

Hon Michelle Rowland MP
Minister for Communications

Dear Minister,

At the Oceania Radiofrequency Scientific Advisory Association (ORSAA), our scientific team has constructed the world's largest categorised database of peer-reviewed scientific studies on radiofrequency electromagnetic fields (RF-EMFs). This database is often cited in the scientific literature, and analysis of studies contained within it shows significant biological and/or potential health effects associated with exposure to anthropogenic EMFs.

Part of our role is to act as an advocate for disadvantaged Australians who are suffering from microwave sickness. Microwave sickness was identified in early research in the 1970s, and nowadays it is often termed Electrohypersensitivity (EHS) or Electromagnetic Sensitivity (EMS). Currently, in Australia, there are a handful of environmentally trained medical doctors treating this condition. It has been suggested by the communications industry that sufferers have developed this debilitating health condition as a result of a psychosomatic communicated disease, that is, a nocebo effect. This has resulted in marginalising these Australians. However, there is a plethora of evidence that this is a real medical condition with biologically based causes, estimated to affect at least 3% of the population.

The scientific literature on the health effects of electromagnetic fields is highly contested, but groups of scientists who subscribe to the "thermal-only" effects view still dominate positions of power when it comes to establishing safety guidelines. These groups include the International Commission on Non-Ionizing Radiation Protection (ICNIRP), and its analogue in Australia, the Australian Radiation Protection and Nuclear Safety Agency (ARPANSA). Well-published groups of scientists with differing assessments of the existing evidence suggest that the above groups have been captured by the telecommunications industry. Researchers such as Prof. Rodney Croft in Australia are associated with the mainstream position, while others such as Swedish oncologist Prof. Lennart Hardell and US environmental health physician Prof. David Carpenter are associated with the latter group critiquing the official storyline. The assessments by each group are vastly different, constituting a paradigm gulf.

We outline these issues in greater detail in the attachment to this letter and in essence, are requesting that you:

1. Consider policy and action that needs to be taken to address the needs of EHS people as a disadvantaged group, including the establishment of radiofrequency quiet zones, also commonly referred to as "White Zones" in Australia.
2. Establish an independent body to evaluate EMF and EHS issues not wholly aligned with the industry.

We would be happy to meet with you in Canberra or over zoom to discuss this problem.

Yours faithfully



Dr Julie McCredde
(ORSAA President)