



COMMITTEE ON HOMELAND SECURITY

Ranking Member Bennie G. Thompson

FOR IMMEDIATE RELEASE

Hearing Statement of Rep. Lou Correa (D-CA)
Subcommittee on Counterterrorism, Law Enforcement & Intelligence
Silent Weapons: Examining Foreign Anomalous Health Incidents Targeting Americans in the Homeland and Abroad

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 D.C., 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 meantime, 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.

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