

Behavioral Stressor

Positive Effects on Learning Disabilities with EMF Stressors Present

A one-month study was conducted by Evelyn Wiseman, Educational Director, New Way School in Scottsdale, Arizona. This is a small school for children with learning disabilities, attention disorder and underachievers. These students have normal intelligence and potential, but have been failing in mainstream education for a number of different reasons, including hyperactivity, dyslexia, mild depression, and other reasons. None are emotionally handicapped, delinquent, behavior disordered, or mentally retarded.

Fifty-two students ranging in age from 6 and 19, and enrolled at various levels from primary school to high school, as well as 11 teachers participated in the study. The school is situated near a power station, and one or more computers are in each classroom with fluorescent lighting, creating EMF stressors throughout the building.

Two different application systems of SRT were used in the study: an active unit (Group A), and a placebo unit (Group B), in alternating fashion each week as follows. At the beginning of the 1st week, Group A units were placed throughout the school. At the beginning of the 2nd week, Group I units replaced them. During the 3rd week, Group A units were used once again, and in the 4th week, Group I units were used again.

As a standard practice, behavioral tracking procedures in the form of a daily report card were in place and used at the school as a negative behavior modification technique for each student, grades 1 through 12. The teachers had been tracking each child's behavior for several months daily before the study as a standard procedure. Eleven key behavioral Categories already in use were tracked for the study. The teachers continued to perform the same evaluation process daily on participating student. A controlled double blind study was conducted in which the teachers did not know which the active or sham unit was. In addition, the students were naïve and unaware that a test was being conducted, as were the majority of the teachers. The following variables were addressed when analyzing the data:

1. variability of behavior of individual children (from one week to the next);
2. class/age variability;
3. variability of each of the maladaptive behaviors; and
4. effects of categories of behavior (i.e. academic, emotional, social and physical).

Data was collected daily on each student.

The results are summarized in the table below:

Impact of SRT on students with learning disabilities exposed to EMF stressors at New Way School

"Maladaptive Behavior Event" Criteria	Group A (Active Unit with SRT)	Group B (Placebo Units)	% Difference SRT vs Placebo
Academic Criteria			
Not on task	67	128	-48%
Trouble following directions	65	132	-51%
Work not completed	22	42	-48%
Academic Criteria Tools	154	302	-49%
Emotional Criteria			
Irritability	37	61	-39%
Outburst	23	55	-58%
Withdrawn	15	17	-12%
Emotional Criteria Tools	75	133	-44%
Social Criteria			
Problems interacting with PEERS	43	41	5%
Problems interacting with STAFF	20	27	-26%
Social Criteria Tools	63	68	-7%
Physical Criteria			
Hyperactivity	60	79	-24%
Headaches	17	18	-6%
Fatigue	36	49	-27%
Physical Criteria Tools	113	146	-23%
Total Reduction in all "maladaptive behavior"	405	649	-38%

The results show dramatic decreases in behavioral problems in all 4 criteria when the Group A "active" SRT was used. The most dramatic changes were seen for the academic criteria, which encompassed the following behavioral problems: "not on task", "trouble following directions" and "work not completed". In this category of academic criteria, the decrease in behavioral problems were 49% overall. The total reduction in all maladaptive behaviors when using active SRT was 38%.

These results are encouraging, although these data are preliminary due to limited duration of the study and the small number of participants.