

Access to information & participation of the public in the context of a nuclear accident

Insights from the Aarhus Convention & UN Guiding principles on internal displacement

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1. International and European requirements for information & participation

Aarhus convention on access to information, public participation and access to justice in environmental issues

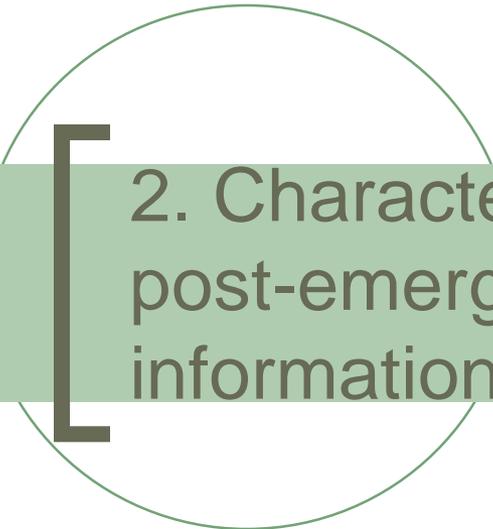
- art. 5.1. c): *'In the event of any imminent threat to human health or the environment, whether caused by human activities or due to natural causes, **all information which could enable the public to take measures to prevent or mitigate harm arising from the threat**,... 'is disseminated immediately and without delay to members of the public who may be affected'.*
- Information refer to
 - understanding (by the public) of the evolution of the accident and its consequences
 - capacity of the population & communities to prevent or mitigate harm arising from the threat, individually & collectively → **people and civil society are actors of the post-accident response, including in emergency phase**

UN Guiding principles on Internal Displacement

- *“Competent authorities have the primary duty and responsibility to establish conditions, as well as provide the means, which allow internally displaced persons to return voluntarily, in safety and with dignity, to their homes or places of habitual residence, or to resettle voluntarily in another part of the country. Such authorities shall endeavour to facilitate the reintegration of returned or resettled internally displaced persons.”*
- *“Special efforts should be made to **ensure the full participation** of internally displaced persons in the planning and management of their return or resettlement and reintegration”*
- → conditions for return or resettlement includes adequate healthcare and accurate information on health risks

Provisions for information & participation in the EURATOM legislation

- Council Directive 2013/59 / EURATOM of 2013/12/05 – Basic Safety Standards (BSS), art. 70 § 1: *“Member States shall ensure that the members of the public likely to be affected in the event of an emergency are given **information about the health protection measures** applicable to them and about the action they should take in the event of such an emergency.”*
- The draft of the Council conclusions on "Off-site nuclear emergency preparedness and response" – 4th September 2015 (OR. en) 11653/15: *“STRESSING the **benefits of involving civil society in preparedness activities**..., to increase transparency and public participation, and to improve public confidence in the arrangements”*



2. Characterisation of an emergency and post-emergency situation as regards information & participation

Key features of emergency & post-emergency situations

- Radiological dimension and the radiation protection issues are characteristic of nuclear emergency and post-emergency
- However the analysis of this situation and its management cannot reduce to this sole dimension a reality which is much more complex
- A major nuclear accident is an irremediably disruptive situation for the populations concerned, which affects all the dimensions of their life (health, economic, social, environmental, human ...)
- The management of such a situation, paying due respect to the right to information and participation in the decisions of the populations, involve political choices that go far beyond the technical application of radiation protection principles

An essential role of local people and communities

- The capacity of autonomy and action of local people and communities is key in an emergency and post-emergency context
- Public access to relevant and trustworthy information (from the point of view of the affected people) is a major challenge in a context of disruption of information flows
- Public participation is crucial both to ensure people's protection and to enable the construction of a dignified life after the accident (which requires a capacity of people to assess health risks)
- The practical conditions for the exercise of these rights to information and participation should be considered, in particular as regards dosimetry, health monitoring and healthcare

Emergency phase (1/2)

- Article 5.1.c) of the Aarhus Convention requires immediate dissemination to affected populations of any information held by public authorities likely to contribute to their protection
- Information is subject to strong tensions: immediate desire to protect oneself and to protect oneself, uncertainties about the situation, varying trust in different sources, potentially failing institutional circuits while informal circuits are potentially subject to rumour, possible temptation of public authorities to retain information
- The conditions for the preparation, dissemination and reception of information depend heavily on the readiness of institutional, non-institutional actors and of concerned populations to deal with a nuclear accident situation

Emergency phase (2/2)

- Participation of the populations in their protection in the accidental phase is only possible if it has been prepared by:
 - upstream information of the stakeholders and participation to decision-making for the verification of the relevance and applicability of the provisions of emergency plans (including dosimetry, health monitoring & healthcare)
 - prior knowledge and understanding by the population as a whole of the provisions for its protection
- Implementation of the Aarhus Convention in the accidental phase goes well beyond institutional information
- Local populations and citizen initiatives are also a source of information. Authorities must prepare to receive it constructively

Post-emergency phase: citizen rights

- There is no “return to normal situation” after a large-scale nuclear accident, neither at the level of the individuals nor at the level of the affected local communities, whether one plans to stay, leave or come back
- The right of people to participate in long-term life choices expresses at 3 levels:
 - involvement of local actors in defining the overall framework for post-accident management (particularly in the preparation phase)
 - creation of spaces of subsidiarity allowing local actors to make their own choices of life within the limits set by the public authorities
 - and for those who choose to stay or return to contaminated territory, in the possibility of contributing in their lives and in their daily activities to the control of their radiological protection

Post-emergency phase: role of information

- Life restrictions associated with radiological protection entail multiple constraints. In this context freedom and quality of life can only be conquered in the context of a new life project at the individual and community level
- Active participation of the population is therefore a key stake in the process of rehabilitation of living conditions
- Access to information is essential, and must in particular include:
 - direct access to radiological measurements and the availability of relevant, appropriate and trusted information on the radiological status of populations (notably thyroid dosimetry then on the longer term, whole body counting)
 - contextualisation of this information with respect to reference levels, and an understanding of the stakes associated with different practices (including an understanding of health risks)
 - establishment of an epidemiological follow-up is among the conditions for informing the public in the long term

Post-emergency phase: role of expertise

- Access to relevant and trustworthy information can be built only through a plurality of sources of expertise and their ability to interact to create contextualized elements of appreciation of the situation and the issues
- Experts, because of their extreme disciplinary, statutory and opinion diversity, do not constitute a homogeneous social community but share the collective responsibility to contribute to an “enlightened protection” of populations
- Experts preparation to perform this function collectively requires:
 - A better understanding, by the experts and all the stakeholders, of the diversity of the solicitations to which they are confronted and of the adequacy or not of these solicitations with the limits of their status or competences
 - A better recognition amongst them of the diversity of experts and the introduction of more advanced and inclusive exchanges



Conclusion

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Access to information

- A democratic framework for the protection of populations implies a pooling of knowledge, uncertainties and gaps, in particular as regards radiological risks and the knowledge of actual exposures

Participation of the public to decision-making

- Implementing the Aarhus Convention in the event of a nuclear accident involves 3 levels of participation:
 - consultation on successive public policy frameworks (in the preparation phase and after an accident),
 - opening of subsidiarity spaces in the post-emergency phase to enable people to choose their conditions of life in conditions of freedom and security,
 - direct involvement of people in radiological protection as part of a project to rehabilitate their living conditions