

6. Conclusions And Recommendations

6.1. Implementation of the Guidelines

The potential health effects of community noise include hearing impairment; startle and defense reactions; aural pain; ear discomfort speech interference; sleep disturbance; cardiovascular effects; performance reduction; and annoyance responses. These health effects, in turn, can lead to social handicap; reduced productivity; decreased performance in learning; absenteeism in the workplace and school; increased drug use; and accidents. In addition to health effects of community noise, other impacts are important such as loss of property value. In these guidelines the international literature on the health effects of community noise was reviewed and used to derive guideline values for community noise. Besides the health effects of noise, the issues of noise assessment and noise management were also addressed. Other issues considered were priority setting in noise management; quality assurance plans; and the cost-efficiency of control actions. The aim of the guidelines is to protect populations from the adverse health impacts of noise.

The following recommendations were considered appropriate:

- a. Governments should consider the protection of populations from community noise as an integral part of their policy for environmental protection.
- b. Governments should consider implementing action plans with short-term, medium-term and long-term objectives for reducing noise levels.
- c. Governments should adopt the health guidelines for community noise as targets to be achieved in the long-term.
 - a. Governments should include noise as an important issue when assessing public health matters and support more research related to the health effects of noise exposure.
 - b. Legislation should be enacted to reduce sound pressure levels, and existing legislation should be enforced.
 - c. Municipalities should develop low-noise implementation plans.
 - c. Cost-effectiveness and cost-benefit analyses should be considered as potential instruments when making management decisions.
- d. Governments should support more policy-relevant research into noise pollution (see section 6.3).

6.2. Further WHO Work on Noise

The WHO Expert Task Force proposed several issues for future work in the field of community noise. These are:

- a. The WHO should consider updating the guidelines on a regular basis.
- b. The WHO should provide leadership and technical direction in defining future research priorities into noise.
- c. The WHO should organize workshops on the application of the guidelines.
- d. The WHO should provide leadership and co-ordinate international efforts to develop techniques for the design of supportive sound environments (e.g. ‘soundscapes’).
- e. The WHO should provide leadership for programmes to assess the effectiveness of health-related noise policies and regulations.
- f. The WHO should provide leadership and technical direction for the development of sound methodologies for EIAP and EHIAP.
- g. The WHO should encourage further investigation into using noise exposure as an indicator of environmental deterioration, such as found in black spots in cities.
 - a. The WHO should provide leadership, technical support and advice to developing countries, to facilitate the development of noise policies and noise management.

6.3. Research Needs

In the publication entitled “Community Noise”, examples of essential research and development needs were given (Berglund & Lindvall 1995). In part, the scientific community has already addressed these issues.

A major step forward in raising public awareness and that of decision makers is the recommendation of the present Expert Task Force to concentrate more **on variables which have monetary consequences**. This means that research should consider the dose-response relationships between sound pressure levels and politically relevant variables, such as **noise-induced social handicap, reduced productivity, decreased performance in learning, workplace and school absenteeism, increased drug use and accidents**.

There is also a need for continued efforts to understand community noise and its effects on the health of the world population. Below is a list of essential research needs in non-prioritized order. Research priorities may vary over time and by place and capabilities. The main goal in suggesting these research activities is to improve the scientific basis for policy-making and noise management. This will protect and improve the public health with regard to the effects of community noise pollution.

Research related to measurement and monitoring systems for health effects

- Development of a global noise impact monitoring study. The study should be designed to obtain longitudinal data across countries on the health effects on communities of various types of environmental noise. A baseline survey could be undertaken in both developed and developing countries and monitoring surveys conducted every 3-5 years. Since a national map of noise exposure from all sources would be prohibitively expensive, periodic surveys of a representative sample of about 1000 people (using standard probability techniques) could be reliably generalized to the whole population of a country with an accuracy of plus-or-minus 3%. A small number of standard questions could be used across countries to obtain comparative data on the impact of all the main types of noise pollution.
- Development of continuous monitoring systems for direct health effects in critical locations.
- Development of standardized methods for low-cost assessment of local sound levels by measurement or model calculations.
- Development of instruments appropriate for local/regional surveys of people's perceptions of their noise/sound environments.
- Protocols for reliable measurements of high-frequency hearing (8000 Hz and above) and for evaluation of such measures as early biomarkers for hearing impairment/deficits.

Research related to combined noise sources and combined health effects

- Research into the combined health effects of traffic noise, with emphasis on the distribution of sound levels over time and over population sub-environments (time-activity pattern).
- Comprehensive studies on combined noise sources and their combinations of health effects in the 3 large areas of transport (road, rail and aircraft).
- Procedures for evaluating the various health effects of complex combined noise exposures over 24 hours on vulnerable groups and on the general population.
- Methods for assessing the total health effect from noise immission (and also other pollution) in sensitive areas (for example, airports, city centers and heavily-trafficked highways)

Research related to direct and/or long-term health effects (sensitive risk groups, sensitive areas and combined exposures)

- Identification of potential risk groups, including identification of sensitive individuals (such as people with particular health problems; people dealing with complex cognitive tasks; the blind; the hearing impaired; young children and the elderly), differences between sexes, discrimination of risk among age groups, and influence of transportation noise on pregnancy course and on fetal development.

- Studies of dose-response relationships for various effects, and for continuous transportation noise at relatively low levels of exposure and low number of noise events per unit time (including traffic flow composition).
- Studies on the perception of control of noise exposure, genetic traits, coping strategies and noise annoyance as modifiers of the effects of noise on the cardiovascular system, and as causes of variability in individual responses to noise.
- Prospective longitudinal studies of transportation noise that examine physiological measures of health, including standardized health status inventory, blood pressure, neuro-endocrine and immune function.
- Knowledge on the health effects of low-frequency components in noise and vibration.
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Research related to indirect or after-effects of noise exposure

- Field studies on the effects of exposure to specific sounds such as aircraft noise and loud music, including effects such as noise-induced temporary and permanent threshold shifts, speech perception and misperception, tinnitus and information retrieval.
- Studies on the influence of noise-induced sleep disturbance on health, work performance, accident risk and social life.
- Assessment of dose-response relationships between sound levels and politically relevant variables such as noise-induced social handicap, reduced productivity, decreased performance in learning, workplace and school absenteeism, increased drug use and accidents.
- Determination of the causal connection between noise and mental health effects, annoyance and (spontaneous) complaints in areas such as around large airports, heavy-trafficked highways, high-speed rail tracks and heavy vehicles transit routes. The connections could be examined by longitudinal studies, for example.
- Studies on the impact of traffic noise on recovery from noise-related stress, or from nervous system hyperactivity due to work and other noise exposures.

Research on the efficiency of noise abatement policies which are health based

- Determination of the accuracy and effectiveness of modern sound insulation (active noise absorption), especially in residential buildings, in reducing the long-term effects of noise on annoyance/sleep disturbance/speech intelligibility. This can be accomplished by studying sites that provide data on remedial activities and changes in behavioral patterns among occupants.
- Evaluation of environmental (area layout, architecture) and traffic planning (e.g. rerouting) interventions on annoyance, speech interference and sleep disturbance.
- Comparative studies to determine whether children and the hearing impaired have equitable access to healthier lives when compared with normal adults in noise-exposed areas.

- Development of a methodology for the environmental health impact assessment of noise that is applicable in developing as well as developed countries.

Research into positive acoustical needs of the general population and vulnerable groups

- Development of techniques/protocols for the design of supportive acoustical environments for the general population and for vulnerable groups. The protocols should take into account time periods that are sensitive from physiological, psychological and socio-cultural perspectives.
- Studies to characterize good “restoration areas” which provide the possibility for rest without adverse noise load.
- Studies to assess the effectiveness of noise policies in maintaining and improving soundscapes and reducing human exposures.