

Assange's Eleventh Day at the Old Bailey: Suicide, Hallucinations and Psychological Torture

September 22. Central Criminal Court, London.

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*Today, the prosecutors in the Julian Assange case did their show trial predecessors from other legal traditions proud. The ghosts of such figures as Soviet state prosecutor **Andrey Vyshinsky**, would have approved of the line of questioning taken by **James Lewis QC**: suggest that Assange, accused of 17 counts of violating the US Espionage Act and one count of conspiracy to commit a computer crime, reads medical literature to exaggerate his condition.*

Additionally to the political hook the defence is hanging its case on – political offences being a bar to extradition in the United Kingdom's 2003 Extradition Act) – a medical one has been fashioned. [Section 91](#) makes it clear that the judge in the extradition hearing must order the discharge of a person or adjourn the extradition hearing if “the physical or mental condition of the person is such that it would be unjust or oppressive to extradite him.” This can be read alongside the application of the European Convention of Human Rights, which stipulates under Article 3 that, “No one shall be subjected to torture or to inhuman or degrading treatment or punishment.”

Dr. Michael Kopelman, Emeritus Professor of Neuropsychiatry at the Institute of Psychiatry at King's College London, [took the stand](#) at the Old Bailey to delve into Assange's medical condition. His visits to Assange had yielded a man deprived of sleep, suffering “loss of weight, a sense of pre-occupation and helplessness as a result of threats to his life, the concealment of a razor blade as a means to self-harm and obsessive ruminations of ways of killing himself.” Kopelman was, he stated in submissions to the court, “as certain as a psychiatrist ever can be that, in the event of imminent extradition, Mr Assange would indeed find a way to commit suicide.”

The cross-examination by Lewis was in the worst traditions of the law. Non sequiturs were aplenty; baseless assessments on expertise generously made. Kopelman was, claimed the prosecutor, an expert in brain disease and its link with mental health, making him ill-suited to comment on Assange's health. Kopelman, rather put out at this, reminded Lewis that he had previously called upon his services in a difference case. It was “a bit rich” for the prosecutor to now be challenging his qualifications. The prosecution also suggested that Kopelman's psychiatric credentials were somehow shaded, if not rendered inconsequential, by him being “more of an advocate”. The defence witness snapped, suggesting he would respond to that assertion with an “unparliamentary word”.

The prosecution focused on Kopelman's summaries of days in April and May 2019, when Assange was evaluated by psychiatrists. This gave Lewis a chance to accuse the witness of omissions unsuitable to the defence. Kopelman had to constantly remind Lewis that he only

started to attend such sessions in person at the end of May.

In another feeble sortie, the prosecution suggested that Assange was medically sound because his performance at the extradition trial over the previous days had indicated no signs of depression. He was attentive to proceedings; he could answer the judge. To even the most untrained and untutored in the field of mental health, this should be regarded as an amateurish presumption: a competent performance hardly suggests the absence of depression or cognitive disturbance.

Kopelman [duly made that point](#), referring to the transcripts Lewis had used. “I cannot evaluate his mental and cognitive state from what’s in here.” Assange had “made a few comments”; he had “some long-standing semantic knowledge”; he “replied appropriately”. None of this need suggest that his “cognitive state is normal.” If anything, they lent credibility to a diagnosis of Asperger’s syndrome.

In Kopelman’s testimony, Assange [is reported](#) to have experienced “auditory hallucinations” featuring “derogatory and persecutory” voices: “you are dust, you are dead, we are coming to get you”. In assertions that were verging on the preposterous, even by the standards of this prosecution, Lewis attempted to erect an edifice of illusion. Assange was taking everyone for a joy ride in a fantasy of mental ill-health that had no foundation. He had been surely “malingering” about his symptoms. His hallucinations had been “self-reported”. Kopelman [reminded](#) Lewis of an elementary lesson: psychiatry tended to rely on self-reporting. “I don’t believe he’s got delusions. He’s very worried about whether discussions are recorded.” Given the “experiences in the embassy, that was a rational anxiety.”

Another sally followed, this time using Assange’s family as crude props for psychobabble. In the course of the extradition proceedings, it had become clear that Assange had formed a relationship with Stella Morris, having had two children with her during his stay at the Ecuadorean embassy in London. Two reports prepared by Kopelman included quotes from a visit with Morris. The failure to mention Morris in his first report peeved Lewis. Kopelman’s [explanation](#): “This was not in the public domain at that point, and she was very concerned about privacy so we decided not to put it in.” Once knowledge of her existence became public, “I included it.”

Lewis would have none of it: the duty to the court overrode any matters of embarrassment to Assange, and sensitivity to Morris’ privacy was of no consequence. Knowledge to the court of Morris and the children’s existence was vital, [suggested](#) Lewis, as it might be a “protective factor against suicide.” Charmingly, Lewis seemed to ignore the point that having a young family would hardly be a deterrent against self-harm when facing a promise of being locked up for life in solitary confinement in another country notorious for its lugubrious prison conditions. Death could well prove a desperate consolation. Kopelman was on to this: married people do not resist the pathway to suicide.

The [psychiatric picture](#) of Assange drawn by Kopelman was one of regression and severity, made worse by the likelihood of harm that can arise to those with Asperger’s syndrome. He had an “intense suicidal preoccupation.” Findings from autism specialist Dr Simon Baron-Cohen – [that suicide is nine times](#) more likely in patients with Asperger’s “than in the general population in England” – were mentioned. That study also found that people with Asperger’s syndrome “were significantly more likely to report suicidal ideation or plans or attempts at suicide if they also had depression.” Assange, Kopelman [reasoned](#), faced “an

abundance of known risk factors”.

In December 2019, conditions proved acute; in February and March, moderately severe. The lockdown at the Belmarsh prison facility precipitated by the coronavirus pandemic did its share of harm. Assange had sought confession with a Catholic priest, “who granted him absolution”. He had drawn up a will, scribbled farewell letters to family and friends. All signs of a man possibly readying for the other side.

As appalling as his conditions in Belmarsh had been, including a stint in confined isolation, the conditions “he would experience in North America would be far worse than anything experienced in the embassy or Belmarsh.” The imminence of extradition would “trigger a suicide attempt.” Assange’s most probable pre-trial accommodation would also encourage this. It was at the Alexandria Detention Center where Chelsea Manning attempted suicide while being held refusing to relent to a grand jury subpoena to answer questions on WikiLeaks. According to Kopelman, “It just shows how awful conditions must be.”

Attention turned to the prevalence of depression during Assange’s time in the Ecuadorean embassy, starting around 2015. This had caught the attention of Nils Melzer, the United Nations Special Rapporteur on Torture. Melzer has taken the long view on Assange: that the combined effort of several states – Ecuador, the United Kingdom, United States, Sweden – had created conditions of “psychological torture”, part of a deliberate, progressively cruel effort. There had been, [he claimed](#) in May 2019, “a relentless and unrestrained campaign of public mobbing, intimidation and defamation against Mr Assange, not only in the United States, but also in the United Kingdom, Sweden, and more recently, Ecuador.”

In company with two medical experts experienced in examining potential victims of torture and ill-treatment, Melzer’s May 9, 2019 visit to Assange confirmed that his “health has been seriously affected by the extreme hostile and arbitrary environment he has been exposed to for many years.” Assange, “in addition to physical ailments ... showed all symptoms typical for prolonged exposure to psychological torture, including extreme stress, chronic anxiety and intense psychological trauma.”

In November 2019, Melzer [reiterated](#) his concerns in the face of tardiness on the part of the British authorities. “Despite the medical urgency of my [May] appeal, and the seriousness of the alleged violations, the UK has not undertaken any measures of investigation, prevention and redress required under international law.”

Melzer’s views did not impress Lewis. His labours on the Assange case were “palpable nonsense”, lacking in balance and accuracy. Kopelman was [asked to distance](#) himself from such conclusions, despite them not being an “important factor” in his work. Lewis remains comfortably deaf, not merely to Melzer’s work, but the findings of such eminent groups as Doctors for Assange, an initial collective of 60 medical doctors, growing to 117 spanning 18 countries. The Assange case, [they argued](#) in February in *The Lancet*, “highlights several concerning aspects that warrant the medical profession’s close attention and concerted action”. In June, the group [noted](#) that, “Isolation and under-stimulation are key psychological torture tactics, capable of inducing severe despair, disorientation, destabilisation, and disintegration of crucial mental functions.” The psychological torture of a publisher and journalist in a climate already hostile to journalism “sets a precedent of international concern.”

In a crude, somewhat farcical manoeuvre typical of the day’s proceedings, Lewis went just

that bit lower in wondering whether Assange’s depression [would have made a difference](#) in soliciting or leaking “material from the US government.” Would such a tormented mind have been able to meet his media commitments (“doing a chat show” for Russia Today), or conduct public speaking engagements? Such views of depression, that great tormenter and killer, do not merely show this prosecution to be venal; they show it to be profoundly ignorant of history and medicine.

Assange’s defence team have a bright precedent to rely on. British computer scientist Lauri Love, who was also diagnosed with Asperger’s syndrome, was arrested in 2015 in the UK at the request of the United States for allegedly hacking various government entities. These included the Federal Reserve, the Environmental Protection Agency, NASA and the US Army. Initially losing his case to avoid extradition on September 16, 2016, and facing the approval to do so by then Secretary of State Amber Rudd, Love successfully appealed to the High Court. It [was accepted](#) that the US was an inappropriate forum to try Love; and that prison conditions awaiting him “would be oppressive by reason of his physical and mental condition.”

The High Court also accepted that “the fact of extradition would bring on severe depression, and that Mr Love would probably be determined to commit suicide, here or in America.” Being put on suicide watch would hardly have been adequate – it did not constitute a “form of treatment; there was no evidence that treatment would or could be made available on suicide watch for the very conditions which suicide watch itself exacerbates.”

This was strikingly appropriate and relevant. Kopelman, who also testified in Love’s case, [had also been given reassurances](#) at the time that the US prison system was up to scratch in guarding against suicide. Since then, the US prison system had been marked by the prominent suicide of Jeffrey Epstein and the attempted suicide by Manning. “Those reassurances were not very reassuring.”

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