

HEALTH SECTOR INVOLVEMENT IN THE MINAMATA CONVENTION ON MERCURY:

Outcomes of World Health Organization regional
workshops for ministries of health



World Health
Organization

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CONTENTS

	ACKNOWLEDGEMENTS.....	iv
	ACRONYMS AND ABBREVIATIONS	v
1	INTRODUCTION.....	1
2	African Region.....	3
3	Region of the Americas.....	5
	Kingston, Jamaica Workshop.....	6
	Montevideo, Uruguay Workshop.....	7
4	Eastern Mediterranean Region.....	9
5	European Region.....	11
6	South-East Asia Region.....	13
7	Western Pacific Region.....	15
8	CONCLUSIONS.....	17
9	BIBLIOGRAPHY.....	19
10	FOR FURTHER INFORMATION.....	19

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ACRONYMS AND ABBREVIATIONS

ASEAN	Association of Southeast Asian Nations
ASGM	artisanal and small-scale gold mining
CARICOM	Caribbean Community
CC	Collaborating Centre
CEHA	WHO Regional Centre for Environmental Health Action
GEF	Global Environment Facility
HBM	human biomonitoring
MIA	Minamata Initial Assessment
NAP	National Action Plan
PAHO	Pan American Health Organization
SIDS	Small Island Developing States
UNEP	United Nations Environment Programme
WHO	World Health Organization

1. INTRODUCTION

The World Health Organization (WHO) convened a series of regional workshops on health sector involvement in the implementation of the Minamata Convention in order to support awareness raising and networking among ministries of health to facilitate implementation of the Minamata Convention and the associated World Health Assembly Resolution WHA67.11 (2014). This brochure is intended to inform readers about the outcomes of the workshops, including the challenges and opportunities confronting health authorities in each region in relation to the Convention's health-related Articles, as well as needs for technical assistance.

Mercury is a naturally occurring element (chemical symbol is Hg) in the earth's crust. It is released into the environment mainly as a result of human activity. Mercury's behaviour in the environment and degree of toxicity depends heavily on its state and form. It exists in several forms: as elemental mercury, inorganic and organic mercury compounds. It is also considered to be a persistent pollutant and cannot be broken down or degraded into harmless substances. This means that once mercury has been brought into circulation in the biosphere by human activity, it does not "disappear" again in the time spans comparable to human lifetime and will need to be managed (stored or disposed) for the longer term. Once in the environment, mercury can be transformed by bacteria into methylmercury, where it enters the food chain, in particular, in seafood.^{1,2}

Artisanal and small-scale gold mining (ASGM) and coal burning are the major sources of anthropogenic mercury emissions to air. In the case of coal burning, mercury is emitted because it is present in coal as an impurity. In ASGM, mercury is intentionally used to extract gold, resulting in emissions to air and also

methylmercury, through worker inhalation of elemental mercury vapours during industrial processes, and through use of skin-lightening cosmetics. Depending on the form of mercury, it may have toxic effects on the nervous, digestive and immune systems, and on lungs, kidneys, skin and eyes. In particular, methylmercury exposure in the womb can result from a mother's consumption of seafood, adversely affecting a baby's growing brain and nervous system. Children are also particularly vulnerable to neurodevelopmental effects of mercury exposure.⁴

With the recognition that mercury is a threat to public health and environment, the United Nations Environment Programme (UNEP) Governing Council agreed in 2009 to the elaboration of a legally binding instrument on mercury.

The resulting Convention is a global treaty to protect human health and the environment from anthropogenic emissions and releases of mercury and mercury compounds. Its name recalls the city of Minamata in Japan, whose residents have greatly suffered from the effects of mercury poisoning since the early 1950s. The Convention entered into force on 16 August 2017. Updated information on countries that have become Parties to the Convention can be found at the website: <http://www.mercuryconvention.org/Countries/Parties/tabid/3428/language/en-US/Default.aspx>.

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