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PROMOTION AND PROTECTION OF ALL HUMAN RIGHTS, CIVIL, POLITICAL, ECONOMIC, SOCIAL AND CULTURAL RIGHTS, INCLUDING THE RIGHT TO DEVELOPMENT

Joint written statement* submitted by Europe-Third World Centre, a non-governmental organization in general consultative status, France Libertés : Fondation Danielle Mitterrand, a non-governmental organization in special consultative status, and Mouvement contre le Racisme et pour l'Amité entre les Peuples (MRAP), a non-governmental organization on the Roster

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

[20 February 2008]

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

Violation of the Right to Food and the Right to Health of populations affected by the Chernobyl catastrophe in Ukraine, the Russian Federation and Belarus

Summary of the problem

Since the Chernobyl catastrophe, between 5-8 million people¹ in Belarus, the Ukraine and the Russian Federation continue to live in areas that remain heavily contaminated. Up to 90% of the radiation dose received by the affected populations is internal due to incorporation of artificial radionuclides from contaminated food.

The radiation dose in the contaminated regions of Chernobyl is both external and internal. The health consequences of this chronic irradiation have been systematically underestimated or ignored by national and international authorities for 22 years now.

The main source of disinformation on the health consequences of Chernobyl is the International Atomic Energy Agency (IAEA). The mandate of the IAEA is to promote use of the atom². It is an industrial lobby with no public health mandate or competence. The 1959 Agreement between WHO and the IAEA³ prevents WHO from fulfilling its constitutional mandate as “international directing and coordinating authority on international health issues” in the critically important area of radiation and health.

The *permanent* conflict of interest is clear as the industry is both judge and jury in relation to the safety of its own activities. WHO's independence in the area of radiation and health must be established.

As a result of the underestimation and denial of the health consequences, adequate health care and protection have not been provided and preventive and protective measures to reduce exposure and mitigate the effects of exposure have not been taken or have been prematurely interrupted for economic or political reasons. The rights of affected populations in Ukraine, the Russian Federation and Belarus to safe and nutritious food and to health and health care thus, have been and continue to be, violated.

The Chernobyl accident on 26 April 1986

The explosion, followed by the fire which lasted 10 days, released at least 2 billion curies of radioactive substances, which were dispersed globally (between 100 and 200 times the amount released by the bombs on Hiroshima and Nagasaki together). The pattern of contamination in soil was highly irregular depending upon wind direction and rainfall in the days and weeks following the explosion. The most contaminated area (260,000 kilometres²) will return to normal levels of radioactivity (for isotopes of uranium and plutonium) in about 100,000 years. Scores of radioactive isotopes were released, the most dangerous being strontium 90, cesium 137, iodine 131, plutonium 239 and uranium 235. These persist today in soil, water and forests, are taken up in the food chain and accumulate in the organism.

¹ Greenpeace. *The Chernobyl catastrophe: consequences on human health*. Amsterdam, April 2006.

² IAEA. www.iaea.org/About/statute.html

³ WHO. Agreements with other International Organizations www.int/gb/bd/PDF/6846/e-bd46-p4.pdf

Almost all of Europe was contaminated - dangerously so in 50% of 13 countries and 30% of 8 countries. The three most affected countries (of the former USSR) were Ukraine, the Russian Federation and Belarus.

Radioactive contamination after 22 years

Rural populations of the three most affected countries have had no choice but to consume contaminated food for 22 years. As a result, radionuclides have accumulated in their organisms, sometimes in considerable concentrations. Worst affected are poor, rural populations consuming local produce - milk, cheese and meat from local livestock, vegetables grown locally, berries, mushrooms and game from the forests and fish from ponds and rivers. The use of highly contaminated ash as fertilizer further contributes to high concentrations of radionuclides in food.

The International Commission on Radiation Protection (ICRP) recommends 1 mSv as the dose limit for the reference group (the worst affected individuals in a given population). This limit is exceeded in hundreds of villages in the affected countries, representing hundreds of thousands of people, by the external dose alone or by the combination of external and internal doses.

The health of affected populations

Internal organs accumulate high concentrations of radionuclides, notably the heart, placenta and the endocrine, immune and central nervous systems. The resulting chronic contamination has very serious effects on health. With their developing organ systems, children are acutely vulnerable to ionising radiation. The other groups most severely affected are the liquidators, the evacuees from the most dangerously contaminated areas, and the residents of the less (but still dangerously) contaminated areas, depending on their eating habits.

In Belarus today, 85% of the children in contaminated areas are ill; before the explosion, this figure was 15%⁴. The Chief Medical Officer of the Russian Federation noted in 2001 that 10% of 184,175 liquidators (half of whom were young military recruits) had died, one third was invalid and the situation was deteriorating rapidly. According to a press release from the Ukrainian Embassy in Paris, dated 25 April 2005, 94.2% of their 260,000 liquidators were ill in 2004. It was also noted that 87.85% of the inhabitants of the contaminated territory were ill and that proportion increases every year.

Hundreds of epidemiological studies in Ukraine, Belarus and the Russian Federation, have established that there has been a significant rise in all types of cancer causing thousands of deaths, an increase in infant and perinatal mortality, a large number of spontaneous abortions, a growing number of deformities and genetic anomalies, disturbance and retardation of mental development, neuropsychological illness, blindness and diseases of the respiratory, cardiovascular, gastrointestinal, urogenital and endocrine systems⁵.

⁴ Figures provided by Minister of Health & Academy of Sciences, Belarus, parliamentary hearings, April 2000.

⁵ Alex Rosen. *Effects of the Chernobyl catastrophe: a literature review*. January 2006. [www.ipnw.org/ ResourcesLibrary/Chernobyl20rosen.pdf](http://www.ipnw.org/ResourcesLibrary/Chernobyl20rosen.pdf).

The source of the disinformation

Evidence of adverse health consequences of nuclear activities, civil or military, represents a serious threat to the nuclear establishment, which includes the military industrial complex of the powerful nations. All such evidence, especially from independent researchers, has been covered up, denied and denigrated since around 1945⁶. The cover up is particularly successful because the commercial and military nuclear lobby is represented at the highest level in the UN system through the IAEA which reports to the Security Council, itself composed of the most powerful nuclear states. Dr Hiroshi Nakajima, former Director-General, WHO, stated in a documentary shown on Swiss television that the non-publication (or censorship) of the Proceedings of the International Conference on the health consequences of Chernobyl, held in Geneva in 1995, was due to the legal agreement binding WHO to the IAEA⁷.

National authorities, supposedly serving the public interest in terms of radioprotection, are likewise subservient to, and inseparable from, national nuclear establishments. Regrettably today, we cannot always count on academic and research institutions to undertake independent studies⁸. Public finance for independent investigation in any scientific domain is limited and in the area of radiation and health, much of the so-called “peer reviewed literature” emanates from, or is financed and then filtered by, the nuclear establishment.

There is, however, a large body of evidence from independent researchers and institutes in the three countries, available only in Russian and ignored by the international medical community⁹.

Flaws in the science and research of the nuclear establishment

As a general point, since the 1950s, health professionals have been largely excluded from the organizations responsible for health assessment and protection policies in matters of radiation. These matters are decided by the nuclear establishment made up of the ICRP, IAEA and UNSCEAR at the international level, and agencies such as NCRP (UK), BEIR (USA) and EURATOM (EU), at national levels¹⁰. These entities are closely interlinked, with overlapping and *often closed* membership¹¹.

Specifically, the health effects of chronic, low level, irradiation of certain organs which accumulate radionuclides have been denied and inappropriate models based on a one-time, external, high level radiation events (as in Hiroshima) have been applied. It is increasingly recognized by national and international authorities that there is no safe, risk-free, dose of

⁶ Permanent People's Tribunal, International Medical Commission on Chernobyl. *Chernobyl: environmental, health and human rights*. Vienna, 12-15 April, 1996.

⁷ Wladimir Tchertkoff. *Nuclear Controversies*. Documentary. Feldat films, 2004. Downloadable from www.independentwho.info

⁸ Lancet. 2001 Apr 14;357(9263):1141. *The tightening grip of big pharma*. (Editorial)

⁹ Greenpeace. *The Chernobyl catastrophe: consequences on human health*. Cited above.

¹⁰ International Commission on Radiological Protection (ICRP), International Atomic Energy Agency (IAEA), United Nations Scientific Committee on the Effects of Atomic Radiation (UNSCEAR), Biological Effects of Ionizing Radiation (BEIR), National Council on Radiation Protection (NCRP), European Community of Atomic Energy (EURATOM).

¹¹ Permanent People's Tribunal, International Medical Commission on Chernobyl. *Chernobyl: environmental, health and human rights*. Cited above.

ionising radiation¹² and that the model upon which the ICRP bases its recommendations for radioprotection is irrelevant to internal, low dose exposure.¹³

The science that has informed the nuclear debate in general and Chernobyl in particular is corporate science and the flaws in this pseudoscience range from the flagrant and preposterous to the subtle and dishonest.

The first category includes falsification and suppression of data, failure to undertake regular whole body measurements and to correlate this with development of cancer or any other health problems, attacks on independent researchers and their institutions, censorship of studies revealing adverse effects, discounting thousands of un-translated studies from the three most affected countries and exclusion from conference agendas of entire scientific domains (such as the health effects of chronic, low dose, internal radiation, accounting for most of the contamination in populations around Chernobyl).

The second category includes averaging exposures over entire populations and ignoring local sources of concentrated contamination, ending studies after 10 years thereby excluding long latency problems (10-30 years) as well as long term morbidity and mortality, qualifying five year survival as “cure”, only considering cancer, only considering those still alive, only considering the three most affected countries, claiming decreases in childhood cancers when in fact, children have become adults with cancer and therefore no longer appear in that database, and dozens of other shameful manipulations of data¹⁴.

Discrepancies in estimates of morbidity and mortality can no longer be ignored

The official evaluation of the health problems (morbidity and mortality) in the regions affected by Chernobyl differs from that of various independent researchers by a factor of 100, sometimes even 1000. To cite one example, at least 600,000 liquidators participated in the clean-up and were subjected, often without protection, to horrifying levels of radiation and to minute dust particles rich in uranium isotopes. Yet WHO in 2006 still presented a final total of around 50 deaths.

The discrepancies are not only between NGOs, independent scientists and “official” estimates but within international organizations themselves. In 2000, as Secretary-General of the UN, Kofi Annan stated that more than 7 million people are still suffering, the exact number of victims may never be known, but 3 million children require treatment and many will die prematurely.¹⁵ In the same year, the International Federation of Red Cross and Red Crescent Societies, on the basis of medical screening in the three countries, found 83.1% of adults and 76.8% of the children were ill¹⁶. The 2006 Greenpeace report, produced with contributions from hundreds of independent scientists from the three countries, concludes that in the three countries alone, the most recently published figures indicate that the accident resulted in an estimated 200,000 additional deaths between 1990 and 2004.¹⁷

¹² UNSCEAR. *Source and Effects of Ionizing Radiation. Report to the General Assembly 1993.*

¹³ Committee Examining Radiation Risks of Internal Emitters. (CERRIE, UK) *Majority Report.* October 2004.

¹⁴ Alex Rosen. *Effects of the Chernobyl catastrophe: a literature review. Cited above*

¹⁵ Kofi Annan. Foreword: OCHA. *Chernobyl. A continuing catastrophe.* Geneva and New York. 2000.

¹⁶ IFRCRCS. Foreword: Paul Fusco & Magdalena Caris. *Chernobyl Legacy.* De MO. New York, 2001.

¹⁷ Greenpeace. *The Chernobyl catastrophe: consequences on human health. Cited above.*

RECOMMENDATIONS

The use of nuclear energy at the current stage of technical and scientific knowledge violates the precautionary principle. It endangers the life, health and the environment of a growing number of human beings and thereby violates their rights. For these reasons, the NGO signatories request that:

- Immediate health care, treatment and radioprotection should be provided to the affected populations in Ukraine, the Russian Federation and Belarus *on the basis of the existing health problems of individuals* in the population as assessed through medical screening by independent experts;
- The independence of WHO as international health authority *including* in matters of radiation and health must be assured. Revision of the 1959 Agreement between WHO and the IAEA should be put on the agenda of the next World Health Assembly and Abrogation of the Agreement on the agenda of the next UN General Assembly;
- A WHO Commission on Radiation and Health made up of independent experts with no connections, financial or otherwise, to the nuclear industry and all related entities such as the IAEA, should review available evidence on the health consequences of the Chernobyl catastrophe including all studies undertaken by independent researchers. The findings must be reported to the World Health Assembly and full proceedings made available to the public;
- the Human Rights Council should work towards implementation of these recommendations;
- the Special Rapporteurs on the Right to Health and the Right to Food undertake a mission to the three countries most affected by the Chernobyl catastrophe and make recommendations to the Council and to the relevant UN bodies in order to alleviate the suffering of the victims

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