodial authority.

But detention authority remains subject to law.

And meaningful legal protections require more than the abstract existence of a right.

A person cannot effectively challenge a decision if the practical means of obtaining legal assistance have been placed beyond reach.

A right may exist in legislation.

It may appear in a handbook.

It may be described in the language of constitutional procedure.

Yet its practical value depends upon whether the person entitled to exercise it can actually do so.

The South Florida facility ceased operations in June 2026.

On August 14, 2026, the district court dismissed the attorney-access case without prejudice as moot after finding that the facility had closed and no detainees remained there.

The dismissal did not constitute a final judgment that all challenged conditions had been lawful.[12]

These distinctions matter.

A court may dismiss a case because the particular controversy no longer permits meaningful relief.

An inspector general may close recommendations administratively because the institution has ceased operating.

Neither event necessarily establishes that the underlying problems were corrected while the affected people remained there.

And the closure of a facility does not undo the experience of those who passed through it.

The structures may be removed.

The land may return to another use.

The litigation may conclude.

The records may remain.

But the people who were held there continue into whatever lives await them.

We should not confuse the closing of a building with the completion of accountability.

For a door may be closed without answering the questions raised by what occurred behind it.

XII. The Difference Between the Histories

These events are not interchangeable.

Project CHATTER was a Navy investigation into substances that might facilitate interrogation and intelligence recruitment. Its documented human experiments raise questions about consent that cannot be resolved for every participant from the surviving congressional summary.

Project ARTICHOKE involved CIA research and operational interrogation techniques, including documented uses of drugs and hypnosis under deceptive medical pretenses.

MKULTRA involved documented experimentation without informed consent.

Tuskegee involved the withholding of treatment from men whose disease was being studied.

The foster-care HIV research investigation identified failures of authorization and oversight while rejecting some of the gravest allegations made about those studies.

The St. Louis aerosol tests raise questions about undisclosed public exposure, though the National Research Council did not establish the adverse health effects attributed to them.

MKNAOMI concerned the development, maintenance, and control of dangerous capabilities.

The intelligence investigations involving journalists concerned surveillance and covert relationships.

Operation Northwoods concerned deceptive military proposals that were not carried out.

The South Florida detention facility concerned immigration custody, detention standards, legal access, and documented conditions of confinement.

They occurred under different authorities.

They involved different forms of power.

Different evidentiary records.

Different legal questions.

Different established injuries and alleged injuries.

We should not compress them into a single accusation.

To do so would diminish the particular people whose experiences require our attention.

Yet the histories may still be placed in conversation.

Not because they establish a continuous secret operation.

Not because a documented past abuse proves every subsequent allegation.

And not because the institutions involved necessarily possessed identical intentions.

They may be compared because each asks us to examine the relationship between public purpose and the human beings subjected to its pursuit.

What was the institution authorized to do?

What did it actually do?

What protections applied?

Were those protections meaningful?

Who bore the risk?

Who received the benefit?

Who could question the decision?

Who preserved the evidence?

And who was required to answer when the institution's own account proved insufficient?

These questions do not presume the answer.

They make an answer possible.

They also resist the belief that a sufficiently important objective settles the legitimacy of every means employed to pursue it.

It does not.

The urgency of medical research does not eliminate the need for consent and appropriate protection.

The existence of a security threat does not eliminate the need for lawful authority.

The legitimacy of immigration enforcement does not eliminate the duties owed to people in custody.

And the sincerity of those administering a program does not establish that its consequences were acceptable.

An institution may believe its work necessary and still be required to explain what it has done.

XIII. The Principles That Came After

In 1979, the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research issued the Belmont Report.

It articulated three foundational principles:

Respect for persons.

Beneficence.

***Justice.*[13]**

These principles concern research involving human beings.

They are not, by themselves, a comprehensive legal framework governing immigration detention, military operations, or intelligence activities.

Yet they provide a useful ethical vocabulary for considering the relationship between authority and the people affected by its exercise.

Respect for persons requires that human autonomy be taken seriously and that those with diminished autonomy receive protection.

Beneficence requires attention to welfare, risk, and preventable harm.

Justice asks whether the burdens and benefits of research have been distributed fairly.

These are not obscure ideas.

The difficulty lies in their application when an institution has already decided what it wishes to accomplish.

For a person may become inconvenient to the experiment.

Inconvenient to the security objective.

Inconvenient to the detention process.

Inconvenient to the administrative timetable.

And the institution may begin regarding that inconvenience as a problem to be managed rather than as a reason to examine its own procedures.

The human being becomes a variable.

A placement.

A subject.

A source.

A detainee.

A statistic.

An entry in a report.

These terms may describe something real.

They may even be necessary to the institution's work.

But none describes the whole person.

The child remains a child.

The patient remains a patient.

The person in custody remains a person.

And the human being beneath the decision does not cease to possess moral significance because the institution has assigned them a category.

A society does not demonstrate that it has learned from the past merely by possessing the language of ethics.

It demonstrates that learning when its institutions can be required to answer questions they would prefer not to answer.

When their claims can be tested.

When their records can be examined.

When their failures can be acknowledged.

And when those acknowledgments result in changes that make repetition less likely.

There is a difference between an institution capable of apologizing and an institution capable of learning.

The first may acknowledge what happened.

The second must examine why it happened.

And what must change.

XIV. The Person Beneath the Memorandum

We return, finally, to the word with which we began.

Necessary.

We need not banish it from public life.

There are necessary duties.

Necessary precautions.

Necessary inquiries.

Necessary interventions.

And sometimes necessary sacrifices.

But sacrifice becomes a dangerous word when spoken by someone who will not be required to make it.

It is one thing to offer one's own body to risk.

It is another to decide that someone else's body is available.

It is one thing to participate knowingly in research.

It is another to discover that participation was arranged without meaningful permission.

It is one thing to question a person through lawful procedures.

It is another to make their voice an object of chemical experimentation.

It is one thing to offer medical care.

It is another to disguise an interrogation as treatment.

It is one thing to accept the lawful authority of government.

It is another to be denied a practical means of invoking the protections that law provides.

And it is one thing for an institution to explain why a difficult action was necessary.

It is another for that explanation to become the end of the inquiry.

The men in Alabama cannot recover their untreated years.

The people subjected to covert drug experiments cannot return to the moment before the substance entered their bodies.

Those interrogated under deceptive medical pretenses cannot retroactively make the decisions they were prevented from making.

The children whose participation in research required greater oversight cannot retroactively receive the safeguards that should have existed at the time.

The residents beneath undisclosed aerosol releases cannot make an informed decision about an exposure they did not know was occurring.

And the people held in the South Florida detention facility cannot be returned to the months before its opening simply because the institution has now closed.

Time moves in one direction.

But responsibility does not become meaningless merely because the past cannot be altered.

We can preserve the record.

We can distinguish evidence from allegation.

We can require institutions to explain the authority they exercise.

We can demand that safeguards be practical rather than ceremonial.

We can refuse to treat the most vulnerable people as the most available.

And we can recognize that a policy bearing the language of dignity does not establish that dignity has been preserved.

There is something sorrowful in the thought of a person waiting for water while a document nearby explains the meaning of respectful treatment.

Not because the words are unimportant.

They are important.

But because they remain incomplete until the person receives what the words promise.

Somewhere, an official writes that a procedure is necessary.

Somewhere, a physician must decide whether the person before them is a patient or merely a source of data.

Somewhere, a child has been placed in the care of the state.

Somewhere, a person in custody asks to contact an attorney.

And somewhere, the institution responsible for answering must decide whether the inconvenience of that request is sufficient reason to delay it.

The answer cannot be supplied by a slogan.

Nor by a declaration of benevolent intention.

Nor by the assertion that extraordinary circumstances have made ordinary obligations irrelevant.

It must be supplied through conduct.

Through records that can be examined.

Through authority that can be challenged.

Through protections that can actually be exercised.

And through the recognition that the life beneath the decision remains a life, regardless of what the institution has called it.

We cannot return every person to the moment before an injury.

We cannot reconstruct every destroyed record.

We cannot guarantee that future institutions will never repeat the failures of those that preceded them.

But we can refuse to inherit the assumption that a sufficiently important purpose makes an ordinary human being expendable.

We can ask who bears the risk.

Who receives the benefit.

Who possesses the authority.

Who may refuse.

Who may appeal.

And who must answer when the institution's account is found wanting.

Tomorrow will have its emergencies.

Its fears.

Its difficult decisions.

Its reasons for demanding much of the living.

May those entrusted with power remember that necessity does not eliminate responsibility.

May they remember that a human being is not made available by being vulnerable.

And may they remember that the authority to protect a person is not the authority to possess them.

For there is a difference between a government that can exercise power over human beings and a government that remains answerable to them.

That difference is not established by the name the government gives itself.

It is demonstrated by what happens when someone beneath its authority asks for help.

A question.

A record.

A hearing.

A glass of water.

Not after the institution has closed.

Not after the evidence has been destroyed.

Not after the person has become a subject of historical regret.

While there is still someone alive to receive the answer.

And if an institution cannot remember that while it still possesses power, then history will be forced to remember it afterward.

Sources and Historical Notes

These references identify the principal documentary sources supporting the historical accounts. The meditation distinguishes documented events, official findings, unresolved allegations, and ethical interpretation. Its comparisons do not imply that the events are legally or historically equivalent.

[1] Project CHATTER — U.S. Navy interrogation research.

United States Senate, *Project MKULTRA, the CIA's Program of Research in Behavioral Modification*, joint hearing, August 3, 1977, Appendix A, "Testing and Use of Chemical and Biological Agents by the Intelligence Community," section A.1, "Project CHATTER," printed p. 68.

The congressional account documents the Navy program's 1947–1953 duration, the substances investigated, and animal and human experimentation, including overseas activities. It does not establish the consent circumstances of every participant.

[2] Project BLUEBIRD / ARTICHOKE — chemical interrogation and deceptive medical settings.

United States Senate, *Project MKULTRA*, August 3, 1977, Appendix A, section A.2, "Project BLUEBIRD/ARTICHOKE," printed pp. 68–69.

Central Intelligence Agency, *Successful Application of Narco-Hypnotic Interrogation (ARTICHOKE)*, memorandum for the Director of Central Intelligence, July 14, 1952.

Central Intelligence Agency, *ARTICHOKE [Redacted] Case #1*, memorandum to the Director of Security, approximately March 1954.

The declassified memoranda describe specific interrogations using drugs, hypnosis, and medical cover. The 1954 case records chemical administration under the pretense of influenza treatment. The investigators' assessment of success is not independent evidence of safety or consent.

[3] MKULTRA — experimentation and destruction of records.

United States Senate, *Project MKULTRA, the CIA's Program of Research in Behavioral Modification*, joint hearing, August 3, 1977.

The hearing documents experiments involving unwitting subjects and the destruction of substantial records in 1973. Additional historical documentation is collected by the National Security Archive.

[4] The Untreated Syphilis Study at Tuskegee — withholding treatment.

Centers for Disease Control and Prevention, *About the Untreated Syphilis Study at Tuskegee* and *The Untreated Syphilis Study at Tuskegee Timeline*.

The CDC documents the study's 1932–1972 duration, the enrollment of 600 Black men, the absence of informed consent, and the failure to offer effective treatment. The researchers did not deliberately infect the participants.

[5] New York City foster children and HIV/AIDS research — authorization and oversight.

Vera Institute of Justice, *The Experiences of New York City Foster Children in HIV/AIDS Clinical Trials*, final report, January 2009.

The investigation identified 532 children in 88 studies. It documented deficiencies in authorization and recordkeeping while finding no evidence supporting certain serious allegations. Its conclusions are subject to the scope and limitations of the records reviewed.

[6] St. Louis and other Army aerosol tests — documented releases and health-risk assessment.

National Research Council, *Toxicologic Assessment of the Army's Zinc Cadmium Sulfide Dispersion Tests*, National Academies Press, 1997.

The report documents the dispersion experiments and assesses the available toxicological and exposure evidence. It concluded that adverse health effects attributable to the estimated exposures were extremely unlikely.

[7] MKNAOMI — biological capabilities and institutional controls.

United States Senate, Church Committee, *Final Report*, Book I, 1976, chapter concerning chemical and biological agents; and *Project MKULTRA*, joint hearing, August 3, 1977, Appendix A.

The congressional materials document CIA–Army cooperation involving biological agents, toxins, and delivery systems. They distinguish documented capabilities, preparation, and retention issues from unestablished claims of actual use.

[8] Project Mockingbird and covert intelligence relationships with journalists.

Central Intelligence Agency, declassified *Family Jewels* records concerning Project Mockingbird; United States Senate, Church Committee, *Final Report*, Book I, 1976.

The CIA records describe the 1963 telephone surveillance of two journalists. The Church Committee separately documented covert CIA relationships involving journalists and media personnel. Broader allegations commonly grouped under *Operation Mockingbird* should not be treated as established activities of one unified program.

[9] Operation Northwoods — proposed deceptive military pretexts.

Chairman, Joint Chiefs of Staff, *Justification for U.S. Military Intervention in Cuba*, memorandum to the Secretary of Defense, March 13, 1962.

Declassified document preserved by the National Security Archive at George Washington University.

The memorandum proposes manufactured incidents intended to justify intervention. It is evidence of official planning, not execution.

[10] South Florida Detention Facility — conditions of confinement.

Department of Homeland Security, Office of Inspector General, *Unannounced Inspection of ICE's Florida Soft-Sided Facility ("Alligator Alcatraz") in Ochopee, Florida*, Report OIG-26-22, September 11, 2026.

The report concerns a limited-scope, unannounced inspection conducted January 21, 2026.

It identifies deficiencies involving applicable detention standards, housing space, special management units, medical care, food service, hygiene, and recreation. It documents small metal enclosures and reproduces the posted holding-cell policy.

The report distinguishes verified observations from allegations inspectors could not independently resolve. DHS disputed aspects of federal responsibility, emphasizing Florida's operational role.

The report is publicly available through the DHS Office of Inspector General and in a preserved copy on Wikimedia Commons.

[11] South Florida Detention Facility — access to legal counsel.

H.C.R. et al. v. Noem et al., No. 2:25-cv-747, United States District Court for the Middle District of Florida, Opinion and Order, March 27, 2026, Document 243.

The court granted a preliminary injunction in part, provisionally certified a class, and ordered improvements to confidential attorney-client communication, including free outgoing legal calls and publicly accessible procedures.

[12] Facility closure and dismissal on mootness grounds.

H.C.R. et al. v. Noem et al., United States District Court for the Middle District of Florida, Opinion and Order, August 14, 2026, Document 289.

The court dismissed the attorney-access litigation without prejudice as moot following closure of the facility. That disposition was not a final determination that every challenged practice had been lawful.

[13] The Belmont Report — foundational principles of human-subjects research ethics.

National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, *Ethical Principles and Guidelines for the Protection of Human Subjects of Research*, April 18, 1979.

The report identifies respect for persons, beneficence, and justice as foundational principles and discusses informed consent, assessment of risks and benefits, and the selection of research subjects.

It is an ethical framework for human-subjects research, not a general legal standard governing detention, intelligence activities, or military operations.

End of 'meditation'.