

Yu, Lois C.

From: Bender, Lisa R. - VP HR
Sent: Tuesday, May 29, 2007 8:40 AM
To: Yu, Lois C.
Subject: FW: MITRE employee with top secret clearance who may present an unacceptable national security risk

Lois,
 This is one of the two e-mails.
 Lisa

From: Affected Parties [mailto:stop_the_violations@hotmail.com]
Sent: Saturday, May 19, 2007 6:25 AM
To: Bender, Lisa R.; Grasso, Alfred; Glasner, Sol; Kontos, Mark W.; Metzger, Lou; Huffman, Stephen D.
Subject: RE: MITRE employee with top secret clearance who may present an unacceptable national security risk

This is not a joke, and it is not a hoax.

I have met Al Grasso and Lisa Bender previously. In fact I have eaten a meal with each of them.

If I report this person, I may suffer significant financial harm. But I believe national security interests and the safety of MITRE employees should outweigh my own personal interests.

It is important to understand that this person has these problem behaviors and mental illnesses likely due to an extensive history of self-acknowledged child abuse including emotional, verbal, psychological, and physical abuse from the person's father. This is really sad and it has to be clear that this person is a victim of a very bad situation. I believe some leniency is in order.

However, the degree of lawlessness and declining mental health and financial problems simply seems too severe to allow this person to have a top secret security clearance. I have been advised by multiple mental health professionals that this person will likely not recover from BPD, if that is indeed one of the mental illnesses that afflicts this person. BPD is very hard to diagnose as it is often comorbid with other mental illnesses, and people who have it often go through many years of wrong diagnoses or never get any help at all because they are unwilling to admit something is wrong with them. One psychiatrist who has met this person and who has seen records of this person's behavior spent a lot of time talking with me about how to manage a person with BPD, so although she is unwilling to make a formal diagnosis of it, she seems to accept that is probably an accurate assessment. She has a substantial caseload of BPD patients and has been treating people with this problem for about 20 years. In her experience, most of them never recover and it takes 7 or more years of consistent therapy once every one or two weeks to start to make significant progress on managing their problem behaviors.

People with BPD have an uncanny ability to lie convincingly, and can often even pass lie detector tests even though there is incontrovertible evidence that they are lying. This may be because they often truly believe their own lies.

DSM-IV criteria for BPD include these (from http://www.bpdresourcecenter.org/what_Criteria.htm):

DSM-IV Criteria for BPD

The following is the criteria listed in the Diagnostic Statistical Manual for Psychiatric Disorders, Fourth Edition (1994) for Borderline Personality Disorder:

A pervasive pattern of instability of interpersonal relationships, self-image, and affects, and marked impulsivity beginning by early adulthood and present in a variety of contexts, as indicated by five (or more) of the following:

1. Frantic efforts to avoid real or imagined abandonment. Note: Do not include suicidal or self-mutilating behavior covered in (5).
2. A pattern of unstable and intense interpersonal relationships characterized by alternating between extremes of idealization and devaluation. This is called "splitting."
3. Identity disturbance: markedly and persistently unstable self-image or sense of self.
4. Impulsivity in at least two areas that are potentially self-damaging (e.g., spending, sex, substance abuse, reckless driving, binge eating). Note: Do not include suicidal or self-mutilating behavior covered in (5).
5. Recurrent suicidal behavior, gestures, or threats, or self-mutilating behavior.
6. Affective instability due to a marked reactivity of mood (e.g., intense episodic dysphoria, irritability, or anxiety usually lasting a few hours and only rarely more than a few days).
7. Chronic feelings of emptiness.
8. Inappropriate, intense anger or difficulty controlling anger (e.g., frequent displays of temper, constant anger, recurrent physical fights).
9. Transient, stress-related paranoid ideation or severe dissociative symptoms.

This person has exhibited behaviors that seem to match criteria 1, 2, 3, 4, 6, 7, 8, and 9. Although this person tried to commit suicide once in 1994, this was not recurrent so criterion 5 is probably not met. Only 5 of the 9 criteria are needed to make a diagnosis.

Please see www.bpdcentral.com for more information. About 2% of the US population suffers from this personality disorder. Most are women, and most are victims of childhood traumas such as severe abuse.

Personally I think this person could continue to do non-classified work, but even in such a circumstance it is important to ensure that other MITRE employees are protected in case this person starts to exhibit "negative splitting" or commits a distortion campaign or other problem behaviors against other MITRE employees. This seems especially likely with supervisors. Other people should not have their careers ruined because of this person's mental illness. If people understand what is wrong, then perhaps some adjustments can be made to ensure that others are safe, national security is not at risk, and this person might be able to learn to manage negative behaviors if effective treatment can be forced on the person. Unfortunately, since it is not likely

Already, this person appears to have suffered multiple cognitive dissociation events that led to false criminal accusations against others. This person has also engaged in an extensive defamation and distortion campaign against multiple people. This is characteristic behavior of many BPD victims.

Generally this person does not resort to physical violence, but when this person initiates physical violence, this person consistently tries to blame the incidents on others. Unless there are witnesses or video cameras, other people may be in deep trouble if this happens because this person is such a good liar and tends to be believed by law enforcement officers until additional information is presented to show this person's credibility is very poor.

I have tried very hard to get appropriate help for this person, but I do not believe it is going to happen given the current or foreseeable situation and from what I have seen, the situation continues to deteriorate presenting risks that are unacceptable in many ways. I cannot in good conscience allow this risk to persist, but at the same time I am hoping to find some way to mitigate the negative impact to this person.

From: stop_the_violations@hotmail.com
 To: lbender@mitre.org; ag@mitre.org; sglasner@mitre.org; mkontos@mitre.org; lmetzger@mitre.org; shuffman@mitre.org
 Subject: MITRE employee with top secret clearance who may present an unacceptable national security risk
 Date: Sat, 19 May 2007 02:30:37 -0700

Could you please send me or point me to a document that outlines the security rules to be followed by holders of top secret clearances? If possible, I want to understand what the rules are before I take further action.

I believe that I know of a MITRE employee who has such a clearance who has violated various federal and state laws and has multiple mental health conditions and financial problems as follows that may constitute an unacceptable risk to national security:

- 1) Has illegally employed a Mexican citizen, breaking US and California employment laws by paying in cash and not following payroll tax regulations and not completing form I-9 for her
- 2) Has had foreign nationals from Mexico, People's Republic of China, and Taiwan living in the household, probably without reporting it.
- 3) The foreign national from PRC reputedly had a father and brother in the People's Liberation Army.
- 4) Has probably failed to report overseas travel to Taiwan, Japan, and Switzerland.
- 5) Has filed false police reports, including one that involved false accusations of battery and child endangerment designed to cause the arrest of a person physically attacked by the person committing the violations.
- 6) Has violated temporary restraining orders issued by a court
- 7) Has committed at least one and possibly two violations of California Penal Code 530.5(a) identify theft involving fraudulent medical records release forms.
- 8) Filed a temporary restraining order making false allegations which were later investigated and concluded by a court agency to not be credible and to appear to have questionable motives stated as follows by the court investigator:

The mother's raised concerns about the children's safety when with the father leaves the undersigned questioning the mother's motives. What is particularly alarming is that the children have had to endure seeing their father in the presence of a stranger when it strongly appears there was never a need for that to have occurred. The mother's less than accurate account of the father certainly raises concerns regarding her credibility and emotional makeup.

- 9) Has violated numerous court orders in a court case currently in process
- 10) Is a pathological liar, going so far as to lie about injuries, medical care, and symptoms of her children
- 11) Currently has severe financial problems
- 12) Broke California Automatic Temporary Restraining Order laws on financial activities and changing of beneficiaries of insurance policies
- 13) Was diagnosed with Obsessive Compulsive Disorder (OCD) in 1999 and refused treatment
- 14) Was diagnosed with Post Traumatic Stress Disorder (PTSD) in 2005 and avoided treatment
- 15) Is suspected of having a Borderline Personality Disorder (BPD) in 2006 and so far as I know is not receiving any treatment for it
- 16) Shows nearly all the behavioral traits for Antisocial Personality Disorder (APD - typified by lying, feeling above the law, not caring how other people are harmed, etc.), enough that it looks to me like she could satisfy the DSM-IV technical criteria for Antisocial Personality Disorder with the possible exception of having a conduct disorder before age 15. A number of these behavior traits are similar to those for BPD, however -- maybe it is not clear if she has BPD, APD, or both.
- 17) Has conducted defamation campaigns against others, and these campaigns are consistent with the behavior of many BPD victims
- 18) Attempted to commit suicide in 1994

19) Was an active member around 2001 to 2002 in a meditation group considered by many experts, including the French government, to be a cult.

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