



July 5, 2017

Superintendent Michelle King
Los Angeles Unified School District
333 South Beaudry Avenue
Los Angeles CA 90017-1466

Re: Americans with Disabilities Act Title II Evaluation of Electromagnetic Sensitivities (EHS) & Accommodations

Dear Superintendent King:

I am writing on behalf of known and anticipated cases of EHS or electromagnetic sensitivities at LAUSD.

The U.S. military has, for decades, referred to this symptomatology as Microwave Sickness or Radiation Sickness. In 1976 the U.S. Army Medical Intelligence and Office of the Surgeon General analyzed science from the Eurasian Communist Countries; this valuable document describes varying degrees of the constellation of symptoms that have come to be known as EHS or Electrosensitivity (attached). The Soviets have always been ahead of the U.S. in testing and raising concerns about the unchecked proliferation of RF radiation among the general population. Some of the science reviewed in this report formed the basis for their warning to the U.S. decades ago. That warning was ignored.

In 1994 Rome Laboratory at Griffiss Air Force Base in New York did a review of Radiofrequency/Microwave Radiation Biological Effects and Safety Standards (attached). Perhaps the single most relevant sentence to a discussion of EHS in that detailed review is found on the first page: **“It is known that electromagnetic radiation has a biological effect on human tissue.”**

I would urge you to consider these two military documents before giving any credence to Wi-Fi proponents who suggest the following symptoms are “all in the heads” of those who claim to feel unwell in the presence of not only Wi-Fi, but also smart phones carried by most students, as well as cell towers that are about to increase exponentially with SB 649 currently under consideration in the California Assembly.

EHS symptoms include but are not limited to:

- Sleep disturbances
- Tinnitus
- Extreme fatigue
- Headaches
- Inability to concentration
- Memory difficulties
- Learning and attention deficit disorders
- Immune system problems
- Heart palpitations and arrhythmia
- Joint pain
- Vision problems
- Rashes
- Cancer

In 2002, a survey of 2,072 people in California found that the incidence of self-reported electromagnetic hypersensitivity within the sample group was 3% (95% CI 2.8–3.68%), with electromagnetic hypersensitivity being defined as "being allergic or very sensitive to getting near electrical appliances, computers, or power lines" (response rate 58.3%). This survey was detailed in "Study of self-reported hypersensitivity to electromagnetic fields in California". Environ Health Perspect. 110 (Suppl 4): 619–23.Levallois, P; R Neutra; G Lee; L Hristova (August 2002).

Because 2G, or Second Generation, infrastructure and electronic devices were in use at that time, and we are now witnessing the anticipated passage of legislation allowing 5G infrastructure to be placed throughout California, the burden on our immune systems and Central Nervous Systems is arguably even more onerous in 2017. This burden has been compounded by smart phones with four internal antennas in each phone and Wi-Fi is used in a large number of environments including LAUSD. It is logical to assume the percentage of self-reported neurological and immunological symptoms related to exposure to electromagnetic fields is higher than the 3% reported in 2002.

UK-based EM Radiation Research Trust currently estimated that between 2.5% and 8% of the population could have this condition (EM Radiation Research Trust 2015).

Additionally, many people – including students, teachers and administrators – are experiencing symptoms which they may not attribute to RF (wireless) radiation from Wi-Fi, routers, cell phones, smart meters and cell towers simply due to lack of awareness of the causal link.

Why are so many people unaware of the causal link between wireless exposure and neurological and immunological symptoms? Perhaps the best way to explain this lack of information being disseminated to the public, including schools, is through a very brief story. It's a true story, of course, and it involves the California Department of Public Health (CDPH).

Around 2009 the CDPH started researching the science regarding potential cell phones risks. They decided to come up with a helpful warning guide for consumers. This bulletin went through multiple drafts, and was finally deemed worthy of release. Yet instead of being posted on the CDPH website, and distributed to schools such as LAUSD, the bulletin was suppressed.

Dr. Joel Moskowitz, Director and Principal Investigator at UC Berkeley's School of Public Health's Center for Family and Community Health, learned of the bulletin's existence. Moskowitz officially requested a copy, and was denied – repeatedly. He sued the California Department of Public Health for failing to provide a taxpayer funded study on cell phone radiation risks. Dr. Moskowitz prevailed in court.

In court documents the CDPH claimed they did not want to release the bulletin for fear its release could lead to “chaos and confusion” among the public. The CDPH also claimed the telecommunications industry was part of the public the CDPH served, and they did not believe the telecom industry would want the release of this bulletin. Both claims give one pause, though for slightly different reasons.

The bottom line is that LAUSD was not informed by the CDPH there is a risk from cell phones, parents were not informed, and even though Dr. Moskowitz won the lawsuit, the judge ruled the bulletin must be released to him but did not specify the bulletin's release to the public. One might assume this public release would be a foregone conclusion. It was not. The CDPH, which should be assisting LAUSD parents as well as parents and schools throughout California on this thorny issue of just what EMFs can do to their children, did not even post the bulletin on their website. Therefore I am making it available to you, Superintendent King, through the following link: [CDPH cell phone document April 2014](#).

Of special note is the following paragraph about EMFs penetrating children's brains:

What About Cell Phone EMFs and Children?: EMFs can pass deeper into a child's brain than an adult's. Also, the brain is still developing through the teen years, which may make children and teens more sensitive to EMF exposures. For these reasons, parents may want to limit their child's cell phone use to texting, important calls, and emergencies. Pregnant women, children, and teens can also follow the tips for reducing exposure listed above.

If LAUSD had known this from California's Department of Health, would you have gone ahead with Wi-Fi in your schools? Wired classrooms are far safer for all. Wired computers provide the access and benefit plus added security without the risks. Yet now that LAUSD has converted to Wi-Fi in your classrooms, the only choice for the immediate future must be a full and complete accommodation for those who suffer from EHS symptoms.

What the CDPH bulletin is saying about children's and teen's brains is critically important. The brains of children and teens are more vulnerable to EMFs, and it is from the brain that the majority of the symptoms I listed on the second page of this letter originate. The radiation from Wi-Fi is the same type of radiation that the CDPH is addressing in this caution regarding cell phones, recently released under court order to UC Berkeley's Dr. Joel Moskowitz.

Above all else, it should be recognized **The United States Access Board acknowledges the need for accommodation for those who have acquired electromagnetic sensitivity.** <https://www.access-board.gov/research/completed-research/indoor-environmental-quality/introduction>

The U.S. Access Board is a federal agency that promotes equality for people with disabilities. The Board states on their website under **IEQ Indoor Environmental Quality Project**: "**The Board recognizes that multiple chemical sensitivities and electromagnetic sensitivities may be considered disabilities under the ADA if they so severely impair the neurological, respiratory or other functions of an individual that it substantially limits one or more of the individual's major life activities. The Board plans to closely examine the needs of this population, and undertake activities that address accessibility issues for these individuals.**"

The Access Board further addresses Electrosensitivity on their website:

Operations and Maintenance

Introduction & Overview Problem Summary

The operation and maintenance of commercial and public buildings can affect their accessibility for people with asthma and multiple chemical and/or electromagnetic sensitivities.

The presence of electromagnetic fields from office equipment and other sources is a barrier for those with electromagnetic sensitivities. Noise and vibration can adversely affect some people with chemical and/or electromagnetic sensitivities and trigger seizures in susceptible individuals.

Electromagnetic Fields

For people who are electromagnetically sensitive, the presence of cell phones and towers, portable telephones, computers, fluorescent lighting, unshielded transformers and wiring, battery re-chargers, wireless devices, security and scanning equipment, microwave ovens, electric ranges and numerous other electrical appliances can make a building inaccessible.

The National Institute for Occupational Safety and Health (NIOSH) notes that scientific studies have raised questions about the possible health effects of EMF's. NIOSH recommends the following measures for those wanting to reduce EMF exposure—informing workers and employers about possible hazards of magnetic fields, increasing workers' distance from EMF sources, using low-EMF designs wherever possible (e.g., for layout of office power supplies), and reducing EMF exposure times (11).

In reviewing your draft of the LAUSD plan to accommodate students, staff and administration at LAUSD, I see that you do not directly address EHS or electromagnetic sensitivity. In keeping with The Access Board recommendations, LAUSD could include EHS and describe and even expand the accommodations you are presently making to some teachers and students in your final document aimed at addressing disabilities in LAUSD.

You offer an outline for your school district's approach to addressing disabilities by noting there are three critical components to the District's plan:

1) Conducting facility surveys, identifying betterments to be made at each facility according to the category into which they are placed, and making those improvements

2) Effectively reassigning programs and activities to accessible locations when necessary, or quickly making necessary changes to inaccessible facilities as needed

3) Implementing supportive policies, procedures, and training to support these efforts

An EHS survey of all staff and the student body, guided by an independent expert in EHS, would allow LAUSD to assess the magnitude of your EHS population within the school district. It is a logical place to start, and necessary considering the failure-to-disclose by the CDPH whose role is to protect the population through information and actions.

I am grateful for the opportunity to address this issue thanks to The Americans with Disabilities Act Title II regulations requiring public school districts to accept comments from interested persons, including individuals with disabilities or organizations representing them.

Respectfully,

Susan Foster

Susan Foster
Medical Writer
US Adviser, Radiation Research Trust
Honorary Firefighter, San Diego Fire Department
Rancho Santa Fe, CA 92091
susan.foster04@gmail.com

Cc: Gov. Jerry Brown
Lt. Gov. Gavin Newsom
Karen Smith, MD, MPH, Director CDPH
Joel Moskowitz, PhD, UC Berkeley School of Public Health
Cindy Sage, MA, Sage Associates
Eileen O'Connor, Director, Radiation Research Trust
Erica Mallery-Blythe, MD, Medical Adviser, RRT
Assemblymember Sebastian Ridley-Thomas
Assemblymember Anna M. Caballero
Ellie Marks, Director, California Brain Tumor Association