Gender, age, and non-discrimination in nuclear 'victim assistance': A baseline for TPNW implementation

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DISCUSSION PAPER

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Key messages:

- Victim assistance programmes and measures must be comprehensive, inclusive, and responsive to the diverse and long-lasting impacts of nuclear weapons use and testing. They must ultimately promote greater justice, support, and healing for affected individuals and communities.
- When it comes to applying age- and gender-sensitivity and non-discrimination, current national programmes vary significantly across countries, with some more progressive approaches existing alongside inconsistent application of these principles, creating gaps for many affected populations.
- The Treaty on the Prohibition of Nuclear Weapons (TPNW) offers a framework for establishing universal standards that can help strengthen national programmes and reduce disparities between them. International cooperation and knowledge -sharing can promote good practices and help develop such standards, towards ensuring no community is left behind in pursuing justice and support.

Key recommendations:

- States parties to the TPNW should build upon practices in existing national programmes that address nuclear harm, while developing more comprehensive frameworks and approaches that centre affected communities in policy development and implementation. This should include providing resourcing for affected community groups and representatives to carry out their work according to their priorities and participate in national and international policymaking and implementation.

- Guidelines for TPNW victim assistance implementation should: uphold the principle of non-discrimination; recognise gendered impacts, needs and perspectives; and implement age-tailored approaches that acknowledge intergenerational consequences. Particular attention should be given to addressing the disproportionate impacts on Indigenous Peoples, women, persons with disabilities, older generations, and children. The meaningful inclusion of people of all genders in policy development and decision-making is also critical to developing gender-sensitive approaches.

- States parties should adopt a nuanced, comprehensive approach, recognising there is no one-size-fits-all solution and that assistance programmes must be adapted to specific cultural, social, economic, and environmental contexts, while maintaining core principles of inclusivity, accessibility, non-discrimination and transparency.

Introduction

In Articles 6 and 7, the Treaty on the Prohibition of Nuclear Weapons (TPNW) establishes positive obligations on state parties to provide "victim assistance" to individuals affected by the use or testing of nuclear weapons. Motivated by the humanitarian goals of the treaty, and the rights-based framing of its response to nuclear legacies, Article 6 requires states parties to provide adequate "age- and gender-sensitive assistance, without discrimination."[1]

This emphasis on age, gender, and non-discrimination recognises that affected individuals have diverse and distinct experiences. The treaty's preamble itself highlights the disproportionate impacts on women, girls, and Indigenous Peoples. Impacts on people span physical, societal, economic, and cultural aspects. This is acknowledged under Article 6, which mandates a broad range of assistance including medical care for harms caused by nuclear detonations; psychological and psychosocial support; and measures to facilitate social and economic inclusion. The assistance required by the TPNW is holistic and inclusive.

Employing a uniform strategy clearly will not prove successful in the context of nuclear weapons and it is imperative to recognise the disparities among different groups when providing assistance under the Treaty.[2]

The first Meeting of States Parties (MSP), held in 2022 in Vienna, delved further into these issues and took steps to build out the framework for implementing victim assistance under the TPNW in this regard. States parties committed through the Vienna Action Plan to be guided in their implementation of Articles 6 and 7 by principles of inclusivity, accessibility, non-discrimination and transparency.

In Actions 49 and 50 of the Action Plan, states parties also committed to developing guidelines for ensuring age- and gender-sensitive victim assistance, and to

1 Treaty on the Prohibition of Nuclear Weapons, (adopted 7 July 2017, entered into force 22 January 2021) available at: https://treaties.unoda.org/t/tpnw

2 International Campaign to Abolish Nuclear Weapons (ICAN), (2017) 'Victim Rights and Victim Assistance in a Treaty Prohibiting Nuclear Weapons: A Humanitarian Imperative,' UN document A/CONF.229/2017/NGO/WP.14.

developing guidelines for the integration of gender perspectives in international cooperation and assistance.[3]

During the intersessional period between up to the second TPNW MSP in 2023, Chile, as the Gender Focal Point, began examining this task. It convened three informal meetings[4] with presentations from experts that explored the gendered impacts of nuclear weapons[5] and looked at the development of guidelines for age- and gender-sensitive victim assistance. This included examining how other disarmament treaties like the Anti-Personnel Mine Ban Convention and Convention on Cluster Munitions[6] have integrated gender sensitivity and perspectives in providing assistance, as well as recommendations that could be taken from other treaties such as the Convention on the Rights of Persons with Disabilities.[7] The good practice of collaboration among states parties in developing and sharing national action plans, along with disaggregated and evidence-based statistics, was also emphasised in these discussions.

In the runup to the third MSP in 2025, Kazakhstan and Kiribati, as chairs of the informal intersessional working group on Articles 6 and 7, developed a set of "Guiding principles of a possible international trust fund for victim assistance and environmental remediation from the consequences of the use or testing of nuclear weapons." These principles aim to inform states' further discussions on establishing such a fund, and include ensuring "gender balance" in the governance and operation of a trust fund.[8] The Gender Focal Point for the intersessional period, Mexico, also held two informal meetings at which the gendered impacts of nuclear weapons were discussed. The Gender Focal Point's report to the 3MSP noted the need for: gender-disaggregated data; resourcing for studies on gendered impacts that could be integrated into victim assistance efforts; and gender-specific assistance as well as training on gendered impacts. It recommended close cooperation with the TPNW's Scientific Advisory Group on developing knowledge on gendered harms and risks.[9]

This discussion paper reviews how age- and gender-sensitivity and non-discrimination feature in current national responses to the impacts of nuclear weapons use and

3 Vienna Action Plan, (2022) First Meeting of States Parties to the Treaty on the Prohibition of Nuclear Weapons, UN document TPNW/MSP/2022/CRP.7.

4 Report of the gender focal point (Chile), (2023) Second Meeting of States Parties to the Treaty on the Prohibition of Nuclear Weapons, UN document TPNW/MSP/2023/4.

5 Mary Olson, (2023) 'TPNW Briefing on Gendered aspects of the Treaty,' Gender + Radiation Impact Project, available at: https://assets.nationbuilder.com/ican/pages/3196/attachments/original/1681735784/Mary_Olson_Hand-Out_on_Radiological_aspects_TPNW_and_Gender.pdf?1681735784. See also, ICAN, (21 March 2023 and 14 July 2023) 'Gender and Nuclear Weapons Meetings,' available at: https://www.icanw.org/tpnw_gender_nuclear_weapons_meetings

6 Erin Hunt, (2023) 'Gender and Victim Assistance in the Treaty on the Prohibition of Nuclear Weapons,' Mines Action Canada, available at: https://assets.nationbuilder.com/ican/pages/3196/attachments/original/1681735784/Hunt_Speaking_Notes_Gender_and_VA_in_TPNW.pdf?1681735784

7 Wanda Muñoz, 'A gender perspective to victim assistance implementation in the TPNW,' available at: https://assets.nationbuilder.com/ican/pages/3196/attachments/original/1681735785/Wanda_Muñoz_VA_gender_TPNW.pdf?1681735785

8 Report of the Co-Chairs of the informal working group on victim assistance, environmental remediation and international cooperation and assistance (Kazakhstan and Kiribati) (2025) Third Meeting of States Parties to the Treaty on the Prohibition of Nuclear Weapons, UN Document TPNW/MSP/2025/4.

9 Report of the gender focal point (Mexico), Third Meeting of States Parties to the Treaty on the Prohibition of Nuclear Weapons, (2025) UN Document TPNW/MSP/2025/5.

testing on individuals around the world. It aims to provide TPNW states parties and other stakeholders participating in the work of the TPNW with a baseline of information about current practice, which can be considered and built from in developing and implementing non-discriminatory age- and gender-sensitive victim assistance under the TPNW.

Gender, age, and discriminatory impacts from nuclear weapons use and testing: some key considerations

Gender is a crucial factor to take into account when planning and implementing victim assistance programmes in the context of nuclear weapons. One important aspect to consider are the impacts of nuclear weapons use and testing on physical health, which are distinct and long-term, and vary by gender. For example, studies clearly indicate that women and girls face a considerably higher likelihood of developing cancer compared to men and boys when exposed to ionising radiation over time.[10] A comprehensive study tracking the lifespans of survivors of the 1945 nuclear attacks on Hiroshima and Nagasaki in Japan revealed a pronounced gender disparity in cancer risk linked to ionizing radiation exposure. Notably, the risk of developing solid cancers due to radiation was almost twice as elevated for women as it was for men.[11]

In another example, research from Chernobyl indicates that girls are considerably more likely than boys to develop thyroid cancer from radiation exposure.[12] Girl children between birth and five years of age demonstrate the greatest vulnerability to such exposure, with the highest probability of developing various health complications, including both malignant and non-malignant conditions, throughout their lifespan.[13]

Pregnant people exposed to substantial doses of ionising radiation encounter amplified risks, with increased maternal mortality rates. The impacts also extend beyond a pregnant person's own health, with the increased probability of giving birth to children with congenital impairments or experiencing stillbirths.[14]

Nuclear weapon detonations also have distinct gender-specific implications in terms of differential social, economic, psychological, and other consequences which can

10 Working paper submitted by Chile, Ireland, Mexico and the United Nations Institute for Disarmament Research, (2022) 'Operationalizing the gender provisions of the Treaty on the Prohibition of Nuclear Weapons,' UN document TPNW/MSP/2022/WP.2.

11 Kotaro Ozasa et al., (2012) 'Studies of the Mortality of Atomic Bomb Survivors, Report 14, 1950–2003: An Overview of Cancer and Noncancer Diseases,' Radiation Research Vol. 177 · No. 3, available at: https://doi.org/10.1667/RR2629.1 . See also, Anne Guro Dimmen (2014), 'Gendered Impacts: The humanitarian impacts of nuclear weapons from a gender perspective,' Paper No 5 of 6 International Law and Policy Institute (ILPI)-United Nations Institute for Disarmament Research (UNIDIR) Vienna Conference Series, available at: https://unidir.org/sites/default/files/publication/pdfs/gendered-impacts-en-620.pdf

12 ICAN, (2020) 'Gender and Nuclear Weapons,' available at: https://www.icanw.org/gender_and_nuclear_weapons

13 Amanda M. Nichols and Mary Olson, (2024) 'Gender and Ionizing Radiation Towards a New Research Agenda Addressing Disproportionate Harm,' UNIDIR, available at: https://unidir.org/publication/gender-and-ionizing-radiation-towards-a-new-research-agenda-addressing-disproportionate-harm/

14 Working paper submitted by Chile, Ireland, Mexico and the United Nations Institute for Disarmament Research, (2022) above note 10.

disproportionately affect women due to pre-existing gender inequalities.[15] This was reflected in, for example, the social stigmatisation faced by Marshallese women regarding marriage and motherhood after exposure to US nuclear weapons tests, creating additional layers of harm beyond immediate radiation effects.[16] Displacement – a consequences of use and testing – also heightens the vulnerability of women to sexual violence, while diminishing their access to support services. Gendered impacts of the French military presence in French Polynesia/Ma'ohi Nui during the period of nuclear testing have also been documented,[17] including sexual exploitation and gender-based violence.[18]

The impacts of nuclear weapons affect both the young and old in devastating ways: the specific needs and vulnerabilities of different age groups, however, vary considerably. Several studies show that children are more susceptible to radiation as their rapid cell division during phases of physical growth renders them more vulnerable to its harmful effects.[19] Older individuals may experience different consequences based on their health status and stage of biological development.[20]

Nuclear weapons use and testing also generate multi- and inter-generational physical, psychological, cultural, and socio-economic impacts. These could also be seen as requiring consideration under the lens of age-sensitivity in victim assistance. More broadly, inter-generational impacts are crucial to take into account to provide assistance inclusively to all individuals affected under Article 6. Beyond the onset of cancer and birth defects, there is substantial evidence indicating that radiation has a lasting impact on genetic structures, leading to permanent mutations in the gene pool which leads to various outcomes such as developmental impairments, hereditary diseases, accelerated ageing, and broad non-specific effects like the compromise of immunity.[21] Furthermore, many nuclear-affected communities have reported social stigma and marginalisation directed at the children and grandchildren of survivors.[22]

As part of providing victim assistance without discrimination, states must consider the disproportionate impact of the testing of nuclear weapons on Indigenous Peoples and how the range of impacts that are specific to these communities should be responded to, to produce equitable outcomes. For instance, the radioactive aftermath

15 John Borrie et. al, (2016) 'Gender, Development and Nuclear Weapons,' , ILPI and UNIDIR, available at: https://unidir.org/sites/default/files/publication/pdfs//gender-development-and-nuclear-weapons-en-659.pdf

16 Ibid.

17 Bengt Danielsson and Marie-Therese Danielsson, (1986) 'Poisoned Reign: French Nuclear Colonialism in the Pacific,' New York: Penguin Books.

18 Matthew Bolton and Elizabeth Minor, (2021) 'Addressing the Ongoing Humanitarian and Environmental Consequences of Nuclear Weapons: An Introductory Review,' Global Policy, available at: https://doi.org/10.1111/1758-5899.12892

19 'Radiation and Children: The Ignored Victims,' Nuclear Information and Resource Service, available at: https://www.nirs.org/wp-content/uploads/radiation/radiationandchildren.pdf

20 International Committee of the Red Cross (ICRC), (2023) 'The Obligation to Assist Victims and Remediate the Environment within a Framework of Shared Responsibility under the Treaty on the Prohibition of Nuclear Weapons,' available at: https://www.icrc.org/en/publication/4702-obligation-assist-victims-and-remediate-environment-within-framework-shared

21 Ibid.

22 ICAN, (2017) above note 2.

of the UK's atmospheric tests at Maralinga in Australia disproportionately impacted Indigenous individuals, as the testing range intersected a traditional Aboriginal route. This has not only impacted the community's health and environment but also imposed restrictions on their access to ancestral lands, entailing psychosocial and cultural challenges. The establishment of nuclear testing sites on Indigenous land frequently prompted migration and displacement.[23] This long-term or permanent displacement has affected the social-cultural rights of communities, whilst also having a gendered dimension. For instance, displacement stripped Indigenous Marshallese women of their cultural role as land custodians but also deprived them of the means to earn income through handicrafts and household items due to material shortages. Apart from migration, there are also indications that French authorities obstructed the Ma'ohi people's right to self-determination, to retain authority over the nuclear testing grounds.[24]

Recognising and addressing these and other distinct needs is not only a matter of fairness but also a strategy for effective and holistic support. By tailoring assistance to the diverse requirements of each gender, age and community – and also taking into account the ways in which these and other factors intersect – states can ensure that their victim assistance programmes are inclusive, respectful, and truly effective, and uphold the principles and obligations they have committed to.

The national programmes reviewed for this paper

There are currently 16 countries and territories where nuclear weapons have been used or tested: Algeria, Australia, China, the Democratic People's Republic of Korea, French Polynesia/Ma'ohi Nui (a territory externally administered by France), India, Japan, Kazakhstan, Kiribati, the Republic of the Marshall Islands, Pakistan, Russia, Turkmenistan, Ukraine, the United States, and Uzbekistan.[25]

It is crucial to remember that the effects of nuclear tests and the use of nuclear weapons often transcend borders, including because of the movement of people. States including for example Fiji, France, New Zealand, and the United Kingdom have populations who were in close proximity to nuclear detonations in other countries, and were adversely affected. This includes military veterans of nuclear testing who have faced long-term health consequences.

Following the structure of obligation in the TPNW, this paper reviews age- and gender-sensitivity and non-discrimination in national laws and programmes responding to the impacts of nuclear weapons use or testing in each country with affected individuals – rather than organising its analysis according to the state that used or tested nuclear weapons. The analysis includes states party and not party to the TPNW. It reviews the programmes of countries for which data and information were available online in English or translated into English.

23 Bolton and Minor, (2021) above note 18.

24 Ibid.

25 Ibid.

While some countries have enacted specific national laws or programmes to assist victims of nuclear weapons use or testing, many other countries reviewed do not appear to have dedicated legislation or initiatives in place to address this issue. The availability and scope of national responses varies significantly across different countries – and affected communities and others have identified and continue to advocate around the serious shortcomings of many responses.

To give an overview of national laws and programmes with provisions relevant to the current review:

Australia has several relevant laws and programmes, including the 1984 Maralinga Tjarutja Land Rights Act, the Veterans' Entitlements Act 1986, and the Australian Participants in British Nuclear Tests and British Commonwealth Occupation Force (Treatment) Act 2006. These address issues such as land rights, compensation, and support for Australian participants in the British nuclear testing program. **New Zealand** and the **United Kingdom** have also made provisions for veterans affected by nuclear testing in Australia and the Pacific.

China has implemented policies providing support for disabled children of retired veterans from Unit 8023, a military unit involved in China's nuclear weapons programme.

Japan's Atomic Bomb Survivors' Support Law of 1994 enshrines the Japanese government's commitments to addressing the unique and ongoing needs of *hibaku-sha* (atomic bomb survivors), who continue to experience the physical and psychological effects of the atomic bombings. This law, along with other related legislation and initiatives, is part of a set of measures to provide support and recognition to survivors and their descendants. The adoption of these measures has been driven by the advocacy of survivors.

In response to the series of nuclear tests conducted by Soviet Union at Semipalatinsk Test Site, which started on August 29, 1949, **Kazakhstan** laid down support measures for victims of nuclear testing through enactment of a law titled "On Social Protection of Citizens Who Suffered from Nuclear Tests at the Semipalatinsk Nuclear Test Site" (also referred to as "Semipalatinsk Social Protection Law of 1992"). This law outlines a range of support measures aimed at addressing the effects of radiation, with a particular focus on women and children, who are more susceptible to its impact. It further establishes the Semipalatinsk Rehabilitation and Compensations Fund to address the social and health needs of those affected by the tests.[26]

In January 2010, the French government created a single unified compensation mechanism for the victims of nuclear testing in **French Polynesia/Ma'ohi Nui** and **Algeria** (including affected people residing in those countries and in **France**). This was established by the "Law regarding the recognition and compensation of victims of French nuclear testing," colloquially known as the "Loi Morin."[27]

26 'On social protection of citizens who suffered from nuclear tests at the Semipalatinsk nuclear test site,' Law of the Republic of Kazakhstan of December 18, 1992 N 1787-XII, available at: https://adilet.zan.kz/eng/docs/Z920003600_

27 'LAW No. 2010-2 of January 5, 2010 relating to the recognition and compensation of victims of French nuclear tests (1),' available at: https://www.legifrance.gouv.fr/loda/id/JORFTEXT000021625586

Regarding the **Republic of the Marshall Islands** (RMI), the US and the RMI signed a Compact of Free Association in 1986 which created funds to compensate victims of US nuclear testing programme, with a payments scheme to assist with health care, housing and living costs.[28]

To address the harms done by the nuclear testing programme in the **United States**, the Radiation Exposure Compensation Act (RECA) enacted in 1990 provides compensation to some victims exposed to radiation during US atmospheric nuclear testing and employees of the US uranium mining industry.[29]

The review undertaken for this paper did not uncover information on national programmes or laws addressing assistance for victims of nuclear weapons testing in the **Democratic People's Republic of Korea (North Korea), India, Kiribati, Pakistan, Russia, Turkmenistan, Ukraine,** or **Uzbekistan**. This does not necessarily mean that no such programmes exist. Limitations in time and resources for the current analysis, as well as accessibility of information, also mean the overview in this paper may not be comprehensive.

As a baseline overview of provisions based on a desk review of literature, this paper was also not able to examine in detail the sufficiency or efficacy of the measures reviewed. Whilst affected communities are best placed to provide expertise on this, some commentary, references, and examples regarding the shortcomings of current programmes is given in the sections below. This paper's intention is primarily to bring together a specific set of basic information on existing measures that will be relevant to future policymaking.

Overall, research for this paper found some provisions addressing gender and age in national programmes, such as those of Kazakhstan and Japan, while some approaches relevant to the principle of non-discrimination and providing a specific response to Indigenous Peoples were seen in laws and policies enacted by Australia and others. Nevertheless, these elements are not currently addressed comprehensively or systematically within or across national programmes – providing a clear opportunity for states to develop stronger standards and practices in their implementation of the TPNW.

Gender sensitivity

Regarding gender sensitivity in providing assistance to individuals affected by nuclear weapons use or testing, the following relevant provisions were seen in the national programmes reviewed:

Extended maternity leave:

Radiation exposure can significantly impact reproductive health in women, increasing the risk of pregnancy complications, birth defects, and long-term health issues for

28 'Agreement Between the Government of the United States and the Government of the Marshall Islands for the Implementation of Section 177 of the Compact of Free Association,' available at: https://nuclear-justice.net/law/marshallislands/

29 For the text of RECA (and many other laws referred to in this section), see Noriyuki Kawano and Seiichiro Takemine (2022), 'Relevant laws by jurisdiction around the world,' available at: https://nuclear-justice.net/relevantlaws/

both the mother and child.[30] Studies indicate that a contributing factor is the higher proportion of reproductive tissue in the female body, which increases susceptibility to radiation damage.[31]

The Semipalatinsk Social Protection Law of 1992 of **Kazakhstan** recognises this dimension of gendered impacts through including a provision for extended maternity leave for women living in areas exposed to nuclear testing, under Article 14 of the legislation (titled "Additional benefits and compensations for women, children and adolescents and their parents").[32] By acknowledging the heightened risks of reproductive health complications due to radiation exposure, the law provides additional support to women it identifies as affected, recognising both the physical and caregiving burdens they bear.[33]

The provision under Article 14 specifically grants extended maternity leave to women living in areas affected by nuclear testing, with variations depending on the circumstances of childbirth. For standard deliveries, maternity leave includes a set period before and after birth, with additional time allocated for complicated births or multiple births. In cases of premature births between 22 to 29 weeks, leave is extended further if the child survives beyond seven days. If the child does not survive past the first week or is stillborn, a different postnatal leave period applies.

By offering additional time for recovery and care, particularly in cases of complicated childbirth, premature deliveries, and perinatal loss, the law highlights both the physical and emotional toll on affected parents. This provision reflects an understanding of the unequal and gendered consequences of nuclear testing: by allowing for extended maternity leave, the law acknowledges the unequal burdens potentially placed on women who have children in areas impacted (burdens which may be related to health, or be socio-economic), and aims to provide additional support during this critical period. Further supportive measures beyond leave, for example relating to maternal health, are not however part of the provisions.

Assistance for spouses and partners:

Historically, women have disproportionately taken on unpaid care responsibilities for partners[34] including those who are veterans, particularly in cases of long-term health complications resulting from military service. Such complications evidently can result from nuclear test exposure. Ensuring that spouses and partners receive a pension recognises some of the broader, long-term and gendered impacts of military service on families, rather than limiting support only to those directly impacted.

30 Cwikel, J. et al, (2020) 'Reproductive Effects of Exposure to Low-Dose Ionizing Radiation: A Long-Term Follow-Up of Immigrant Women Exposed to the Chernobyl Accident,' J. Clin. Med, available at: https://www.mdpi.com/2077-0383/9/6/1786

31 Amanda M. Nichols and Mary Olson, (2024) above note 13.

32 On social protection of citizens who suffered from nuclear tests at the Semipalatinsk nuclear test site,' above note 26.

33 Kyoko Hirabayashi, 'Support Measures for Victims of Soviet Nuclear Testing in Kazakhstan,' CPHU Research Report Series No.35, available at: http://doi.org/10.15027/52461

34 Muñoz, (2023) above note 7

The military pension systems of the United Kingdom, Australia, and New Zealand share a provision wherein spouses or partners of veterans who served in active war operations, regardless of whether they were wounded, are entitled to receive surviving spouse or partner pension (SSP).[35] In the **United Kingdom**, the military pension system stipulates that spouses or partners of veterans who served in any actual war operations, whether wounded or not, are eligible for a SSP. This provision applies to the spouses and partners of UK nuclear test veterans.

Similarly, in **New Zealand**, most nuclear test veterans are already qualified for the "war pension (emergency)," which is a higher level of benefits compared to the standard "war pension (routine)". As a result, the spouses and partners of New Zealand nuclear test veterans would be eligible to receive the SSP, providing them with a higher level of support.[36]

In contrast, the Australian military pension system takes a different approach. Nuclear test veterans in **Australia** are given a "non-warlike hazardous service" qualification, which is one rank below the standard "war pension." The eligibility of the spouses and partners of Australian nuclear test veterans for the Widow's Pension is determined on a case-by-case basis, rather than being automatically granted.[37]

RECA provides assistance to certain individuals affected by radiation exposure from nuclear testing in the **United States**. Compensation is determined based on their presence in a designated area during testing and the development of one or more specified diseases as laid down in the statute. Compensation eligibility under RECA extends one-time compensation packages to some affected individuals including onsite participants who were present during atmospheric atomic weapons testing and later developed a cancer type listed in the statute; downwinders who were in designated areas near the Nevada Test Site during periods of atmospheric testing and developed a specified cancer; and uranium miners, millers, and ore transporters.

RECA provides survivor benefits to the surviving spouses of onsite participants, downwinders, or uranium workers, regardless of gender. This provision intends to recognise the emotional and financial hardships faced by spouses of deceased victims, offering them compensation as a form of support and acknowledgment of their loss.[38]

Gender representation in decision-making bodies:

Ensuring gender representation within decision-making bodies is a progressive step that could contribute towards making victim assistance programmes more gender responsive. **France**'s Loi Morin law provides one example in existing national laws,

35 Komei Hosokawa, 'The Long Road for Justice and Recognition: British Nuclear Tests, Compensation Schemes and Remaining Issues in Australia and New Zealand,' CPHU Research Report Series 35, available at: http://doi.org/10.15027/52458

36 Ibid.

37 Ibid.

38 Congressional Research Service, (2024) 'The Radiation Exposure Compensation Act (RECA): Compensation Related to Exposure to Radiation from Atomic Weapons Testing and Uranium Mining,' available at: https://sgp.fas.org/crs/misc/R43956.pdf

stipulating in Section 4 that the established Compensation Committee shall comprise nine members, including one president and four women among the remaining eight qualified individuals.[39]

Age sensitivity and inter-generational impacts

Regarding recognising or responding to considerations of the age of affected individuals and/or inter-generational impacts, the following approaches were seen in the existing national programmes reviewed:

Recognising that there are specific health impacts on children living in affected areas:

Article 14 of **Kazakhstan**'s Semipalatinsk Social Protection Law addresses the potential specific needs of children exposed to nuclear testing by stipulating that those under 18 living in areas affected by nuclear tests are entitled to free healthcare in sanatoriums and health facilities for medical reasons. Notably, the same article ensures that parents are provided with paid leave for the entire duration of their child's illness, recognising the need for caregiving support.

Recognising the impacts on and assisting children born following nuclear use or testing:

The recognition of some of the intergenerational health impacts of nuclear weapons use and testing is reflected in the laws of several countries. The existence of these measures highlight that targeted support and monitoring for the descendants of survivors is essential. Nevertheless, it should be noted that survivors and their descendants in many countries have consistently advocated for the research, recognition of, and response to intergenerational impacts to go much further.

China provides assistance to children with congenital disabilities of retired veterans from Unit 8023, who were involved in nuclear tests. The government grants these individuals the right to receive medical evaluation and treatment for their disabilities, along with livelihood support.

Specifically, its Policy MCA [2006] No. 32 outlines this support. The level of support is determined based on the local living standards of the individual's area of residence. If disabled children require medical treatment, they are eligible for treatment under the "Tomorrow Plan for Surgery and Recovery of Children with Disabilities," an initiative launched by the Ministry of Civil Affairs in May 2004. This programme offers surgeries and rehabilitation services to children with disabilities in welfare facilities. Policy MCA [2006] No. 194 outlines specific procedures for surgeries, rehabilitation, and livelihood support for disabled children of retired veterans from Unit 8023. This policy was in effect for one year, from June 2006 to June 2007.[40]

39 LAW No. 2010-2 of January 5, 2010, above note 27.

40 Yang Xiaoping, 'Compensation Measures for Victims of Nuclear Testing in China,' CPHU Research Report Series No.35, available at: https://ir.lib.hiroshima-u.ac.jp/00052459

Japan's approach to addressing the intergenerational impacts of nuclear weapons is reflected in its Atomic Bomb Survivors' Support Law of 1994. While the law primarily focuses on providing assistance to the first-generation victims, it also extends limited medical examination benefits to some second-generation *hibakusha*, referring to those conceived after the atomic bombings.

The "Supplementary Resolution concerning the Draft of the Atomic Bomb Survivors' Support Law" commits to research, studies, and remedial measures aimed at mitigating the effects of atomic bombings on both atomic bomb survivors and their descendants, including children and grandchildren.[41] The resolution emphasised the importance of continuing and improving medical examinations for the second generation, taking into account their specific circumstances.

In line with this, the Japanese government now provides annual medical check-ups for the children of atomic bomb survivors. In some regions, local governments go beyond these examinations by offering financial assistance to cover their medical expenses. Additionally, they distribute "Health Handbooks for Second-Generation Atomic Bomb Survivors" to provide health information, particularly to facilitate health monitoring and consultations. However, they do not automatically grant medical benefits or financial support.[42] Some progress has been made in improving support measures for survivors' children. For instance, in 2016, a test for multiple myeloma (known as serum protein electrophoresis) was included as part of the medical examinations for survivors' offspring. Furthermore, in 2020, the Ministry of Health, Labour and Welfare introduced a prototype of a "Health Record Book for Second-Generation Atomic Bomb Survivors," with plans for local governments to begin issuing them starting in fiscal year 2021.[43]

Kazakhstan's Semipalatinsk Social Protection Law acknowledges those born after the cessation of nuclear testing as victims under specific circumstances. Article 10 of the law, titled "Categories of citizens affected by nuclear tests, to which the Law applies," explicitly states that children born in designated zones who have disabilities or diseases with an established causal relationship to nuclear tests are designated as "victims of nuclear tests" and entitled to compensation.[44]

Other assistance to the children of survivors:

Australia's Veterans' Entitlements Act 1986 provides for the payment of pensions and other benefits to, and provide medical and other treatment for, veterans including those that took part in the nuclear tests consulted by the UK in Australia. Section 86 of this Act titled "Dependants eligible to be provided with treatment" gives rights to

41 'Law No. 117 of 1994/ The Atomic Bomb Survivors' Support Law,' available at: https://nuclear-justice.net/law/japan/#Chapter-VII-Miscellaneous-provisions

42 'Japanese children of A-bomb survivors worry for health, want exposure certification: survey,' (2021) The Mainichi, available at: https://mainichi.jp/english/articles/20211022/p2g/00m/0na/047000c

43 Toshinori Yamada, Katsumi Furitsu, and Seiichiro Takemine, 'Compensation Measures for Sufferers of the Atomic Bombings of Hiroshima and Nagasaki: An Explanation of the Atomic Bomb Survivors' Support Law,' CPHU Research Report Series No.35, available at: https://ir.lib.hiroshima-u.ac.jp/00052463

44 'On social protection of citizens who suffered from nuclear tests at the Semipalatinsk nuclear test site,' above note 26.

dependent children of a deceased veteran to be eligible to receive pension and treatment as well.[45]

New Zealand's Veterans' Support Regulations 2014 also provides for pensions for veterans' children under 18 years of age, including deceased veterans.[46]

Recognising the need for assistance tailored to older affected individuals:

The United Kingdom runs the Aged Veterans Fund, which provides funding for projects aimed at addressing the non-core health, wellbeing, and social care needs of military veterans born before January 1, 1950. This fund assists with, for example, access to healthcare and caregivers, assistance with using the internet, and general support services for older veterans.[47]

In 2017, the Nuclear Community Charity Fund (NCCF) was established, with funding from the Aged Veterans' Fund and Libor funds (derived from banking fines). The NCCF's mandate is to provide means-tested individual grants to veterans of the British nuclear weapons testing programme and their descendants.[48] These grants are intended to address the physical, emotional, and social needs of this specific community. This gives some recognition to the fact that individuals have faced a broad range of impacts, beyond just those on their physical health, due to their or their family member's exposure to nuclear weapons testing, and that these should be responded to.[49]

Other recognition of inter-generational impacts, and impacts on different age groups:

RECA in the United States takes into account the impacts on different ages and generations of radiation exposure from nuclear testing by extending compensation to children, parents, grandchildren, and grandparents of deceased victims who was onsite participants, downwinders, or uranium workers. This acknowledges that impacts on families span multiple generations, with not only the immediate family impacted, but also younger and older generations within the same family unit.

By providing compensation to children and grandchildren, RECA aims to address the potential long-term health and financial consequences that may arise for these younger generations, who may have been indirectly impacted by the radiation exposure of their parents or grandparents.

45 Veterans' Entitlements Act 1986, available at: https://nuclear-justice.net/law/veterans-entitlements-act-1986/

46 Veterans' Support Act 2014, available at: https://www.legislation.govt.nz/act/public/2014/0056/latest/whole.html#DLM5998604

47 'Aged Veterans' Fund,' The Armed Forces Covenant Fund, available at: https://covenantfund.org.uk/programme/aged-veterans-fund/

48 'The Nuclear Community Charity Fund,' available at: https://thenccf.org/

49 'Government Launches Nuclear Test Veteran Community Fund,' (2023) Carlisle City Council, available at: https://www.carlisle.gov.uk/Residents/Grants-and-Funding/government-launches-nuclear-test-veteran-community-fund

Similarly, by including parents and grandparents, the Act recognises the emotional and financial toll that the loss of a child or grandchild can have on older family members, who may have depended on their support.

Non-Discrimination

Ensuring that Indigenous Peoples receive equitable assistance that recognises the specific impacts on and needs of their communities will be one crucial aspect of implementing victim assistance under the TPNW "without discrimination", as required by Article 6. The recognition of the disproportionate impacts on Indigenous Peoples and the need for specific responses is reflected in some current measures – as are the shortcomings of states' consideration of Indigenous Peoples and other marginalised communities so far.

In **Australia**, the federal government allocated a compensation payment of 13.5 million Australian dollars in 1994 to the Maralinga-Tjarutja Trust, an organisation advocating for the Maralinga-Tjarutja people, who are officially recognised as the traditional landowners according to the 1984 Maralinga-Tjarutja Land Rights Act. This compensation aimed to address the forced relocation and loss of ancestral lands experienced by the Indigenous community due to nuclear testing in the region.[50] As this payment was specifically intended to address historical injustices related to displacement and land loss, it recognises some of the unique challenges faced by Indigenous populations in the context of nuclear weapons testing.

The French government has established programmes and compensation schemes for individuals affected by nuclear testing, which have now been extended to include the Indigenous populations of **French Polynesia/Ma'ohi Nui**. The Loi Morin of 2010 provides for compensation and medical monitoring for individuals affected by nuclear tests in the region, giving these communities potential access to support and resources.

Despite the establishment of this law, Indigenous communities from French Polynesia/Ma'ohi Nui have faced substantial challenges in accessing compensation, as have affected individuals from **Algeria**,[51] especially when compared to claimants residing in France. The requirement for claimants to provide proof of residing in French Polynesia/Ma'ohi Nui at the time and of having contracted one of 23 cancers resulting from radiation, to show precise evidence of radiation exposure, is frequently inaccessible to affected individuals.[52] There has been a high rejection rate for claims

50 Komei Hosokawa, above note 35.

51 Basma El Atti, (2025) '65 years after France turned their land into a nuclear test site, Algerians seek justice' The New Arab, available at: https://www.newarab.com/news/algerians-seek-overdue-justice-colonial-french-nuclear-tests

52 The restrictive requirements and scope of the law, and France's limited recognition of the harm caused by nuclear testing, have been subject to investigation and criticism, most recently by a French parliamentary commission of inquiry. See ICAN France and Observatoire des armements (2025), "Commission d'enquête parlementaire sur les essais nucléaires : 'Oui, il y a eu des mensonges!'" available at: https://5o83.mj.am/nl3/ulvble02As0u6Hd6W1ntWw?m=AVoAAHAygiYAAc57Nh4AAGLfswgAAP-Nb5wAn8dnAAUbfwBoUXeaKjMBRTDoSX20MnaJ4ghI3AAE5Zk&b=fa250cff&e=aa6304ea&x=H2nO2r38bg7RksQioAMFTNyoLkdnVqVQhV9zjUmlTzM and Disclose, Princeton University, and Interprt (2021), Moruroa Files available at: https://moruroa-files.org/en/

from individuals from French Polynesia/Ma'ohi Nui by the Committee.[53] Though access to assistance may be equal in theory, in practice this has not been the case.

As mentioned earlier, the **Republic of the Marshall Islands** negotiated an agreement with the United States for compensation and healthcare support for its Indigenous populations affected by nuclear tests. One of the impacts of nuclear testing has been the displacement of Marshallese people from their ancestral lands, severing deep-rooted cultural and spiritual connections to their environment. The agreement includes some response to these impacts through various provisions, such as providing funds to facilitate the resettlement and rehabilitation of affected communities. The compensation and support for those affected by the nuclear testing programme provided so far by the US is however widely seen as inadequate to the devastating harms caused – and also compared to US's national programmes for its own citizens.[54]

Two other aspects of current national programmes that are relevant to the principle of non-discrimination are the treatment of veterans of nuclear testing compared to civilian populations in areas where nuclear tests were conducted, and how states select which populations and areas are covered by assistance and compensation programmes.

Looking at the example of RECA in the **United States**, this provides treatment and compensation to eligible affected individuals regardless of their military or civilian status, meaning that both veterans and impacted civilian communities can access assistance.

Notably, however, RECA does not cover individuals impacted by the 1945 Trinity Test in New Mexico, particularly those who lived downwind of the Trinity Test.[55] Downwinders in other areas are also not covered by RECA but have experienced health issues similar to those covered under the Act. They are currently left without acknowledgment or compensation for their suffering – and many of those affected are from Indigenous and Latinx communities already subject to marginalisation.

53 Jon Henley, (2025) 'France has underestimated impact of nuclear tests in French Polynesia, research finds,' The Guardian, available at: https://www.theguardian.com/world/2025/may/27/france-spent-90000-countering-research-into-impact-of-pacific-nuclear-tests#:~:text=France's%20Atomic%20Energy%20Commission%20(CEA,in%20the%201960s%20and%201970s

54 Camilla Pohle, (2024) 'Ashes of Death: The Marshall Islands Is Still Seeking Justice for US Nuclear Tests,' The Diplomat, available at: https://thediplomat.com/2024/03/ashes-of-death-the-marshall-islands-is-still-seeking-justice-for-us-nuclear-tests/#:~:text=The%20Marshall%20Islands%20has%20never,total%20compensation%20to%20%24600%20million.

55 Allen Hester, (2024) 'Senate passes bill to expand compensation for radiation victims. Will the House agree?,' Bulletin of the Atomic Scientists, available at: https://thebulletin.org/2024/03/senate-passes-bill-to-expand-compensation-for-radiation-victims-will-the-house-agree/

Conclusion

The various national programmes highlighted in this paper give some examples of how age and gender considerations, as well as principles of non-discrimination, are currently incorporated into state responses to the harm caused by nuclear weapons use and testing. These existing programmes provide a baseline of information that states parties to the TPNW and other stakeholders should use when considering and developing guidelines and practices for victim assistance under the treaty.

Responses to nuclear harm from causes beyond use and testing – such as reactor catastrophes and the human rights and environmental impacts of the production and processing of nuclear materials – were not reviewed in this paper. However, these could also contribute to this baseline.

The review in this paper reveals significant variation in support mechanisms across countries, reflecting broader socioeconomic and political factors. While some programmes provide valuable assistance, many require enhancement to address diverse needs across affected communities, particularly marginalised ones.

The analysis of current national programmes underscores the importance of developing and adopting a comprehensive, holistic and intersectional approach, addressing the multifaceted needs of affected populations, spanning medical care, psychosocial support, financial assistance, and societal reintegration, while ensuring sensitivity to age, gender, and the inclusion of marginalised groups. Vulnerable and marginalised groups, particularly Indigenous Peoples and individuals with disabilities, deserve special attention through inclusive, non-discriminatory measures ensuring equal access to support regardless of background or social or economic status. Robust data collection methodologies capturing age- and gender-disaggregated information are also crucial for designing effective programmes, as are detailed records of victims, their families, and descendants.

The range of impacts and needs from nuclear weapons use and testing, and their differential effects, are not sufficiently reflected across current national responses.

A critical improvement area is centring affected communities in policy development and implementation. Too often, the burden of advocacy, research, and programme implementation falls upon those who have already suffered immense harm: an inherently flawed approach.

Engaging local communities, non-governmental organisations, and grassroots movements, particularly of survivors and affected communities, is vital to ensure that assistance programmes are culturally appropriate and responsive to specific needs. Responses should never be designed and implemented without those they are meant to serve. Collaboration facilitates effective outreach, awareness, and advocacy efforts. It is notable that affected communities are often the first to document harm,

and this expertise must be listened to. Sustainable funding and resource allocation for such groups is therefore essential, and a measure that TPNW states parties could take as part of their implementation of Articles 6 and 7.[56]

When it comes to gender, meaningful inclusion requires not only numerical representation but also the facilitation of equal and active engagement for people of all genders in decision-making bodies and forums. Efforts should be made to remove barriers and provide an enabling environment for diverse voices to contribute effectively to victim assistance programmes.

This paper highlights a concerning pattern: more economically developed countries typically have more robust victim assistance programmes for their citizens than small island nations and low-income economies. Additionally, while some countries that tested nuclear weapons compensate their own veterans exposed to nuclear testing, they often fail to extend similar support to populations where these tests occurred, underscoring the need for universal protection standards and to address dynamics of inequality and discrimination.

International cooperation, knowledge sharing, and exchange of good practices would strengthen victim assistance programmes globally.

While current national programmes offer valuable insights, expanding their reach remains essential to ensure appropriate holistic responses are accessible to all individuals enduring the consequences of nuclear weapons. A nuanced, comprehensive approach addressing humanitarian impacts and justice is needed, recognising there is no one-size-fits-all solution. By centring affected communities and fostering international collaboration, we can achieve a more equitable approach to victim assistance, addressing nuclear weapons' harmful legacies with care and respect for those who have suffered most.

56 For guidance on building such collaborations and relationships, see Nuclear Truth Project, 'Protocols for Seeking Nuclear Truth with Integrity,' available at: https://nucleartruthproject.org/protocols/ and their translations and adaptations, available at: https://nucleartruthproject.org/translations/

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