

## WHO HANDBOOK:

**“Remember that in most societies, even though it may take a long time, communities ultimately decide what is an acceptable risk, not governmental agencies or corporations”.**

Dear Mr. Du Toit,

I appreciate you taking the time to respond to my email.

My initial correspondence was as a resident living in close proximity to an illegally erected Cell C cellular base station. This has since changed considerably having reached out to and received overwhelming support from various action groups and more significantly, experts in the field of EMR whose opinions I will feature in my response and in the hope that due consideration will be afforded to same.

**1. WHO policy statement:**

“Current scientific research is yet to produce conclusive evidence suggesting adverse health effects associated with, working with or living close to cellular technology.”

**2. DOH policy statement and to quote from your email:**

“The WHO has always and will always base their advice on confirmed scientific research only.” You go on to say “there is no conclusive scientific evidence that the weak RF signals from base stations and wireless networks cause adverse health effects.”

I have to draw your attention to an anomaly. In one paragraph you state “confirmed scientific research” and in another “There is no conclusive evidence etc.”

For the record I believe that the WHO has never stated that their policy is based on ‘confirmed scientific research’ as it would be highly irresponsible to make such a claim in the light of the fact that the introduction of cell-phone technology is relatively new and it will take probably decades of scientific research before such a conclusion can be reached.

**3. When the WHO changed their stance on the smoking of cigarettes:**

After decades of a policy statement along the lines of ‘current scientific research is yet to produce conclusive evidence suggesting adverse health effects associated with smoking’ the WHO was forced to change their policy in 1970 when regulation warnings were issued stating that “The surgeon general has determined that cigarette smoking is dangerous to your health.”

**4. Lloyds of London change their policy:**

**2010:** Lloyds of London took the stance of the DOH to quote “However, due to very long latency times of some cancers (up to thirty years) it is widely agreed that long term studies are required to identify whether longer-term human exposure to mobile phone radiation may pose cancer risk.”

**2015:** Only five years later, Lloyds of London suddenly excludes any liability coverage for health related claims to quote “Directly or indirectly arising out of, resulting from or contributed by electromagnetic fields, electromagnetic radiation, electromagnetism, radio waves or noise”.

**5. Electro-hypersensitivity: a functional impairment due to an inaccessible environment:**

To quote from your response to my email “Chances are that people reporting that they suffer from this condition might well be suffering intolerance to other environmental stimuli as well. It is likely that the origins of IEI-EMF are psychosomatic and in this instance the perception of expected harm is the real driver for the range of physical symptoms experienced by the sufferers.”

To address the above, I have sought and received assistance from Olle Johansson, Associate Professor, The Experimental Dermatology Unit, Department of Neuroscience, Karolinska Institute, Stockholm and Dr. Lauraine M.H. Vivian, Medical Anthropologist, Honorary Research Associate, Paediatric Intensive Care Unit, School of Child and Adolescent Health, Faculty of Health Sciences, University of Cape Town.

To quote from Professor Johansson's 2015 paper on electro-hypersensitivity:

"In Sweden, electro-hypersensitivity is recognised as a functional impairment which implies only the environment as the culprit. The Swedish view provides persons with this impairment a maximal legal protection, it gives them the right to get accessibility measures for free, as well as government subsidies and municipality economic support, and to provide them with special Ombudsmen (at the municipality, the EU, and the UN level, respectively), the right and means to form disability organisations and allow these to be part of national and international counterparts, all with the simple and single aim to allow persons with the functional impairment electro-hypersensitivity to live an equal life in a society based on equality."

Professor Johansson, after considering your comments, concluded that "the DOH is abusing the rights of every Swedish EHS person visiting S.A. and the UN Convention on Human Rights for Persons with Functional Impairments."

Dr. Lauraine M.H. Vivian, living with EHS, is rightfully infuriated by the DOH stance in this regard. She has cited the following for consideration:

- 2014 publication: Vivian, L.M.H. and Johansson, O.: First Officially Recognised Case of the Functional Impairment Electro-hypersensitivity in South Africa. *BMJ Open*;3.8. Impact Factor 16.3 in one of the most prestigious academic medical journals the *BMJ Open* (peer-reviewed) recorded the first case of diagnosed EHS in South Africa.
- In 2015 Lech's case was contested and upheld by the Courts following medical examination and representation of his case by Human rights lawyers from the HR Commission.

## **6. Regulations, Monitoring and Enforcement:**

At an international conference in 2007, Mr. Du Toit you stood alongside WHO EMF Project Director who said that South Africa had regulations, monitoring, and enforcement with regard to health. Mr. Karl Muller, a physicist now residing in Swaziland, challenged this comment and you apparently conceded publicly that there is "no licensing process" with regards to health and masts.

From my experience I can now verify the fact that no monitoring procedure exists, at least within the City of Cape Town. After nearly two years the Cell C illegally erected mast, metres from my property, still transmits as, according to a senior City official, there isn't the staff to monitor same!

## **7. WHO encourages community participation:**

Non-existent within the City of Cape Town.

## **8. EMR : DOH stance on acceptable levels and the facts:**

Refer Point 6: Most residents (a) can make little sense of the appropriate readings as prescribed by the DOH and (b) as in my case when challenged, the City despatched two young gentlemen from 'Noise Pollution' to conduct same. I was refused access to the actual readings receiving only an email assuring me that all was in accordance with the WHO policy guidelines.

Mr. Dave Miles has a business that also conducts readings and he is often called upon to do so from concerned residents. He has found readings to exceed the recommended limits as advised by the

Austrian Medical Association (document available on request) and exceed the levels that according to British standards would be unacceptable for electro-sensitive persons.

Dave Miles has also confirmed that in the United Kingdom there are National Health (NHS) doctors who recognise EHS as a medical condition and who diagnose and treat EHS patients.

**9. DOH lack of policy guidelines has opened the door to abuse by the cell-phone industry:**

The Industry must be applauding the DOH's stance, which has emboldened them to not even bother to follow 'due process' anymore and has resulted in the proliferation of masts in residential areas, many illegal.

From my personal experience I can state emphatically that the many City officials I have corresponded with appear to be aiding and abetting this corrupt behaviour.

**10. The Bill of Rights of the South African Constitution provides special protection for children:**

To quote "A child's best interests are of paramount importance in every matter concerning the child".

Children cannot make safety oversight for themselves, nor self-advocate. The 'Precautionary Principle' states that when there are indications of possible adverse effects, though they remain uncertain, the risks from doing nothing may be far greater than the risks of taking action. This principle shifts the burden of proof from those suspecting a risk to those who discount it.

**11. The DOH has a responsibility to uphold our constitutional rights:**

- *As the guardians of our health and well-being, we respectfully ask that the DOH take a precautionary approach by imposing stricter guidelines:*
  - (a): That the WHO policy is upheld and there is public participation prior to the consideration of applications.
  - (b): That the erection of cellular base stations be restricted to Industrial/commercial sites and open spaces.
  - (c): That people with EHS are recognised and given due consideration.
  - (d): That the DOH embarks on a vigorous educational program warning the population of the potential risks associated with cell-phones (particularly when concealed on the body) and given to young children.
  - (e): That educational facilities, in particular schools, be encouraged to replace wireless technology (WiFi) with connected alternatives.

In closing, Mr. Du Toit I implore you to consider what I have written as, after fourteen years I believe, a change in the DOH's policy is desperately sought and you have the mandate to do so.

*To err on the RIGHT side could potentially save millions of lives in the years to come, to err on the WRONG side could have catastrophic implications and the choice you make today, will ultimately be your legacy.*

I do thank you sincerely for your assistance.

Upon receipt of your response, it is my intention to call for a meeting with Premier Zille with hopefully yourself and the M.E.C. for Health in attendance. I will have the support of the people relevant to this discourse.

Sincerely,

Denise (Rowland)

28 June 2016