

Risk Communication – A Case Study: Accidental Exposure of Nursery School Children

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Abstract

Although the use of sprayed asbestos is already forbidden in Japan, it is a worry that on the repair of an existing building or rebuilding, the asbestos currently used may disperse in the environment. A guideline for preventing the scattering of asbestos was released, but there have been some examples, when the guideline was not observed.

Due to lack of effective control measures when extended re-construction of public "S nursery school" in Tokyo was performed in July, 1999, infants and children were exposed to asbestos. At the beginning, since information about the health effects of asbestos exposure was insufficient, their guardians got confused and angry. About 40 days after the occurrence of the incident, communication among guardians, the administration, and two specialists – authorities on health risk assessment and construction health – began. A committee was formed to oversee work to assess health effects, etc. Another specialist and a NPO representative recommended by the guardians also participated in the committee. The health risk of exposure to asbestos was estimated according to a simulated exposure assessment for the case of repair work. The assessment indicated that, as a result of asbestos exposure, most babies and children in the nursery school had incurred an increased lifetime cancer risk exceeding the prescribed threshold of 1:100,000. Therefore, it was decided that a committee should follow up all the exposed children over their entire lifetimes. For this purpose the committee was expanded by the addition of two more guardians.

Dealing with the aftermath of this incident was a new experience for local government. All meetings of the committee were open to the public. Also, there were a number of public hearings and consultations to finalize its report. These procedures were new departures in Japan. However, much time was expended on points of order and producing reports, etc., and not enough attention paid to obtaining counselling for the traumatised guardians. How are they going to explain to their children, when they are older, why they need to be monitored and what risks they face?