

**NGOs call for immediate action to protect the right to health and life
of women and children affected by the nuclear accident in Fukushima, Japan.**

1. Background

Two years have passed since the Fukushima Nuclear Power Plant disaster in Japan on March 11, 2011. Human Rights Now states that the response of the government is insufficient to protect people's right to life, right to health and reproductive health, especially for the most vulnerable to radiation, such as babies, children and pregnant women.¹

2. Evacuation policy

(1) Due to the nuclear disaster, a huge amount of radioactive material was released, which is estimated 168 times of that released by the atomic bomb in Hiroshima. This contamination creates serious risks to the health of the population, in particular pregnant women, babies, children and the younger generations most vulnerable to the harm from radiation.

(2) Currently, many citizens in Fukushima still live in highly contaminated areas, because the government limited evacuation zones very narrowly based on a 20mSv per year exposure standard, which is indeed 20 times greater than the previous regulation based on international standards set by ICRP. After the accident, the government designated a 30 kilometer circle as an evacuation zone or preparation area for evacuation. In addition, the government uses 20mSv per year as the standard to recommend or assist evacuation. Recently the government further narrowed the evacuation zone, and evacuees started to return to the former evacuation zone.

3. People living in contaminated areas

There are huge areas with a big population that are not included in the evacuation zone including big cities such as Fukushima or Koriyama city.. Some of these areas are highly contaminated (around 20mSv per year), however, these areas are not designated as the evacuation areas. Without sufficient financial support for evacuation from the government, many people who cannot afford to relocate have no choice but to stay within the contaminated areas. Some families including children, babies and pregnant women decided to self-evacuate, but this is not the majority.² Many people, including children and pregnant women are living in contaminated areas without any effective measures to prevent risks, and children are playing around outside without any protective

¹ Human Rights Now is an international human rights NGO based in Tokyo, Japan < <http://hrn.or.jp/eng/>>

² TEPCO declared that the standard of compensation for people living in the contaminated area outside of the evacuation zone, including children and expectant mothers who voluntarily evacuated, would be an amount up to 600,000 yen: children and expecting mothers staying in the contaminated area will receive a compensation amount of 400,000 yen. Others, regardless of their status, will receive only 80,000yen.

measures. Since many schools and kindergartens are still placed in highly contaminated surroundings, children's rights to live in a healthy environment are at stake.

4 Rights to health of the affected people.

The Japanese authorities have taken very few measures to protect people's rights to health in the contaminated areas.

First, the health examination services provided by the government have been slow and insufficient. Free periodic and comprehensive health check systems on all relevant symptoms related to radiation has not yet been established for the affected people. Fukushima residents who wish to receive a health check or an internal radiation check are presently put on a long waiting-list. Health checks for pregnant women are not sufficient at all.

The prefectural government conducts thyroid examinations only for school students under the age of 18, and it will take 3 years to finish "preliminary examinations" for all children in Fukushima.

In March 2012, the government published the result of the first examination on children in 13 cities, and it shows over 35% of young people tested have thyroid cysts or nodules.³

However, the government arbitrarily set up criteria that thyroid nodules less than 5.0mm or cysts less than 20.0mm are safe and children who have such symptoms have to wait 2 years to get another examination. Furthermore, the examined people are denied access to information regarding the test results, picture data of the examination and no proper explanation is provided.

Second, food safety is another concern. Although a food examination system has been established in Fukushima, methods for sampling are very loose since only a very small portion of the food is subject to examination. In some areas of Fukushima, local food is used for school lunches.

Third, no measures have been taken to move schools for children to less contaminated areas, and the fresh-air vacation system is not firmly established by public support.

Fourth, the government fails to provide accurate information. The government fails to disclose the level of contamination to the people living in the contaminated areas in a timely manner.⁴

Moreover, the government provides no proper guidance regarding the risk of radiation. Instead, the Fukushima government reiterates the position that there is "no evidence of physical harm under 100mSv per year" and under such belief, all policy is formulated without participation of citizens, especially women and children. Furthermore, the national government published a school textbook

³ <http://enenews.com/govt-thyroid-cysts-nodules-detected-35-children-18-years>

⁴ Following the accident, the government received information on how the radiation would spread in which direction and to what extent - through a high level computer system named SPEEDI. However, the data and information was not effectively disclosed to the affected public in a timely manner. Without warning, many people fled in the direction that the radiation spread or stayed outside and exposed themselves to high radiation levels.

to reinforce this assertion, “no evidence of physical harm under 100mSv per year”. People who are concerned with the situation have become a minority, isolated, and not encouraged to decide self-evacuation.

4. Lack of Implementation of the Law

On June 2012, the Act on Protection and Support for the Victims of Nuclear Power Plant Accidents was enacted. The law prescribes the government to take measures to support self-evacuation, provide long-term medical care and medical check, and ensure access to information as well as proper risk communication. However, none of the measures is implemented so far. The national government has not yet established any special program of assistance for self-evacuation. The definition of the affected people eligible for support from the government has not yet been decided. Residents, in particular women and children, are not participating in the decision-making process of the policy.

5 Policy should be improved to protect people’s right to health and life.

Under such conditions, affected people are facing serious risks to their rights to life, right to health and reproductive health which all are guaranteed by the international human rights treaties that Japan ratified.

Japan has already implemented the ICRP standard which is 1mSV per year as the domestic standard. Also, Japanese domestic law (Industrial Safety Regulation) prohibits ordinary citizens to enter areas above 5mSv per year, prohibits pregnant women to be exposed to more than 2mSv during pregnancy. Current practice ignores international and domestic standards which have been applied to Japan.

In the case of Chernobyl, the governments in the affected countries set a policy that people living in areas exceeding 5mSv per year will relocate with full compensation by the government, and areas exceeding 1mSv per year will have the right to evacuate with full compensation if they are willing, and the government provides comprehensive support for the affected people.

We urge the government to learn from the lessons of Chernobyl, and to provide comprehensive assistance to the people in order to protect people’s rights to life and health based on the standards mentioned above.

6. Recommendation

In November 2012, the UN Special Rapporteur on Rights to Health visited Japan in order to monitor the rights to health of the people affected by the Fukushima disaster and expressed grave concern over the current practice in Japan by stating “the government used the threshold level of 20mSv/year for the designation of evacuation zone”. This conveyed the message that effective radiation dose up

to 20mSv/year was safe. It was further aggravated by the Government's release of a number of publications, including school booklets, informing the public that there was no clear evidence of direct risk of cancer if a person was exposed to a radiation dose up to 100mSv." "There are [...] a significant number of epidemiological studies, which indicate that cancer and other diseases could occur in low dose radiation below 100mSv. According to these studies, there is no low threshold limit for the occurrence of diseases."

With the recognition that "the residents are entitled to live in a safe and healthy environment", the Special Rapporteur requested the Japanese government to improve the health check system for affected people and affected workers, to ensure financial support to all evacuees so that they can make a voluntary decision to evacuate or return to their homes, if they wish to do so, and to ensure participation of affected communities, in particular women, children, elderly and other vulnerable people to the decision making process of the policy. The Special Rapporteur is scheduled to submit a final report in the next Human Rights Council.

As a state party of the ICESCR and member of the Human Rights Council, we urge the Japanese government to implement the recommendations made by the Rapporteur and conduct comprehensive reforms of the policy in response to the nuclear disaster by incorporating international standards of the promotion and the protection of rights to health.