Remote Neural Torture -- Theoretical Modern Methods of No-Touch Torture

Daniel
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Introduction: Targeted Individuals and No-Touch Torture

"Targeted Individuals" (TIs) are self-identified people who believe they are victims of organized stalking, surveillance, and harassment by shadowy adversaries using advanced technologies (Gangstalking and Targeted Individuals — ISD). While many experts view such claims as delusional, the concept of *no-touch torture* — inflicting suffering without physical contact — merits examination in light of emerging neurotechnologies. Modern military and neuroscience research has produced methods to remotely monitor and influence the human brain, raising the *theoretical* possibility of torturing someone from a distance. This report explores how psychological and physical torture tactics might be replicated through real-time neural surveillance and remote neuromodulation. We draw on known military psychological operations, brain-computer interface (BCI) advances, and neuroscience to assess the plausibility that such methods could already exist today.

Psychological Torture via Remote Neural Surveillance

Conventional psychological torture (PT) induces extreme mental distress without directly harming the body. PT techniques include prolonged sleep deprivation, sensory disorientation, forced self-induced pain, solitary confinement, mock executions, humiliation, mind-altering drugs, and exploiting phobias (The Neurobiology of Psychological Torture — The Center for the Study of Human Rights in the Americas (CSHRA)). These methods break victims by attacking their psyche — causing paranoia, fear, and hopelessness — and can lead to delirium, psychosis, or post-traumatic stress disorder (The Neurobiology of Psychological Torture — The Center for the Study of Human Rights in the Americas (CSHRA)). A theoretical remote equivalent would use continuous brain surveillance and stimulus injection to mimic these traumas:

- **Real-Time Thought Monitoring and Threats:** If an assailant could tap into a person's neural activity, they might detect fear or specific thoughts in real time. Advanced brain-decoding AI now enables translation of brain activity into text, essentially "reading" a person's thoughts from noninvasive scans (AI makes non-invasive mind-reading possible by turning thoughts into text | Artificial intelligence (AI) | The Guardian). In theory, a tormentor with such a *neural surveillance* system could monitor the victim's inner dialogue and emotional state continuously. As soon as the target feels a glimmer of hope or plans an escape, the system could respond with tailored threats or distressing stimuli.

For example, if the victim silently thinks, "Maybe I'm safe now," the tormentor could use a "voice-to-skull" transmission — a technology that uses directed energy to project audible speech into a person's head — to whisper *"You are never safe"* at that exact moment. The **microwave auditory effect** is one known method of transmitting sound directly into the brain using pulsed radiofrequency energy (Microwave auditory effect — Wikipedia). Discovered in the 1960s, this effect causes a person to *hear* a buzzing or speech inside their skull without any external sound (Microwave auditory effect — Wikipedia). U.S. military research even explored a "Voice of God" weapon using microwaves to beam voices into enemy soldiers' heads (The Microwave Scream Inside Your Skull — WIRED) (Weapons: Death Ray Replaced By The Voice of God — StrategyPage). A malicious actor could exploit this to make a victim hear derisive voices or threats reacting to their private thoughts, creating the ultimate paranoia. The victim would feel there is *no mental privacy*, amplifying worry to an extreme level — essentially a remote "**worry-to-death**" scenario of relentless psychological terror.

- **Simulated Mock Executions and Phobia Exploitation:** Traditional mock executions involve falsely convincing a prisoner they are about to be killed — a gun is pressed to the head, the trigger pulled with blanks, etc. Remotely, one could hijack the victim's sensory perceptions to simulate life-threatening scenarios. With real-time neural monitoring, an AI could detect what the victim fears most (e.g. drowning, suffocation, heights) by analyzing amygdala activity or stress responses. Then, through neural stimulation or augmented reality fed directly to the brain's sensory areas, the tormentor could *force the victim to experience their worst nightmare*. For instance, triggering the vestibular cortex and visual cortex could create the terrifying illusion of falling from a great height whenever the person closes their eyes. Or stimulating the insular cortex (involved in breathlessness and suffocation feelings) could induce a sensation of choking or drowning out of nowhere. These experiences would be *indistinguishable from reality* to the target. Coupled with random "near-death" incidents — e.g. overriding the brain's autonomic signals to briefly stop the heart or breathing (discussed later) — the victim lives in a perpetual mock execution. The **threat** is never carried out to completion, but the fear is real and ceaseless.

- **Sleep Deprivation and Sensory Overload:** Remote neurotorture could also replicate sleep deprivation, a hallmark of psychological torture (The Neurobiology of Psychological Torture — The Center for the Study of Human Rights in the Americas (CSHRA)). By remotely stimulating the brain's alertness centers or inducing painful sensations whenever the victim tries to sleep, the tormentor can prevent any rest. For example, the *ascending arousal system* in the brainstem and hypothalamus keeps us awake; targeted stimulation of these regions (or disruption of the sleep-regulating suprachiasmatic nucleus) at night could keep the victim in a state of forced insomnia. Additionally, a combination of remotely induced **targeted noise and hallucinations** can create sensory disorientation similar to classic torture methods. Reports from TIs often describe "targeted noise harassment" — strange sounds or voices that only they can hear (Gangstalking and Targeted Individuals — ISD) (Gangstalking and Targeted Individuals — ISD). Technologies like ultrasonic or microwave transmission could bombard the victim with high-pitched ringing or commands that no one else perceives. Over time, this erodes the victim's sanity. Table 1 summarizes some psychological torture symptoms and how a remote system might induce them via neural targets.

Table 1: Psychological Torture Effects and Potential Remote Induction

Torture Effect Conventional Method Remote Neural Method (Hypothetical) *Extreme Fear of Imminent Death* Mock execution (fake killing) (The Neurobiology of Psychological Torture — The Center for the Study of Human Rights in the Americas (CSHRA)) Stimulate fear circuits (amygdala) when victim is vulnerable; inject "voices" confirming their death is near via microwave auditory effect (Microwave auditory effect — Wikipedia). *Paranoia & Helplessness* Threats, humiliation, unpredictability Real-time thought surveillance to anticipate hopes; instant punitive feedback (e.g. voices or pain) to crush any sense of control. Victim believes the tormentor is "inside their head." *Sleep Deprivation* Constant noise/light, forced waking Stimulate brain's alert centers to prevent sleep; trigger pain or muscle spasm when EEG signals indicate onset of sleep. Victim is awakened internally whenever they doze off. *Sensory Disorientation* Solitary confinement, sensory overload Feed false sensory inputs to brain: e.g. make victim *hear* non-existent loud noises or *see* frightening hallucinations via visual cortex stimulation. Alternately, use directed energy to create real noises just below hearing threshold to unnerve the target. *Exploitation of Phobias* Using snakes, dogs, or phobic triggers in cell Detect phobic thoughts (via heightened amygdala response) and *project phobia-related stimuli* into victim's mind. For instance, if someone fears spiders, stimulate somatosensory cortex to make them feel spiders crawling on their skin when none are there.

By combining these techniques, a perpetrator could orchestrate a sophisticated **remote psychological torture program**. The victim's own mind becomes the battleground, with their neural signals both monitored and manipulated to maximize terror. This scenario, while speculative, builds on real capabilities: scientists have shown they can decode continuous speech from brain activity (AI makes non-invasive mind-reading possible by turning thoughts into text | Artificial intelligence (AI) | The Guardian), **induce auditory hallucinations** with energy beams (Microwave auditory effect — Wikipedia), and inflict symptoms like nausea, dizziness and pain from afar using directed radiofrequency energy (Havana syndrome: 'directed' radio frequency likely cause of illness — report | US foreign policy | The Guardian). Notably, a 2020 National Academies report on the so-called *"Havana Syndrome"* concluded that *directed, pulsed RF energy* was the most plausible cause of mysterious neurological symptoms in U.S. diplomats (Havana syndrome: 'directed' radio frequency likely cause of illness — report | US foreign policy | The Guardian). This suggests that an unseen antagonist could already use directed energy weapons to produce physical *and* psychological distress remotely — essentially validating one aspect of what TIs describe as "electromagnetic torture."

Physical Torture via Remote Neuromuscular Control

Beyond psychological torment, traditional torture often involves direct **physical pain or coercion**: beatings, stress positions, suffocation, etc. In a modern no-touch scenario, the aggressor would instead control the victim's own nervous system to inflict pain and bodily harm from the inside. The human body can be made to betray itself if external signals hijack the neural pathways that govern muscles and sensory perception. Recent advances in bioelectronics and neurostimulation hint at how this is possible.

1. Remote Control of Muscles and Movement:
Every voluntary movement we perform is triggered by electrical impulses in the motor cortex of the brain, which travel down the spinal cord to contract muscles. If an external device can generate those same impulses remotely, it could force a person's limbs to move against their will. Researchers have already demonstrated rudimentary "remote control" of a body: in one experiment, a scientist sent a brain signal via the internet to another person, causing the second person's finger to move involuntarily (via activating their motor cortex with transcranial stimulation). More directly, *transcranial magnetic stimulation* (TMS) of the motor cortex can induce muscle twitches — for example, a magnetic pulse over the brain region controlling the leg will make the leg kick. Such technology, when refined, could be weaponized to enforce stress positions. A victim could be *forced to stand* for hours, unable to sit or rest, by stimulating postural muscles whenever they try to collapse. **Prolonged standing** is a known torture method that causes excruciating pain and swelling; a remote system could induce the same by locking the victim's knees or spine in place via neural commands. Conversely, the tormentor might *collapse* the victim at will — e.g. suddenly shutting off signals to leg muscles to make them fall. This unpredictability itself is a form of torture, as the person loses all control of their body.

New tools suggest fine-grained motor control is plausible. The U.S. Defense Advanced Research Projects Agency (DARPA) has funded brain interface research aiming to **read and write neural signals** with high precision. The Next-Generation Nonsurgical Neurotechnology (**N3**) program, for instance, sought to create noninvasive or minimally invasive brain-machine interfaces that can "read from and write to multiple points in the brain at once" with spatial precision down to sub-millimeter regions (Next-Generation Nonsurgical Neurotechnology). One N3 team at Battelle developed electromagnetic *nanotransducers* — nanoparticles delivered into specific neurons — which convert magnetic fields into electric currents and *vice versa*, enabling bidirectional communication with those neurons (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces). In essence, these particles can *stimulate or record* neural activity when commanded by an external electromagnetic field. If such nanotransducers were distributed in the motor cortex or even in peripheral nerves, an attacker could **fire the correct pattern of magnetic pulses to contract particular muscles** remotely. For example, nanoparticles lodged in the neurons controlling the eyelid might be triggered to force the eyes shut. A targeted individual driving a car could suddenly find their **eyelids involuntarily closing**, a terrifying scenario that could cause a crash (and has been reported anecdotally by some TIs). Likewise, stimulating the neurons of the hand that holds a weapon could force a hostage to drop it, or conversely, to tighten their finger on a trigger. Table 2 lists a few hypothetical physical torture tactics and how remote neural control could achieve them.

Table 2: Physical Torture Tactics and Remote Neurological Replication

Physical Torture Tactic Traditional Method Remote Neural Equivalent *Stress Position (Prolonged Standing)* Forcing prisoner to stand long periods (often shackled upright) Stimulate postural muscle motor neurons to contract continuously, preventing the victim from sitting. If they attempt to crouch, automatically trigger spinal extensor muscles via implanted nanotransducers (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces), locking them upright. *Blinding or Disorientation* Blindfolding, or flashing bright light Trigger involuntary eyelid closure or induce temporary blindness via visual cortex inhibition. Alternatively, force eyes open (stimulate levator eyelid muscle) to prevent blinking and induce pain/drying. *Choking/Suffocation* Waterboarding or strangulation Remotely suppress signals to the diaphragm and intercostal muscles (via phrenic nerve control), causing an inability to breathe for short

intervals. This creates the *sensation* of suffocation on demand, without any restraint around the neck. *Beatings and Electric Shocks* Physical blows or cattle prod shocks Directly stimulate pain pathways in the somatosensory cortex or peripheral nerves. For instance, activate nociceptive (pain) fibers in the arm to mimic the agony of a sharp electric shock or limb injury, even though no wound is present. Victim feels genuine pain out of nowhere ([Havana syndrome: 'directed' radio frequency likely cause of illness — report *Muscle Spasms/Cramping* Forced exertion or contortions to cause cramps Inject erratic stimulation to muscle control neurons, causing severe **muscle spasms** (e.g. charley horse cramps) at the tormentor's whim. These spasms can be targeted (leg, back, etc.) to incapacitate the victim with pain.

The key to these remote physical effects is **neural interface technology** that can target specific neural circuits. Remarkably, much of this tech is under active development for medical or military applications. One breakthrough concept is *neural dust* — tiny wireless implants that can be scattered throughout the nervous system. These devices (on the order of millimeters to hundreds of microns) contain electrodes and sensors that can record neural activity or stimulate nerves when powered wirelessly (Sprinkling of neural dust opens door to electroceuticals — Berkeley News) (Sprinkling of neural dust opens door to electroceuticals — Berkeley News). In 2016, UC Berkeley engineers demonstrated the first dust-sized, batteryless sensors that can be implanted in a rat and stimulate nerves using ultrasound as a power source (Sprinkling of neural dust opens door to electroceuticals — Berkeley News) (Sprinkling of neural dust opens door to electroceuticals — Berkeley News). The idea is to introduce thousands of such "neural dust" chips into the body, creating an internal mesh network that interfaces with neurons (Neural dust — Wikipedia). Once implanted, these motes can **monitor or control the nerves and muscles and remotely monitor neural activity** (Neural dust — Wikipedia). In a medical setting, this could treat epilepsy or control prosthetics. In a *torture* setting, this offers an array of "puppet strings" embedded in the victim. An external controller — using ultrasound, magnetic fields, or radio waves — could command these neural dust sensors to fire electrical impulses into any connected nerve (Sprinkling of neural dust opens door to electroceuticals — Berkeley News). The victim could thus be *puppeteered*: their fingers might move to write a false confession, their legs may walk them into danger, or their vocal cords might speak on command.

One particularly insidious application is remotely controlled **respiratory torture**. The brainstem's medulla oblongata contains the respiratory center that rhythmically signals the diaphragm to contract for breathing. If an external system sent disruptive signals (via nanoparticles or ultrasonic stimulation) to the brainstem or phrenic nerve, it could alter this rhythm. Imagine the controller remotely causing the victim to stop breathing for 30 seconds — not long enough to kill, but enough to induce panic and oxygen starvation. Just as they're about to lose consciousness, control is released and the victim gasps for air, only for the cycle to repeat. This is equivalent to the torture of controlled drowning (as in waterboarding), but inflicted by invisible technological means. The brainstem also houses cardiovascular centers that regulate heart rate via the vagus nerve (The Vagus Nerve: A Key Player in Your Health and Well-Being). *In theory*, signals could be injected to drastically slow the heart (causing dizziness and chest pain) or speed it up to dangerous levels, simulating a heart attack. The vagus nerve, which originates in the medulla, innervates the heart and can decrease heart rate (The Vagus Nerve: A Key Player in Your Health and Well-Being) (The Vagus Nerve: A Key Player in Your Health and Well-Being). A remotely controlled vagus stimulation (much like a clinical vagus nerve stimulator implant but used malevolently) could produce bradycardia (slow heartbeat) until the victim nearly blacks out, or conversely a withdrawal of vagal tone causing tachycardia and blood

pressure spikes. Vital organs thus become leverage for torture — *all without laying a finger on the subject.*

It's worth noting that the building blocks for such **neuromuscular domination** are being actively studied. For example, scientists at MIT recently developed magnetoelectric nanoparticles — 250-nanometer discs — that can be injected into a brain region and then activated by an external magnetic field to produce electric pulses in nearby neurons (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification) (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification). These magnetoelectric nanodiscs have a magnetostrictive core and piezoelectric shell; when a magnetic field is applied, they physically deform and generate an electric potential (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification) (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification). In tests, a magnetic pulse from outside the body caused the particles to *deliver electrical impulses to neurons*, firing them without any wires or implants (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification) (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification). This technology was touted as a way to do **deep brain stimulation without surgery** for Parkinson's or depression treatment (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification) (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification). But in the wrong hands, the same *injected nanodiscs* could turn into a torture toolkit: an aggressor could remotely trigger intense pain or muscle contractions if those discs were targeted to pain fibers or motor neurons. Crucially, this method does not require genetic modification of the victim's neurons (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification) (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification), meaning it could theoretically be used on anyone once the nanoparticles are administered (perhaps covertly, via a tainted beverage or aerosol). DARPA's N3 program similarly considered non-surgical "*nanotransducers*" delivered to the brain to facilitate remote read/write of neural signals (DARPA Awards $9.8M To Rice University For Next-Gen Nonsurgical Neurotechnology Program — nta.org) (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces). As these technologies mature, the gap between science fiction and reality narrows: **remote physical torture** moves from the realm of imagination to plausible future (or present) capability.

DARPA's N3 and Neural Dust: A Platform for Remote Neural Access

A centerpiece of the plausibility argument is the rapid development of brain-computer interfaces that do not require surgical implants. DARPA's **N3 (Next-Generation Nonsurgical Neurotechnology)** project (2018–2022) explicitly aimed to create a "high-performance, bi-directional" neural interface system for able-bodied users, *without surgery* (Next-Generation Nonsurgical Neurotechnology) (Next-Generation Nonsurgical Neurotechnology). In other words, a headset or external device that can **read** neural activity and **write** information into the brain in real time. This is not a conjecture but a stated goal: N3 sought to overcome the precision limits of EEG and transcranial stimulation by developing new methods to interface with neurons at multiple points simultaneously (Next-Generation Nonsurgical Neurotechnology). Researchers pursued two general paths: completely noninvasive (external only) and "minutely invasive"

(using nanotransducers delivered into the brain) (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces) (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces). The outcomes of N3 included approaches using optics, acoustics (ultrasound), and electromagnetics to reach into the brain (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces). For example:

- **Optical & Acoustical Hybrid:** Carnegie Mellon's team used ultrasound to guide light into the brain for recording neural activity, and overlapping electric fields to stimulate specific neurons — exploiting neurons' non-linear response to fields for localized activation (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces). This suggests one can focus on a small set of neurons deep in the brain by combining energy modalities, all from outside the skull.
- **Magnetic Nanotransducers:** Battelle's team delivered electromagnetic nanoparticles (nanotransducers) into neurons of interest, which then communicate with an external transceiver magnetically (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces). These nanotransducers essentially turn neural electrical impulses into magnetic signals detectable outside, and allow external magnetic pulses to fire the neuron (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces). It's a bi-directional *nano-scale radio* for the brain. The N3 program announcement noted these could be temporary and non-surgically delivered, possibly via inhalation or crossing the blood-brain barrier (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces).
- **Magneto-Genetic and Optical:** Rice University's team took a genetic approach, making neurons express magnetically sensitive proteins (magnetogenetics) so that external magnetic fields can trigger them (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces). They combined this with diffuse optical tomography for read-out (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces). Though genetic modification might not be practical for covert use, it proves the concept that magnetic fields can write to the brain if the neurons are receptive.
- **Ultra-Sensitive Magnetometers:** Teledyne's team developed micro-optically pumped magnetometers to detect the faint magnetic fields of neural firing, and used focused ultrasound to stimulate neurons (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces). This shows even without implants, ultra-sensitive sensors can pick up brain activity (like a portable MEG brain scanner), and ultrasound beams can causally influence brain circuits.

The **common theme** is that N3 achieved (or aimed to achieve) the ability to "tune in" to specific brain regions and modulate them remotely. At the conclusion of the program, DARPA officials were optimistic that wearable neural interfaces with millimeter-range links to the brain could become practical (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces). While the intended use is for soldiers to control drones or communicate silently with AI, the *side effect* is a technology that a malicious actor could weaponize. A high-performance N3 device in the wrong hands would allow **access to the neural pathways for movement, sensation, and perhaps even thought**.

Consider the brain as having various "control centers": the motor cortex directs voluntary movements, Broca's and Wernicke's areas handle speech and language, the limbic system (amygdala, hippocampus) processes emotions and memories, and the autonomic centers in the brainstem manage vital functions like heart rate and breathing (The Vagus Nerve: A Key Player in Your Health and Well-Being). Now imagine an infiltrative technology — like neural dust or

nanotransducers — that targets each of these centers. For motor control, the primary motor cortex on the precentral gyrus could be laced with nanoparticles, allowing precise activation or inhibition of any body part (mapped by the motor homunculus in that region). For speech, one could target Broca's area (speech production) and the motor neurons of the tongue, larynx, and jaw. For autonomic control, nanoparticles in the medulla oblongata could modulate the vagus nerve output, which *"regulates involuntary processes like heart rate, blood pressure, and respiration"* (The Vagus Nerve: A Key Player in Your Health and Well-Being). Indeed, vagus nerve stimulation is already used clinically to treat epilepsy and depression by sending pulses to the brain; a hostile agent could similarly use it to *induce bradycardia or digestive pain*. Meanwhile, an array of neural dust motes in the somatosensory cortex could induce any tactile sensation — from burning heat to cutting pain — anywhere on the body by targeting the appropriate cortical area for that body region.

Such a system would effectively give the tormentor a **"dashboard" of the victim's nervous system**. With a graphical interface, they could select an organ or function to torture: *click* "heart" to cause arrhythmia, *click* "legs" to induce convulsions, *click* "fear center" to spark a panic attack. This sounds dystopian, but each component is grounded in developments reported in scientific literature. The concept of *injectable nano-network* is no longer fantasy: one 2021 study demonstrated magnetoelectric nanoelectrodes that can be injected and wirelessly transmit electrical signals to the brain via an external magnetic field (Nonresonant powering of injectable nanoelectrodes enables …). Another team created nano-sized wireless stimulators powered by alternating magnetic fields that can fire neurons without implants (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification) (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification). DARPA's own materials envisioned combining multiple devices to interface with many brain points at once (Next-Generation Nonsurgical Neurotechnology). Even the time latency is impressive — N3 aimed for reading/writing with only ~50 millisecond delay (Next-Generation Nonsurgical Neurotechnology), meaning real-time feedback loops (critical for responsive torture sequences) are feasible.

It is crucial to emphasize that *no evidence shows DARPA intended any of this for torture or coercion*. These projects are aimed at aiding soldiers and patients. However, this exploration highlights that the **same underlying capabilities** — remote neural access, precision stimulation, bidirectional control — could enable a form of torture unlike any seen before: one where the victim might have no scars, no physical implant to detect (if nanoparticles are used), and no escape even in the solitude of their mind.

(Six Paths to the Nonsurgical Future of Brain-Machine Interfaces) *Conceptual illustration of a wireless brain interface affecting specific brain regions. Advanced programs like DARPA's N3 are developing non-surgical methods to "read and write" to the brain using external transmitters, potentially enabling remote influence over neural circuits.*

Induced Speech, Forced Acts, and Coerced Crimes

One of the most disturbing implications of remote neural control is the possibility of forcing a victim to **perform actions or speech against their will** — even criminal acts — via direct influence or blackmail. In essence, this crosses from torture into the realm of remote *mind*

control, coercing the target to comply with the tormentor's demands or face neurological punishment.

Induced Speech: The neural basis of speech involves coordinated activity in the brain's language centers (e.g., Broca's area in the frontal lobe for speech production and Wernicke's area for language comprehension) and in the motor cortex regions that control the vocal tract muscles. If an intruder can stimulate these areas in the correct sequence, they could theoretically make the victim utter words or phrases. This could be done in a brute-force way by driving the larynx, tongue, and lip muscles through their motor neurons — effectively treating the person's speech apparatus like a *teleoperated speaker*. Another approach is more subtle: **implanting thoughts or inner speech** that the victim then vocalizes semi-voluntarily. For example, a technology called "silent sound" or *ultrasound neural modulation* might induce specific brainwave patterns that correspond to internal verbalizations. The victim might "hear" a thought that is not their own (like an intrusive command) and then unknowingly speak it. There have been reports (though not officially verified) of military experiments on *Electronic Telepathy*, where EEG signals of speech are translated to another person's brain via TMS, causing the second person to hear the first person's thoughts. If refined, an operator could compose a sentence ("I will bomb the building tomorrow") and inject it into the target's mind repeatedly. Under duress and confusion, the target may eventually speak it aloud, seemingly confessing or threatening something they never intended. Such **induced speech** could be used to blackmail the victim ("we have you on recording making a terroristic threat") or to create false evidence that leads to their arrest, thus silencing them.

Forced Movements and Criminal Acts: External control of motor functions can directly force someone to carry out physical acts. In a nightmare scenario, a skilled neuro-controller could effectively **puppet** a person into committing a crime. The person might retain awareness but have no control as their body moves on its own. For instance, a targeted individual might find themselves **compelled to assault** a loved one; their own hands move to strike while they mentally scream to stop. A more sophisticated method might not fully puppeteer the action but rather use brain stimulation to bias the person's decision-making. Stimulating certain brain regions can alter judgment and impulse control — for example, disrupting the right temporoparietal junction with magnets has been shown to sway moral judgments (Moral judgments can be altered … by magnets | MIT News | Massachusetts Institute of Technology) (Moral judgments can be altered … by magnets | MIT News | Massachusetts Institute of Technology). In one study, TMS over the TPJ made subjects more likely to judge harmful actions as acceptable by impairing their ability to consider intent (Moral judgments can be altered … by magnets | MIT News | Massachusetts Institute of Technology). Similarly, stimulation of the dorsolateral prefrontal cortex can affect risk-taking and compliance. A malicious actor could target these cognitive control regions to lower the victim's inhibitions or amplify aggressive impulses. Combined with hallucinated justifications (e.g. making the victim perceive the target of violence as a threat via false sensory input), the tormentor could *manipulate the victim into initiating* an atrocity. Unlike pure puppeteering, this method blurs the line of responsibility, potentially leaving the victim to take the blame.

Coercion and Blackmail: Direct brain control provides the stick; psychological manipulation provides the carrot. An adversary could use the constant threat of unbearable pain or neurological collapse to **blackmail the target into compliance**. For example, the victim might be told (via an inner voice or other means), *"We can make you kill your friend. If you don't do exactly as we say — if you even think of disobeying — we will take over your body."* The victim,

having already experienced episodes of lost control or agony at the push of a button, is likely to believe these threats. This could coerce them into willingly doing the adversary's bidding in hopes of avoiding worse outcomes. Historical mind control programs like MK-Ultra sought to break individuals and reprogram them through drugs and trauma; a neural torture system could do this far more precisely by targeting the biological substrates of decision and emotion. By alternating horrific punishment (e.g. inducing a heart attack-like pain) with periods of relief when the victim obeys, the controller can create **Pavlovian conditioning**. Over time, the victim's will may erode, until they reflexively follow commands to avoid trigger of their implanted pain.

One could envision a victim being forced to commit a crime such as espionage, sabotage, or even murder, all while under near-total remote control or duress. After the deed, the controller might release them from influence, leaving the individual horrified at what they've done. The *ultimate cruelty* is that the victim might then be punished by society for those crimes, completing the goal of the tormentor without ever revealing the true perpetrator. This induced action mechanism is not entirely fanciful: neuroscientists have demonstrated "brain-to-brain" communication in humans (albeit for benign tasks), and brain stimulators can elicit complex behaviors in lab animals. For instance, experiments have used brain implants to make rodents run through mazes via remote control, nicknamed "robo-rats." Replacing implants with nanotech and magnets simply makes the method less detectable.

Conclusion: From Theory to Plausibility

The idea of remote torture and control of a human being — turning the body and mind into an unwilling puppet — reads like science fiction or the paranoid grievances of "targeted individuals." Indeed, TIs often describe experiences of voice-to-skull harassment, involuntary body movements, artificial pain, and mind reading that align with the mechanisms discussed (Gangstalking and Targeted Individuals — ISD) (Gangstalking and Targeted Individuals — ISD). While many such accounts lack concrete evidence, the rapid progress in neurotechnology lends a chilling plausibility to these claims. We now have *demonstrated* building blocks: noninvasive brain decoders that can read thoughts (AI makes non-invasive mind-reading possible by turning thoughts into text | Artificial intelligence (AI) | The Guardian), directed energy devices that induce pain and sonic hallucinations (Havana syndrome: 'directed' radio frequency likely cause of illness — report | US foreign policy | The Guardian) (Microwave auditory effect — Wikipedia), and wireless nanoparticle systems that can activate neural circuits remotely (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification). It is no longer a question of **"Could this happen?"** — the pieces exist. It is instead a question of integration and intent: **"Has someone put the pieces together to create an actual system of no-touch torture?"**

In military research, for now, the intent is focused on therapy, augmentation, and nonlethal weapons for crowd control (like sonic beams or microwave pain beams). However, history teaches that any technology can be repurposed as a weapon. The convergence of brain science and weapons development — often termed *neurowarfare* or *psychotronic warfare* — is an emerging domain. Nations are likely researching how to defend against or employ such methods. The public evidence is scant, often buried in defense contracts and obscure research papers, but enough has trickled out to sketch a picture of what's possible. DARPA's N3 program and related efforts provided proof-of-concept that multi-channel brain links are feasible without implants (Next-Generation Nonsurgical Neurotechnology). If a clandestine group or state actor managed

to acquire or advance this technology, the result might well be the kind of remote torture chamber TIs describe.

In summary, we explored how **psychological torture** techniques like mock executions or relentless threats could be delivered by reacting to a victim's own thoughts in real time, thanks to brain-monitoring capabilities. We saw how **physical tortures** — pain, suffocation, muscle exhaustion — could be mimicked by seizing control of the victim's nervous system via remote neural stimulators (magnetoelectric nanoparticles, ultrasonic interfaces, etc.). We discussed DARPA's role in pushing the envelope with projects like N3 and neural dust, which seek to **open the brain to remote access** (DARPA Awards $9.8M To Rice University For Next-Gen Nonsurgical Neurotechnology Program — nta.org) (Neural dust — Wikipedia), potentially allowing a hostile takeover of motor and autonomic functions (even the heart, via brainstem/vagus manipulation (The Vagus Nerve: A Key Player in Your Health and Well-Being)). Finally, we considered the dire implications: speech and actions coerced through neural leverage, up to forcing a person to commit crimes under remote command. Each element is grounded in current science, stitched together here to illuminate a dark theoretical possibility.

It is critical to maintain a scientific skepticism — extraordinary claims require extraordinary evidence. We do not assert that such torture programs *are definitively operational today*, only that **from a technical perspective, they are plausible** and perhaps closer to reality than we wish to believe. As neuroscience marches forward, safeguards and ethics must keep pace to prevent abuse of these powerful tools. The specter of remote neural torture should motivate transparency and defensive research, to ensure that the tools to heal and enhance are not turned into instruments of unimaginable suffering.

Sources: References are included inline to relevant literature, military reports, and scientific findings that support the feasibility of the described concepts. These include DARPA program announcements (Next-Generation Nonsurgical Neurotechnology) (Six Paths to the Nonsurgical Future of Brain-Machine Interfaces), neuroscience studies on brain decoding (AI makes non-invasive mind-reading possible by turning thoughts into text | Artificial intelligence (AI) | The Guardian) and stimulation (Magnetoelectric nanodiscs offer remote brain stimulation without implants or genetic modification), as well as documented effects of directed energy on humans (Havana syndrome: 'directed' radio frequency likely cause of illness — report | US foreign policy | The Guardian) and known psychological torture methods (The Neurobiology of Psychological Torture — The Center for the Study of Human Rights in the Americas (CSHRA)). Each citation points to the source material substantiating the preceding claim or data.