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**Promotion and protection of all human rights, civil, political, economic, social and cultural rights, including the right to development**

### **Written statement\* submitted by Human Rights Now, a non-governmental organization in special consultative status**

The Secretary-General has received the following written statement which is circulated in accordance with Economic and Social Council resolution 1996/31.

[25 May 2015]

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\* This written statement is issued, unedited, in the language(s) received from the submitting non-governmental organization(s).

## **Fukushima: Persisting violations of affected people's fundamental human rights by the Japanese Government after the Fukushima nuclear disaster**

### 1. Introduction

Over four years have passed since the nuclear accident at the Fukushima Dai-ichi Nuclear Power station on 11 March, 2011.<sup>1</sup> There remain health and protection concerns for people living in areas where radiation exposure exceeds 1mSv/year, especially for vulnerable people such as children, pregnant women and the elderly.

In May 2013, the UN Special Rapporteur on the Right to Health Mr. Anand Grover proposed comprehensive recommendations to Japan in his report (hereinafter Grover recommendations).<sup>2</sup> In July 2014, the UN Human Rights Committee (hereinafter HRC) also made clear recommendations to Japan to fulfill its obligation under the ICCPR and ICESCR.<sup>3</sup>

However, the Japanese government continues to dismiss most of Grover's recommendations.<sup>4</sup> The government has not taken holistic measures to protect right to health of people affected by the nuclear disaster.

### 2. Evacuation Policy

1) Japan has taken extremely insufficient measures to protect the right to health of victims of the Fukushima nuclear accident. Many people, including children and pregnant women, have to live in contaminated areas based on the government's boundary of the evacuation zones, which are set on the basis of an exposure level of 20mSv/year, a threshold 20 times higher than the international protection standard.<sup>5</sup>

2) Moreover, current government policies are geared to repopulate evacuated areas quickly.

To date, 115,000 people are still displaced throughout Japan as a result of their evacuation from the contaminated areas within Fukushima.<sup>6</sup> The government plans to end support for evacuation and enforce resettlement, disregarding the concerns of affected citizens.<sup>7</sup>

Recently, the Fukushima Prefectural Government planned to end free housing for so-called voluntary evacuees in March 2017.<sup>8</sup> These evacuees are people who have lived outside of the designated evacuation zone based on 20 mSv/year, but they are concerned about the negative health

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<sup>1</sup> Human Rights Now is an international human rights NGO based in Tokyo, Japan

<sup>2</sup> Grover, A/HRC/23/41/Add.3; HRC, [http://www.ccpcentre.org/doc/2014/07/CCPR\\_C\\_JPN\\_CO\\_6\\_17701\\_E.doc](http://www.ccpcentre.org/doc/2014/07/CCPR_C_JPN_CO_6_17701_E.doc)

<sup>3</sup> Concluding observations on the sixth periodic report of Japan, CCPR/C/JPN/CO/6

<sup>4</sup> A/HRC/23/41/Add.5/Rev.1 and *see* <http://sandori2014.blog.fc2.com/blog-date-20150315.html>

<sup>5</sup> Although the government considers exposure below 100mSv/year to be safe, it decided to use a 20mSv/year standard in setting the evacuation zone.

<sup>6</sup> Asahi Shimbun (17 May) Available at :

[http://digital.asahi.com/articles/DA3S11758231.html?iref=comkiji\\_txt\\_end\\_s\\_kjid\\_DA3S11758231](http://digital.asahi.com/articles/DA3S11758231.html?iref=comkiji_txt_end_s_kjid_DA3S11758231)

<sup>7</sup> NHK (Dec.21) [[http://www3.nhk.or.jp/news/genpatsu-fukushima/20141221/0604\\_minamisouma.html](http://www3.nhk.or.jp/news/genpatsu-fukushima/20141221/0604_minamisouma.html)]

<sup>8</sup> Japan Times (18 May) Available at : <http://www.japantimes.co.jp/news/2015/05/18/national/fukushima-may-end-free-accommodations-voluntary-nuclear-evacuees-2017/#.VVv30NK8PGc>

impacts of radiation to their family members.<sup>9</sup> Over 36,000 people are such evacuees outside the evacuation zone, and they have been isolated without financial support from the government.<sup>10</sup>

Although the Prefectural Government has stated that it will make a final decision after listening to local officials' opinions, this plan could potentially impact significant numbers of evacuees.<sup>11</sup>

3) Starting in December 2014, the government undesignated Minami-Soma city in Fukushima Prefecture as a protected region despite citizens' continued concerns about the area's contamination.<sup>12</sup> This decision also terminated the psychological-suffering compensation the citizens received from TEPCO for being displaced from their homes.<sup>13</sup>

4) Furthermore, the Liberal Democratic Party (hereinafter the LDP) plans to submit a proposal at the end of May 2015 that will lift evacuation orders for areas with radiation levels as high as 50 mSv per year by March 2017.<sup>14</sup>

By March 2018, the government will instruct TEPCO to terminate the 100,000 yen per month compensation payments that the company currently provides to the 54,800 evacuees with homes located in regions with radiation levels as high as 50 mSv per year.<sup>15</sup> This plan assumes that decontamination efforts will be completed by March 2017.<sup>16</sup> However, the plan also contains a no exception policy which will terminate compensation regardless of the actual radiation levels in the two zones by the stated deadline.<sup>17</sup>

5) Through these policies and proposals, the Japanese government continues to dismiss Mr. Grover and HRC's recommendations.

Mr. Grover recommended the Japanese government to

*“formulate a national plan of evacuation zones and dose limits of radiation by using current scientific evidence, based on human rights rather than a risk-benefit analysis, and reduce the radiation dose to less than 1mSv/year”*.<sup>18</sup>

The government's current plans aim to attract industry back to the evacuated areas, while ignoring the citizens' concerns and rights to health and housing.<sup>19</sup>

In addition, the LDP's May proposals completely ignore HRC's recommendation to

*“take all the necessary measures to protect the life of the people affected by the nuclear disaster in Fukushima and lift the designation of contaminated locations as evacuation areas only where the radiation level does not place the residents at risk.”*<sup>20</sup>

<sup>9</sup>Japan Times (18 May) Available at : <http://www.japantimes.co.jp/news/2015/05/18/national/fukushima-may-end-free-accommodations-voluntary-nuclear-evacuees-2017/#.VVv30NK8PGc>

<sup>10</sup>Asahi Shimbun(17 May) Available at :

[http://digital.asahi.com/articles/DA3S11758231.html?iref=comkiji\\_txt\\_end\\_s\\_kjid\\_DA3S11758231](http://digital.asahi.com/articles/DA3S11758231.html?iref=comkiji_txt_end_s_kjid_DA3S11758231)

<sup>11</sup>Japan Times (18 May) Available at : <http://www.japantimes.co.jp/news/2015/05/18/national/fukushima-may-end-free-accommodations-voluntary-nuclear-evacuees-2017/#.VVv30NK8PGc>

<sup>12</sup>NHK (Dec.21) [[http://www3.nhk.or.jp/news/genpatsu-fukushima/20141221/0604\\_minamisouma.html](http://www3.nhk.or.jp/news/genpatsu-fukushima/20141221/0604_minamisouma.html)]

<sup>13</sup>NHK (Dec.21) [[http://www3.nhk.or.jp/news/genpatsu-fukushima/20141221/0604\\_minamisouma.html](http://www3.nhk.or.jp/news/genpatsu-fukushima/20141221/0604_minamisouma.html)]

<sup>14</sup>Yomiuri Shimbun (15 May) Available at : <http://the-japan-news.com/news/article/0002151943>; Japan Times (15 May) Available at : <http://www.japantimes.co.jp/news/2015/05/15/national/fukushima-evacuation-orders-lifted-low-radiation-areas-end-fiscal-2016-ldp/#.VVw2EdK8PGd>

<sup>15</sup>Asahi Shimbun (19 May) Available at : <http://ajw.asahi.com/article/0311disaster/fukushima/AJ201505190055>

<sup>16</sup>Asahi Shimbun (19 May) Available at : <http://ajw.asahi.com/article/0311disaster/fukushima/AJ201505190055>

<sup>17</sup>Asahi Shimbun (19 May) Available at : <http://ajw.asahi.com/article/0311disaster/fukushima/AJ201505190055>

<sup>18</sup>Grover, A/HRC/23/41/Add.3; HRC, [http://www.ccprcentre.org/doc/2014/07/CCPR\\_C\\_JPN\\_CO\\_6\\_17701\\_E.doc](http://www.ccprcentre.org/doc/2014/07/CCPR_C_JPN_CO_6_17701_E.doc)

<sup>19</sup>Asahi Shimbun (19 May) Available at : <http://ajw.asahi.com/article/0311disaster/fukushima/AJ201505190055>

<sup>20</sup>A/HRC/23/41/Add.3., para.78(a); [http://www.ccprcentre.org/doc/2014/07/CCPR\\_C\\_JPN\\_CO\\_6\\_17701\\_E.doc](http://www.ccprcentre.org/doc/2014/07/CCPR_C_JPN_CO_6_17701_E.doc)

### 3. Health Monitoring and medical treatment

In June 2012, the government enacted the Nuclear Disaster Victim Protection Law that provides various support for affected people, especially children, to maintain their health and livelihood regardless of their status of living.<sup>21</sup> However, the government has neither fulfilled these responsibilities nor provided accurate and sufficient health examination services.

For example, thyroid examinations are still only available to those who were under 18 years old at the time of the nuclear accident, and follow-up tests are only performed every other year. People who were over the age of 18 at the time are not entitled to free medical care nor any support for their next thyroid examinations.

It has to be noted that 103 cases of thyroid cancer have been identified by May 2015, and the number of people diagnosed with thyroid cancer has been increasing over the years.<sup>22</sup>

However, the government's report on thyroid ultrasound examinations concludes that it is unlikely that the diagnosed thyroid cancer tumors were caused by radiation.<sup>23</sup>

Moreover, the government has neither conducted any other health monitoring for people living in the affected area (such as blood or urine sampling, dental exams, ophthalmology, etc.) nor kept any records of illnesses other than thyroid cancer.

In January 2015, the government reported that there would be no need for undertaking examinations for other types of cancer unless one had been exposed to radiation of 100mSv/year.<sup>24</sup>

Mr. Grover's recommendations also urged the Japanese government to monitor "*the impact of radiation on the health of affected persons through holistic and comprehensive screening for a considerable length of time and make appropriate treatment available to those in need*" emphasizing that "*health monitoring should be provided to persons residing in all affected areas with radiation exposure higher than 1mSv/year.*"<sup>25</sup>

However, none of these recommendations have been considered thus far.

### 4. Participation

The government has been promoting the resettlement of victims to their hometowns in contaminated areas, even though people would demand a 1mSv/year radiation basis on the relevant policies.<sup>26</sup>

In spite of Mr. Grover's recommendation to "*ensure effective community participation, especially participation of vulnerable groups, in all aspects of the decision-making processes*", people are often left outside of decision-making and denied necessary information.

### 5. Recommendations

HRN urges the Japanese government to reform all relevant policies based on Mr. Grover's recommendations and the latest HRC recommendations;

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<sup>21</sup><http://law.e-gov.go.jp/htmldata/H24/H24HO048.html>

<sup>22</sup>Asahi Shimbun (19 March) Available at :<http://www.asahi.com/articles/ASH5L5QCMH5LULBJ00S.html>

<sup>23</sup>Thyroid Ultrasound Examination (Full-Scale Thyroid Screening Program) Reported on 25th December 2014. Available at [http://www.fmu.ac.jp/radiationhealth/results/media/16-2\\_Thyroid\\_Ultrasound\\_Examination\\_F-S.pdf](http://www.fmu.ac.jp/radiationhealth/results/media/16-2_Thyroid_Ultrasound_Examination_F-S.pdf)

<sup>24</sup>cancers such as bladder cancer, laryngeal cancer and lung cancer <http://www.japanfocus.org/-Piers-Williamson/4232>

<sup>25</sup>A/HRC/23/41/Add.3., para.77(a)

<sup>26</sup>Yomiuri Shinbun (Aug.5.2014) Available at: <http://www.yomidr.yomiuri.co.jp/page.jsp?id=102944>

All policies must be formulated with a victims-based and rights-based approach;

- 1) The government must prioritize protection of the most vulnerable populations, with due consideration of the health risks of low level radiation exposure to 1mSv/year in national plans concerning evacuation zones, health policy, and in all measures providing for those affected;
  - 2) Appropriate measures include long-term monitoring of the health conditions of affected people, free periodical medical checks, free examinations of internal radioactive exposure levels, as well as free healthcare and medical treatment (including urine and blood testing) for radiation-related illness;
  - 3) Enable full and effective community participation of all affected people in the decision making process of the entire policy concerning the Fukushima nuclear accident, including evacuation policy and designation / cancellation of the zone, resettlement and community building, support and compensation for affected people, health monitoring system.
  - 4) Take concrete and immediate action in conformity with the Victim Protection Law with effective participation of affected people.
  - 5) Lift the designation of contaminated locations as evacuation areas only where the radiation level does not place the residents at risk.
  - 6) Continue financial and housing support for all evacuated people unless the radiation level of their initial residence decreases to the level of 1mSv per year.
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