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# International SAICM Implementation Project (ISIP)

In 2010, in an effort to demonstrate SAICM implementation via IPEN Participating Organizations, IPEN launched an International SAICM Implementation Project, also known as ISIP. ISIP aims to mobilize resources for initial enabling activities pertaining to national priorities, in keeping with the work areas set out in the strategic objectives of section IV of the SAICM Overarching Policy Strategy.

In particular, the ISIP supports the Governance objective of SAICM's Overarching Policy Strategy paragraph 26, which calls for enhanced "cooperation on the sound management of chemicals between Governments, the private sector and civil society at the national, regional and global levels."

In addition, ISIP builds on the 2008-2009 Global SAICM Outreach Campaign to raise awareness about SAICM and strengthen collaboration among the public interest, health and labor sectors.

#### ISIP Objectives

ISIP's four objectives include:

- Promoting the need for sound chemicals management
- Advancing National SAICM Implementation
- Promoting global SAICM implementation by global civil society
- Building capacity among NGOs developing countries and countries with economies in transition

**Title of activity:** Establishing Framework for "Mercury Free Healthcare in Nigeria": Campaign for Alternatives to Mercury in the Health Care Sector in Lagos State, Nigeria **NGO:** Sustainable Research and Action for Environmental Development (SRADev Nigeria)

Country: Nigeria
Date: August 2012

#### **Elements of SAICM Covered:**

Promote reduction of the risks posed to human health and the environment (57); Help develop comprehensive national profiles or country situation reports about mercury (1, 166); Programs to monitor mercury to assess exposure (66, 82); Promote the development and use of products and processes that pose lesser risks (44); Take immediate action to reduce the risk to human health and the environment posed on a global scale by mercury in products and production processes (59); Participation in activities related to the negotiation of a legally binding instrument on mercury

# Description of mercury that is available in the market:

- ✓ Mercury in cosmetics
- ✓ Mercury in medical measuring devices
- √ In dental amalgams

# Description of the most common forms of mercury exposure:

- ✓ Through mercury in cosmetics
- √ Waste incineration (municipal/general waste)
- ✓ Computers products (e-wastes)
- ✓ Light sources with mercury (fluorescent tubes and compact fluorescent lamps)
- ✓ Batteries with mercury
- ✓ Laboratory chemicals
- ✓ ASGM
- ✓ Medical devices (thermometer, sphygmomanometer)

#### **Description of human sources of mercury:**

Humans' activities related to above forms of exposure.

#### Description of the levels of mercury release and exposure:

Very scant information is available, the major information is found in:

- 1. Country Report Global Mercury Assessment, Nigeria
- 2. Nigeria-UNEP-Hg Toolkit Calculation-Inventory: Nigeria-Mercury-Inventory Report, all by the Federal Ministry of Environment.

# **Description of the damage caused by mercury:**

The toxicity of mercury depends on its form; the organomercurials are often seen to be more inhibitory than their inorganic forms. Generally, metallic mercury is only slightly toxic to man when taken orally. Oral dose of 100 - 500g only rarely causes stomatitis and diarrhoea, but inhalation of mercury vapour causes irritation and destruction of lung tissues and may also affect the central nervous system. Chronic exposure to mercury vapour is the most dangerous exposure to man. Resulting symptoms are irritability, excitability, restlessness, irrational outbursts of temper, depression headaches and dizziness, amongst others.

Soluble salts of mercury are very toxic. Mercury Chloride produces corrosion of the intestinal track leading to bloody diarrhoea, colitis and death from kidney failure. There is no known reported case in Nigeria, but there are so many reported cases of food poisoning in Sweden, Mexico, USA and the celebrated Minamata incidence in Japan.

#### Description of the laws currently regulating mercury:

The Federal Government of Nigeria, concerned about the harmful and deleterious effects of mercury and its compounds on human health and the environment, ratified and signed relevant international instruments and conventions; and domestically empowered the Federal Ministry of Environment (FEPA), now National Environmental Standards and Regulations Enforcement Agency (NESREA), and other line ministries to promulgate and prescribe standards and regulations for the control and removal of this hazardous substance.

So far, the only known regulations in place are for cosmetic products in Nigeria, as contained in Supplement to Official Gazette Extraordinary No. 31c, Vol. 82, 29<sup>th</sup> December, 1995 – Part B. They are referred to as the Cosmetic Product (Prohibition of Bleaching Agents etc) Regulations, 1995. The regulations, among other things, prohibit

the inclusion of skin bleaching agents in cosmetic products manufactured, sold or distributed in the Nigerian market and further specify the penalty for any person who contravenes any of the provisions. The bleaching agents identified in the regulations were hydroquinone, corticosteroids, mercury and mercury compounds.

#### Description of the efforts to deal with mercury:

Development of standard for environmental media, actions and regulations that control releases from environmental sources that contain mercury, actions and regulations on products that contain mercury and other standards, actions and programmes relevant to mercury.

# Description of what forces support and oppose the Mercury Treaty, the public participation consultation process, and the level of public awareness of the treaty process:

No national known forces are in opposition to the Mercury Treaty as yet. The public participation consultation process is on-going but very low and restricted to the urban centres alone, if any. Generally, public awareness of the treaty process is at the lowest.

#### **Project Outcome:**

# Description of the activity conducted: Preliminary Work

Prior to actual commencement, a pre-project sensitization meeting with relevant stakeholders was held on April 27, 2012 at Lagos State Ministry of Health at 12noon. The meeting had in attendance twenty-four (24) stakeholders. The Executive Director, SRADev Nigeria, Mr. Leslie Adogame gave an overview of the Mercury-Free Healthcare Campaign and the proposed project activities. He highlighted on the various phases and activities involved in the project, emphasizing the justification for the phase out of mercury in healthcare. He called for cooperation throughout the project period.

Three 'pilot' hospitals were (jointly with the Ministry of Health) selected: Lagos State University Teaching Hospital (LASUTH), Lagos Island General Hospital and Primary Healthcare Centre, Festac Town, which represent tertiary secondary and primary healthcare facilities, respectively. This gave a wide representation of three local government areas (Ikeja, Lagos Island and Amuwo-Odofin) as well.

The project commenced with documentation of existing data on the status of handling of mercury devices and waste through a baseline survey from available information and reports from the stakeholders. This was followed with visits to the identified 'pilot' hospitals for on-the-spot assessments.

#### Assessment Fieldwork

Prior to the actual fieldwork, contact was made to the three selected hospitals by the Ministry officials to prepare them for the assignment and solicit their cooperation. The questionnaire draft was vetted by the Ministry of Health who made their own input. The questionnaire was pre-tested at a private hospital in lkeja (Fellowship Hospitals Limited) to ensure that it met our expectation.

The fieldwork employed a purposive sampling method targeted at the Unit Heads using a well-structured questionnaire with detailed key information. The questionnaires were administered to selected relevant personnel (mostly nurses who make use of the devices on daily basis) in the hospitals. This was done by an interviewer-based method to ascertain their perception and handling as relates to mercury-based devices and waste management practices in their health care facilities. Four (4) interviewers were involved, two from SRADev Nigeria and another two from the Ministry of Health.

SRADev Nigeria also used the opportunity to develop an additional questionnaire on Comparative Economic Study of Costs of Mercury and Non-mercury Thermometers (although this was not within the scope of this project). All questionnaires administered were then analysed.

# Stakeholders' Sensitization Workshop

The awareness raising/sensitization workshop took place on July 3, 2012 at Lagos Chamber of Commerce and Industry (LCCI), Ikeja, Lagos, after much delay by the Ministry of Health due to bureaucratic bottlenecks. The programme commenced at 11:00am and was chaired by the Permanent Secretary in the Ministry of Health, Dr. Femi Olugbile. About forty (40) participants' from the relevant health institutions attended the workshop, representing a large number of relevant stakeholders.

#### Impact on target groups:

The impact of the project on target groups includes the following:

- ✓ Increased awareness among healthcare professionals on mercury-free health practices and alternatives to mercury in healthcare.
- ✓ Increased awareness and knowledge on the health implications from mercury use for improved regulation and management of the sector by decision makers, regulators, and local government. The health sector concern will encourage pressure for policy action and encourage their support.
- ✓ Expected reduction in mercury-associated health problems as a result of risk management capacity was built.
- ✓ Increased knowledge of best environmental practices in their occupations.
- ✓ Expected change or improved behavioral practices in the use of mercury-based equipment.

On the overall it helped to identify mercury waste handling practices in the healthcare sector in Lagos State, the level of exposure to risk by those involved in use of medical devices containing mercury and increasing the awareness of all key (primary and secondary) stakeholders towards appropriate measures to be adopted in achieving the proposed policy framework.

#### Impact on target policies:

The major impact of the project was the pronouncement by the Permanent Secretary, Lagos State Ministry of Health, during the stakeholders' sensitization workshop, that Lagos state would stop at nothing to pursue the mercury free healthcare programme for the state and further called on the federal government to initiate legislation and

programmes to ban mercury used in health care. This was a major achievement as it was well circulated by the media and proved a major turning point for the nationwide campaign in view of the very strategic nature of Lagos State government in the scheme of national affairs. Following this, a few states around the southwest are indicating interest to SRADev Nigeria and the Ministry of Health for a similar sensitization programme.

The target policy is towards a framework for mercury elimination in health care institutions in Nigeria and the outcome of the project sufficiently created the needed basis for achieving this goal. The development of a guide for eliminating mercury from healthcare establishments is still on-going with the Lagos State government.

#### Outreach to stakeholders:

Relevant stakeholders that participated in the project activities cut across healthcare, environment manufacturing, regulatory and media sectors. Specifically, they include the following:

- Lagos State Ministry of Health,
- Nigeria Custom Service,
- Manufacturers' Association of Nigeria,
- Association of Medical Laboratory Scientists,
- Lagos State Ministry of Environment,
- Lagos State Waste Management Authority,
- Lagos State Environmental Protection Agency,
- Health Service Commission, and
- Media.

# **Deliverables, outputs and/or products:**

Press release (and resulting media reports)
Workshop papers
Mercury survey used in hospitals
Photos from workshops and hospital surveying
Long project report

#### **Communication efforts:**

The project from inception developed a communication strategy/plan which involved some identified media (electronic/print). At first, a press release was circulated to the media personnel prior to the workshop detailing what the projects aims and objectives were and the activities thereof.

Other communication materials and efforts employed are:

- ✓ Use of focused video documentary during the workshop
- ✓ Circulation of IPEN (posters, handbooks and leaflets) materials on mercury
- ✓ Circulation of papers delivered during workshop to key stakeholders

Find below some newspaper publications that could be tracked on-line following the coverage of events:

- 1. http://www.guardiannewsngr.com/index.php?option=com\_content&view=article&id =90971:sradev-partners-lagos-on-mercury-sensitisation-workshop-&catid=25:property&Itemid=655
- 2. http://www.ngrguardiannews.com/index.php?option=com\_content&view=article&id =92386:lagos-sradev-urge-ban-on-mercury-containing-devices&catid=25:property&Itemid=655
- 3. http://www.noharm.org/global/news/2012/jul/news2012-07-20.php



Pix 1-3: LTV pressmen during the Stakeholders' Workshop

The workshop was thereafter aired on Lagos television, the state owned electronic media a day after the programme.

# Recommendations, from a public interest, NGO perspective, on reducing and eliminating human sources of mercury:

It is hereby recommended as follows:

- i. A more detail assessment of the current mercury usage and waste management programmes is necessary by the Lagos State government. The need for a detailed cost comparative analysis between mercury and non-mercury containing devices.
- ii. Immediate need for government to develop mercury clean up and waste handling and storage procedures towards transition to mercury free alternatives. Safe handling procedures which minimise and eliminate patient, occupational and community exposures need to be urgently put in place in all healthcare establishments in Lagos.
- iii. The immediate need for government to carry out a comprehensive hospital inventory of mercury use categorised into immediate replaceable and gradually replaceable.
- iv. The need for the Lagos State government to support the ban for mercury containing devices and effectively promote the use of mercury free alternatives.

- v. The need for sustained awareness raising and urgent need for capacity building programmes for healthcare workers in Lagos State.
- vi. Necessary for government of Lagos State to commit human and financial resources to sound management of healthcare waste containing mercury, and generally programmes that would ensure eventual complete phase out.