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Subject: Re: Meeting Common Core Technology Project Plan

Date: Mon, 11 Feb 2013 03:57:05 -0600

Dear Board Members,

What has happened to change the position of the LAUSD Board since May 12, 2009 when

it re-affirmed the *Wireless Telecommunication Installations Resolution*, linked above as

Attachment number 1? The 2009 resolution rightly resolves that:

*"[T]he Board supports responsible deployment of fiber optic broadband technology, which is superior to wireless technology in speed, reliability, security, durability and protections it affords people and the environment from the potential hazards of exposure to radio-frequency radiation".*

### **What has happened to your resolve?**

Surely, the Good Dr. Vladovic will still speak up to protect the children and roundly condemn any of you--as he did T-Mobile--who would even consider irradiating your children with microwaves in school. In 2009, Dr. Vladovic said T-Mobile couldn't care less about your children, but you surely must care and you must act on their behalf to protect them and provide a safe learning environment.

[http://www.youtube.com/watch?v=sFbCRW93k\\_s](http://www.youtube.com/watch?v=sFbCRW93k_s) Video of Dr. Vladovic and the Board condemning T-Mobile.

In 2009, the Board wisely resolved that, "**Whereas, The health and safety of our students and employees are fundamental concerns of the Los Angeles Unified School District...the Board requests that the Department of Water and Power or any other responsible agency call for the removal of any cell phone towers within 200 feet of a school campus...the Board expresses its most serious condemnation of T-Mobile's construction of the cell phone tower adjacent to Taper Avenue Elementary School and urges T-Mobile to remove the cell phone tower to avoid serious damage to its brand in the District and the community at large.**"

The Good Dr. Vladovic was exactly right. Any responsible party must not irradiate the school.

Ironically, the levels of exposure in a school with WiFi routers and laptops is going to be orders of magnitude higher than those in a school 199 feet from a cell tower. Where is the continuity of policy and the commitment to your children's health? This time it is you, The Board, putting them in harm's way. And you are liable, both morally and financially. Catherine Zeta Jones can zip off on her motorbike, but you can not.

Since 2000 when this resolution was originally written and since 2009 when it was last reiterated, there is even more evidence that exposure to microwaves is hazardous to health. Additional evidence supports the position that children are more vulnerable to and more adversely affected by microwave radiation than healthy adults. Therefore, the Board's wireless proposal seems irrational and willfully blind to the Science. If you are unaware of the body of scientific evidence, I assert that you are obligated to inform yourselves, each

and every one of you, to the best of your ability before making a decision. Call in all the experts you need.

And you must inform the Parents, Teachers and other staffmembers that you will be exposing them, intentionally exposing them, to a Class 2B carcinogen (see Attachment number 2, IARC Classification) every single school day, even though alternatives such as fiber optics are available. As you know.

Attachment number 3 is clarification of that IARC statement by Doctor Baan, the principle author of the document. His clarification specifically states that the classification includes all RF sources, including Wifi.

Since the District opposes cell tower installations near its schools on health grounds, it is very difficult to understand why it would not oppose wireless devices in schools that will expose children to even higher levels of the same hazardous physical agent.

Attachment number 4 is the Expert Testimony of Lloyd Morgan, submitted in Morrison v Portland Public Schools.

Attachment number 5 is the Testimony of Lloyd Morgan, Addendum A, submitted in Morrison v Portland Public Schools. Note his meter was maxed out when measuring a laptop down-loading a large file. A meter measuring 199 feet from a cell tower will not max out, in my experience. Now imagine a classroom with 20 - 30 laptops and a router.

Attachment number 6 is the Testimony of Lloyd Morgan, Addendum B, submitted in the same court case, documenting microwave levels in Mt. Tabor School in Portland.

Next, I will call your attention to this BBC Panorama video which clearly demonstrates that microwave levels are up to three times higher in a school with WiFi and laptops than they are in the main beam of a cell tower at 100ft. You may have to cut and paste these.

<http://www.youtube.com/watch?v=YrVNdbT7hb4> BBC Panorama, Part 1

<http://www.youtube.com/watch?v=ewdikNQhjUo> BBC Panorama, Part 2

More wifi measurements taken at a school: <http://www.youtube.com/watch?v=FO0AnNHZ8vI>

At about 9 minutes and 20 seconds into the video, a parent measures in a school with WiFi.

At 10 minutes and 56 seconds the parent measures the electrical field near a cell tower.

The data is there. Over and over again.

The Swiss Office of Public Health website published these graphs regarding WiFi and WLAN exposure levels, remember parts of the child will definitely be exposed in the far less predictable reactive near-field. The graph can not even quantify the area within a few centimeters of the antenna. But a child will be there, in that reactive near-field.

[http://www.bag.admin.ch/themen/strahlung/00053/00673/03570/index.html?lang=en#sprungmarke3\\_8](http://www.bag.admin.ch/themen/strahlung/00053/00673/03570/index.html?lang=en#sprungmarke3_8)

Now consider this comparison of Wifi levels to cell tower levels; a child's hands will be right on the laptop, not 50 cm away:

[http://www.powerwatch.org.uk/pdfs/20080425\\_wifi\\_memorandum.pdf](http://www.powerwatch.org.uk/pdfs/20080425_wifi_memorandum.pdf)

Attachment number 7 is a quick reference chart of studies from the *Updated 2012 BioInitiative*

*Report*, documenting RF/MW exposure levels and outcomes. So you can match exposure levels to documented outcomes.

Now, putting all this together, understanding that you will be exposing children and staff to levels of microwaves higher than those found near cell towers, consider these studies:

**Recent studies** looking at people who live within 500 meters of a cell tower show those people are 4-6 times as likely to develop and die of cancer. In some cases, 10 times more likely:

1. [The Influence of Being Physically Near to a Cell Phone Transmission Mast on the Incidence of Cancer](#) (PDF) (German study)

**The Naila Study. Eger H** et al, (2004) Influence of the spatial proximity of mobile phone base stations on cancer rates. *Umwelt-Medizin-Gesellschaft* 17:273-356

"The result of the study shows that the proportion of newly developing cancer cases was significantly

higher among those patients who had lived during the last ten years at a distance of up to 400 metres

from the cellular transmitter site, which has been in operation since 1993, compared to those patients

living further away, and that the patients fell ill on average 8 years earlier. In the years 1999-2004, i.e.

after five years' operation of the transmitting installation, the relative risk of getting cancer had trebled

for the residents of the area in the proximity of the installation compared to the inhabitants of Naila

outside the area."

2. [Increased Incidence of Cancer Near a Cell-Phone Transmitter Station](#) (PDF) (Israel study)

**Wolf R, Wolf D**, (April 2004) Increased incidence of cancer near a cell-phone transmitter station,

*International Journal of Cancer Prevention*, 1(2) April 2004

[http://www.powerwatch.org.uk/news/20050207\\_israel.pdf](http://www.powerwatch.org.uk/news/20050207_israel.pdf)

"A comparison of the relative risk revealed that there were 4.15 times more cases in area A than in

the entire population. The study indicates an association between increased incidence of cancer and

living in proximity to a cell-phone transmitter station."

This study, based on medical records of people living within 350 metres of a long established phone

mast, showed a fourfold increased incidence of cancer generally compared with the general population

of Israel, **and a tenfold increase specifically among women, compared with the surrounding locality further from the mast.**

3. [Environmental Epidemiological Study of Cancer Incidence in the Municipalities of Hausmannstätten & Vasoldsberg \(Austria\)](#) (PDF)
4. <http://www.emrsa.co.za/documents/brazilresearch.pdf>.
5. [http://www.magdahavas.com/wordpress/wp-content/uploads/2010/11/Blake\\_Levit-Henry\\_Lai.pdf](http://www.magdahavas.com/wordpress/wp-content/uploads/2010/11/Blake_Levit-Henry_Lai.pdf)
6. <http://www.electricalpollution.com/documents/LaQuintacancercluster.pdf>

And really, cancer is just the tip of the iceberg. Many more immediate health effects are demonstrated and listed right on FCC website.

[http://transition.fcc.gov/Bureaus/Engineering\\_Technology/Documents/bulletins/oet56/oet56e4.pdf](http://transition.fcc.gov/Bureaus/Engineering_Technology/Documents/bulletins/oet56/oet56e4.pdf)

"These reported effects have included certain changes in the immune system, neurological effects, behavioral effects, evidence for a link between microwave exposure and the action of certain drugs and compounds, a "calcium efflux" effect in brain tissue (exposed under very specific conditions), and effects on DNA."

Any system of the body is vulnerable because microwaves disrupt the function of the cell membrane.

The studies below demonstrate that children absorb more radiation than adults and that they are often more sensitive to the adverse effects of such radiation. Children

are smaller, their bones are thinner, their nervous and immune systems are not

fully developed, and they will have a longer exposure over their

lifetimes. Microwave radiation

penetrates more deeply  
into a child's body.

<http://informahealthcare.com/doi/abs/10.3109/15368378.2011.622827>

### **Gandhi 2012**

**Exposure Limits: The underestimation of absorbed cell phone radiation, especially in children**

The existing cell phone certification process uses a plastic model of the head called the Specific Anthropomorphic Mannequin (SAM), representing the top 10% of U.S. military recruits in 1989 and greatly underestimating the Specific Absorption Rate (SAR) for typical mobile phone users, especially children. A superior computer simulation certification process has been approved by the Federal Communications Commission (FCC) but is not employed to certify cell phones. In the United States, the FCC determines maximum allowed exposures. Many countries, especially European Union members, use the "guidelines" of International Commission on Non-Ionizing Radiation Protection (ICNIRP), a non governmental agency. Radiofrequency (RF) exposure to a head smaller than SAM will absorb a relatively higher SAR. Also, SAM uses a fluid having the average electrical properties of the head that cannot indicate differential absorption of specific brain tissue, nor absorption in children or smaller adults. The SAR for a 10-year old is up to 153% higher than the SAR for the SAM model. When electrical properties are considered, a child's head's absorption can be over two times greater, and absorption of the skull's bone marrow can be ten times greater than adults. Therefore, a new certification process is needed that incorporates different modes of use, head sizes, and tissue properties. Anatomically based models should be employed in revising safety standards for these ubiquitous modern devices and standards should be set by accountable, independent groups

<http://www.scribd.com/doc/75218005/Hormone-Effects-Eskander-Et-Al-2011>

### **Eskander 2011**

"Tables 1 and 2 illustrate that persons of ages 14–22 years or 25–60 years who were exposed, for time intervals extended to 6 years, to RFR either from mobile phones or from base stations suffered 109 significant decreases in their plasma ACTH...Tables 1 and 2, also show that persons of ages 14–22 years and 25–60 years who were exposed, for time intervals extended to 6 years, to RFR either from mobile telephones or from base stations suffered high significant (Pb0.01) decrease in their serum T3 and T4 levels...Tables 1 and 2 show that young females (14–22 years) exposed to RFR from mobile phones or from base stations at distances 20–100 m and 100–500 m suffered decrease in their serum prolactin level and the rate of decrease significantly rose with increased time of exposure from 1 year up to 6 years....Table 2 shows that both young (14–22 years) and adult (25–60 years) females exposed to RFR from base stations did not suffer any change in their serum progesterone levels throughout the first year of exposure. However, with increasing exposure periods from 3 up to 6 years they suffered significant decrease in their serum progesterone levels. Tables 1 and 2 illustrate that both young males (14–22 years) and adult males (25–60 years) exposed to RFR from mobile phones or from base stations experienced gradual decrease in their serum testosterone level with increasing the period of exposure."

<http://www.scribd.com/doc/76281138/Changes-of-Clinically-Important-Neurotransmitters>

### **Buchner and Eger 2011**

" In the case of adrenaline and noradrenaline, almost exclusively children and chronically ill subjects (here mostly subjects with allergies) are affected..... During the stage of counterregulation, the "trace amine" PEA decreases and remains

decreased.

<http://informahealthcare.com/doi/abs/10.3109/15368378.2011.622827>

**Gandhi 2012**

"The SAR for a 10-year old is up to 153% higher than the SAR for the SAM model. When electrical properties are considered, a child's head's absorption can be over two times greater, and absorption of the skull's bone marrow can be ten times greater than adults."

<http://www.ncbi.nlm.nih.gov/pubmed/20463374?dopt=Abstract> **Bakker 2011**

" In this study, we found that the basic restriction on the SAR(wb) is occasionally exceeded for children, up to a maximum of 45% in small children."

<http://www.ncbi.nlm.nih.gov/pubmed/20107250> **Uusitupa 2010**

"The basic restriction of whole-body SAR, set by ICNIRP, is exceeded in the smallest models ( approximately 20 kg) at the reference level of exposure, but also some adult phantoms are close to the limit."

**Prenatal exposure is also linked to health effects, demonstrating that microwaves are biologically active deep within the body:**

<http://www.benthamscience.com/open/topedj/articles/V006/46TOPEDJ.pdf>

**Sudan 2012**

"In this investigation, we found associations between prenatal and postnatal cell phone exposures and outcomes of migraines and headache-related symptoms in children..."

[http://www.avaate.org/IMG/pdf/NINOS\\_Cell\\_phone\\_use\\_and\\_behavioural\\_problems\\_inTech.2010.115402.full.pdf](http://www.avaate.org/IMG/pdf/NINOS_Cell_phone_use_and_behavioural_problems_inTech.2010.115402.full.pdf)

**Divan 2010**

"What is already known on this subject  
Previous studies of cell phone use have emphasised health effects in adults.

Yet the most susceptible population to environmental exposures are children. This past decade has seen a great increase worldwide in cell phone use and access. During this same period, an equally important public health outcome that has increased in prevalence is childhood behavioural problems.

What this study adds

There is an association between prenatal as well as postnatal use and behavioural problems by age 7 years among a general population of mothers who are cell phone users. These results replicate the findings of an association observed among only early technology adopters. These new results also reduce the likelihood that these are chance findings or findings that did not adequately consider the influence of other important factors for behavioural problems."

[http://www.bioinitiative.org/report/wp-content/uploads/pdfs/sec12\\_2012\\_Evidence\\_%20Childhood\\_Cancers.pdf](http://www.bioinitiative.org/report/wp-content/uploads/pdfs/sec12_2012_Evidence_%20Childhood_Cancers.pdf)

#### **Kundi 2012**

"The balance of evidence suggests that childhood leukemia is associated with exposure to power frequency EMFs either during early life or pregnancy."

Attachment number 8, **Odaci 2012**

"[P]renatal exposure to a 900 MHz EMF affects the development of the dentate gyrus granule cells in the rat hippocampus. Cell loss might be caused by an inhibition of granule cell neurogenesis in the dentate gyrus."

<http://www.emfbioeffects.org/report.html> **Kane 2004**

"It is suggested that fetal or neo-natal exposures to radiofrequency radiation may be associated with an increased incidence of autism."

[http://www.bioinitiative.org/report/wp-content/uploads/pdfs/sec20\\_2012\\_Findings\\_in\\_Autism.pdf](http://www.bioinitiative.org/report/wp-content/uploads/pdfs/sec20_2012_Findings_in_Autism.pdf)

#### **Herbert 2012**

"The premise of this review is that although scant attention has been paid to possible links between electromagnetic fields and radiofrequency exposures (EMF/RFR) and Autism Spectrum Disorders (ASDs), such links probably exist."

<http://www.avaate.org/IMG/pdf/fetalsrep00312.pdf> **Aldad 2012**

"Neurobehavioral disorders are increasingly prevalent in children, however their etiology is not well understood. An association between prenatal cellular telephone use and hyperactivity in children has been postulated, yet the direct effects of radiofrequency radiation exposure on neurodevelopment remain unknown. Here we used a mouse model to demonstrate that in-utero radiofrequency exposure from cellular telephones does affect adult behavior. Mice exposed in-utero were hyperactive and had impaired memory as determined using the object recognition, light/dark box and step-down assays. Whole cell patch clamp recordings of miniature excitatory postsynaptic currents (mEPSCs) revealed that these behavioral changes were due to altered neuronal developmental programming. Exposed mice had dose-responsive impaired glutamatergic synaptic transmission onto layer V pyramidal neurons of the prefrontal cortex. We present the first experimental evidence of neuropathology due to in-utero cellular telephone radiation."

Based on what I know that you understand about the hazards of cell tower radiation, I can not comprehend how you now consider to expose your children and staff to the same hazardous physical agent, microwave radiation, at an even more intense power density . And they will be exposed to the routers' radiation, even when they are not using the computers or iPads.

I implore you to reconsider now. Protect the children. Set a good example for them so that they may learn to critically think for themselves. Educate them and their parents about the hazards of wireless radiation. It may be one of the most important lessons they ever learn.

Sincerely,

Deborah M. Rubin  
People Against Cell Towers at School  
(PACTS) <http://expelcelltowers.org/>  
and

MicrowaveCHASM

<http://microwavechasm.org/>



**websites for further info:**

<http://wifiinschools.org.uk/>

<http://wiredchild.org/>

<http://www.magdahavas.com/category/electrosmog-exposure/schools/>

videos for further info:

<http://www.stayonthetruth.com/electromagnetic-fields---dr-ted-litovitz.php> Dr.

Ted Litovitz

<http://vimeo.com/17266941> Dr. Martin Blank

<http://www.youtube.com/watch?v=IgLO9yR1JIQ> Dr. George Carlo

<http://www.youtube.com/watch?v=hVS37zUMwYQ&feature=related> wifi laptop

emits more radiation than cell phone