

## **Industrial Wind Turbines and Health: Wind Turbines Can Harm Humans if too Close to Residents<sup>1</sup>**

### **A summary of peer reviewed articles their abstracts and citations regarding adverse health effects and industrial wind turbines<sup>2</sup>**

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**The Noise from Wind Turbines: Potential Adverse Impacts on Children's Well-Being**  
**Arline L. Bronzaft**

Bulletin of Science Technology & Society 2011 31: 256, DOI: 10.1177/0270467611412548,  
<http://bst.sagepub.com/content/31/4/291>



**Bio:** Dr. Arline L. Bronzaft is a Professor Emerita of Lehman College, City University of New York. She serves on the Mayor's GrowNYC, having been named to this organization by three previous Mayors as well. Dr. Bronzaft is the author of landmark research on the effects of elevated train noise on children's classroom learning; has examined the impacts of airport-related noise on quality of life; and has published articles on noise in environmental books, academic journals and the more popular press. In 2007, she assisted in the updating of the New York City Noise Code.

#### **Abstract**

Research linking loud sounds to hearing loss in youngsters is now widespread, resulting in the issuance of warnings to protect children's hearing. However, studies attesting to the adverse effects of intrusive sounds and noise on children's overall mental and physical health and well-being have not received similar attention. This, despite the fact that many studies have demonstrated that intrusive noises such as those from passing road traffic, nearby rail systems, and overhead aircraft can adversely affect children's cardiovascular system, memory, language development, and learning acquisition. While some schools in the United States have received funds to abate intrusive aircraft noise, for example, many schools still expose children to noises from passing traffic and overhead aircraft. Discussion focuses on the harmful effects of noise on children, what has to be done to remedy the situation, and the need for action to lessen the impacts of noise from all sources. Furthermore, based on our knowledge of the harmful effects of noise on children's health and the growing body of

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<sup>1</sup> Excerpted from Case Nos.: 10-121/10-122 Erickson v. Director, Ministry of the Environment Environmental Review Tribunal, Decision, p 207 "This case has successfully shown that the debate should not be simplified to one about whether wind turbines can cause harm to humans. The evidence presented to the Tribunal demonstrates that they can, if facilities are placed too close to residents. The debate has now evolved to one of degree."

<sup>2</sup> Summary focuses on the evidence regarding risk to health: summaries from published literature 2010 to March 2012

evidence to suggest the potential harmful effects of industrial wind turbine noise, it is strongly urged that further studies be conducted on the impacts of industrial wind turbines on their health, as well as the health of their parents, before forging ahead in siting industrial wind turbines.

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### Wind Turbine Noise

**John P. Harrison**

Bulletin of Science Technology & Society 2011 31: 256, DOI:

10.1177/0270467611412549,

<http://bst.sagepub.com/content/31/4/256>



**Bio:** Dr. John P. Harrison has expertise in the properties of matter at low temperatures with emphasis on high frequency sound waves (phonons). For the past 5 years he has studied wind turbine noise and its regulation. He has presented invited talks on the subject at 3 conferences, including the 2008 World Wind Energy Conference.

#### **Abstract**

Following an introduction to noise and noise regulation of wind turbines, the problem of adverse health effects of turbine noise is discussed. This is attributed to the characteristics of turbine noise and deficiencies in the regulation of this noise. Both onshore and offshore wind farms are discussed.

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#### **Editorial**

#### **Wind turbine noise**

**Christopher D Hanning and Alun Evans**

British Medical Journal, BM J2 012;344d oi: 10.1136/ bmj.e1527 (8 March 2012)

[www.bmj.com](http://www.bmj.com)

# BMJ

**Bio:** Christopher Hanning, BSc, MB, BS, MRCS, LRCP, FRCA, MD is an honorary consultant in sleep medicine Sleep Disorders Service, University Hospitals of Leicester, Leicester General Hospital, Leicester, UK  
Dr Chris Hanning is Honorary Consultant in Sleep Disorders Medicine to the University Hospitals of Leicester NHS Trust, UK. He retired in September 2007 as Consultant in Sleep Disorders Medicine.

After initial training in anaesthesia, he developed an interest in Sleep Medicine. He founded and ran the Leicester Sleep Disorders Service, one of the longest standing and largest services in the UK. He was a founder member and President of the British Sleep Society

His expertise in this field has been accepted by the civil, criminal and family courts. He chairs the Advisory panel of the SOMNIA study, a major project investigating sleep quality in the elderly, and sits on Advisory panels for several companies with interests in sleep medicine.

**Bio:** Alun Evans, is an epidemiologist, Centre for Public Health, Queen's University of Belfast, Institute of Clinical Science B, Belfast, UK

**Except from BMJ web site:**

Seems to affect health adversely and an independent review of evidence is needed.

The evidence for adequate sleep as a prerequisite for human health, particularly child health, is overwhelming. Governments have recently paid much attention to the effects of environmental noise on sleep duration and quality, and to how to reduce such noise. However, governments have also imposed noise from industrial wind turbines on large swathes of peaceful countryside.

The impact of road, rail, and aircraft noise on sleep and daytime functioning (sleepiness and cognitive function) is well established. Shortly after wind turbines began to be erected close to housing, complaints emerged of adverse effects on health. Sleep disturbance was the main complaint. Such reports have been dismissed as being subjective and anecdotal, but experts contend that the quantity, consistency, and ubiquity of the complaints constitute epidemiological evidence of a strong link between wind turbine noise, ill health, and disruption of sleep.

The noise emitted by a typical onshore 2.5 MW wind turbine has two main components. A dynamo mounted on an 80 m tower is driven through a gear train by ...

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**Literature Reviews on Wind Turbines and Health : Are They Enough?**

**Brett Horner, Roy D. Jeffery and Carmen M. E. Krogh**

Bulletin of Science Technology & Society 2011 31: 399. DOI: 10.1177/0270467611421849

<http://bst.sagepub.com/content/31/5/399>



**Bio:** Brett Horner, BA, is a certified management accountant and has held senior manager positions in international business consulting groups. He has provided information technology consulting and accounting/auditing services to a wide variety of clientele. He has dedicated over 2 years reviewing and analyzing references on the subject of industrial wind turbines and reported health effects.

**Bio:** Roy D. Jeffery, MD, is a rural family physician and a clinical preceptor for the University of Ottawa and the Northern Ontario Medical Schools. He practices rural medicine with special interests regarding geriatric home care and rural health. He has the distinction of being awarded the Ontario Family Physician of the Year–Northern Division in 2008.

**Bio:** Carmen M. E. Krogh, BSc Pharm, is a retired pharmacist with more than 40 years of experience in health. She has held senior executive positions at a major teaching hospital, a professional association, and Health Canada. She was a former director of Publications and editor-in-chief of the Compendium of Pharmaceutical and Specialties, the book used in Canada by physicians, nurses, and other health professions for prescribing information on medication.

### **Abstract**

Industrial wind turbines (IWTs) are a new source of community noise to which relatively few people have yet been exposed. IWTs are being erected at a rapid pace in proximity to human habitation. Some people report experiencing adverse health effects as a result of living in the environs of IWTs. In order to address public concerns and assess the plausibility of reported adverse health effects, a number of literature reviews have been commissioned by various organizations. This article explores some of the recent literature reviews on IWTs and adverse health effects. It considers the completeness, accuracy, and objectivity of their contents and conclusions. While some of the literature reviews provide a balanced assessment and draw reasonable scientific conclusions, others should not be relied on to make informed decisions. The article concludes that human health research is required to develop authoritative guidelines for the siting of IWTs in order to protect the health and welfare of exposed individuals.

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**Wind Turbines Make Waves:  
Why Some Residents Near Wind Turbines Become Ill  
Magda Havas and David Colling**

Bulletin of Science Technology & Society 2011 31: 414. DOI: 0.1177/0270467611417852  
<http://bst.sagepub.com/content/31/5/369>



**Bio:** Magda Havas, PhD, is an associate professor at Trent University where she teaches and conducts research on the biological and health effects of electromagnetic and chemical pollutants. She received her BSc and PhD at the University of Toronto and did postdoctoral research at Cornell University on acid rain and aluminum toxicity .

**Bio:** David Colling has applied his electrical engineering studies at Ryerson Polytechnical Institute and his specialized training in electrical pollution to conduct electrical pollution testing for Bio-Ag on farms, homes, and office buildings. Some of the homes tested are located in the environs of industrial wind turbines.

### **Abstract**

People who live near wind turbines complain of symptoms that include some combination of the following: difficulty sleeping, fatigue, depression, irritability, aggressiveness, cognitive dysfunction, chest pain/pressure, headaches, joint pain, skin irritations, nausea, dizziness, tinnitus, and stress. These symptoms have been attributed to the pressure (sound) waves that wind turbines generate in the form of noise and infrasound. However, wind turbines also generate electromagnetic waves in the form of poor power quality (dirty electricity) and ground current, and these can adversely affect those who are electrically hypersensitive. Indeed, the symptoms mentioned above are consistent with electrohypersensitivity. Sensitivity to both sound and electromagnetic waves differs among individuals and may explain why not everyone in the same home experiences similar effects. Ways to mitigate the adverse health effects of wind turbines are presented.

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## **Industrial Wind Turbine Development and Loss of Social Justice?**

**Carmen M.E. Krogh**

Bulletin of Science Technology & Society 2011 31: 321, DOI: 10.1177/0270467611412550,  
<http://bst.sagepub.com/content/31/4/321>



**Bio:** Carmen M. E. Krogh, BScPharm is a retired pharmacist with more than 40 years of experience in health. She has held senior executive positions at a major teaching hospital, a professional association and Health Canada. She was a former Director of Publications and Editor-in-chief of *the Compendium of Pharmaceutical and Specialties (CPS)*, the book used in Canada by physicians, nurses and other health professions for prescribing information on medication.

### **Abstract**

This article explores the loss of social justice reported by individuals living in the environs of industrial wind turbines (IWTs). References indicate that some individuals residing in proximity to IWT facilities experience adverse health effects. These adverse health effects

are severe enough that some families have abandoned their homes. Individuals report they welcomed IWTs into their community and the negative consequences were unexpected. Expressions of grief are exacerbated by the emotional and physical toll of individuals' symptoms, loss of enjoyment of homes and property, disturbed living conditions, financial loss, and the lack of society's recognition of their situation. The author has investigated the reported loss of social justice through a review of literature, personal interviews with, and communications from, those reporting adverse health effects. The author's intention is to create awareness that loss of social justice is being associated with IWT development. This loss of justice arises from a number of factors, including the lack of fair process, the loss of rights, and associated disempowerment. These societal themes require further investigation. Research by health professionals and social scientists is urgently needed to address the health and social impacts of IWTs operating near family homes.

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**WindVOiCe, a Self-Reporting Survey: Adverse Health Effects, Industrial Wind Turbines, and the Need for Vigilance Monitoring**  
**Carmen M.E. Krogh, Lorrie Gillis, Nicholas Kouwen, and Jeffery Aramini**

Bulletin of Science Technology & Society 2011 31: 334, DOI: 10.1177/0270467611412551,  
<http://bst.sagepub.com/content/31/4/334>



**Bio:** Carmen M. E. Krogh, BScPharm is a retired pharmacist with more than 40 years of experience in health. She has held senior executive positions at a major teaching hospital, a professional association and Health Canada. She was a former Director of Publications and Editor-in-chief of the *Compendium of Pharmaceutical and Specialties (CPS)*, the book used in Canada by physicians, nurses and other health professions for prescribing information on medication.

**Bio:** Ms Lorrie Gillis is the process administrator for the WindVOiCe health survey. Ms Gillis volunteers her time and ensures the processes for administering the protocols are maintained.

**Bio:** Dr. Nicholas Kouwen is a Distinguished Professor Emeritus in the Department of Civil and Environmental Engineering of the University of Waterloo, Waterloo, Ontario, Canada. He is a registered Professional Engineer (Ontario) and a Fellow of the American Society of Civil Engineers. His field of expertise is in hydraulic and hydrological modelling and is currently involved in studies dealing with the impact of climate change on water availability.

**Bio:** Dr. Jeff Aramini is a public health epidemiologist with expertise in the investigation of health concerns using epidemiological principles. DVM and M.Sc. from the University of

Saskatchewan; Ph.D. from the University of Guelph. Former senior epidemiologist with Health Canada/Public Health Agency of Canada. Currently, President and CEO of an organization that addresses public health, patient care, public safety and information management for clients in government, industry and academia.

### **Abstract**

Industrial wind turbines have been operating in many parts of the globe. Anecdotal reports of perceived adverse health effects relating to industrial wind turbines have been published in the media and on the Internet. Based on these reports, indications were that some residents perceived they were experiencing adverse health effects. The purpose of the WindVOiCe health survey was to provide vigilance monitoring for those wishing to report their perceived adverse health effects. This article discusses the results of a self reporting health survey regarding perceived adverse health effects associated with industrial wind turbines.

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### **Low-frequency noise from large wind turbines**

**Henrik Møller and Christian Sejer Pedersen**

**Section of Acoustics, Aalborg University,**

**Fredrik Bajers Vej 7-B5, DK-9220 Aalborg Ø, Denmark, Acoustical Society of America**

**[DOI: 10.1121/1.3543957] J. Acoust. Soc. Am. 129 (6), June 2011 PACS number(s):**

**43.50.Rq, 43.28.Hr, 43.50.Cb, 43.50.Sr [ADP] Pages: 3727–3744**



### **Abstract**

As wind turbines get larger, worries have emerged that the turbine noise would move down in frequency and that the low-frequency noise would cause annoyance for the neighbors. The noise emission from 48 wind turbines with nominal electric power up to 3.6 MW is analyzed and discussed. The relative amount of low-frequency noise is higher for large turbines (2.3–3.6 MW) than for small turbines (<math>2</math> MW), and the difference is statistically significant. The difference can also be expressed as a downward shift of the spectrum of approximately one-third of an octave. A further shift of similar size is suggested for future turbines in the 10-MW range. Due to the air absorption, the higher low-frequency content becomes even more pronounced, when sound pressure levels in relevant neighbor distances are considered. Even when A-weighted levels are considered, a substantial part of the noise is at low frequencies, and for several of the investigated large turbines, the one-third-octave band with the highest level is at or below 250 Hz. It is thus beyond any doubt that the low-frequency part of the spectrum plays an important role in the noise at the neighbors.

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**Toward a Case Definition of Adverse Health Effects in the Environs of Industrial Wind Turbines: Facilitating a Clinical Diagnosis**

**Robert Y. McMurtry**

Bulletin of Science Technology & Society 2011 31: 316, DOI: 10.1177/0270467611415075,  
<http://bst.sagepub.com/content/31/4/316>



**Bio:** Dr. Robert Y. McMurtry is the former Dean of Medicine for the University of Western Ontario. He was a member of the Health Council of Canada for 3½ years and a member and special advisor to the Royal Commission under Roy Romanow on the future of health care in Canada. Dr. McMurtry was a visiting Cameron Chair to Health Canada for providing policy advice to the Minister and Deputy Minister of Health. He was the Founding and Associate Deputy Minister of Population & Public Health, Canada. Dr. McMurtry also sat on the National Steering Committee on Climate Change and Health Assessment. Presently Dr. McMurtry is Professor (Emeritus) of Surgery, University of Western Ontario.

**Abstract**

Internationally, there are reports of adverse health effects (AHE) in the environs of industrial wind turbines (IWT). There was multidisciplinary confirmation of the key characteristics of the AHE at the first international symposium on AHE/IWT. The symptoms being reported are consistent internationally and are characterized by crossover findings or a predictable appearance of signs and symptoms present with exposure to IWT sound energy and amelioration when the exposure ceases. There is also a revealed preference of victims to seek restoration away from their homes. This article identifies the need to create a case definition to establish a clinical diagnosis. A case definition is proposed that identifies the sine qua non diagnostic criteria for a diagnosis of adverse health effects in the environs of industrial wind turbines. Possible, probable, and confirmed diagnoses are detailed. The goal is to foster the adoption of a common case definition that will facilitate future research efforts.

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**Properly Interpreting the Epidemiologic Evidence About the Health Effects of Industrial Wind Turbines on Nearby Residents**

**Carl V. Phillips**

Bulletin of Science Technology & Society 2011 31: 303, DOI: 10.1177/0270467611412554,  
<http://bst.sagepub.com/content/31/4/303>





**Bio:** Dr. Carl V. Phillips is a consultant and author specializing in epidemiology, science-based policy making, and communicating scientific concepts to the public. He spent most of his career as a professor of public health and now works in litigation support, scientific advising, and grant-supported research. He blogs at [ep-ology.blogspot.com](http://ep-ology.blogspot.com), which provides links to his other writings.

### **Abstract**

There is overwhelming evidence that wind turbines cause serious health problems in nearby residents, usually stress-disorder type diseases, at a nontrivial rate. The bulk of the evidence takes the form of thousands of adverse event reports. There is also a small amount of systematically gathered data. The adverse event reports provide compelling evidence of the seriousness of the problems and of causation in this case because of their volume, the ease of observing exposure and outcome incidence, and case-crossover data. Proponents of turbines have sought to deny these problems by making a collection of contradictory claims including that the evidence does not “count,” the outcomes are not “real” diseases, the outcomes are the victims’ own fault, and that acoustical models cannot explain why there are health problems so the problems must not exist. These claims appeared to have swayed many nonexpert observers, though they are easily debunked. Moreover, though the failure of models to explain the observed problems does not deny the problems, it does mean that we do not know what, other than kilometers of distance, could sufficiently mitigate the effects. There has been no policy analysis that justifies imposing these effects on local residents. The attempts to deny the evidence cannot be seen as honest scientific disagreement and represent either gross incompetence or intentional bias.

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### **Occupational Health and Industrial Wind Turbines: A Case Study**

**Robert W. Rand, Stephen E. Ambrose, and Carmen M. E. Krogh**

Bulletin of Science Technology & Society 2011 31: 359 DOI: 10.1177/0270467611417849

<http://bst.sagepub.com/content/31/5/359>



**Bio:** Robert W. Rand is a principal author with over 30 years of experience in industrial noise control, environmental sound, and general acoustics. A member of the Institute of Noise Control Engineering since 1993, he runs a small business providing consulting, investigator, and design services in acoustics.

**Bio:** Stephen E. Ambrose is a principal author with over 35 years of experience in industrial noise control. A member of the Institute of Noise Control Engineering since 1978, he runs a small business providing cost-effective environmental noise consulting services for industrial and commercial businesses, municipal and state governments, and private citizens.

**Bio:** Carmen M. E. Krogh, BScPharm, who provided health-related research and reference support, is a retired pharmacist with more than 40 years of experience in health. She has held senior executive positions at a major teaching hospital, a professional association, and Health Canada. She was a former Director of Publications and Editor in Chief of the *Compendium of Pharmaceutical and Specialties (CPS)*, the book used in Canada by physicians, nurses, and other health professions for prescribing information on medication.

### **Abstract**

Industrial wind turbines (IWTs) are being installed at a fast pace globally. Researchers, medical practitioners, and media have reported adverse health effects resulting from living in the environs of IWTs. While there have been some anecdotal reports from technicians and other workers who work in the environs of IWTs, little is known about the occupational health sector. The purpose of this case study is to raise awareness about the potential for adverse health effects occurring among workers. The authors propose that there is a need for research regarding occupational worker exposure relating to IWTs.

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### **Responses of the ear to low frequency sounds, infrasound and wind turbines.**

**Alec N. Salt and T.E. Hullar.**

**Department of Otolaryngology,**

**Washington University School of Medicine, St. Louis, MO, 63110, USA.**

Hearing Research 2010 Sep 1; 268(1-2):12-21. Epub 2010 Jun 16



### **Abstract**

Infrasound sounds are generated internally in the body (by respiration, heartbeat, coughing, etc) and by external sources, such as air conditioning systems, inside vehicles, some industrial processes and, now becoming increasingly prevalent, wind turbines. It is widely assumed that infrasound presented at an amplitude below what is audible has no influence on the ear. In this review, we consider possible ways that low frequency sounds, at levels that may or may not be heard, could influence the function of the ear. The inner ear has elaborate mechanisms to attenuate low frequency sound components before they are transmitted to the brain. The auditory portion of the ear, the cochlea, has two types of sensory cells, inner hair cells (IHC) and outer hair cells (OHC), of which the IHC are coupled to the afferent fibers that transmit "hearing" to the brain. The sensory stereocilia ("hairs") on the IHC are "fluid coupled" to mechanical stimuli, so their responses depend on stimulus velocity and their sensitivity decreases as sound frequency is lowered. In contrast, the OHC are directly coupled to mechanical stimuli, so their input remains greater than for IHC at low frequencies. At very low frequencies the OHC are stimulated by sounds at levels below those that are

heard. Although the hair cells in other sensory structures such as the saccule may be tuned to infrasonic frequencies, auditory stimulus coupling to these structures is inefficient so that they are unlikely to be influenced by airborne infrasound. Structures that are involved in endolymph volume regulation are also known to be influenced by infrasound, but their sensitivity is also thought to be low. There are, however, abnormal states in which the ear becomes hypersensitive to infrasound. In most cases, the inner ear's responses to infrasound can be considered normal, but they could be associated with unfamiliar sensations or subtle changes in physiology. This raises the possibility that exposure to the infrasound component of wind turbine noise could influence the physiology of the ear.

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## **Infrasound From Wind Turbines Could Affect Humans**

**Alec N. Salt and James A. Kaltenbach****Infrasound**

Bulletin of Science Technology & Society 2011 31: 296, DOI: 10.1177/0270467611412555,

<http://bst.sagepub.com/content/31/4/296>



**Bio:** Alec N. Salt received his PhD from the University of Birmingham, UK, in 1977 and has been actively involved in research into the physiology of the ear for over 35 years.

**Bio:** James A. Kaltenbach received his PhD from the University of Pennsylvania in 1984. He specializes in the neurobiology of hearing disorders and is currently the Director of Otology Research at the Cleveland Clinic.

### **Abstract**

Wind turbines generate low-frequency sounds that affect the ear. The ear is superficially similar to a microphone, converting mechanical sound waves into electrical signals, but does this by complex physiologic processes. Serious misconceptions about low-frequency sound and the ear have resulted from a failure to consider in detail how the ear works. Although the cells that provide hearing are insensitive to infrasound, other sensory cells in the ear are much more sensitive, which can be demonstrated by electrical recordings. Responses to infrasound reach the brain through pathways that do not involve conscious hearing but instead may produce sensations of fullness, pressure or tinnitus, or have no sensation. Activation of subconscious pathways by infrasound could disturb sleep. Based on our current knowledge of how the ear works, it is quite possible that low-frequency sounds at the levels generated by wind turbines could affect those living nearby.

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**Public Health Ethics, Legitimacy, and the Challenges of Industrial Wind Turbines: The Case of Ontario, Canada**

**Martin Shain**

Bulletin of Science Technology & Society, 2011 31: 256, DOI: 10.1177/0270467611412552,  
<http://bst.sagepub.com/content/31/4/346>



**Bio:** Martin Shain S.J.D. is trained in law and social sciences. He is principal and founder of the Neighbour at Work Centre® and assistant professor at the Dalla Lana School of Public Health, Occupational and Environmental Health Division, University of Toronto.

**Abstract**

While industrial wind turbines (IWTs) clearly raise issues concerning threats to the health of a few in contrast to claimed health benefits to many, the trade-off has not been fully considered in a public health framework. This article reviews public health ethics justifications for the licensing and installation of IWTs. It concludes that the current methods used by government to evaluate licensing applications for IWTs do not meet most public health ethical criteria. Furthermore, these methods are contrary to widely held fundamental principles of administrative law and governmental legitimacy. A set of decision-making principles are suggested to address this situation that are derived from existing and emerging legal principles in Canada and elsewhere. These include the Precautionary Principle, the Least Impactful Means (Proportionality) Test, and the Neighbor Principle.

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**Mitigating the Acoustic Impacts of Modern Technologies: Acoustic, Health, and Psychosocial Factors Informing Wind Farm Placement**

**Daniel Shepherd and Rex Billington**

Bulletin of Science Technology & Society 2011 31: 389, DOI: 10.1177/0270467611417841  
<http://bst.sagepub.com/content/31/5/389>



**Bio:** Daniel Shepherd has a PhD in psychoacoustics and holds a lectureship at the Faculty of Health, AUT University. As an environmental psychologist, he researches the psychological response to noise from both individual and social perspectives.

**Bio:** Dr. Rex Billington is a research health psychologist at AUT University after 18 years with the World Health Organization including directorships in Mental Health and the Global Program on AIDS.

### **Abstract**

Wind turbine noise is annoying and has been linked to increased levels of psychological distress, stress, difficulty falling asleep and sleep interruption. For these reasons, there is a need for competently designed noise standards to safeguard community health and well-being. The authors identify key considerations for the development of wind turbine noise standards, which emphasize a more social and humanistic approach to the assessment of new energy technologies in society.

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**Evaluating the impact of wind turbine noise on health related quality of life  
by Daniel Shepherd, David McBride, David Welch, Kim N. Dirks, Erin M. Hill**

Noise & Health, September-October 2011, 13:54,333-9, DOI:  
10.4103/1463-1741.85502

[www.noiseandhealth.org](http://www.noiseandhealth.org)



### **Abstract**

We report a cross-sectional study comparing the health-related quality of life (HRQOL) of individuals residing in the proximity of a wind farm to those residing in a demographically matched area sufficiently displaced from wind turbines. The study employed a nonequivalent comparison group posttest-only design. Self-administered questionnaires, which included the brief version of the World Health Organization quality of life scale, were delivered to residents in two adjacent areas in semirural New Zealand. Participants were also asked to identify annoying noises, indicate their degree of noise sensitivity, and rate amenity. Statistically significant differences were noted in some HRQOL domain scores, with residents living within 2 km of a turbine installation reporting lower overall quality of life, physical quality of life, and environmental quality of life. Those exposed to turbine noise also reported significantly lower sleep quality, and rated their environment as less restful. Our data suggest that wind farm noise can negatively impact facets of HRQOL.

**Acknowledgements:** We are grateful to our colleagues and others whose reviews substantially improved the manuscript. We are especially grateful for the thorough review undertaken by Professor Rex Billington, who as the WHO Director of Mental Health in the 1990s oversaw the development of the WHO's program into quality of life, health and the environment.

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**The Problems With "Noise Numbers" for Wind Farm Noise Assessment**  
**Bob Thorne**

Bulletin of Science Technology & Society 2011 31: 262, DOI: 10.1177/0270467611412557,  
<http://bst.sagepub.com/content/31/4/262>



**Bio:** Bob Thorne, MSc, PhD, is the principal consultant of Noise Measurement Services Pty Ltd, Brisbane, Australia. He holds a PhD from Massey University, New Zealand, in health science and is an environmental health research associate in the Institute of Food, Nutrition and Human Health at Massey University. His research work involves using advanced specialized technology for intrusive noise assessment, and a specific application is personalized sound reinforcement for hearing assistive devices.

**Abstract**

Human perception responds primarily to sound character rather than sound level. Wind farms are unique sound sources and exhibit special audible and inaudible characteristics that can be described as modulating sound or as a tonal complex. Wind farm compliance measures based on a specified noise number alone will fail to address problems with noise nuisance. The character of wind farm sound, noise emissions from wind farms, noise prediction at residences, and systemic failures in assessment processes are examined. Human perception of wind farm sound is compared with noise assessment measures and complaint histories. The adverse effects on health of persons susceptible to noise from wind farms are examined and a hypothesis, the concept of heightened noise zones (pressure variations), as a marker for cause and effect is advanced. A sound level of LAeq 32 dB outside a residence and above an individual's threshold of hearing inside the home are identified as markers for serious adverse health effects affecting susceptible individuals. The article is referenced to the author's research, measurements, and observations at different wind farms in New Zealand and Victoria, Australia.