

# Strategic planning for implementation of the health-related articles of the Minamata Convention on Mercury

Results from country  
workshops





# Strategic planning for implementation of the health-related articles of the Minamata Convention on Mercury

## RESULTS FROM A WORKSHOP IN LAO PEOPLE'S DEMOCRATIC REPUBLIC

### Background

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A workshop held in Vientiane, Lao People's Democratic Republic (Lao PDR) (28-29 October, 2019) applied the methodology presented in the new WHO guidance document *Strategic Planning for Implementation of the Health-related Articles of the Minamata Convention on Mercury* to take stock of mercury risk assessment and control measures currently being implemented by health authorities, to identify additional measures needed to fully implement the health-related articles of the Convention, to protect public health, and to plan health authorities' implementation at a strategic level. Technical assistance was provided to develop Lao People's Democratic Republic's (PDR) national strategic plan for implementing the health-related articles of the Convention based on outputs of the workshop.

### Key Findings

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- The workshop demonstrated that a strategic plan for implementation of the health-related articles of the Minamata Convention on Mercury can be developed at low cost, the principle cost being that of the workshop itself.
- Strong leadership, effective coordination, and active participation from all relevant Ministry of Health (MoH) units are keys to success. The workshop also underscored the importance of effective inter-ministerial coordination led by the Ministry of Natural Resources and Environment (MoNRE).
- Despite severe resource limitations, the MoH is already implementing several mercury-related risk assessment and control measures.
- The Department of Hygiene and Health Promotion (DHHP) recently updated national health care waste regulations to address wastes containing heavy metals such as mercury. Development of systems for safe storage, transport, and disposal of mercury waste remains an unresolved challenge however due to the high cost of needed infrastructure.
- DHHP developed a standard operating procedure for clean-up of mercury spills and materials to train health workers on this subject. The MoH recognizes the need however, to provide training on a broad range of mercury and health issues at every level of the health service.
- To address mercury-added products, DHHP is developing for ministerial approval a decision to ban mercury-added products used in health care, including thermometers, sphygmomanometers, and antiseptics. To support this strategy the Procurement Unit, in collaboration with DHHP and the Engineering Services unit, plans to develop guidance on procurement of mercury-free alternative products.
- Dental colleges ceased instruction on use of dental amalgam several years ago and currently promote only mercury-free alternatives. To further phase down the use of amalgam, the MoH will develop national objectives for caries prevention and health promotion, and develop national objectives aimed at reducing the use of dental amalgam.
- A draft public health strategy for artisanal and small-scale gold mining (ASGM) was developed by the MoE. DHHP plans to lead a review of the draft strategy, involving MoH units on health services, epidemiology, health promotion, and others as needed.
- The Food and Drug Department (FDD) introduced regulations on mercury content in cosmetics consistent with agreements established by member states of the Association of South East Asian Nations (ASEAN).<sup>1</sup>
- Laotians enjoy access to free health care at central, provincial, and local levels through a network of provincial and district level hospitals and health centers under the Department of Health-care and Rehabilitation (DHR). The Department faces a challenge however, to develop institutional and human resource capacity to diagnose, treat, and care for mercury intoxicated patients.

<sup>1</sup> Agreement on the ASEAN Harmonized Cosmetic Regulatory Scheme (2003) and revised Annexes (2018)



- Lao PDR lacks capacity for human biomonitoring, presenting a challenge to the task of identifying populations at risk. The workshop recommended that the National Center for Environmental Health and Water Supply survey mercury concentrations in natural water bodies and in fish to identify populations at risk, mirroring a successful approach the Center used in the past to identify populations at risk for exposure to arsenic.
- The workshop provided the MoH with a clearer understanding of challenges and opportunities for implementing the health-related articles of the Convention. There is a need to strengthen training of health care workers on mercury and health issues, particularly on safe management of mercury waste and procurement of safe alternatives to mercury-added medical devices used in the health sector. Together with associated regulation, these will be the focus of the Ministry's efforts in the near term.

## The objectives of the workshop in Lao People's Democratic Republic were to:

- Understand the Ministry of Health's responsibilities in relation to the health-related articles of the Convention;
- Take into account the Ministry's ongoing programs and activities for mercury-related risk assessment and control, and identify additional measures required by the Convention;
- Allocate responsibilities for planning and implementation of additional measures to specific health units and health sector partners; and
- Generate the details needed for implementation of the health-related articles of the Convention.



Environmental Occupational Safety and Health Division, DHHP, MoH, Lao PDR

*The Minamata Convention on Mercury entered into force on August 16, 2017. Its objective is to protect human health and the environment from emissions and releases of mercury and mercury compounds that result from human activity. Lao PDR became a Party to the Convention on 21 September 2017.*

*The 67th World Health Assembly, through its Resolution no. WHA67.11 (2014) called upon its member states to sign, ratify, and implement the Minamata Convention on Mercury and to address the health aspects of exposure to mercury and mercury compounds through collaboration between health authorities, environment authorities, and others. Providing advice and technical support to the member states, the World Health Organization (WHO) pilot-tested and then published the guide, "Strategic Planning for Implementation of the Health-related articles of the Minamata Convention on Mercury," to support national health authorities in understanding the implications of the Convention for national health programs and in planning the implementation of mercury risk assessment and control measures required by the Convention.*

# Strategic planning for implementation of the health-related articles of the Minamata Convention on Mercury

## RESULTS FROM A WORKSHOP IN SRI LANKA

### Background

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A workshop held in Colombo, Sri Lanka (30 September–1 October, 2019) applied the methodology presented in the new WHO guidance document *Strategic Planning for Implementation of the Health-related Articles of the Minamata Convention on Mercury* to take stock of mercury risk assessment and control measures currently being implemented by health authorities, to identify additional measures needed to fully implement the health-related articles of the Convention, to protect public health, and to plan health authorities' implementation at a strategic level. Technical assistance was provided to develop Sri Lanka's national strategic plan for implementing the health-related articles of the Convention based on outputs of the workshop.

### Key Findings

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- The workshop demonstrated that a strategic plan for implementation of the health-related articles of the Minamata Convention on mercury can be developed at low cost, the principle cost being that of the workshop itself.
- Strong leadership, effective coordination, and active participation from all relevant Ministry of Health (MoH) units are keys to success. Identification of a focal unit from the MoH (Environmental Health, Occupational Health and Food Safety Directorate) to liaise with the Ministry of Environment on Minamata Convention-related work has further strengthened inter- as well as intra-sectoral coordination.
- Health authorities in Sri Lanka have already implemented many measures to assess and control health risks posed by mercury, including phasing out of procurement of mercury-added medical devices, introducing alternatives to dental amalgam, public awareness sensitization and training of health workers, research/surveys on special occupational groups, surveys of mercury in fish, and more.
- The MoH's phasing out initiative on procurement of mercury-added medical devices has been effective since 2013 however, there has been some difficulty in enforcement at provincial and local levels. With the majority of dental services delivered free of charge through government services, the costs of mercury-free alternatives to amalgam present a challenge to the phasing down program.
- To address those challenges, the MoH plans to develop and disseminate guidelines on procurement of mercury-free medical devices, implement a program of monitoring and reporting on procurement of mercury-added products at all levels of health services, develop national guidelines for dental caries prevention and health promotion, and develop national targets aimed at reducing the use of dental amalgam.
- Unresolved challenges include the need to expand research/surveys on mercury in cosmetics, especially skin lightening creams, and in food products, particularly fish, as results of surveillance in these areas have raised concerns. The MoH also needs to make major investments on laboratories in order to enable human biomonitoring, and on infrastructure for safe management of mercury waste. MoH financing for these investments remains a challenge.
- The workshop provided the MoH with a clearer understanding of challenges and opportunities for implementing the health-related articles of the Convention. The MoH foresaw the need to engage coordinated support from diverse health programs and this will be a focus of efforts in the near term.



Dr. Inoka Suraweera, Ministry of Health, Nutrition and Indigenous Medicine, Sri Lanka

### The objectives of the workshop in Sri Lanka were to:

- Understand the MoH's responsibilities in relation to the health-related articles of the Convention;
- Take into account the MoH's ongoing programs and activities for mercury-related risk assessment and control, and identify additional measures required by the Convention;
- Allocate responsibilities for planning and implementation of additional measures to specific health units and health sector partners; and
- Reach consensus on implementation of the health-related articles of the Convention.

*The Minamata Convention on Mercury entered into force on August 16, 2017. Its objective is to protect human health and the environment from emissions and releases of mercury and mercury compounds that result from human activity. Sri Lanka became a Party to the Convention on 19 June 2017.*

*The 67th World Health Assembly, through its Resolution no. WHA67.11 (2014) called upon its member states to sign, ratify, and implement the Minamata Convention on Mercury and to address the health aspects of exposure to mercury and mercury compounds through collaboration between health authorities, environment authorities, and others. Providing advice and technical support to the member states, the World Health Organization (WHO) pilot-tested and then published the guide, "Strategic Planning for Implementation of the Health-related articles of the Minamata Convention on Mercury," to support national health authorities in understanding the implications of the Convention for national health programs and in planning the implementation of mercury risk assessment and control measures required by the Convention.*

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