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On 21st July 2021, 84 Hiroshima “black rain” survivors got a ground-breaking victory at the Hiroshima High Court. The court ordered the government to designate black rain survivors as official hibakusha and provide state health care like other Hibakusha.

The government ignored their suffering for 76 years and excluded them from its aid regime set up in 1957. The Liaison Council of Black Rain Survivors Groups petitioned local and central governments for more than 30 years and finally appealed to the court in 2015. It took 6 years to win. That is too long for elderly plaintiffs. 19 passed away during the trial. But this victory will save an estimated 13,000 survivors in Hiroshima, other than the plaintiffs. It is certainly great local news but I think its implications are also global.

Here I explain how black rain survivors have been excluded from the state aid regime and how their experiences were denied for half a century. Then, I discuss the meaning of this achievement and its possible global impacts.

The Atomic Bomb Medical Treatment Law was enacted in 1957. That was the first state legislation supporting atomic bomb survivors. Without any state help for more than a decade, many survivors were trapped in the vicious circle of deteriorating health and serious poverty. They also had to live with constant anxiety and the shadow of death.

Knowing this predicament, local doctors started to petition for state support along with the Hiroshima City government. The movement to ban nuclear bombs triggered by the Bikini testing also created a national tide demanding legislation to save survivors. The Medical Law provided state medical services for survivors who had radiation related illnesses. But importantly it also provided free medical checkups to survivors who had not yet developed any radiation-related illness. It aimed for early detection and rapid cure. This expresses the very principle of the law, to “eliminate the fears of the Hibakusha”.

The court decision this year rightly recalled this principle and demanded that the government follow this spirit. The target of the Medical Law was “Hibakusha”, defined and classified into 4 categories. These were carried on into 'the Atomic Bomb Survivors' Support Law, enacted in 1995.

Category one: Direct Hibakusha

Category two: Entering-the-City Hibakusha

Category three: Those exposed to radiation but not in the above two categories.

Category four: Children in the womb

The third category is intentionally ambiguous. Law-makers primarily thought of survivors who took part in rescue activities or disposed of the dead. However, they also assumed other possible



cases which they had not even thought about, with very limited scientific knowledge about scientific knowledge about radiation. The court this year judged that the black rain survivors should be in this third category. Then why did the government forget about the spirit of the law and wrongly under-utilize the third category for such a long time? Despite its good principles, the Medical Law disappointed many in the beginning, because of its very limited services for a small number of beneficiaries. Local governments and doctors strongly petitioned. Their efforts resulted in a new law in 1968, and revising of the Medical Law 6 times until 1976. The state expanded the “designated areas” and increased expenditure for the aid regime about 250 times in twenty years. This attitude, however, dramatically changed in the late 1970s.

In 1980, the government declared that it would never expand the “designated area” without “scientific and rational evidence”. The Liaison Council petitioned, but all were rejected as “unscientific”. Then what is the government “science” to reject the survivors’ realities?

The government “science” officially recognized two sources of radiation which caused tangible health damage to Hibakusha. The main one is the initial radiation emitted in the air within a minute of the explosion. The other is induced radiation, in which neutron rays interacted with such elements as the nuclei of soil. In both sources, the “science” only considers “external exposure” and hence the amount of radiation is the key to defining its health effect. On the other hand, the government has consistently denied the health effects of the fallout, so-called “ashes of death.” US army officer Thomas Farrell said in 1945, “The Hiroshima atomic bomb was blast so high up in the air that no radiation exists in Hiroshima”. Surprisingly the government “experts” in this black rain trial argued the same until today and rejected any possible health effects of the fallout, because its very low dose could have done no harm through external exposure. The plaintiffs argued totally the opposite. They testified that the fallout poured down on a very wide area, reaching about 30km from the hypocenter, and that most plaintiffs had developed radiation related illnesses including even acute symptoms. Lawyers and scientists supported them by explaining the mechanism of spreading black rain areas and argued health effects of “internal exposure” by air, water and food even with a tiny dose. The court accepted the plaintiffs’ claim and rejected the government's so-called “science”.

The Japanese government accepted the court judgment on 29 July, but the next day, the Prime minister issued a strange comment against the judgment.

Quote: “The government cannot admit health effects of internal exposure regardless of the scientific dose estimation, because this is contradictory to the philosophy of the Hibakusha aid regime”.

This could not disturb the court decision but showed the government’s predicament. The “internal exposure” and low-dose effects not only contradicted its aid regime but was also quite inconvenient for the whole national nuclear policy, including energy and deterrence. Both are also pillars of the NPT regime, which the Japanese government ratified in 1976 and to which it has since been deeply committed. Moreover, recognition of low dose effects from “internal exposure” logically discredited Japan’s authoritative Hibakusha data, namely the Life Span Study. This is more than 60 years of epidemiological study targeting 120,000 subjects including 94,000 Hibakusha. This data has been utilized for setting radiation protection standards around the world. However, its research design itself ignored low dose radiation and internal exposure, underestimating those risks. This court case made clear that this data cannot protect people from the risks of low dose radiation. The global impact of this judgment could be huge.



Now the Japanese government has two choices: abandoning the precious Hibakusha data, or reorganizing it into a more reasonable one. Of course, I hope for the latter. We need a more scientific and rational radiation protection regime to ensure the rights and dignity of nuclear survivors and also prevent more nuclear victims around the world.

Thanks for listening.

Disclaimer

This transcript is at the responsibility of Peace Boat and may not be completely the same as the original testimony. The original testimony was presented online at the World Nuclear Survivors Forum 2021 on December 2-3, where over 30 nuclear survivors from five continents around the world shared their voices with more than 1000 people. The Forum was hosted by Peace Boat in partnership with the International Campaign to Abolish Nuclear Weapons (ICAN). The stories and panel discussions are all available for viewing on demand via Youtube or on our website here: <https://nuclearsurvivors.org>