

Montevideo Declaration on the Minamata Convention 8 October 2015

The representatives of the Ministries of Health of Argentina, Bolivia, Brazil, Chile, Colombia, Costa Rica, Cuba, El Salvador, Guatemala, Honduras, Mexico, Nicaragua, Panama, Paraguay, Peru, Uruguay and Venezuela, and of civil society and academia, meeting in Montevideo, Uruguay, on 8 October 2015 at the WORKSHOP ON HEALTH IN THE IMPLEMENTATION OF THE MINAMATA CONVENTION ON MERCURY

The Parties,

Recognizing that mercury is a chemical of global concern owing to its long-range atmospheric transport, its persistence in the environment once anthropogenically introduced, its ability to bioaccumulate in ecosystems and its significant negative effects on human health and the environment,

Noting that the Minamata Convention contains an article on health-related aspects in addition to other relevant provisions, and that the Convention imposes a number of obligations on Parties, requiring, where applicable, the adoption of measures for the health and allied sectors such as the gradual elimination, through the prohibition of the manufacture, import or export prior to 2020, according to the dates of entry into force of the Convention, of mercury thermometers and sphygmomanometers, cosmetics containing mercury — including skin lightening soaps and creams —, topical antiseptics containing mercury and dental amalgam with added mercury, and the development of public-health strategies in national action plans to eliminate or reduce the use of mercury in the mining industry, unless the amounts involved are declared to be negligible;

Endorsing the implementation of World Health Assembly resolution WHA67.11 of May 2014 on the role of WHO and ministries of health in the Minamata Convention on Mercury;

Recalling the public health impacts of exposure to mercury and mercury compounds: the role of WHO and ministries of public health in the implementation of the Minamata Convention;

Recalling the renewed commitments of the post 2015 development agenda (25-27 September 2015), the sustainable development goals contained in the final document of the United Nations Conference on Sustainable Development (Rio+20) (Rio de Janeiro, Brazil, 20-22 June 2012) entitled “The Future We Want”, the 2010 Adelaide Declaration on Health in All Policies, and the 8th Global Conference on Health Promotion, held in Helsinki in 2013, which called for collaboration between all sectors to promote public health, with a plan of action adopted by PAHO in 2014, the Universal Health Coverage policy and strategy adopted by PAHO in 2013; and the Declaration of the Ministers of Health of MERCOSUR and Associated States on the Management of Chemical Substances (June 2013), signed at the 34th meeting in Montevideo, Uruguay;

Recalling that the objective of the Minamata Convention on Mercury is to protect human health and the environment from anthropogenic emissions and releases of mercury and mercury compounds;

Mindful that the Minamata Convention on Mercury encourages Parties to:

(a) Promote the development and implementation of strategies and programmes to identify and protect populations at risk, particularly vulnerable populations, and which may include adopting science-based

health guidelines relating to exposure to mercury and mercury compounds, setting targets for mercury exposure reduction, where appropriate, and public education, with the participation of public health and other involved sectors;

(b) Promote the development and implementation of science-based educational and preventive programmes on occupational exposure to mercury and mercury compounds;

(c) Promote appropriate health-care services for prevention, treatment and care for populations affected by exposure to mercury or mercury compounds; and

(d) Establish and strengthen, as appropriate, the institutional and health professional capacities for the prevention, diagnosis, treatment and monitoring of health risks related to exposure to mercury and mercury compounds;

Stressing the importance of financial, technical, technological, and capacity-building support, particularly for developing countries, and countries with economies in transition, in order to strengthen national capabilities for the management of mercury and to promote the effective implementation of the Convention;

Noting that nothing in this Convention prevents a Party from taking additional domestic measures consistent with the provisions of this Convention in an effort to protect human health and the environment from exposure to mercury in accordance with that Party's other obligations under applicable international law;

Have agreed that:

(a) It is vitally important that WHO/PAHO support the implementation and coordination of activities to advise and support Member States in their efforts to enforce the Minamata Convention on Mercury, including mobilizing funds and in respect of all other health-related aspects envisaged in WHO/PAHO work programmes, with a view to promoting and protecting human health;

(b) WHO/PAHO must support Member States in developing and implementing strategies and programmes to identify and protect populations at risk, particularly vulnerable populations, including communities in areas affected by artisanal or small-scale gold mining, which could include the approval of science-based health guidelines relating to exposure to mercury and mercury compounds, setting targets for mercury exposure reduction, where appropriate, and public education, with the participation of public health and other involved sectors;

(c) it is necessary and appropriate that ministries of health in Member States should designate a focal point to implement national measures in accordance with the provisions of the Minamata Convention.