



APPENDIX 5-1

***WIND FARMS & HEALTH
LITERATURE REVIEW
(CHAPMAN, 2015)***

Summary of main conclusions reached in 25 reviews of the research literature on wind farms and health.

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1. [Council of Canadian Academies](#) (2015). Understanding the evidence. Wind Turbine Noise.
2. Schmidt JH, Klokke M (2014) Health effects related to wind turbine noise exposure: a systematic review. [PLoS ONE](#) 9(12): e114183. doi:10.1371/journal.pone.0114183
3. 2014: McCunney RJ, Mundt KA, Colby WD, Dobie R, Kaliski K, Blais M. Wind turbines and health: a critical review of the scientific literature. [Journal of Occupational & Environmental Medicine](#) 2014; 56(11):pe108-130.
4. 2014: Knopper LD, Olson CA, McCallum LC, Whitfield Aslund ML, Berger RG, Souweine K, McDaniel M. Wind turbines and human health. [Frontiers in Public Health](#) 2014; 19 June
5. 2014: Arra I, Lynn H, Barker K, Ogbunike C, Regalado S. Systematic review 2013: association between wind turbines and human distress. [Cureus](#) 6(5): e183. doi:10.7759/cureus.183 [Note: this review is a very poor quality paper published in a non-indexed, pay-to-publish journal. A detailed critique of it can be found at the end of this file.]
6. 2014: National Health and Medical Research Council (Australia). University of Adelaide [full report](#) (296pp) and [draft consultation report](#) (26pp). [Final Report](#) (Feb 15 2015)
7. 2013: [VTT Technical Research Centre of Finland](#). (in Finnish) – summary at end of document
8. 2013: [Department of Health, Victoria](#) (Australia) Wind farms, sound and health.
9. 2012: [Massachusetts Department of Environmental Protection](#). Independent Expert Science Panel Releases Report on Potential Health Effects of Wind Turbines
10. 2012: [Oregon Wind Energy Health Impact Assessment](#).
11. 2011: Fiumicelli D. Windfarm noise dose-response: a literature review. *Acoustics Bulletin* 2011; Nov/Dec:26-34 [copies available from simon.chapman@sydney.edu.au]
12. 2011: Bolin K et al. Infrasound and low frequency noise from wind turbines: exposure and health effects. [Environmental Res Let](#) 2011;
13. 2010: Knopper LD, Ollsen CA. Health effects and wind turbines: a review of the literature. [Environmental Health](#) 2010; 10:78
14. 2010: [UK Health Protection Agency](#) Report on the health effects of infrasound
15. 2010: [NHMRC \(Australia\)](#) Rapid Review of the evidence
16. 2010: Chief Medical Officer of Health in [Ontario](#)
17. 2010: [UK Health Protection Agency](#). Environmental noise and health in the UK. A report by the Ad Hoc Expert Group on Noise and Health. (this report is about all environmental noise)

18. 2009: [Minnesota Department of Health](#). Environmental Health Division. Public Health Impacts of Wind Turbines.
19. 2009: [Colby et al.](#) Wind Turbine Sound and Health Effects: An Expert Panel Review.
20. 2008: [Chatham-Kent Public Health Unit](#).
21. 2007: [National Research Council \(USA\)](#): Impact of wind energy development on humans (Chapter 4: pp97-120) of: Environmental Impacts of Wind-Energy Projects.
22. 2006: Context and Opinion Related to the Health Effects of Noise Generated by Wind Turbines, [Agence Française de Sécurité Sanitaire de l'Environnement et du Travail](#)(Affset), 2006. (in French only)
23. 2005: Jakobsen J. Infrasound emission from wind turbines. *J Low Frequency Noise, Vibration and Active Control* 2005; 24(3):145-155
24. 2004: Leventhall G. Low frequency noise and annoyance. [Noise & Health](#) 2004;.6(23):59-72
25. 2003: Eja Pedersen's Review for the [Swedish EPA](#)

Reviews of the evidence - extracted highlights

Direct health effects from noise and WTS

- “There is no consistent evidence that noise from wind turbines—whether estimated in models or using distance as a proxy—is associated with self-reported human health effects. Isolated associations may be due to confounding, bias or chance.”
NHMRC (2014) [full report](#)
- “There are no direct pathological effects from wind farms and that any potential impact on humans can be minimised by following existing planning guidelines.” *Source: NHMRC 2010*
http://www.nhmrc.gov.au/files/nhmrc/publications/attachments/new0048_evidence_review_wind_turbines_and_health.pdf
- “There is no evidence that the audible or sub-audible sounds emitted by wind turbines have any direct adverse physiological effects.” *Source: Colby 2009 review*
http://199.88.77.35/EFiles/docs/CD/PlanCom/10_0426_IT_100416160206.pdf
- “... surveys of peer-reviewed scientific literature have consistently found no evidence linking wind turbines to human health concerns.” *Source: CanWEA*
<http://www.canwea.ca/pdf/CanWEA%20-%20Addressing%20concerns%20with%20wind%20turbines%20and%20human%20health.pdf>
- “There is insufficient evidence that the noise from wind turbines is directly... causing health problems or disease.” *Source: Massachusetts review*
http://www.mass.gov/dep/energy/wind/turbine_impact_study.pdf

- “There is no reason to believe, based on the levels and frequencies of the sounds and... sound exposures in occupational settings, that the sounds from wind turbines could plausibly have direct adverse health consequences.” *Source: Colby 2009 review* http://199.88.77.35/EFiles/docs/CD/PlanCom/10_0426_IT_100416160206.pdf
 - “... while some people living near wind turbines report symptoms such as dizziness, headaches, and sleep disturbance, the scientific evidence available to date does not demonstrate a direct causal link between wind turbine noise and adverse health effects. The sound level from wind turbines at common residential setbacks is not sufficient to cause hearing impairment or other direct health effects...” *Source: Ontario CMOH Report* http://www.health.gov.on.ca/en/public/publications/ministry_reports/wind_turbine/wind_turbine.pdf
 - “... the audible noise created by a wind turbine, constructed at the approved setback distance does not pose a health impact concern.” *Source: Chatham-Kent Public Health Unit* <http://www.harvestingwindsupport.com/blog/wp-content/uploads/2011/03/Chatham-KentHealth-and-Wind-.pdf>
 - There is no evidence for a set of health effects, from exposure to wind turbines that could be characterized as a "Wind Turbine Syndrome." *Source: Massachusetts review* http://www.mass.gov/dep/energy/wind/turbine_impact_study.pdf
 - “... there is not an association between noise from wind turbines and measures of psychological distress or mental health problems.” *Source: Massachusetts review* http://www.mass.gov/dep/energy/wind/turbine_impact_study.pdf
 - “Evidence that environmental noise damages mental health is... inconclusive.” *Source: Ad Hoc Expert Group on Noise and Health* http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1279888026747
 - “...no association was found between road traffic noise and overall psychological distress...” *Source: Ad Hoc Expert Group on Noise and Health* http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1279888026747
 - “To date, no peer reviewed scientific journal articles demonstrate a causal link between people living in proximity to modern wind turbines, the noise (audible, low frequency noise, or infrasound) they emit and resulting physiological health effects.” *Source: Knopper&Ollson review* <http://www.ehjournal.net/content/pdf/1476-069X-10-78.pdf>
 “... there is no scientific evidence that noise at levels created by wind turbines could cause health problems other than annoyance...” *Source: Eja Pedersen 2003 Review* <http://www.naturvardsverket.se/Documents/publikationer/620-5308-6.pdf>
- “None of the... evidence reviewed suggests an association between noise from wind turbines and pain and stiffness, diabetes, high blood pressure, tinnitus, hearing

impairment, cardiovascular disease, and headache/migraine.” *Source: Massachusetts review* http://www.mass.gov/dep/energy/wind/turbine_impact_study.pdf

“...there are no evidences that noise from wind turbines could cause cardiovascular and psycho-physiological effects.” *Source: Eja Pedersen 2003 Review* <http://www.naturvardsverket.se/Documents/publikationer/620-5308-6.pdf>

“...there was no evidence that environmental noise was related to raised blood pressure...” *Source: Ad Hoc Expert Group on Noise and Health* http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1279888026747

- “The health impact of the noise created by wind turbines has been studied and debated for decades with no definitive evidence supporting harm to the human ear.” *Source: Chatham-Kent Public Health Unit* <http://www.harvestingwindsupport.com/blog/wp-content/uploads/2011/03/Chatham-KentHealth-and-Wind-.pdf>
- “The electromagnetic fields produced by the generation and export of electricity from a wind farm do not pose a threat to public health...” *Source: NHMRC 2010* http://www.nhmrc.gov.au/files_nhmrc/publications/attachments/new0048_evidence_review_wind_turbines_and_health.pdf
- “... no consistent associations were found between wind turbine noise exposure and symptom reporting, e.g. chronic disease, headaches, tinnitus and undue tiredness.” *Source: Bolin et al 2011 Review* [http://iopscience.iop.org/1748-9326_6_3_035103.pdf](http://iopscience.iop.org/1748-9326/6/3/035103/pdf/1748-9326_6_3_035103.pdf)
- “... low level frequency noise or infrasound emitted by wind turbines is minimal and of no consequence... Further, numerous reports have concluded that there is no evidence of health effects arising from infrasound or low frequency noise generated by wind turbines.” *Source: NHMRC 2010* http://www.nhmrc.gov.au/files_nhmrc/publications/attachments/new0048_evidence_review_wind_turbines_and_health.pdf
- “... renewable energy generation is associated with few adverse health effects compared with the well documented health burdens of polluting forms of electricity generation...” *Source: NHMRC 2010* http://www.nhmrc.gov.au/files_nhmrc/publications/attachments/new0048_evidence_review_wind_turbines_and_health.pdf
- “Although opposition to wind farms on aesthetic grounds is a legitimate point of view, opposition to wind farms on the basis of potential adverse health consequences is not justified by the evidence.” *Source: Chatham-Kent Public Health Unit* <http://www.harvestingwindsupport.com/blog/wp-content/uploads/2011/03/Chatham-KentHealth-and-Wind-.pdf>
- “What is apparent is that numerous websites have been constructed by individuals or groups to support or oppose the development of wind turbine projects, or media sites

reporting on the debate. Often these websites state the perceived impacts on, or benefits to, human health to support the position of the individual or group hosting the website. The majority of information posted on these websites cannot be traced back to a scientific, peer-reviewed source and is typically anecdotal in nature. In some cases, the information contained on and propagated by internet websites and the media is not supported, or is even refuted, by scientific research. This serves to spread misconceptions about the potential impacts of wind energy on human health..." Source: Knopper&Ollson review <http://www.ehjournal.net/content/pdf/1476-069X-10-78.pdf>

- Afsset was mandated by the Ministries responsible for health and the environment to conduct a critical analysis of a report issued by the *Académie nationale de médecine* that advocated the use of a minimum 1,500 metre setback distance for 2.5 MW wind turbines or more. The Afsset report concluded that "It appears that the noise emitted by wind turbines is not sufficient to result in direct health consequences as far as auditory effects are concerned. [...] A review of the data on noise measured in proximity to wind turbines, sound propagation simulations and field surveys demonstrates that a permanent definition of a minimum 1,500 m setback distance from homes, even when limited to windmills of more than 2.5 MW, does not reflect the reality of exposure to noise and does not seem relevant."

Annoyance

- "... wind turbine noise is comparatively lower than road traffic, trains, construction activities, and industrial noise." Source: *Chatham-Kent Public Health Unit* <http://www.harvestingwindsupport.com/blog/wp-content/uploads/2011/03/Chatham-KentHealth-and-Wind-.pdf>
- "There is consistent evidence that noise from wind turbines—whether estimated in models or using distance as a proxy—is associated with annoyance, and reasonable consistency that it is associated with sleep disturbance and poorer sleep quality and quality of life. However, it is unclear whether the observed associations are due to wind turbine noise or plausible confounders" NHMRC (2014) [full report](#)
- "The perception of noise depends in part on the individual - on a person's hearing acuity and upon his or her subjective tolerance for or dislike of a particular type of noise. For example, a persistent "whoosh" might be a soothing sound to some people even as it annoys others." Source: *NRC 2007* http://www.vawind.org/assets/nrc/nrc_wind_report_050307.pdf
- "... some people might find [wind turbine noise annoying. It has been suggested that annoyance may be a reaction to the characteristic "swishing" or fluctuating nature of wind turbine sound rather than to the intensity of sound." Source: *Ontario CMOH Report*

http://www.health.gov.on.ca/en/public/publications/ministry_reports/wind_turbine/wind_turbine.pdf

- "... being annoyed can lead to increasing feelings of powerlessness and frustration, which is widely believed to be at least potentially associated with adverse health effects over the longer term." *Source: Ad Hoc Expert Group on Noise and Health*
http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1279888026747
- "Wind turbine annoyance has been statistically associated with wind turbine noise, but found to be more strongly related to visual impact, attitude to wind turbines and sensitivity to noise." *Source: Knopper&Ollson review*
<http://www.ehjournal.net/content/pdf/1476-069X-10-78.pdf>
- "... self reported health effects like feeling tense, stressed, and irritable, were associated with noise annoyance and not to noise itself..." *Source: Knopper&Ollson review*
<http://www.ehjournal.net/content/pdf/1476-069X-10-78.pdf>
- "... many of the self reported health effects are associated with numerous issues, many of which can be attributed to anxiety and annoyance." *Source: Knopper&Ollson review*
<http://www.ehjournal.net/content/pdf/1476-069X-10-78.pdf>
- "To date, no peer reviewed articles demonstrate a direct causal link between people living in proximity to modern wind turbines, the noise they emit and resulting physiological health effects. If anything, reported health effects are likely attributed to a number of environmental stressors that result in an annoyed/stressed state in a segment of the population." *Source: Knopper&Ollson review*
<http://www.ehjournal.net/content/pdf/1476-069X-10-78.pdf>
- "... some community studies are biased towards over-reporting of symptoms because of an explicit link between...noise and symptoms in the questions inviting people to remember and report more symptoms because of concern about noise." *Source: Ad Hoc Expert Group on Noise and Health*
http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1279888026747
- "... it is probable that some persons will inevitably exhibit negative responses to turbine noise wherever and whenever it is audible, no matter what the noise level." *Source: Fiumicelli review abstract*
- "The major source of uncertainty in our assessment is related to the subjective nature of response to sound, and variability in how people perceive, respond to, and cope with sound." *Source: Oregon review*
<http://public.health.oregon.gov/HealthyEnvironments/TrackingAssessment/HealthImpactAssessment/Documents/Oregon%20Wind%20Energy%20HIA%20Public%20comment.pdf>
- "... sleep difficulties, as well as feelings of uneasiness, associated with noise annoyance could be an effect of the exposure to noise, although it could just as well be that

respondents with sleeping difficulties more easily appraised the noise as annoying.”

Source: NHMRC 2010

http://www.nhmrc.gov.au/files/nhmrc/publications/attachments/new0048_evidence_review_wind_turbines_and_health.pdf

- “Even noise that falls within known safety limits is subjective to the recipient and will be received and subsequently perceived positively or negatively.” Source: Chatham-Kent Public Health Unit <http://www.harvestingwindsupport.com/blog/wp-content/uploads/2011/03/Chatham-KentHealth-and-Wind-.pdf>
- “... annoyance was strongly correlated with a negative attitude toward the visual impact of wind turbines on the landscape...” Source: NHMRC 2010
http://www.nhmrc.gov.au/files/nhmrc/publications/attachments/new0048_evidence_review_wind_turbines_and_health.pdf
- “Respondents tended to report more annoyance when they also noted a negative effect on landscape, and ability to see the turbines was strongly related to the probability of annoyance.” Source: Minnesota Health Dept 2009
<http://www.health.state.mn.us/divs/eh/hazardous/topics/windturbines.pdf>
- “[It is proposed that annoyance is not a direct health effect but an indication that a person’s capacity to cope is under threat. The person has to resolve the threat or their coping capacity is undermined, leading to stress related health effects... Some people are very annoyed at quite low levels of noise, whilst other are not annoyed by high levels.” Source: NHMRC 2010
http://www.nhmrc.gov.au/files/nhmrc/publications/attachments/new0048_evidence_review_wind_turbines_and_health.pdf
- “Further, sounds, such as repetitive but low intensity noise, can evoke different responses from individuals... Some people can dismiss and ignore the signal, while for others, the signal will grow and become more apparent and unpleasant over time... These reactions may have little relationship to will or intent, and more to do with previous exposure history and personality.” Source: Minnesota Health Dept 2009
<http://www.health.state.mn.us/divs/eh/hazardous/topics/windturbines.pdf>
- “Stress and annoyance from noise often do not correlate with loudness. This may suggest [that other factors impact an individual’s reaction to noise... individuals with an interest in a project and individuals who have some control over an environmental noise are less likely to find a noise annoying or stressful.” Source: Minnesota Health Dept 2009
<http://www.health.state.mn.us/divs/eh/hazardous/topics/windturbines.pdf>
- “There is a possibility of learned aversion to low frequency noise, leading to annoyance and stress...” Source: Leventhall 2005 review
<http://www.noiseandhealth.org/article.asp?issn=1463-1741;year=2004;volume=6;issue=23;spage=59;epage=72;aulast=Leventhall>

- “Noise produced by wind turbines generally is not a major concern for humans beyond a half mile or so because various measures to reduce noise have been implemented in the design of modern turbines.” *Source: NRC 2007*
http://www.vawind.org/assets/nrc/nrc_wind_report_050307.pdf
- “Noise... levels from an onshore wind project are typically in the 35-45 dB(A) range at a distance of about 300 meters... These are relatively low noise or sound-pressure levels compared with other common sources such as a busy office (~60 dB(A)), and with nighttime ambient noise levels in the countryside (~20-40 dB(A)).” *Source: NRC 2007*
http://www.vawind.org/assets/nrc/nrc_wind_report_050307.pdf
- “Complaints about low frequency noise come from a small number of people but the degree of distress can be quite high. There is no firm evidence that exposure to this type of sound causes damage to health, in the physical sense, but some people are certainly very sensitive to it.” *Source: Ad Hoc Expert Group on Noise and Health*
http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1279888026747
- “... there is the theoretical possibility that annoyance may lead to stress responses and then to illness. If there is no annoyance then there can be no mechanism for any increase in stress hormones by this pathway... if stress-related adverse health effects are mediated solely through annoyance then any mitigation plan which reduces annoyance would be equally effective in reducing any consequent adverse health effects. It would make no difference whether annoyance reduction was achieved through actual reductions in sound levels, or by changes in attitude brought about by some other means.” *Source: Ad Hoc Expert Group on Noise and Health*
http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1279888026747

Infrasound

- “Infrasound is audible when the sound levels are high enough. The hearing threshold for infrasound is much higher than other frequencies. Infrasound from wind farms is at levels well below the hearing threshold and is therefore inaudible to neighbouring residents. There is no evidence that sound which is at inaudible levels can have a physiological effect on the human body . This is the case for sound at any frequency, including infrasound.”
[http://docs.health.vic.gov.au/docs/doc/5593AE74A5B486F2CA257B5E0014E33C/\\$FILE/Wind%20farms,%20sound%20and%20%20health%20-%20Technical%20information%20WEB.pdf](http://docs.health.vic.gov.au/docs/doc/5593AE74A5B486F2CA257B5E0014E33C/$FILE/Wind%20farms,%20sound%20and%20%20health%20-%20Technical%20information%20WEB.pdf)
- "Claims that infrasound from wind turbines directly impacts the vestibular system have not been demonstrated scientifically... evidence shows that the infrasound levels near wind turbines cannot impact the vestibular system."
<http://www.mass.gov/dep/public/press/0112wind.htm>
- “There is no evidence that infrasound ... [from wind turbines ... contributes to perceived annoyance or other health effects.” *Source: Bolin et al 2011 Review*
http://iopscience.iop.org/1748-9326/6/3/035103/pdf/1748-9326_6_3_035103.pdf

- “There is no consistent evidence of any physiological or behavioural effect of acute exposure to infrasound in humans.” *Source: UK HPA Report*
http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1265028759369
- “... self reported health effects of people living near wind turbines are more likely attributed to physical manifestation from an annoyed state than from infrasound.”
Source: Knopper&Ollson review <http://www.ehjournal.net/content/pdf/1476-069X-10-78.pdf>
- “... infrasound from current generation upwind model turbines [is well below the pressure sound levels at which known health effects occur. Further, there is no scientific evidence to date that vibration from low frequency wind turbine noise causes adverse health effects.” *Source: Ontario CMOH Report*
http://www.health.gov.on.ca/en/public/publications/ministry_reports/wind_turbine/wind_turbine.pdf
- “It would appear... that infrasound alone is hardly responsible for the complaints... from people living up to two km from the large downwind turbines.” *Source: Jakobsen 2005 review* <http://multi-science.metapress.com/content/w6r4226247q6p416/>
- “From a critical survey of all known published measurement results of infrasound from wind turbines it is found that wind turbines of contemporary design with the rotor placed upwind produce very low levels of infrasound. Even quite close to these turbines the infrasound level is far below relevant assessment criteria, including the limit of perception.” *Source: Jakobsen 2005 review* <http://multi-science.metapress.com/content/w6r4226247q6p416/>
- “With older downwind turbines, some infrasound also is emitted each time a rotor blade interacts with the disturbed wind behind the tower, but it is believed that the energy at these low frequencies is insufficient to pose a health hazard.” *Source: NRC 2007* http://www.vawind.org/assets/nrc/nrc_wind_report_050307.pdf

Shadow flicker

- “Scientific evidence suggests that shadow flicker [from the rotating blades of wind turbines does not pose a risk for eliciting seizures as a result of photic stimulation.”
Source: Massachusetts review
http://www.mass.gov/dep/energy/wind/turbine_impact_study.pdf
- Shadow flicker from wind turbines... is unlikely to cause adverse health impacts in the general population. The low flicker rate from wind turbines is unlikely to trigger seizures in people with photosensitive epilepsy. Further, the available scientific evidence suggests that very few individuals will be annoyed by the low flicker frequencies expected from most modern wind turbines.” *Source: Oregon review*
<http://public.health.oregon.gov/HealthyEnvironments/TrackingAssessment/HealthImpa>

[ctAssessment/Documents/Oregon%20Wind%20Energy%20HIA%20Public%20comment.pdf](http://public.health.oregon.gov/HealthyEnvironments/TrackingAssessment/HealthImpactAssessment/Documents/Oregon%20Wind%20Energy%20HIA%20Public%20comment.pdf)

- “Flicker frequency due to a turbine is on the order of the rotor frequency (i.e., 0.6-1.0 Hz), which is harmless to humans. According to the Epilepsy Foundation, only frequencies above 10 Hz are likely to cause epileptic seizures.” *Source: NRC 2007*
http://www.vawind.org/assets/nrc/nrc_wind_report_050307.pdf

Community & social response to wind turbines

- The perception of sound as noise is a subjective response that is influenced by factors related to the sound, the person, and the social/environmental setting. These factors result in considerable variability in how people perceive and respond to sound... Factors that are consistently associated with negative community response are fear of a noise source... [and noise sensitivity...]” *Source: Oregon review*
<http://public.health.oregon.gov/HealthyEnvironments/TrackingAssessment/HealthImpactAssessment/Documents/Oregon%20Wind%20Energy%20HIA%20Public%20comment.pdf>
- “Wind energy developments could indirectly result in positive health impacts... if they increase local employment, personal income, and community-wide income and revenue. However, these positive effects may be diminished if there are real or perceived increases in income inequality within a community.” *Source: Oregon review*
<http://public.health.oregon.gov/HealthyEnvironments/TrackingAssessment/HealthImpactAssessment/Documents/Oregon%20Wind%20Energy%20HIA%20Public%20comment.pdf>
- “Effective public participation in and direct benefits from wind energy projects (such as receiving electricity from the neighboring wind turbines) have been shown to result in less annoyance in general and better public acceptance overall.” *Source: Massachusetts review* http://www.mass.gov/dep/energy/wind/turbine_impact_study.pdf
- “... people who benefit economically from wind turbines [are less likely to report noise annoyance, despite exposure to similar sound levels as those people who [are not economically benefiting.” *Source: NHMRC 2010*
http://www.nhmrc.gov.au/files_nhmrc/publications/attachments/new0048_evidence_review_wind_turbines_and_health.pdf
- “Landowners... may perceive and respond differently (potentially more favorably) to increased sound levels from a wind turbine facility, particularly if they benefit from the facility or have good relations with the developer...” *Source: Oregon review*
<http://public.health.oregon.gov/HealthyEnvironments/TrackingAssessment/HealthImpactAssessment/Documents/Oregon%20Wind%20Energy%20HIA%20Public%20comment.pdf>
- “The level of annoyance or disturbance experienced by those hearing wind turbine sound is influenced by individuals' perceptions of other aspects of wind energy facilities,

such as turbine visibility, visual impacts, trust, fairness and equity, and the level of community engagement during the planning process.” *Source: Oregon review*
<http://public.health.oregon.gov/HealthyEnvironments/TrackingAssessment/HealthImpactAssessment/Documents/Oregon%20Wind%20Energy%20HIA%20Public%20comment.pdf>

- “Wind energy facilities... can indirectly result in positive health impacts by reducing emissions of [green house gases and harmful air pollutants, and... Communities near fossil-fuel based power plants that are displaced by wind energy could experience reduced risks for respiratory illness, cardiovascular diseases, cancer, and premature death.” *Source: Oregon review*
<http://public.health.oregon.gov/HealthyEnvironments/TrackingAssessment/HealthImpactAssessment/Documents/Oregon%20Wind%20Energy%20HIA%20Public%20comment.pdf>
- “The environmental and human-health risk reduction benefits of wind-powered electricity generation accrue through its displacement of electricity generation using other energy sources (e.g., fossil fuels), thus displacing the adverse effects of those other generators.” *Source: NRC 2007*
http://www.vawind.org/assets/nrc/nrc_wind_report_050307.pdf
- “Community engagement at the outset of planning for wind turbines is important and may alleviate health concerns about wind farms. Concerns about fairness and equity may also influence attitudes towards wind farms and allegations about effects on health. These factors deserve greater attention in future developments.” *Source: Ontario CMOH Report*
http://www.health.gov.on.ca/en/public/publications/ministry_reports/wind_turbine/wind_turbine.pdf

Summary of 2013 VTA Finnish report

VTT Technical Research Centre of Finland has published a new study with a conclusion that wind turbines do not cause any adverse health effects. The study consisted of a review of nearly 50 scientific research articles conducted in Europe, USA, Australia and New Zealand over the past 10 years.

Due to the increased number of wind power projects in Finland, a growing concern has arisen among the public regarding the possible negative impacts wind energy production may have on human health. VTT Technical Research Centre of Finland conducted a comprehensive literature review covering nearly 50 scientific research articles. The review concluded that in the light of current scientific research, there is no evidence to show that the infrasound produced by modern wind turbines is anything but harmless.

The sound of a nearby wind farm is does not possess such qualities or volume that it would cause physical symptoms to humans. The study also concluded that the infra sounds below the auditory threshold does not constitute a health hazard. Additionally, most of the infra sound caused by a wind farm is mixed with other infra sound from the environment and

does therefore not cause any additional exposure. According to the research articles reviewed, the low frequency sound with potential hazardous health impacts would have to be of a higher volume than that caused by wind farms, in order to have an impact on our health. Also, concern that shadow flicker may cause epileptic seizures are overruled in the research material. Such seizures cannot be caused by the type of flicker the slow rotation speed of the wind turbine blades produce.

Commentary: Major problems with recent systematic review on wind farms and distress.

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At least 20 reviews of the evidence on whether wind turbines cause health problems including stress have been published since 2003 (1). Cureus recently published another (2) where the authors referenced none of these.

Highlights of the findings of these reviews may be found here (1). The most recent (2014) review by Australia's peak health and medical agency, The National Health and Medical Research Council (3) concluded:

"There is no consistent evidence that noise from wind turbines... is associated with self reported human health effects. Isolated associations may be due to confounding, bias or chance. There is consistent evidence that noise from wind turbines—whether estimated in models or using distance as a proxy—is associated with annoyance, and reasonable consistency that it is associated with sleep disturbance and poorer sleep quality and quality of life. However, it is unclear whether the observed associations are due to wind turbine noise or plausible confounders."

and

"The association between estimated noise level and annoyance was significantly affected by the visual attitude of the individual (i.e. whether they found wind farms beautiful, or ugly and unnatural) in the three studies that assessed this as a potential confounding factor. Residents in [one] study with a negative attitude to the visual impact of wind farms on the landscape had over 14 times the odds of being annoyed compared with those people without a negative visual attitude. ...This means that factors other than the noise produced by wind turbines contribute to the annoyance experienced by survey respondents."

Against this background, I was curious to see what a new systematic review would conclude. According to the Cureus website, the new paper was peer reviewed. This is difficult to understand because of the sheer volume of major and minor problems it contains. Together, these make its contribution valueless to scholarly understanding of the

phenomenon of noise and health complaints about wind farms. The paper shows many signs of poor understanding of the subject matter of their review, of critical appraisal methods, of some basic conventions in systematic reviewing, of structuring in scientific writing, and much more besides.

The problems commence in the first line of the abstract where the confusing statement is made that “the proximity of wind turbines to residential areas has been associated with a higher level of complaints compared to the general population.” I assume here that they are trying to say that those living near turbines have a higher prevalence of health complaints like sleep disturbance and general “human distress” than in the wider population. The prevalence of sleeping problems in general populations is as high as 33% (4) and reference material exists that quantifies the prevalence of many health problems in general populations (5, 6). Instead, the authors support their statement with a reference to a small qualitative study of 15 people both affected and unaffected by turbines (7). No conclusions about the prevalence of health problems in communities near turbines or in matched comparison populations can be drawn from that paper. I know of no published evidence that would allow such a statement to be made.

The authors state that their search strategy located 18 eligible papers but that these were based on six original studies. They explain that the 12 non-original “studies” (several of which were reviews or commentaries) were then excluded. Yet in their “key results” they proceed to describe the characteristics of all 18 papers and thus act as if these were not excluded (“All 18 peer-reviewed studies captured in our review found an association...”).

The authors do not appear to understand what an “outcome” is. The abstract lists “outcome” variables that are not outcomes at all (such as study quality and journal name). These are independent variables, not dependent ones.

Their eligibility criteria for study selection are perplexing. What for example, is the difference between “peer-reviewed studies” and “studies published in peer-reviewed journals”? So too, is their noting that they searched the Cochrane Library for relevant studies. The Cochrane Library is a repository of reviews of evidence for health interventions, not for data on the prevalence of health complaints.

The authors seem not to understand the difference between studies and trials. For obvious reasons, there have been no trials conducted in this area.

Their main conclusions are that:

An association exists between wind turbines and distress in humans.

The existence of a dose-response relationship (between distance from wind turbines and distress) and the consistency of the association across studies .. argues for the credibility of this association.

The first conclusion is very imprecise and sweeping and ripe for being megaphoned by anti-wind farm interest groups as if it actually meant something. One of the six original studies reviewed (Salt & Hullar) (8) should have never been included in this review – see below. The Nissenbaum et al study (9) is listed as of moderate quality with a low risk of bias. Yet all three authors and two out of three reviewers of that paper are members of Society for Wind Vigilance, an anti-wind organization. Nissenbaum has been raising health concerns in study areas for several years, potentially biasing collected data. Neither of these problems is mentioned in this review. Two critiques of this study were published in *Noise and Health* pointing out the very poor quality of the results, analysis and the overstatements of conclusions (10, 11).

The Shepherd et al study (12) which the authors rate as of “high” quality, failed to make any mention that the small wind farm community involved had for years been subjected to a local wind farm opposition group fomenting anxiety about health issues (13). Indeed, with one exception (14), the five studies referenced were performed in areas where complaints of annoyance were being raised. But such farms are unlikely to be representative of all wind farms. As our work shows, over nearly 65% of wind farms in Australia have never received a single complaint (15), and 73% of complainants in Australia are concentrated around just 6/51 farms. The failure of the authors to note this fundamental problem of study sample selection bias is another major problem.

Among the five “original” studies they considered satisfied their selection criteria was a paper by Salt & Hullar (8). This paper is not in any way a “study” of “the association between wind turbines and human distress.” It reports no original empirical data and is essentially a backgrounder on infrasound and the “possibility” that wind turbine might create auditory distress. It is unfathomable why this paper was included in the data set.

Table 2 purports to be a meaningful summary of the findings of these six studies on the association between turbine exposure and “distress”. I would defy anyone to make any sense of the Table, particularly the column headed “does [sic] response”.

By way of comparison to the lack of detail provided by the authors of this review, it is instructive to look at the results from the Dutch study which formed the basis of the

Pedersen 2009 paper(14) which were further analysed by Bakker et al (16) who noted that sleep disturbance was assessed by a question dealing with the frequency of sleep disturbance by environmental sound (“how often are you disturbed by sound?”). Two thirds of all respondents reported not being disturbed by any sound at all. Disturbance by traffic noise or other mechanical sound was reported by 15.2% of the respondents. Disturbance by the sound of people and of animals was reported by 13.4% of the respondents. Relevantly, disturbance by the sound of wind turbines was reported by only 4.7% of the respondents (6% in areas deemed to be quiet and 4% in areas deemed to be noisy). Bakker and colleagues (16) note that it was not clear from the study if there was a primary source causing sleep disturbance and how respondents attributed being awakened by different environmental sound sources. What was clear was that wind turbines were less frequently reported as a sleep disturbing sound source, than other environmental sounds irrespective of the area type (quiet versus noisy). Analysis showed that among respondents who could hear wind turbine sound, annoyance was the only factor that predicted sleep disturbance. The authors speculated that being annoyed might contribute to a person’s sensitivity for any environmental sound, and the reaction might be caused by the combination of all sounds present. It might also be the case that people annoyed by wind turbine noise attribute their experience of sleep disturbance to wind turbine noise, even if that was not the source of their awakening.

Swathes of the paper are given over to descriptions of their efforts to rate the levels of evidence in the four reviewed studies. But they never ever describe their approach in any way that might permit replication of how they went about such rating. How was level of evidence actually determined? It should have been explicitly defined in the text. Their discussion of the risk of bias across studies is bizarre. "The quality of the study could be confounded by journal name and author". Surely the authors mean here that the evaluation of the quality of the study could be biased by this knowledge. The term “confounded” has another meaning.

Their “key results” consist of no more than five bullet points. These read like draft notes-to-self (eg: None of these studies captured in our review found any association (potential publication bias)”).

The authors chose to use the term “distress” instead of “annoyance”. The American Medical Dictionary defines distress as 1. Mental or physical suffering or anguish or 2. Severe strain resulting from exhaustion or trauma. Annoyance on the other hand is defined as 1. The act of annoying or the state of being annoyed or 2. A cause of irritation or vexation; a nuisance. (The American Heritage Dictionary of the English Language, Fourth Edition copyright 2000) and is generally identified as a highly subjective state in medical literature. It is clear that the authors chose a stronger term than was used by the majority of studies. Most literature refers to annoyance, while the referenced alternative of “Wind Turbine Syndrome” was coined in a vanity press published case study with extraordinary weaknesses of selection bias, methodology and analysis (17). Similarly, “extreme annoyance” is rarely used in the

literature. Annoyance is by far the most commonly used term in the material referenced, so it is unclear why “distress” was chosen.

The paper is riddled with imprecise, mangled and contradictory language. For example: key finding 1: “All 18 peer-reviewed studies captured in our review found an association...” and key finding 2: “None of these studies captured in our review found any association (potential publication bias)”; infelicitous prose: “these complaints are coined in research”; “There might be a theoretical incline to give studies in high impact journals higher quality...”; basic grammatical errors: “the study’s principle outcome”; “there was no missing data.” It is unconventionally structured with extremely scant results and methods sections providing no adequate explanations of how key decisions on quality or bias were made.

The publication of this very poor paper is regrettable.

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