

NUCLEAR MEDICINE AND RADIOACTIVE WASTE
Public Health Association of Australia NT Branch submission to
Senate Inquiry into Commonwealth Radioactive Waste Management Bill
2005

The PHAA is opposed to the siting of a nuclear waste storage facility in the Northern Territory for the following reasons.

1. The proposal does not accord with international best practice in management of nuclear waste.

Best practice for Australia includes:

Minimisation of waste by:

- Not producing unnecessary waste which in the Australian context is to not operate the new reactor and to close down the existing reactor at Lucas Heights
- Importation of Australia's nuclear medicine requirements until domestic non-reactor based methods come on line
- Increased research into non-reactor technologies for production of medical and industrial isotopes
- Promotion of other imaging technologies such as ultrasound, magnetic resonance imaging (MRI), computerized tomography (CT) and positron emission tomography (PET) scanning
- minimisation of transport by waste management preferably done on-site, in a retrievable and secure fashion
- secure, monitored, above ground storage which responsibly addresses the need to ensure long-term safety and does not preclude any improved storage options which become available in the future
- community acceptance of the management system (according to the principles promoted by the International Atomic Energy Agency - IAEA). This does not simply mean "consultation": the community must give informed consent to the facility.

2. The Northern Territory community has not given informed consent

It is clear from activity by the Northern Territory government and many community groups in the NT that the current waste management proposal of the Australian government does not have a community that considers it has given informed consent.

In particular the PHAA (NT) notes the strong opposition of central Australian Aboriginal communities to such a facility and whilst endorsing their concerns are in turn concerned about the implications for local communities if their legitimate rights to oppose such decisions are not respected. Health research regarding the social determinants of population health recognizes the severely detrimental impacts of social disempowerment. In this case where communities have only recently been able to exercise their rights regarding their ancestral lands and community and cultural values to that land under non-Aboriginal legal regimes, to have decisions imposed without

consent may have a contributing detrimental health impact upon communities that are variously socially marginalized and suffering disproportionately poorer health status.

In fact the approach of the Australian government and its NT representatives has been characterized by deception and authoritarianism. The proposal for the facility is going ahead in the NT despite public commitments made by the Prime Minister, Environment Minister and both NT federal coalition politicians before the last election.

The arguments used to try to persuade Northern Territorians to accept this facility have been misleading and disingenuous. For instance the claims about nuclear medicine are not true (see below) and 'bargains' offered about an oncology unit seem underhand. Centralised remote geological disposal is a political expedient, not a health or scientific imperative.

3. There is no medical need for a reactor

Australia does not need a reactor to supply radio-isotopes because:

1. some isotopes most commonly used are produced in cyclotrons e.g. gallium used in cardiac diagnosis;
2. other isotopes needed can be imported. Technecium-99 is the most used diagnostic isotope and it can be readily imported. Iodine 131 can also be imported.

Despite claims of problems with importation that occur when the existing HIFAR reactor is down for routine maintenance, inquiry through the medical community has not produced clear examples of this happening.

Thus claims by politicians that the reactor is necessary for ongoing practice of nuclear medicine are not true and misleading.

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