# Japanese civil society requests that the reports of the United Nations Scientific Committee on Fukushima be revised

#### 1. Concern for the reports of the United Nations Scientific Committee

The United Nations Scientific Committee has inserted the results of investigations on the effects of radiation exposure from Fukushima Nuclear Power Plant Number 1 into its report, which will be submitted to the 68<sup>th</sup> session being held at the moment.

We, the undersigned civil society organizations in Japan express serious concern that the results of these investigations contain some problems in terms of objectivity, independence, and accuracy, and that the underestimation of the effects of radiation exposure could have negative effects on the human rights and protection of citizens.

We request that the United Nations Scientific Committee and the United Nations General Assembly Forth Committee revise the reports from a human rights perspective to protect the most vulnerable people based on careful and sufficient deliberations.

The parts of the reports which include the foremost concerns of Human Rights Now are outlined as follows:

- "The doses to the general public, both those incurred during the first year and estimated for their lifetimes, are generally low or very low. No discernible increased incidence of radiation-related health effects are expected among exposed members of the public or their descendants." (para. 39)
- "For adults in Fukushima Prefecture, the Committee estimates average lifetime effective doses to be of the order of 10 mSv or less, and first-year doses to be one third to one half of that. While risk models by inference suggest increased cancer risk, cancers induced by radiation are indistinguishable at present from other cancers. Thus, a discernible increase in cancer incidence in this population that could be attributed to radiation exposure from the accident is not expected. An increased risk of thyroid cancer in particular can be inferred for infants and children." (para. 40)

### 2. The lack of independent investigation

Firstly, the United Nations Scientific Committee has never officially visited Fukushima prefecture to investigate after the Fukushima nuclear accident. The estimate by the committee of health effects, contamination, and the radiation exposure of workers at the nuclear plant from radioactive substances are based only on data given by the Japanese Government and Fukushima prefecture.

Japanese civil society and various experts have proceeded with independent investigations and tests which show different results from those of the government and Fukushima prefecture, but there is no evidence that the committee has considered this independent data or carried out its own investigations. Hence, the investigation which

has been conducted by the committee is not independent from the Japanese government.

Fukushima prefecture has conducted research on the early effects of radiation exposure for all people who lived in Fukushima at the time of the accident, but the response rate was only about 20%. Therefore it's impossible to speculate on the effects of early radiation exposure based on such limited data. Also, the citizens in Fukushima have strongly criticized the radiation data released by the government on the grounds that it does not reflect the actual conditions. Mr. Anand Grover, the United Nations Special Rapporateur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, also notes that there is a discrepency between the results of monitoring posts and the actual radiation dose, after conducting a field survey himself. .(A/HRC/23/41/Add.3)

As the current issue relating to contaminated water indicates, there are serious problems in attitude of the Japanese government in publicizing information, and thus it can hardly be said that the transparency of information is ensured. Human Rights Now requests that the United Nations Scientific Committee and the United Nations General Assembley Forth Committee collect their own independent investigation results, including field investigations, before approving or publicizing such reports.

#### 3. The conclusion of the Committee lacks accuracy

[1]. The United Nations Scientific Committee has concluded that 'the doses to the general public, both those incurred during the first year and those estimated for lifetime exposure, are generally low or very low.' and 'for adults in Fukushima Prefecture, the Committee estimates average lifetime effective doses to be of the order of 10 mSv or less, and first-year doses to be one third to one half of that.'

However, the Japanese government has not instructed people in areas in which the annual external dose is under 20mSv to evacuate, and substantial number of people who live there has been exposed to external doses which accumulate to over 10mSv per year since the accident. Although the Committee has not indicated which evidence they have referred to, it is highly doubtful that this estimate reflects the actual situation.

The conversion of air dose to effective dose lacks credibility and has become controversial within Japan due to the fact that it varies according to the characteristics of the environment being lived in. Also the average number signifies an estimate of the magnitude of effects to the entire group, but the report has concluded that there will be no effects without indicating any estimate of the magnitude of effects. This position excludes the possible effects of high-risk factors of people living in the area much higher than 10mSv her per. This approach is hardly scientific.

[2]. Moreover, while the United Nations Scientific Committee speculates that the risk for thyroid cancer for infants needs to be increased, they do not expect an increase in risks for other kinds of cancer. This contradicts the results of current epidemiological research which indicates health effects of low-level radiation. The Radiation Effects Research Foundation has released results of new LSS reports that collect reports from 1950 to 2003 on the atomic bomb victims in Hiroshima and Nagasaki. This research indicates that the excess relative risk for all solid cancer increases with even low-level doses of radiation.

In research conducted by Cardis on six hundred thousand nuclear plant workers in 15 countries, the death rate of nuclear plant workers who are exposed to an average annual dose of 2mSv radiation is high.

The International Commission of Non-Ionizing Radiation Protection, including BEIR, supports the linear no-threshold model, which portrays low dose exposure that is 100 mSv or less as a risk to health and does not negate health effects due to low-level radiation exposure.

The collective reports of approximately six hundred and eight thousand young patients who received computed tomographic scanning in Australia showed that leukemia, brain tumors, thyroid cancer and many other cancers have increased, and the infection rate has increased by an average of 1.24 overall. Also, from a case-control study on natural background radiation level exposure, it seems clear that as accumulated gamma-ray exposure increases, the risk of leukemia increases relatively, and if it exceeds 5mGy, the minimum of 95% confident interval exceeds one share and becomes significant. Moreover, with over 10mGy, the risk of cancer excluding leukemia also rises.

The United Nation Scientific Committee underestimates the effects due to low-level radiation exposure. The committee should adopt a more cautious approach regarding low-level radiation exposure based on the latest epidemiologic studies.

#### 4. Inconsistency with other views

The United Nations Scientific Committee observes that there is little risk to health by radiation in Fukushima. However, this view differs greatly from the prospects which are included in the reports regarding the nuclear accident in Fukushima by the WHO. According to the reports by the WHO in the two most affected locations of Fukushima prefecture, the preliminary estimated radiation effective doses for the first year ranged from 12 to 25 mSv. In the highest dose location, the estimated additional lifetime risks for the development of leukaemia, breast cancer, thyroid cancer and all solid cancers over baseline rates are likely to represent an upper bound of the risk as methodological options were consciously chosen to avoid underestimation of risks. For leukaemia, the lifetime risks are predicted to increase by up to around 7% over baseline cancer rates in males exposed as infants; for breast cancer, the estimated lifetime risks increase by up to around 4% over baseline rates in females exposed as infants; and for thyroid cancer, the estimated lifetime risk increases by up to around 70% over baseline rates in females exposed as infants.

The WHO also states that even in the area where preliminary estimated radiation effective doses were 3 to 5 mSv, "the increased lifetime estimates for cancer risks over baseline rates were approximately one-quarter to one-third of those for the people in the most affected geographical location". In addition, the WHO concludes that expansion of scientific understanding of low-level radiation exposure changes the way people think concerning its risks.

Furthermore, the United Nations Scientific Committee introduces the Scientific Finding B. "Effects of Radiation Exposure of Children" together with the effects of the nuclear plant accident in Fukushima in its reports. This shows that further research should be more careful because the effects of radiation exposure of children are unpredictable. This point is remarkable. Nevertheless, such a viewpoint is not reflected in the reports of the United Nations Scientific Committee, and therefore these reports

contradict each other.

The United Nations Scientific Committee should review the effects of the nuclear plant accident in Fukushima so as to be consistent with other scientific views regarding the impact of radiation exposure on children.

#### 5. The actual conditions in Fukushima

The amount of cesium included in the radioactive materials which were released into the air due to the nuclear plant accident in Fukushima is at least 168.5 times the amount released by the Hiroshima atomic-bomb. The radioactive materials also contaminate water and they, thus, pose a serious risk to the health of people who live there, especially pregnant women, children and the younger generation.

Soon after the nuclear plant accident in Fukushima, the Japanese government relaxed the limit on radiation exposure from less than 1mSv to 20 mSv a year and decided to set this limit as a standard for issuing evacuation advisories. As a result, many people, including children, infants and pregnant women, have been forced to live in high level radiation exposure areas with no support to evacuate, migrate or protect themselves from radiation exposure with sufficient health measures. The Japanese government has popularized the view that low level radiation exposure less than 1 mSv does not harm human health, but it underestimates its effects. All policies are based on this view, and it has been implemented without reflecting the views held by citizens in Fukushima.

The 'Chernobyl Concept', which was established by the Union of Soviet Socialist Republics in 1991 and was followed in Belarus, Ukraine, and Russia, designated areas where additional exposure is more than 5 mSv/year as an 'evacuation area', and it provides the people who lived there with support and compensation for the lives they were forced to abandon in order to evacuate. The habitants in the area where additional exposure is from 1 mSv/year to 5 mSv/year are given the right to choose whether they evacuate or not. The people who choose to evacuate are provided with support and compensation similar to those who live in the evacuation area, while the people who choose to remain are offered continuous free medical care, thorough and regular physical examinations, and non-contaminated foods. The government has also institutionalized a program to support the victims of the Chernobyl accident at public expense, and it has continued its efforts in order to prevent health hazards in these areas.

The standard which has been referred to in the policies of the Japanese government is far below that of the Chernobyl Concept. The radiation exposures which were caused by the nuclear plant accident in Fukushima will have more profound effects on health than those in Chernobyl if the standard of the Japanese government is maintained over the long term. The reports at issue do not reflect such actual conditions.

#### 6. The reports by Mr. Anand Grover should be reflected and considered

In May 27<sup>th</sup> 2013, Mr. Anand Grover, the Special Rapporateur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health at the United Nations, submitted a report regarding the human rights situation after the nuclear plant accident in Fukushima based on a field investigation in some areas including Fukushima in November 2011. The report makes detailed recommendations to the Japanese government.

The Special Rapporateur notes carefully the epidemiological studies concerning

health effects of low level radiation exposure and states that the government should take the position of protecting the most vulnerable people, such as pregnant women and children, as long as negative health effects cannot be denied to them. He also observed that the Japanese government should "formulate a national plan on evacuation zones and dose limits of radiation by using current scientific evidence, based on human rights rather than on a risk-benefit analysis, and reduce the radiation dose to less than 1mSv/year;".(para.78(a)) Moreover, it is said that "evacuees should be recommended to return only when the radiation dose has been reduced as far as possible and to levels below 1 mSv/year." (para.49) According to the report, health management surveys and support to evacuate should be provided to persons residing in all affected areas with radiation exposure higher than 1 mSv/year.

Japanese civil society has welcomed this report because it seeks measures to protect the right to health from the point of view of the most affected and vulnerable people.

However, the Japanese government has refused to implement most of the recommendations in the report because it is not scientific enough. The underestimation of effects of low level radiation exposure by the United Nations Scientific Committee leads to a negative consequence on policies to protect the right to health and provide relief to victims. This is inconsistent with the aims of United Nations.

The United Nations Scientific Committee and the General Assembly should make decisions taking human rights into greater consideration, and their decision-making should take into account the report by the Special Rapporateur on the right to health which considers a human rights perspective.

#### 7. Conclusion

As stated above, we, the civil society, request that the United Nations Scientific Committee and the United Nations General Assembly Forth Committee revise the reports of the United Nations Scientific Committee from a human rights perspective to take a more cautious approach with regards to low level radiation exposure to protect the most vulnerable people based on careful and sufficient deliberations.

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"Sayonara Genpatsu! Mitaka Action" Jikkoiinkai

NO NUKES from Shiga

Peace and Environmental Advocacy for the Child

Large flowers of hope projects

Inter-faith Forum for Review of National Nuclear Policy

Fukushima no Kodomo Tachitotomoni Setagaya no Kai

Campaign for Nuclear-free Japan

Greens Japan

Chominritsukankyo Network Ooiso

Oracle itami

Kodomotachi no Mirai to Kankyo wo Kangaeru Kai Hyogo

Anti-Nuclear-Power Consumers Group with TEPCO

STOP Nuclear Plants BEFORE Huge Quake Strikes!

The meeting of the lee which prevents an earthquake disaster with nuclear accident

Housyanou kara Kodomo wo Mamorou Kanto Net

Hinan Sien Net Kanagawa

Fukushima Daigaku Genpatsu Saigai Sien Forum

Kodomo no Mirai wo Mamoru Kai Ikoma

Hairo Action Fukushima

Mirai to Inochi wo Mamoru Kai

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