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Mr. Julius Knapp, Chief  
Office of Engineering and Technology  
Federal Communication Commission  
Washington, D.C. 20554  
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Dear Mr. Knapp

#### Dealing With EMR

You responded September 14, 2012, to a letter we sent to Senator Grassley, requesting a White Zone and protection. The response was, however, unacceptable. Our own plight and that of many other individuals who are made ill by electromagnetic radiation can no longer be ignored. Avoiding cell tower, smart-meters, and Wi-Fi emissions are increasingly difficult, if not impossible.

Just as most people can eat a peanut, and just a peanut can kill someone else; we cannot tolerate electromagnetic radiation. The individual, allergic to peanuts, can avoid eating them and can keep peanuts out of their home. Electromagnetic radiation (EMR) cannot be blocked out from entering our homes nor stopped from entering our property, and living spaces.

Sometimes EMR is called electro-smog. The emissions are invisible, far-reaching, penetrating, and have amplitudes (power levels) much higher than quieter, natural background radiation.

Bert and Diane own a farm in Cedar Falls, Iowa, where they lived until a cell tower was erected nearby, and Diane's life became a misery of intolerable pain. Bert continues to cautiously live and work on the farm, but Diane was forced into exile, to a nomadic existence, until she found a safe place to live in the United State's National Radio Quiet Zone close to the National Radio Astronomy Observatory (NRAO). The FCC knows some people who are harmed by EMR (technological lepers) have gone to Green Bank, West Virginia.

This is a very serious and compelling situation. As the increasing emissions from many sources converge in the atmosphere, we are creating a soup of un-regulated and un-monitored frequencies. This man-made radiation is artificial and is totally new to the environment. Nothing – no plant, no living thing – has ever been exposed to such EMR in the life of this planet until now. Nothing is therefore adapted to it.

We urge you to undertake the following:

- 1) White Zone areas: The government and military protects delicate instruments from EMR, so how is it that human bodies don't need the same? It is urgent that those of us, who are unable to tolerate exposure to EMR, have access to or be provided with areas where we are not harmed, areas where we can safely live in a humane fashion and where we can be productive. It appears the FCC will not entertain any notion to regulate emission. Will government grant areas to be White Zones that will shield and protect us?
- 2) Housing is difficult to find in Green Bank, an unofficial White Zone. Perhaps housing may be offered as will likely be for victims of Hurricane Sandy or the Nor'easter? Help is needed for those in forced exile too. Perhaps residences in and around the military base of Sugar Grove, which may be (according to rumors) partially shutting down? For some people the choices are to live in a car (to reduce pain) or to return to exposure (to live with pain or to possibly be willing to die because there is no relief) as this is unjust.
- 3) The Department of Justice needs to recognize technological leprosy<sup>i</sup> as a disability. Basic civil services cannot be used if the services continue to promote harmful emissions; which cause even more struggles for – those who already have had their lives changed or those whose disabilities are not recognized.
- 4) Keep NRAO. Did the EMR industry influence NSF into closing NRAO? Is this another way to cause harm to technological lepers, because we are viewed as a threat to the EMR industry? Because we are asking for White Zones, is this a way for the EMR industry to prevent us from having Green Bank as a White Zone? The economics from NRAO is needed here for residents and those in forced exile.
- 5) Technological lepers need the FCC and the FCC needs technological lepers. People who detect harmful EMR emissions, are irreplaceable.
- 6) Within the FCC and the U.S. government, is there anyone who is a technological leper? How many technological lepers work there? Have there been people who wished to visit or attend meetings but because they are

technological lepers and become harmed when exposed, they cannot be present? How many people worked for the FCC and the U.S. government and had to leave because they became technological lepers? Were changes made so technological lepers could stay and be productive?

- 7) Put people first. Where is the Precautionary Principle? Can industry, businesses, users of EMR, as well as the FCC be likened to undisciplined orphans?

Undisciplined orphans: doing as they want, self centered – acting for their own interests or gain, putting EMR everywhere, injuring others, hiding information, not taking responsibility, and no one to control them.

- 8) Technology seems to be addictive. Many addicted users of EMR do little else (unknown, 2012 estimated). They become angry and sometimes abusive when there is interference. Possibly, because it is so addictive, they deliberately ignore the harm their actions are causing to others and even to themselves. It seems the addicting pay, rewards, wins, tweets, become the selected activity, even when people, the users, are sensing something is wrong (i.e. headaches, numb fingers, forgetfulness, diabetes, etc.).

Promote the Precautionary Principle.

- 9) Give power to government agencies to protect technological lepers. Tighten the reins to the powerful EMR industry and EMR economy. Technological lepers are not safe and cannot live in peace, when they become injured by EMR emissions in their homes, outdoors on their own properties, at work, at school, and where their families or friends spend time.

Christmas is coming. It is difficult to reach out to others (i.e. friendship, giving, helping, sharing, celebrating) when one needs just the basics i.e. food, warmth, and a place to live.

Give power to government agencies to put people first. Technological lepers need to have guaranteed safe places to live, to function, to survive, and to celebrate life.

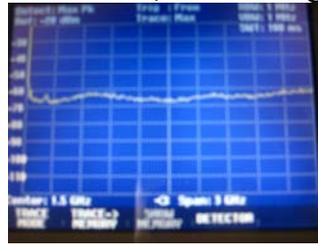
- 10) Distribute credible meters to detect, measure, and record invisible, penetrating: electrical fields, magnetic fields, non-ionizing radiation, and ionizing radiation. It's not just enough to be told that everything is well and it would seem the wireless institutions are not out for our well being. Without meters, it may be claimed EMR does not exist. Building the meters and measuring environments could become valuable detective research businesses. See endnote<sup>ii</sup>

- a) We need to know and be actively aware of what invisible emissions we are living / working / sleeping in on a daily bases. Look at the differences recorded between

Cedar Falls, Iowa 1996 (left) and Green Bank, West Virginia 2012 (right).

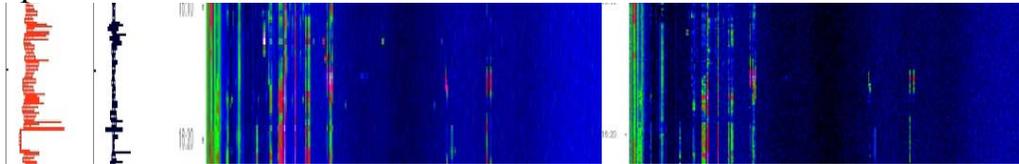


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b) Emissions logged over time, example: document changes, accumulated exposure.



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c) Map EMR within towns, cities and rural areas. Two examples: BEMI by Tegenfeldt (left) and map of potassium concentrations (right)



Google

11) The EMR industry and our government do not seem to be responsible nor respectful. This is fundamental as most business models still do not recognize or take in to account any consideration for the people. Industry and government agencies repeatedly referenced the FCC. As Diane was being harmed, and requested the emissions be checked, the FCC and government agencies contacted would not do so.

12) Wrong assumptions:

- a) Assuming technological lepers react to all frequencies, is false.
- b) Assuming the emission from one cell phone equals or mimics all frequencies is false.

One cell phone does not produce all frequencies.

Technological lepers are individuals, they are not the same. Some technological lepers may be harmed by frequencies others can tolerate and vice versa.

Most technological lepers are injured by a single frequency or several frequencies. Use meters to investigate the unknown frequency at the time and under what conditions. Measure cellular changes, blood changes, heart changes, eye changes, headaches, skin changes, and more effects.

A few technological lepers become disabled when exposed to more than just

several frequencies. Over time, observers need to learn what are the unknown frequencies. Questions: is it a combination of frequencies? Are frequencies modulated or pulsed? Is there something else (i.e. a chemical) present?

Technological lepers do not need meters to know what they detect or when they are being harmed. Meters are needed in such places as churches, cities, hospitals, government places, so others (officials or people) may verify and learn, technological lepers are right.

- 13) EMR detective research: Measure frequencies (*all* frequencies) in the environments where people are harmed.

One technological leper, identified pain – presuming EMR exposure. Two meters showed no emissions from cell phone nor Wi-Fi. The technological leper was certain there was EMR in that environment. A third meter, measuring more frequencies, displayed a powerful emission about 24 GHZ, not of cell phone nor Wi-Fi frequencies. The technological leper was right. If this had been a research study, a report would have incorrectly attributed the pain as imaginary, psychological, or to a nocebo. Could this be a flaw in research that has been cherry picked?

There are many symptoms (Bevington, 2010), many frequencies, and people are not alike. One needs to go to and individual's environment and measure electromagnetic radiation *all* frequencies.

- 14) Allocate dollars for research. While industries will fund their own conclusions, often we the people of this country are the only advocates who can stand up for what is happening. A few research ideas were suggested in “EMR detective research” and other research ideas are in the endnote.<sup>iii</sup>
- 15) Don't phase out telephone lines or the U.S. Postal Service. Wired telephones and the U.S. Mail and direct contact are often the only access to people in exile. What would be used if EMR were to be discontinued?
- 16) Is anyone aware of a developing problem – Twitter, Facebook, email, “.com“ etc. are the only contacts acceptable. When computer usage is required, access is not possible for people harmed or disabled by EMR because being near electronic devices is unbearably harmful for many technological lepers. Require quick access (not always the case with automated telephones) via telephone and U.S. mail with competent people accessible.
- 17) The FCC disregarded testimonies – people reporting harm they witnessed, harm they experienced, and research finding health effects (EMR-Policy-Institute, 2009a) (EMR-Policy-Institute, 2009b). In a 2012 letter, the FCC did not cite documents correlating health effects from EMR exposure such as: (WHO International Agency for Research on Cancer, 2011), (McCarty et al., 2011), (Rea et al., 1991), or research papers written by Dr. Olle Johansson, Dr. Henry Lai, Dr. Samuel Milham, Dr. Andrew Marino, Dr. Magda Havas.

- 18) The FCC enclosed a biased study in their reply. The study of literature by Rubin seems “Cherry picked”; see (Havas, 2012).
- 19) The FCC would not come to document the toxic environment as Diane was being harmed. They repeatedly informed us either a) the cell tower is safe or b) there are no health effects. Harm from EMR is real; protection for people from EMR has not been obtained but is needed.

Injury from EMR is real. Living in our Iowa home, Diane became ill, evidently overexposed from the emissions of a newly built cell tower. If living at home had been safe, Diane wouldn't have been forced into exile, away from Bert, away from managing our research farm business, nor would we have written this letter.

The above requests and requests in the addendum are urgent. The time to act was yesterday, but regulatory action is still possible.

Respectfully Yours,

Diane Schou, Ph.D.

Bert Schou, Ph.D.

Enclosures: Addendum: Requests by Nicols Fox. The WHO International Agency for Research on Cancer. IRAC classifies radiofrequency electromagnetic fields as possibly carcinogenic to humans. Lyon, France: World Health Organization. 2011. (page 1 of 6). Havas M. Science 101: Cherry picking & black swans. 2012 with link to You Tube (please view this).

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<sup>i</sup> Technological leprosy is not a contagious virus – it is a name created to portray the nomadic living conditions experienced by people harmed / injured / disabled by – EMR. To avoid symptoms linked to EMR exposure (Bevington, 2010), technological lepers avoid areas with cell towers, Wi-Fi, smart meters, battery run devices, power lines, etc.; they shy away from people (who carry, wear or use technological devices), and avoid crowds. Many technological lepers experience stigmas of being shunned, abused, harassed, bullied, excluded, and threatened.

Even in remote areas refugees gather, technological lepers find they still need to be cautious. As individuals, they are not the same; some may react to frequencies others can tolerate and vice versa.

Names for this condition include: electromagnetic hypersensitivity, EHS, electromagnetic sensitivity, EMS, electrical sensitivity, ES, microwave sickness, radio wave sickness, idiopathic environmental intolerance, IEI, EMF sensitivity.

Idiopathic is misleading. Illness, sickness, intolerance, or sensitivity portrays there is something wrong with our bodies, we have been injured. Radio-wave sickness implies one is harmed by AM or FM radio frequencies and not harmed by electrical fields, magnetic fields or frequencies above radio bands. Electromagnetic hypersensitivity implies one can tolerate non-ionizing radiation but not electrical or magnetic fields.

Technological lepers have been injured, harmed, disabled, poisoned, overexposed, and are victims from EMR emissions.

More suitable descriptions include: electromagnetic radiation disabled, electromagnetic radiation injured, electromagnetic radiation wounded, harmed by electromagnetic radiation, overexposed to electromagnetic radiation, electromagnetic radiation poisoned, or electromagnetic radiation victim. These descriptions might be too long, use many words, and people generally do not grasp the concept of EMR.

No one wished to be a technological leper (both disabled and the words). When “technological leprosy” is used, many people immediately understand, make changes, and take precautions to protect us.

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- ii Build meters and antennas to measure: the electrical fields, contaminated (dirty) electrical fields, magnetic fields, frequencies of non-ionizing radiation (to study all frequencies, combinations of frequencies, pulsing or modulation), ionizing radiation (Fukushima, etc.), GPS coordinates, date and times. Build the meters to record and save. Build transportable meters that are accurate, easy to use and easy to understand. Build meters to log emissions over time. Build meters that are similar to black boxes in aircraft and easily accessed for use in vehicles. Build meters that could have revealed EMR influence before and during events such as the Detroit marathon. Build meters that log EMR exposure levels and changes when errors occur in operating rooms. Include EMR meters in black boxes to document when pilots make errors in aircraft. Build meters to report EMR levels and changes when vehicle accidents occur. Install meters in environments where learning or alertness is important, Build meters to measure EMR in environments where people become ill. Build meters in environments where poor decisions are made.

Build meters to map EMR in towns, cities and rural areas. Maps of EMR are helpful for people and officials to compare health effects and location or time of environmental exposures. Maps help people decide where to live. Maps warn of unsafe environments. Get measurements of emissions published and available to people. Build meters to record photos of locations as well as emissions, GPS coordinates, and time.

- iii Research questions from a technological leper:

- Do EMR environmental conditions affect abilities to multi-task? To react quickly? Document changes or accumulations of EMR, look for trends, note incidences, to avoid future disasters. It is not likely the contaminating EMR in the environment can be reliably measured after the fact. If a logging meter were working before, during, and after, precautions could be places to avoid future problems.
- What were the EMR environmental conditions when: a) the airport control tower operators fell asleep? b) pilots forgot to land at the Minneapolis Airport? c) control tower error, planes too close? d) it was unusual that three healthy marathon runners died in Detroit; isn't it suspect when two runners died at the same time, and two runners died at the same location? e) increased suicides by military personnel who were not deployed? f) surgical errors increased at a Rhode Island hospital? Was EMR involved in any of these? Harm can be direct, indirect, or both.
- Where does the radiation go? Where is it absorbed? Exposed / not exposed / exposure over time: changes in plants, changes in plant location, changes in animals, changes in insects. Exposed / not exposed / exposure over time: changes in DNA, changes in viruses, changes in the blood brain barrier, changes in blood. What are time frame trends for people to be harmed? How can exposure accumulations be measured? What are the time frames for technological lepers to be healed when not exposed?

Addendum  
Requests by Nicols Fox

CHANGES CRITICAL TO THE HEALTH, SAFETY AND WELLBEING OF  
INDIVIDUALS SENSATIVE TO RADIOFREQUENCY RADIATION

1. Establish a White Zone or White Zones where the creation of radio-frequency radiation is prohibited. These should be of a size sufficient to encompass a circle of which the radius is at least ten miles. No cell towers or other devices, machinery or appliance capable of producing detectable levels of radiofrequency radiation should be allowed to operate within this zone.
2. The recognition by the Department of Justice, the FCC and any other agency of government with the power to regulate or enforce the placement or authorization to operate any device emitting electromagnetic radiation.
3. Recognize that electromagnetic hypersensitivity, also known as electromagnetic sensitivity, microwave sickness, radio wave sickness, EMF, EHS, technological leprosy, is a health condition, that it be given a code, and that it be accepted as a disability.
4. Electromagnetic radiation emissions
  - a. Cell towers, Wi-Fi, and electromagnetic radiation devices, the levels of their emissions, their frequencies, their placement and their height all need to be regulated. [At the moment there are NO regulations at all, discovered by Nicols Fox and others as they inquired for information. Supposedly they are, but they were not, especially the emissions that are harming Nicols Fox in her home. Comment by Diane Schou].
  - b. Their locations need to be mapped. Maps showing the location of cell towers must be published on the FCC website in full view, fully identified and easily accessible to the general public. It is virtually impossible to find out who is erecting them, if and when they are turned on, and what frequency and how much of it they are emitting.
  - c. All these requirements need to be met within 30 days of the placement of any cell tower and before it begins the commencement of emitting radiation. At the moment, no agency neither local, state, or federal, has any idea where cell towers are being placed or how they operate.
5. Local governments should be required to employ individuals who are trained in the use of quality meters capable of the accurate measurement of electrical fields, magnetic fields and non-ionizing radiation. Individuals have a right to know the amount and type of radiation present in areas where they are sleeping, eating and raising their children. (Let us remember that the Russians were bombarding the American embassy in Moscow when George W. Bush and Mrs. Bush were residents. An usual number of embassy staff developed leukemia).
6. The National Academy of Sciences should be given the task of researching all the available medical studies on the effects of exposure to different frequencies of radiation and writing a report on their conclusions. This report should be made available immediately on completion at no cost to the American public.
7. Any agency (federal, state and local) and any business or private concern or foundation that operates any device producing any form of radiation should have information about this operation, including accurate location of all devices, the type and amount of radiation being

produced available on the internet within 24 hour of commencement of broadcast and should have a hot-line available 24-hours a day with a knowledgeable individual.

8. The paper the FCC enclosed was biased. Search for another paper also written by Rubin which appeared in British Medical Journal in 2006 (Rubin JG, Hahn G, Everitt BS, Cleare AJ, Wessley S. Are some people sensitive to mobile phone signals? Within participants double blind randomized provocation study. Br Med J. 2006;332:886-91). The abstract to this study appears to show that EMR is psychological in origin. However, a close search of the entire study would demonstrate its weakness. For example, truly ES individuals would have been eliminated as subjects by the fact the study was conducted in a) an urban area, b) a modern office building, c) an office furnished with modern office equipment. Any of these would have been a deterrent to the participating of sensitive individuals.
9. Finally, the omissions of the FCC in its response to Senator Grassley and Schou need to be corrected. The FCC failed to cite the many documents correlating adverse health effects from electromagnetic radiation exposure.

Nicols Fox, who prepared the above requests, is a person who was harmed in Maine from electromagnetic radiation overexposure about four years ago. She sold her Maine home (at a loss), came to the radio quiet zone, wrote and sent a testimony to the FCC (EMR-Policy-Institute, 2009), bought land where she was told no tower would be built and where she felt she could be more productive since she is an author and felt more comfortable near the city of Lewisburg, about 50 miles from NRAO but within the national radio quiet zone, had a small house built, moved in, and created a home. The BBC interviewed each Nicols Fox and Diane Schou (O'Brien & Danzico, 2011).

The bad news: about two years ago, a cell tower was to be built, Nicols Fox alerted then fought the planning commission against the tower and location (one of the members owned the property), unsuccessfully tried to find when it would be and when it was activated (no one knew), what frequencies it operated (no one knew), what the power levels (amplitudes) she was and is being exposed to inside her home and outdoors on her property around the clock (no one knows).

Nicols Fox is in extreme pain and ill – likely from EMR and emissions from the tower.

Help.

Please, “put people before politics” (Governor Romney concession speech, November 6, 2012). Her requests and the requests by Bert and Diane Schou are urgent. The time to act was yesterday, but regulatory action is still possible.

#### References

- EMR-Policy-Institute. (2009). In the Matter of A National Broadband Policy for Our Future: EMR Policy Institute Comment. In FCC (Ed.), (pp. 485). P.O. Box 117 Marshfield, VT 05658: Federal Communications Commission GN Docket 09-51.
- O'Brien, J., & Danzico, M. (2011). Wi-fi refugees' shelter in West Virginia mountains. Green Bank, WV BBC News, <http://www.bbc.co.uk/news/world-us-canada-14887428>

## IARC CLASSIFIES RADIOFREQUENCY ELECTROMAGNETIC FIELDS AS POSSIBLY CARCINOGENIC TO HUMANS

Lyon, France, May 31, 2011 -- The WHO/International Agency for Research on Cancer (IARC) has classified radiofrequency electromagnetic fields as [possibly carcinogenic to humans \(Group 2B\)](#), based on an increased risk for [glioma](#), a malignant type of brain cancer<sup>1</sup>, associated with wireless phone use.

### Background

Over the last few years, there has been mounting concern about the possibility of adverse health effects resulting from exposure to radiofrequency electromagnetic fields, such as those emitted by wireless communication devices. The number of mobile phone subscriptions is estimated at [5 billion globally](#).

From [May 24–31 2011, a Working Group of 31 scientists from 14 countries has been meeting at IARC in Lyon, France, to assess the potential carcinogenic hazards from exposure to radiofrequency electromagnetic fields](#). These assessments will be published as Volume 102 of the IARC *Monographs*, which will be the fifth volume in this series to focus on physical agents, after [Volume 55](#) (Solar Radiation), [Volume 75](#) and [Volume 78](#) on ionizing radiation (X-rays, gamma-rays, neutrons, radio-nuclides), and [Volume 80 on non-ionizing radiation \(extremely low-frequency electromagnetic fields\)](#).

The IARC Monograph Working Group discussed the possibility that these exposures might induce long-term health effects, in particular an increased risk for cancer. This has relevance for public health, particularly for users of mobile phones, as the number of users is large and growing, particularly among young adults and children.

The IARC Monograph Working Group discussed and evaluated the available literature on the following exposure categories involving radiofrequency electromagnetic fields:

- occupational exposures to radar and to microwaves;
- environmental exposures associated with transmission of signals for radio, television and wireless telecommunication; and
- personal exposures associated with the use of wireless telephones.

International experts shared the complex task of tackling the [exposure data, the studies of cancer in humans, the studies of cancer in experimental animals, and the mechanistic and other relevant data](#).

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<sup>1</sup> [237 913 new cases of brain cancers](#) (all types combined) occurred around the world in 2008 (gliomas represent 2/3 of these). Source: [Globocan 2008](#)

## SCIENCE 101: CHERRY PICKING & BLACK SWANS



July 26, 2012. When I am asked to testify as an **expert witness** at a hearing, I am asked to submit a written document that will accompany my oral testimony. The question I address in my expert testimony is, "What scientific evidence do we have that this form of energy (low frequency electromagnetic fields, radio frequency radiation, or whatever) is harmful below guidelines?"

But that is not the question **adjudicators** want to hear. They want scientists to present a review of ALL literature so they can decide for themselves even though they are not qualified to address that question—no matter how brilliant they may be—if they don't understand the scientific method. **There is a disconnect between the legal system and the scientific method** and *weight-of-evidence* and *falsifiability* are two areas where the legal system fails to understand science.

**Journalists** often make the same mistake and label scientists as being biased or having preferences when they present information showing that something is harmful without presenting the same number of studies showing that something is safe.

Unfortunately, **policy makers** fall into the same category. *They just don't get it!* And—because *they don't get it*—we have a lag in critical policy decisions that need to be made in a timely fashion. The result is that guidelines remain non-protective for much longer than necessary.

One key that gives this away are statements using the "**c-words.**" What are "c-words"? *Conclusive, consistent, convincing* often placed before the word "evidence" and preceded by the word "no".

A typical statement might be, "We have no conclusive, consistent, convincing evidence that bla-bla-bla is harmful below guidelines." As soon as you hear these words you recognize that evidence does exist but the person making

this statement doesn't hold that evidence in high regard. That person seldom expands by indicating what kind of evidence would be classified as *conclusive*, *consistent* or *convincing*, because if that evidence were available s/he would be in a quandary.

Science has a way of dealing with this "confusion" (another c-word) and that is the concept of falsifiability coined by Sir Karl Popper, one of the leading and most influential philosophers of science in the 20th century.

That concept is explained in a 10-minute video entitled "Science 101: Cherry Picking & Black Swans." Click [here](#) for link to video and send it to your favorite journalist, policy maker, and lawyer who deal with issues that involve science.

<http://www.magdahavas.com/science-101-cherry-picking-black-swans/>

<http://www.youtube.com/watch?v=QyzZX-bCiqs> View this You Tube