



Willing to Work
Australian Human Rights Commission
GPO Box 5218
Sydney NSW 2001
By Electronic Lodgement

Dear Sir/ Madam,

Thank you for the opportunity to comment on the Willing to Work:
National Inquiry into Employment discrimination against Older
Australians with Disability.

I am writing with reference to my own personal experience, one where I
believe that I have been discriminated against due to my disability.

I have been a Primary School teacher for 30 years, working full time as a
classroom teacher, and Religious Education Co-ordinator. I was also
employed on contract to work as a teacher/librarian and as a specialist art
teacher.

After taking some time off to raise my four children, I returned to the
workplace as an emergency teacher, working “ on call” at up to 10
different schools in the Eastern suburbs.

I believe that I have had an impeccable working career. I have been
proven to be a conscientious, hard working, reliable & well-respected
teacher. I rarely missed a day’s work due to ill health.

This all changed in 2011, following the installation of a smart meter on
my home, when my sensitivity to EMR (electromagnetic radiation) was
triggered to such an extent that I began experiencing debilitating
symptoms in my home and in my workplace. Schools where I had
previously worked for many years became unbearable. I believe this was
due to the installation of Wi-Fi and the increased use of wireless devices
in the classroom as these symptoms only occurred in the vicinity of these
devices.

The symptoms I experienced were a severe head pressure, blurred vision, red blotchy skin & a burning sensation on my face, foggy thinking and memory disturbances. The symptoms would abate when I was in environments that did not have these devices.

I sought medical advice and have a medical certificate to support my claims.

There came a point where I felt that I could no longer tolerate these adverse symptoms and I felt I had no alternative but to give up my career.

Not only has this caused me great financial hardship, but being unable to work has impacted on my sense of self worth, my identity as a teacher and a contributor to society and enormous emotional stress concerning my future.

While the schools showed some understanding of my condition, they thought that it was my problem. They would put up a sign on the microwave in the staffroom that it was not to be used when I was present, as this also bothered me; it only made me feel more of a “freak”.

Modifying the schools to create an EMR (electromagnetic radiation) free environment for me was impossible, as I did not have my own workspace, due to my position as a CRT (Contract Relief Teacher)

With the proliferation of wireless devices in every workplace, I feel that I am now unemployable.

There needs to be public education and understanding of EHS (electro-hypersensitivity) so that it is recognised as a functional impairment.

I am completely able to fulfil my teaching duties provided that my environment is free of Wi-Fi and other wireless RF microwave emitting devices.

A simple solution would be to provide internet access via cabled technology, thus reducing RF EMR exposure.

As the “experts” cannot guarantee 100% that wireless technology is safe and that long term exposure to chronic long term exposure to low level EMR will not cause any adverse health effects, then it makes sense to introduce the Precautionary Principle to minimise exposure.

Other “reasonable adjustments” which could be made to make a safer workplace for the EHS person would be to install corded landline phones, rather than cordless phones, which would eliminate totally that particular source of RF microwave emissions.

Mobile phones could be turned off on school grounds.

While all schools must comply with Australian RF (radiofrequency) standards it seems inconsistent that ARPANSA (Australian Radiation Protection and Nuclear Safety Agency) has a fact sheet 14, that says “wireless technology is so new we can’t be sure there isn’t some risk” and advises parents to limit their child’s exposure

ARPANSA RF standards are closely aligned with ICNIRP (The International Commission on Non-Ionizing Radiation Protection) International guidelines, but it would seem that ICNIRP itself ([page 546](#)) recognizes that these are only guidelines, are not necessarily prescriptive and are inadequate.

“Under such circumstances it may be useful or necessary to develop separate guideline levels for different groups within the general population but it may be more effective to adjust the guidelines for the general public to include such groups.”

“Some guidelines may still not provide adequate protection for certain individuals nor for normal individuals exposed concomitantly to other agents, which may exacerbate the effect of the NIR exposure, an example being individuals with photosensitivity.”

“Decision makers should read current scientific literature and set an exposure level at a tolerance lower than what is known to be causing illness and that is not the ICNIRP level.”

These standards only consider thermal effects and do not take into consideration the biological effects demonstrated by thousands of international studies.

Other governments, including those of China, Switzerland and Russia, as well as at least nine EU Member States, have set their own “preventative” exposure limits which are significantly lower than those outlined in ICNIRP.

Sweden recognizes EHS as a functional impairment, while Australia does not even acknowledge its existence and leaves sufferers without any form of support.

The Israeli Supreme Court has ordered Israeli Government to investigate the number of Children suffering from EHS.

The Austrian Medical Association has a set of guidelines for the treatment of EMF related health problems.

<http://www.magdahavas.com/wordpress/wp-content/uploads/2012/06/Austrian-EMF-Guidelines-2012.pdf>

The French National Assembly voted on March 19th 2013 to adopt the precautionary principle to Wi-Fi in schools and to promote wired connections and not the use of Wi-Fi in schools.

The World Health Organization agency classifies RF EME as possibly carcinogenic to humans, group 2B (May 31st, 2011).

Australia appears to be sadly lagging behind the rest of the world.

In a letter from Safe Work Australia I was told, “Unfortunately RF radiation risks to workers is not yet a specific subject of the new model WHS regulations. It is a gap we are well aware of.”

It is my recommendation that the Australian Human Rights Commission conducts a national inquiry into the human rights issues associated with the non-consensual ubiquitous and rapidly increasing exposure to man-made RF EMR.

That policies be formed and implemented to create suitable and safe working environments for those who are EHS and for the protection of all.

That the Commission provides advice and assistance to employers and other organisations about how they can prevent discrimination for employees with EHS and how they can meet their responsibilities under the Disability Discrimination Act.

Thank you

Regards

Maureen Kirsch