The Impact of Road Traffic Noise on Hospital Workers

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Abstract

Background/Objectives: None of the researchers has investigated the risk on workers exposed to noise pollution in Jordan. This study tries to fill in this gap through investigating the effect of traffic noise on the performance of hospital workers in Amman, the capital of Jordan, as a specific affected group. Method: Noise levels were measured at locations adjacent to three main hospitals with readings taken during two 1-hour periods 12 hours apart. A cross-sectional attitudinal survey was carried out in these hospitals using a predesigned questionnaire. A pilot study was carried out in order to examine if there was any feedbacks before the full-scale survey is launched. A sample of 150 participants from medical care personnel in the three hospitals including doctors, nursing staff and administrators, were subjected to self - answered questionnaire and 145 questionnaires were valid returns indicating a high response rate. Findings: The results reveal that the studied hospitals suffer much higher noise levels than the permissible limits and these levels were found to have a negative impact on workers' and patients outcomes. More than 43% of the medical care staff reported that they always get annoyed by traffic noise and this causes them a difficulty in concentration and distract their attention while working. 50% agree that traffic noise has a negative impact on their performance. 26% of the survey participants reported that they suffer from headache due to the high noise levels and as such some potential countermeasures to mitigate the problem are recommended. **Conclusion/Improvements:** The average measured sound levels were found to be much higher than the environmental daytime¹ and nighttime noise limits required by the regulations in Jordan. Noise pollution was also found to either directly or indirectly affects, in a simultaneous manner, the subjective perception of noise, emotion, physiology and experience of noise of the medical care staff.

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1. Introduction

Noise can be emitted from different sources such as: factories, aircrafts, railways and road traffic with the last being the chief "offender"¹.

Road Traffic Noise (RTN) is a combination of the noises produced by vehicle engines, exhaust, and tires. It increases by defective mufflers or other faulty equipment. Also it is not constant; noise levels change with the number, type, and speed of the vehicles.

Many recent studies have investigated the health effects of noise pollutant on exposed residents^{2–5}, and the

noise impact on workers at specific working places^{6–8}. More specifically, a number of studies have investigated the impact of unwanted sound on patient outcomes and caregiver effectiveness. Cmiei et al.⁹ reported noise as a main source of sleep disturbance amongpatients which also decreases their confidence in the professional competence of the clinical staff. Blomkvist et al.¹⁰ found that patients in a coronary critical care unit judged healthcare worker attitudes and care to be much better during the lower acoustical periods. They also found that the workers exposed to different noise levels over the workday reported higher levels of stress.

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During the last two decades, the city of Amman, the capital of Jordan, has been subjected to significant demographic and spatial changes coupled with dramatic growth of vehicular traffic. This has led to an increase in the magnitude of RTN levels and growing concern among residents of the health impact of these levels. Yet, only few studies were carried out to investigate, evaluate and control noise pollution in Amman^{4,11–15}. However, none of these studies has investigated the risk on workers exposed to noise pollution in the various working places. Therefore, this study further investigates the noise pollution in Amman and focuses on the impact of noise pollution on medical care workers and patients in hospitals.

2. Methodology

Recent measurements of Road Traffic Noise (RTN) levels at several locations in Amman city, the capital of Jordan were used for the purpose of this study where L10 (1h) and L_{eq} noise levels were determined with readings taken during two 1-hour periods between 7:00 and 8:00 and between 19:00 and 20:00 The two periods which are 12 hours apart aimed to cover the morning and evening traffic conditions during work days in summer.

A structured questionnaire was prepared to evaluate the annoyance level of the medical care staff caused by traffic noise pollution around hospitals.

The first part of the questionnaire includes the independent variables affecting the level of annoyance of the medical care staff such as:

- Sex.
- Age.
- Profession (doctors, nurses or administrators).
- Marital status.
- Educational background.
- Hospital department.
- Work shift.
- Work experience.

The second part includes questions that show subjective perception of ambient noise and its effects on health.

3. Data Collection

A pilot study was carried out at the beginning by distributing 10 questionnaires in order to examine if there was any feedbacks on the questionnaire before the full-scale survey is launched. The questionnaire was then put in it's final form and fully distributed.

A sample of 150 participants from medical care personnel in the three hospitals including doctors, nursing staff and administrators, were subjected to self – answered questionnaire to investigate the health and social impacts of road traffic noise on them. 145 questionnaires were valid returns indicating a high response rate of about 97%.

4. Results

The noise survey results revealed the measured noise levels at locations adjacent to hospitals were found to be range between70 and 75 dB (A) which exceeds those suggested by local regulation of 45 dB for educational institutes and hospitals as shown in Table 1. Based on these results the three hospitals were selected to study the impact of traffic noise on the medical care staff. These hospitals together with the number of respondents from each hospital are listed in Table 2 which also shows the day and night measured noise levels at the studied locations.

Table 1.Maximum equivalent sound levels for differentareas in Jordan

Area	Leq dB (A)			
	DAY	NIGHT		
Residential areas in cities	60	50		
Urban areas	55	45		
Residential areas in villages	50	40		
Residential areas including work- shops, handicraft centers, com- mercial areas and city center.	65	55		
Industrial areas (heavy industries)	75	65		
Educational institutes, hospital and worship places	45	35		
Source : Ministry of Environment [17].			

Analysis of the collected data revealed the results shown in Tables 3 and 4. The figures in the tables represent detailed average values of the overall sample; the actual values for each hospital will be discussed in the following sections.

4.1 Sample Characteristics

Table 3 shows the detailed characteristics of the sample

• The overall sample consists of 57% female with 43% males, 48% are between 25 and 35 years old while 9.0% are more than 50 years old.

Location Identification	Noise L	evels dB (A)	Hospital	No. oF Respondents					
	Day Time	Night Time							
Fifth circle	70	68	Arab Medical Centre	(AMC)	50				
Al-Madina Al-Munawara	70	67	Ibn Al-Haitham Hospital	(IHH)	50				
Queen Rania st.	72	72	Jordan University Hospital	(JUH)	45				
Source: Obaid et al, 2012[11].									

Table 2. Day and night noise levels at the selected sites

Table 3. Sample characteristics (%) for each hospital

	Traffic noise annoys me											
	Always		Sometimes			Rarely		Never				
AMC	42.0		30.0			18.0		10.0				
IHH	44.0		42.0			6.0		8.0				
JUH	42.0		44.0			14.0		0.0				
Average	42.67		38.67		12.67			6.0				
	Traffic noise is an environmental pollutant											
	Strongly agree		Agree	Unde	cided	Disagre	e	Strongly disagree				
AMC	56.0		36.0	8.	.0	0.0		0.0				
IHH	44.0		40.0	10	0.0	6.0		0.0				
JUH	52.0		42.0	4.	.0	0.0		2.0				
Average	50.67		39.33	7.	33	2.0		0.67				
			Traffic	noise ł	1as an i	mpact on r	ny pe	erformance				
	Strongly agree		Agree	Unde	cided	Disagre	e	Strongly disagree				
AMC	36.0		42.0 8		.0	10.0		4.0				
IHH	10.0		62.0 16		5.0	10.0		2.0				
JUH	18.0		46.0 26		5.0	10.0		0.0				
Average	21.33		50.0 16		.67	10.0		2.0				
		H	low would yo	u class	ify the	traffic nois	e aro	und your hospital				
	Very high	ligh High N			erate	Low		Very low				
AMC	16.0		10.0	28	3.0	18.0		28.0				
IHH	10.0		30.0	50	0.0	6.0		4.0				
JUH	18.0		36.0	36	5.0	8.0		2.0				
Average	14.67		25.33	38	3.0	10.67	7	11.33				
			How los	ıg you	have be	een workin	g in t	his hospital				
	Less than 5 year	rs		5-10 y	rears		More than 10 years					
AMC	66.0			24.	0			10.0				
IHH	66.0			22.	0			12.0				
JUH	72.0			0			12.0					
Average	68.0 20				57			11.33				
			How does	the tra	ffic noi	se level cha	nged	in this period				
	Highly increased	Slo	wly increased	l	N	No change Decreased						
AMC	26.0		28.0			38.0		8.0				
IHH	22.0	34.0			36.0			8.0				

JUH	28.0		42.0			30.0			0.0				
Average	25.33		34.67				34.67			5.33			
	What does traffic noise cause to you												
	Mood Disturbance		Difficulty in concentration		n Headache n		Distract my attention while working		L	Nothing			
AMC	23.5		21.5		13	3.5	17.5			24.0			
IHH	18.0		16.0		41	1.0		7.0			18.0		
JUH	32.5		20.5		22	2.5		14.5			10.0		
Average	24.67		19.33		25	.67		13.0			17.33		
	What time of day does RTN bother you the most												
	Morning	Afte	rnoon	Evening			At ni	ight All the		e	Never		
									time	:			
AMC	22.0	3	3.0	7.0			14.	0	16.0		8.0		
IHH	30.0	2	1.0		13.0		6.0)	16.0		14.0		
JUH	44.0	2	6.0		11.0		9.0)	8.0		2.0		
Average	32.0	26	5.67	1	0.33		9.6	7 13.33		3	8.0		
			W	hich of t	the fol	lowing	g are mos	t affecte	ed by Ti	raffi	ic Noise (TN)		
	The elder	ly	The	elderly	erly Mid		Aiddle aged M		e aged		children		
	(male)		(1	emale)	(m		nale)	(ten	nale)				
AMC	28.6			37.3		8.0		14.6			11.5		
IHH	29.5			22.5		15.2		12.8			20.0		
JUH	34.8			20.8		1	8.4	13.8		13.8			12.2
Average	31.0			26.9		1	3.9	.9 13.7		14.5			

- 35% of the sample are doctors (18% of the JUH sample are dentists), 38% are nursing staff while the rest are administrators and other professions like nursing practical, with different work shifts (A, B and C shift)*.
- The work experience of about 41% is less than 2 years, 31% between 2 and 6 years, 9% between 6 and 10 years and those with work experience more than 10 years constitute about 18% of the overall sample.
- The majority of the sample (66%) is graduated from Jordanian universities while 15% from western universities and the rest are graduated from other Arab countries.

*A shift: 8 A.M. till 4 P.M. B shift: 4 P.M. till 12 P.M. C shift: 12 P.M. till 8 A.M.

4.2 Response to Noise

Table 4 shows the detailed analysis of the response of interviewed persons to traffic noise, revealed the following results:

• 42.7% of the medical care staff always get annoyed because of traffic noise; while 38.7% sometimes get annoyed by traffic noise and 6% are never get annoyed.

- More than the halves of the sample strongly agree that traffic noise is an environmental pollutant andonly 2% disagree with this perception.
- Studying the existence of an impact of current noise levels on the performance of staff revealed that about 21% of respondents strongly agree, and 50% agree that traffic noise has an impact on performance while only 10% disagree this perception.
- The respondents were asked to classify the traffic noise around their hospitals: Nearly 15% considered the noise is very high and 25% said that it is high, while 11% claimed that traffic noise is low, and 11% said that it is very low. These results leads to conclude that a total of about 40% of respondents perceive the neighboring noise level as high or very high.
- 68% of the respondents have been working for a period less than 5 years in a certain hospital and 11% have been working for more than 10 years, about 25% see that the noise level highly increased, 35% slowly increased, 35% noticed no change and 5% feel that the noise level has decreased during the period of working in their hospitals.

	SEX							
		Male		Female				
AMC		30		70				
IHH		48		52				
JUH		50		50				
Average		42.67		57.3	3			
			AG	E (years)				
	Less than 25		25-35	35-50		More than 50		
AMC	14		70	8		8		
IHH	30		40	22		8		
JUH	40		34	16	10			
Average	28		48	15.33 8.67				
			MARIT	TAL STATUS				
	Sin	gle	Married	othe	er			
AMC	7	6	24	0.0				
IHH	4	4	54	2.0				
JUH	7	6	24	0.0				
Average	65	.33	34.0	0.6	7			
	TYPE OF WORK							
	Doctors	Ad	ministrators	Nursing Staff		Others		
AMC	12		6	70		12		
IHH	32		16	28		24		
JUH	60		6	16		18		
Average	34.67		9.33	38.0 18				
			WORK EXPE	RIENCE (YEARS)				
	Less than 2		2-6	6-10	More than 10			
AMC	40		40	6	14			
IHH	34		28	12	26			
JUH	50		26	10	14			
Average	41.33		31.33	9.33 18				
	GRADUATION UNIVERSITY							
	Jordanian	universities	Other A	rab universities	Weste	rn universities		
AMC	7	0		12	18			
IHH	5	6		26 18				
JUH	7	2		18 10				
Average	66	5.0		18.67		15.33		

 Table 4.
 Response to traffic noise (%) for each hospital

• Investigating the health impact of traffic noise resulted in 24% of the respondents reporting that traffic noise can cause a mood disturbance and 19% traffic noise cause a difficulty in concentration with nearly 26% suffer a headache from high noise levels, 13% show that traffic noise distract their attention while working, and finally 17% are not affected by the current traffic noise levels.

• Morning and afternoon are the most time of day that bothers the Medicare givers: 32% reported that

	SEX											
		Male		female								
AMC		28.6		71.4								
IHH		63.6		36.4								
JUH		38.1		61.9								
Average		43.7			56.3							
			AGE (years)									
	Less than 25		25-35		35-	50	More than 50					
AMC	19.0		61.9		4.3	3	14.3					
IHH	22.7		36.4		27.	3	13.6					
JUH	33.3		42.9		19.	1	4.8					
Average	25.0		46.9		17.	2	10.9					
			1	MARITAL STATU	JS							
	Singl	e		Married			Other					
AMC	71.4			28.6			0.0					
IHH	27.3			72.7			0.0					
JUH	66.6			33.3			0.0					
Average	54.7			45.3	0.0							
	TYPE OF WORK											
	Doctors	Admini	strators	Nursing S	Staff	Others						
AMC	14.3	4.	.8	76.2		4.8						
IHH	31.8	13	.6	27.3		27.3						
JUH	66.6	0.	.0	23.8			9.5					
Average	37.5	6.	.3	42.2	42.2 14.0							
		T	WORK	EXPERIENCE (YEARS)	1						
	Less than 2	2-	-6	6-10			More than 10					
AMC	28.6	52	2.4	0.0		19.0						
IHH	27.3	13	.6	18.2		40.9						
JUH	47.6	47	.6	9.5		28.6						
Average	34.4	26	.6	9.4			29.6					
			GRAD	UATION UNIVE	RSITIES							
	Jordanian uni	iversities	Othe	er Arab universiti	es	We	'estern universities					
AMC	61.9			4.8			33.3					
IHH	50.0			22.7		27.3						
JUH	57.1			28.6			14.3					
Average	56.2			18.8		25.0						
	WHAT TIME OF DAY DOES RTN BOTHER YOU THE MOST											
	Morning	Afternoon	Evening	At night	All the time		Never					
AMC	23.8	40.5	2.4	0.0	33	3.3	4.8					
IHH	22.7	18.2	18.2	4.5	27	7.3	4.5					
JUH	47.6	28.6	9.5	4.8	9.5		0					
Average	31.3	28.9	10.2	3.1	23	3.4	3.1					

Table 5. Characteristics of respondents who are "always" annoyed by TN (%) for each hospital

morning is the time of the day they get bothered by road traffic noise the most while 26.7% said that this time is an afternoon time, with 10% see that the evening time is the most bothering one, 13% consider that all the time the traffic noise bothers them and 8% never get bothered by traffic noise.

• When asked about the patients' category most affected by traffic noise from the medical point of view, 31% of respondents reported that the elderly men is the most affected while approximately 27% show that the elderly women are the most, 14% considered the middle aged men are the most affected and around 14% for the middle aged women and 14% considered that the children are the most affected by traffic noise. Thus the elderly patients constitute are perceived as the most affected age group.

A detailed analysis was carried out for the group of respondents who reported that they are "always" annoyed by traffic noise. This group constitutes significant properties of about 43% of the total interviewed persons. The results of the analysis exhibited in Table 5 give the characteristics of this group and reveal the following facts:

- About 56% of this affected group is females, 45% are married, 38% are doctors and 42% are nursing staff.
- About 35% have less than 2 years of work experience and about 30% have more than 10 years. More than 56% are graduates of Jordanian universities and about 25% are western graduates.
- More than 23% are annoyed all the time. The highest proportion of this group (more than 31%) are annoyed most during morning working hours followed by about 29% annoyed most in the afternoon.

Assuming the same distribution of the total and this group characteristics, it can be deduced that the main factors affect the degree of annoyance include the marital status where singles constitute about 55% of the total sample and 65% of those always annoyed. The other main factor is the working experience where those of more than 10 years of experience constitute about 18% of the total sample compared with 30% of those always annoyed, meaning it is the most affected group.

Comparing these results with the results revealed from a study carried out in Taiwan, 2010 show that staff members aged between 31 and 40 or more than 40 years and staff members with more than five-year work experience displayed more susceptibility to the impact of noise on their work performance. In contrast administrators were less sensitive to the effect to the effect of noise on their work performance¹⁸.

5. Conclusion

This study focuses on a specific issue of traffic noise that is it's impact on the medical care staff of hospitals in the city of Amman, the capital of Jordan.

The results of the study show that the average sound levels measured adjacent to three hospitals (AMC, IHH, and JUH) during daytime and nighttime were 70 and 68 dB (A), 70 and 67dB (A), and 72 and 72 dB (A), respectively. These values are much higher than the environmental daytime noise limit of 45 dB (A) and nighttime limit of 35 dB (A) required by the regulations in Jordan. The majority who were graduated from Jordanian universities, reported that about 43% of the Medicare givers always get annoyed by traffic noise. Early morning and afternoon are the most times of day when noise bothers hospital workers. 26% of the survey participants reported that they suffer a headache from high noise levels and 19% reported that traffic noise cause them difficulty in concentration, while 50% agree that traffic noise has an impact on performance. It can be deduced that noise pollution either directly or indirectly affects, in a simultaneous manner, the subjective perception of noise, emotion, physiology and experience of noise of the medical care staff.

6. Recommendations

The above conclusions reveal that hospitals in Amman suffer high levels of traffic noise which could have a negative impact on workers' and patients outcomes. It is very important that Medcare givers should provide a quite environment, for the staff and patients. This calls for the need to adopt the following recommendations:

- Increase public awareness in general on the importance of environmental protection projects and the effects of traffic noise on public health.
- Apply some mitigation measures along the existing main roads in order to reduce the effect of noise from outside hospitals. These measures may include:
 - Constructing noise barriers including earth berms between the hospitals and the main roads.

- Providing effective noise insulation for the buildings.
- Appling traffic management techniques that can reduce noise levels. For example, trucks can be prohibited from certain streets and roads, or they can be permitted to use certain streets and roads only during specific hours.
- Measures such as improving patients' visiting programs, preparing and distributing publicity materials, posting warning signs and providing noise control educational courses to medical and non-medical staff have proved to be effective in reducing noise levels inside hospitals and their implementation is commended for.

However, further research is recommended into this important issue through carrying out a more comprehensive study of noise levels inside and outside the hospitals in order to provide a more insight into the magnitude and characteristics of this serious environmental issue and to identify the most appropriate mitigation measures.

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8. References

- 1. OECD, Environmental Policies for Cities in the 1990's. OECD; 1990. p. 29. Available from: www.oecd.org
- Ising H, Kruppa B. Health effects caused by noise: Evidence in the literature from the past 25 years. Noise Health. 2004; 6(22):5–13.
- Tang UW, Wang ZS. Influences of urban forms on trafficinduced noise and air pollution: Results from a modeling system. Environmental Modelling Software. 2007; 22(12):1750–64.
- 4. Banerjee D, Chakraborty SK, Bhattacharyya S, Gangopadhyay A. Attitudinal response towards road traffic noise in the indusrial town of Asansol. Environmental Monitoring and Assessment. 2009; 151(1-4):37–44.

- 5. Araghi M, Yaghobi MM. The study of noise pollution caused by Birjand airport on the surrounding residents. Indian Journal of Science and Technology. 2015; 8(11).
- Karami K, Cheraghi M, Fairoozabad M. Traffic noise as a serious effect on class teachers in Fairozabad city, Iran. Journal of Islamic World Academy of Sciences. 2012; 20(2):39–42.
- 7. Omidvari M, Nouri J. Effects of noise pollution on traffic policemen. International Journal of Environmental Research. 2009; 3(4):645–52.
- Roozbahani MM, Nassiri P, Shalkouhi PJ. Risk assessment of workers exposed to noise pollution in a textile plant. International Journal of Environmental Science Techolgy. 2009; 6(4):591–6.
- 9. Cmiel CA, Karr DM, Gasser DM, Oliphant LM, Neveau AJ. Noise control: A nursing team's approach to sleep promotion. American Journal of Nursing. 2004; 104(2):40–8.
- 10. Blomkvist V, Cole J, Ulrich RS. Impact of acoustics on staff and patients in CCU. Hosp Develop. 2005; 36(10):19–22.
- Dakhlallah A, Jadaan K. Attitudes of Jordanian population towards traffic noise. International Journal of Applied Science Engineering. 2005; 3(2):145–50.
- Jamrah A, Al-Omari A, Sharabi R. Evaluation of traffic noise pollution in Amman, Jordan. Environmental Monitoring and Assessment. 2006; 120(1-3):499–25.
- Jadaan K, Al-Dakhlallah A, Goussous J, Gammoh H. Evaluation and mitigation of road traffic noise in Amman, Jordan. Journal of Traffic and Logistics Engineering. 2013; 1(1):51–3.
- Goussous J, Al-Dakhlallah A, Jadaan K, Al-zioud M. Road traffic noise in Amman, Jordan: Magnitude and cost investigation. Journal of Traffic and Logistics Engineering. 2014; 2(2):104–7.
- Banihani Q, Jadaan KS. Assessment of road traffic noise pollution at selected sites in Amman, Jordan: Magnitude, control and impact on the community. Jordan Journal of Civil Engineering. 2012; 6(2):267–78.
- 16. Ministry of Environment. Jordanian Environmental Protection Law, Amman, Jordan; 2003.
- 17. Obaid M, Muqbel A, SalamehQ, Al-Qaise O. Current and modeled traffic noise along Amman road network. University of Jordan: Graduation Project, Civil Eng Dept; 2012.
- Juang DF, Lee CH, Yang T, Chang MC. Noise pollution and its effects on medical care workers and patients in hospitals. International Journal Environmental Science Technology. 2010; 7(4):705–16.