

AGRICULTURAL RESOURCES

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W. #37

Gary Knight  
G57

May 1, 1990

Joseph C. Karpinski  
Principal Deputy Assistant Secretary For  
Congressional and Intergovernmental Affairs  
U.S. Department of Energy  
1000 Independence Avenue, S.W.  
Washington, D.C. 20585

Dear Mr. Karpinski:

On behalf of Rongelap and Cooper Brown, I want to thank you, Gary Knight and Gary Palmer for the meeting this afternoon. It was unfortunate that the meeting was so brief, but I was glad you were able to join us. It was important that Secretary Watkins' office be provided with Assistant Secretary (DP) Roser's March 23, 1982 memorandum.

The seriousness of this matter cannot be understated.

In addition to the extensive history and long list of already prominent issues, three new matters have emerged in recent months. Each is highly sensitive. They are:

- (1) *The DOE Radiation Double Standard at Rongelap.*
- (2) *Questionable Applicability of Traditional DOE Dose Standards to a Acutely/Chronically Exposed Community (Rongelap).*
- (3) *Safeguard C and the Subordination of DOE's Health and Safety Programs to the Possible Resumption of Atmospheric Weapons Testing.*

Let me briefly expand upon each of these three issues.

*DOE Imposes a Double Standard for Rongelap -- Rongelap Cleanup Denied.* In the mid-1970s, the AEC and ERDA adopted a radiation clean-up guide significantly

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more stringent than the 1960 Radiation Guideline. Yet, seven years later, DOE and subsequently Dr. Kohn, without explanation, use the older, out-of-date 1960 guideline (selectively) as the basis for radiological determinations of habitability at Rongelap. DOE lacked confidence in its dose estimates which warranted the conservative approach. The 1974-75 AEC cleanup guides were not applied to Rongelap, either at the time of the 1978 survey or in 1982, when the DOE Bilingual Report was published. Radiological cleanup would have been required at Rongelap Island and throughout Rongelap Atoll if the AEC guide were applied.

*DOE Dose Standards – Questionable Application To Rongelap.* The Rongelap community received an acute, near-lethal radiation dose [190 R] at the time of Bravo in 1954. From 1957 until 1985, the community received a compounding chronic dose of almost 4 Rems. If Rongelap were to be resettled, the community would receive a second compounding chronic dose into the future of at least 2.5 Rems, exclusive of plutonium and other transuranics. Today, Rongelap wants to know if Rongelap is safe and if it is habitable. DOE ignores past exposure when making such determinations. Rongelap is of the opinion that the type of exposure makes this community unique in radiation history. Traditional DOE dose estimates are, Rongelap believes, insufficient for making such valid or responsible determinations of habitability today.

*Safeguard C and Rongelap.* Rongelap does not pretend to understand all the ramifications of the March 23, 1982 memorandum. The Marshall Islands medical and environmental programs were, plainly, subordinated to DOE's operational obligations pursuant to Safeguard C. One of two (and perhaps both) explanations appears plausible. Either DOE considered resumption of atmospheric weapons tests plausible and feasible at the Marshalls, notwithstanding the Compact's limitations or, DOE needed to conduct long-term studies of contaminated communities living in a contaminated environment. Stated more directly, DOE undertook human testing.

Regardless of motivation of the medical and environmental program transfer, the effect on the health and safety of the Rongelap people is very disturbing. Shortly after DP assumed this responsibility, radiation dose standards were increased from 250 millirem to 500 millirem. Even more disturbing was the previous restrictions on consumption of contaminated foods were relaxed. This resulted in increase doses to the Rongelap people. None of this information was disclosed.

Your attention is also directed to the other Safeguards enumerated at the time of the Treaty deliberations and approval. Safeguard C should possibly be considered in the present situation along with and perhaps linked to the Safeguard which required the DOE labs to be upgraded and modernized.

Enclosed is an additional document. On April 14, 1982 J.W. Thiessen, M.D., the Acting Deputy Associate Director of the Office of Health and Environmental Research to A.W. Trivelpiece, Director of the Office of Energy Research.

It is clear that the proposed transfer was contested and considered controversial within the Department.

In the two years I have been associated with Rongelap a considerable effort has been made to "tone down the rhetoric" that tends to surround these type of issues, valid or not. Rongelap's claims and concerns have been presented based exclusively on the substance of the issues and the merits of each. While easy and typical for this type of issue, the words, "guinea pigs" have NOT been standard fare. To present them in your office was the exception. However, they are invoked based upon a DOE record which is only now coming into the light of day.

These words are not stated or invoked lightly.

Senator Anjain and Rongelap believe there is a reasonable and easily attained solution to the overall matter. Rongelap is, of course, willing to work with the Secretary to resolve it. Before presenting this material in testimony, the Senator insisted that it be discussed with the Secretary.

Cordially,

David M. Weiman

cc: Gary Knight, with attachments  
Gary Palmer, Office of the Under Secretary, with attachments  
E. Cooper Brown  
Senator Jeton Anjain  
Rongelap Council

U.S. DEPARTMENT OF ENERGY  
**memorandum**

(17-78)

DATE: APR 14, 1982

REPLY TO  
ATTN OF: ER-71

SUBJECT: Proposed Transfer of Marshall Islands Program to Office, Defense Programs

TO: A. W. Trivelpiece  
Director  
Office of Energy Research

As a follow-up to our previous discussion on this subject, I will summarize the involvement of DOE and its predecessor agencies in the Marshall Islands (MI) and present the reasons why, in my opinion, ER should oppose the proposed transfer of these programs. This issue arose when we were confronted with a decision memorandum from Assistant Secretary for Defense Programs to the Secretary, which memorandum appears to be held up on the desk of the Assistant Secretary for Environmental Protection, Safety and Emergency Preparedness. I attach a copy of this memorandum, as I will refer to it later (Attachment 1).

The MI program started immediately upon the wide-spread fallout contamination following the BRAVO event at Bikini on March 1, 1954. The extent of this contamination is depicted in the diagram on the next page of this memorandum. On the atolls of Rongelap, Ailingnae, Rongerik and Utirik, 267 people were affected by the fallout (28 of these 267 were U. S. servicemen), and evacuated to Kwajalein. They were all extensively examined, photographed, and monitored for internal and external contamination. After a short period, the Utirik people were returned to their island, which was only slightly contaminated. The Rongelap people returned to their atoll three years later, together with the 18 people from Ailingnae (the servicemen were located at Rongerik and, of course, never returned there).

Since the March 1954 event the exposed Marshallese and a control group of unexposed Rongelap and Majuro people have been examined regularly by a team provided by BNL. In the course of the years, thyroid abnormalities developed in several of the exposed Rongelap and Utirik people, and one Rongelap male died of leukemia in 1972. The program was eventually expanded to include all unexposed people on Rongelap and Utirik, and those returned to Bikini, and the scope of the examinations was broadened considerably to include actual medical treatment wherever necessary. Looking back, it is very clear that the actions by the U. S. Government with respect to the medical program were motivated by the acceptance of certain responsibilities toward the Marshallese affected by U. S. nuclear tests that exceeded a simple legal responsibility. For example, the inclusion of other non-exposed people, living together with those that had been examined regularly from the start of the program, was done for medical-ethical and humanitarian reasons, and not because these people were perceived as having a right to these examinations. As you know, the "Burton Bill" (enacted as PL 96-205) now intends for the U. S. Government to provide "a program of medical care and treatment and environmental research and monitoring for any injury, illness, or condition which may be the result directly or indirectly of ... nuclear weapons testing program." This medical



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and environmental program is to be carried out on the northern atolls of the MI (Bikini, Eniwetok, Rongelap, Utirik), "and for the people of such other atolls as may be found to be or to have been exposed to radiation from the nuclear weapons testing program." From the way these rights have been worded, it is clear that DOE will remain heavily involved in a number of medical and scientific issues with respect to "radiation-relatedness" of certain disease or environmental factors. Also, at this stage, very sensitive negotiations are in progress (and lawsuits pending) to define the roles of DOE, DOD, and HHS, as to who will be responsible to do what, when and to whom. I attach a copy of the Act for your information (Attachment 2). The important point in the framework of this discussion is the involvement, now and for the foreseeable future, of "non-DP" staff that, in my view cannot be replaced by DP.

The second part of the MI program that is of interest is the environmental survey activity on a number of atolls. As I indicated, the "Burton Bill" requires ongoing activities in this area. Because of that requirement, DOE will remain involved for some considerable time, at a level of support exceeding \$1M per year. Compared to that number, however, the medical program will be considerably larger, up to several million dollars per year. I stress that there is no strict separation between the objectives of the medical and environmental programs: both aim at the protection and care of the Marshallese, and both are based on humanitarian considerations, albeit that the Burton Bill now intends to provide a legal basis for the program.

For some years, DOE operated the Mid-Pacific Marine Laboratory (now called the Mid-Pacific Research Laboratory, MPRL) on the island of Enjebi, near Eniwetok. The last few years, however, the laboratory has been inactive, and the funds expended for that laboratory were, essentially, used for maintenance and repairs of damage caused by acts of vandalism and theft. It has become clear that DOE does not need this laboratory, and the FY 1983 budget does not contain any funds under this item. Any laboratory support necessary for radioecologic purposes will now be provided, according to our contractor (LLL), by the Liktanur, the research vessel that has been operated for DOE by Holmes and Narver for a cost now approaching \$1M per year. Consequently, it appears to me that cost-effectiveness indicated the closing of the MPRL. I attach a summary table of all the components of the MI program with the funding levels for FY 81, 82 and 83 (Attachment 3).

Assistant Secretary for Defense Programs' action memorandum (Attachment 1), based on the alleged urgency of uninterrupted program execution (comment: there is no interruption), refers to the "requirement" that the U.S. maintain the capability to resume atmospheric testing, and states that, in fact, "much of the field effort in the Marshall Islands is an exercise of the expeditionary capability" of DOE's readiness program. There is no direct reasoning to indicate why DP should assume policy direction and control, but there are some indications derived from discussions with individuals involved that DP is unhappy that the Mid-Pacific Research Laboratory is closed down. In my

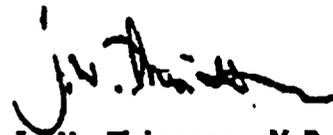
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view, the issue is much larger than the closing of the MPRL, and is created by pressures from NV (especially Roger Ray) to take over the policy direction of a program for which it now only has logistic support responsibility. In a memorandum from Dr. Liverman, then Acting Deputy Assistant Administrator for Environment and Safety, ERDA, to Mr. Gates, Manager, NV, dated March 12, 1975, it was made clear that "final policy decisions will be made at Headquarters," and that "final program decisions and commitment of program funds will be made at Headquarters," both upon recommendations of NV.

In short, we are now faced with a situation over which DP claims authority. Whether or not that is true (and I believe it not to be true), the consequences of a transfer of the program from EP (which became the manager upon transfer from OHER shortly after our incorporation into ER) to DP are, or at least: risk to be, serious. It is a foregone conclusion that DP's management role, to the maximum degree possible will be transferred to NV and concentrated in one person who, in the past, has demonstrated less than expected inclination to consult with Headquarters for policy guidance. But even if he would change this attitude, it is clear that DP will not be able to provide the necessary guidance without consultation with EP and ER/OHER, again an assumption that is overly optimistic.

I would suggest to you that ER declares itself against the proposed transfer because of the critical importance that DOE policies are arrived at in consultation with different Headquarters' elements, a condition that argues against transfer out of EP. If EP, for whatever reason, wants to "dispose of" the program, I would suggest that you exert strong pressure to have it transferred back to OHER, with the staff now in charge of the program management in EP.



J. W. Thiessen, M.D.  
Acting Deputy Associate Director  
Office of Health and Environmental  
Research, Office of Energy Research

cc: ER-70