

**Human Health Effects of Environmental Chemicals Project Report**  
**WFPHA Annual Meeting**  
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**BACKGROUND**

In 1996, following resolutions by the UNEP Governing Council and World Health Assembly, the General Assembly of the WFPHA expressed concern, in a policy resolution, about the human health effects of Persistent Organic Pollutant Chemicals (POPs). Later in 1997 WFPHA established its POPs Project and requested that Peter Orris, MD, MPH, of the Great Lakes Center for Occupational and Environmental Safety and Health of the University of Illinois School of Public Health (A WHO Collaborating Center) develop a project to implement the intent of WFPHA resolution 96-2.

In 2000 the General Assembly of WFPHA specifically identified POPs pollution from health care activities as an area for improvement and pollution prevention activity. Over the last several years, the WFPHA project produced a monograph on POPs for public health professionals (now posted on the WFPHA web site) and participated in seminars in a number of countries. In addition it participated in the global negotiations process as a UN recognized public health NGO that led to the treaty signing this past year in Stockholm. The Stockholm Convention as the treaty is now called is a global agreement to protect human health and the environment from persistent organic pollutants (POPs).

During the last several years the POPS project has

1. Facilitated environmental public health programming at triennial WFPHA conferences.
2. Worked with Health Care Without Harm, a global coalition of health care professionals, planners, administrators, and environmental activists, to plan and teach seminars to health care professionals and environmental activists on the health care sectors contribution to global pollution and alternative practices to reduce waste.
3. Participated in the planning of a Global Environmental Facility funded World Health Organization /Health Care Without Harm project in seven countries to Demonstrate and Promote Best Practices in Reducing Medical Waste to Avoid Environmental Releases of Dioxins and Mercury from Health Care Practice. The project is being implemented in Argentina, India, Lebanon, Philippines, Latvia, Senegal, Vietnam.
4. During this period, the GCPP was working with national unions and international labor federations helping to increase programming in this area. The GCPP has worked with the Working Group on Work, Health, and the Environment of the International Confederation of Free Trade Unions. The ICFTU represents national union confederations in over 150 Countries. These activities has included participation in their biennial meetings, providing technical briefing on POPS at the ILO, and support for the labor delegation at the yearly UN sustainable development meetings. In addition the project represented WFPHA at the yearly sustainable development meeting at the UN in New York.

The WFPHA 2005 General Assembly recognizing that it had a growing policy history in the global chemicals policy area, including positions on Zero Waste, DDT, Nuclear Weapons, Asbestos, Mercury, and Tobacco amongst others, changed the scope of its POPs Project to the WFPHA Human Health Effects of Environmental Chemicals Project. With the broad mission of introducing public health concerns and approaches into the global environmental chemicals policy debate and alerting and involving public health practitioners in these debates. The particular emphasis of WFPHA on the public health aspects of these issues, particularly around asbestos, promoted the partnering of the WFPHA with international professional organizations and labor unions and further permitted the enlarging of WFPHA scope and influence.

### **WFPHA's Human Health Effects of Environmental Chemicals Project 2005 – 2006 Activities**

This past year has seen impressive developments in these activities facilitated by a \$25,000 grant, recently renewed for a second year, from the Panta Rhea foundation in the US. These activities have been undertaken as part of the Global Chemicals Policy Center of the Great Lakes Centers of Environmental and Occupational Safety and Health at the University of Illinois at Chicago School of Public Health that I direct.

#### **A. Bringing environmental issues to the international public health community:**

- 1) Continued participation in the **International Activities of Health Care Without Harm** with emphasis during this past year on the development of joint United Nations Environmental Program/HCWH global educational campaign to promote reducing mercury use in the health care industry. Regional meetings were held in Manila in the fall of 2005 and in Buenos Aires this past month. These meetings have attracted several hundred regional health care providers and administrators. The science, available alternatives, and practical methods of removal of mercury equipment have been highlighted. An African meeting is planned for this next year.
- 2) Participation in planning of the **GEF 7 Country Medical Waste Project** described above included the WFPH in 2005 in several planning meetings of the participating groups and staff as well as in the Inception meeting in Senegal which began to plan the country specific inventory activities under the PDF B phase of the project. This meeting was attended by Country Government and NGO representatives from Argentina, India, Philippines, Latvia, Senegal, and Vietnam as well as the UN agencies involved. The POPs project provided scientific expertise and teaching during this session. Several other meetings were attended during the year and additional UIC staff brought into the project to consult on the educational component of its activities.
- 3) The Project has assembled an **email list of 20 national focal points** for environmental health activities in member public health associations and has begun communicating with the list to bring information about environmental activities and issues of interest to national public health associations.
- 4) Last August, I attended **two meetings in Chile** - the first A Regional Meeting of Experts on Equity in Occupational Health Systems entitled a First Step in Equity in Occupational Health Systems Project organized by WHO/PAHO. With representation from throughout Latin America, this meeting discussed the function and structure of Occupational Health Systems in the Americas and how to evaluate the equity between and within countries.

This meeting provided a setting to explore ways of making bridges between the Health Care Without Harm work on Mercury reduction and governmental occupational health professionals in the hemisphere.

**B. Bringing a public health approach and organizational input into international environmental discussions.**

- 1) Participation as WFPHA Representative at the **Stakeholder Summit on Framing a Future Chemicals Policy** in Boston.
- 2) Participated as a WFPHA representative at a May meeting in Berkeley of **Environmental and Professional NGO's about global chemicals policy and the preparation for participation in the Strategic Approach to International Chemicals Management (SAICM)** preparatory meeting in September. Outside of the representative of the International Confederation of Nurses no other health organizations were present. Agreed to continue to serve on the continuations structure as a voice from the public health community.
- 3) Represented WFPHA as an NGO participant in the **Vienna at SAICM PreComm 3**

The concept of SAICM has been discussed by the United Nations Environment Program Governing Council (UNEP) since 1995. In February 2002, at its seventh special session, the UNEP GC agreed in Decision SS.VII/3 that the further development of a SAICM was needed, and requested UNEP's Executive Director to develop such an approach, based on the Bahia Declaration on Chemical Safety and Priorities for Action Beyond 2000 adopted by the IFCS Forum at its third session. This process was to entail an "open-ended consultative meeting involving representatives of all stakeholder groups," jointly convened by UNEP, IFCS and the IOMC.

The World Summit On Sustainable Development (WSSD) convened in August 2002, in Johannesburg, South Africa, and called for the development of SAICM by 2005, and whose 56TH WORLD HEALTH ASSEMBLY in May 2003 urged member states to contribute to SAICM through submission of possible health-focused elements, and submit a progress report to the Assembly before the SAICM process is concluded. A month later ILO followed suit. Preparatory meetings of Governments, UN agencies, Industry, Labor, and Environmental NGOs began to be held to prepare documents to caudify this consensus approach to chemicals management.

The 3<sup>rd</sup> meeting of the SAICM Preparations Committee met in Vienna at the end of September 2005. It was attended by 585 participants, of whom 403 were from Governments, 71 from intergovernmental organizations, 73 from nongovernmental organizations and 38 observers. 47 of these delegates (11.6%) identified as coming from a health related unit either related to the UN, national government, or NGO.

The WFPHA was the only health professional international membership NGO present. It participated fully in the discussions of the draft documents and sat in as an observer at the meetings of the Environmental NGOs. Daily and summary reports on this meeting are available through the Earth Negotiations Bulletin Vol. 15 Published by the IISD on their web site at [www.iisd.ca/chemical/saicm/prepcom3](http://www.iisd.ca/chemical/saicm/prepcom3).

## C. Developing joint Occupational and Environmental health initiatives between WFPHA and Trade Unions

### 1) International Confederation of Free Trade Unions:

With the resolution passed at the May General Assembly of the WFPHA, the Chemicals and Human Health Project joined the ICFTU in its campaign to secure a global ban on Asbestos. Shortly the activity was joined by the International Commission on Occupational Health (ICOH) the largest international professional organization in the Occupational Health Field. Jointly the three organizations announced the campaign publicly at the ILO Governing Council meeting in Geneva in June. In September they were joined as well by the International Society of Doctors for the Environment (ISDE) at their annual council meeting in Vienna after a presentation and request by the WFPHA.

a. Background: The ICFTU's analysis of the situation with respect to the elimination of asbestos divided countries into three clusters:

- *Cluster 1a and 1b*: Countries that have or will soon ban asbestos. 1b countries still either export or import asbestos, while 1a do not.
- *Cluster 2*: Countries that have not banned asbestos but show no record of trading in asbestos but the use of asbestos is very much suspected
- *Cluster 3a and 3b*: Countries that have not banned asbestos but either import or export it in varying degrees. 3a countries are the heaviest users.

b. Activities:

1. Union contact points have been identified from trade unions or other organizations in Bangladesh, Belgium, Brazil, Denmark, Finland, France, Italy, Liberia, Mexico, Norway, Philippines, Switzerland, Togo, United Kingdom, United States, Vietnam and Zimbabwe. An Electronic Forum has been created to commence communication with these and additional people as the campaign grows
2. Individual follow up meetings during September and October regarding the campaign have taken place between the ICFTU, the IFBWW, ILO Safe Work, ICOH, and WFPHA (represented by the GCPP).
3. It was recognized that a very basic awareness raising process needs to take place among trade union leaders about asbestos and its dangers. It was recommended to request ILO Safe Work to prepare and circulate something of an Asbestos Primer. Meanwhile the WFPHA Chemicals Project in conjunction with the University of Illinois has agreed to produce a draft clear basic PowerPoint that could be generally circulated amongst ICFTU affiliates for use in local unions.
4. Strategy meetings were held between ICOH, WFPHA, and the ICFTU to assess the best methods to raise the issue of an asbestos ban in various institutional settings such as the WHO Assembly and ILO Conferences.
5. As noted above the UIC GCPP was invited, as a WHO Collaborating Center, to attend 2 meetings in Chile. The second meeting organized by WHO/PAHO in collaboration with ILO and NIOSH concerned with the Implementation of the

ILO/WHO global Programme on the Elimination of Silicosis (GPES) in Latin America: Challenges and Opportunities. I made a presentation on the Asbestos hazard and its importance as part of a comprehensive anti silicosis campaign. There was discussion on how to integrate asbestos into the Joint ILO/WHO silicosis activities and how to involve the collaborating centers in occupational health.

## **2) Global Trade Unions Assembly on Labor and the Environment:**

I represented WFPHA at the Trade Unions Assembly on Labour and the Environment, held from 15 to 17 January 2006 at the United Nations Environment Programme headquarters, Nairobi, Kenya. The meeting was organized in conjunction with Sustainlabour and support from ILO. This was the first global meeting focusing on trade unions, labor and the environment nexus. Trade unionists from over 80 countries attended. For the first time, a collaborative initiative between the Labor Unions represented, Sustainlabour, and the UN agencies (ILO, WHO, and UNEP) was developed at this meeting based on an agreed detailed resolution written at the meeting and available at <http://www.will2006.org>.

## **3) Sustainlabour**

The World Summit on Sustainable Development, which took place in Johannesburg (2002), was a turning point for trade union involvement in sustainable development. Participation of trade union organizations in Summit discussions was extensive. There was an explicit acknowledgement of the role that trade unions can play in making the necessary changes and of the need for strengthening the social and employment dimensions of sustainable development. The International Confederation of Free Trade Unions (ICFTU) has shown its particular commitment to the results of the Johannesburg Summit and to the general objectives for sustainable development in a broader sense.

In this context, representatives of trade unions in Africa, Asia, Europe and Latin America have established the Sustainlabour Foundation. Board members include representation from the Commissions Obreras (Spain), the Central Unica de los Trabajadores (CUT - Brazil), Norwegian Confederation of Trade Unions (LO Norway) Public Services International, the Confederation of South African Trade Unions (COSATU), and the Malaysian Trade Union Congress.

I attended Sustainlabour Board meetings in April in New York to discuss their new web page and support for its further development and visited their offices in Madrid as a stop on trip to Senegal concerning the GEF Medical Waste Project. In October I sat in on the SustainLabour Board meeting in Brussels to discuss further cooperation and the Asbestos campaign.

## **4) Health Care Waste Handlers Project**

Upon the suggestion of Health Care Without Harm some years ago, the WFPHA has been pursuing the development of educational materials for health care waste handlers both domestically and abroad. This too is an issue that has overlap between the health and safety needs of workers and the impact of the materials they handle on

the community as a whole. The progress has been slow both in the writing of these materials and the securing of locations which they are thought to be useful. Several meetings have been held with the Public Services International Federation and the International Confederation of Nurses in Geneva to evaluate potential locations.

Collaborators have been located and through support of Panta Rhea a draft manual has been prepared by senior union health and safety professional in the US and an Occupational health professional in Ethiopia. It is hoped that in the next few months these materials can be finalized and tested.

#### **5) WHO – Labor Union Collaboration on Environmental Health.**

The WFPHA project was able to facilitate a meeting to help implement the plans generated by the Nairobi Trade Union Assembly on Labour and the Environment between the new Public Health and Environment Department of WHO, the International Confederation of Free Trade Unions, Sustain Labour, and the WHO Collaborating Centers in Occupational Health. This was held in Geneva on April 21, 2006.

This meeting concludes that the meeting represented a useful first step in establishing a dialogue between WHO and Trade Unions in the area of occupational health and safety as a follow up of WILL2006. There are opportunities for establishing synergies between the activities of WHO and the Trade Unions both in policy and in technical areas. Trade Unions will be invited to provide comments on the draft WHO Global Plan of Action on Workers

Specific collaboration between WHO and Trade Unions can be established in the short term on the following topics:

- Elimination of asbestos related diseases;
- Prevention of chemical risks at the workplace;
- HIV/AIDS at the workplace;
- National profiles for occupational health and safety;
- Prevention of work-related stress

Such collaboration would consist of exchange of available information, participation in events organized by WHO or the Trade Unions and developing joint projects.

#### **D. WFPHA Activities at the World Health Assembly 2006:**

##### **1) Prepared a Delegates Briefing on the State of the Science concerning Asbestos in conjunction with the Knowledge Management and Sharing program of the WHO.**

This briefing was widely advertised for noon on the opening day of the WHA as a WFPHA provided event for the delegates and staff. Unfortunately with the death of the Director General that morning the seminar itself was cancelled and could not be rescheduled for this assembly.

**2) WFPHA prepared and delivered an intervention in the plenary concerning SAICM.**

This was well received by both delegates and staff of WHO and UNEP and was delivered by our colleague Anna Hall, RN from Health Care Without Harm, as I was not able to be present at that point in the agenda. The text follows:

*Intervention Concerning Strategic Approach to International Chemicals Management*

*Agenda Item 19, Document A59/41 59<sup>th</sup> World Health Assembly*

*Professor Peter Orris, MD, MPH Director, Human Health Effects of Chemicals Project*

*World Federation of Public Health Associations*

*Mr. Chairman:*

*Thank you for the opportunity to speak in support of this important resolution on the Strategic Approach to International Chemicals Management. My name is Anna Gilmore Hall and I presenting a statement from Dr. Peter Orris, the Director of the Human Health Effects of Chemicals Project of the World Federation of Public Health Associations, an NGO representing public health professionals in 70 associations from 65 countries throughout the world.*

*At the outset let me express the shock and condolences of our organization for the untimely death of Dr. Lee earlier this week. He and his leadership of WHO's efforts to galvanize the world for the improvement of the public's health will be sorely missed.*

*During this past year we participated with many governments, UN Agencies, and NGOs in the preparation of the SAICM documents, some of which are contained in Appendix II of A59/41. Specifically we had the opportunity of participating in the preparatory meeting in Vienna in the fall of 2005 that helped to perfect the documents adopted at the International Conference in Dubai on February 6, 2006.*

*As public health professionals we are concerned that a substantial proportion of the global burden of disease is caused by environmental exposures to chemicals produced for primarily for commercial purposes. The safe management of these chemicals, including the development of safer substitutes, is an important public health task. This task must be undertaken on a global level due to the transnational impact of many of these chemicals through atmospheric transport and often their bio persistence.*

*In addition, we are keenly aware of the special vulnerability of children, the lack of research on the impact of chemicals on the developing fetus and children, and the need to formulate strategies directed specifically at protecting the health of children.*

*We must note that our urgency in these matters is stimulated by our daily experiences as health care providers due to our exposure to many toxic chemicals while rendering care to our patients. Likewise, the waste of our industry often exposes our patients and their communities to chemicals hazards as well. It is for this reason that we are proud to collaborate with the Health Care without Harm Coalition to reduce these dangers.*

*We must observe though, that all too often there is a dysfunctional separation of international and national agencies charged with the protection of the environment from those of public health. This lack of coordinated action too often reduces the effectiveness of interventions designed to reduce exposures to toxic chemicals. It is encouraging to note*

*therefore, that there have recently been exciting initiatives undertaken to promote joint actions on both national and international levels such as the Strategic Alliance now in its second year in the Western Hemisphere with the active participation of the Pan-American Health Organization.*

*This is why we applaud, as well, the continuing involvement in the SAICM process projected for WHO by this resolution. It is only through such coordinated global activities bringing the important priority of human health to environmental discussions and interventions that we will ultimately reduce this unnecessary burden on the health of all peoples. The World Federation of Public Health Associations pledges our support to this initiative and offers to join with WHO, as an affiliated NGO, in developing new and creative programs to accomplish these tasks.*

*Thank you,*

**3) Facilitated participation of the labor unions and HCWH at the Convention:**

Through our official status as a WHO NGO and with the help of Dr. Petrakova of the WHO staff we were able to facilitate the participation in the Meeting of the International Confederation of Free Trade Unions for the first time. The labor unions met with delegates and distributed materials concerning their extensive activities with respect to HIV/AIDS and Asbestos. This was very well received and the WHO staff was particularly happy about this growing relationship. In addition Health Care Without Harm was again able to be present and participate in the activities around the meeting due to our help. Both groups were very pleased and appreciative of this help and will be applying for their own status at future Assemblies.

**4) Participated as an observer in the meeting of the World Health Professionals Alliance Leadership Forum 2006**

This group is a coalition of the International Confederation of Nurses, the World Medical Association, and the International Pharmaceutical Federation, and the World Dental Association. The meeting was quite interesting and a brief discussion was held as to a potential relationship with WFPHA. While these groups are much larger and their international structures have substantial support the involvement of WFPHA in some manner would be mutually beneficial and bears further discussion.

In conclusion this has been a year of increased activity and influence. The stimulation and involvement of WFPHA member public health associations has lagged behind this external activity, but with reemphasis during this next year and facilitated by the web and new electronic communication methods this will improve substantially.

Thank you.

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