

Wind Power Plaintiff

1. Video Links

- Video explanation of the Lawsuit and the Plaintiff's side of the story.
 - <http://www.wind-watch.org/documents/health-studies-and-wind-turbines/>
 - <http://www.youtube.com/watch?v=5sutK3bCPrY>
 - <http://www.youtube.com/watch?v=4FjER9VJ7CM&feature=related>
- Satire piece on Wind Energy
 - <http://www.abovetopsecret.com/forum/thread724866/pg1>

2. Articles

Ian Hanna's lawsuit may halt all wind turbine project approvals

<http://windconcernsontario.wordpress.com/2011/01/23/ian-hanna%E2%80%99s-lawsuit-may-halt-all-wind-turbine-project-approvals/>

County resident Ian Hanna is about to have his day in court, and the outcome may benefit rural residents throughout Ontario. His application for a judicial review of wind turbine setback distances under the Green Energy Act Regulations will be considered by a panel of three Ontario Divisional Court judges on January 24-25 at Osgoode Hall in Toronto. Their decision is expected by the end of April.



Hanna contends that the government failed to comply with the Precautionary Principle, as it is required to do, when it established the GEA Regulations. The Precautionary Principle requires that, in situations where there is scientific uncertainty about environmental or human health effects of a proposed action, the proponent should not proceed until the uncertainty is satisfactorily resolved.

Hanna's expert witnesses are Dr. Robert McMurtry, who is also a County resident, Dr. Chris Hanning, a U.K. specialist in sleep disorders and Dr. Michael Nissenbaum, a U.S. doctor who conducted the first epidemiological study of wind turbines vs human health.

The government's position seems to be that it prescribed, and followed, a process for approval of the Regulations, and that health issues are irrelevant. CanWEA, the wind energy industry trade association, will make a brief presentation, presumably to deny that wind turbines cause adverse health effects.

This is a David versus Goliath situation – one individual taking on the Ontario government. However, Hanna does not have to prove adverse effects on health, only that there is scientific uncertainty about such effects. He is ably represented by Eric Gillespie, a Toronto-based lawyer with considerable experience and success in environmental lawsuits.

The supervising judge has warned CanWEA members that, if Hanna is successful, all approvals of wind energy projects in Ontario will be halted for an indeterminate period of time — presumably until proper health studies are completed and safe setback distances are established.

The Hanna legal challenge has been funded through the efforts of APPEC, the Alliance to Protect Prince Edward County and CCSAGE, the County Coalition for Safe and Appropriate Green Energy. To date, more than \$200,000 of the \$250,000 target has been raised from donations, mostly by County residents, but also through Wind Concerns Ontario, a province-wide organization of more than 50 citizens' groups.

If the legal challenge is successful, Ian Hanna, assisted by APPEC, CCSAGE and WCO, will have achieved what nobody else has been able to do: compel the Ontario government to give appropriate attention to the adverse effects of wind turbines on human health.

Wind Turbine Syndrome: Excerpts from the Executive Summary

Author: Pierpont, Nina

<http://windconcernsontario.wordpress.com/2010/04/24/wind-turbine-syndrome-excerpts-from-the-executive-summary/>

The core of the book is a scientific report presenting original, primary research on symptomatic people living near large industrial wind turbines (1.5-3 MW) erected since 2004. The findings:

- 1) Wind turbines cause Wind Turbine Syndrome. We know this because people have symptoms when they are close to turbines and the symptoms go away when they are away from turbines. The study families themselves figured out that they had to move away from turbines to be rid of their symptoms, and nine out of ten have moved. Some sold and some abandoned their homes.
- 2) The symptoms are sleep disturbance and deprivation, headache, tinnitus (ringing in ears), ear pressure, dizziness, vertigo (spinning dizziness), nausea, visual blurring, tachycardia (fast heart rate), irritability, problems with concentration and memory, and panic episodes associated with sensations of movement or quivering inside the body that arise while awake or asleep.
- 3) People with pre-existing migraine disorder, motion sensitivity, or damage to inner ear structures (such as hearing loss from industrial noise exposure) are more susceptible than other people.
- 4) Symptoms are not statistically associated with pre-existing anxiety or other mental health disorders.
- 5) The symptom complex resembles syndromes caused by vestibular (inner ear balance organ) dysfunction. The proposed mechanism is disturbance to balance and position sense by noise and/or vibration, especially low frequency components of the noise and vibration.
- 6) An extensive review of recent medical literature reveals how balance-related neural signals affect a variety of brain areas and functions, including spatial awareness, spatial memory, spatial problem-solving, fear, anxiety, autonomic functions (such as nausea and heart rate), and aversive learning. These known neural relationships provide a robust anatomic and physiologic framework for Wind Turbine Syndrome.
- 7) Medical and technical literature on the resonance of sound or vibration within body cavities (chest, skull, eyes, throat, ears) is reviewed, because study subjects experience these effects.
- 8) Published studies of documented low-frequency noise exposure (both experimental and environmental) are reviewed. These demonstrate effects on people similar or identical to Wind Turbine Syndrome. A study from Germany in 1996 may indeed be Wind Turbine Syndrome.
- 9) Recent mail-in survey studies of people who live near wind turbines in Sweden and the Netherlands show that people are severely annoyed at noise from wind turbines at much lower A-weighted noise levels than for traffic, train, or aircraft noise.
- 10) Published literature documenting the effects of environmental noise on cardiovascular health and children's learning are reviewed. For health reasons, the World Health Organization recommends lower thresholds for nighttime noise than are currently observed in most countries — especially when the noise has low-frequency components.
- 11) Wind Turbine Syndrome gives a name and medical description to a set of symptoms severe enough to drive people from their homes, and establishes medical risk factors for such symptoms. This study and other studies reviewed in the report indicate that safe setbacks will be at least 2 km (1.24 miles) and even farther for larger turbines and in more varied topography. Further research is needed to clarify physical causes and physiologic mechanisms, explore other health effects of living near wind turbines, determine how many people are affected, and investigate effects in special populations, including children.