International Advanced Training Course on
Stakeholder Engagement for Recovery after Nuclear Disasters
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About the co-expertise process

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Introduction

- Experience from the Chernobyl and Fukushima nuclear accidents clearly highlighted that in a context of **absence of background knowledge** of the population about radiation risk and **distrust** of authorities and experts, the diffusion of scientific and technical information plays a very limited role in helping people to understand the situation they are confronted with after a nuclear disaster

- This experience also demonstrated that **approaches** integrating the **active cooperation** of those affected into the recovery process enable to **empower** them in order to make **informed decisions** about their own protection and that of their loved ones

The Chernobyl and Fukushima experience

- **Chernobyl:**

  The **ETHOS project** and **CORE program** in Belarus (1996-2008): initiated by a team of French experts in villages of the Stolyn and Bragin districts with the support of the Bealrus authorities

  Fukushima:

  - The **crisis communication experience** from professors of the Nagasaki University (Spring 2011)
  - The **Fukushima Dialogue** meetings initiated by ICRP (2011-today)
  - The **Kawauchi village experience** (2011-today) : initiated by local authorities and professors of the Nagasaki University with the support of the Japanese government
  - The **Suetsugi community experience** (2011-today): initiated by local citizens in cooperation with voluntary experts and the support of local authorities and organizations

Ethos project, Belarus

Chernobyl

Ethos project, Belarus

Core programme, Belarus

Core programme, Belarus

The Fukushima Dialogue meetings

Third meeting on 'Improving the quality of food products'

Date City, July 2012

Kawauchi, Japan

Kawauchi, Japan

Fukushima

Suetsugi, Japan

Suetsugi, Japan

Lessons learned (1)

- The most effective way of **engaging affected people in the recovery phase** after a nuclear disaster is:
  - To **listen understand** their **daily concerns**
  - To carry out **measurements with them** in order they understand where, when and how they are exposed. This must be done step by step starting **from the source of exposure** to gradually go to the **exposures** received by individuals through the various exposure pathways
  - To use as much as possible **common language** and the **narration**
  - And never forgetting that communicating about risk only works if there is **trust** between the people affected and the experts / authorities

Lessons learned (2)

- When engaging affected people, experts should:
  - Adopt a **prudent approach** for managing radiation risk based on the **optimisation principle** i.e. keeping all exposures as low as reasonably achievable
  - Promote protective actions improving the **well being of individuals** and the **quality of the living together** of the community they belong
  - Respect their **individual decisions** while preserving their **autonomy of choice**
  - Keep in mind that the issue at stake is **not to make people accepting the risk** but allowing them **to make informed decisions** about their protection and their life choices
- All of the above lessons have led to gradually develop the so called '**co-expertise process'** (cooperation between experts and stakeholders)

The co-expertise process

Combining:

Two-way communication

Trust building

Citizen participation/ empowerment

Technical expertise

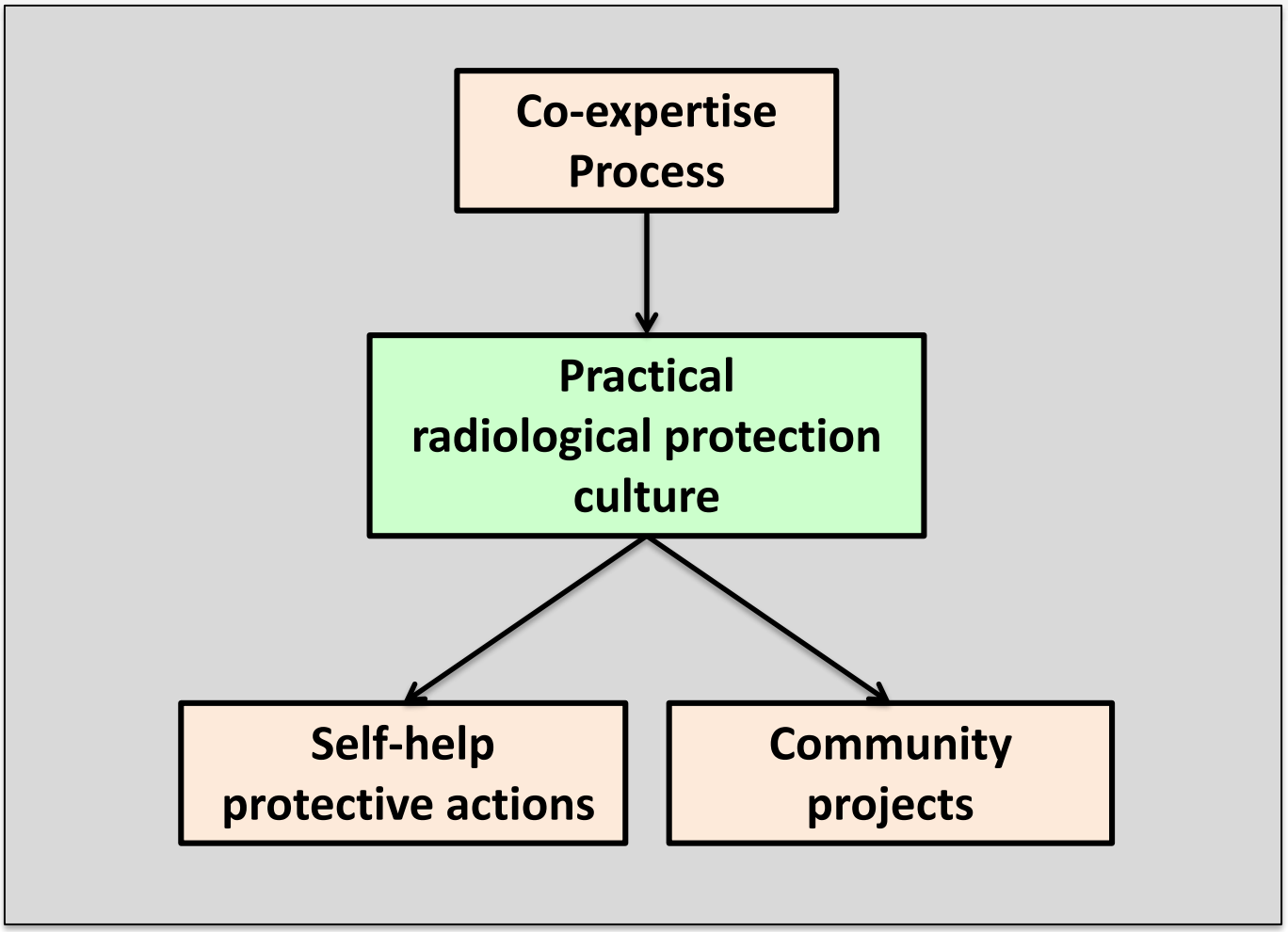
Practical radiological protection culture

- The co-expertise process promotes the development of a **practical radiological protection culture** among affected people defined as

  the **knowledge** and **skills** enabling citizens **to make well-informed choices and behave wisely** in situations involving potential or actual exposures to ionising radiation

- The practical radiological protection culture allows people:
  - To **interpret** the results of the measurements of radiation
  - To **build their own benchmarks** in relation to the radioactivity present in their daily life
  - To make their own decisions to protect themselves and their loved ones and to **implement self-help protective actions**
  - To **develop local projects** to improve their living conditions
  - To **judge the effectiveness** of the protective actions implemented by themselves but also by authorities and organisations

In summary


Co-expertise Process
Practical radiological protection culture
Self-help protective actions
Community projects

The ethical dimensions of the co-expertise process

- To be credible in the implementation of the process experts must:
  - Master the scientific basis of radiological protection and its practical implementation **- Accountability**
  - Share openly all information they own and recognize limitations **- Transparency**
  - Listen carefully to the stakeholders to understand their concerns and individual situations **- Empathy**
  - Deliberate and decide together with stakeholders- **Inclusiveness**
  - Act in accordance with the ethics of radiological protection, that is to say **prudently** and **equitably**
  - Ensure **respect for people's freedom of choice** without manipulating them in any way
  - And above all to remain **faithful** to their commitment over time

Concluding remarks

- Lessons learned in co-expertise processes implemented in Belarus and Japan demonstrated the feasibility to develop a practical radiation protection culture to **empower** people in order they make **informed decisions** about their **protection** and thus restore their **dignity** and **trust** in authorities and experts

- This requires the mobilization of **specific skills**, **adapted means of measuring radiation** and the **support of authorities**. It also takes **time…**

- The key of success is to put science and technology **at the service of resolving the concrete problems** people are facing

‘To work with people and not for them’

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Thank you for your attention

Borrowed from Noboru Takamura

Kawauchi villagers collecting mushrooms to draw up a contamination map

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http://www-sdc.med.nagasaki-u.ac.jp/abdi/index.html