Existing Exposure Situations: Challenges and the Current Work of ICRP

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Overview

- Introduction: ALARA and Existing Exposure Situations
- Characteristics of Existing Exposure Situations
- Radiological Protection in Existing Exposure Situations
- Example: Fukushima NPP accident



Key Principles

Justification

• Any decision that alters the radiation exposure situation should do more good than harm.

Optimisation of Protection

• The likelihood of incurring exposure, the number of people exposed, and the magnitude of their individual doses should all be kept as low as reasonably achievable (ALARA), taking into account economic and societal factors.

Application of **Dose Limits**:

 The total dose to any individual from regulated sources in planned exposure situations other than medical exposure of patients should not exceed the appropriate limits specified by the Commission.



Exposure Situations

Planned Exposure Situation

• planned operation of deliberately introduced sources including decommissioning, disposal, and rehabilitation

Existing Exposure Situation

 already exists when a decision on control has to be taken, including natural background and residues from past practices operated outside the system

Emergency Exposure Situation

• unexpected and requiring urgent action

Example Existing Exposure Situations

- Exposure in effected areas after a nuclear accident or a radiation emergency
- Exposure to radon in dwellings and workplaces
- Exposure to naturally occurring radioactive material
- Exposure of aircraft crew to cosmic rays
- Exposure on contaminated sites from past activities

ICRP Publications on Existing Exposure Situations

- P111: ... Protection of People Living in Long-term Contaminated Areas After a Nuclear Accident or a Radiation Emergency
- TG 81: Radiological Protection against Radon Exposure (consultation on draft report complete)
- TG 76: NORM
- TG 83: Protection of Aircraft Crew against Cosmic Radiation Exposure
- TG 84: Initial Lessons Learned from the NPP Accident in Japan vis-à-vis the ICRP System of Radiological Protection

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What is an Exposure Situation?





Characteristics of Existing Exposure Situations

- Natural vs anthropogenic ?
- Public vs occupational exposures ?
- Controllability ?
- Timing of protective measures ?



Existing ≠ Natural



Existing exposure situations can also arise from accidents and past practices



Occupational, Public and Medical Exposure Categories

Occupational

exposure of workers incurred as a result of their work

 Due to ubiquity of radiation limited to exposures at work reasonably regarded <u>the responsibility of operating</u> <u>management</u>

Medical

exposure of patients in diagnostic, interventional, and therapeutic procedures

Public

all exposures other than occupational and medical



Existing ≠ Public



Existing exposure situations can result in both public and occupational exposures



Existing Exposure Situations: Controllability

Sources

Generally not controllable

Pathways

• Generally only partially controllable

Exposures

• Controllable in principle, if not always in practice









Controllability

	Sources	Pathways	Exposures
Planned exposure situations	Yes	Yes	Yes
Emergency exposure situations	Νο	Partially	Partially
Existing exposure situations	No	Partially	Yes

Timing of Protective Measures

Planned Exposure Situation

Specific measures planned prospectively

Emergency Exposure Situation

- General planning, but specific measures respond to evolving situation
- Urgent actions failure to act may mean loss of opportunity to prevent or mitigate exposures

Existing Exposure Situation

- Characterisation before taking action
- Protective measures not "urgent"
- Full control may take a long time

Applying the System of Radiological Protection

Optimisation of protection with boundaries

In ALL exposure situations For ALL categories of exposure

- Hard boundaries: dose limits
- Softer boundaries: dose and risk constraints, various reference levels

Optimisation





Reference Levels

- Used in optimisation of protection to restrict individual doses
- Initial intention is to not exceed, or to remain at, these levels
- Ambition is to reduce all doses to levels that are as low as reasonably achievable, economic and societal factors being taken into account

ICRP Publication 103 ¶ 225



Post-Accident Radiological Protection (Fukushima Accident)

Complex Problem!

- Many factors: health, environmental, economic, social, psychological, cultural, ethical, political, etc.
- One key is effectively involving the local population and professionals in management of the situation
- Authorities at national and local levels create conditions and provide means to involve and empower the population



Protection Strategy

- Protection strategy = many protective actions
- Optimise the entire protection strategy, not only individual protective actions
- Protective actions are implemented:
 - centrally
 - locally by authorities, experts, and professionals
 - as self-help actions with the support of authorities



Reference Levels

- Optimisation is guided by reference levels (timeframes shown are relevant to Fukushima)
- Protection of public:
 - emergency exposure situation (months): 20–100 mSv
 - existing exposure situation (few years): lower end of 1–20 mSv per year
 - long-term (decade or more): 1 mSv per year
- Values of reference levels and timeframe will vary from place to place depending on local conditions



Selection of Reference Levels



Optimisation of Protection

- Balance radiation and other risks with benefits
- Take actions to reduce doses below reference levels



Residual Dose over Time



Residual Dose over Time



- Focus on the most exposed people
- Actions taken will decrease doses

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Actions by Authorities

- Cleaning buildings, soils and vegetation
- Monitoring environment and produce
- Waste management
- Surveillance
- Information, guidance, instruction and equipment (e.g. for measurements)
- Specific information for specialised groups



Self-Help Actions

Local professionals and population monitoring:

- Dose rates in living areas
- Local foodstuff
- Internal exposure of themselves and people for whom they have responsibility (children, elderly)

To help adapt habits to maintain exposure as low as reasonably achievable

Facilitated by authorities providing:

- Conditions and means for monitoring
- General information on the exposure situation
- Information on ways to reduce doses
- Local forums involving the population and experts

Fukushima Dialogue Initiative

Joint Initiative

ICRP -- Date City -- Fukushima Prefecture -- Radiation Safety Forum, Japan --Association for Futures Creation of Tamura & Children, Ethos in Fukushima -- Fukushima Medical University -- Research Institute for Soil Science and Agrochemistry of National Academy of Science of Belarus -- Belarusian branch of Russian-Belarusian Information Centre on the Problems of the Consequences of the Catastrophe at Chernobyl Nuclear Power Plant -- Committee of Radiation Protection and Public Health/OECD-NEA --Institute of Radiation Protection and Nuclear Safety, France -- Norwegian Radiation Protection Authority, Norway -- Nuclear Safety Authority, France

- Sharing ICRP recommendations directly with communities in Japan
- Learning for ICRP to improve future recommendations
- Transferring experience from communities affected by Chernobyl
- Facilitating discussions between local stakeholders



Fukushima Dialogue Initiative

- Rehabilitation of Living Conditions after the Fukushima Accident: Lessons from Chernobyl and ICRP Recommendations (Fukushima City, November 26-27, 2011)
- 2) To understand what has been accomplished so far in Date City, and discuss obstacles and ways to further improve living conditions (Date City, February 26-28, 2012)
- Focus on foodstuff, examining challenges faced by producers, consumers, and everyone in-between (Date City, July 7-8, 2012)
- 4) Possibly focusing on education (tentatively November 10-11, 2012)



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