



FOR IMMEDIATE RELEASE

NA-PAW supports Ontario anti wind groups calling for the resignation of Medical Officer of Health, Dr. Arlene King.

“Reasonable people do not leave their homes to sleep elsewhere for frivolous reasons” (FOI document 2, admission by Ministry of the Environment, MOE Ontario)

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NA-PAW (North American Platform Against Wind Power) repeats its call for an immediate full public inquiry and further supports groups calling for the resignation of Medical Officer of Health, Dr. Arlene King.

In light of Freedom of Information documents received today, requested 1.5 years ago, it is clear that the Ontario Ministry of the Environment (MOE) was deeply engaged in planning abatement measures due to numerous complaints of noise and effects from transformer stations related to wind turbine operations.

These FOI disclosures dating from over 3 years ago have resulted in shocking information that Ministry of the Environment provincial officers (Ontario) were working on an abatement plan to help families impacted by health effects from turbine noise and transformer station electrical issues.

While most of the 330 pages are missing, the 26 pages that were supplied are surprisingly damning. Why would the Ministry of the Environment appear to be discussing mitigation of the problems reported and yet this discussion was not shared with the public? If there were a sincere effort to mitigate problems associated with industrial wind and affected persons, “numerous,” again, why did this initial effort not progress?

The abatement plan was completed prior to the implementation of the Green Energy Act, and prior to Dr. Arlene King’s “literature review” which concluded, incorrectly, that there are no health effects from the Ontario setbacks. But these obvious health effects, many very serious, were noted years



ago in the documents. **And where is the Abatement Plan that was clearly under construction?**
By whose authority did that disappear?

QUOTES: FROM THE DOCUMENTS:

1.1 Noise emissions from xxx..... xxx County wind turbines....***are producing large numbers of complaints*** (our emphasis) (dating back to March, 2006) alleging adverse health effects (i.e. harm or material discomfort, allegations of adverse effects on health, rendering property unfit for human use, loss of enjoyment of normal use of property, and, interference with the normal conduct of business), due to noise emissions from the 133 wind turbines, and the associated step-up transformer station.

1.5 MOE Provincial Officers have attended at several of the complainant's residences and have confirmed that despite the noise emissions apparently complying with the applicable Cof A limits that the noise emissions are in fact causing material discomfort to the residents in and around their homes.

1.6 GDO Provincial Officers have measured wind turbine noise levels at complainant's homes that appear to indicate non-compliance with the CofA(Air).

HEALTH EFFECTS WERE CONFIRMED YEARS AGO.

Evidence in the documents reveal that the MOE officers were trying to get relief for affected homeowners.

These efforts and warnings were made and discussed before Chief Medical Officer of Health Arlene King had started working on her literature review that was released in May 2010.

NA-PAW's Sherri Lange questions how the Chief Medical Officer of Health would not take the issue to the highest level of concern. Even as families who were being impacted were reaching out to her for help she chose not to investigate or speak with them. Why? An Abatement Plan was aborted. Why?

Additionally, it has come to the attention of NA-PAW that Dr. King engaged in a teleconference around wind turbine "noise" and health problems in 2009 that included Order of Canada Orthopaedic surgeon [Dr. Robert McMurtry](#), researchers Nissenbaum and Krogh, and others, so the questions around willful blindness now become highlighted.

The most obvious questions are of possible collusion with the wind industry, possible mutual quiet agreements, mitigation, and fairly obvious censorship of actual medical complaints going back to 2006. These "conversations" appear to have reached the Federal Health leadership as well.

A quote from a letter from a wind company to the Ministry of Environment Ontario suggests a "consistent position" be adopted by both parties: It might be easily inferred that



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health complaints need to be “managed,” as part of the investment in the long goal of Green Energy Plans for Ontario.

“An enormous investment has been made to build Canada’s largest and premier wind energy facility....To assist in bringing this discussion to closure we request a meeting in part to review the facts surrounding both the TS (Transformer Station) and the wind turbine generators and even more importantly to explain policy and the legal reasons why the maintenance of a consistent position by the MOE is extremely important, both to xxx and to the cause of Green Energy in Ontario”

This feels like a pattern of industry pressure, gross negligence and possibly collusion. ***NA-PAW and other groups repeat the call for an independent public inquiry as well as the immediate removal of Dr. Arlene King from her services for the province and people of Ontario.***

According to the Set of Minimum Competencies for Medical Officers of Health in Canada: Final Report, March 2009:

- “Investigating and Mitigating Immediate Risks to Human Health: MOHs are responsible for assessing potential risks to the health of the public and taking whatever steps are necessary to reduce or eliminate that risk.”

It is time for a full public investigation into how the Ministry of the Environment has granted permits, while in full and complete knowledge of ill health and in many instances acute distress. One officer notes that as early as 2006, MANY complaints were registered, and yet some people report they were being told, “You are the only one complaining.”

FEDERAL ISSUES:

In a separate Federal Access to Information file obtained, documents received show conversations between **Health Canada** officials and CanWEA arranging a meeting regarding the planned health study, notably under Dr. David Michaud’s guidance, the lead for the proposed study design team. This study, to be undertaken in the next two years on wind turbine health related problems, was announced to the public only after CanWEA and some members of the Health Canada team apparently met.

Why would Health Canada reach out to discussions with the wind industry regarding a balanced and fair health assessment and wind turbines? CanWEA is a lobby group. The appearance is that CanWEA has been granted preferential access to Health officials while those officials have been ignoring or smothering the sincere health complaints of residents. The Federal Health Minister, Leona Aglukkaq, has [been equally inundated with letters](#) outlining health problems for years.



“It is questionable at best,” says Lange, “suspicious and far from fair at the worst. If it walks like a wind developer, and then HC talks and acts like a wind developer, secretive and protectionist, well, you likely have two wind developers, most likely neither of whom wishes troubled waters on the aggressive wind deployment plans laid out.”

CONCLUSION:

In the meantime, people and livestock continue to suffer. Some cannot afford to leave or take a second residence, and some have lost literally everything. “This is a province that is in total neglect of protection of its citizenry. Something must be done,” Lange added. “The removal of Dr. King and appointment of a proven independent thinker, one whose expertise includes respect for peer reviewed documents and a recent world respected study by Nissenbaum, Aramani and Hanning would be welcome. Surely, a Chief Medical Officer of Health for a major province would undertake study of the recent and most up to date studies in an area where people have been reporting ill health and malformed, dead livestock, as well as economic losses from reduced herds. If the MOH is not up to date with current and world studies and reports and consistently refuses to speak to the people and accurately reflect upon their experiences, it is certainly time to ask that Officer to step aside for the betterment of the Health of Ontarians. The Chief Officer of Health for each province must be guided by the most recent and best information on health issues, not merely as in the case of Ontario, a rather antique literature review.”

With apparent full knowledge of harm to human health, wind deployment continues across Ontario and Canada, while officers to protect public health get a failing grade. These officers have the moral and legal duty to protect human health, but have instead apparently covered the issues with “policy” that continues to degrade not only health, but also our ability to trust our highest public officers. To many of those suffering, having left homes, it must appear to be willful blindness, or even willful malicious injury.

- See below for contacts and references.



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See PDFs

- A Set of Minimum Competencies for Medical Officers of Health in Canada: Final Report, March 2009
- Large Files: Please contact by email if you wish these files to be sent, or may be accessed on www.ontario-wind-resistance.org/
- Nissenbaum, Aramani, Hanning peer reviewed study
- NA-PAW/EPAW media release: July 2012, calls for Health Canada to turn over study to CIHR (Canadian Institutes of Health Research)

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