

GOVERNMENT OF INDIA
DEPARTMENT OF ATOMIC ENERGY
LOK SABHA
UNSTARRED QUESTION NO.935
TO BE ANSWERED ON 16.07.2014

RADIATION LEAK AT NUCLEAR SITE

935. SHRI SUNIL KUMAR SINGH:
SHRI CHHOTE LAL:

Will the PRIME MINISTER be pleased to state:

- (a) whether any incident of radiation leak or other leakage has taken place in any nuclear plant in the country;
- (b) if so, the details thereof during the last three years and the current year; and
- (c) the details of the action plan evolved to address such contingencies in terms of building sufficient roads for emergency exits, super speciality hospital for treatment, insurance cover to workers and local people, etc.?

ANSWER

THE MINISTER OF STATE FOR PERSONNEL, PUBLIC GRIEVANCES & PENSIONS AND PRIME MINISTER'S OFFICE (DR. JITENDRA SINGH):

- (a)&(b) There have been no incidents of radioactive leakage to the environment beyond the authorised limits prescribed by Atomic Energy Regulatory Board (AERB) from any nuclear power plant in the country in last three years.
- (c) All nuclear power plants have an Off-site Emergency Preparedness Plan duly reviewed by AERB and approved by District Collector. In this emergency preparedness plan, roles and responsibilities of various plant authorities and state agencies involved in handling emergency are identified. Depending on the spread of contamination, the required actions need to be taken in affected area, which may include sheltering, distribution of iodine tablets, control of food stuff or evacuation of the area. The plan also identifies the routes for evacuation. Emergency exercises are also held at regular intervals to validate the plans and make improvements if any. All administrative and logistic arrangements are arranged/supervised by State Government authorities. NPCIL sites have hospitals equipped to handle radiation exposure cases.

The compensation in the event of a nuclear accident would be guided by the provisions of the Civil Liability for Nuclear Damage Act, 2010 and Rules framed under the Act. Extremely robust safety systems and practices are in place in all Indian nuclear reactor sites. Any acute exposure of radiation to members of the general public, requiring prompt medical intervention even in case of an extremely unlikely event of any accident in our Nuclear Power Plants (NPPs) is not expected.

Even in the case of the Fukushima-Daiichi accident, the World Health Organisation Report released in February 2013 on the health risk assessment (adopting a highly conservative approach) shows that, “Fukushima-Daiichi accident has not resulted in acute radiation effects among workers. None of the seven reported deaths among workers is attributable to radiation exposure”; and that the possible impact on the population affected is practically insignificant. Similarly, the Press Release following the 60th Session of the United Nations Scientific Committee on the Effect of Atomic Radiation (UNSCEAR) held in May 2013 reports the conclusion of the Session:

‘Radiation exposure following the nuclear accident at Fukushima-Daiichi did not cause any immediate health effects. It is unlikely to be able to attribute any health effects in the future among the general public and the vast majority of workers’. It further reports, that, ‘On the whole, the exposure of the Japanese population was low, or very low, leading to correspondingly low risks of health effects in later life’. These two important reports should help reiterate the fact that there is little scope for members of public to encounter acute radiation effects due to NPPs.
