



# **Risk evaluation of long-term exposure after a nuclear or radiological accident**

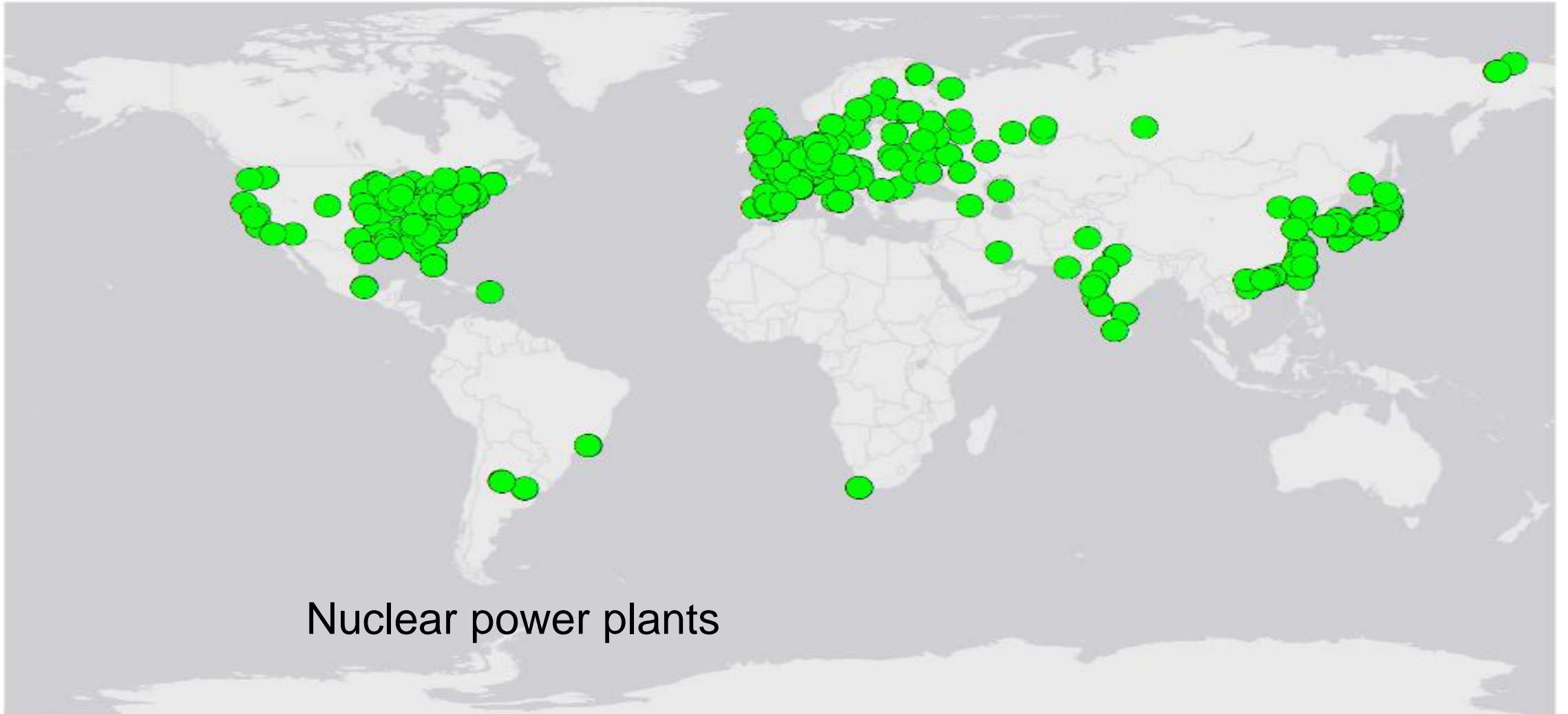
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# Presentation outline

- Long-term existing exposure situations
- Risk assessment and evaluation issues
- Regulatory decision making and risk assessments
- Case studies: Lessons learned from Chernobyl fallout management in Norway and cooperation project with Russian Federation on Mayak PA nuclear facility case
- Conclusion remarks, challenges

# Long-term exposure situations

Legacies are a global issue, yet, there is no current international definition





# What is a Legacy?

- Each legacy is different
- Present a complex variety of relevant prevailing circumstances:
  - *Sites and facilities affected by major accidents and incidents*
  - *Storage and disposal sites and facilities for radioactive waste*
  - *Nuclear technology and development centres and laboratories*
  - *Former uranium mining and milling facilities, and NORM*
  - *Former peaceful nuclear explosion and weapons testing sites*
- Standards for protection evolve as well as regulation requirements





# Risk evaluation



- Environmental risk assessment typically covers
  - human health assessment
  - ecological assessment
- Focus of short and long term risk assessment commonly differs
  - What should be expected after the accident?
  - What were the actual consequences of the accident?

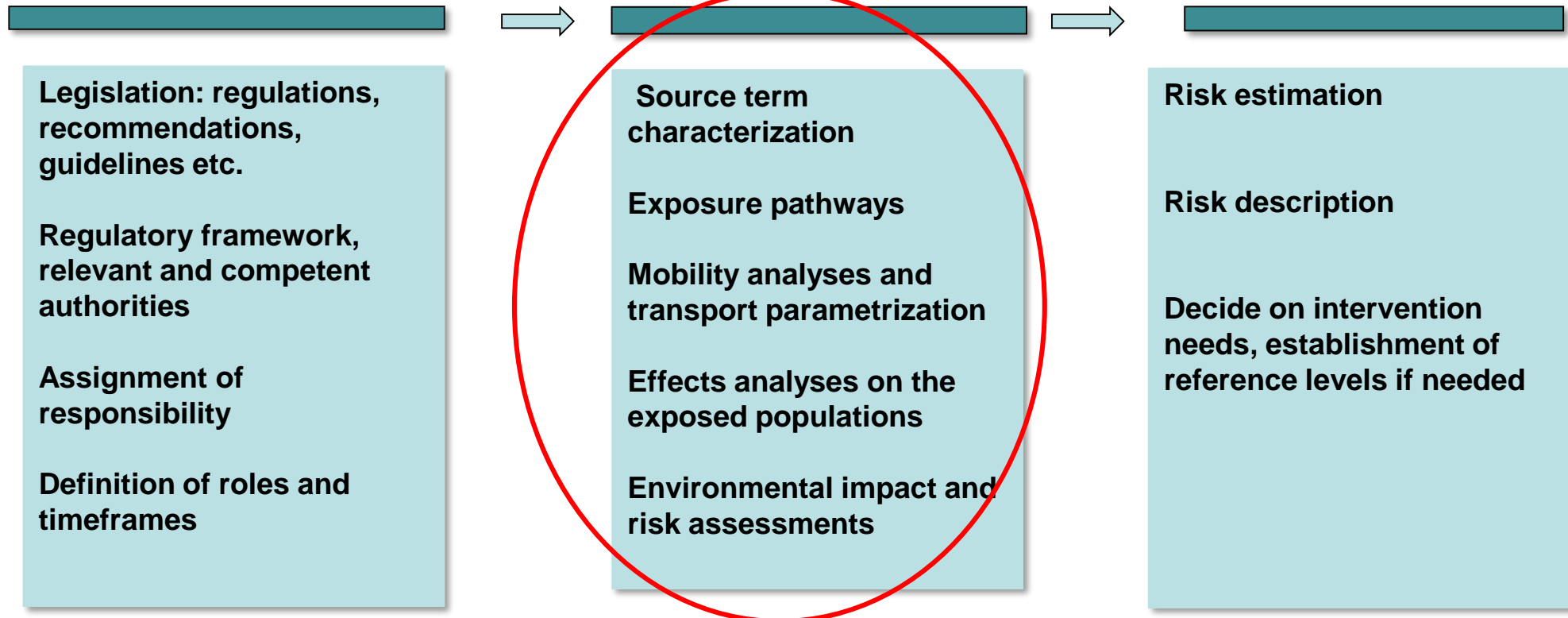


# Regulatory decision making and role of risk assessment

## Planning, hazard recognition and problem formulation

## Technical steps Analyses

## Risk evaluation Decision and/or Resolution



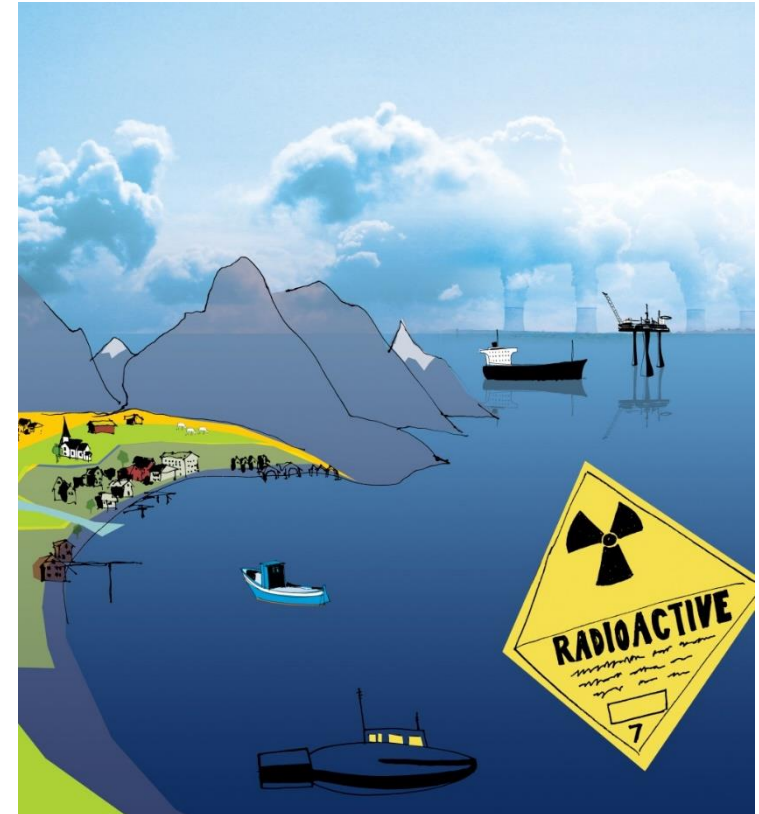
- Financial decisions within this horizontal process
- Social aspects and decisions: risk perception and communication stakeholders involvement

# Environmental risk assessment

- Current state characterization of source term and site of interest
- Collection of information on the spatial and temporal patterns and variations, pathways analyses
- Identification of the target population – humans and biota
- Collection of as many individual-based radiation measurements as possible
- Collection of individual personal and lifestyle information that can be used for the estimation of individual dose
- Calculation of realistic radiation doses with efforts to minimize sources of bias
- Validation of the dose estimates by independent measurements or strategies
- Qualitative and quantitative evaluation of the uncertainties associated with dose estimates (model, parameter and scenarios uncertainties evaluation)

# **Demands of nuclear and radiological accidents after long period of time**

- Re-estimation of consequences and risks within (large) endangered geographic areas
- Evaluation of applied countermeasures
- Evaluation of effects in many aspects of society
- Good coordination of information and continuous engagement of stakeholders
- Good international coordination and exchange of information



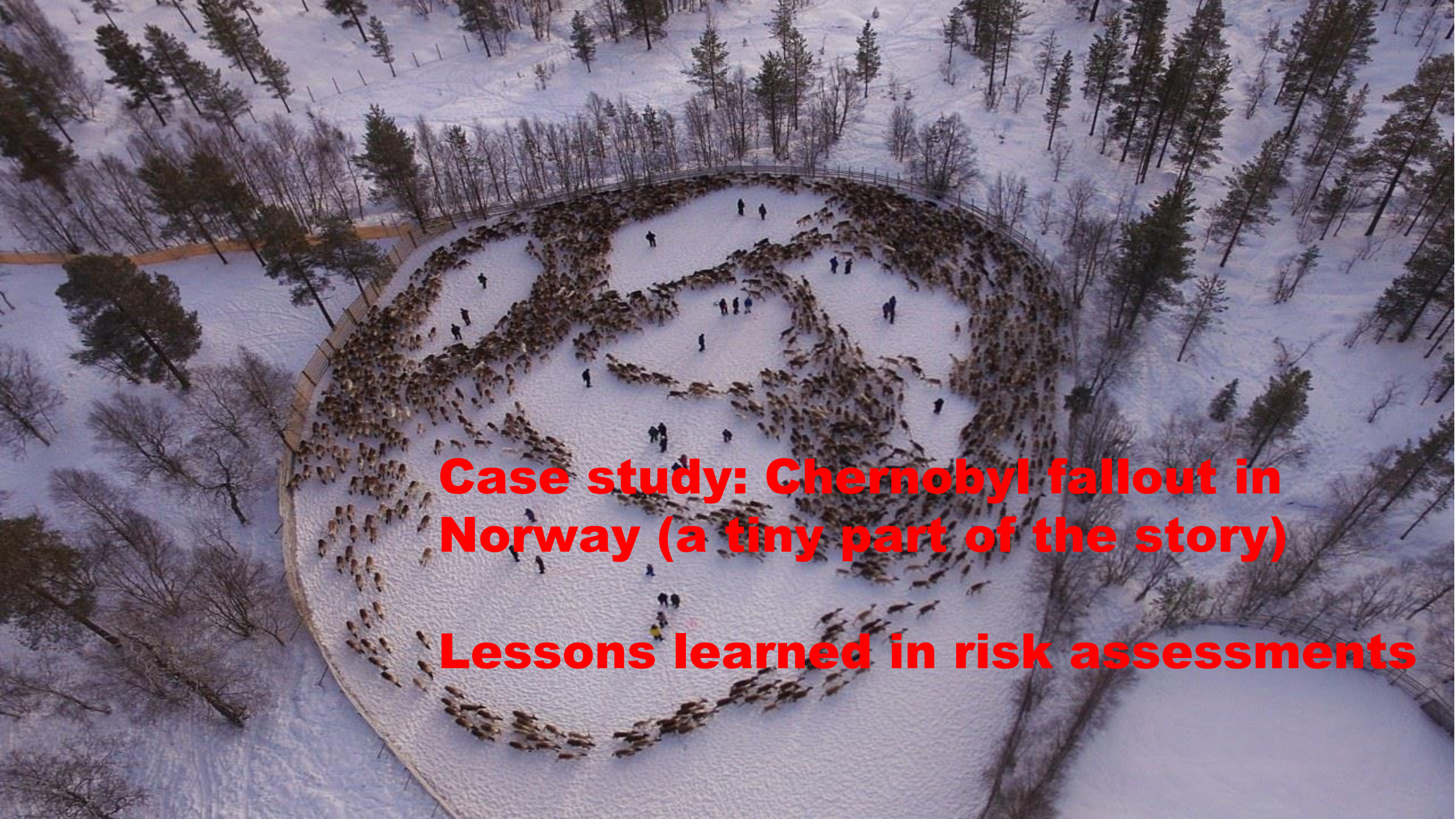


# How to assess and manage radiation risks?

- No 'one' universal answer... **case specific approach according to prevailing conditions**
  - Radioactive source, variation in pollution degree, volume and activity of wastes present
  - Mixtures of radionuclides, chemical and physical hazards
- Need proportionate management of different risks, taking account of:
  - What, who, how and for how long?
  - Current and intended End State/End Use
- Guides appropriate allocation of resources for regulatory control measures



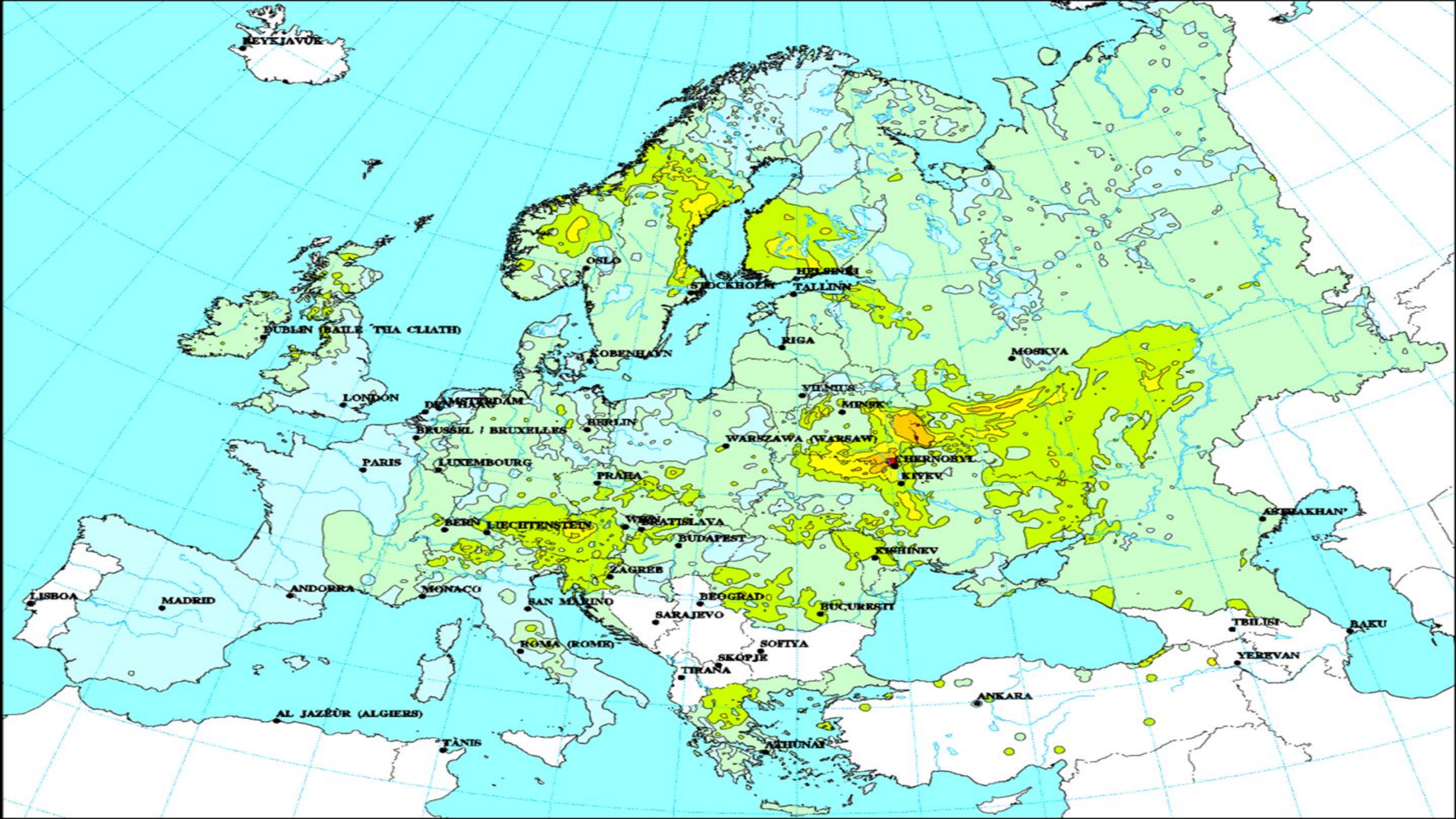




**Case study: Chernobyl fallout in Norway (a tiny part of the story)**

**Lessons learned in risk assessments**







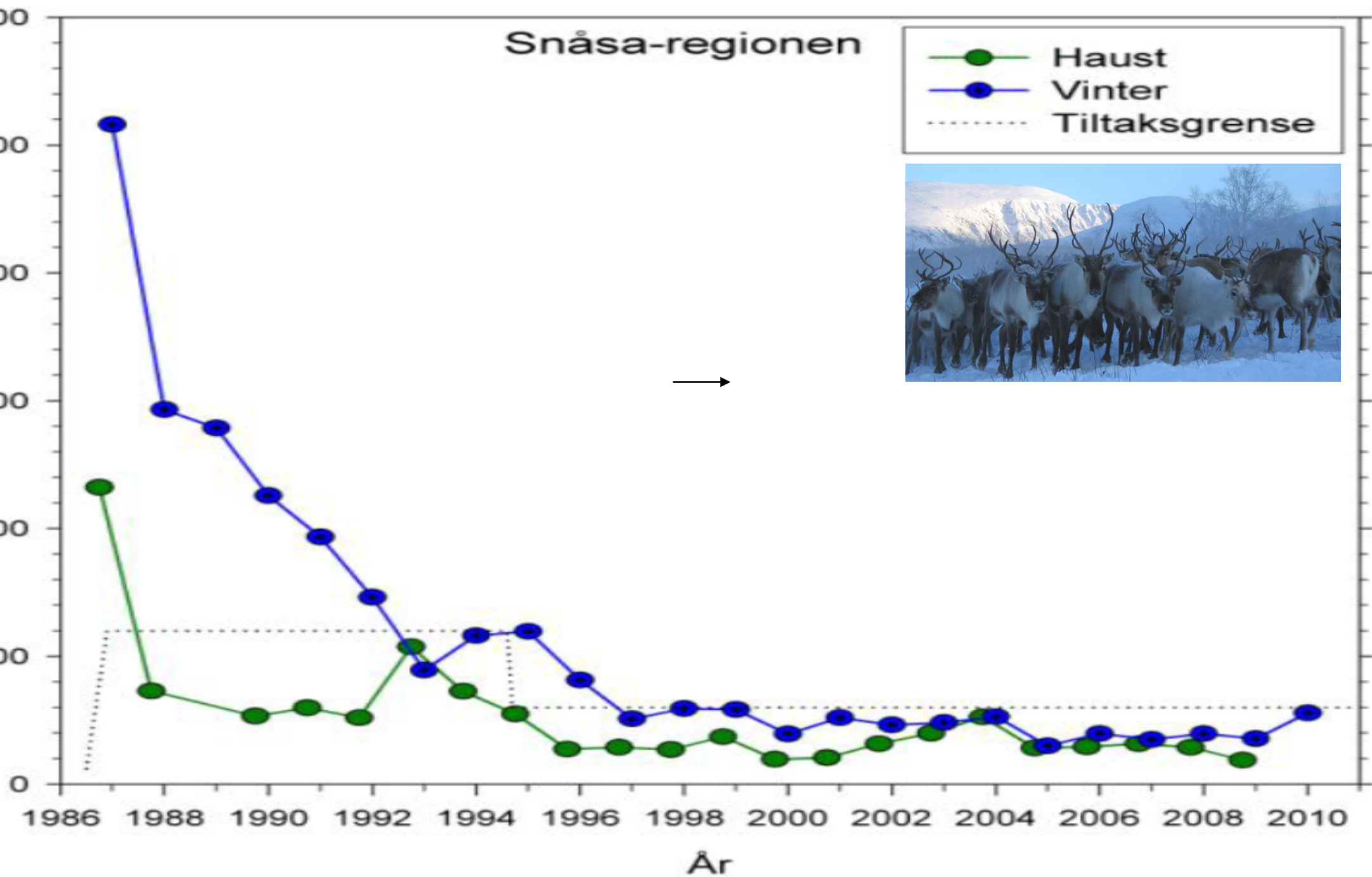
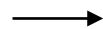
# **Lesson learned: Immediate transparency and effective communication *that does not cause panic***

- **Early May 1986:** Little information, but soon contaminated areas in other parts of Norway were discovered
- **May/June**
  - Measurements for overview and for food safety purposes
  - Regulation values for food contamination set for total cesium
  - Tonnes of food discarded: 100.000 sheep was discarded + reindeer!
- **July/August**
  - State financial coverage of countermeasures
  - Management system developed
  - Local monitoring stations established
- **Winter 86/87**
  - Method for live monitoring of animals developed
- **1988:** The use of Prussian blue tested

**1988 → Continuation of countermeasures to 2018 and beyond**

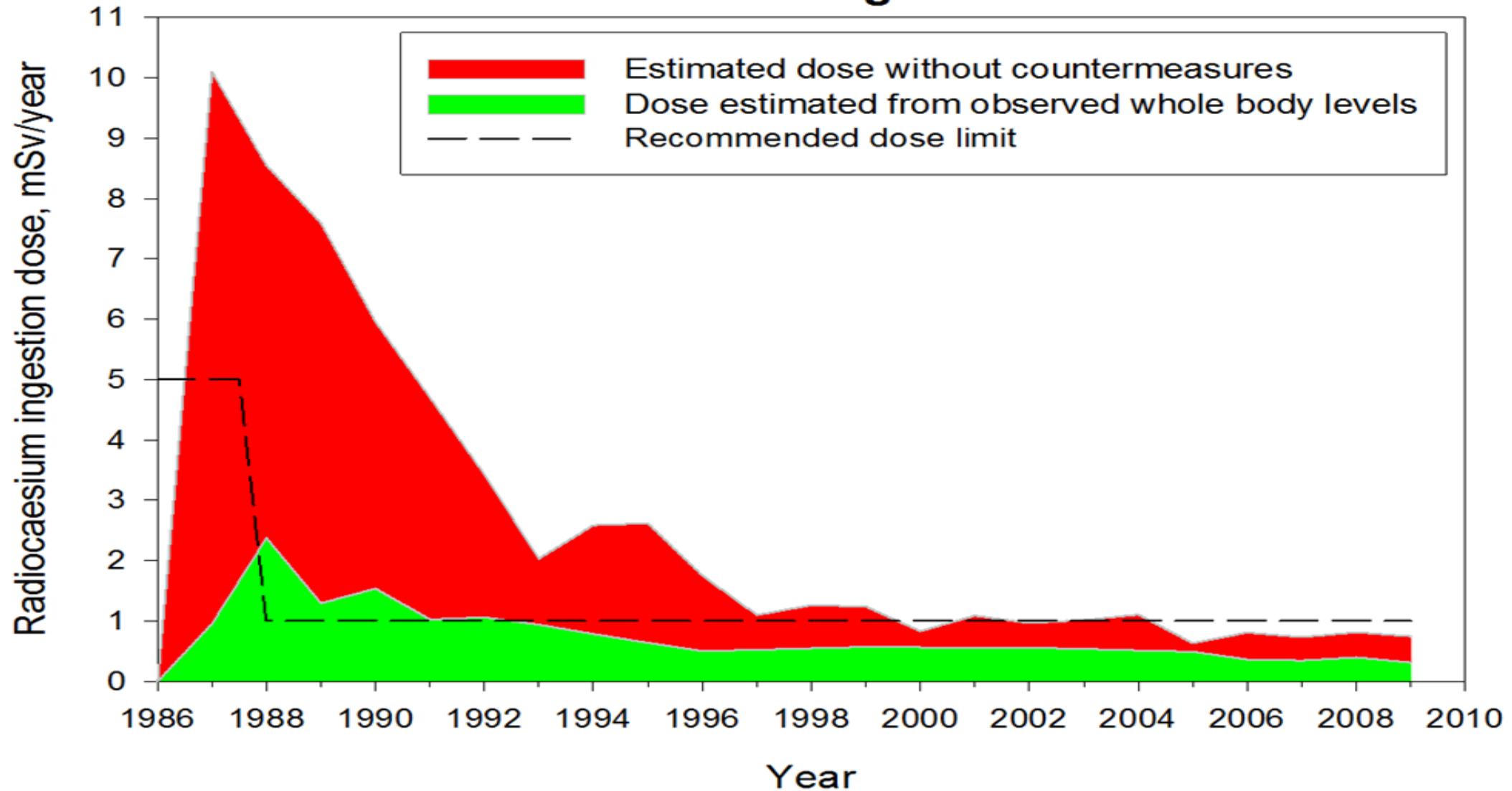
Konsentrasjon av  $^{137}\text{Cs}$  i reinkjøtt, Bq/kg

# Snåsa-regionen



# Long term monitoring and risk communication

## Snåsa region

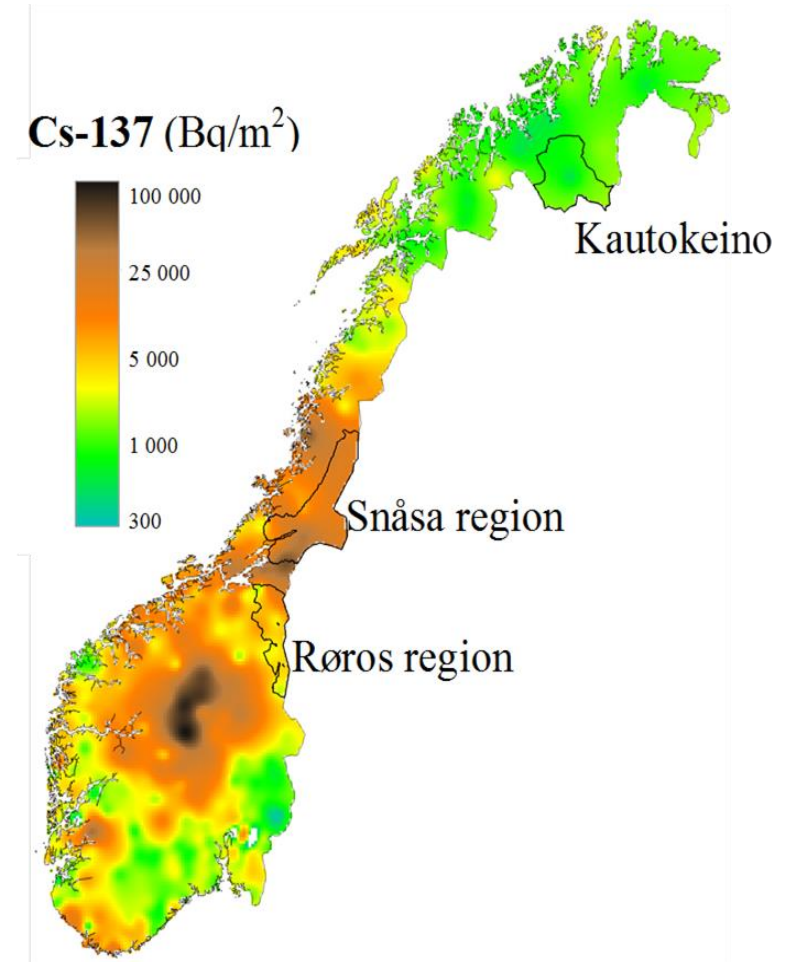




# Risk assessments during the years of mitigation

## Focus on human health and food strategy

- Monitoring of the activity levels in environmental media of concern
- Radionuclides behaviour and transport pathways
- Follow the species that still are under the risk: mushrooms, reindeer, game, wild freshwater fish – biological half-lives of Cs-137 longer than predicted
- Monitoring exposure doses to Sami population
- Changing the reference levels in foodstuff over the time



# Norwegian Scientific Committee for Food and Environment – long term risk evaluation

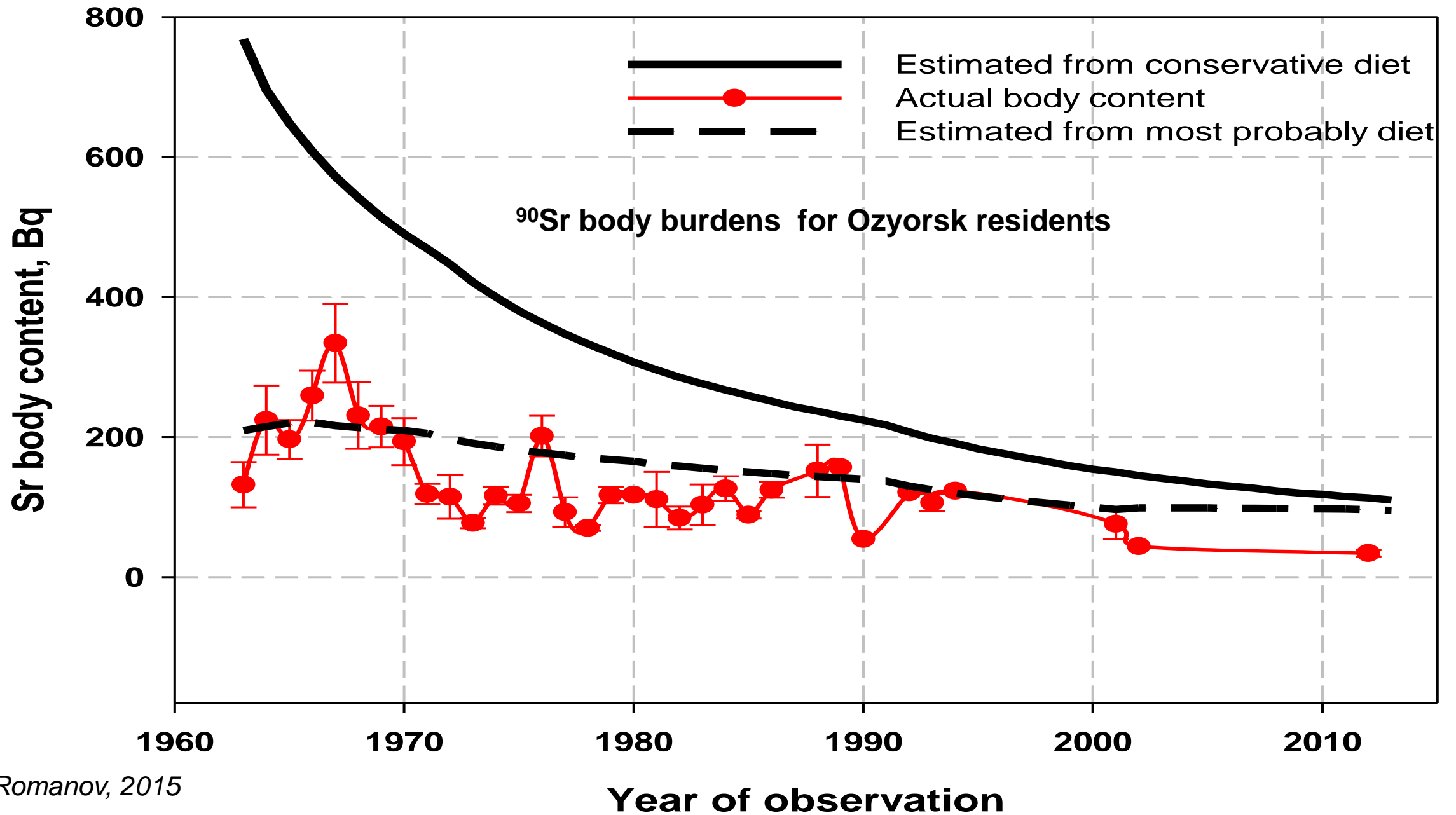
*VKM report 2017:25: Risk assessment of radioactivity in food*

- ToR1: What is the current health risk from radioactivity in food – food gathering and hunting included – to the whole population and specific groups in Norway?
- ToR2: What health risk would the current levels of caesium-137 measured in live reindeer and sheep pose to the whole population and specific groups, if no efforts were made to reduce them?
- ToR3: What would be the implication to the health risk if the ML for reindeer meat was reduced from 3000 to 1500 or 600 Bq/kg, respectively – for the whole population and for specific groups?
- ToR4: Would the procedure and the maximum levels laid down in the Euratom Treaty regulation on radioactive contamination of foodstuffs and feedstuffs following a nuclear accident be appropriate for managing similar scenarios in Norway?

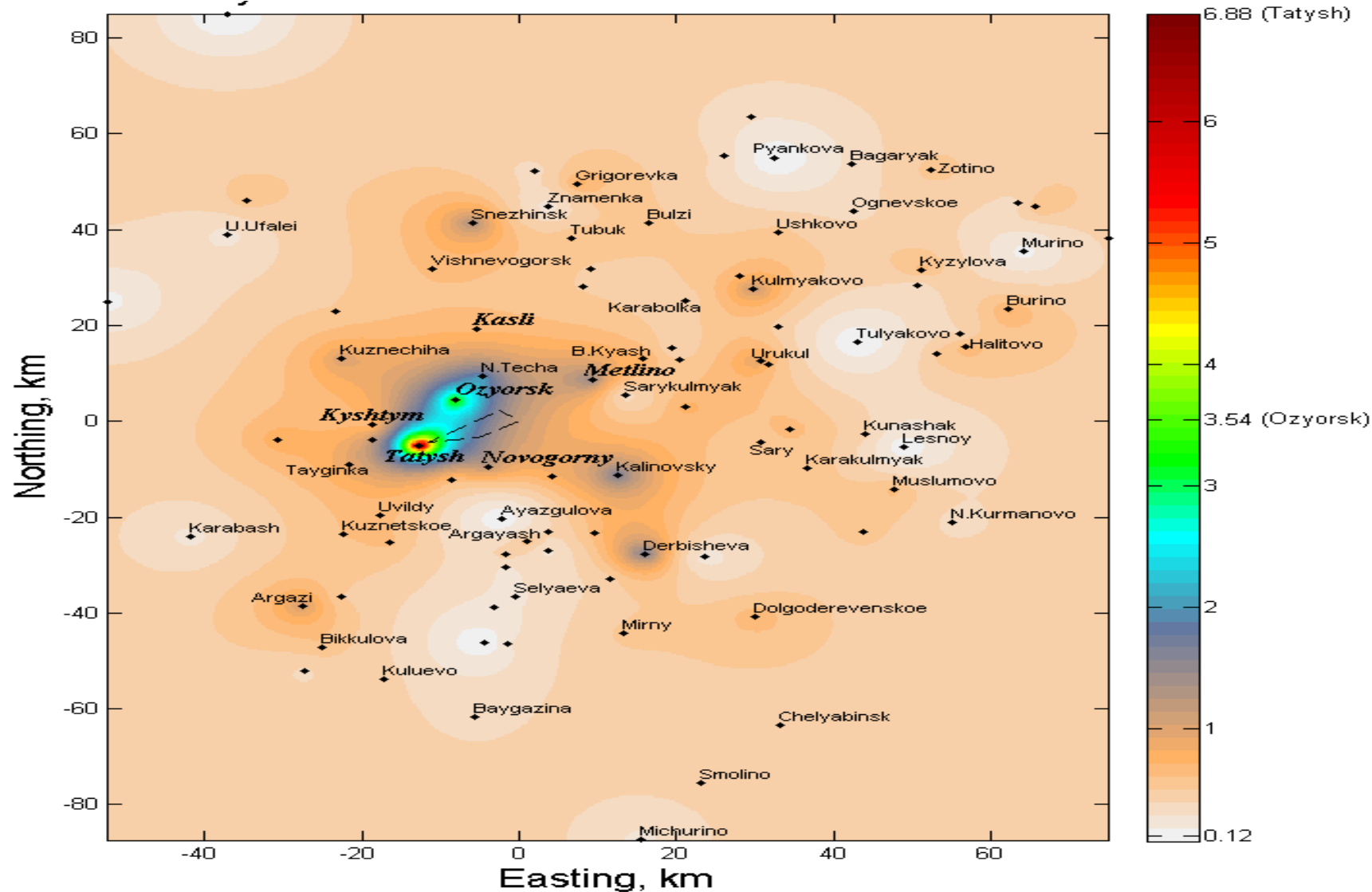
# **Case study: the area affected by historic releases from Mayak PA nuclear facility**



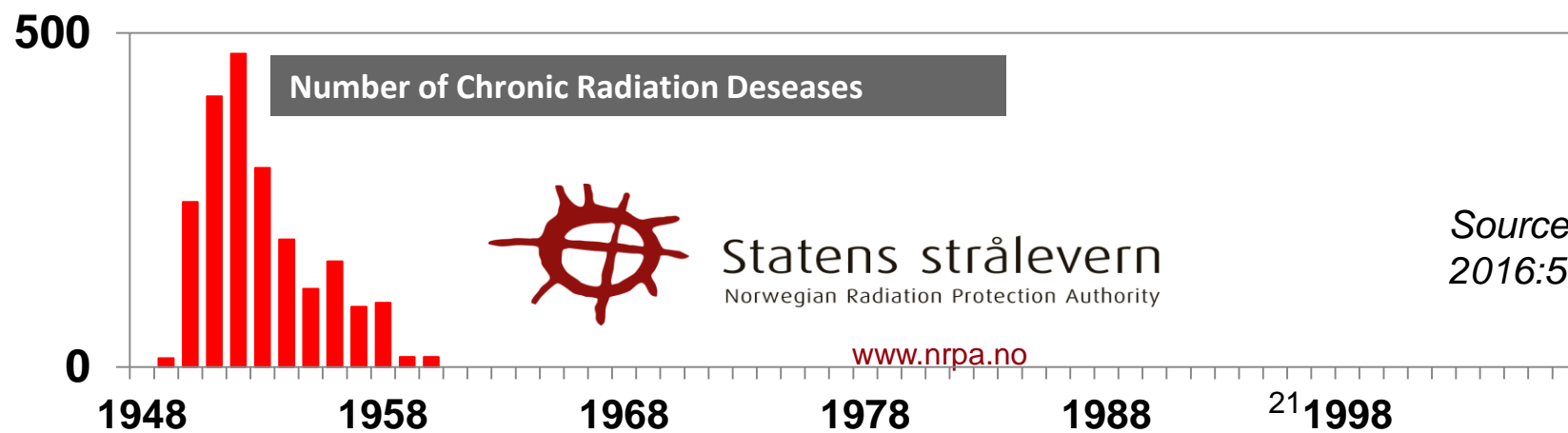
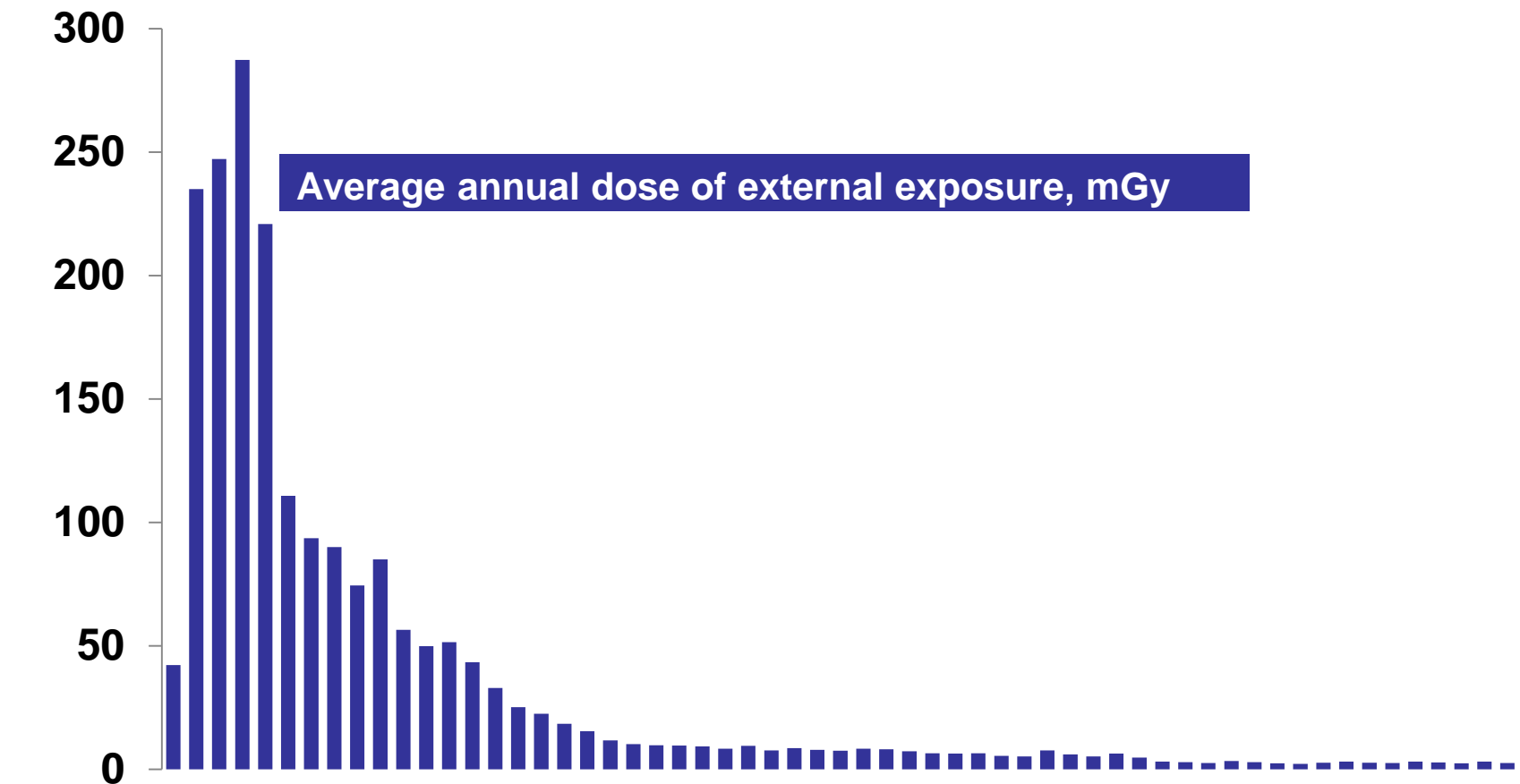




# The map of the $^{90}\text{Sr}$ and $^{239}\text{Pu}$ body burden (Bq) in the Chelyabinsk region population as of 2013







Statens strålevern  
Norwegian Radiation Protection Authority

[www.nrpa.no](http://www.nrpa.no)

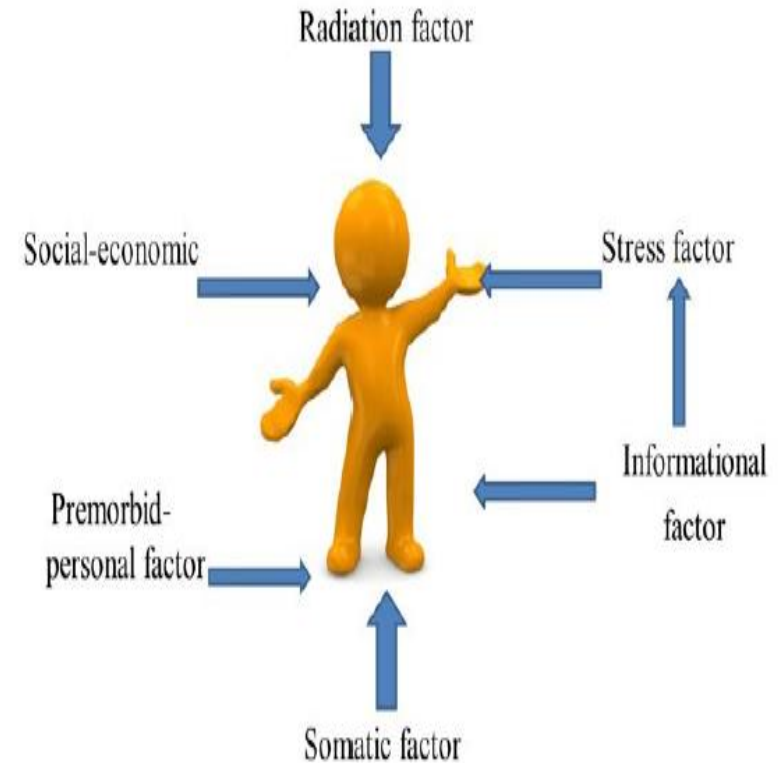
Source: Romanov S, 2015. NRPA  
2016:5

# Project conclusions on human health risks

- Significant improvement of radiation situation in the vicinity of the Mayak PA area in the last decade. The levels of  $^{90}\text{Sr}$  and  $^{239}\text{Pu}$  accumulation in population residing in the observation area in 2011-2013 decreased by 3-4 times as compared to the period of the 1980s
- Situation in XXI century: **Annual effective dose for adult Ozersk population below 0.1 mSv. Is it real “contaminated area”?**
- Obligatory of standard medical care. Epi. studies for small group of people and for population with low doses of exposure are uncertain and useless;
  - What criteria for additional medical care?

# Social-physiological aspects of the usage of radioactively contaminated territories of Urals

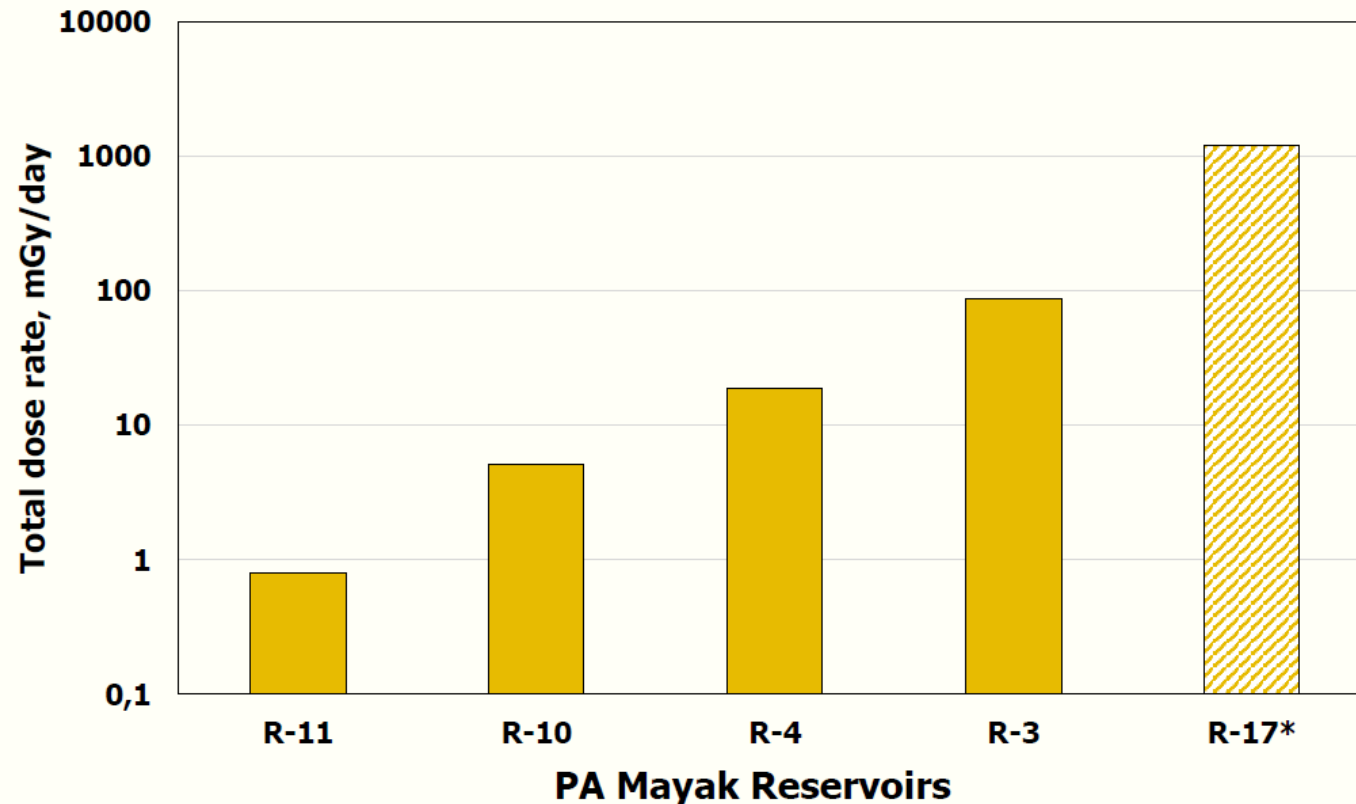
- 1957 Mayak PA accident and East Urals Radioactive Trace (EURT) formation
- Emergency countermeasures, relocation started in time, food and fodder monitoring, countermeasures, affected zone
- Recently – question of return of the territory to normal use
- Number of factors determining the social-physiological status of populations living on long term exposure territories



*E. Burtovaia, 2017*



# Exposure doses to ichthyofauna of contaminated reservoirs of the Techa river



\* Ichthyofauna was not found in R-17

- ERICA dose assessment for fish (perch, pike, roach) in MAYAK PA reservoirs
- Modelled dose rates were in range 3 – 150  $\mu\text{Gy/day}$  with dose rate decreasing down the river and with distance to Mayak PA
- Fish consumption could give rise to an effective dose up to 0.5 mSv
- Genotoxic effects, physiological and pathophysiological reactions and adaptive responses were investigated

# Concluding remarks

- Nuclear or radiological accident is not a linear process, rather a long, messy process of uncertainty which uncovers further problems with its progress - be patient, think rationally about all potential risks
- Assess the current state – prevailing circumstances and make a plan for risk estimation and evaluation – try to see the whole picture (all the current risks, all the affected domains of daily life)
  - Residual risks and related radiation exposures are site-dependent considerations; what may be acceptable for one site may not be in another
- Risk assessment – scientific help highlighted as support for risk calculations for both humans and biota
  - Knowledge gaps and need on new data bases improvement,
  - Modelling – need on further development of ‘fit-for-purpose’ models
  - Work on reducing the uncertainties and proper acknowledgment of these

# Concluding remarks

- Transition of permissible levels in food and release of materials from emergency to existing exposure is recommended
- Development of generic international criteria?
  - Range of reference levels for existing exposures 1-20 mSv, variably used
  - Consumption habits and food types varying between populations
  - When an emergency ends and an existing situation begins?
- Rationalization of the different values applied would be beneficial, providing background on their derivation and the context in which they are meant to be applied; Justification and Optimization of protection strategies, Reference levels (ICRP)!
- Risk communication: public perceptions and the level of anxiety over long-term radiation exposure and possible health risks must be considered
- Stakeholder engagement, particularly local population at all levels in legacy management



# Regulatory supervision of Legacy sites: from recognition to resolution

- Workshops organized by NRPA in collaboration with international organizations IAEA, ICRP, OECD NEA, IUR
  - Oslo, 2015; NRPA report 2016:5
  - Lillehammer, 2017, NRPA report 2018:4

<https://www.nrpa.no/en/publications>



# Challenges:

## Gap between Theory and Practice

- Decisions should be supported by science and address all environmental and human health issues, irrespective of the hazard
  - How to address short and long term risks to different populations, proportionately?
  - How to address all the environmental and human health issues, not just radiation in practice?
  - How to reduce uncertainties in prognostic assessment of future conditions and impacts?
  - How to make appropriate decisions in transition from emergency to existing exposure situation and later stages?

*Principle of optimisation requires a common framework of protection objectives across different hazards, for people and the environment*

*Need for holistic ('multi-dimensional') approaches to human health and environmental protection from multiple hazards*

# Challenges: Effective Risk Communication

- Effective risk communication is a very important part of the engagement process, but **communicating risks associated with different threats can be problematic**
- **Not only actual but public perception of risk should be carefully assessed and further addressed in remediation processes**
- Successful resolution requires a wide range of stakeholders to be engaged (local, regional, national, international)
  - *Seek to obtain stakeholder support in a transparent and traceable decision-making process*
  - *Identify important social, cultural, environmental and economic factors to take into account*
  - *Helps people affected have a feeling of owning the solution*

***Need to consider how confidence and trust can be improved among all stakeholders***





# Thank you for your attention

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