26.05.2024

AEMC Level 15 60 Castlereagh St Sydney NSW 2000

Dear AEMC Team,

Accelerating smart meter deployment rule change.

I am writing to express my assessment of the acceleration of the smart meter deployment.

The reasons for accelerating this smart meter rollout are highly dubious and lack any scientific or economic basis.

It is described as assisting climate change. The man-made effects on the climate are yet to be proven. Much modelling has been done, but over time it has never been shown to be exact.

It is asserted as being energy efficient and money saving. Experiences for the consumer have been shown on many occasions that these devices increase their electricity bills. A University of Twente study in 2017 showed levels can be recorded over 500% greater than the actual use (1).

In the UK in March 2024 over 4 million meters were reported as malfunctioning (2).

Energy efficiency in homes is much more effective with house design and north orientation, rather than introducing a smart meter.

We built a passive solar designed house over 20 years ago. When the sun is shining during winter no heating or lighting is needed in the upstairs section of the house. Our electricity use is always less than \$800/quarter.

### SCIENTIFIC KNOWLEDGE IS IGNORED

This smart meter rollout totally ignores all the scientific evidence and research that has been on radiofrequency EMR rover the last 40 years.

The WHO's International Agency for Research on Cancer classified everything on the RF-EMF spectrum as a 2B "possible human" carcinogen in 2011.

Since then, further studies in Sweden, France and UK found sufficient evidence to consider RFR as a probable human carcinogen (Group 2A). More recently, the Ramazzini Institute and National Toxicology Program (USA) 2018 studies showed there was sufficient epidemiological evidence to upgrade again to Group 1, carcinogenic to humans.

The smart meter rollout ignores all the effects on children as they are much more vulnerable to EMR effects (3).

The pulsations from these devices are not localised to the meter box but spread through all the wiring in house.

They transmit for some distance, reported to be at least 13 metres away affecting neighbours. In the USA, the bursts from these devices can be 2.5 times above the Federal Communications Commission's limits. The cumulative exposure of this pathological level of radiation has never been measured.

Chronic exposure at low RFR can cause even greater harm than acute exposure to high levels.

Residents are being constantly bombarded with these abnormal pathological wavelengths significantly affecting cellular biochemistry. Some of effects of these being-

- (i) Increases in cellular oxidative stress occur produce vascular injury and organ damage.
- (ii) Calcium ion transport is disrupted adding to inflammatory pathways.
- (iii) Cardiac disorders and heart arrhythmias develop.
- (iv) Cellular DNA damage
- (v) Hypercoagulation, altered microcirculation and immune system dysfunction (4).

Pulsed waves are much more damaging to cellular structures and the effects are non-linear. Research has shown these effects can be cumulative and irreversible.

#### NON-THERMAL EFFECTS IGNORED

ANSPRA only recognises that EMR has detrimental effects over 4 .25 @ 850MHz and at 4.75 @ 950MHz, namely in the thermal range.

Current evidence is overwhelming with a vast number of studies that the non-thermal effects are carcinogenic.

The Federal Communications Commission was criticized in 2020 by The New Hampshire State Commission as not exercising due diligence in setting exposure limits that protect against human health (5).

Refusing to accept these studies will end up in the courts making judgements on the safety of these devices. Already, court judgements have been in favour of those suffering ill-effects (6).

## **EHS**

A number in the population suffer from electrical hypersensitivity, EHS. In 2002 in California 3% were reported to be affected by their Department of Health Services. By 2005 it had increased to 10%.

The European Parliament found the problem was growing exponentially and scientists in 2017 wrote that it may become a "worldwide pan-epidemic".

Bevington in 2019 reported that the prevalence for mild cases was from 5-30%, 1.5-5% for moderate cases and <1.5% for severe cases. (7)

It is easy to dismiss this cohort of the population as imagining their symptoms. But there is now more objective evidence to substantiate their claims.

Many of these people really struggle to survive with the level of EMR currently present in many buildings, shopping areas etc. It is quite debilitating having to deal with this constantly.

Their home is their sanctuary when they can recover the effects of being bombarded with EMR.

Now their safety and health will be significantly threatened with the mandated roll out of these unhealthy devices.

Having a holiday elsewhere in this country will almost be impossible.

#### SAFETY of SMART METERS

The safety of these meters is questionable as they don't have a suppression mechanism. They pose a fire risk.

There have been instances of this over the last 10 years. In April 2015, 5,000 meters exploded due to overvoltage in Stockton, California when a dump truck hit a power pole.

These meters invade one's privacy with the capture and transmission of information of the power use in one's home. This data could be sold to Big Tech companies.

Electricity companies must be forced to obtain written consent before sharing or selling this data.

## CONTROL OF POWER SUPPLY

By having control of these devices ones power supply can be switched off any time without your consent if it suits the energy market operator.

This can be very inconvenient when cooking, working from home or undertaking some essential medical treatment.

# INCREASING CHRONICITY OF HEALTH

Chronic diseases are on the rise. In it was estimated in the USA that 6% of American children had a chronic health condition in the 1960's. Today it is reported to be 60% (8).

This is indicative that the health of modern society has deteriorated.

Adding another constant cellular stressor, will only continue the deterioration of the health of many vulnerable people.

I am concerned that my own health will deteriorate with the change of our current non-transmitting meter to a digital communicating smart meter.

The change of both meters could mean I will have to relocate outside of the metropolitan area, away from immediate family and a some of my current consulting work.

The legislation must be changed to allow the rollout of non-radiation-emitting-smart meters.

Human health appears to be dismissed as the major determinant of safety and tolerance.

Will there be compensation for those whose health has been adversely affected by these meters?

A precautionary approach is not being taken.

In short there are few if any benefits to the installation of these meters but many disadvantages.

Thank you for the opportunity to submit my comments and I look forward to receiving your response.

Yours Faithfully,

Gillian Scott, GAICD

# References-

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