

memorandum

DATE:

REPLY TO
ATTN OF: DP-224.2

SUBJECT: Policy Decision on Marshall Islands Health Care and Environmental Radiological Surveillance Programs

TO: The Secretary
Special Assistant to the Secretary for Policy and ProgramsIssue

Whether or not the Department of Energy should continue to support its own Marshall Islands health care and environmental radiological surveillance programs or seek funding for a program yet to be developed by the Department of the Interior.

Urgency

In an October 4, 1983, letter to Secretary Hodel, the Department of Energy (DOE) has been requested to provide a witness at the October 25, 1983, hearings before the House Committee on Interior and Insular Affairs by John F. Sieberling, Chairman, Subcommittee on Public Lands and National Parks. The purpose of the hearing is to discuss DOE's support of programs at Enewetak atoll and to provide a status report on the implementation of Public Law 96-205.

Background

In the Marshall Islands all of the DOE programs are a legacy of the atmospheric nuclear testing conducted from 1946 to 1958. The Department's responsibility described in Public Law 95-134 is threefold: (a) to determine and evaluate radiological conditions at the atolls of Enewetak and Bikini that were affected by testing; (b) to provide technical advice and assistance to government agencies, notably the Department of the Interior (DOI) and the Department of Defense (DOD), for the resettlement of those atolls; and (c) to maintain a medical program for the populations of Rongelap and Utirik who received acute exposures from radioactive fallout in 1954. The accidental exposures occurred when the Bravo test exceeded the yield projections and encountered unpredicted winds at high altitudes that pushed the fallout cloud over the populated atolls.

Discussion

Congress enacted Public Law 96-205 in 1980 to provide the Marshall Islands population (a) health surveillance and supporting studies, (b) health care of exposed populations, (c) environmental surveillance and dose assessment, and (d) educational programs. Further, the law directs the Secretary of Interior to implement these programs in consultation with the Departments of Defense, Energy, Health and Human Services, and the government of the Marshall Islands. All costs associated with the development and implementation of the health care plan and resulting program are to be assumed by the DOE.

DOE
John Rudolph's files - box
Marshall Islands

Although Public Law 96-205 was enacted nearly 3 years ago, Interior has never provided the DOE with a developed plan for a health care and environmental research program. We transferred funds for a health care survey to DOI in 1980 as directed by the legislation. The survey was conducted by the Loma Linda School of Health and a report submitted to DOI in 1981. Further, DOE has provided educational programs to the Marshallese people through bi-lingual booklets and audio-visual presentations on the radiological conditions and lifestyle options at Enewetak, Bikini, and the Northern Marshalls, including Rongelap and Utirik.

For nearly 13 years, negotiations have been conducted between the U.S. and the Marshalls in order to dissolve the trusteeship arrangement in effect since the end of W.W. II. A Compact of Free Association containing a separate agreement, Sec. 177, establishes a self-governing Republic of the Marshall Islands and addresses the nuclear claims in the Marshalls. Of special interest to DOE is the establishment of a trust fund of \$150 million to be invested to generate \$18 million annually of which \$2 million is to be used expressly to provide health care for Rongelap, Utirik, Bikini, and Enewetak. The balance of \$16 million will be distributed by a tribunal to individuals who file "nuclear" claims for property loss, personal injury, etc.

Another issue regarding this program was the internal Department decision to change the management from Environmental Protection to Defense Programs 2 years ago. At the staff level, the Armed Services Committees of the House and Senate, and the nuclear weapons appropriations committee, Energy and Water, have raised questions on the FY 1985 funding request of \$6 million for this program. We anticipate many questions regarding the rationale of not only this internal Departmental decision, but why the nuclear weapons program should fund the Marshall Islands Program.

Defense Programs has tasked the Nevada Operations Office to develop and submit a draft transition plan for the Marshall Island Programs in early December. This plan is based on the assumption that it will take at least 5 years for the Compact to pass Congress and be reviewed by the United Nations, establish the trust funds planned in the Compact and actually achieve a government-to-government program exchange.

Politically, it has been stressed to Defense Program representatives that the current status quo of the DOE programs must be maintained until the Compact has been successfully approved by Congress. This advice originated with the Office of Micronesian status negotiations which is headed by the President's Personal Representative, Ambassador Fred M. Zeder. The Office of Management and Budget has also endorsed and supported this advice.

Options

A. Terminate the Marshall Islands Program at the end of FY 1984.

Pro

1. Defense Programs would not have to justify funding the management of a non-weapons program as part of the nuclear weapons activities in FY 1985.
2. No further resources and manpower would be directed to manage the programs.

Con

1. One year is an insufficient amount of time to closeout or redirect the dedicated program resources at Brookhaven National Laboratory or Lawrence Livermore National Laboratory.
2. Termination could jeopardize the Compact of Free Association approval process through Congress and the United Nations, thereby, subjecting the DOE to White House and international criticism.
3. Termination would not demonstrate the U.S. policy and moral obligation to provide health care to the population of Rongelap and Utirik injured by fallout from the 1954 nuclear test.

B. Develop a 5-year transition plan to accommodate the provisions of Sec. 177.

Pro

1. The transition plan would reduce the level of funding from a FY 1985 requested level of \$6 million to a \$2 million program over 5 years that will allow the Republic of the Marshall Islands government to "buyback" the essential technical assistance they require as described in Sec. 177 of the Compact.
2. A 5-year transition plan will enable Defense Programs to present a rational, structured phasedown plan to our authorization/appropriation committees.
3. A 5-year transition plan will help ensure that the Compact of Free Association will not be jeopardized by changing the level of effort in the health care programs in the Marshalls.
4. A transition plan would involve other cabinet level agencies, such as Interior and Health and Human Services, to implement the Administration's support of Sec. 177.

Con

1. Defense Programs may face opposition and criticism by the congressional authorization/appropriation committees.
2. Resources and staff will continue to be dedicated to the management of a non-weapon program.

C. Transfer programs to another agency.

Pro

- 1. Defense Programs has been criticized by other DOE elements as not having the appropriate staff expertise to manage a health care and environmental surveillance program.
- 2. A transfer could partially implement P.L. 96-205 by placing program direction with a more appropriate agency, however, DOE would continue to be responsible for funding.

Con

- 1. It has been efficient and economical for the Government to use existing DOE logistic resources in the Pacific to support the Marshalls Program. These resources may not be available to other agencies for the same costs.
- 2. The transfer from one agency to another could involve a great deal of time which would not be beneficial to those people who rely on DOE for health care and remedial medications (i.e.: DOE provides "synthroid" medicine which is a substitute thyroid hormone required for life after a thyroidectomy).

D. Continue to maintain the Marshall Islands program management and funding in the weapons program activities.

Pro

- 1. Many Federal and contractor personnel were involved in the early atmospheric testing days and are personally committed to support the health care program.
- 2. Defense Programs has the field resources and unparalleled expertise available in its national laboratories to provide environmental monitoring and health care.
- 3. To assume the programs from EP 2 years ago, did not cause an increase in FTE levels in the field although the Headquarters staff has had to assume some additional duties.

Con

- 1. Maintenance of the current program does not pressure the management to incorporate the concepts described by Congress in Public Law 96-205 or by the Administration in the negotiated Compact since it is another agency's responsibility to initiate those changes.

Recommendation

That the Secretary support the Defense Programs effort to establish a 5-year plan to encompass the transition phase of the Compact as described in Option B above.

Herman E. Koser
Assistant Secretary
for Defense Programs

Approved: _____

Disapproved: _____

Date: _____

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