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# C4ST

# CANADIANS FOR SAFE TECHNOLOGY

# CANADIENS POUR UNE TECHNOLOGIE SÉCURITAIRE

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October 24, 2018

To: Bryan May, Chair Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities (HUMA)

Email: Bryan.May@parl.gc.ca

Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities (HUMA)

Email: HUMA@parl.gc.ca and

The Honourable Carla Qualtrough, Minister of Public Services and Procurement and Accessibility

Email: Carla.Qualtrough@parl.gc.ca

**Subject: Bill C-81, the Proposed Accessible Canada Act and Request to Appear at the HUMA Hearings**

Dear Committee Chair, MP May:

Canadians for Safe Technology (C4ST) is a national, not-for-profit, volunteer-based coalition of citizens, including parents and experts. Our mission is to educate and inform Canadians and policy makers about the dangers of exposure to unsafe levels of radiation from technology; and to work with all levels of government to create healthier communities, particularly for children and families.

First I would like to commend the federal government on this extremely important national accessibility legislation.

After retiring as the president of Microsoft Canada, I co-founded C4ST because I saw the need to educate Canadians about the adverse effects of wireless radiation. During my time at Microsoft Canada, I played a lead role in the establishment of the digital library by the Canadian National Institute for the Blind (CNIB) and saw first-hand the benefits that technology can bring. What many are not aware of, is that technology, wireless radiation from our commonly used devices, can also create barriers for some people.

There is much emphasis on developing the technology for persons with certain disabilities. This is to be commended and will be of great benefit to many. I believe it is absolutely required that some services must also be available to those who cannot use this technology because they must avoid them or suffer from physical symptoms that range from headaches to heart disturbances. I would like to appear before HUMA studying Bill C-81 to outline concerns and discuss aspects of the proposed act, and the setting of standards, that must include those who face barriers created by our wireless radiation world.

The Canadian Human Rights Commission has a policy, established in 2007, (reviewed in 2014), on accommodation of those with environmental sensitivities, including symptoms related to electromagnetic radiation related to technologies.

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Policy: <https://www.chrc-ccdp.gc.ca/sites/default/files/policy_sensitivity_0.pdf>

Accompanying reports:

1. *The Medical Perspective on Environmental Sensitivites*

https://www.chrc-ccdp.gc.ca/sites/default/files/envsensitivity\_en.pdf

2. *Accommodation for Environmental Sensitivities: Legal Perspective*

https://www.chrc-ccdp.gc.ca/sites/default/files/legal\_sensitivity\_en\_1.pdf

Comments regarding input from other presentations:

1. C4ST supports the two recommended changes as detailed at the HUMA hearings on October 4, 2018 by Marie-Claude Landry, Chief Commissioner, Canada Human Rights Commission. The first is to require the government to make regulations and the second is that the bill requires timelines.

2. We also support the Barrier Free Canada (BFC) representations.

Barrier-Free Canada website-

<http://barrierfreecanada.org/barrier-free-canadas-speaking-notes-for-october-18-2018/>

3. C4ST also supports much of the brief submitted on September 27, 2018 by the Accessibility for Ontarians with Disabilities Act (AODAA), particularly the recommendations on the definitions of “*disability*” and “*barrier*”.

A notable exception is #22 of the AODAA brief: “*To enforceably require that no public money can be used to create or perpetuate barriers against people with disabilities…*” In our view, this is virtually impossible because one person’s required tool for accommodation may be someone else’s barrier. This is particularly true for those with severe electromagnetic hypersensitivities (EHS) who must avoid or greatly reduce their exposure to wireless radiation e.g. from Wi-fi routers. C4ST has members with EHS who have been successfully accommodated in the workforce, including in the federal government. If invited to present to appear before the committee, I will expand on how these seemingly mutually exclusive needs can be accommodated.

Accessibility for Ontarians with Disabilities Act Alliance (AODA Alliance) website:

<https://www.aodaalliance.org/>

Copied below is the brief I submitted on behalf of C4ST, while the Accessible Canada Act was being developed, to provide you with background information.

Please let me know if there is an opportunity for me to appear before HUMA studying Bill C-81.

Sincerely,

Frank Clegg

CEO, Canadians for Safe Technology

frank@c4st.org; [www.c4st.org](http://www.c4st.org)

Cc: Members of the Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities (HUMA)

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February 28, 2017

The Honourable Carla Qualtrough

Minister of Sport and Persons with Disabilities

House of Commons

Ottawa, ON K1A 0A6

By Email: accessible-canada@hrsdc.gc.ca

**Re: Consultations on accessibility legislation regarding the proposed Canadians with disabilities act**

Dear Minister, Qualtrough,

Thank you for providing the opportunity for input into the proposed accessibility legislation.

Canadians for Safe Technology (C4ST) is a national, not-for-profit, volunteer-based coalition of citizens, including parents and experts. Our mission is to educate and inform Canadians and policy makers about the dangers of exposure to unsafe levels of radiation from technology; and to work with all levels of government to create healthier communities, particularly for children and families.

C4ST is contacted frequently by individuals who are adversely affected by electromagnetic fields in their regular living environment. The symptoms described fall under the condition often called electromagnetic sensitivity (EHS). The disability related to this condition ranges from mild symptoms that can resolve quickly to severe long-term debilitation.

EHS is considered an environmental sensitivity. The Canadian Human Rights Commission has a policy regarding environmental sensitivities--but more is needed to remove barriers and prevent further deterioration of quality of life with those disabled with EHS. This emerging public health issue could affect at least 3% of the population.

**Our request is simple: that the Canadians with proposed accessibility/disability legislation, and regulations, be fully inclusive of Canadians with disabilities due to electromagnetic hypersensitivity (EHS).**

The Appendix provides further information.

Thank you for your consideration of this important issue. I would be pleased to respond to any questions. Also, C4ST would be glad to meet with you (in Ottawa) to provide further details.

Sincerely,

Frank Clegg

CEO, Canadians for Safe Technology (C4ST)

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**APPENDIX**

**1. Canadian Human Rights Commission Policy**

The Canadian Human Rights Commission has a policy, established in 2007, on accommodation of those with environmental sensitivities, including symptoms related to low levels of electromagnetic radiation related to technologies.

http://www.chrc-ccdp.gc.ca/sites/default/files/policy\_sensitivity\_0.pdf

http://www.chrc-ccdp.gc.ca/sites/default/files/envsensitivity\_en.pdf

https://www.chrc-ccdp.gc.ca/sites/default/files/legal\_sensitivity\_en\_1.pdf

**2. Situation in Canada**

**1) Specialized clinics**

There are few clinics in Canada that broadly recognize environmental sensitivities, including EHS symptoms:

- Nova Scotia, Environmental Health Clinic

- Ontario, Women's College Hospital

**2) Medical testimony**

Witnesses at hearings held in 2015 by the 41st Parliamentary Standing Committee on Health (HESA) spoke on EHS:

- Dr. Magda Havas: Professor, Environmental and Resource Studies, Trent University, Ontario FOOTNOTE 1

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<http://www.parl.gc.ca/HousePublications/Publication.aspx?DocId=7936469&Mode=1&Language=E>

END FOOTNOTE 1.

- Dr. Riina Bray, Medical Director, Environmental health clinic, Women's College Hospital, Maple, Ontario FOOTNOTE 2

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<http://www.parl.gc.ca/HousePublications/Publication.aspx?Language=e&Mode=1&Parl=41&Ses=2&DocId=7945128>

END FOOTNOTE 2.

- Dr. Anne-Marie Nichol, Assistant Professor, Faculty of Health Sciences, Simon Fraser University, B.C. FOOTNOTE 3

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As above

END FOOTNOTE 3.

**3) Individual's stories**

Canadians gave testimonials of severe adverse effects to wireless radiation that affected their everyday quality of life during:

- Royal Society of Canada public consultation October 28th, 2013 FOOTNOTE 4. Many more wished to present but could not because of time limitations and

BEGIN FOOTNOTE 4:

<http://archives.c4st.org/RSC-public-consultation>

END FOOTNOTE 4.

- Health Canada public consultations on Safety code 6 (2015), July 9th, 2014 (contact me for details).

Twenty-four Canadians have allowed us to post their stories on the C4ST website:

<http://archives.c4st.org/es-stories/electro-sensitive-stories.html>

**4) Examples of recognition elsewhere:**

- Sweden recognizes electrosensitivity as a functional impairment (Johansson, 2015).

- Spain has a precedence of legally recognized electrosensitivity

https://beingelectrosensitive.blogspot.ca/2016/08/spain-ehs-legally-recognised.html

- USA--Americans with Disabilities Act

https://www.ada.gov/

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**4. Health Canada** FOOTNOTE 5

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<http://www.hc-sc.gc.ca/ewh-semt/radiation/cons/electri-magnet/electromagnet-eng.php>

END FOOTNOTE 5.

In its "Environmental and Workplace Health" series of information sheets, Health Canada has a sheet called "Electromagnetic Hypersensitivity (dated 2011).

In part this states *"While the symptoms attributed to EMFs [electromagnetic fields] are real... they might arise from flicker from fluorescent lights, glare and other visual problems with computer monitors. Other possible factors include poor air quality, stress in the workplace or living environment, or pre-existing conditions. In summary, there is no scientific evidence that symptoms attributed to EHS are actually caused by exposure to EMFs."*

Health Canada is clearly out of date with the relevant peer-reviewed recent literature. Not only are there high-quality studies with objective evidence documenting adverse biological effects but it seems clear that many studies were not considered before posting of this information sheet in 2011. This is addressed under the next heading.

**5. World Health Organization--EMF Project**

Mention of electromagnetic sensitivity is made in two information sheets. Both are badly out of date.

The WHO Fact sheet Number 193, titled "*Electromagnetic fields and public health: mobile phones*" has references dated 2005 and 2009. Neither of these references are peer-reviewed scientific studies, nor even reviews of the literature. Although it is noted that this Fact sheet was reviewed in October of 2014 there is no mention of the many studies published in recent years documenting adverse effects of EMFs at exposures which occur at everyday levels from common wireless devices.

The WHO Backgrounder "*Electromagnetic fields (EMF). Electromagnetic fields and public health*" is dated December 2006. The most recent publication is from 2005. There is a mixed and confusing messaging. On one hand it states clearly that "*The symptoms are certainly real and can vary in their severity. Whatever its cause, EHS can be disabling*". It then goes on to provide this advice to physicians: "*Treatment of affected individuals should focus on the health symptoms and the clinical picture, and not on the person's perceived need for reducing or eliminating EMF in the workplace or home*."

This runs counter to the advice/approaches appearing in recent studies that have examined those reporting adverse effects from every day EMF exposures.

Point 6 (below) lists just a few high quality scientific papers not mentioned or evaluated by Health Canada or the World Health Organization:

**6. Medical and peer-reviewed publications.**

1. Austrian Medical Association. (2012). *Guideline of the Austrian Medical Association for the diagnosis and treatment of EMF- related health problems and illnesses (EMF syndrome) Consensus paper of the Austrian Medical Association’s EMF Working Group*. Vienna, Austria: Austrian Medical Association. Retrieved from http://www.magdahavas.com/wordpress/wp-content/uploads/2012/06/Austrian-EMF-Guidelines-2012.pdf [accessed 28 February 2017]

2. Belpomme, D., Campagnac, C., & Irigaray, P. (2015). Reliable disease biomarkers characterizing and identifying electrohypersensitivity and multiple chemical sensitivity as two etiopathogenic aspects of a unique pathological disorder. *Reviews on Environmental Health*, 30(4), 251–271.

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3. Johansson, O. (2015). Electrohypersensitivity: a functional impairment due to an inaccessible environment. *Reviews on Environmental Health*, 30(4), 311–321.

4. McCarty, D. E., Carrubba, S., Chesson, A. L., Frilot, C., Gonzalez-Toledo, E., & Marino, A. A. (2011). Electromagnetic hypersensitivity: evidence for a novel neurological syndrome. *The International Journal of Neuroscience*, 121(12), 670–676.

5. Slottje, P., van Moorselaar, I., van Strien, R., Vermeulen, R., Kromhout, H., & Huss, A. (2016). Electromagnetic hypersensitivity (EHS) in occupational and primary health care: A nation-wide survey among general practitioners, occupational physicians and hygienists in the Netherlands. *International Journal of Hygiene and Environmental Health*. doi:10.1016/j.ijheh.2016.11.013

**7. The most recent summary of the issue was presented by Dr. Yael Stein at the: Expert Forum: Wireless Radiation and Human Health, Hebrew University Medical School, January 23-26, 2017** FOOTNOTE 6

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Sponsored by The Israel Institute for Advanced Study and Environmental Health Trust With Support from National Institutes of Health/National Institutes of Environmental Health Sciences and Dr. Lucy Wiletzky <http://ehtrust.org/science/key-scientific-lectures/2017-expert-forum-wireless-radiation-human-health/>

END FOOTNOTE 6.

**Title**: Electrohypersensitivity: Clinical Observations, Data Gaps:

*"Dr. Stein provided a medical overview of electrohypersensitivity, indicating the diagnosis and treatment options available for individuals, as well as possible mechanisms of action. She concluded that increased education and awareness is necessary, along with innovative intervention techniques for EHS individuals."*

Dr. Yael's closing slide was of a series of steps to improved health and wellness. The first step was "Avoidance of triggers". This can be translated as meaning the removal and reduction of barriers and avoiding new barriers.

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