



SAFER (EMR) TECHNOLOGY Aotearoa – New Zealand



WIRED - Newsletter #7 Summer 2022

Kia ora & Welcome

The focus of the STANZ summer 2022 newsletter is primarily focussed on providing an overview of some of the latest research on Electro-hypersensitivity (EHS). Recently, some research on EHS has drifted into the idea of *nocebo* being the cause of EHS, which has led to some government departments being quick to parrot this line. However, in our opinion the *nocebo* concept as an explanation for EHS does not stack up in the real world. The first article is by our own Anne Gastinger who has been doing research with EHS sensitive people in NZ and her report makes for very interesting reading.

The next article is by Dr Dariusz Leszczynski on his research into EHS. The opinion that there is no causality link between EHS and EMF is unproven according to Dr. Leszczynski. In his opinion, the support expressed for this idea of there being no link between EHS and EMF by the World Health Organization EMF Project, the International Commission on Non-Ionizing Radiation Protection, International Committee on Electromagnetic Safety and numerous governmental organizations, should be revised because the scientific research data is of insufficient quality to be used as a proof of the lack of causality. In his opinion research should focus on finding suitable biochemical and biophysical markers that could be used, in combination with single-individual-focused provocation studies, to determine the sources of the EHS symptoms.

Clearly this debate has a long way to go and the first section provides for some key insights into the topic of EHS.

The second section provides details on how to become a member of STANZ and how to link up with STANZ via social media. While the third section provides some interesting reading particularly on how 5G is being promoted as helping to save the environment when this is really just fake greenwashing. There is also a link to Arthur Firstenberg's latest newsletter showing that over the past two years the number of EMF emitting satellites circling the earth has increased from 2,000 to 4,800, and a flood of new projects has brought the number of operating, approved, and proposed satellites for Low Earth Orbit to at least 441,449.

2022 will be another challenging year for civil society groups like STANZ with the governments traffic lights system of segregation and discouragement of people freely meeting severely hampering our ability to engage with society on the urgent need for safer EMR technology for all. However, the process of training for and utilising the Anritsu EMF meter is beginning with the appointment of a suitably qualified individual to manage its use. While progress may be slower than we would like we are making progress and hope you will join with us in the endeavour to make Aotearoa/New Zealand EMR safe for all.

1. Initial Report on Electro-hypersensitivity in Aotearoa New Zealand

The fact that we have people in Aotearoa-New Zealand suffering from Electro-hypersensitivity (EHS) – an intolerance to non-ionising electro-magnetic frequencies at levels regulatory bodies deem safe is a key concern for STANZ. The experiences of sufferers like *Daryl who developed Electro-hypersensitivity as a consequence of exposure to radio frequency radiation (RFR) emitting devices is not well understood or accepted in Aotearoa. “Daryl, then 19 began a sales job in Wellington, working lengthy hours daily using his cell phone. Before long he started experiencing increasing incidents of headaches and dizziness. After six months, Daryl’s deteriorating health symptoms escalated into blackouts. With no medical explanation, yet too sick to continue working, Daryl left his job. From that time the blackouts ceased, but his other health problems (caused by the initial RFR injury) persist. (Full article 'Totally Wired', Organic NZ, March/April 2018)

Another sufferer, *Alice is a mother of two pre-school aged children who like most mothers of young children has to juggle many tasks during the course of each day. However, Alice suffers from electro hypersensitivity which compromises not only her own quality of life, but also impacts on her family. Alice's condition developed gradually as a result of occupational exposure to digital wireless technologies.

When Alice was in her mid 30's she purchased her first cell phone. When she had it in her pocket or used it for any length of time she noticed a burning sensation in her legs. Although Alice kept her cell phone use to a minimum she began to experience 'burning sensations at her workplace when she was close to electronic equipment. I always did my software work on a personal computer”.

During this time Alice and her partner wanted to start a family. In 2008 Alice suffered a number of miscarriages. She connects her two successful pregnancies with the fact that she conceived while on holiday – away from the office and cell phones. Managing her workspace and keeping her electro- magnetic field exposure to the lowest possible load meant Alice was initially able to continue working...For Alice the introduction of stronger wireless technology was the tipping point which pushed her over the edge into electro-hypersensitivity syndrome...At work Alice was encircled in a wifi activated environment, with many of the staff using smart phones, all of which were signalling for wifi networks.

Alice's symptoms increased. “I couldn't concentrate: I was shaky, itchy, scratching myself.” In the evenings after work her symptoms would slowly abate, only to return once back at the office...Alice resigned from her job and could no longer attend her daughter's kindergarten or enjoy the use of public facilities such as libraries, cafes or malls where wireless networks were operating. Flight travel is problematic for the same reason...worst of all is the ill health she suffers as a result of neighbour's wifi which emits signals through her own home. Along with physical symptoms Alice has developed loss of concentration, memory loss, depression and anxiety...She finds that “since I have made contact with people who have the same experiences ...this has helped me to know that this is a real condition, albeit with more recognition overseas.” (full transcript -Electro hypersensitivity – A new environmental impairment Issue 8 Feb- May6 2013 The NZ Journal of Natural Medicine).

The objective of the survey we are piloting is to gather data about the daily situations EHS sufferers face. This group need to avoid exposure to radio frequency radiation emitted by

wireless technologies like wifi, smart meters, cell phones and cell towers in order to stay well. The difficulty is these technologies are ubiquitous in all spheres of public life. Access to critical facilities such as medical, educational and elder care are no longer possible due to the proliferation of wifi. It is deeply concerning and a further cause of harm to sufferers mental health that medical authorities, governmental bodies and the telecommunication Industry tend to favour the view of of psychosomatic causation to explain their symptoms.

A small subgroup of our committee have surveyed as many New Zealand/Aotearoa EHS sufferers as possible who were willing to share their experience.

In order to reach this subset of individuals we approached medical doctors throughout Aotearoa/NZ who were known to treat people with environmental intolerances asking they inform their patients of our survey. We asked that they forward our survey to other health practitioners working in this field. We also contacted Integrative health practitioner networks and allied wholistic health practitioners for their assistance in reaching out to EHS sufferers. We also approached EHS Facebook group convenors, editors working in environmental health areas, Building biologists working in emf remediation and such like asking that they post an advertisement about our survey on their social media sites and that they forward our survey questionnaire onto clients with this condition for their consideration. Additionally, we directly approached contacts known to suffer this condition and asked they forward the survey to other suitable candidates.

Of those contacted 26 were willing to complete our confidential pilot survey. The questionnaire we disseminated was an online survey. Printed questionnaires were available to those unable to access digital technology.

The results from our survey constitute our initial report and will not be published as it is a pilot survey. Instead after reviewing the survey a new round of invitations will be disseminated for the final survey.

Elements of the questionnaire touched on:

Age: All respondents were adults, half of which were aged between 40 – 60.

Gender: The majority were female

Onset of disease: The majority saw a gradual onset of this disease over years with a minority experiencing a sudden onset of the condition.

Causes: Most sited occupational exposures to electromagnetic fields from the likes of High Voltage power lines, work exposure to wifi, regular cellphone use or living close by cell Towers.

[not their real names]*

Author: Anne Gastinger

The rest of the article can be found on our website:

<https://www.safertechnology.co.nz/2022/01/04/initial-report-on-electro-hypersensitivity-in-aotearoa-new-zealand/>

Are your symptoms caused by your wireless devices?

Common symptoms of Microwave Sickness/Electro-Sensitivity

Brain

Headaches
Insomnia/Sleep Problems
Dizziness
Difficulty Concentrating
Memory Problems
Brain Fog
Fatigue

Ears

Tinnitus
Humming
Sharp Pain
Noise Sensitivity

Skin

Skin Rash
Itching
Burning
Facial Flushing

Mood

Irritability
Depression
Anxiety

Eye

Pressure In/Behind Eyes
Eye Twitching
Deteriorating Vision
Vision Disturbances
Cataract

Heart

Palpitations
Arrhythmia
Chest Pain/Pressure
Difficulty Breathing
Low/High Blood Pressure

Other

Adrenal Problems
Digestive Problems
Weight Loss/Gain
Tingling
Dehydration
Hair Loss
Flu Like Symptoms
Attention/Behavioral Issues

More information at
www.WeAreTheEvidence.org



Microwave Sickness is likely the most immediate and widespread manifestation of the adverse health effects from radiation emitted from wireless devices and infrastructure. At least 10% of the population has already developed symptoms. The rates are likely higher.

1.2 Review of the scientific evidence on the individual sensitivity to electromagnetic fields (EHS) by Dr. Dariusz Leszczynski.

Abstract

Part of the population considers themselves as sensitive to the man-made electromagnetic radiation (EMF) emitted by powerlines, electric wiring, electric home appliance and the wireless communication devices and networks. Sensitivity is characterized by a broad variety of non-specific symptoms that the sensitive people claim to experience when exposed to EMF. While the experienced symptoms are currently considered as a real life impairment, the factor causing these symptoms remains unclear.

So far, scientists were unable to find causality link between symptoms experienced by sensitive persons and the exposures to EMF. However, as presented in this review, the executed to-date scientific studies, examining sensitivity to EMF, are of poor quality to find the link between EMF exposures and sensitivity symptoms of some people. It is logical to consider that the sensitivity to EMF exists but the scientific methodology used to find it is of insufficient quality. It is time to drop out psychology driven provocation studies that ask about feelings-based non-specific symptoms experienced by volunteers under EMF exposure.

Such research approach produces only subjective and therefore highly unreliable data that is insufficient to prove, or to disprove, causality link between EHS and EMF. There is a need for a new direction in studying sensitivity to EMF. The basis for it is the notion of a commonly known phenomenon of individual sensitivity, where individuals' responses to EMF depend on the genetic and epigenetic properties of the individual. It is proposed here that new studies, combining provocation approach, where volunteers are exposed to EMF, and high-throughput technologies of transcriptomics and proteomics are used to generate objective data, detecting molecular level biochemical responses of human body to EMF.

Introduction

Phenomenon of sensitivity to electromagnetic radiation, like radiation emitted by e.g. electric wiring, electric appliances, power lines, wireless communication devices and networks, is commonly, and historically, known as electromagnetic (hyper)-sensitivity (EHS) or, with its newer scientific term, idiopathic environmental intolerance attributed to electromagnetic fields (IEI-EMF).

Persons claiming to be EHS are commonly more concerned with the exposures to radiation emitted by base stations and Wi-Fi devices because the radiation exposure is involuntary, not possible to regulate by the unwillingly exposed person and it is continuous in the environment, lasting 24/7. Exposures of the EHS persons to cell phone handsets are often, mistakenly, of lesser concern to EHS persons because the user can decide how and when the radiation-emitting phone handset is used. The scientifically correct argument that the majority of radiation exposure received by the people comes from the phone handset is often mistakenly overlooked. Scientific research of EHS consists of three types of studies:

Survey studies, where examined persons are not exposed experimentally to EMF. Surveys examine the prevalence of the self-diagnosed EHS persons in the whole population and attempts to determine whether there is any link between EHS symptoms and the environmental or personal exposures to various sources of EMF.

Provocation studies, where the self-diagnosed EHS or control volunteers are experimentally exposed to a single particular type of EMF, at well-known and monitored quantity. During or soon after the end of exposure the study subjects are being asked whether they feel any of the EHS symptoms to be induced during experimental exposure or sham exposure and whether they are able to recognize when the radiation source is emitting EMF and when it is not.

Biochemical and physiological studies, are looking for biochemical markers of EHS that are expressed in self-diagnosed EHS persons. The markers, selected for examination, are known to be likely associated with the symptoms in self-diagnosed EHS persons. Currently, in the biochemical studies, the examined self-diagnosed EHS persons are not exposed experimentally to EMF, but they provide scientists with detailed information on what kind of EMF sources they believe cause their symptoms and what kind of physiological symptoms. Researchers in such studies attempt to determine whether any particular biochemical marker is expressed more or less prominently in the self-diagnosed EHS persons.

The above listed three types of studies have one overarching problem that is not addressed at all in EHS research. It is that the researchers analyze solely effects of exposures to EMF and do not address simultaneously occurring in real life exposures to other environmental pollutants, e.g. chemicals, particulate matter, radiations other than EMF. These environmental pollutants might act in concert with the EMF exposures what might lead in some cases to additive or even synergistic effects.

This review summarizes results of the to-date performed research on EHS, critically analyzes the obtained data and suggests the future directions for research.

Full article here:

<https://www.safertechnology.co.nz/2022/01/05/review-of-the-scientific-evidence-on-the-individual-sensitivity-to-electromagnetic-fields-ehs-2/>

1.3 ‘Proof of EHS beyond all reasonable doubt’. Comment on: Leszczynski D. Review of the scientific evidence on the individual sensitivity to electromagnetic fields (EHS).

Leszczynski’s review [mentioned above] included two important conclusions. Firstly, the need for the WHO, ICNIRP, ICES and governmental organisations to revise their denial of the link between EHS and electromagnetic fields (EMFs) because the data is of insufficient quality for proof of the lack of causality. Secondly, instead of studying a placebo effect, research should focus on finding “suitable biochemical and biophysical markers” for symptoms in each EHS individual.

However, the review also stated that “So far, scientists were unable to find causality link between symptoms experienced by sensitive persons and the exposures to EMF”. This comprehensive assertion does not seem to reflect all the scientific evidence.

The criteria for proof, here onwards defined as beyond all reasonable doubt, differ between causality for an environmental intolerance (EI), such as EHS, and causality for a bacterial or viral disease. For the latter, there is usually a cellular organism or virion. For an EI, there can be several triggers and pathways affecting many organs, tissues and cells. EI can also be caused by genetics and viruses.

Proof of causality for an EI necessarily depends, as for any cause, on sequential temporality. This temporal sequence is usually evident in a repeatable physiological symptom(s) or change(s) often measurable by an objective marker(s). However, each individual may react differently to a given environmental stimulus. Scientific proof of health causality usually also requires a known mechanism. In the case of an electromagnetic EI such as sunburn or skin cancer from sunshine, individual differences have long been known, while a mechanism in the form of a genetic defect in DNA repair was discovered in 1968.

For EHS, another electromagnetic EI, differences in individuals' symptoms from man-made EMFs have been known since 1733. In 2008 the first genetic variant associated with EMF sensitivity was discovered, the XRCC1 Ex9+16A allele, a DNA repair polymorphism, linked with childhood leukaemia near substations and powerlines [2]. In 2014 it was reported that people with EHS were 9.7 times more likely to have GSTM1 + GSTT1 null genotypes [3], indicating a susceptibility to oxidative stress. This genetic variation can also increase the risk of multiple sclerosis, some cancers, Alzheimer's and asthma, each sometimes associated with EHS. Such genetic variants seem more common at higher than lower latitudes and in women than men, with others associated with higher levels of mercury. EHS symptoms are also associated with some demyelinating neurodegenerative conditions.

A causal link between electrosensitive symptoms and EMF exposures has also been proved for other mechanistic pathways in addition to genetic. Calcium flux through membrane depolarisation was discovered in 1974, involving the radical pair mechanism at ELF up to MHz, as in modulated cell phone signals. Unmodulated GHz radiofrequency can generate oxidative stress and may act through ferritin, calcium spikes or water modification, but further proof is needed. Other pathways include cryptochromes [4]. Such EMF sensitivity occurs in 100% of people subliminally, and in 30% consciously [5]. Hypersensitivity is associated with the 1.2% severely disabled by EMFs.

Further proof of EMF causality for EHS symptoms includes the 20% of subjects known since 1998 to suffer electrosensitivity symptoms during Transcranial Magnetic Stimulation. Likewise, walking fast through magnetic fields near MRI scanners can induce electric currents causing specific EHS symptoms, with a small hypersensitive subset. Similarly, some people are sensitive to geomagnetic disturbances and thunderstorms [7].

Clinical evidence also contributes to proof of EHS. Specific EHS symptoms were identified from 1932 in Eastern Europe and the USSR, usually among people occupationally exposed, such as radar, radio or electricity workers. As EHS spread into the general population with the use of cell phones, Wi-Fi and smart metres, specialist EHS centres assessed greater numbers, such as Professor Dominique Belpomme's in Paris. In 2015 he published the first comprehensive study of objective molecular biomarkers including cerebral blood perfusion scans, showing that EHS is a multi-systemic EI like chemical sensitivity. In 2021 Belpomme led 32 international experts requesting that the WHO acknowledges EHS as a distinct neuropathological disorder and includes it in its International Classification of Diseases [8]. In 2017 Dr Gunnar Heuser published evidence from fMRI scans of brain effects [9].

Full article here:

<https://www.safertechnology.co.nz/2021/08/14/proof-of-ehs-beyond-all-reasonable-doubt-comment-on-leszczynski-d-review-of-the-scientific-evidence-on-the-individual-sensitivity-to-electromagnetic-fields-ehs/>

1.4 Electromagnetic Hypersensitivity

Can people really become hypersensitive to electromagnetic exposures? Yes, they can, says Professor Dominique Belpomme and team, writing in the *International Journal of Molecular Sciences*. They believe electromagnetic hypersensitivity (EHS) is a real and verifiable condition and should be acknowledged as such. The authors point out that there is adequate clinical evidence to establish that EHS is ‘a distinct neuropathological disorder’ and they want to see it classified in the WHO International Classification of Diseases.

By clinical research, they mean biological markers that can be objectively observed and measured in patients. ‘These have now been shown to primarily involve low-grade inflammation, oxidative/nitrosative stress and, consequently, blood-brain barrier opening,’ they say. Clinical evidence is commonly used to diagnose diseases like cancer, diabetes type 2, cardiac problems and Alzheimer’s Disease, for example. Belpomme points out that, while clinical research describes a condition, it doesn’t prove what causes it. Take cancer, for example. Laboratory tests define it, whereas it’s the population studies that show it’s linked with smoking, asbestos and so on.

In the case of EHS, early research looked for a link between exposure and symptoms to determine whether the one caused the other. It wasn’t always successful and that led some critics to conclude that EHS isn’t real. Belpomme points out the problems with that sort of logic. ‘EHS first should have been objectively defined as a distinct pathological disorder thanks to the use of critical and rigorous methods of clinical research rather than attempting to search for EMF-related causality before EHS was objectively defined.’

Rest of Article here:

<https://www.safertechnology.co.nz/2021/11/27/electromagnetic-hypersensitivity/>

1.5 Is the WHO impaired by electro-smog?

While 5G technology is deployed worldwide, ICNIRP’s lack of concern for non-thermal biological effects over decades demonstrates arrogance and incompetence. The potential harmful effects of radiation from mobile networks cannot be reduced by engineers to frequency and average intensity. To evaluate and mitigate EMR exposure’s impacts to health and wildlife, we need comprehensive scientific study with due diligence, humility and caution. We need signed reports from professional engineers who hold liability that 5G’s hazards have been evaluated and mitigated before any more new equipment is commercially used.

The new 5G radiation measurements in Switzerland failed to justify revising exposure limits for 5G networks. The commercial 5G network shows exposure of no more than 1.33 volt-per-metre (V/m) in the worst-case outdoor location. Even beyond stricter Swiss regulations, 5G antennas would, at their maximum power, combined with 2-3-4G, expose the environment to 5 V/m. Five volt-per-metre (eventually expected from 5G antennas) is an alarming level of radiation for living creatures. It’s 600 times the Council of Europe’s recommendation, and 20,000 times greater than the Bioinitiative’s.

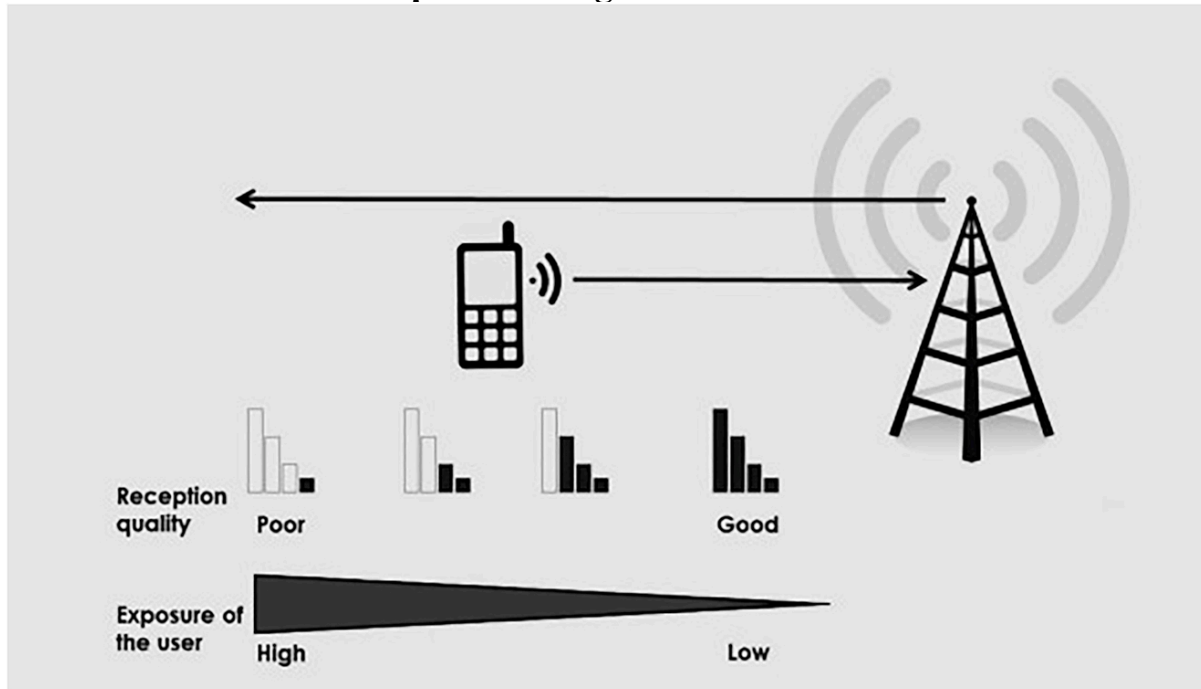
Here, I must ask: why do some governments—including my own, in Brussels—insist on raising radiation emission limits even more (to 22 V/m and eventually ICNIRP’s 61 V/m)? What would this new level of freedom granted to mobile operators mean for the environment and the public? How will billions of new Internet-of-Things wireless devices increase our

environment's radiation levels? How do we assess the collateral costs of long-term EMR exposure from multiple sources on large populations? Who will pay for damages?

Full article here:

<https://www.safertechnology.co.nz/2022/01/05/is-the-who-impaired-by-electro-smog/>

Base Station RF-EMF Exposure Danger



There is a correlation between the distance of the mobile phone user from the base station and the quality of reception and the level of radiation emitted by the mobile phone. The farther user is from the base station, the more radiation is emitted by mobile phone and exposure of the user to RF-EMF increases. Users in close proximity to base stations are less exposed than the users located far from the base station.

2. Become a Member of STANZ

If you support the strategic direction STANZ is taking, then please consider becoming a member and making a donation. You can apply to become a member through our website: <https://www.safertechnology.co.nz/become-a-member/>

As a current paid up member you are entitled to have access to our Vimeo account which has all the scientific talks from these two conferences by experts in their fields:

- *EMF Medical Conference and Pre-Conference Video Recordings 2021: Prevention, Diagnosis and Treatment of EMF Associated Illness*
- *British Society for Ecological Medicine: 5G Health – The Facts, the Risks and the Remedies (2019)*

As a paid up member you can contact us via email to get the login details to have access to these videos at: safertechnz@protonmail.com

Donate to STANZ

STANZ has a Kiwibank account into which you can donate money here:
38-9022-0681928-00

STANZ Facebook Address:

<https://www.facebook.com/SaferTechNZ>

2.1 STANZ Needs a New Treasurer

There is currently a position open on the STANZ Committee for the Treasurer of the organisation. If you would like to volunteer to take on the work of Treasurer, then let us know via email and we can discuss it further: safertechnz@protonmail.com

STANZ WEBSITE

www.safertechnology.co.nz

3. RECENT NEWS

3.1 5G's Environmental Paradox in the Hyperconnected Era

In order to sustain itself and thrive, the mobile industry needs new markets¹. Promoting 5G, the fifth generation of wireless technology, is one current focus for development. Consumers now expect mobile phone and Internet service everywhere, 24/7. The industry claims that 5G will pave broadband highways for our ever-increasing data traffic at faster speed. It claims that 5G will reduce carbon emissions. Are these claims true? Before we deploy 5G, don't we need to evaluate its environmental footprint and sustainability with due diligence?

Let's get simple: Who will pay for the new power plants that will feed 5G-era networks and data centres? Who will pay the energy bills? Will consumers who are perfectly happy with 4G pay for 5G's energy bill? It would be very naïve to expect infrastructure manufacturers or operators to absorb 5G's huge energy costs and not charge end-users. I also can't figure out why the industry would want 5G public networks. Private networks would provide security.

Last, how can we allow large-scale 5G deployments when so many nations have committed to reducing greenhouse gas emissions dramatically? How can EU and US policies ignore the rebound effect of deploying 5G? Why would our policies blindly support the telecom industry's agenda and ignore that 5G's deployment increases energy and resource consumption?

Full article here:

<https://www.safertechnology.co.nz/2022/01/05/5gs-environmental-paradox-in-the-hyperconnected-era/>

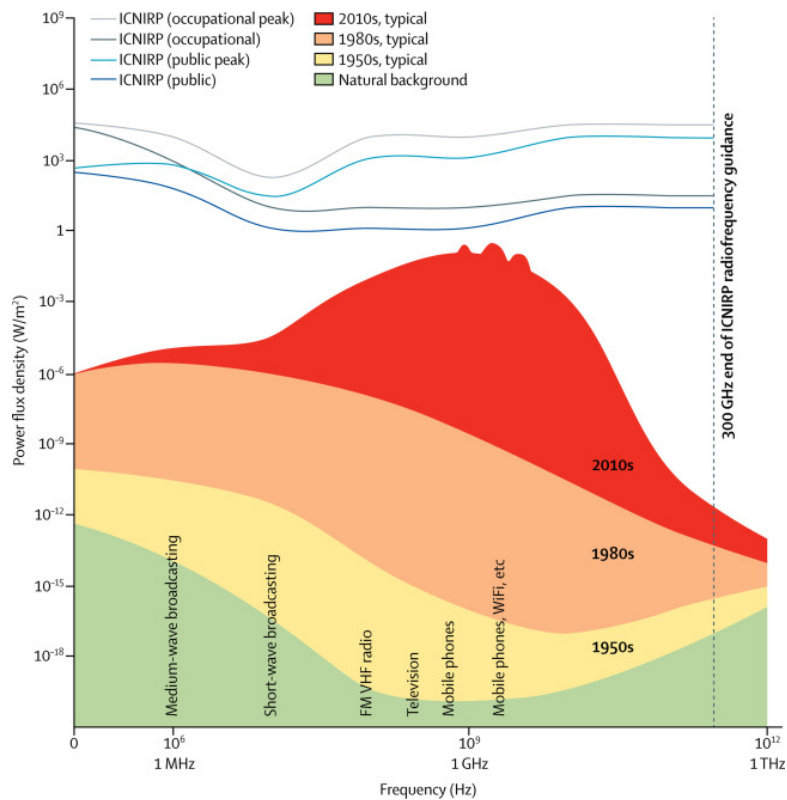
3.2 5G Threats to Wildlife - A letter to Greta Thunberg: is 5G an experiment on life?

I am an engineer, not a biologist. Yet, I realize wildlife and biodiversity are the Earth's greatest treasures and need to be protected. In previous letters, I discussed large-scale 5G networks' energy consumption and climate impacts. I proposed more sustainable alternatives to 5G public networks. Today, I will report how 5G threatens ecosystems and biodiversity.

Every time I look into my telescope to gaze at Venus, Mars, Jupiter or Saturn, I realize our planet's uniqueness. The Earth provides conditions necessary to create and sustain life: water, the atmosphere, soil, and liveable temperatures. Since the Earth's creation billions of years ago, natural sources of electromagnetic energy from the sun and lightnings and the Earth's magnetic field have bathed our planet. Over billions of years, life slowly evolved in relation to electromagnetic fields (EMFs). Living beings are affected by EMFs, including us, humans. We use EMFs for communication between our body cells. Science is only starting to discover the numerous roles of electric, magnetic and electromagnetic fields in biology.

Thousands of high-quality peer-reviewed scientific studies have reported adverse biological effects caused by man-made EMFs. Wireless technologies deployed in the last decades have added ever-increasing levels of EMFs to our environment. It compares natural levels of EMFs (green area) with man-made sources since the 1950s.

The red peak is caused by recent wireless communications technologies such as DECT cordless phones, Wi-Fi, Bluetooth, 2G, 3G and 4G. These technologies generate both the highest EMF exposure levels among all frequencies, and the highest increase compared to natural levels. Electrosmog generated by wireless technologies is already 1,000,000,000,000,000,000 times natural levels. 5G will add an additional layer of radiation.



The diagram (above) shows the Natural levels of EMFs (green area) compared with man-made sources since the 1950s © The Lancet.

Rest of Article here:

<https://www.safertechnology.co.nz/2022/01/05/5gs-threats-to-wildlife/>

3.3 Something Is In The Air - The Cell Phone Radiation Documentary

Is radiation from your cell phone or cell towers harmful for your health? Or the environment? The scientific debate is on-going. Are scientific conclusions tied to the interests of those who fund the studies? How do governments make sure the radiation stays within healthy limits? What happens to insects when 5G is fully rolled out? These questions and many more are explored in this documentary film, *Something is in the air*.



Something Is In The Air - The cell phone radiation documentary

Watch here: <https://www.youtube.com/watch?v=Q89Gv2P3RH8&t=2s>

3.4 Your attention didn't collapse. It was stolen.

Social media and many other facets of modern life are destroying our ability to concentrate. We need to reclaim our minds while we still can.

When he was nine years old, my godson Adam developed a brief but freakishly intense obsession with Elvis Presley. He took to singing Jailhouse Rock at the top of his voice with all the low crooning and pelvis-jiggling of the King himself. One day, as I tucked him in, he looked at me very earnestly and asked: "Johann, will you take me to Graceland one day?" Without really thinking, I agreed. I never gave it another thought, until everything had gone wrong.



Ten years later, Adam was lost. He had dropped out of school when he was 15, and he spent almost all his waking hours alternating blankly between screens – a blur of YouTube, WhatsApp and porn. (I've changed his name and some minor details to preserve his privacy.) He seemed to be whirring at the speed of Snapchat, and nothing still or serious could gain any traction in his mind. During the decade in which Adam had become a man, this fracturing seemed to be happening to many of us. Our ability to pay attention was cracking and breaking. I had just turned 40, and wherever my generation gathered, we would lament our lost capacity for concentration. I still read a lot of books, but with each year that passed, it felt more and more like running up a down escalator. Then one evening, as we lay on my sofa, each staring at our own ceaselessly shrieking screens, I looked at him and felt a low dread. "Adam," I said softly, "let's go to Graceland." I reminded him of the promise I had made. I

could see that the idea of breaking this numbing routine ignited something in him, but I told him there was one condition he had to stick to if we went. He had to switch his phone off during the day. He swore he would.

Full story here: <https://www.theguardian.com/science/2022/jan/02/attention-span-focus-screens-apps-smartphones-social-media>

3.5 Operating, Approved and Proposed 441,449 Low Earth Orbit Satellites

While the attention of a terrified world has been riveted on a virus, and while concern about radiation has been focused on 5G on the ground, the assault on the heavens has reached astronomical proportions. During the past two years, the number of satellites circling the earth has increased from 2,000 to 4,800, and a flood of new projects has brought the number of operating, approved, and proposed satellites to at least 441,449. And that number only includes low-earth-orbit (LEO) satellites that will reside in the ionosphere.

Full details in Newsletter from Arthur Firstenberg here:
<https://www.cellphonetaskforce.org/newsletters/>