Summary of the 1st Asian Workshop on the Ethical Dimensions of the RP system

1st European Workshop on the Ethical Dimensions of the Radiological Protection System

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Introduction

- 27-28 August 2013, KINS HQ, Daejeon, Korea
- 28 Participants from 10 Countries
- ➢ 3 MC members (J Lochard(VC), C Clement(SS), J Lee)
- > 3 C4 members (J Takala, S Liu, K Cho)
- China, Japan (C Kurihara), Korea, Mongolia, Pakistan, Vietnam, Philippines
- Canada, France, Italy (MC Cantone)
- 6 Presentations
- Working Group discussions
- Plenary Session

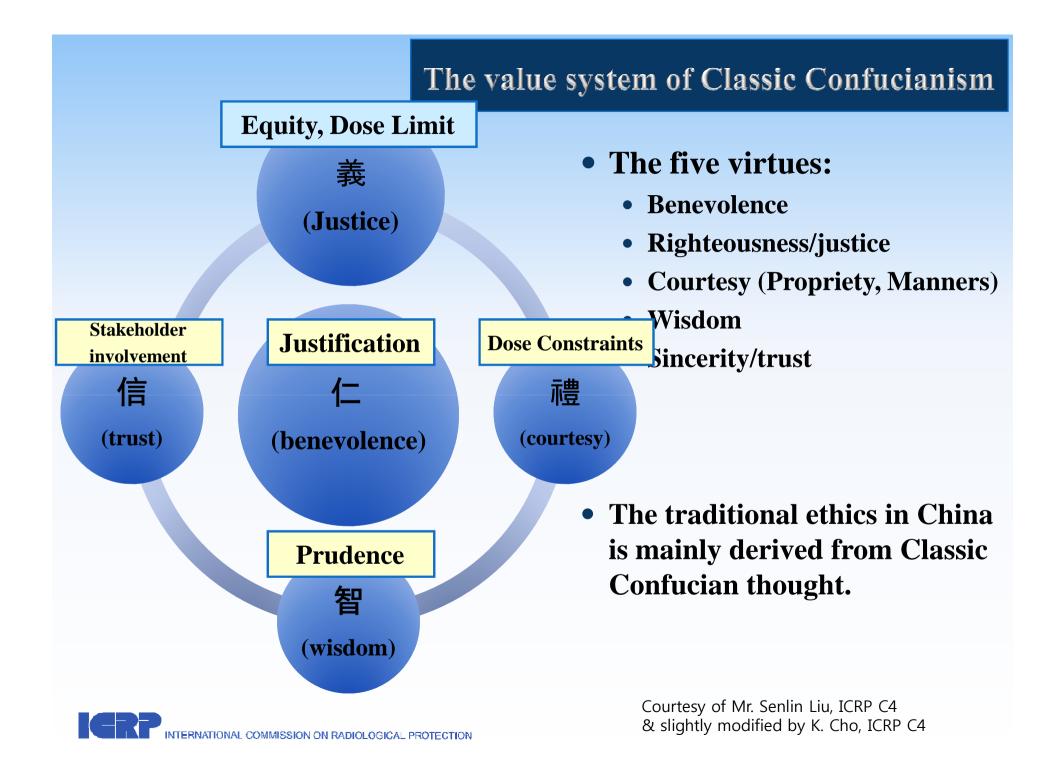


Questions for Working Group Discussion

- 1. What issues of radiation protection refer to ethics?
- 2. What are the ethical values (explicit and implicit) that underlie the system of radiological protection?







Working Group 1 conclusions (1)

- RP system includes judgments that refer to ethical values but that are implicitly and unclearly presented in the ICRP Recommendations.
- 2) **Dialogues** on the foundation, objectives and rationality of the RP system should be encouraged to facilitate the understanding of the system for specialists and interested stakeholders alike.
- 3) **RP culture** and wise behaviours vis-à-vis radiation should be promoted in the society.



Working Group 1 conclusions (2)

- 4) The **respect of individuals** and **principles of justice** in the ICRP Publications should be more explicit.
- 5) **Collaboration** between natural scientists and social scientists needs to be promoted.
- 6) The **dialogue on the ethics of RP** should be open to all interested stakeholders to facilitate mutual understanding of the system.
- 7) Human welfare, human rights and sustainable development should be further considered in the system.
- 8) An ethical reflection on the **role of social media** related to RP is necessary.

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Working Group 2 conclusions

- 1) Needs of ethical considerations in the system of RP was raised due to recent radiological accidents, changes in social values and revolution in communications.
- We need to revisit whether individual rights to happiness or justice has been respected enough, in particular for minorities.
- 3) The term "**members of the public**" should be refined to distinguish informed individuals with certain benefit in return.
- 4) Interactive communication strategies to speak what the public wants to know in a timely manner is important.



Working Group 3 conclusions (1)

- 1) Strong parallels between bioethics and RP ethics
- 2) **Public's lack of trust** not only in government experts but also in many self-appointed experts
- 3) Widespread **misunderstanding** and **misapplication** of the RP system in the wake of Fukushima accidents
- 4) **Simplicity, education and communication efforts** are required to overcome public misunderstanding and to enhance the acceptability of the system.
- 5) The **values of the ethics of RP** could be, and came up with tolerance of people' view, human dignity, justice, respect for persons, beneficence, prudence, understanding/simplicity and wellbeing.



Working Group 3 conclusions (2)

- 6) Question of how radiation can contribute to **people's wellbeing** was raised.
- 7) Issue of individual variability such as smoking and evacuation of elderly people were noted.
- 8) Relationship between radiation safety and nuclear safety is not always clear, and RP specialists may need to go out and reach out to other colleagues in nuclear safety, bioethics and others.





Conclusion

- Communication
- Well-being
- Tolerability of risk
- Acceptability of risk
- Others





Conclusion: Communication

- Current RP system is **too complicated** for the general public to understand.
- Classic risk communication has been top-down and patriarchal rather than dealt with questions that the public want to know.
- Importance of a **quick** communication was emphasized.
- A set of examples of public misunderstandings were mentioned.
- Living in a completely radiation-free world because they do not know the existence of background radiation
- Tendency of the public to equate radiation with atomic bombs

Conclusion: Well-being

- RP system should place more emphasis on well-being of the public.
- The system should care not only about people's health or safety but also about how people feel on the sense of security.
- The meaning of well-being should be extended to also include **spiritual**, **mental and social aspects**.





Conclusion: Tolerability of risk

- RP experts have failed to find a scientific way in regard to discussion of tolerability.
- Excessive emphasis on science is noted as a major cause for the failure on the ground that what tells tolerable is ethics, not science.
- Going to ethical dimension would be a positive direction.





Conclusion: Acceptability of risk

- Question was raised on how acceptable risk should be determined.
 - > under the assumption that dose limit should be continuously based on acceptable risk.
- Focus should be shifted from acceptability of risk to **acceptability of situation** as acceptability changes depending on situation.
- Public should be provided with **information** on various regulations about dose limit to allow them to decide what is acceptable for them.



Conclusion: Others

- **Collaboration** between RP specialists and non-specialists is important.
- **Involvement of other healthcare professionals** in RP was mentioned as a crucial point because the system has been independent and separated from other health promotion systems.





Final Comments on future steps (1)

- Though there are solid ethical thoughts and logical, organic rules in the RP system, weaknesses and problems also exist as Chernobyl and Fukushima accidents indicate.
- Problems in the Fukushima accident were mainly in implementing the system, rather than in weaknesses of the system itself.
- RP experts had not embraced the human dimension of the implementation of the system.
- We should think about what the system should look like in the future.
- If the ethical basis is clarified then it would help clarify what the objectives of the system really are.

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Final Comments on future steps (2)

- Science does not make recommendations, and with the consideration of ethical values.
- Eastern philosophy, despite having no numerical values, may offer solutions to ethical issues in the RP system.
- Concept of **wellbeing and dignity** is worth exploring further and called for interdisciplinary research with bioethics including comparison studies.
- Call for more review on the concept of **wellbeing** as a broader objective of RP than just health



Final Comments on future steps (3)

- ICRP should reach and engage the public more, and the workshop was a part of that effort.
- RP professionals need to seek ways to better explain radiation risks to the public.
- Availability and soundness of the system would be reconsidered in the near future **for the sake of the public**.
- Involving and informing the public to realize and reinforce the ethical values in the RP system is important.



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