STOP SMART METERS AUSTRALIA INC
Reg. No. A0059190N ABN 14 717 028 504

Attn: Robert F. Kennedy, Jr., Secretary
Agency: U.S. Department of Health and Human Services
Docket ID: HHS-OASH-2026-0397

Subject: **Request for Information on Electromagnetic Fields (EMFs), Radiofrequency (RF) Radiation, and Wireless Radiation Exposure**

Response to Question 2: Respondent perspective

We are an Australian volunteer advocacy group, which was formally incorporated as an association in 2013. The organization was established in response to widespread community concern following the commencement of a state-wide mandatory rollout of smart meters across Victoria in late 2009.

Response to Question 3: Potential adverse health effects

In particular, public backlash centered around a sudden spike in adverse health effects that occurred in tandem with the introduction of wireless smart meters. Installation of RF-emitting electricity meters resulted in immense, and frequently life-changing, harm to a number of Victorians.

The impact on people's health resulted in some people no longer being able to work[i], sleep in their bedrooms[ii] and, in some cases, live in their own homes[iii]. Victorians have spent tens of thousands of dollars shielding their homes, moving their meter, undergoing unnecessary medical investigations, as well as relocating to other states and countries in a bid to protect themselves from smart meter emissions.

Response to Question 3 (a): Type of wireless technology

The power companies in Victoria selected mesh networking as the main means of smart meter communications, which is the same technology that was implemented by California-based PG&E. The placement of the meters in Victoria often occurred in close proximity to where people spend extended periods of time, for example on the outside of a bedroom wall. In Australia the mesh network operates between 915 MHz and 928 MHz. 3G communications (now 4G) communications were also implemented in some cases along with WiMax (since discontinued).

Response to Question 3 (b): Nature, duration, frequency and timing of exposure

A technical report commissioned by the Victorian State Government, titled *Quantifying Smart Meter RF EME Levels in Victorian Homes*, examined emissions from the three different smart meter communication technologies used in Victoria at the time of the study.[iv] The 2015 report found that the network type (3G, mesh and WiMax) had no significant effect on the median estimates for RF pulses per hour for the smart meters at the 55 properties that they studied.

Polling periods, which represent the time of day when contact was made with the smart meter to acquire information, occurred every six hours for meters in the 3G and WiMax networks and every four hours for meters in mesh networks. However, in practice, *all* of the meters were transmitting intermittently, perhaps often, throughout the day as well as, and not simply just for, the four to six main sessions. For the six properties utilizing 3G communications, the average number of RF pulses per hour ranged between 129 and 176,201 (the upper limit reflecting a rural site where the cell phone signal coverage was very poor). For the 32 mesh-networked meters, average pulses per hour varied between 98 and 15,396.

Response to Question 3 (c), (d) and 4 (h): Adverse health effects experienced, commencement and reported

A peer-reviewed case series published in 2014, titled *Self-reporting of Symptom Development from Exposure to Radiofrequency Fields of Wireless Smart Meters in Victoria, Australia* examined 92 local cases submitted to a public website.[v] It was found that the majority of affected individuals reported no prior history of electromagnetic hypersensitivity (EHS). The author pointed to the possibility that 'smart meters may have unique characteristics that lower people's threshold for symptom development' in previously unaffected populations.

The most frequently reported symptoms from exposure to smart meters were (1) insomnia, (2) headaches, (3) tinnitus, (4) fatigue, (5) cognitive disturbances, (6) dysesthesias (abnormal sensation), and (7) dizziness. As stated in the study, 'The effects of these symptoms on people's lives were significant'. The author of the study, Dr F. Lamech, MBBS, called for, in the conclusions of the study, 'An evidence-based approach, such as the one used in all other areas of medicine' which would mean, 'the establishment of a postrollout surveillance study and funding for further research into the particular effects of wireless smart meters, in conjunction with research into the short-term and long-term consequences of EMR exposure'.

Response to Question 4 (m): Recommendations for surveillance

Our organization agrees that surveillance systems to monitor potential adverse health effects associated with RF radiation exposure are desperately needed. This is something we have repeatedly requested of Australian government officials in relation to the rollout of smart meters. Sadly, our requests have fallen on deaf ears. Our members and website followers are also continuously posting to our website adverse health outcomes that they have experienced associated with exposure to other man-made sources of RF, such as cell phones, WiFi and telecommunication towers.

Response to Question 9: Disclosure of technical and exposure-related information

Our organization strongly advocates for vastly improved technical and exposure-related information to be disclosed to all sectors of the population. In line with the recent decision by Italy's highest court that ruled Apple must provide clear, visible and adequate information on iPhone radiofrequency risks, this should be extended to information in regard to all RF-emitting devices. The Italian Supreme Court decision affirmed the requirement for Apple to provide this information in order for consumers to make informed choices in regard to potential health risks. Crucially, this obligation holds, even in the face of scientific uncertainty.[vi]

Our organization has found that many individuals experience unintended harm from devices they are unaware of, often do not need or cannot control. Examples include a smart meter installed on the opposite side of the wall to where they sleep, or a router continuously emitting unutilized frequencies.

Current methodologies to evaluate the potential for harm are outdated. For instance, the Specific Absorption Rate (SAR) is an outdated metric that fails to reflect modern scientific reality. It relies on a methodology

established in the 1990s and ignores a vast body of recent research. The current testing process relies on SAM ('Standard Anthropomorphic Man' or 'Specific Anthropomorphic Mannequin'), a mannequin bearing a head into which liquid and then a probe can be inserted to measure heating due to exposure to cell phone radiation. However, this model is fundamentally flawed. SAM was modelled after the top 10% largest US military recruits in 1989. It entirely lacks the biological complexity of actual bone, fat, and brain tissue, and it assumes a phone is used for no more than six minutes at a time. Using this outdated dummy to represent the average modern user or to encompass bodies with smaller heads and thinner skulls, such as children, is no longer scientifically defensible. It is also now widely known that there are many documented effects that are unrelated to heating.[vii]

Response to Question 10: Existing data sources monitoring potential adverse health effects associated with RF radiation exposure

Australian National Register of Environmental Sensitivities (ANRES)

A volunteer-run group in Australia has established the Australian National Register of Environmental Sensitivities (ANRES), with the aim of creating a national register of those who experience environmental sensitivities, including Electromagnetic Hypersensitivity (EHS). Drawing upon the data currently held on its register, the 47-page ANRES 2026 Report found strong evidence that environmental sensitivities (including EHS, Multiple Chemical Sensitivity, Chronic Fatigue Syndrome, etc.) are '**chronic, disabling, and highly co-occurring conditions** with substantial impacts on daily functioning and quality of life'. [viii]

Australian legislation: *Disability (Access to Premises - Buildings) Standards 2010*

The Federal Government periodically reviews the Australian legislative instrument enacted to ensure that people with a disability have dignified, equitable, cost-effective, and reasonably achievable access to public buildings, as well as the facilities and services within them. The 2021 review found that environmental sensitivities were mentioned by 35.5% of respondents, with 22.7% of submissions flagging electromagnetic hypersensitivity as a barrier to accessing public spaces due to wireless networks and other man-made radiofrequency (RF) sources.[ix]

Conclusion

Australian authorities charged with protecting the population from RF harm rely heavily on regulatory actions taken in international jurisdictions such as the United States. Our organization hopes that HHS will take a leading role in driving the critical reforms needed in this space.

Submitted by:

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Secretary
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Date: October 21 2026

Endnotes

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[iii] Stop Smart Meters Australia 2015, *Smart meter problems force Balwyn North family out of home – Herald Sun/Leader*, [Online], Available: https://stopsmartmeters.com.au/2015/02/17/smart-meter-problems-force-balwyn-north-family-out-of-home-herald-sunleader/

[iv] Total Radiation Solutions 2015, *Quantifying Smart Meter RF EME Levels in Victorian Homes*, Available: https://stopsmartmeters.com.au/wp-content/uploads/2019/04/ami_quantifying_smart_meter_rf_eme_levels_in_victorian_homes_2015-2.pdf

[v] Lamech, F. 2014, Self-reporting of Symptom Development from Exposure to Radiofrequency Fields of Wireless Smart Meters in Victoria, Australia: A Case Series, *Altern Ther Health Med*. *2014 Nov;20(6):28-39*, Available: http://www.ncbi.nlm.nih.gov/pubmed/25478801

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[ix] Australian Government, The Treasury n.d., *Key themes emerging from the Premises Standards Review 2021*, [Online], Available: https://treasury.gov.au/review/premises-standards-review-2021/key-themes