

Transcript of a Presentation Made to the Huron County  
Health Board by Jane Wilson, Wind Concerns Ontario,  
held on August 4, 2016

PRESENTER: Ms. Jane Wilson

1 --- Upon commencing the audio recording

2 THE CHAIRPERSON: I will say I was given, as  
3 of evening last night, some questions that might just be  
4 related to this from a public, so I'll have an opportunity  
5 to ask some of those. I think some of those will be  
6 reflected on the board as well.

7 So Jean-Guy.

8 MR. ALBERT: All right. Thank you,  
9 Mr. Chair.

10 At its last meeting, board members directed  
11 staff to invite Jane Wilson to give a presentation on  
12 possible opportunities to partner with University of  
13 Waterloo to conduct investigation with regards to potential  
14 health hazards associated with industrial wind turbines.  
15 So this morning I have the pleasure of introducing Jane  
16 Wilson, who is the president of Wind Concerns Ontario.  
17 Along with Jane is Warren Howard. Warren is also an  
18 executive with Wind Concerns Ontario.

19 Jane had indicated that some folks from  
20 University of Waterloo may be joining us, so I'll introduce  
21 just in case they come in: Dr. Philip Bigelow, an  
22 associate professor with the University of Waterloo, was to  
23 join us as well as Dr. Ron Brown, also an associate  
24 professor with the University of Waterloo. So if they're  
25 not in the audience, they may join us in progress.

26 So without further adieu, Jane, I'll give it  
27 to you.

28 MS. WILSON: Good morning, and thank you

1 again for the invitation. It's a pleasure to be here in  
2 Huron County.

3 Just very quickly, Wind Concerns Ontario is  
4 a coalition of the energy groups, families, and individuals  
5 that are concerned about the effects of industrial-scale  
6 wind power on three areas: on the economy, on the natural  
7 environment, and on human health. Our group spans the  
8 province from Algoma in the north and Lake Superior area to  
9 the far east and Nation Township and south southwest,  
10 Chatham-Kent, and all points in between.

11 We are not opposed to renewable sources of  
12 power. We do believe, however, that a thorough analysis of  
13 all of the impacts of industrial-scale power generation and  
14 the need for community support are critical to sustainable  
15 development, and we're supported in this by the views of  
16 two auditors general, both of whom are concerned about how  
17 this program has been rolled out in Ontario.

18 We've been interested for years in doing  
19 research in response to citizen complaints about the  
20 effects of wind turbines as they've been sited, and we also  
21 felt it was important to involve an institutional partner.  
22 So we've been in discussions with University of Waterloo,  
23 specifically the School of Public Health and Health  
24 Systems.

25 The university is known for seeking  
26 innovation solutions to some of the major health challenges  
27 of our time. They work in chronic disease prevention and  
28 management, health and aging, healthcare system

1 integration, management and informatics, food and water  
2 safety, security in government, but in our area, they are  
3 working also in health and the environment.

4 I should mention at this point, too, I'm a  
5 registered nurse, so health issues are very close to my  
6 heart and part of what I do.

7 The background for research studies in  
8 Ontario, in 2010 -- actually the work was done in 2009.  
9 The Chief Medical Officer of Health released in 2010 a  
10 literature review, and as the conclusion of that report,  
11 she said:

12 "A key data gap in Ontario was actual noise  
13 measurement of the environment and around more quiet rural  
14 areas and wind turbine projects."

15 The Health Canada wind turbine noise study,  
16 which was released in 2014, actually showed that 16.5 per  
17 cent of people who are living at 1 kilometre or less were  
18 distressed or annoyed, and "annoyed" in this context is a  
19 medical term that denotes distressed. That number jumped,  
20 actually, to 25 per cent at the provincial setback of 550  
21 metres.

22 We've been in contact with Health Canada  
23 since. We actually had a meeting with them the day after  
24 that report was out, and I have been in correspondence with  
25 them ever since. Just, I think, last Friday I got a  
26 letter, again, and they agree with us that there are gaps  
27 in that study, and so that's one of the things we're  
28 looking at is closing those gaps and getting the

1 information that we need.

2           The Canadian Council of Academics and  
3 acoustics professionals around the world say that the  
4 A-weighted measurement of noise actually fails to capture  
5 the whole picture of noise that's produced from wind  
6 turbines.

7           One of the reasons that got us going is  
8 they're not only complaints to us, but, as of December  
9 2014, the Ministry of Environment and Climate Change  
10 revealed to us that they have received over 2,700 noise  
11 complaints. That's to the end of 2014. So as a year and a  
12 half, we're estimating that's probably more in the region  
13 of 3,000 noise complaints to this point.

14           The need for research, again, is confirmed.  
15 Most studies today are simply reviews of existing  
16 literature. There's been a lot of work done, but these  
17 studies have not caught up with that. Again, studies have  
18 relied on the A-weighted noise measurement, which many  
19 people are confirming is not an adequate picture of what's  
20 going on. No studies in Canada have followed what's called  
21 a purposive sample. What that means is you find people  
22 having problems, and you follow up and investigate those  
23 people and find out what's going on. That means  
24 investigating noise complaints and actually doing noise  
25 measurement. A major flaw in Ontario's Green Energy  
26 Program has been the failure to take seriously these  
27 complaints and to do proper follow-up.

28           Recently, there was a study done in

1 Australia. It's called the Cooper Study or the Cape  
2 Bridgewater Study. That study changed the language of wind  
3 turbine noise research around the world. Instead of  
4 talking about noise, Steven Cooper, the acoustician,  
5 concluded that the word we should be using is "sensation."  
6 Now, that's our experience too. When we talk to people  
7 exposed to this, one of the first things they do is say, "I  
8 feel it. I can feel it." So you can see how things are  
9 developing in research.

10 So the Cooper Study was critical. They  
11 found that there is a cause and effect relationship between  
12 wind turbine power output and people's response. And back  
13 in 1985, there was a study done in Toronto. A study of  
14 infrasound showed that 12 to 23 per cent of people exposed  
15 to infrasound at less than 8 hertz will react with nausea,  
16 dizziness, and other symptoms.

17 In fact, the ISO 1996 says:

18 "Perception of sound and effects of sound  
19 differs considerably at low frequency."

20 So, again, they're looking at low frequency,  
21 which is not something that's not been studied. And,  
22 again, the ISO determines that perception of sound may be  
23 described as pulsation.

24 Dr. Paul Schomer, who is the standards  
25 director emeritus for the Acoustical Society of America,  
26 just gave a presentation a few weeks ago. In that, he  
27 said, here's the picture of wind turbine noise emissions:

28 "Audible sound can result in annoyance or

1 distress. Infrasound can result in reports of poor health.  
2 Both of them result in sleep disruption, which then, as  
3 people get tired and exhausted, you can see other health  
4 effects. Those effects reported can be the feeling of  
5 pulsation, pressure on or in the ear, headache, fatigue,  
6 nausea, and dizziness."

7                   These are the effects that are reported  
8 around the world, not just in Ontario

9                   Many people have relied on audible noise as  
10 being the problem. We know now it's a bigger picture than  
11 that. They say, if you can't hear it, it can't hurt you.  
12 We know now that's not correct. And, similarly, you don't  
13 see X-rays, but they can hurt you. We don't see infrared  
14 light, but it can hurt us. We don't hear infrasound, but  
15 it can harm us. And the Cooper Study, again, shows this to  
16 be true.

17                   So Winds Concerns Ontario, again, we have  
18 wanted to do some research for quite a while. Our goal is  
19 now to build on that work that was begun by the Cooper  
20 Study in Australia, and working with the University of  
21 Waterloo, their expertise not only in health, but in health  
22 technology and technology.

23                   So Phase I would be collection of the  
24 citizen reports, analysis and identification of the  
25 participants for follow-up. And here we're proposing to  
26 use -- again made in Canada, Dr. Robert McMurtry of the  
27 University of Western Ontario and Carmen Krogh developed  
28 diagnostic criteria which would be very useful deciding

1 which subjects would be interesting to study.

2                   Phase II would be actual noise measurements  
3 on a minimum of six locations. It would be multiple areas  
4 in the homes, outside the homes, so a thorough noise  
5 measurement.

6                   And Phase III would be analysis and  
7 reporting of those results.

8                   Just to give you a couple of details about  
9 the project, because it can get very technical, again, we  
10 can use A-weighted measurements for audible noise, measures  
11 of audible and low frequency noise, and separate measures  
12 of infrasound. The equipment to measure noise will be  
13 present, as I said, in various locations inside and outside  
14 the dwelling. Sleep disturbance data will be collected  
15 simply by using actograph technology. I think everyone is  
16 familiar with a Fitbit watch or whatever. This will help  
17 people determine how their sleep is being disturbed and  
18 when. All this data will be correlated with wind turbine  
19 proximity, turbine activity, and weather conditions at the  
20 time.

21                   So our request to the Huron County Board of  
22 Health today is to consider being a participant in this  
23 venture, adventure, one might say. A minimum contribution  
24 would be just to allow our research team access to your  
25 confidential reports of noise that are being received by  
26 the health unit and to allow the staff epidemiologist to be  
27 a named investigator in the project. Other levels of  
28 participation would be to allow the staff epidemiologist

1 and public health professionals to participate in the  
2 analysis of the results and site selection for Phase II  
3 activities. We would also ask that the staff  
4 epidemiologist could be a part of the named research team  
5 for reporting and publication of results.

6           Again, this is a new approach because we're  
7 following a purposive group of participants. I don't know  
8 if you know of Sir Austin Bradford Hill, who is largely  
9 regarded as the father of epidemiology. He said:

10           "When you do studies and you don't find out  
11 what you thought you would find, if you don't see a cause  
12 and effect, but you still have a group of people who are  
13 not well or having some problems, you don't give up. You  
14 keep working at it."

15           That's what's guiding us.

16           So, again, actual noise measurements will be  
17 done, not just computer predicted models, which is what has  
18 been done in many other studies. We may use control  
19 subjects who could actually be family members in the same  
20 location. We aim to keep costs to a minimum, and the  
21 funding for this project will be done through grants and  
22 donations yet to be determined, but we'll be working hard  
23 to get the resources to do that.

24           So that's my quick summary, and I can answer  
25 any questions right now. Warren or I will be happy to  
26 answer any questions as well.

27           THE CHAIRPERSON: I'll look to the board  
28 first. Board Member Jewitt?

1 BOARD MEMBER JEWITT: I have a technical  
2 question. Are there any concerns about not having a  
3 baseline of what the noise is required for the introduction  
4 of the IWTs? I mean, if we're just measuring it now, we're  
5 going to get what it is currently, but we don't have any  
6 information of what pre-existed.

7 MS. WILSON: I don't know. I mean --

8 MR. HOWARD: I mean, what we're planning is  
9 a 30-day test period in each home, and in that time,  
10 turbines will not be operating. So we will have that  
11 baseline without -- so before the turbines, and we're  
12 structuring it, the noise collection, and one of the key  
13 points is to make sure that the noise, particularly the  
14 infrasound we're finding, displays the characteristics of  
15 the blade pass frequency that goes off from the turbines so  
16 that it is very clearly wind turbine noise that we're  
17 studying.

18 BOARD MEMBER JEWITT: Thank you.

19 THE CHAIRPERSON: Board Member Steffler?

20 BOARD MEMBER STEFFLER: Yes. Are you going  
21 to be making the same presentation to our Lambton-Middlesex  
22 County where there are a lot of wind turbines down there or  
23 Durham County where there are a lot up around Grand Valley  
24 so we can all share in the costs, not just share in zoning?  
25 I think this is an Ontario issue.

26 MS. WILSON: Mm-hmm.

27 BOARD MEMBER STEFFLER: This should be  
28 brought up at the ROMA convention in Toronto so that it

1 could be equally funded.

2 MS. WILSON: We started in Huron County with  
3 -- actually Dr. Bigelow, Warren, and I were in a meeting.  
4 We were discussing how we get started and where we'd get a  
5 population that had already identified problems, and I  
6 think Dr. Bigelow said, "Huron County's got a mechanism in  
7 place to be collecting complaints. Let's start with them."  
8 "Why not call them?" he said. So we really have just  
9 started with you, but that's a good suggestion, to be  
10 sharing, but to keep the costs down, we're looking at a  
11 limited population right now.

12 Do you have anything to add to that?

13 MR. HOWARD: Well, just the costs to the  
14 Huron County, I don't think will be that large.

15 MS. WILSON: Yeah. No. Costs will not be  
16 that large. We're assuming the costs for the noise  
17 measurement. All the technical things would be done.  
18 Those would be phases that are under our --

19 BOARD MEMBER STEFFLER: I guess the point  
20 I'm trying to make: It's not only a Huron County issue.

21 MS. WILSON: Yes.

22 BOARD MEMBER STEFFLER: So I think you  
23 should be looking outside of Huron County, our friends up  
24 in Grey County and Lambton County, Middlesex, all across  
25 Ontario.

26 MS. WILSON: Yes. Some other municipalities  
27 are looking at doing their own noise measurement studies,  
28 but they're just in the development phase now as well.

1 THE CHAIRPERSON: Board Member Jewitt.

2 BOARD MEMBER JEWITT: It might not be to  
3 you. It might be more to Jean-Guy. But in the original  
4 proposals that we had for the information gathering, how  
5 restrictive was our information? Because it's asking us to  
6 share -- one of the requests is to share confidential  
7 information, and so is that something that we would have to  
8 go back and ask the folks that have already allowed the  
9 information to be brought forward, that they would feel  
10 comfortable having it shared beyond what we have gathered  
11 it for?

12 MR. ALBERT: Through the chair, we haven't  
13 gone too much beyond it. I think there's a motion in front  
14 of you, or there will be after this presentation. It's a  
15 little different than what we had proposed, definitely.  
16 The original proposal was for us to collect the data and  
17 for us to analyze the data and to see if there was enough  
18 there to generate a Phase II. So if the motion passes and  
19 we're directed to look into this further, that is something  
20 that we would definitely have to consider, sharing the  
21 information. That would have to be brought forward to  
22 anybody who wants to participate.

23 THE CHAIRPERSON: Any other comments?

24 I will make a few comments just because  
25 Dr. Bokhout, who is our Acting Medical Officer of Health  
26 right now was not available to attend today, so we did sit  
27 down, and he wanted me to relay some information on his  
28 feelings and thoughts on this to the board.

1                   So, when we did sit down, we both agreed,  
2 and I think the board does agree, that a partnership is a  
3 key part of looking at this type of -- or analyzing the  
4 issue itself and that we do -- he felt with ourselves and  
5 with the University of Waterloo, there is an opportunity  
6 there. And his biggest feeling was the initial stage is  
7 something that can be kind of done in a reasonable amount  
8 of not time, I guess, but a reasonable amount of low  
9 financial impact, because we kind of started some of that  
10 already. We'd have to kind of regenerate that, I guess,  
11 finally.

12                   And then we'd want to talk with the  
13 University of Waterloo, and, as in the presentation, there  
14 was comments about staff time with our epidemiologist and  
15 how they would be a part of the team, and that would be a  
16 consideration we'd have to look at to find out where the  
17 workload lands.

18                   But that was really his feelings on it is  
19 the initial first phase is something that could be  
20 considered, and it would be a very light impact from a  
21 financial perspective. And he thinks there is some  
22 interest. And, at the same time, that's where he felt, if  
23 we were going to move forward, that's where we would start.

24                   But the big key -- and he was very adamant  
25 as well as I agreed with him -- is that there has to be  
26 partners at the table, because this is a -- well, as Board  
27 Member Steffler mentioned, this is a bigger issue than just  
28 Huron County. It's a large issue, and having an academic

1 asset that is interested in the subject is a valued asset,  
2 and if their technology or reading -- I'm not sure if  
3 they're providing the sensors or whatever, but we think  
4 it's important that we have not just our own  
5 epidemiologist, but others outside looking at the  
6 information that will be collected itself if it gets to the  
7 next step of Phase II. So the partnership, he felt, was  
8 extremely important right from Day 1. That's what he  
9 relayed to me. Any questions about that?

10 I do have a few questions here. I will be  
11 forwarding them to you, Jane, if that's okay, or I'm not  
12 sure if someone has even given you a copy maybe already.

13 MS. WILSON: Yes.

14 THE CHAIRPERSON: If you are recording,  
15 you're not supposed to be recording.

16 FEMALE SPEAKER: Oh. I just thought with  
17 all the other recording devices.

18 THE CHAIRPERSON: They asked beforehand.

19 FEMALE SPEAKER: Oh, sorry.

20 THE CHAIRPERSON: And I appreciate that, but  
21 there was requests made. That's why I mentioned right in  
22 the beginning of the meeting that they requested to be  
23 recording.

24 Sorry about that. I got sidetracked because  
25 I have Karen behind me.

26 There were 13 questions that were sent to me  
27 last evening, actually -- yeah, 13 questions with some  
28 subsection questions. Some of them, I think, would need

1 some time for you to answer. I'm not sure if that's  
2 something that is best or if you'd like me to try to rifle  
3 through them.

4 MS. WILSON: I think my thought when talking  
5 to Sandy when she gave them to me was that I could see a  
6 lot of those questions actually are later in the process  
7 and would probably be better for us to try, if that works  
8 for you, and then --

9 THE CHAIRPERSON: Yes. Okay.

10 MS. WILSON: And then we'll see if we can  
11 get --

12 THE CHAIRPERSON: Okay. As long as you got  
13 a copy, I think that's the most important. And in saying  
14 that, there are some very pointed questions, but, at the  
15 same time, I think some of them fall back on our board, and  
16 I just received these last night, so I think some of these  
17 will to come to myself as well.

18 Any other questions or comments with regards  
19 to the presentation of information or of Jean-Guy? Yes.

20 MALE SPEAKER: You touched on it, but I  
21 would like to see -- I mean, based on what the  
22 recommendation is it does ask for staff time, so I would  
23 like to see an acknowledgement from administration that we  
24 have the capacity for staff to bring this into their  
25 workload without impacting the jobs that they're currently  
26 completing. So, I mean, it's not directly in the  
27 recommendation, but I would like to see that.

28 MR. HOWARD: Sure.

1 THE CHAIRPERSON: Any other questions or  
2 comments? We do have a recommendation, and it sounds like  
3 there might be maybe an added to that of Board Member  
4 Jewitt. A report would be brought back on the staff asking  
5 to move forward. Does that sound fair?

6 BOARD MEMBER JEWITT: Yes.

7 THE CHAIRPERSON: So the recommendation that  
8 is in front of us is that the Board of Health directs staff  
9 to obtain additional information for Wind Concerns Ontario,  
10 the University of Waterloo, the representative related to  
11 the requests to the health unit to participate in that  
12 investigation and further that the findings will be  
13 reported to the board members at a later health board  
14 meeting and further that a report be brought forward  
15 identifying staff in that capacity, staffing capacity.  
16 That's it.

17 So do I have a mover for that? Board Member  
18 Jewitt, Board Member Versteeg. Questions or comments?

19 BOARD MEMBER STEFFLER: I still have a  
20 concern that Middlesex and Lambton and Grey and the other  
21 counties should be asked to take part in this. I still  
22 have a big concern there because this is -- as I said, this  
23 isn't only Huron County wide. I can see it will be a great  
24 cost here in staff time and whatnot, travel, and I would  
25 like to see at least these other neighbouring counties be  
26 involved because I hear it all the dime down in Lambton. I  
27 hear it in Middlesex, Grey, and Durham, and whatnot. I  
28 would like to see this presentation be made to them and get

1 their health units onside as well.

2 THE CHAIRPERSON: Board Member Versteeg:

3 BOARD MEMBER VERSTEEG: Thank you, Chair. I  
4 support this motion, and I think Board Member Steffler's  
5 concerns are genuine and real, but I think, also, you have  
6 to start somewhere, creating somewhere, and I think the  
7 capacity to do as large a study as perhaps Board Member  
8 Steffler is looking for is maybe looking for a little too  
9 much. And I think this look to be like a good starting  
10 point, and we'll have a report back before we proceed on  
11 what kind of costs and staffing commitment we're looking at  
12 specifically. At this point, we don't quite know where  
13 that's going to be for us. So I think this motion is  
14 probably an appropriate one.

15 THE CHAIRPERSON: Board Member Steffler?

16 BOARD MEMBER STEFFLER: Yeah, no.  
17 Certainly, Member Versteeg, I will certainly support the  
18 motion, but I would like to see it expanded.

19 THE CHAIRPERSON: Any other board member  
20 comments? What I will say, if there are no other comments,  
21 is that I think Board Member Versteeg has the right idea.  
22 You have to start somewhere, and then you can start asking  
23 for other partners to come to the table. I think it's  
24 extremely important, like I stressed earlier, that there  
25 will be a relationship right off the get-go with an  
26 academic institute, and I think that's a strength to even  
27 looking at this matter.

28 Any other questions or comments?

1                   Since we don't have a question, all in  
2 favour? And that is carried. Thank you very much.

3                   MS. WILSON: Thank you very much.

4                   THE CHAIRPERSON: I will make a quick  
5 acknowledgement. I saw Sarah come in. We did acknowledge  
6 that you might be arriving at some point, so we just wanted  
7 to let you know that we did talk about your representation  
8 at this meeting.

9                   Thanks, Scott. We mentioned you earlier,  
10 though. We'll go on to actually program reports, and this  
11 is the finance committee.

12 --- Whereupon the audio recording concludes

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