

07 July 2021

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Dear Michael Vaughan and Michael Fleck

The Director-General of Health has asked me to reply to your email of 1 July 2021 Interagency Committee on the Health Effects of Non-Ionising Fields (the Interagency Committee). I am also replying to your email of 1 July 2021, requesting Interagency Committee meeting notes, and your email of 2 July 2021 regarding the review by the Oceania Radiofrequency Scientific Advisory Association.

### **The Interagency Committee on the Health Effects of Non-Ionising Fields**

You comment on the Interagency Committee and their expertise, saying that it has heavy industry representation, and it operates under a cloud of secrecy. The Interagency Committee is explicitly an interagency committee and the terms of reference state that its membership includes “*representatives from ... agencies, organisations, and sectors*”<sup>1</sup>.

Membership of the Interagency Committee includes three epidemiologists, three people with public health expertise, an environmental health officer and a member with specialist knowledge of exposure assessment. The participation of observers from the Australian Radiation Protection and Nuclear Safety Agency also brings in their specialist expertise. The presence of industry representatives is openly acknowledged, and discussed on page 39 of the Interagency Report, which comments:

*“While there is sometimes public concern over the presence of industry representatives on the committee, in practice they have never attempted to influence the committee's conclusions on the health effects research and generally see the committee as a means for them to stay abreast of recent developments. In addition, they are able to bring to the committee's attention forthcoming developments in their industries that may have policy implications for government.”*

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<sup>1</sup> <https://www.health.govt.nz/our-work/environmental-health/non-ionising-radiation/research-non-ionising-radiation>

Copies of Interagency Committee meeting minutes are supplied on request. In response to your request of 1 July 2021 for *“the dates of the last three meetings of the Interagency Committee for Health Effects of Non-Ionising Radiation; the attendees of those meetings and the Minutes of the meetings”* please find attached copies of the meeting notes requested. The meeting notes include the meeting dates and attendees.

The Ministry does not rely exclusively on the Interagency Committee when developing policy in this area. It also takes advice from the World Health Organization, and reviews the approaches and findings of health agencies in other countries.

### **The International Commission on Non-Ionising Radiation Protection (ICNIRP)**

You have also expressed concerns about ICNIRP. ICNIRP’s mission is to protect people and the environment against adverse effects of non-ionizing radiation (which includes radiofrequency fields). ICNIRP’s statutes expressly forbid membership to anyone whose employment would compromise scientific independence. All current ICNIRP members are either academics or work for government agencies – none is an “industry professional”. ICNIRP’s independence and expertise in this area have been recognised by the World Health Organization through its Framework of Engagement with Non-State Actors process.

ICNIRP published updated exposure guidelines on exposure limits for radiofrequency fields in 2020. The FAQs published with these note that *“ICNIRP considers all potential adverse effects, and sets restrictions to ensure that none occur, regardless of the mechanism of interaction between the exposure and the body”*.

### **The Oceania Radiofrequency Scientific Advisory Association (ORSAA) review**

In your email of 2 July 2021, you asked for *“the list of studies reviewed by the Interagency Committee ...”* Please find the draft meeting notes for 18 February 2021 attached, that include this information. A summary of research reviewed in recent years is available on the Ministry website<sup>2</sup>.

You have discussed a review published by the ORSAA which found that “the majority of papers (68%) show significant biological or health effects.” You asked whether the ORSAA paper was “overlooked”. The paper is not indexed on PubMed or on the EMF Portal so in practice it would not have been found. Although it was published in “Radiation Protection in Australasia”, the journal of the Australasian Radiation Protection Society, it is shown there as being a conference paper which, according to the journal’s policies, are not peer reviewed before publication. For this reason, it would have been considered as part of the “grey” literature, which is generally not considered by the Interagency Committee.

An important weakness in this review is that it makes no attempt to evaluate the quality of the studies on which it relies: they all appear to be treated equally.

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<sup>2</sup> <https://www.health.govt.nz/publication/interagency-committee-health-effects-non-ionising-fields-report-ministers-2018>

Unfortunately, a common feature of much of the research in this area is that the quality varies considerably. Many studies have not followed good scientific and/or laboratory practice (for example, poor exposure assessment, no control experiments, no “blinding” of people involved in data collection or analysis to eliminate potential bias). When drawing conclusions about health effects, studies with poor methodology cannot be accorded the same weight as those that do follow good practice.

This problem has been raised many times - a yearly review prepared by the Swedish Radiation Safety Authority’s Scientific Council on Electromagnetic Fields now lists studies it did not consider, and the reasons for their exclusion. A 2018 paper that scored 225 studies (into whether radiofrequency fields caused genetic damage) on four basic quality measures found that the better the quality score, the less likely they were to report positive findings.

For these reasons, the ORSAA conclusions appear to be of little value.

In conclusion, the Ministry of Health’s advice is based on the best international evidence available, and that the Interagency Committee includes an appropriate balance of health, industry and other sector representatives.

Yours sincerely

A handwritten signature in blue ink that reads "D Woodley". The signature is fluid and cursive.

Deborah Woodley  
Deputy Director-General, Population Health and Prevention  
**Ministry of Health**

