

# Third International Expert Symposium in Fukushima: Beyond Radiation and Health Risk—Toward Resilience and Recovery

## *Recommendations*

**Results from Fukushima Medical University and other Japanese experts, the World Health Organization (WHO), and The United Nations Scientific Committee on the Effects of Atomic Radiation (UNSCEAR) converge with evidence that levels of exposures have been low enough that radiation induced effects have not been seen, and are unlikely to be seen in the future. In spite of this, concerns remain amongst the affected people regarding the radiation situation. Moreover, the long-lasting presence of radioactivity has had a profound impact on some individuals, families, and on community life.**

**The participants of the symposium recognized the importance of dignity, autonomy and solidarity. Reinforcing cooperation at all levels between individual residents, experts, professional community workers, local facilitators, and authorities is necessary.**

## **Background**

Following the Recommendations produced by the *First International Expert Symposium in Fukushima, Radiation and Health Risks*, organized by the Nippon Foundation and held in September 2011, a second symposium was organized by Fukushima Medical University and further, on September 8-9, 2014, a third symposium was organized in the city of Fukushima by the Nippon Foundation. The co-organizers were Sasakawa Memorial Health Foundation and Fukushima Medical University. The meeting was held in cooperation with Nagasaki University.

The first symposium was held immediately following the commencement of Fukushima Prefecture's *Health Management Survey*, an effort that it evaluated as important and highly relevant. This first symposium stressed the necessity of continued monitoring and assessment of radiation levels, and emphasized the importance of accurately informing local residents about the radiological situation in order to enhance their understanding.

The *Third International Expert Symposium in Fukushima: Beyond Radiation and Health Risk—Toward Resilience and Recovery* was held 3½ years after the nuclear accident, and consisted of the following sessions: Reports on Fukushima; Report on Fukushima Prefecture's Health Management Survey; Analysis reports by international organizations (WHO, UNSCEAR, ICRP, IAEA); Testimony on psychological and social issues from Fukushima and abroad; General discussion and recommendations for the way forward. In addition to the views of scientists from around the world, the symposium also included reports by local residents and by experts and professionals engaged in supporting them.

The organising committee of this Third Symposium has agreed on a number of recommendations to the Government of Japan. The recommendations are based on information that was presented and discussed during the symposium. The recommendations are as follows:

## **Recommendations**

- 1. Radiation protection criteria should provide flexibility to address local circumstances** and all aspects of everyday individual and community life. Management of local situations of inhabited areas should be based on actual individual doses, rather than on ambient measured doses or on theoretical calculated doses. Individual doses differ considerably according to people's habits within areas with the same ambient dose rate and protection actions.
- 2. Infrastructure should be put in place for individual radiological situations to be shared with each affected person in an understandable manner**, to allow them to manage their own situation.
- 3. Decision-making by individuals who have been displaced must be facilitated, so that they can make informed decisions and achieve some closure.** A large number of individuals remain in an indeterminate and uncertain situation having been evacuated but not relocated. **The rights of those who choose to return to their homes, and those who chose other alternatives, should be respected.** Issues to be examined and reassessed include, but are not limited to, revival of local employment, assurance of current and future safety, provision of adequate infrastructure (including education), and compensation strategies.
- 4. Best activities and practices related to resilience, recovery and revitalization should be encouraged, identified, supported, publicized, disseminated and implemented at local and regional levels.** Local individuals and authorities are uniquely positioned to identify and provide insight into what would provide the best resolution for their specific needs. A number of individuals and communities have already developed innovative and successful solutions.
- 5. It is critical to support the ongoing efforts of the health care and local care providers and to greatly increase their numbers** in order to promote the

psychological and social welfare and resilience of people affected by the Fukushima accident. Psychosocial well-being of individuals and communities is the core element of resilience. Three years after the disaster, existing staff have extensive experience and knowledge and can serve as trainers for the required increased number of health care providers.

- 6. The Fukushima Health Management Survey provides invaluable health information for the local community and should continue to be supported and dynamically assessed.** The current survey should be strengthened, with a flexible stakeholder involvement. Provisions should be implemented to address identified health and psychological issues.

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**The Organizing Committee of  
Third International Expert Symposium in Fukushima**

*Yohei Sasakawa* (Chair)

Chairman, The Nippon Foundation

*Abel Julio González*

Argentine Nuclear Regulatory Authority

*Shin-ichi Kikuchi*

President, Chairman of the Board, Fukushima Medical University

*Etsuko Kita: Chair*

Sasakawa Memorial Health Foundation

*Jacques Lochard*

Vice Chair, Main Commission,

International Commission on Radiological Protection

*Fred Mettler*

University of New Mexico

*Hitoshi Ohto*

Vice President, Vice-chairman of the Board,

Fukushima Medical University

*Shunichi Yamashita*

Trustee and Vice president, Nagasaki University