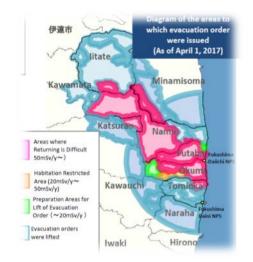
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#### Lessons Learned from the Analysis of the Return of Populations following the Lifting of Orders of Evacuation after the Fukushima Accident

CENTRE D'ÉTUDE SUR L'ÉVALUATION DE LA PROTECTION DANS LE DOMAINE NUCLÉAIRE



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ISOE European Symposium Uppsala, June 26-28, 2018

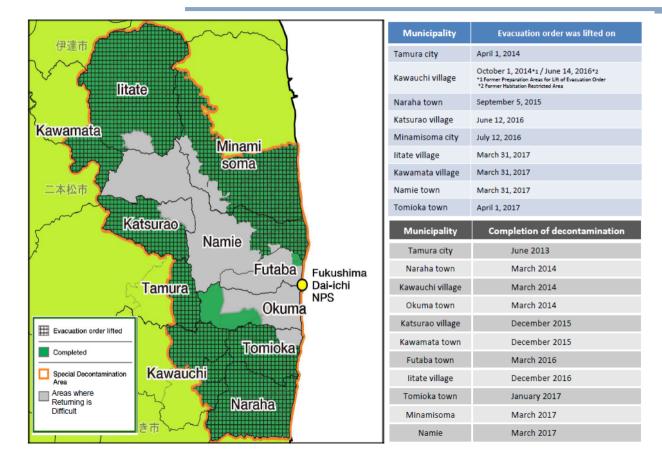
- Large number of people evacuated after the Fukushima accident: up to 160,000 persons with more than 50,000 for more than 6 years
- Short term evacuation transformed into "temporary relocation"
- Post-Fukushima Reconstruction General Policy

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- Favour initiatives allowing the **lifting of the evacuation orders** and the return home of the evacuees, if they wish
- Favour initiatives that allow evacuees and returnees to **restart a new life** in acceptable conditions (in or outside the Fukushima Prefecture)
- Reinforce efforts to control the NPP
- Speed the process of reconstruction

#### Lifting of evacuation orders

#### Source: METI



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#### Introduction: objective of the analysis

- 3 year- (2015-2017) follow-up of the issues regarding the return of evacuated people
- ~ 120 stakeholders met at all levels of decision
- Identify issues raised and lessons to be learned for emergency preparedness and response
- Focus on specific municipalities where the evacuation orders have been (or will be soon) lifted

#### Modelling issues in emergency situation

- Difficulties encountered with environmental **modelling** at the time of the accident:
  - Lack of data on source term
  - Resulting in **approximation on potential affected areas**
- Weak information provided to municipalities for organising sheltering and evacuation
- Modification of the identification of affected areas following information provided by environmental monitoring
- Increase the lack of confidence towards authorities for the management of the situation

- Evacuation of hospitals and elderly houses not always efficient
  - Lack of suitable transport in some cases

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- Inadequate care during transportation induced the death of 62 patients evacuated from several hospitals
- Precarious situation during evacuation period and difficulties to identify location for prolonged evacuation resulted in excess mortality and serious psychological consequences among the elderly
- **Difficulties** for elderly people to **come back rapidly** to their home without adequate provision of **health services**
- **Stigmatisation** for some people during the period of evacuation



#### Living conditions in temporary houses





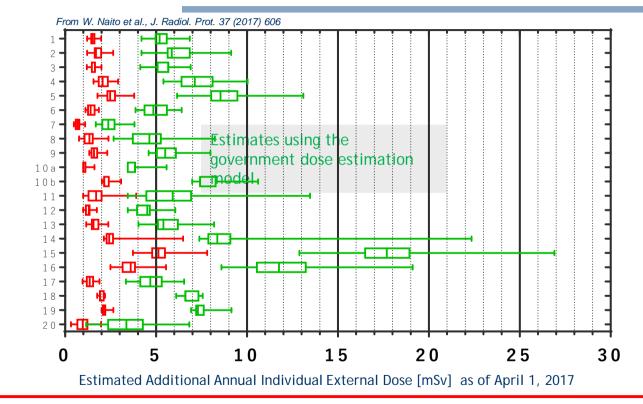
- Zoning proved to be very "dimensioning"
- Lifting of order of evacuation is primary constrained by completion of decontamination operations based on priorities according the zoning
- Large discrepancies and competition between municipalities and sometimes inside municipalities
- The more time passes, the more the inhabitants' expectations and concerns focus on living conditions, particularly in terms of employment, housing, education, health and more generally of well-being

#### Zoning criteria and their evolution (2)

- Difficulty to clearly explain and catch the meaning of reference level as defined by ICRP
  - Large debate and distrust associated with the selection of criteria: 1 or 20 mSv/y
- Use of radiological criteria with calculation based on ambient dose rates leads to highly conservative approach compared to direct measurement of external exposure
- No clear implementation of the ALARA approach for the decontamination programme with generation of large volume of waste

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#### Estimated individual dose in litate



The estimates of individual external doses based on the result from the study were about ¼ of the estimates calculated by the government dose estimation model.



#### **Complex waste management**



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- Influence of the compensation system on the decision
- Influence of the **tax system** and support of municipality for daily life:
  - Maintaining services during evacuation period
  - Ensuring attractive conditions for the return of population
- Difficulty for people to abandon houses belonging to the family since several generations, but lack of return of young generations
- Large **health monitoring** put in place after the accident: thyroid, health management survey...
- **Difficulties for adapting the health service** in municipalities where the order of evacuation has been lifted due to lack of knowledge on the dynamics of return of evacuees

- Importance of setting up health surveillance with specific emphasis on living conditions of the people, including:
  - Radiological monitoring
  - Development of radiological protection culture
  - Organising the vigilance and opening places of dialogue to address local issues related to daily life
  - Focus on well-being of the population



#### **Collecting sansei in Kawauchi**





#### Possible attractiveness for new citizens?





#### **Concluding remarks**

• Fukushima introduces for the first time the **sensitive issue of the return** of evacuees including **radiological**, **socio-economic and ethical dimensions** 

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- Importance to better address the temporal dynamics and to consider as much as possible the longer term issues
  - Elaborate emergency plans and design exercises taking into account all phases of the accident
  - Carefully consider the **role of radiological criteria** and their **evolution**
  - Involve local populations and professionals in the decision-making and processes
- Importance of designing with local communities mechanisms of governance aiming to restore decent and sustainable living conditions



### THANK YOU FOR YOUR ATTENTION