SILENT WEAPONS: EXAMINING FOREIGN ANOMALOUS HEALTH INCIDENTS TARGETING AMERICANS IN THE HOMELAND AND ABROAD

HEARING

BEFORE THE

SUBCOMMITTEE ON COUNTERTERRORISM, LAW ENFORCEMENT, AND INTELLIGENCE

OF THE

COMMITTEE ON HOMELAND SECURITY HOUSE OF REPRESENTATIVES

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SILENT WEAPONS: EXAMINING FOREIGN ANOMALOUS HEALTH INCIDENTS TARGETING AMERICANS IN THE HOMELAND AND ABROAD

Wednesday, May 8, 2024

U.S. HOUSE OF REPRESENTATIVES,
COMMITTEE ON HOMELAND SECURITY,
SUBCOMMITTEE ON COUNTERTERRORISM,
LAW ENFORCEMENT, AND INTELLIGENCE,
Washington, DC.

The subcommittee met, pursuant to notice, at 2:04 p.m., at Room 310, Cannon House Office Building, Hon. August Pfluger [Chairman of the subcommittee] presiding.

Present: Representatives Pfluger, Crane, Correa, and Goldman.

Also present: Representative Swalwell.

Chairman PFLUGER. The Committee on Homeland Security, Subcommittee on Counterterrorism, Law Enforcement and Intelligence will come to order. The purpose of this hearing is to receive testimony from expert witnesses from the National Security realm that will inform our understanding of Anomalous Health Incidents, or more commonly known as Havana Syndrome.

I now recognize myself for an opening statement. Good afternoon, and welcome to the Subcommittee on Counterterrorism, Law Enforcement, and Intelligence. We are holding this important hearing to examine Anomalous Health Incidents, otherwise known as AHI's or Havana Syndrome, and discuss the potential targeting of U.S. Government officials and their families in the homeland and elsewhere. Although this issue has recently gained significant media attention, the issues surrounding Anomalous Health Incidents, or Havana Syndrome are not new. Dating back to 2014, a number of us diplomatic, military, and intelligence officials and their families have reported major medical symptoms that have affected their auditory and sensory motor skills. These issues became public in late 2016 after a group of Canadian diplomats and U.S. Government employees and their families assigned to the U.S. embassy in Havana, Cuba, began experiencing similar symptoms. After the reported incidents in Havana, Government officials and their families began reporting similar symptoms in the People's Republic of China, Vietnam, Germany, Austria, Serbia, Australia, Taiwan, Colombia, as well as here in the United States. Multiple agencies within the intelligence community have conducted assessments in an attempt to identify the factors that cause AHI's, or who, if any-

one, is responsible for these incidents. Unfortunately, none of these studies could conclusively identify the causes of these incidents.

However, the State Department commissioned a study through the National Academies of Science, Engineering, and Medicine that found that, I quote, "unusual presentation of acute, directional, or location-specific early phase signs, symptoms, and observations reported by Department of State employees to be consistent with the effects of directed, pulsed radio frequency energy. Many of the chronic nonspecific symptoms are also consistent with known radio frequency effects, such as dizziness, headache, fatigue, nausea, anxiety, cognitive deficits, and memory loss." Since the National Academy's findings, generally, the IC, the intelligence community, has stood by their initial findings and maintains that the origins of these symptoms are still unknown and not likely to be derived from the actions of a foreign adversary.

Today, we hope to gain a better understanding of anonymous—Anomalous Health Incidents to address this pressing issue, and it is paramount that we acknowledge the gravity of this situation. I think when you really look at what we are doing today, it is to have a transparent discussion, to talk to our 3 expert witnesses, to hear in a manner consistent with what they went through, what the facts are. As Congress, the role on oversight is so important. That is what we are doing today. So, I am proud that this is a bipartisan effort and I now recognize the Ranking Member, the gentleman from California, Mr. Correa, for his opening statement.

[The statement of Chairman Pfluger follows:]

STATEMENT OF CHAIRMAN AUGUST PFLUGER

MAY 8, 2024

Good afternoon, and welcome to the Subcommittee on Counterterrorism, Law Enforcement, and Intelligence.

We are holding this important hearing to examine anomalous health incidents (AHI) and discuss the potential targeting of U.S. Government officials and their families in the homeland and elsewhere.

Although this issue has recently gained significant media attention, the issues surrounding anomalous health incidents, or Havanna Syndrome, are not new.

Dating back to 2014, a number of U.S. diplomatic, military, and intelligence officials and their families have reported major medical symptoms that have affected their auditory and sensory motor skills.

These issues became public in late 2016 after a group of Canadian diplomats and U.S. Government employees and their families, assigned to the U.S. Embassy in Havana, Cuba began experiencing similar symptoms.

After the reported incidents in Havana, Government officials and their families began reporting similar symptoms in the People's Republic of China, Vietnam, Germany, Austria, Serbia, Australia, Taiwan, Colombia, and here in the United States.

Multiple agencies within the intelligence community (IC) have conducted assessments in an attempt to identify the factors that cause AHIs, or who, if anyone, is responsible for these incidents.

Unfortunately, none of these studies could conclusively identify the causes of these incidents.

However, the State Department commissioned a study through the National Academies of Science, Engineering, and Medicine that found: "unusual presentation of acute, directional, or location-specific early phase signs, symptoms, and observations reported by DOS [Department of State] employees to be consistent with the effects of directed, pulsed radio frequency energy. Many of the chronic, nonspecific symptoms are also consistent with known radio frequency effects, such as dizziness, headache, fatigue, nausea, anxiety, cognitive deficits, and memory loss."

Since the National Academies' findings, generally the IC has stood by their initial findings and maintains that the origins of these symptoms are still unknown and not likely to be derived from the actions of a foreign adversary.

Today, we hope to gain a better understanding of anomalous health incidents to address this pressing issue.

It is paramount that we acknowledge the gravity of the situation.

We must work to ensure that those suffering these debilitating symptoms are properly cared for, and if foreign malign activity is the cause of these anomalous health incidents, then we must take steps to neutralize the threat actors responsible to include deterring their ability to operate with impunity in the homeland, targeting our intelligence professionals and diplomats but also putting the American public in harm's way.

I look forward to hearing this distinguished panel today and working in a bipartisan fashion to understand the facts related to anomalous health incidents and find solutions to address these issues.

Mr. CORREA. Thank you Mr. Chairman. I agree with you. This is an important issue. Deals with the health and welfare of our Government officials as well as others. Thank you again, Mr. Pfluger, and good afternoon to all of you. Welcome to witnesses today. I am here today filling in for our Ranking Member, Mr. Magaziner, who I am happy to say he and Julia welcomed their daughter, baby daughter, to their family just I think a day or so ago. So Magaziner, Mr. Magaziner, enjoy your time with your beautiful family. Today's hearing has been called to examine the Anomalous Health Incidents affecting a range of U.S. national security personnel, including intelligence officials, members of our armed forces, and diplomats. Sometimes referred as Havana Syndrome, Anomalous Health Incidents were first reported, as the Chairman suggested back in 2014, by U.S. personnel assigned to our embassy in Havana. Many have described the symptoms that were chronic and debilitating. Sadly, these incidents have not been isolated to Havana. U.S. personnel have reported such incidents as Hanoi, Vienna, London, Moscow, as well as here in the United States. In Washington, DC, Virginia, and Pennsylvania. There have been several investigations into the cause of these incidents, including a study by the National Academy of Sciences, Engineering, and Medicine, several studies by JASON, an independent group of expert scientists, a brain imaging study by the University of Pennsylvania, as well as others. That list is not exhaustive.

Today we have the privilege of hearing from retired Lieutenant Colonel Greg Edgreen among our witnesses who ran the Pentagon's investigation into these situations. We also understand the Intelligence and Foreign Service Affairs committees have been engaged in an intensive bipartisan oversight of these Anomalous Health Incidences for a while now. Last year the intelligence community completed a coordinated assessment regarding the causes of these incidents and found no evidence of adversary—adversarial activity. I know the lack of a finding in these cases after nearly 8 years of incidences is a source of frustration for the victims, and frankly, for all of us as well. I am pleased that recently the Biden administration came out with a statement that they will continue to conduct comprehensive examinations of these effects and their possible causes. The Director of National Intelligence, Ms. Avril Haines, reiterated these comments in her testimony to the Senate last week, stating that the intelligence community is continuing its investigations into what happened in these situations.

The committee, this committee, I should say, is dedicated to working with their partners, the administration, and other relevant Congressional committees to ensure that such examinations, inves-

tigations proceed and that we take care of our people. Let me repeat, we will take into, continue to take care of those afflicted by the Havana Syndrome, and we will continue to look for sources and causes. Mr. Chairman, I want to ask also unanimous consent that Mr. Eric Swalwell be permitted to sit in this committee and ask questions of today's witnesses.

Chairman PFLUGER. Without objection, so ordered.

Mr. CORREA. Thank you, Mr. Chairman. With that, I yield.

[The statement of Hon. Correa follows:]

PREPARED STATEMENT OF HON. J. LUIS CORREA

MAY 8, 2024

Today's hearing has been called to examine anomalous health incidents affecting a range of U.S. national security personnel, including intelligence officials, members of our armed services, and diplomats. Sometimes referred to as "Havana syndrome," anomalous health incidents were first reported in November 2016 by U.S. personnel assigned to our embassy in Havana, Cuba. Many have described symptoms that were chronic and debilitating. Unfortunately, these incidents have not been isolated to Havana.

U.S. personnel have reported incidents in Hanoi, Vienna, London, Moscow—and here in the United States—in Washington, DC, Virginia, and Pennsylvania. There have been several investigations into the cause of these incidents—including:

- a study by the National Academy of Sciences, Engineering, and Medicine.
- several studies by JASON, an independent group of expert scientists that advise the U.S. Government on sensitive matters of science and technology.
- a brain imaging study by the University of Pennsylvania and another by the National Institutes of Health.
- an intelligence community assessment.

And that list is not exhaustive. Today, we have the privilege of hearing from Retired Lieutenant Colonel Greg Edgreen, who ran the Pentagon's investigation into the incidents.

Committee staff have met with several others, including former U.S. officials, scientists, and doctors who have been part of such investigations or have independently examined the matter. We also understand that the Intelligence and Foreign Affairs Committees have been engaged in intensive and bipartisan oversight of anomalous health incidents for a while now.

Last year, the intelligence community completed a coordinated assessment regarding the cause of these incidents and found no evidence of adversary activity. I know that the lack of attribution—after nearly 8 years of incidents—is a source of frustration for victims, and frankly for us all. But let this hearing serve as evidence that we are committed to getting answers and maintaining and strengthening the care provided to those who have suffered.

I am heartened by the Biden administration's statement last month that they will continue to conduct comprehensive examinations of the effects and the potential causes. Director of National Intelligence Avril Haines reiterated this commitment in her testimony before the Senate last week, stating that the intelligence community is continuing to investigate what's happening with AHIs.

The United States Government, and this Congress, must look under every rock to identify the cause of these health incidents. In the mean time, we owe it to the men and women who serve this country to ensure that the Federal Government provides them with every resource we can muster to ensure they are taken care of.

This committee is dedicated to working with our partners in the administration, and on other relevant Congressional committees, to ensure that such examinations proceed and that we take care of our people.

Chairman PFLUGER. I think the Ranking Member and other Members of the subcommittee are reminded that opening statements may be submitted for the record.

[The statement of Ranking Member Thompson follows:]

STATEMENT OF RANKING MEMBER BENNIE G. THOMPSON

MAY 8, 2024

Today the Subcommittee on Counterterrorism, Law Enforcement, and Intelligence is meeting to examine anomalous health incidents affecting our U.S. Government personnel—both abroad and here in the homeland.

Since 2016, U.S. officials have reported nearly 1,500 cases of anomalous health incidents or "Havana Syndrome." Affected officials have reported physical symptoms that began while on official assignments not only in Havana, but in Germany, China, Colombia, and in Washington, DC—to name just a few locations. Since reports began in 2016, there have been several theories about the cause of the anomalous health incidents, including the possibility that symptoms could be the result of attacks by foreign adversaries.

In March 2023, the intelligence community concluded that it is "very unlikely" a foreign adversary is responsible for the reported AHIs. However—all intelligence community agencies, and I quote, " . . . agree that U.S. personnel sincerely and honestly reported their experiences, including those that were painful or traumatic . . . ".

A recent study by the National Institutes of Health, which analyzed MRI brain scans of the affected Government officials, confirmed the very real symptoms of the affected participants. I am a firm believer in leaving no stone unturned, so it is imperative that the intelligence community and others continue to collect information and analyze any new evidence. We owe it to our public servants to not only continue providing care to affected employees, but also to scrutinize possible causes and remain vigilant against threats. I am confident that the Biden administration will do just that.

In contrast to the Trump administration, which was criticized by affected employees, the public, and bipartisan Members of Congress for failing to take this issue seriously, the Biden administration undertook a rigorous review of available information and implemented the "HAVANA Act" to ensure care and benefits for affected employees.

The Biden administration has also stated it will direct continued studies into the potential causes of AHIs. Just a few days ago, the Director of National Intelligence testified that the intelligence community is continuing its investigation. I am glad to be having today's conversation, and I look forward to hearing the witnesses' testimony and recommendations for Congress.

Chairman PFLUGER. We are pleased to have a distinguished panel of witnesses before us today on this very important topic. I ask that our witnesses please rise. Raise your right hand. Do you solemnly swear that the testimony you will give before the Committee on Homeland Security of the U.S. House of Representatives will be the truth, the whole truth, and nothing but the truth, so help you God? Thank you.

[Witnesses sworn.]

Chairman PFLUGER. Let the record reflect that the witnesses have answered in the affirmative. I would now like to formally introduce our witnesses. Mr. Gregory Edgreen is a retired army lieutenant colonel and a former U.S. Government official. He led the investigation efforts for the Defense Intelligence Agency into the causes of AHI's and who, if anyone, was responsible for causing these incidents. Mr. Edgreen's career has covered 8 countries and 3 U.S. embassies. He now serves as the CEO of Advanced Echelon LLC, a company in the United States with interagency experience leading AHI efforts. Mr. Christo Grozev is an award-winning journalist and the lead investigator for the *Insider.* He is also a member of Bellingcat Productions, which looks to translate Bellingcat investigations into a range of new media products. He was the lead Russia researcher at Bellingcat until February 2023. His investigations into the identity of the suspects in the 2018 Novichok poisonings in the United Kingdom earned him and his team the

European Prize for Investigative Journalism. Last, Mr. Mark Zaid is a Washington, DC-based attorney who specializes in crisis management and handling administrative and litigation matters mainly relating to national security, international law, foreign sovereign and diplomatic immunity, and the Freedom of Information/Privacy Acts. Mr. Zaid often represents former and current Federal employees, including military officers, defense contractors, and other national security professionals and whistleblowers.

Again, I thank the witnesses for being here today. I will offer each of you an opening statement. I know you have submitted those as well, so please, if you don't mind, summarize it. We have a timer to keep to 5 minutes, so that then we will go into the question-and-answer period. I now recognize Lieutenant Colonel Greg Edgreen for 5 minutes on his opening statement.

STATEMENT OF LIEUTENANT COLONEL GREG EDGREEN, UNITED STATES ARMY (RET.), CEO AND FOUNDER, ADVANCED ECHELON LLC

Lieutenant Colonel EDGREEN. Good afternoon, Mr. Chairman, Ranking Members, Congressmen, it is an honor to speak with you today and give voice to the unseen, the U.S. Government, AHI survivors and their families. My name is Greg Edgreen. I stood up and led the DIA's task force, which was in charge of taking care of our survivors and determining the cause. For background, I am not an analyst. I am a retired army and intelligence officer. The following are my personal opinions and do not represent the opinions of the Government. Given the classification of this topic, many of my comments will have to be made at a future closed-door session. As a country, we have been here before. Most people think this all started in Havana in 2016, the widely-reported Havana Syndrome. This led to the United States withdrawing most of its staff and ending rapprochement between Havana and Washington. But before Havana Syndrome, there was the Moscow Signal. Soviet intelligence bathed the U.S. embassy in Moscow with microwave transmissions. The health effects were similar to what we see today. There are many examples of syndromes and ailments from Americans injured in the line of duty that the Government did not recognize for many years, which were eventually proven Agent Orange, used in Vietnam, the Gulf War Syndrome, burn pits during the forever wars of Iraq and Afghanistan. In all of these examples, America took too long to acknowledge these injuries, and our service members languished without care.

Havana Syndrome is no different. The gaslighting of AHI survivors continues to this day as history repeats itself. Throughout all this, I learned America's best men and women in national security are being targeted and neutralized in a global campaign. AHI's have been reported in the press in every continent except for Antarctica, with a large percentage of these attacks occurring in the homeland. In America. In this town, the impact has been that mission-critical Government officials working abroad and at home are being removed from their post with TBI's. Don't take my word for it. Nikolai Patrushev, the Secretary of Russia's Security Council, wrote in September 2023, and I quote, "in recent years, hundreds of employees of foreign intelligence services involved in organizing

intelligence and subversive activities against our country have been neutralized". The American people are losing strategic warning and decision-making advantage in great power competition. America's eyes are being blinded, their voices muted, their ears deafened. This is emboldening our other strategic rivals, such as China, and could encourage North Korea and Iran to take similar actions with no repercussions.

We collected a large body of data, ranging from signals intelligence to human intelligence, to open-source reporting and everything in between. Unfortunately, I can't get into specifics based on the classification, but I can tell you. At an early stage, I started to focus on Moscow, and consistently there was a Russian nexus. Since 2010, the number of counterintelligence incidents began to rise, and so did Russian gray zone activities. These included assassinations, poisonings, sabotage attacks against NATO allies and others, many of which has been documented by Christo. After talking with the survivors who were hit in the United States and abroad, I quickly realized these were no longer isolated incidents. There were reports of CI incidents which included harassment, room intrusions, houses being defiled, tossed, pets poisoned, assaults on our personnel, officers and diplomats being drugged, doxing, families harassed. Then an attack via directed energy, a red line to many because of the debilitating nature of these weapons, the U.S. Government never hit back, and our Nation's hidden heroes continue to be targeted today.

Investigators often talk about motive, means, and opportunity. First, let us look at the motive. When President Putin says things like, if one looks into the security sphere, new physical principles, weapons will ensure the security of any country in the near-historic perspective, we understand this very well and are working on it. If you know anything about the Russian Ministry of Defense, this is referring to directed energy weapons. Second, the means. Look at the contract for directed energy weapons, which is uncovered by my colleague Christo. Look at the open-source photos of Putin awarding scientists prizes for innovation for weapons based on new physical principles. Third is the opportunity. Of course they can do this. As openly reported in 2014, 3 CIA officers were stationed in Ukraine that year during a popular revolt that overthrew Moscow's preferred leader. Later, those CIA officers went on to other assignments and reported AHI attacks, one in Uzbekistan, one is in Vietnam, and the third officer's family hit in London. Despite this large body of data, the ODNI said, there is nothing to see here. Everything is dismissed. Last month, the NIH said there is no evidence of physical damage, despite all survivors reporting the same symptoms. This same study is now under review for its methodology.

I would like to point this committee to the AHI experts panel, whose findings were released in 2022, which saw all the same intelligence and information we did, but came to the opposite conclusion of the DNI. They noted that the signs and symptoms of AHI's are genuine and compelling, and that pulsed electromagnetic energy, particularly in the radio frequency range, explains the core characteristics. I think the bar for AHI attribution was set so high because we do not, as a country and a Government, want to face some very hard truths. Can we secure America? Are these massive

counterintelligence failures? Can we protect our people on American soil? Is this an act of war? Despite our history of walking away those from those who sacrifice for their country, I am optimistic. With Congressional support, with your support and an informed public, it is time to take action. This is a nonpartisan issue which has spanned several administration. Let us start to get this right with Executive and Legislative action first.

Chairman PFLUGER. Mr. Edgreen, I am going to go ahead and if you can wrap up, we will get to the——

Lieutenant Colonel EDGREEN. Mr. Chairman, could I have 2 more minutes, please? One more minute?

Chairman PFLUGER. One more minute is fine.

Lieutenant Colonel EDGREEN. We need to execute existing funding with the Defense Health Program, which was allocated to take care of the survivors and their families. We should fully implement the Havana Act. We need a VA diagnostic code, because right now there is none. We need to award Purple Hearts and their civilian equivalents. On the Legislative front, we need a new NDAA that covers this and a Havana Act. I would like to thank this committee for their attention in this issue. Thank you to Orianna Zill, Michael Ray, Michael Weiss, and Christo for keeping this issue alive. I urge this committee to take care of our unseen survivors, execute existing funding, and most importantly, pressure the Government to fight back. Thank you.

[The prepared statement of Lieutenant Colonel Edgreen follows:]

PREPARED STATEMENT OF GREG EDGREEN

MAY 8, 2024

My name is Greg Edgreen, I stood up and led DIA's Anomalous Health Incident (AHI) organization which was tasked to take care of our survivors and determine the cause. For background, I am not an analyst, I am a retired Army and intelligence officer and my career has spanned 8 countries and 3 embassies. I believe I was selected for this position, which was my first and subsequently last HQs assignment, due to my natural bias toward action and my experiences with Great Power Competition. I am here to give voice to all USG AHI Survivors, and their families. The following are my personal opinions and do not represent the opinions of the Government. Given the classification of this topic, some of my comments will have to be made in a future closed-door session.[1]

We, as a country, have been here before.

Most people think this all started in Havana in 2016, the widely-reported "Havana Syndrome", consisting of mysterious health incidents impacting foreign embassy staff living in Cuba. This led to the United States withdrawing most of its embassy staff and suspending consular services in 2017 while ending rapprochement between Havana and Washington.

Those attacked reported a range of conditions including debilitating migraines, perceived sounds, dizziness, vertigo, fatigue, nausea, anxiety, cognitive difficulties, and memory loss. Some started to develop rare cancers, tumors, and heart conditions despite no pre-existing or genetic conditions over time. In some cases, diplomats and intelligence officers were forced to leave active service due to complications from their conditions. Early reports were dismissed as psychosomatic or cases of mass hysteria.

Before Havana Syndrome there was the Moscow Signal. From the 1950's to 1970's, Soviet intelligence bathed the U.S. Embassy and diplomatic quarters in Moscow with microwave transmissions every day. The health effects were similar to what we see today. Again, the survivors were accused of mass hysteria and told nothing about the causes of their symptoms, until the Government finally informed the staff in 1976 at a confidential meeting. The U.S. Embassy personnel imme-

[1] Please forward the original copy of this testimony to the Homeland Security Committee if any portion of this document is redacted.

diately leaked to U.S. newspapers, setting off a major scandal in U.S.-Soviet relations and resulted in a Congressional Investigation which was completed in 1979.

As a result, about 350 adults who were Moscow embassy employees or dependents were tested and compared with a control group of 1,000 diplomats present in the United States. Lymphocyte counts (a type of white blood cells) from the Moscow Embassy subjects were an average 41 percent higher than the control group, proving that there had been major health impacts.

Between 1962 and 1971, the U.S. military sprayed millions of gallons of "tactical herbicides" or Agent Orange over Vietnam. The U.S. Government also denied Agent Orange was causing various types of cancers, diseases, and heart problems until Congress took action in the 1980's and allocated money for care and compensation. With the VA accusing the combat veterans of fabricating ailments.

The Gulf War Syndrome was finally proven last year in 2023, after hundreds of thousands of combat veterans reported symptoms related to their exposure to sarin gas. Again, the USG claimed the veterans symptoms were psychosomatic.

Burn pits during the forever wars of Iraq and Afghanistan, led to the deaths of thousands of service members, including the President's son, who served in Iraq the same year I was there. The Government denied the cancers and other ailments, and recently the 2022 PACT act was passed by Congress.

These same wars also taught us about Traumatic Brain Injuries (TBIs) from Improvised Explosive Devices (IEDs) and that some wounds have no entry or exit wounds, so we created the National Intrepid Center of Excellence or (NICOE) at Walter Reed and started awarding Purple Hearts to these attacks.

We continue to forget those wounded while serving their countries.

America has a long history of not taking care of those who were wounded when fighting for their country, and Havana Syndrome is no different. Except this time, a large percentage of the survivors are not able to come forward and speak to the press or Congress, because of their security clearances and bureaucratic regulations. They were kept in the shadows by faulty IC assessments and NIH studies, where wordsmithing and bureaucratic analytical processes made the case there was nothing to see.

The gaslighting of AHI survivors continues to this day in some Government agencies, as history repeats itself.

America's best men and women in national security are being targeted and neutralized around the world in a global campaign. Anomalous Health Incidents (AHIs) have been reported in the press in every continent except for Antarctica, with a large percentage of these attacks occurring in the homeland, on American soil. They fought for the American people and were wounded in the line of duty.

The impact has been that the intelligence officers, DoD personnel, national security experts, and our diplomats working abroad and at home are being removed from their posts with traumatic brain injuries. They're being neutralized.

Don't take my word for it. Nikolai Patrushev, the secretary of Russia's Security Council, wrote in September 2023 article that: "In recent years, hundreds of employees of foreign intelligence services, as well as other persons involved in organizing intelligence and subversive activities against our country and our strategic partners, have been identified and neutralized".

This is a victory lap that is meant to discourage other survivors from coming forward, and sow division among our ranks. It's as if Moscow is saying "The USG turned their back on you and doesn't believe you, and we know it. We will continue the attacks."

Our best men and women have been removed from their posts, at home and abroad. The American people are losing strategic warning and decision-making advantage in great power competition with Russia, China, North Korea and Iran. America's eyes are being blinded, their voices muted, and their ears deafened.

This is emboldening our other strategic rivals such as China, and could encourage North Korea and Iran to take similar actions with no repercussions.

I would like to briefly talk about our investigation. We were collecting a large body of data, ranging from signals intelligence, to human intelligence, to open-source reporting and everything in between. Anything regarding the internet, travel records, financial records, or on-line activities. Unfortunately I can't get into specifics, based on the classification.

But I can tell you at a very early stage, I started to focus on Moscow.

One of the things I started to notice was the caliber of our officers that were being targeted. This wasn't happening to our worst or our middle-range officers. This was happening to our top 5 percent, 10 percent performing officers across the Defense Intelligence Agency.

And consistently there was a Russia nexus. There was some angle where they had worked against Russia, focused on Russia, and done extremely well.

I also noticed that a large number of attacks were occurring in nations that were traditionally aligned with Moscow but starting to develop relations with Washington.

AHIs resulted in the end of rapprochement between Havana and Washington. The widely-reported attack in the news on 11 personnel, in Hanoi on the eve of Vice President Harris's 2021 visit to announce a strategic comprehensive partnership also endangered Washington/Hanoi relations.

Who would stand to gain from such attacks? Havana? Hanoi? Or did Moscow stand to gain the most, knowing that the USG would automatically accuse the host nation of such attacks. Can you imagine? Non-lethal directed energy weapon attacks against our diplomats, DoD, and intel officers had such a strategic impact?

I don't know when it started but from 2010 onwards, the rules of engagement shifted in the shadows. It used to be a gentleman's game, we did not attack each other's officers and families. The number of CI incidents began to rise, and so did Russian grey zone activities. Grey zone activities which have been widely documented in the press by colleagues at Bellingcat which included assassinations, poisonings, and sabotage attacks against NATO allies.

After talking with the survivors who were hit in the United States and abroad, I quickly realized these were not isolated incidences.

There were reports of counterintelligence incidents which often included: harassment at customs and immigration, room intrusions, houses being tossed or defiled, animals and pets poisoned, assaults on our personnel, officers and diplomats being drugged, doxxing—where foreign news outlets published the personal information about our officers, cars being vandalized, families harassed and followed, then an attack, via directed energy, a red line to many, because of the debilitating nature of these weapons.

The U.S. Government never hit back and the problem continues to this day.

Despite all of this our group maintained neutrality to avoid confirmation bias by conducting deep dives into all great power competitors, but I still kept coming back to Moscow.

People in the FBI often talk about motive, means, and opportunity when it comes to their investigations.

Motive.—Look at Putin and Lavrov recent comments.

President Putin said at the 8th Eastern Economic Forum last September "If one looks into the security sphere, new physical principles weapons will ensure the security of any country in the near-historic perspective. We understand this very well and are working on it,"

According to Russia's Ministry of Defense website, "weapons based on new physical principles" involves the use of novel technologies like directed energy and pulsed radio frequency.

Russian Foreign Minister Sergey Lavrov said the United States is "directly at war" with Moscow at a U.N. general Assembly meeting the same month.

The motive is there.

Means.—Look at the contract for directed energy weapons which was uncovered by my colleague and documented in the press. Look at open-source photos of President Putin awarding scientists Presidential Prizes in Science and Innovation for their work in weapons based on new physical principles which "may be used in the fight against terrorism."

Opportunity.—who has a global footprint and a robust capability here in the homeland, where have we seen their people around the attacks? Look at the intercepts and on-line activities?

Look at some of the cases in the news. As reported by *60 Minutes,* for example, in 2014, 3 CIA officers were stationed in Ukraine, Vladimir Putin's obsession. Two-thousand fourteen was the year that a popular revolt overthrew Putin's preferred leader. Later, those CIA officers went on to other assignments and reported being hit, 1 in Uzbekistan, 1 in Vietnam, and the third officer's family was hit in London.

Despite this large body of data, the Office of the Director of National Intelligence said last year it's "very unlikely a foreign adversary is responsible." But the DNI also acknowledged that some intelligence agencies had only "low" or "moderate" confidence in that assessment. Last month, the National Institutes of Health reported results of brain scans. NIH said there's no evidence of physical damage despite all survivors reporting the same symptoms. This same study is now under review for its methodology and promising care in exchange for survivors to be lab rats.

The Director of National Intelligence says the symptoms probably result from " . . . pre-existing conditions, conventional illnesses, and environmental factors." Yet, the DNI and those agencies do not follow up with the survivors and tell them what those pre-existing conditions or environmental factors are, which hurts the possibility of long-term care.

I would point this committee to the AHI expert panel whose findings were released in 2022, which saw all of the same intelligence and information we did, but came to the opposite conclusion.

Departments and agencies provided the panel with dozens of briefings and more than 1,000 Classified documents on a range of scientific, medical, and intelligence topics. This information included the findings of compartmented programs sensitive intelligence reporting, and AHI incident reports and trend analyses. Affected individuals also shared their personal experiences and medical records.

Their key findings included:

- The signs and symptoms of AHIs are genuine and compelling.
- Pulsed electromagnetic energy, particularly in the radiofrequency range, plausibly explains the core characteristics.
- Psychosocial factors alone cannot account for the AHIs.

I urge this committee to read the unredacted version of the AHI experts panel which outlines more impactful information.

This report ended with the following: "The panel was moved by the experiences of individuals affected by AHIs. They deserve the best possible care, as well as appreciation for their sacrifices."

I think the bar for AHI attribution was set so high because we did not, as a country, and a Government, want to face some very hard truths.

Can we secure America? Are these massive counterintelligence failures? Can we protect American soil and our people on American soil? Are we being attacked? And if we're being attacked, is that an act of war?

After what I learned in my Classified investigation, I retired from the Army to start a company to help the victims. We hope to channel Government contracts into treatment programs for the survivors using allocated funds.

This problem has existed in one form or another since President Dwight D. Eisenhower was in office and it is time to take a new path. We need to take care of the survivors and seek attribution so we can stop these attacks on our people.

Despite our history of walking away from those who sacrificed for their country, I am optimistic. With Congressional support and an informed public, it is time to take action. This is a non-partisan issue which has spanned several administrations. America loves a good underdog, and there is no greater underdog than this group of AHI survivors we have.

We can do two things which will set this right, Executive action and Legislation.

The first, is to execute existing funding in the Defense Health Program which was allocated to take care of DoD survivors and their families. As you know, Walter Reed is the central hub for U.S. Government AHI care, executing this funding helps everyone.

We should fully implement the HAVANA Act to ensure payments are made, and we need a VA Diagnostic code for AHIs to ensure proper compensation and disability benefits for active-duty servicemen who are not covered by the HAVANA act.

We tried working this from 2021 unsuccessfully, similar to our efforts with Purple Hearts. We need to award Purple Hearts, Secretary awards in the Department of State, and exceptional service medals in the IC.

I am personally aware of 3 Purple Heart citations which were halted; your Congressional follow-up on these issues would be extremely impactful.

On the Legislative front, this issue needs to be covered in a NDAA and a new Havana Act.

NDAA.—Congress should designate the DoD the central clearing house for the U.S. Government on AHIs, in terms of care, attribution, and they also have the tools for retribution. If you push this back to certain agencies in the IC nothing will change, and their people won't be cared for yet again.

Place these efforts under the cross-functional team, which should be a 2-star billet which rotates between the services for 3-year assignments, and is not an additional duty. Create a central reporting hub for the USG, which doesn't exist. Triple Defense Health Program funding for AHI care for the next 10 years to care for all USG employees, their families, and Government contractors. And provide funding for DIA and NSA and FBI to build up and maintain their teams in perpetuity to help seek attribution.

Last, is another HAVANA Act. The original HAVANA Act was a step in the right direction and helped thousands of American families. We thank the original sponsors of the Havana Act and those in Congress who continue to fight for the survivors on both sides of the aisle.

It should include contractors and active-duty personnel, and reimburse for economic losses, similar to injury law, accounting for both past and future potential earnings, there should no 12-month clause, or a TBI diagnosis requirement, or a required Department of State consultation for attacks abroad, the sudden onset clause

should also be removed to account for the low-intensity long-duration attacks and others.

I would like to thank this committee for their attention to this issue and I look forward to your questions.

I urge this committee to take care of the survivors, execute existing funding, and most importantly, pressure the Government to fight back in the shadows.

Thank you for your time.

Chairman PFLUGER. I thank the witness. The Chair now recognizes Mr. Grozev for his opening statement of 5 minutes.

STATEMENT OF CHRISTO GROZEV, LEAD INVESTIGATIVE JOURNALIST, THE INSIDER, DER SPIEGEL, BELLINGCAT

Mr. GROZEV. Thank you, Mr. Chairman, the committee Members. My interest in investigating the Anomalous Health Incidents occurred at around the time that there was the initial publicity around the Havana cluster. As a journalist, I just watched from the sidelines and believed that U.S. intelligence and U.S. law enforcement are going to get us the truth. I was looking forward to that. Until one day, I was approached through a friend, a common friend, by a member of the U.S. intelligence community in Europe, who advised me or nudged me, asked me to look into this independently. I realized that there is something possibly limiting the capabilities or the willingness of U.S. law enforcement or intelligence to do a thorough study. That is when I started looking into this as my own investigation. Over time, it grew into a multi-country investigation involving the *Spiegel* in Germany, the *Insider* in Russia, and our colleagues from *CBS 60 Minutes,* with whom we joined hands in 2023. I would like to present a summary of our findings to as of this moment. But mind you, our investigation is still in progress.

Based on extensive interviews with victims, victims' families, and also analysts who agreed to talk to us, we can now state that to our own comfort and conviction, there is at least 68 incidents that cannot be explained away with psychosomatic symptoms or pre-existing conditions. We have taken those as the bare minimum that allowed us to create a time space map, a time space map that allowed us to geolocate these incidents and further match them to possible travel of potential culprits. That was an important first part of our investigation. We established that the Russian government, as Lieutenant Colonel Edgreen said, had the long-standing motive and plans to develop something that they call wave weapons. This is a term they use as a catchall term for both acoustic and directed energy, electromagnetic weapons. This has started back in Soviet times. There are several patents that we have reviewed from the '70's. However, the real boost to this program occurred in 2013, when President Putin created a special RND Institute called the Institute for Prospective Military Studies in Russia, which was tasked with, among other things, developing new physical property weapons, including wave energy. We know that there have been many awards issued by this institute and that they do annual contests, closed-door contests, for military engineers providing prototypes and testing data on such weapons.

We've obtained documentary evidence that in 2017, a military engineer serving in a commanding position in GRU's clandestine sabotage and assassination unit known as 29155, was the recipient

of the annual award from this institute for a project that was termed testing non-lethal acoustic weapons suitable for use in urban warfare. Notably, the same military commander was immediately promoted to a political position as a personal representative of President Putin in the far east of Russia. It is a very rare switch in a career of a secret spy in Russia, which is usually given after a kinetic achievement, and there are many examples in the past that I won't go into. Unit 29155 is the most aggressive clandestine sabotage unit of Russian military intelligence that has been responsible, as many of us know, for offensive operations, such as the poisoning of Sergei and Skripal and Julius Kripal with Novichok. A series of devastating explosions at NATO munition facilities in Europe spanning 2011–2018. The poisoning of 3 Bulgarian people involved with selling weapons to Ukraine. We have established that spies of this unit, including the commander, Andrey Verano, have had sustained communication with military scientists from Russian military institutes, including the Institute for Prospective Studies, but also the 16th Research and Development Institute, with specific competence and background in researching the effect of electromagnetic and acoustic waves on the human brain.

We have also established that a medical research facility affiliated with the GRU in St. Petersburg has shown specific interest in researching the effect of ultra and infrasound on the human brain. A medical facility linked to that particular institute has conducted research in a very rare medical condition known as the Minor Syndrome, which we have seen occurring among a sub-cohort of the actual American victims of AHI. Crucially, we have established that members of this same clandestine unit have traveled extensively around the world under false identities and have been in the proximity of or within feasible reach of, confirmed AHI incidents in at least 4 cases, including Frankfurt in 2014, China in 2016, and '17, Tbilisi in '21. Further overlaps of people linked to this unit we have seen in Belgrade and Hanoi. The totality of the evidence uncovered by our team has proven that Russia has the motive, the means, and the opportunity to have developed and used non-lethal acoustic or electromagnetic wave weapons against members of the U.S. intelligence and law enforcement community. Members of the unit 29155 were present in locations and at times directly preceding or coinciding with known Havana incidents in at least 4 cases. There are many more that were yet to discover.

I will close with just a personal statement. These findings present not a smoking gun, but a very plausible operational theory on the existence, origin, and culprits behind the AHI. I expect the United States intelligence community will address our findings on their substance, on their merit, including providing alternative explanations for why these people, who are known to only engage with kinetic operations, with assassinations, poisoning, explosions, never in intelligence gathering, were at the wrong time, at the wrong place, if they continue to believe that none of this can be attributed to a foreign adversary. Thank you very much.

[The prepared statement of Mr. Grozev follows:]

PREPARED STATEMENT OF CHRISTO GROZEV

Mr. Chairman, Dear Committee Members, I have investigated Russian clandestine intelligence operations for over 10 years, and have served as expert witness in many law-enforcement investigations of assassinations or acts of terrorism perpetrated by RIS in Europe.

My interest in investigating the AHI arose upon the first publicity around the Havana cluster of incidents in 2017. However, I then assumed that the incidents will be best investigated by the U.S. law enforcement and intelligence agencies who would have access to a wealth of data that my team would not be privy to. And I assumed that was happening in good order, until in 2020 I was approached by an active member of U.S. intelligence who encouraged me to independently investigate the "ever-growing number of incidents". It was then that I realized that there may be certain self-imposed limitations in the pursuit of the truth on this matter. A collaborative investigative team from *The Insider* and *Spiegel* led by me began to collect data on the subject. In early 2023 we joined forces with CBS *60 Minutes* who had been conducting their own investigation into the incidents.

I would like to present a summary of our findings as of this moment—and our investigation is still on-going.

- Based on extensive interviews with victims, victims families, and medical professionals directly involved with the early diagnostics and treatment of reported cases, we have established that there are at least 68 anomalous health incidents that cannot be explained away either with pre-existing conditions or with psychosomatic symptoms. We have geolocated and established the exact time line and these incidents. This resulted in a time-space map that was later used to correlate to the known time-space travel map of clusters of potential suspects.
- We have established that the Russian government has a long-running R&D program to develop a class of weapons known in Russia as "wave weapons"—a cumulative term for acoustic and/or electromagnetic directed-energy emission devices that may be used as either lethal or non-lethal weapons. While the program has its origin in Soviet times—and certain military patents in this area was registered as early as the 1970's—the R&D work in this area was boosted in 2013 through the creation of a new entity by Vladimir Putin that was tasked to develop "weapons based on new physical properties including ray weapons and wave weapons". This entity, called the Institute for Prospective Military Studies, has been running annual closed contests among military engineers and scientists for the delivery of prototypes—along with accompanying test data—of such weapons.
- We have obtained documentary evidence that in 2017, a military engineer serving in a commanding position in GRU's clandestine sabotage and assassination unit 29155, was the recipient of the annual award from the Institute for Prospective Military Studies for the development of "A non-lethal acoustic weapon suitable for use in urban combat". Notably, this same military engineer was subsequently promoted to a high-ranking political position as Putin's representative in a region in Far-East Russia, a rare reward for a spy typically bestowed in the aftermath of major success in kinetic clandestine operations—for example the 2 Russian spies involved in the Polonium poisoning of Litvinenko were promptly offered a fast track to becoming members of Russian parliament.
- Unit 29155 is Russia's most aggressive clandestine sabotage and assassination military unit that has been responsible for offensive terrorist operations outside Russia including the Novichok poisonings of Sergey and Yulia Skripal, a series of devastating explosions at NATO ammunition storage facilities in Europe spanning the period 2011–2018, and the poisoning with unknown banned chemical weapons of Bulgarian arms manufacturers who provided weapons to Ukraine and the Republic of Georgia.
- We have established that spies of this Unit, including its commander Andrey Averyanov, have had sustained communication with military scientists from Russian military institutes, including the 16th Research and Development Institute, with specific competence and background in researching the effect of electromagnetic and electro-acoustic waves on the human brain.
- We have also established that a medical research facility known as the Institute for Experimental Medicine in St. Petersburg, closely linked to the GRU and having documented links to Unit 29155, has shown specific interest in researching the effect of ultra and infrasound on the human brain; and a medical facility linked to this institute has conducted research in a very rare medical condition known as the Minor syndrome known to have occurred among a sub-cohort of victims of AHI.

- Crucially, we have established that members of this clandestine unit who have traveled extensively around the world under false identities, have been in the proximity of, or within feasible reach of confirmed AHI incidents in at least 4 cases, including in Frankfurt in 2014, in China in 2016 and 2017, and in Tbilisi in 2021; with further overlaps of other GRU officers linked to the unit at the time of incidents in Belgrade and Hanoi.

The totality of the evidence uncovered by our team has proven that Russia had the motive, means, and opportunity to have developed and used non-lethal acoustic or electromagnetic "wave" weapons against members of the U.S. intelligence and law-enforcement community. Members of Unit 29155 were present in locations and at times directly preceding or coinciding with known Havana incidents in at least 4 cases, likely many more that we have yet to discover.

These findings present a plausible operational theory of the existence, origin and culprits behind the AHI. I expect that the U.S. intelligence community will address our findings on their substance, including providing alternative explanations to the presence of members of Unit 29155 at these times and places if their continued belief is the AHI may not be attributed to Russian intelligence services.

Chairman PFLUGER. Thank you, Mr. Grozev. The Chair now recognizes Mr. Zaid for his opening statement of 5 minutes.

STATEMENT OF MARK S. ZAID, FOUNDING PARTNER, MARK S. ZAID, PC

Mr. ZAID. Chairman, Ranking Member, Members of the subcommittee, thank you for the opportunity to appear today and testify about a topic that has mostly silently plagued our Nation's intelligence, diplomatic, military, and law enforcement personnel in some form for decades, and that is Anomalous Health Incidents, or AHI's. I have had the privilege of representing Federal AHI victims and their family members for over a decade, years before the issue came to prominence with the 2016 attacks in Havana, Cuba. I now represent more than 2 dozen Federal AHI victims, as well as numerous lawful whistleblowers from within CIA, DIA, ODNI, NSA, Departments of State and Commerce, USAID, and the FBI. The victims are not just selfless public servants, but they are spouses, children, including infants, and even pets. These criminal attacks have primarily taken place overseas on multiple continents, but have also occurred on our homeland in Washington, DC, Northern Virginia, Florida, and elsewhere.

As part of my first case, I was provided an unclassified memorandum by NSA in October 2014, 2 years before Havana, that revealed the existence of intelligence information concerning a foreign adversary. "With a high-powered microwave system weapon that may have the ability to weaken, intimidate, or kill an enemy over time and without leaving evidence. The 2012 intelligence information indicated that this weapon is designed to bathe a target's living quarters in microwaves, causing numerous physical effects, including a damaged nervous system". Today's hearing can only present a sliver of relevant information. The overwhelming majority of evidence concerning AHI's is hidden behind Classified walls, having had authorized access to Classified information on this topic, but without revealing that information, it is my view that the Executive branch, particularly at the behest of and manipulation by officials within CIA, is not truthfully reporting what it knows. While I commend their acknowledgement that AHI victims are suffering genuine and compelling health effects, I am convinced that the evidence that exists in the Classified arena directly contradicts the public conclusions expressed by Federal agencies as to the ori-

gin, cause, and scope of AHI's. That review of that evidence would lead reasonable people to conclude one or more foreign adversaries are behind at least some of these incidents and that numerous Federal agencies have failed to fully undertake substantive investigations, deliberately delayed collecting or ignored crucial credible evidence, and have intentionally withheld information, even from sister agencies so as to influence and manipulate their decision-making process.

There is intelligence, scientific and medical evidence that substantiates the existence of AHI's, and that some of the attacks were perpetrated by a foreign adversary. That evidence can be specifically identified in the proper Classified setting. That said, there is a wealth of publicly-available information concerning the history of directed energy, and particularly its scientific, intelligence, and military applications. I provide an overview in my written testimony. Given the many years our Government has been experimenting with developing directed energy weapons, why would anyone not believe our adversaries are engaged in the same efforts? A recent investigation by *60 Minutes, Der Spiegel* and the *Insider* identified potential credible links between AHI's and alleged Russian operatives from military unit 29155. This included activities within the United States. What was the Government's response? CIA doubled down that there is nothing to see and that it knew of and had already ruled out the same evidence. That is a blatant falsehood that has infuriated many serving members of the intelligence community because so much of the evidence to the contrary is available to them in reports, briefings, and cable traffic. Of course, this evidence is Classified.

Today's hearing is not going to solve the controversy that AHI presents, but there are many steps that Congress can take. These include ensuring continual and consistent health care for AHI victims, ensuring immediate implementation of and funding for the Havana Act of 2021, as well as amending it where necessary, investigating why law enforcement and other homeland agencies have not been permitted to pursue AHI leads concerning criminal attacks on American personnel, and instead CIA analysts who do not possess the same skill sets or authorities have been allowed to control the investigations, and require the Executive branch to develop comprehensive standard protocols that provide U.S. personnel and their families with guidance as to risks involved and how best to report any incidents. It is time for the U.S. Government to be on the right side of history. I welcome the opportunity to try and answer your questions and providing you with Classified responses in the proper, secure setting. Thank you.

[The prepared statement of Mr. Zaid follows:]

PREPARED STATEMENT OF MARK S. ZAID, ESQ.[1]

WEDNESDAY, MAY 8, 2024

Chairman, Ranking Member and Members of the subcommittee, thank you very much for the opportunity to appear before you today and testify about an incredibly important topic that has literally and mostly silently plagued our Nation's intel-

[1] Attorney-at-Law; Managing Partner, Mark S. Zaid, P.C., 1250 Connecticut Avenue, N.W., Suite 700, Washington, DC. 20036; Mark@MarkZaid.com; @MarkSZaidEsq. A copy of my bio is attached at Exhibit "1".

ligence, diplomatic, military, and law enforcement personnel in some form for decades, and that is the issue of Anomalous Health Incidents or "AHI".[2] I applaud that this public hearing is taking place. It is the first in over half a decade and it was long overdue. It is essential that transparency and truth control the course of this discussion. Neither sentiment, unfortunately, has been present during every administration since the 1950's, regardless of the political party in power.

INTRODUCTION

I have had the honor and privilege of representing Federal AHI victims and their family members for over a decade; years before the issue came to public prominence with the 2016 attacks on our intelligence and diplomatic members in Havana, Cuba. I now represent more than 2 dozen Federal AHI victims, as well as numerous lawful whistleblowers, from within the Central Intelligence Agency ("CIA"), Defense Intelligence Agency, Office of the Director of National Intelligence ("ODNI"), National Security Agency ("NSA"), Department of State, Department of Commerce, U.S. Agency for International Development, and the Federal Bureau of Investigation. The victims are not just our own selfless serving public servants, but their spouses, children (to include infants) and even pets. These criminal attacks have primarily taken place overseas on multiple continents but have also occurred on our homeland soil in such locations as Washington, DC, Northern Virginia, Florida, and elsewhere.

Today's hearing, however, can only present a sliver of relevant information regarding a topic that primarily exists in the shadows. The overwhelming majority of evidence concerning AHIs is hidden behind Classified walls and you will need to doggedly pursue those avenues if you truly want to understand the truth.[3] Having had authorized access to Classified information concerning AHIs, I shall not hesitate to state that based on what I have learned to date the Executive branch, particularly at the behest of and manipulation by officials within CIA, is not truthfully reporting to the American people what it knows about AHIs. While I commend Executive branch agencies and their leadership for acknowledging that AHI victims are suffering genuine and compelling health effects,[4] based on the years I have worked this issue I am convinced that:

- The evidence that exists in the Classified arena, including what I have personally reviewed or been told by first-hand witnesses, directly contradicts the public conclusions and sentiments expressed by Executive branch agencies as to the origins, cause, and scope of AHIs;
- Information on AHIs that has been collected and actions that have been taken by Federal agencies and its senior officials would lead reasonable people to conclude one or more foreign adversaries are behind at least some of these incidents, which should be described as attacks on our personnel and their families; and,
- It is evident that numerous Federal agencies have failed to fully undertake substantive investigations, have deliberately delayed collecting or ignored crucial credible evidence that would lead down a particular pathway toward implicating a foreign adversary, and/or have intentionally withheld information even from sister agencies so as to influence and manipulate their decision-making process.[5]

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[2] AHI is the term used to describe a constellation of unexplained and sudden symptoms, including the acute onset of audio-vestibular sensory phenomena. I choose not to use the commonly used media term "Havana Syndrome" as I believe it inaccurately and unfairly describes the phenomena. I further detailed why here: *https://x.com/MarkSZaidEsq/status/1450891097807392770.*

[3] I hold an active TOP SECRET security clearance and I have routinely been provided with authorized access to Classified information concerning AHIs. Nothing within my testimony is intended to cross any classification lines and I am solely relying on public source and/or unclassified information for my written and oral presentation. Please note that for purposes of the AHI topic, I am not bound by any prepublication classification review requirement.

[4] For example, CIA Director Bill Burns has publicly stated: "I want to be absolutely clear: These findings do not call into question the experiences and real health issues that U.S. Government personnel and their family members—including CIA's own officers—have reported while serving our country." See *https://www.politico.com/news/2023/03/01/havana-syndrome-cia-intelligence-00085021.*

[5] One whistleblower who I represent filed an "Urgent Concern" complaint pursuant to Intelligence Community Directive 120 with the intelligence community's Office of Inspector General that was deemed credible and forwarded to the respective Congressional Intelligence Committees. The complaint characterized CIA's behavior on this topic as potentially constituting obstruction of justice and witness tampering. That complaint is currently the subject of litigation under the Freedom of Information Act in *James Madison Project et al.* v. *ODNI,* Civil Action No. 23–3457 (D.D.C.)(APM). Through my law office, we are using FOIA to obtain relevant, pre-

Continued

There is intelligence, scientific and medical evidence that substantiates the existence of AHIs and the attacks upon American personnel overseas and domestically by a foreign adversary. I share your likely frustration that in this public forum there are those of us with relevant substantive knowledge offering what are certainly bold claims but who cannot present specific evidence to support their testimony. That, however, is the difficulty of addressing a topic that lives in the Classified world. But to be clear, I would not be willing to place on the line a professional reputation that I have earned after more than 30 years of law practice in the national security arena if I was unable to point to relevant documents and credible witnesses. The evidence I have described does exist and can be specifically identified in the proper Classified setting.[6]

BRIEF HISTORY—WHAT IS OCCURRING TODAY HAS BEEN PART OF AN EVOLUTION

There is a wealth of publicly-available information concerning the history of directed energy and particularly its scientific, intelligence, and military applications. From the days of Nikola Tesla proposing concepts in the 19th Century of his "death ray" to direct electromagnetic energy to disable machinery or personnel, to recent patents to create a "non-lethal and non-destructive electromagnetic personnel interdiction control stun type weapon system" and methods to utilize beamed radio frequency energy,[7] to active Department of Defense ("DoD") solicitations to "develop a low-cost, low-weight, small-size wearable radio frequency (RF) weapon exposure detector."[8] None of this is new. Just last year the Government Accountability Office issued a report that "DOD is currently developing directed energy weapons with the goal of defeating a range of threats, including drones and missiles."[9] Why would anyone fail to believe our adversaries, some of whom are bound by far less ethical parameters, are not engaged in the same efforts, or particularly focused on the use of a weapon against humans? In fact, they have told us so.

The development of weaponry based on new physics principles—direct energy weapons, geophysical weapons, wave-energy weapons, genetic weapons, psychotropic weapons, and so on—was part of the State arms procurement program for 2011–2020.

RUSSIAN DEFENSE MINISTER ANOTOLY SERDYUKOV[10]

I view this present controversy as involving technology that was invented decades ago and has obviously evolved over time, and it continues to do so. What we do not know, of course, absent the capture of a device, retrieval of relevant intelligence documents or walk-in defector, any one of which history tells us is likely to one day occur, is the motive of the perpetrator(s). Is this technology designed to activate surveillance or communication devices, extract information from our cell phones or computers or incapacitate our personnel, or perhaps a combination of those objectives?

Most obvious of the relevant history surrounding AHIs is the existence of the "Moscow Signal," which refers to a Cold War activity involving the U.S. Embassy in Moscow. From the 1950's to the 1970's, the Soviet Union aimed microwave radiation at our Embassy. This effort was discovered by U.S. authorities in or around 1962. The microwave emissions, detected in specific frequency bands, were believed to potentially have adverse health effects and raised concerns among numerous Em-

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viously-unseen records pertaining to AHI, and have litigated 7 lawsuits to date, including that of *James Madison Project et al.* v. *ODNI,* Civil Action No. 23–00674 (D.D.C.)(TNM), which resulted in the first public release of the IC Experts Panel report from September 2022. That report, entitled "Anomalous Health Incidents: Analysis of Potential Causal Mechanisms", contradicted earlier Government findings and suggested that an unknown device or weapon using "pulsed electromagnetic energy" remains a plausible explanation. *https://media.salon.com/pdf/22-cv-674%20Final%20Response%20Package.pdf.*

[6] Thankfully the House Select Committee on Intelligence launched a formal investigation into AHIs in February 2024 and is aggressively pursuing the Classified angles. Exhibit "2". The Senate Select Committee on Intelligence has also been a very helpful partner in investigating AHI matters. I have been cooperating with both committees for years. Several individual Members of Congress in the House and Senate have also strived to ensure the needs of AHI victims are met. Attention to AHIs should be, and largely has been, non-partisan in nature.

[7] U.S. Patent, "Electromagnetic Personnel Interdiction Control Method and System" (2010), at *https://patentimages.storage.googleapis.com/c9/ab/51/1e8065605e339d/US7841989.pdf.*

[8] See *https://www.sbir.gov/node/1837879,* DHA211–005 (2021). Reasonable Question: Are any U.S. senior government officials or their staff traveling with energy detection devices while overseas, even though they publicly claim it is unlikely any foreign adversary is responsible for AHI attacks?

[9] Government Accountability Office, "DIRECTED ENERGY WEAPONS: DOD Should Focus on Transition Planning," April 2023, at *https://www.gao.gov/products/gao-23-105868.*

[10] *https://www.fpri.org/article/2024/04/havana-syndrome-the-history-behind-the-mystery.*

bassy staff, including at least 3 Ambassadors, as well as other senior U.S. officials. Indeed, according to recently declassified records, in 1975 our Secretary of State Henry Kissinger asked the Soviet Ambassador to turn off the beam during his upcoming visit to Moscow.[11]

The motivations behind the Soviet's Moscow Signal are still not definitively known, but hypotheses include electronic surveillance and experimentation with health effects.[12] This discovery led to Project Pandora, a U.S. investigation into potential health impacts of microwave exposure. The event was the subject of now-forgotten Senate hearings which were described in a 1979 staff report.[13] There is a wealth of declassified documentation concerning the topic and to better understand the current framework of AHIs the study of the history record is invaluable.[14]

As one former CIA official recently described:

"It may well be that the microwave bombardment of the embassy began as a way to counter communications equipment on the roof, recharge Soviet listening devices, or disrupt American surveillance devices, like those listening in on the conversations of Soviet officials talking to each other while riding in their limousines. But once the Russians realized that the radiation was causing health effects—and their scientists have studied this extensively—they continued to radiate the embassy and began to weaponize the use of microwaves, developing smaller microwave transmitters that could be directed against individuals."[15]

I started working on AHI issues more than a decade ago.[16] As part of my first case, I was provided an unclassified memorandum by NSA in October 2014, that reads:

"The National Security Agency confirms that there is intelligence information from 2012 associating the hostile country to which Mr. Beck traveled in the late 1990's with a *high-powered microwave system weapon that may have the ability to weaken, intimidate, or kill an enemy over time and without leaving evidence.* The 2012 intelligence information indicated that *this weapon is designed to bathe a target's living quarters in microwaves, causing numerous physical effects, including a damaged nervous system.* The National Security Agency has no evidence that such a weapon, if it existed and if it was associated with the hostile country in the late 1990's, was or was not used against Mr. Beck."

Exhibit "4" (emphasis added). This was nearly 2 years before the attacks in Havana, Cuba, occurred. Now I recognize that this statement was very clearly vetted, if not written in its entirety, by NSA lawyers. On some level, the document says almost nothing given the carefully crafted and caveated language. But on the other hand the document is astounding, especially post-Havana, as to what NSA had revealed to me as part of a simple effort to help with a workmen's compensation claim. I distinctly recall questioning why NSA officials could not simply help my client receive compensation as doing so would not open "Pandora's Box". I was very sadly and naively mistaken and now understand why.[17]

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[11] Id. Reasonable Question: As did Secretary of State Kissinger, has any U.S. senior Government official in the last 5 years warned one or more foreign adversaries to stop what they are doing with respect to AHIs?

[12] In the course of my AHI representation, I was presented with Kodachrome slides, dated 1972, that were found among the effects of a deceased former CIA officer that highlight the use of the technology, for purposes unknown. Exhibit "3".

[13] *https://nsarchive.gwu.edu/document/28799-document-15-us-senate-committee-commerce-science-and-transportation-report-microwave.*

[14] Most notably, the National Security Archives has created a vault of declassified documentation at *https://nsarchive.gwu.edu/briefing-book/intelligence-russia-programs/2022-09-13/moscow-signals-declassified-microwave.* See also *https://www.wbur.org/npr/1047342593/long-before-havana-syndrome-u-s-reported-microwaves-beamed-at-an-embassy.*

[15] *https://www.fpri.org/article/2024/04/havana-syndrome-the-history-behind-the-mystery.*

[16] My original AHI client, Michael Beck, was a long-standing and decorated NSA employee who was injured during the mid-1990's at a still-Classified overseas location and, we believe, developed a rare form of Parkinson's disease as a result. See *https://www.washingtonpost.com/local/was-a-spys-parkinsons-disease-caused-by-a-secret-microwave-weapon-attack/2017/11/26/d5d530e0-c3f5-11e7-afe9-4f60b5a6c4a0_story.html; https://www.theguardian.com/world/2021/may/02/havana-syndrome-nsa-officer-microwave-attacks-since-90's.*

[17] We sued NSA under FOIA to produce the intelligence information described in the 2014 memorandum. The documents were withheld as "intelligence products derived from signals intelligence and thus properly classified." *James Madison Project et al.* v. *NSA,* 2023 U.S. Dist. LEXIS 111105, *10 (June 26, 2023, D.Md).

THE U.S. GOVERNMENT'S PUBLIC PRONOUNCEMENTS DO NOT RECONCILE WITH, OR CERTAINLY DO NOT ADDRESS, INDEPENDENT CREDIBLE EVIDENCE OF FOREIGN GOVERNMENT INVOLVEMENT IN AHI INCIDENTS

In the aftermath of the publicity surrounding the 2016 incidents involving our diplomatic personnel in Havana, Cuba, the Department of State asked the National Academies of Sciences, Engineering, and Medicine (the National Academies) to analyze what occurred. Based on the leadership of Stanford University's Dr. David Relman, who also later served on the intelligence community's Expert Panel, the committee determined that "directed pulsed RF energy, especially in those with the distinct early manifestations, appears to be the most plausible mechanism".[18]

But in January 2022, the CIA released an interim report that asserted a majority of the 1,000 cases reported to the Government could be explained by environmental causes, undiagnosed medical conditions or stress, rather than a sustained global campaign by a foreign power.[19] Of course, no details were provided to explain what any of those alternative explanations might entail. Conveniently, the fact that approximately 2 dozen AHI cases could not be explained away was ignored. The interim report was followed up by the ODNI's March 2023 report "Updated Assessment of Anomalous Health Incidents" which claimed: most IC agencies have concluded that it is "very unlikely" a foreign adversary is responsible for the reported AHIs. IC agencies have varying confidence levels, with 2 agencies at moderate-to-high confidence while 3 are at moderate confidence. Two agencies judge it is "unlikely" an adversary was responsible for AHIs and they do so with low confidence based on collection gaps and their review of the same evidence.[20]

The assessment, which was actually issued by just a fraction of the U.S. intelligence community, found no pattern, forensic evidence, or intelligence that indicated an adversary targeted personnel in many cases. To the general public that conclusion is damning. To those who can read between the lines and understand the terminology, there is actually no reliable consensus among the intelligence community and the conclusion is even doubted by some agencies.

More recently, in March 2024, the Journal of the American Medical Association ("JAMA") published 2 studies issued by the National of Institutes of Health ("NIH") that found "no significant evidence of MRI-detectable brain injury, nor differences in most clinical measures compared to controls, among a group of Federal employees who experienced" AHIs.[21] Given NIH's stated objectives for their study, the findings were not unexpected particularly given the unfortunate history that surrounds brain injury-focused research; it often results in a lack of findings that are clinically helpful. Not surprisingly, the findings were unfortunately exploited by the intelligence community to support their public position that there is "nothing to see here". But the absence of evidence is not evidence.

Many of my clients participated in the NIH study. At least two of the listed authors on the JAMA articles from NIH and DoD were fully aware that AHI victims had been diagnosed with traumatic brain injuries, which is inconsistent with their reported study results, particularly because they had signed off on the medical documentation. The NIH study has also been compromised by ethical complaints that CIA participants were required to join as a prerequisite to receive actual medical treatment.[22]

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[18] NAS, The Standing Committee to Advise the Department of States on Unexplained Health Effects on U.S. Government Employees and Their Families at Overseas Embassies (2020), at *https://nap.nationalacademies.org/catalog/25889/an-assessment-of-illness-in-us-government-employees-and-their-families-at-overseas-embassies.*

[19] *https://www.npr.org/2022/01/20/1074338995/cia-report-no-evidence-linking-havana-syndrome-cases-to-a-foreign-country.* The interim report is the subject of a pending FOIA lawsuit: *James Madison Project et. al.* v. *CIA,* Civil Action No. 22–cv–321–(D.D.C.)(CJN).

[20] *https://www.hsdl.org/c/view?docid=875802.*

[21] See e.g., *https://jamanetwork.com/journals/jama/fullarticle/2816533; https://www.nih.gov/news-events/news-releases/nih-studies-find-severe-symptoms-havana-syndrome-no-evidence-mri-detectable-brain-injury-or-biological-abnormalities.*

[22] Prior to the publication of the JAMA articles, I notified both JAMA and NIH of ethical concerns regarding the studies and offered access to my clients and supporting evidence. No action was taken at that time but since publication NIH has contacted participants for information and indicated the study has been stopped for now. See *https://www.cnn.com/2024/05/01/politics/havana-syndrome-victims-cia-russia/index.html.* Not surprisingly, many Federal agencies disseminated the JAMA articles to their workforce as further proof that AHIs were not caused by a foreign adversary. Disappointedly, and perhaps not unexpected, agencies such as the State Department declined to also disseminate the accompanying JAMA article authored by Dr. David Relman, a member of the IC Expert's Panel, which challenged NIH's findings. See *https://jamanetwork.com/journals/jama/article-abstract/2816534.*

As this subcommittee knows, a recent investigation that aired on March 31, 2024, by *60 Minutes, Der Spiegel,* and *The Insider,* entitled "Targeting Americans," which I participated in, identified potential credible links between AHIs and alleged Russian operatives from military unit 29155.[23] One of my clients, identified as "Carrie" and a currently serving FBI Special Agent, also appeared to discuss her attacks that occurred in Key West, Florida.[24]

Whether those in the general public who watched the evidence aired by *60 Minutes,* and followed up by articles published by *Der Spiegel* and the *Insider*,[25] were persuaded toward the particular conclusion that Russian Military Intelligence Unit 29155 is responsible for some of the attacks is not the important consideration. More important is what are the explanations from the U.S. intelligence community to address the many questions raised and evidence discussed in the segments? We know that CIA Director Bill Burns, in the aftermath of *60 Minutes,* doubled down on the agency's view that there is nothing to see.[26] False claims have been made that the intelligence community knew of and had already ruled out the evidence presented by *60 Minutes.* This is a blatant falsehood that has infuriated many serving members of the intelligence community because so much of the evidence to the contrary is literally available to them in reports, briefings, and cable traffic. Of course, this evidence is Classified. This subcommittee, however, can question the intelligence community concerning these specific claims and demand answers.

WHY WOULD THE U.S. GOVERNMENT DENY FOREIGN GOVERNMENT INVOLVEMENT IN AHI S?

Many no doubt ask why would the U.S. Government hide the truth behind AHIs? I can present several possible explanations that are believed to be at play, at least in part or in combination with one another.

First, these attacks literally constitute an act of war, and one where a response would conceivably be required. If it is true that a foreign adversary has criminally attacked Americans on domestic soil, how did the national security and law enforcement community fail to detect and deter these events?

Second, our personnel and their families are largely unprotected from these attacks, which often take place in their residences and at some of the most desirable posts around the world. Can any precautions even be taken going forward?

Third, AHIs are having a very profound and adverse impact on morale and dissuading officers from accepting overseas assignments. Some officers have even quit specifically because of AHI concerns. The relevant workforce, which is comprised of many of our best and brightest, do not believe they are being provided with sufficient information or protection.

Fourth, the difficulties associated with identifying who over the course of decades has suffered an actual AHI caused by a foreign adversary and the costs involved for resulting medical care could be astronomical, especially if baseline testing before deployment or as part of the hiring process for Federal employees and contractors (and their family members) is determined to be a necessary tool to help identify future exposure.

Finally, there are questions that need to be legitimately raised as to whether our own Government has utilized similar technology on the adversary for various objectives, and/or that we have actually caused self-inflicted wounds on our own personnel through the use of machinery and other devices that have been operated or stored in their vicinity for various purposes.

IMMEDIATE ISSUES THAT NEED TO BE ADDRESSED

Today's hearing is not going to solve the controversy that AHI presents. At best, it will raise important questions that prompt the committee to continue moving forward toward obtaining answers, especially given the clear relationship to its homeland security jurisdiction. But there are many steps Congress can take, both immediate and over the long-term, to address AHI issues. These include, but are not limited to (and in no particular order of importance):

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[23] See *https://www.youtube.com/watch?v=JdPSD1SUYCY* (full *60 Minutes* episode); *https://www.cbsnews.com/news/havana-syndrome-culprit-investigation-new-evidence-60-minutes-transcript* (*60 Minutes* transcript).

[24] I want to emphasize that "Carrie" appeared with authorization from FBI after I negotiated the proper parameters for her public appearance.

[25] See e.g., *https://theins.ru/en/politics/270425* (March 31, 2024); *https://theins.ru/ en/politics/270717* (April 11, 2024).

[26] *https://www.washingtonexaminer.com/opinion/2967083/cia-doubles-down-on-see-no-russian-havana-syndrome-spin/*.

- Ensuring continual and consistent health care for AHI victims from qualified medical professionals. This can include requesting an investigation, whether by the GAO (which does presently have a related investigation, as does the audit staff for the Senate Select Committee on Intelligence) or appropriate Office of Inspector General, into the level and extent of care AHI victims have received to date and are eligible for, especially to hold any officials accountable for denial of needed health care;
- Ensuring proper and immediate implementation of and funding for the Havana Act of 2021[27] ("Helping American Victims Afflicted by Neurological Attacks"). The well-meaning law unnecessarily and improperly limits the scope of awards, particularly geographically and by date. Most distressing, there are varying approaches and requirements being imposed by Federal agencies as to how they are determining qualifications for awards. Why should there be a difference between a CIA victim or one who was serving the State Department? There are also existing obstacles for active-duty military victims to receive any compensation, although no DoD victim can currently receive an award because the Department has not even issued regulations that would allow its victims to apply.[28] There is little doubt that additional comprehensive legislation that properly provides for health care and compensation for those Americans who have been subjected to AHIs, regardless of date or geographic location is required;
- Investigating as part of the committee's primary jurisdiction why law enforcement and other domestic homeland agencies have not been permitted to pursue AHI leads concerning criminal attacks on American personnel and instead CIA analysts, who do not possess the same skill sets or authorities, have been allowed to control the investigations;
- Requiring the Executive branch to develop comprehensive protocols providing U.S. personnel and their families with proper warnings and guidance as to risks involved and how best to report any incidents; and,
- So much more.

CONCLUSION

This hearing is hopefully just the beginning of many to come that will further pursue the objective of exposing the truth concerning AHIs. Those of our public servants and their family members who have been harmed must be cared for, and most importantly their current and future peers must be protected from adversarial attack going forward.

It is time for the U.S. Government to be on the right side of history.

I am committed to working with Congress to help address the concerns we are discussing today, and I welcome the opportunity to try and answer your questions in an unclassified manner, and to providing you with Classified responses in the proper secure setting.

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[27] Public Law 117–46, codified at 22 U.S.C. § 2680b(i).

[28] The Department of Justice only just recently issued its proposed implementing regulations on April 19, 2024, and they will go into effect later this month. See *https://www.govinfo.gov/content/pkg/FR-2024-04-19/pdf/2024-08336.pdf.*

EXHIBIT "1"

Biography of Mark S. Zaid, Esq.

Mark S. Zaid is a Washington, D.C. based attorney who specializes in crisis management and innovatively handling simple and complex administrative and litigation matters primarily relating to national security, international law, foreign sovereign and diplomatic immunity, and the Freedom of Information/Privacy Acts.

Through his practice Mr. Zaid often represents former/current federal employees, particularly intelligence and military officers, defense contractors, Whistleblowers and others who have grievances, have been wronged or are being investigated by agencies of the United States Government or foreign governments, as well as representatives of the media. Mr. Zaid teaches the D.C. Bar Continuing Legal Education classes on "The Basics of Filing and Litigating Freedom of Information/Privacy Act Requests" (since 2003), "Defending Security Clearances" (since 2006) and "Handling Federal Whistleblower Cases" (since 2016).

Since 2009, he has been named a Washington, D.C. Super Lawyer every year (including being profiled) and he is repeatedly named a "Best Lawyer" in Washingtonian Magazine's bi-annual designation for his national security or whistleblower work. The Magazine also named him one of D.C.'s 250 (2021) and 500 Most Influential People (2022 & 2023), respectively, for national security/legal intelligentsia. And in 2022, Mr. Zaid was also awarded the status of "Lawyer Lifetime Achievement Member" by the Magazine for being featured on its Top Lawyers list at least 10 times out of the past 15 years. In 2020, the Washington Metropolitan Employment Lawyer's Association named him "Attorney of the Year" for his work on the Intelligence Community Whistleblower's case. Forbes Magazine announced him as one of the top 200 lawyers in the United States in their inaugural ranking list in 2024. As the National Law Journal once wrote, "if Agent Mulder ever needed a lawyer, Zaid would be his man."

Mr. Zaid is also the Executive Director and founder of the James Madison Project, a Washington, D.C.-based organization with the primary purpose of educating the public on issues relating to intelligence gathering and operations, secrecy policies, national security and government wrongdoing. Additionally, Mr. Zaid is an adjunct professor at Johns Hopkins University in the Global Security Studies program and at Texas A&M's George H.W. Bush School of Government & Public Service where he teaches on national security issues. He also serves on the Board of Directors at the Center for Ethics and the Rule of Law, and the Advisory Board of the International Spy Museum. In 2017, Mr. Zaid co-founded Whistleblower Aid, a non-profit law firm that provides pro bono legal representation to whistleblowers, particularly in the national security arena, and serves as legal counsel.

In connection with his legal practice, Mr. Zaid has testified before, or provided testimony to, a variety of governmental bodies including the Senate Judiciary Committee, the Senate Governmental Affairs Committee, the House Judiciary Committee, the House Government Operations Committee, the Department of Energy, the Public Interest Declassification Board and the Assassination Records Review Board. From 2014-2016, he served as an appointed Member by the Archivist of the United States to the Freedom of Information Act Advisory Committee. "Curiously for this town," once wrote the American Bar Association Journal, "Zaid is an equal opportunity thorn out to pierce the sides of suit jackets bearing both elephants and donkeys on the lapels."

A 1992 graduate and Associate Editor of the Law Review of Albany Law School of Union University in New York, he completed his undergraduate education (cum laude) in 1989 at the University of Rochester, New York with honors in Political Science and high honors in History. Mr. Zaid is a member of the Bars of New York State, Connecticut, the District of Columbia, Maryland and numerous federal courts.

He can be reached at Mark@MarkZaid.com, and further information on his practice is available at *www.MarkZaid.com*. Mr. Zaid is also a part-time comic book dealer and regularly lectures on comic book history as well as represents many auction houses and collectibles' dealers.

EXHIBIT “2”

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MICHAEL R. TURNER, OHIO
CHAIRMAN

(202) 225-4121
www.intelligence.house.gov

ONE HUNDRED EIGHTEENTH CONGRESS

JAMES A. HIMES, CONNECTICUT
RANKING MEMBER

U.S. HOUSE OF REPRESENTATIVES

PERMANENT SELECT COMMITTEE
ON INTELLIGENCE

February 8, 2024

The Honorable Avril Haines
Director of National Intelligence
Office of the Director of National Intelligence
Washington, D.C. 20511

Director Haines:

(U) On February 5, 2024, Chairman Turner approved my request to lead a formal investigation into the Intelligence Community's (IC's) response to Anomalous Health Incidents (AHI), which will be conducted consistent with the Rules of the House and the Rules of the Permanent Select Committee on Intelligence. This investigation will focus on: (1) the analytic integrity and deliberative process associated with the production and dissemination of intelligence reporting concerning AHIs; (2) allegations of improper suppression of AHI-related activities and information within and among the agencies and departments of the executive branch and congress; and (3) the assessed risks to the health of the IC workforce.

(U) To date, and over a period spanning several sessions of congress, the Committee has received information and testimony as part of our routine oversight activities regarding these matters. This information has come from numerous IC employees and whistleblowers, as well as through official hearings, briefings and other mechanisms used by the Committee to gather information. We have received numerous documents related to AHIs and are actively seeking accommodation for outstanding document production requests delivered to your office, the National Counterintelligence and Security Center, the National Security Agency, and the Central Intelligence Agency.

(U) As we transition our oversight initiative to a formal investigation, I am committed to working cooperatively with you and the leadership of the IC to facilitate the timely delivery of documents and testimony needed to complete our work. In many cases, the Committee is aware of specific discreet things, such as an intelligence report or other document by title, date, or serial number, and has made efforts to make our requests as detailed as possible. Moving forward, it will be my expectation that such requests are met fully, completely, and without delay. For any requests that require additional time, I expect an accommodations process to be initiated promptly.

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(U) I appreciate your longstanding commitment to the workforce and mission of the IC and stand ready to discuss this matter at any time. My staff on the Committee are similarly available should your team have any questions.

Sincerely,

Rick Crawford
Chairman
Subcommittee on the Central Intelligence Agency

CC: The Honorable William J. Burns
Director, Central Intelligence Agency

General Timothy D. Haugh
Director, National Security Agency

The Honorable Ronald S. Moultrie
Under Secretary of Defense for Intelligence & Security, Department of Defense

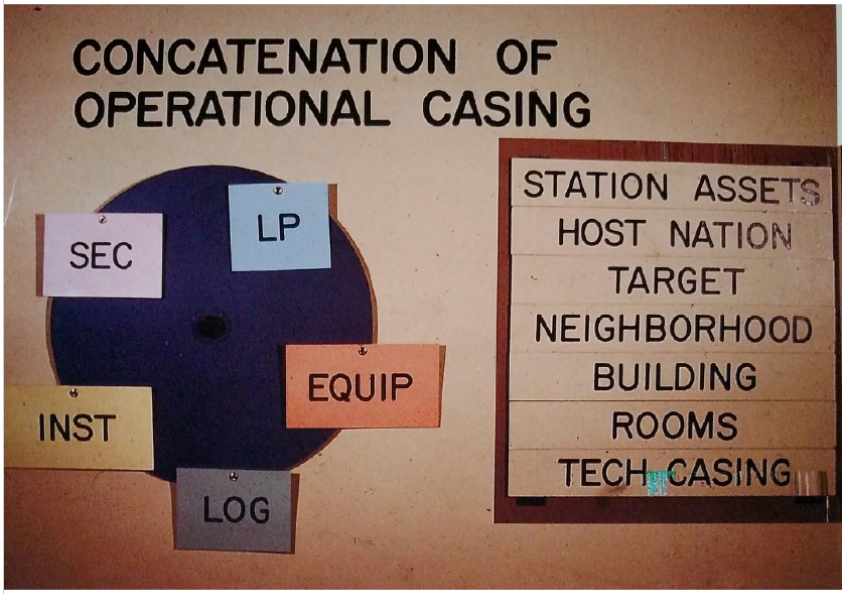
The Honorable Sasha Baker
Under Secretary of Defense for Policy (Acting), Department of Defense

UNCLASSIFIED

EXHIBIT “3”


M/W (MICROWAVE)
TARGET


IR (INFRA-RED)
TARGET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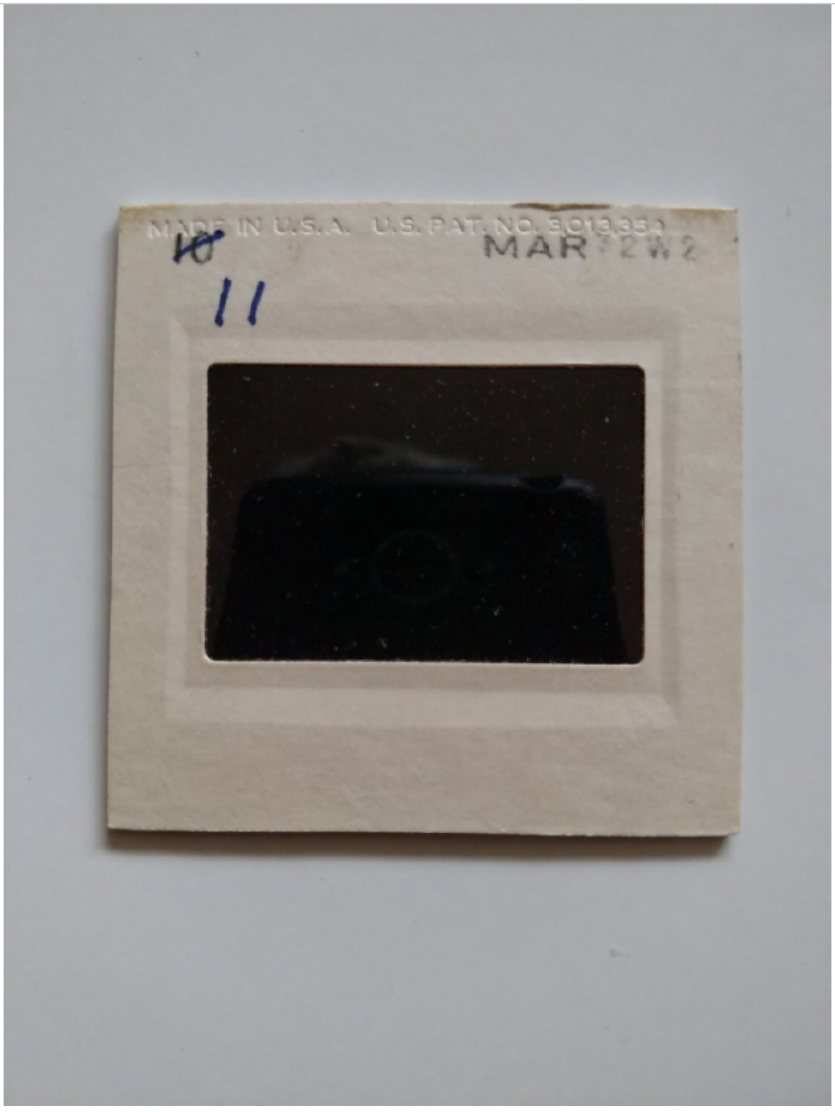
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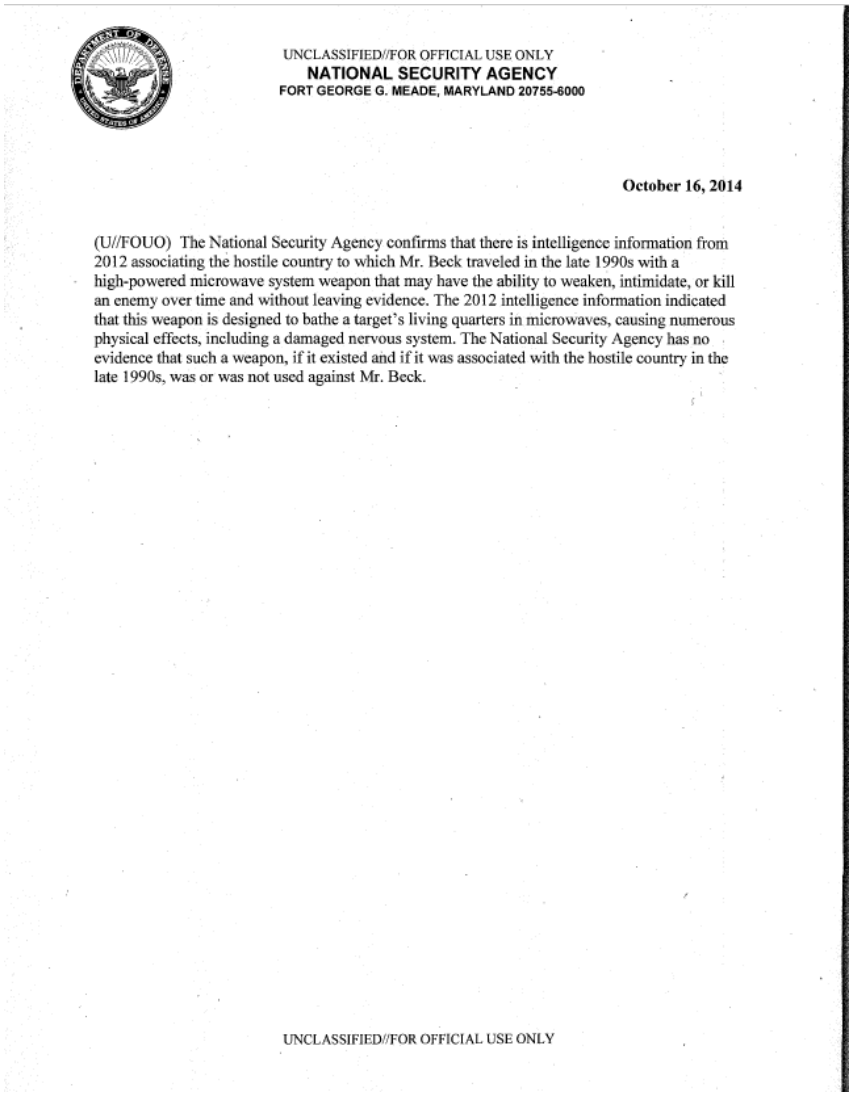
EXHIBIT “4”



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NATIONAL SECURITY AGENCY
FORT GEORGE G. MEADE, MARYLAND 20755-6000

October 16, 2014

(U//FOUO) The National Security Agency confirms that there is intelligence information from 2012 associating the hostile country to which Mr. Beck traveled in the late 1990s with a high-powered microwave system weapon that may have the ability to weaken, intimidate, or kill an enemy over time and without leaving evidence. The 2012 intelligence information indicated that this weapon is designed to bathe a target's living quarters in microwaves, causing numerous physical effects, including a damaged nervous system. The National Security Agency has no evidence that such a weapon, if it existed and if it was associated with the hostile country in the late 1990s, was or was not used against Mr. Beck.

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Chairman PFLUGER. Thank you, Mr. Zaid. Members will now be recognized in order of seniority for their 5 minutes of questioning. If time allows, an additional round of questioning may be called after all Members have been recognized. Without objection, the Chair seeks permission for the gentleman from Mississippi, Mr. Guest, and the gentleman from Florida, Mr. Gimenez, to also waive onto this committee. Without objection so ordered. I now recognize myself for 5 minutes of questioning, and again, thank the witnesses for your statements. I will start with you, Mr. Grozev, maybe give us an idea of how this could happen in the United States. Talk us through a scenario that you have investigated that technology and

location, things that we can kind-of put it into context and understand in layman's terms.

Mr. GROZEV. In terms of technology. I am not an expert in the technology behind this, but I have read enough, and I am sufficiently technically-minded to understand that there is more than one way to achieve this same effect on the human brain. One of the most disturbing denials that I have seen in some of the publications leading up to our findings being published was an attempt to create the impression that no technology would allow this impact on the human brain. That is provably untrue. There have been experiments that prove that both acoustic waves, directed waves in the ultrasound, primarily the ultrasound band, but also electromagnetic-directed energy, especially post-nanosecond energy beams in the millimeter band, through something called the Frey Effect, which converts electromagnetic energy into an acoustic band wave that can be within or without or outside of the audible band can have the same effect on the human brain, which can have long-term concussion-like symptoms, but in really traumatic degree of concussion. So that is a given. I don't think today we have the expertise to talk about that, but there is sufficient evidence that that is possible. We also know that the Russian intelligence operators has worked on that. Something I would like to mention as well is that after our publication, a former member of Russia's intelligence community reached out to me and said, well, this is what we have been working on since the '80's, because we thought that the Americans were doing that to us, and we wanted to develop a counter-technology for the same thing. So, of course, we are doing that, which is interesting, because Russian intelligence officers believe they are doing this, and American intelligence officers are saying they are not doing this.

Chairman PFLUGER. Did this individual, Russian agent, remain anonymous?

Mr. GROZEV. Unfortunately, for their own safety, I will have to leave them anonymous. But it is a person with, in my view, sufficient knowledge of exactly the intents, the red lines that this entity would be exposed to. We know that members of this unit have engaged with scientists who have worked on a project called Reversal of Epilepsy Symptoms through radio waves, which, for anybody known how Russia intelligence formulates their findings for the public facing domain, should read them as the exact opposite, creating, reversing, essentially, the polarity might leave with the exact opposite effect, creating epilepsy symptoms and so on and so forth. This interest is long-running for the GRU, for Russia's military intelligence. One last thing I will mention is that we found that the only other place, other than among the cohort of American and Canadian intelligence and law enforcement officers who have been affected by this, that we have seen very, very similar symptoms, was in a Russian school in 2017. We found the evidence to this similarity in a hacked email box of a military researcher from the St. Petersburg Institute for Experimental Medicine working for the GRU. This institute showed uncanny interest in exactly what happened in that school, where 26 children complained of exactly the symptoms that we have received in this investigation from American officers and diplomats. Again, it was this institute that

followed up and did research and may have been behind those incidents in Russia, but we don't see them anywhere else other than around Russian operatives.

Chairman PFLUGER. Mr. Zaid, is it your belief that these attacks have happened inside the United States? If so, can you give us some of the locations and details that you can share with us?

Mr. ZAID. Yes, without a doubt, they have happened here in the United States. As I mentioned in my opening testimony, we know of quite a number, and I would say perhaps the majority of them were in the Washington, DC, Northern Virginia area. There are also a number, particularly of FBI personnel down in Florida. I do know of some other locations of which I can tell you more about in a more private situation, not necessarily because of classification, but for privilege of the individual client not to reveal it. But there is no doubt there have been quite a number of cases here, particularly relating to the CIA. CIA, and FBI, most predominantly also State Department.

Chairman PFLUGER. Thank you. My time has expired, and I recognize the Ranking Member for his line of question.

Mr. CORREA. Thank you, Mr. Chairman. Clearly, what I have heard today is very disturbing. Before I get to my questions, I just want to reiterate that we are going to do everything we can to assure that the victims, those that are suffering, will receive consistent health care for what is ailing you. But Mr. Edgreen, the evidence. No intentional attack yet. What I am hearing from Mr. Zaid, Mr. Grozev, is that there is a possibility that something is out there attacking us, especially in the homeland. Mr. Edgreen, based on what, Mr. Zaid just said, what are your thoughts?

Lieutenant Colonel EDGREEN. My personal thoughts?

Mr. CORREA. As an intelligence officer.

Lieutenant Colonel EDGREEN. Is that I agree with them. My personal opinions is that this is a global campaign, and it includes attacking us here at home. It is a strategic issue that is going to impact us.

Mr. CORREA. Is this an attack by the Russians? Just the Russians? Is it against the United States solely? Or other allies as well?

Lieutenant Colonel EDGREEN. I have to be careful what I say here. So let me say this.

Mr. CORREA. If I can, say what you can. If you gentlemen feel better talking about this in a more secure setting——

Lieutenant Colonel EDGREEN. I will start by saying——

Mr. CORREA [continuing]. I can work on that as well.

Lieutenant Colonel EDGREEN [continuing]. Congressman, thank you for the question. Give me 20 minutes in a SCIF, and I will convince all of you. I know where the bodies are buried. I know the cabinets to look in, the questions to ask, and the people to subpoena. I will say that this is a global campaign, and it is focused on attacking our people. The best of our people. It is not the middle-range people that are being attacked. It is those that are succeeding. Succeeding, and providing work. Work that wounds up on the President's desk every morning. So it is a massive issue. It is something that doesn't come to light. It is something that, especially with the Department of Defense survivors, the unseen, they

are totally left out of this. Because the Havana Act doesn't cover your active-duty members. They are told to go to the VA, but there is no VA diagnostic code, so we are not getting them care. It is not consistent. We have funding available that is allocated, that we could provide to take care of all of our people in our Government. We are not using it. That is what I urge you to contact the Defense Health Program.

Mr. CORREA. Mr. Zaid, my last 2½ minutes. Would you say this is more on behalf of the U.S. Government in terms of what we have been looking at? Is this more of a malfeasance as opposed to misfeasance?

Mr. ZAID. That is a good question. I am sure, just like so many other issues, it is a combination. I can't explain some of the obstacles that those in the Government have erected to block information. I can tell you, you know first-hand that I——

Mr. CORREA. But your opinion would be that that information is being blocked?

Mr. ZAID. There is information that has absolutely been blocked from one agency to the other. Particularly at the CIA. I mean, that is who we are going to point to the most, of information that the CIA has, that its sister intelligence agencies—it hasn't been shared with. I can identify a number of specific Classified documents in the proper setting.

Mr. CORREA. Mr. Grozev, any thoughts?

Mr. GROZEV. I would like to be the devil's advocate and allow for the possibility, for some legitimate reasons, why the U.S. Government and intelligence officers agencies might not want to make this a public issue. One of the few legitimate explanations for this, in my mind, is the fear of proliferation of such a weapon. In case it becomes widely-known that it is achievable, feasible, and maybe not too costly to manufacture. That is why I don't require public answers to our findings. But I encourage SCIF answers to everything we found out to you and to Government, so that we exclude the possibility that it is if that is the case of an attack on American officials by the Russian state.

Mr. CORREA. Is there any way to protect our officials from these weapons?

Mr. GROZEV. This is exactly why I do not take into account a possible legitimate reason for hiding this. Because from my personal point of view, making this public is the best protection.

Mr. CORREA. My last few seconds, Mr. Edgreen. Any thoughts?

Lieutenant Colonel EDGREEN. The best way to protect our people is to fight back. When you are hit in the shadows, you have to hit back twice as hard and tell your adversary why you did that.

Mr. CORREA. Thank you, Mr. Chairman. I am out of time. I will yield.

Chairman PFLUGER. The gentleman yields. I now recognize the gentleman from Arizona, Mr. Crane, for his 5 minutes of questioning.

Mr. CRANE. Thank you, Mr. Chairman, for holding this hearing today. Thank you to our witnesses for showing up. Many Americans, including other Members that I have spoken to recently, don't exactly know what to think of these Anomalous Health Incidents. I spoke to one the other day, just yesterday, who said I thought

that was debunked. Like Havana Syndrome, where our citizens are claiming very serious medical conditions following perceived attacks. After hearing your testimonies, it sounds like all 3 of you believe that these are hostile actions orchestrated by our adversaries against American citizens. Is that correct?

Lieutenant Colonel EDGREEN. Yes, sir.

Mr. ZAID. Yes. Not all of them, of course.

Mr. CRANE. OK. I can't remember which one of you said at least 68 incidents that you believe to be attacks using these type of weapons? Is that correct?

Mr. GROZEV. At least 68 of the incidents I said cannot be explained away with preexisting conditions for psychosomatic symptoms.

Mr. CRANE. Can you go over again real quick, Mr. Grozev, why you believe that our Nation's own law enforcement and intelligence investigations have concluded the opposite of the claims made here today?

Mr. GROZEV. One general observation, and again, I don't know the answer, but based on my 10 years of investigation of Russian intelligence operations and observing the parallel findings of law enforcement and intelligence publications, I find that there is an over-reliance on something that a colleague and a victim, a colleague of the victims and a victim himself called the straw, drinking straw insight, that is unfortunately used for many of the conclusions. Reliance or reliance on human intelligence sources that may be recruited within the Russian intelligence community who are asked, do you know if this is you guys? The answer may be no. That may be a very honest, sincere answer. From my investigation it is clear that any operation like this is heavily compartmentalized and it is firewalled to a degree where even members, other members of the same unit might not be aware that this has been going on.

To rely on human intelligence for conclusions of this stature is probably very inefficient. What we do find is unexplained travel. We find unexplained communications. That all points to a very plausible and internally consistent theory that these people are behind the attacks. Again, I just, I can see several reasons why the U.S. intelligence might not want to make that public. But they must make it known to qualified—and in a secure setting and provide answers to our findings.

Mr. CRANE. Guys, if your assessments here are correct, these are very covert weapons, aren't they? They don't leave behind bomb fragments, bullet holes, et cetera. They could absolutely be used by our adversaries and have very low levels of very easy to deny that they were even there, that they were used. Is that correct?

Lieutenant Colonel EDGREEN. That is correct. There is no entry or exit wound. How they are designed is to make the target feel like they are crazy, like they are imagining things. Especially on the low-duration, the low-intensity, long-duration hits.

Mr. CRANE. But you were saying that the targets are most often, always either CIA, FBI, intelligence, law enforcement individuals. Is that correct?

Lieutenant Colonel EDGREEN. No, I said diplomats, intelligence community, and Department of Defense make up the lion's share.

You often don't hear about the Department of Defense despite DOD having 5 or 10 times the number of survivors that Department of State has.

Mr. CRANE. Thank you for that correction, sir. You guys also said that these attacks are happening right here in this city, is that correct?

Mr. ZAID. Yes.

Lieutenant Colonel EDGREEN. Yes.

Mr. CRANE. Can you expound on that a little bit more?

Mr. ZAID. I mean, there have been some that have gone public with respect to Washington DC, the particularly credible ones. I am not saying that those are not credible, but the ones that have received the most attention on the inside of the intelligence community are in Northern Virginia, and they are particularly of CIA personnel.

Mr. CRANE. I think it was Mr. Grozev said you spoke to a Russian agent who said that they believe that Americans are using these same weapons on them. Is that correct?

Mr. GROZEV. That is correct. Back in the '80's.

Mr. CRANE. Might that have something to do with part of the CIA's motive to cover up the existence of the, this tech and these weapons?

Mr. GROZEV. That is a very logical possibility.

Mr. CRANE. Thank you, Mr. Chairman. I yield back.

Chairman PFLUGER. Gentleman yields. Chair now recognizes the gentleman from New York, Mr. Goldman, for his round of questioning.

Mr. GOLDMAN. Thank you Mr. Chairman. Thank you to our witnesses for being here. Mr. Grozev, I want to follow up a little bit on the interactions you've had with Russian intelligence about these AHI's. If you had a conversation with an intelligence officer where a Russian intelligence officer where he or she said that these are the same weapons that were used in the 1980's, isn't that an admission that they know they are using them now?

Mr. GROZEV. It is an admission that it is very plausible that they are being used now because the person was not privy to this particular operation. He is or she is retired. But again, the important thing is that he was serving at a time when there was a concerted effort for the Russian intelligence services to develop a counterweapon. He believed, given time passed since then, it has been developed.

Mr. GOLDMAN. I see. So he has retired, but believes that based on the similar symptoms or what other factors went into his——

Mr. GROZEV. Very, very similar symptoms were being conveyed in terms of Soviet diplomats stationed abroad, of intelligence background, had returned back to Russia, to the Soviet Union, with symptoms that they believed were caused by an acoustic weapon. That was their belief. It is not the fact that it is what happened, but again, it explains partly the motivation for them to develop a weapon that will be targeting exactly the type of people that we see being targeted.

Mr. GOLDMAN. I know there is some geospatial data that indicates there were Russian intelligence officers near alleged incidents

abroad. Do any of you know whether that is also the case for any of the incidents that have been reported domestically?

Mr. GROZEV. I do not have that data. Because the particular unit that we have focused on, they would not dare come to the United States. Therefore, if the Russians were doing this on U.S. soil, they would have used sleeper, sleepers, long-term proxies that would be here. But that is not a unit that I have discovered in my own career.

Mr. GOLDMAN. Therefore difficult to identify as affiliated with Russian intelligence.

Mr. GROZEV. Right.

Lieutenant Colonel EDGREEN. Sir, I think you should refer that last question to the FBI in Classified spaces.

Mr. ZAID. Obviously, the episode with my client, an active FBI agent that was authorized to speak to *60 Minutes,* talks about an incident in Key West, and most of that information is either Law Enforcement-Sensitive or Classified.

Mr. GOLDMAN. Are any of you aware of any reported incidents from individuals who are not members of the United States Government? Domestically, I should say.

Lieutenant Colonel EDGREEN. I am not. But I will throw a caveat in there. Generally, I only focused on former and current Government employees that were attacked.

Mr. GOLDMAN. Mr. Zaid, are you?

Mr. ZAID. There are many people who believe they are victims of AHI's. All you have to do is look at my Twitter feed whenever I post on the topic. I only represent Federal Government employees and their families, so I don't focus on the accuracy of those particular claims.

Mr. GOLDMAN. Mr. Grozev, do you have any in sight?

Mr. GROZEV. Not on American soil, but in other parts of the world there have been complaints that appear to be credible from Russian activists or Russian opposition leaders living abroad.

Mr. GOLDMAN. Mr. Zaid, I want to ask, and this is a hypothetical, but I am trying to understand why our Government would try to block information sharing or conceal information that they have. One thing that comes to mind is whether there is an operational risk to revealing any of the details of their investigation. Is that something that you have come across in any of your work?

Mr. ZAID. Yes, and quickly, because I know your time is elapsing here. I do think that that is, and I agree with Mr. Grozev, that is, there is a lot of reasons why the information might not be publicly released, and I do think that is something we could address more in a Classified environment to explain that. But there are understandable reasons why the U.S. Government has not revealed much of what it knows. But the question is, how about to you?

Mr. GOLDMAN. But also, if I may, Mr. Chairman, to follow up on that, there is a conclusion that has been made public that it is highly, highly, highly unlikely. I forgot what the language is, that these symptoms were caused by some sort of foreign, malign actor.

Mr. ZAID. Right. So the last ODNI assessment that came out in 2023 had indicated, and to the public, it seems very damning, this highly unlikely, that a foreign adversary was involved. But if you actually look at the levels within each of the agencies as to the

level of credibility that they have assessed to that is actually quite low for most of them. There is a lot of pushback, even internally among some of the intelligence agencies as to the qualification of that information. I will say just very quickly, finally, they talk about in particular, I think, one of the CIA's public documents, that many of these cases can be explained through environmental factors, preexisting medical conditions, but they don't explain any of that, which could easily be said in another sentence. The environmental factors include the following. Whatever, whatever. We looked at prior health conditions, and 85 percent had football injuries when they played in high school and college. None of that information is in there. Which leads one to believe that there is something more.

The other thing I will say just really quickly on that the news media missed the story on that CIA assessment. They said they looked at more than 1,000 cases and they concluded the vast majority could be explained otherwise. But there are at least 2 dozen cases that even the CIA acknowledges they can't explain away by any other alternative factors. That to me is the story that should have been in the *New York Times* and the *Washington Post, Wall Street Journal,* that there are 2 dozen cases the CIA can't even explain away.

Mr. GOLDMAN. Is that part of your 68, Mr. Grozev?

Mr. GROZEV. Absolutely, yes.

Mr. GOLDMAN. Mr. Chairman, thank you for indulging. I yield back.

Chairman PFLUGER. Gentlemen's time has expired. The Chair now recognizes gentleman from California, Mr. Swalwell.

Mr. SWALWELL. Thank you. I thank the Chair and our Ranking Member for allowing me to waive on to this hearing. I thank the panelists. This is an issue that I know well from 8 years on the House Intelligence Committee. I first just want to say to Mr. Zaid that your clients, who you represent, are heroes. The people who were subjected to this are American heroes. I have met a number of them, and they served their country abroad. They toiled away oftentimes without their family, leaving everything here in the United States, and oftentimes without any of us really having a sense of what they are doing. They were exposed to this. This condition when you meet with the victims is completely debilitating. It changes your life. It turns it upside down. If you are a young parent, life is already disorienting. If you are subjected to this, it is even more difficult to be a parent. Put yourself through this, the questions you have.

But something that I have been struck by in meeting with so many of these victims is, yes, they want to get well themselves. They have an obligation to their families to take care of their families. They have expectations of the agencies that they work for. But in every single one of them, they want to share as much as possible to prevent the next attack. So, their sense of duty, even after being attacked and even after being debilitated, is still, I don't want this to happen to somebody else. Mr. Zaid, I don't know if you can animate that just a little bit as to the patriotism of the people you represent and wanting to get to the bottom of this.

Mr. ZAID. Thank you, Congressman. I agree 100 percent. It was mentioned by Mr. Edgreen, the notion of these oftentimes are the best of the best who have been impacted. I have heard repeatedly from so many of them that what they want to achieve here is to make sure that their peers, their colleagues, and their future colleagues do not have this happen to them and they want to go back to work. I mean, this is—most of them were in their thirties and forties when they were impacted and would still have long careers ahead of them. They want nothing more than to put their efforts into working for the national security interests of the United States. They are true heroes. I agree 100 percent.

Mr. SWALWELL. As we think forward about, you know, what can we do? This is the Homeland Security Committee. Obviously, this issue crosses jurisdictions. The House Intelligence Committee, Armed Services Committee, and Homeland Security Committee. But I would just welcome from the Lieutenant Colonel, how should we be thinking about this on the homeland? If this is indeed, you know, a foreign adversary, you know, using a technology or a technique, you know, how do we prevent it from coming onto the homeland where, you know, the targets, the target environment is even richer than Americans abroad.

Lieutenant Colonel EDGREEN. Thank you, sir. First of all, I must say that, yes, there is needed, much-needed legislation. We need a new Havana Act, something that is not a one-term payment. It was a great step in the right direction, but it had some shortcomings that we are going to fix in the next go-around. What you are referring to would obviously have to fall under the next Homeland Security Act and securing our borders, because if I hypothetically was going to plan an operation, I would have to get a couple guys across our border. They would go pick up a weapon and then start surveilling the target and then hit them and then disappear. So, I think there is a larger question there that I am not qualified to answer. But there is some long-term things that needs to be done in terms of new Acts. But in the short-term, we need to do things like implement the original Havana Act. DOD still hasn't done it. They still have not implemented the Havana Act. We need a VA diagnostic code. Thanks to the VFW brothers and sisters that are here today and for your meeting earlier, we don't have a VA diagnostic code for the 500-some DOD survivors. How are they going to get long-term care and disability without that?

Mr. SWALWELL. Well, I hope this issue you see in a room that is often contentious, explosive, volcanic, that you have got Members on both sides who first honor and salute the victims and want to do everything we can to make sure that they are made whole and if they can return, can return. Then of course, as the victims have wanted to do, make sure we do everything possible to prevent anyone else from suffering from this. I yield back. Thank you, Chairman.

Chairman PFLUGER. I thank the gentleman. We'll now enter a second round of questioning. I know we have a couple of other Members who were seeking to waive on and we will again alternate according to seniority on both sides of the aisle. So I recognize myself for another round of questioning.

Let me just kind-of go back to Mr. Edgreen. When you look at what is your, I guess, analysis of how many victims you can identify that have occurred here in the United States? Then second, what has been the response by Government agencies to those, to those victims from the time that they report it to the communication between agencies, if any communication exists. Maybe focus a little bit on the FBI.

Lieutenant Colonel EDGREEN. Yes. Thank you. I can't get into specifics about the numbers, but after having talked with Mr. Zaid about this, I could say comfortably.

Chairman PFLUGER. Why can't you talk about the numbers? Just so everybody can understand.

Lieutenant Colonel EDGREEN. Because numbers and specific locations of attacks are Classified. But I can tell you roughly 20 percent to 30 percent of the cases that I saw were in the homeland. In terms of the response on the homeland, it gets tricky because it involves authorities here within the FBI. What I have found is that we needed a faster response mechanism. The U.S. Government doesn't have a central clearinghouse for AHI's. So let us say someone in the air force is attacked on soil. How do you quickly find out about that and freeze the crime scene and go out and evaluate it?

Chairman PFLUGER. There is no coordination that is happening in between departments and agencies and organizations?

Lieutenant Colonel EDGREEN. It is happening, but it is very slow. It involves letterhead memorandum that takes weeks to process. CCTV footage expires in this town within 24 hours.

Chairman PFLUGER. Talk to me about the Classification, who classified it?

Lieutenant Colonel EDGREEN. You would have to ask the ODNI. They are the over—they oversaw all things related.

Chairman PFLUGER. Your understanding and what you are testifying to now is it is Classified. So there isn't an acknowledgement of an issue.

Lieutenant Colonel EDGREEN. Clearly. Clearly, sir, there is.

Chairman PFLUGER. Mr. Grozev, I will ask you the same question. How has the FBI handled the complaints and the, you know, you want to call them the victim, if you want to call them the victims and their, I guess, reaching out to within the FBI, how have they handled it?

Mr. GROZEV. I am not privy to that investigation. From my incidental observations, my belief is that the FBI feel that they have to toe the line of the intelligence community on this topic. They feel, some of them feel that they wish they could do more to protect their own colleagues.

Chairman PFLUGER. OK. Are they being told, is it your feeling that they are being told from superiors or others within the FBI to stand down?

Mr. GROZEV. I do not have evidence they have been told. But being patriots, it might be a self-imposed limitation to not contradict the overall finding of the Director of National Intelligence.

Chairman PFLUGER. I will ask the same thing to you, Mr. Zaid. Is that your understanding or is there something similar to that going on?

Mr. ZAID. Without a doubt. I think the FBI is becoming better, more receptive. But I will give you a perfect example. In March 2021, the FBI drafted a work-force message concerning AHI's to go to everyone about what to do, how to report it. It took them 6 months to issue that notice. During that time, my client, Carrie, who is in the *60 Minutes* episode, was hit. That work-force message still didn't go out. It took a long time to even get medical care for many of the FBI victims, it has been a complicated process. There are specifics that we could absolutely provide to you in a more protected environment, more so for the privacy of the individuals, but also from a classification standpoint, that would show you where the system has broken down.

Chairman PFLUGER. How high does this go? We are talking about, as has been testified to today, high successful, well-performing people. But I mean, can you give us some details about how high this goes in our government?

Mr. ZAID. From a victim standpoint?

Chairman PFLUGER. Yes, from a victim standpoint.

Mr. ZAID. I mean, it has been reported. Individuals connected to the NSC and the White House.

Chairman PFLUGER. Those as Lieutenant Colonel Edgreen—those that could brief the President.

Mr. ZAID. Yes, and some of them have been public in some prior *60 Minutes* episodes of believing that they have been impacted. I mean, there would be evidence that would be in the Classified sphere.

Chairman PFLUGER. Of the incidents that are happening in, say, Northern Virginia, Washington, DC. Are families, family members, also reporting having symptoms and being attacked?

Mr. ZAID. Not as many. Usually it has been in the overseas locations where the family members have been impacted. Generally, because it is as I described in that NSA memo, bathing the residence. You know, they have no idea who might be inside the residence. That is why literally pets have been impacted because they have been in the beam, the wave, whatever. Most there have been Government buildings impacted in Northern Virginia, and it's usually been individuals either in their home, hotels, or driving.

Chairman PFLUGER. Is it the Panel's belief that this is primarily happening attributed to Russian operatives?

Lieutenant Colonel EDGREEN. I have said this before. There is an extremely strong Russia nexus inside China. I think that changes a bit.

Chairman PFLUGER. Quickly, Mr. Grozev.

Mr. GROZEV. We have the specific evidence of Russian operatives being in China at the time when American diplomats suffered incidents. This could not have happened without the knowledge and at least passive cooperation by Chinese intelligence. Which means Chinese intelligence would be exposed to the capabilities and possibility of such a weapon. Which probably means they have developed their own version or borrowed it from Russia.

Chairman PFLUGER. Thank you. All right, my time has expired. I recognize the Ranking Member.

Mr. CORREA. Thank you. Mr. Edgreen, we started talking about, you know, the lack of Government action, recognizing this issue.

You compare this to Agent Orange and some of the other ailments our military personnel have suffered. It takes decades to acknowledge that, yes, this is an issue, it is a medical issue to be taken care of, to be treated on a long-term basis. It is kind-of where we started today. I think that I agree with you and with Chairman and Mr. Swalwell, who worked on this issue for a long time, that we do have to take care of the victims the best we can. Now we are shifting to something else, which is essentially a cover-up. What you all are saying is there is a Government cover-up of the fact that something is out there afflicting, targeting us. Is this where we are going with this?

Lieutenant Colonel EDGREEN. Thank you. Great points. I won't get into classification of the problems. I will tell you that the Government in the IC assessment is wrong. It is dead wrong. I can't tell you if it is a cover-up, why they are doing this. Malfeasance. I won't go there. What I can tell you is that it is my firm belief we already have attribution. Right now is the time for action, retribution. We need to prioritize taking care of our people. Because there is a lot of survivors and their families that have been attacked here in the homeland that are in a long wait line to get to Walter Reed. Because we are not executing funding that's already been allocated by you gentlemen to take care of these survivors. You fix Walter Reed in the Defense Health Program. Everyone benefits.

Mr. CORREA. Mr. Zaid.

Mr. ZAID. So, sir, I have been working in the national security field for 30 years, representing some of our most covert intelligence officers, who I respect a great deal, and the agencies. The word cover-up. I will tell you that there are many legitimate reasons why there could be what the agencies are doing to explain why they are doing it. What I will tell you is——

Mr. CORREA. Would you say a cover-up as a statement, or other words.

Mr. ZAID. So cover-up would depend on intent. There could be good reasons to withhold information. I will say that the public statements that the Executive branch is making is inconsistent with the Classified record, and then it would be Congress's job as an oversight authority to determine why that is, whether it was a legitimate reason to mislead the public, or because of some nefarious reason, or all the above. But the record on the inside, in the Classified theater, is not consistent with the public statements.

Mr. CORREA. Mr. Grozev.

Mr. GROZEV. If this is true, and it depends partly on Classified data that I am not privy to, then it is a judgment call that was made to mislead the public in the interest of national, international security interest. But it would be up to Congress to decide whether that judgment call was correct. One additional effect of such a judgment call that may not have been taken into account is the effect of encouraging the hostile power in the hypothesis that this is indeed a Russian, a covert operation, and the whole intelligence community of the United States has publicly denied this ever happening. This will be such a trigger, such an incentive for Russia to escalate, and to—it will be for somebody who knows how the mind of President Putin works, I can tell you that if they did it, and the

U.S. Government has concluded they didn't do it, this will encourage an escalation in the war in Ukraine. This will encourage an escalation because this person thinks the rest of the world are complete idiots, and really, that is how his mind works. So take this into account when you assess the judgment call.

Mr. CORREA. Thank you. Any other thoughts, Chairman? Go ahead, Mr. Edgreen.

Lieutenant Colonel EDGREEN. I would just like to thank this committee for focusing on this issue. One of the things we always did at the DIA was not questioning the individual. Are they really having symptoms? We got immediate care for every single symptom, and I think that is the right way to do it. In terms of attribution, I think we over-empowered CIA analysts, and when they kicked it up the food chain to ODNI for NIC assessment, when you look at it, the people they kicked it up to were other CIA analysts on loan. So this was a self-licking ice cream cone. We need more people inside the Department of Defense or with an operational background to look at this, because if you show an analyst flowers, they are going to look for a wedding. You show a case officer those flowers, they are going to look for a funeral.

Mr. CORREA. Thank you, gentlemen. Mr. Chairman, I yield.

Chairman PFLUGER. I thank the Ranking Member. Chair and I recognize the gentleman from Arizona, Mr. Crane.

Mr. CRANE. Thank you, Mr. Chairman. This next question is for Mr. Zaid and Edgreen. Are either of you aware of any individuals who have AHI symptoms have passed away from their ailments?

Mr. ZAID. I do.

Lieutenant Colonel EDGREEN. I do.

Mr. CRANE. Do we know how many that you are aware of? We need to discuss that somewhere else.

Mr. ZAID. For the privacy of the families. It is a small community.

Mr. CRANE. Right. Mr. Chairman, are we going to be able to move into a Classified setting at some point or at another time?

Chairman PFLUGER. I think that possibility will exist at a later time.

Mr. CRANE. Thank you, Mr. Chairman. There is concerns that the FBI has totally dropped the ball on this investigation. Would the panelists agree with that assessment?

Lieutenant Colonel EDGREEN. I would. I would say that a great question for you to ask is to the FBI, how many people did you have assigned to this? They are going to come back with a big number, and then you are going to ask how many people were assigned to this full-time? Then you are going to see the looks on their faces. Because by my accounts, I had roughly 2 officers from the field office. I had a GS15 at headquarters and an analyst, and the best one out of all of them was the analyst. I will say they all had additional duties. That wasn't their main job. They were doing things like looking at January 6th, looking at terrorism threats here in DC. So it's been very small, hasn't been resourced properly. Any time you work with the FBI, and this is fascinating because I did my whole career abroad, it is easier. They put things into a black box. One of the main problems we had is they had on a criminal hat—CRIM, as they say it, in the FBI, and not a CI hat.

Mr. CRANE. Gotcha. Do you believe that Homeland Security Investigations should get engaged in this investigation?

Lieutenant Colonel EDGREEN. Absolutely. Because they were cut out. You only had, I believe, my time there. One Homeland Security Officer, she was an analyst for Secret Service. Homeland Security Investigation should be involved.

Mr. CRANE. Have any of you 3 panelists ever seen one of these weapons?

Mr. GROZEV. I have seen a 1991 version of the weapon. It looks like a satellite dish with a unit this size attached to it. Of course, over the years, miniaturization has been possible. Obviously, there is a limitation to how miniaturized it can be because of the antenna size, which can always, is always related to the wave. But still, it is something that can be well-contained in the trunk of a car, or even a large backpack.

Mr. CRANE. Is this a type of weapon that could be cobbled together once foreign operatives are on our own soil? Or is this something that would have to be manufactured in a nation-state?

Mr. GROZEV. My experience shows that it can be cobbled together. It is something that can. A rough, crude version of this that will probably require longer exposure than the more advanced version that has been tested, as we see from this document, can be put together inexpensively. But again, I would abstain from commenting further, lest I encourage people to try it at home.

Mr. CRANE. That would make this weapon and this tactic even more dangerous, wouldn't it, Mr. Grozev?

Mr. GROZEV. Correct.

Mr. CRANE. Can you tell us, sir, about this contract you discovered for these weapons?

Mr. GROZEV. The contract was an award by the Institute for Prospective Military Studies. An annual award. That means that this was the best development for a unit. Research, development, achievement for a unit whose goal is to encourage the production and manufacturing and discovery and invention in the area of new weapons, both lethal and non-lethal. I know that this same commander won the award of this institute 2 years in a row. We are only privy to one of his devices, to one of his achievements. We don't know what the subsequent year's delivery from him was. But again, I mentioned this in order for you to understand that the perceived value, the perceived merit by the Kremlin of this particular award, of this particular achievement, was high enough for it to be done. The only award for the year, and for this person to achieve a political placement, a position that is not usual for a security operative. This is the value of our finding. This was a very momentous moment for the Kremlin, this particular achievement.

Mr. CRANE. Mr. Chairman, can I have 30 more seconds? I think it was you, Mr. Grozev, who said that in your investigation, you were able to conclude that one of these units who was operating on our soil was found near individuals that contracted these illnesses. How were you able to confirm this unit's proximity to individuals who experienced these injuries?

Mr. GROZEV. We have used, over the years, an amalgamation of data sources from the Russian market of data, which is a unique phenomenon. We have ob-

tained ticketing data, hotel reservation data, and telephone communication data for essentially 60 members of this unit that we have identified over the years.

Mr. CRANE. Have any of them been apprehended, Mr. Grozev?

Mr. GROZEV. Several of them have been indicted. Four of them are. Six of them are indicted in Bulgaria over, including the person that we just referred to, the engineer who discovered the acoustic weapon or delivered it. They are indicted, but they are obviously there, hidden, well-hidden in Russia, and cannot be apprehended.

Mr. CRANE. Thank you, Mr. Chairman. I yield back.

Chairman PFLUGER. Gentleman yields. This now concludes the questioning portion of the hearing, and I would like to thank the witnesses. Thank you for your time, your service, for being able to come here today and share with us. Obviously, as my colleagues on both sides of the aisle have said, the health, the well-being of all of the service members and Government officials, it is very concerning. What we have heard today is very concerning. I think as we look at the next steps, I would just encourage continued communication with this subcommittee, with other subcommittees and committees that are looking at this as well. The Members of the subcommittee may have some additional questions for the witnesses, and we would ask you to please respond to these in writing. Pursuant to committee rule VII(D), the hearing record will be open for 10 days. Without objection, the subcommittee stands adjourned.

[Whereupon, at 3:20 p.m., the subcommittee was adjourned.]