UN Special Rapporteur Anand Grover on Fukushima: A Stunning Report Brushed Aside by the Japanese Government
国連人権委員会理事長アナン・グローバー氏の目覚ましい福島報告書を払いのける日本政府

Thierry Ribault

Between 2012 and 2014 we posted a number of articles on contemporary affairs without giving them volume and issue numbers or dates. Often the date can be determined from internal evidence in the article, but sometimes not. We have decided retrospectively to list all of them as Volume 10, Issue 54 with a date of 2012 with the understanding that all were published between 2012 and 2014.

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On May 27, Anand Grover, Special Rapporteur to the United Nations Human Rights Council, released a report on his November 2012 mission to Fukushima. The UN Council did their job - to protect - or at least clearly expressed their intention to do so. This article outlines the main conclusions of Grover’s sharply critical report which is available for download here (http://www.save-children-from-radiation.org/2013/05/24/un-special-rapporteur-anand-grover-s-report-on-fukushima-accident-is-published/).

In his report, Grover describes the extent of the disaster:

”The amount of radioactive cesium (137C) released due to the nuclear accident at the Fukushima Daiichi Plant is estimated to be 168 times higher than that released by the atomic bomb in Hiroshima. According to TEPCO, the accident released 900 petabecquerel of radioactive iodine and cesium.... Other radioactive materials released due to the nuclear accident include radioactive Tellurium (129mTe, 129Te), Silver (110mAg), Lanthanum (140La) and Barium (140Ba).”

The Rapporteur also argues strongly that the old methods of masking the stark reality of radiation exposure used by Soviet authorities after Chernobyl should no longer be acceptable. In the years since Chernobyl, we have learned much more about health damage due to radiation exposure including chromosomal aberrations, increased childhood and adult morbidity, impairment and leukemia. According to Grover, the scientific record demonstrating the link between long term exposure and radiation at low doses and the development of cancers can no longer be dismissed as insignificant. [For more information on the controversy concerning Chernobyl studies and the gaps in scientific knowledge about the health effects of radiation, see Matthew Penney and Mark Selden, What Price the Fukushima Meltdown? Comparing Chernobyl and Fukushima]
In the Japanese case, Grover criticizes the lack of effective distribution of stable iodine tablets to the population. He also questions the health protection system for nuclear workers: access to medical examination is not systematic (contrary to law) and the results of the examinations which are carried out are not adequately transmitted to the authorities. Finally, the labour force employed by subcontractors, a large majority of those working at Fukushima Daiichi, does not have a guarantee of access to such screenings. [For more information on the problems faced by workers at the Fukushima Daiichi site, see Gabrielle Hecht, Nuclear Janitors: Contract Workers at the Fukushima Reactors and Beyond (https://apjjf.org/-Gabrielle-Hecht/3880)]

The right to health is not respected

Concerning the zoning system around the nuclear plant, Grover reminds us of the unacceptability threshold decided for Chernobyl in 1991: any higher than 1 mSv per year and the population was not allowed to return and live and work in contaminated areas. In Fukushima this threshold has been set at the level of 20 mSv per year. In areas with radiation measured at rates between 20 and 50 mSv, the population can freely access the contaminated areas during the day.

About decontamination, the Rapporteur expresses regret that no clear schedule to bring to contamination levels under 1 mSv has been set by the authorities beyond 2013. To clean school yards is not enough and Grover argues that it is instead necessary to decontaminate more broadly, taking into consideration the multiple “hot-spots” existing in areas which average under 20 mSv. For some of these zones, the population is now being called upon to return to their homes and communities. Finally, he criticizes the policy of involvement of the population in decontamination operations without providing them with proper equipment and informing them clearly of the health consequences.

The Rapporteur also criticizes the use of “cost-benefit analysis” made by the Japanese authorities (following the ICRP recommendations) since such analysis does not respect the fundamental right to health of individuals. Grover argues that “collective interests” should never dominate individual rights, notably the right to health. Thus, he calls on the Japanese government to lower the threshold of exposure under which individuals are allowed to return to contaminated areas, and urges that displaced people receive compensation and free health protection in areas exceeding 1 msv per year.

On the matter of education about radiation, Grover asks the Japanese government to stop all claims in a supplementary reader provided to schools that radiation exposure below 100 mSv per year is not harmful to a person’s health. [For details on the 100 mSv claim in the classroom, see coverage in Kinyobi (http://www.kinyobi.co.jp/kinyobinews/?p=1378)]

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amount equivalent to 110 billion euros or approximately 145 billion USD, announced at the end of 2012. [For more information on the financial risks of nuclear power that are borne by taxpayers and not by the companies and shareholders that stand to profit, see the Asia-Pacific Journal Feature, The Costs of Fukushima (https://apjjf.org/events/view/155)]

For the Japanese government, no “truth” except the views of WHO and UNSCEAR experts

At the same conference in Geneva at which Grover’s report was released, the Japanese government presented a counter report (http://www.ohchr.org/Documents/HRBodies/HRCouncil/RegularSession/Session23/A.HRC.23.41.Add.5_Rev.1_ENG.pdf) dated May 27, that dismisses Grover’s conclusions. According to Japanese authorities the “scientific basis” of Grover’s report is totally lacking. The “scientific basis” that the Japanese government relies on instead is the basis provided by WHO, UNSCEAR, ICRP and IAEA experts. Many scientists and nuclear critics disagree with these positions and others argue that ties to the nuclear industry and the dual role of assessing nuclear safety and promoting the use of nuclear power make the conclusions put forward by these organizations questionable.

The truth made available by UNSCEAR’s experts is a convenient one for the Japanese government: this UN agency in charge of estimating the consequences of the Fukushima meltdowns, is the same one that concluded that there were fewer than 50 immediate deaths due to radiation and under 15 deaths linked to thyroid cancers after the Chernobyl disaster, and is already anticipating “zero deaths” in the short as well as in the long term in Fukushima.

This “anticipation” (http://www.youtube.com/watch?v=tAGe18uftmI) dates from March 2012 and was confirmed in their recent report (http://ajw.asahi.com/article/0311disaster/fukushima/AJ201306010022).

Grover’s call for better protection of the population is considered by the Japanese government to be totally misplaced and redundant since nothing “scientifically” proves that the concerned populations have a real need to be protected beyond measures already being enforced: “The Government will continue to work on measures so that suitable support will be provided to the people who truly need it.”

When Grover recommended that the Japanese government “avoid limiting health check-ups for children to thyroid checks and extend check-ups for all possible health effects, including urine and blood tests”, the answer provided by the Japanese government, which is now asking that those passages be erased, is as follows:

“Intervention trials should be done scientifically and ethically. Why is blood testing or urine testing required? Because of the possibility of what type of disorder is such testing justified? The idea is unacceptable because, we should not unnecessarily burden the local citizens by forcing medically unjustified examinations on them.”

The 1 mSv per year threshold and “prejudgment” of health impacts
The Special Rapporteur recommended that the Japanese government: “... provide funding for relocation, housing, employment, education and other essential support needed by those who chose to evacuate, stay or return to any area where radiation exceeds 1mSv/year.” The Japanese government has responded with: “The sentences described above should be deleted because they are based on prejudgment. As we have already noted, there has been international controversy over the radiation level which affects health and it is still under much consideration from various perspectives.”

Concerning contaminated waste, Grover’s report notes: “As the contaminated waste is stored in residential areas and under playgrounds, thereby posing a health hazard to residents, establishing temporary storage facilities away from residential areas is urgently required.”

The Japanese authorities do not hesitate to openly lie while replying to this criticism: “When soil, etc. is stored, measures to prevent human health impacts are taken such as radiation shielding. Therefore, the description ‘posing a health hazard to residents’ is not the case.”

The Japanese government is revising history. It has been helped in this task by the French president, seven high-level ministers, and other Parliament members and industrial representatives during the state visit to Japan from 6 to 8 of June. The delivery of the 10 tons of MOX fuel (http://www.areva.com/EN/operations-1391/the-shipment-of-mox-fuel-from-france-to-japan.html) which left La Hague on April 17, will also help the Japanese government to reopen nuclear power plants.


A French version of this article was published on the RUE89 website (http://www.rue89.com/rue89-planete/2013/06/02/fukushima-japon-rejette-rapport-accablant- lonu-242873).