

# Anomalous Health Incidents: The Havana Syndrome—Update

## THE ISSUE

To date, as many as 200 Americans have reported signs of Havana syndrome, a variety of debilitating symptoms that first affected U.S. intelligence officers and State Department staff stationed in Cuba in late 2016. The first reported case involved an American officer in Havana. The officer went to the U.S. embassy's health office to report strange sound sensations and pressure sensations followed by intense headaches and dizziness. Several other officers in Cuba reported similar mysterious sensations while at their homes throughout early 2017. Cases have since been reported in roughly a dozen other countries, including the United States.

CIA Director William Burns said recently: “There are probably a couple of hundred incidents across the U.S. government and across the globe. Of those couple of hundred, there’s probably about 100 in which my colleagues, my officers and family members have been affected.” Reportedly, of the other incidents, approximately 60 cases involve Department of Defense officials or their relatives, around 50 cases involve State Department personnel or their relatives, and at least two cases involve White House staff.

## SYMPTOMS AND NOTABLE CASES: TIMELINE

Symptoms have included head pressure, migraines, memory loss and trouble concentrating, ear ringing/tinnitus, dizziness, fatigue, nausea, anxiety, vision problems, balance issues, hearing loss, sleeplessness, and other neurological symptoms.

Dating back to 2016, multiple cases affecting American and Canadian officials occurred in areas outside Havana. Additional possible cases have occurred in China, Russia, the United Kingdom, Uzbekistan, Colombia, Taiwan, Poland, Tajikistan, Kyrgyzstan, Georgia, Vietnam, India, and Austria, with possible U.S. cases in Miami and two in Washington, DC, involving former Trump Administration National Security Council (NSC) staff. More recently, there have been reports of nearly two dozen U.S. officials in Vienna, Austria, who have reported Havana syndrome symptoms. Vienna is notable, as several international bodies are headquartered in the Austrian capital, including the International Atomic Energy Agency. Vienna is also the current site of negotiations on the Iran deal.

In the second half of 2021, there has been a spike in potential cases:

- Two cases were investigated in Hanoi, Vietnam, delaying U.S. Vice President Kamala Harris’s arrival by several hours during her trip to Southeast Asia. The victims, two diplomats, were not connected to Vice President Harris or to the White House. Both diplomats were medically evacuated and reported hearing strange noises, consistent with symptoms seen in Cuba.
- In August 2021, at least two U.S. officials in Germany reportedly developed symptoms, including “nausea, severe headaches, ear pain, fatigue, insomnia, and sluggishness.”

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This paper, in its entirety, can be found at <http://report.heritage.org/fs223>

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- In September 2021, the CIA reportedly removed its station chief in Vienna after receiving criticism of its leadership and response to the recent uptick in cases. The increase in cases has caused some offices within the U.S. mission to shutter.
- During a recent trip to India, an officer traveling with CIA Director Bill Burns reported symptoms consistent with Havana syndrome. Another intelligence officer was evacuated from Serbia recently for Havana-syn-drome-consistent injuries.
- In September 2021, at least five families associated with the U.S. embassy in Colombia reportedly developed symptoms associated with Havana syndrome ahead of Secretary of State Antony Blinken's October 2021 trip.

## THEORIZED WEAPON

A 2020 report by the National Academies of Science, Engineering, and Medicine (commissioned by the State Department) assessed that many of the symptoms described by Havana syndrome victims are consistent with the effects of “directed pulse radio frequency energy.”

There have been possible earlier cases dating back to 1996 involving National Security Agency (NSA) officers. A declassified NSA statement from 2014 said, regarding the 1996 incident, that a hostile country in which the officers were located had an association “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.” Additionally, the 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.” It is unclear if these earlier incidents are linked to the more recent incidents.

It is an open question whether the suspected directed-energy devices are being used deliberately as a weapon, or are an inadvertent side effect of a signals-intelligence-collection system. Investigators reportedly cannot definitively say if the directed-energy attacks have been caused by a specific weapon, but have theorized that it would be “primarily transported by vehicle,” and that some could be “small enough to fit into a large backpack, and an individual can be targeted from 500 to 1,000 yards away.”

### Potential Perpetrators

The U.S. Intelligence Community thus far has not reached a consensus or made any formal attributions for the possible directed-energy incidents. There has been unverified reporting in recent months about the investigation of possible involvement by Russia’s intelligence directorate, the GRU. Russia’s interest in developing microwave weaponry dates to the Soviet Union. A National Academies’ 2020 report noted:

[M]any of the distinctive and acute signs, symptoms, and observations reported by DOS [Department of State] employees are consistent with the effects of directed, pulsed radio frequency (RF) energy. Studies published in the open literature more than a half century ago and over the subsequent decades by Western and Soviet sources provide circumstantial support for this possible mechanism.

Recent reporting from closed-door briefings on Capitol Hill have claimed that the origin of the technology required in such attacks is “more likely than not in Russia,” but that China could also be a culprit. CIA Director Burns, when asked specifically if Russia is behind the incidents, stated: “Could be, but I honestly cannot—I don’t want to suggest until we can draw some more definitive conclusions who it might be. But there are a number of possibilities.”

## U.S. RESPONSE SO FAR

The State Department, the CIA, and the Defense Department each have a task force looking into the Havana syndrome. In addition, to assist in detecting incidents, the State Department “has established a team of medical experts to respond to reports of possible health incidents, and offered baseline medical screenings to diplomats in case they later report an incident.” It was recently reported that CIA Director Burns put a veteran of the agency’s hunt for Osama bin Laden in charge of the CIA’s task force.

The State Department’s lead official for Havana syndrome incidents, Ambassador Pamela Spratlen, has left her position after only six months, claiming that she “reached the threshold of hours of labor” allowed as a retiree. She reportedly had received calls for her resignation after speaking with victims of the attacks and declined to say whether she accepted an FBI report claiming that victims were suffering from a “mass psychogenic illness.”

A bipartisan group of Senators recently wrote Secretary Blinken about “ongoing anomalous health incidents (AHIs)” impacting U.S. personnel around the world. The letter states that AHIs reflect a “significant, unmitigated threat to our national security” and calls on the Secretary to “immediately” announce Ambassador Spratlen’s replacement to lead the department’s task force. In addition, the letter expressed concern that the Department of State “is not treating this crisis with the requisite senior-level attention that it requires,” and that the department is “insufficiently engaged in interagency efforts to find the cause of these attacks, identify those responsible, and develop a plan to hold them accountable.” On November 5, Secretary Blinken made a public statement detailing the State Department’s response to the threat posed by AHIs, including naming a career member of the Foreign Service to serve as a senior care coordinator, and another career member of the Foreign Service to serve as the new head of the State Department’s Health Incident Response Task Force.

Reportedly, the State Department administered tests called the Havana Acquired Brain Injury Tool (HABIT) to evaluate “directed energy exposure in certain foreign environments” as early as 2018. As of mid-2018, 41 diplomats reportedly failed HABIT tests, including 26 from Cuba and 15 from China. The State Department did not inform Congress about these tests or suspicions about their cause for more than two years according to the news report. The State Department has said that the 2018 tests “do not align with the department’s current medical evaluation procedures” and has “evolved” while utilizing “a tool that comprehensively evaluates reported anomalous health incidents in neurological, cognitive, vestibular, auditory, and visual domains.”

Last year, under the leadership of then-Director of National Intelligence John Ratcliffe and National Counterintelligence and Security Center (NCSC) Director Bill Evanina, agencies were required to come up with a “more standardized set of criteria,” and the NCSC was designated as the clearinghouse to compile and collect data on government-wide cases.

Reportedly, the U.S. has started a program to develop countermeasures to these directed-energy attacks. CIA Director Burns has tripled the number of full-time medical personnel at the CIA who are looking into these issues. Additionally, Burns has said that he has a strong team focused on the questions of “What?” and “Who?”

Additionally, it has been reported that the NSC is establishing two expert panels to study the issue. The panels will be composed of experts from both “inside and outside of government” and will focus on determining the cause of the Havana syndrome as well as possible treatment methods. The State Department has also directed those posted overseas to report any symptoms consistent with directed-energy attacks to the Bureau of Medical Services for a possible referral to the National Institutes of Health.

Legislators on Capitol Hill have also been investigating the issue, considering legislative

changes and additional resources to address Havana syndrome. In addition, Congress has examined the CIA's initial response, workforce health claims and treatments, and codified a recently appointed position, the Anomalous Health Incidents Interagency Coordinator, within the NSC to coordinate government-wide action on the investigation of the origins and response to the incidents.

The Senate Intelligence Committee's recently approved Intelligence Authorization Act gives those affected access to Walter Reed Medical Center, which has unique specialties for brain injuries. The Senate version of the fiscal year 2022 National Defense Authorization Act authorizes an additional \$30 million for the Defense Health Program to treat victims. The

House Intelligence Committee's [Intelligence Authorization Act](#) would also provide additional resources to identify the source of Havana syndrome and to review the work by the CIA on the issue to this point. This would [include](#) protocols for "pre-deployment testing" and treatment options for affected individuals and families.

President Joe Biden [signed](#) the Helping American Victims Afflicted by Neurological Attacks ([HAVANA](#)) Act into law on October 8, 2021. The bipartisan measure passed unanimously through both the House and Senate. The measure [authorizes](#) financial assistance and additional health care to victims. [Funding](#) for the HAVANA Act has yet to be passed by Congress.

*This is an update to [Factsheet No. 217](#).*