Involvement of Serbian health sector in 2 fields deriving from Ostrava Declaration (2017)


2. “Development of a road map to enhance health sector engagement/contribution to sound chemicals management in Serbia till 2030“ (14 Feb - 31 March 2021), WHO
Road maps - outcomes of both projects

Precondition for producing RM – good Gap Analysis

Project teams/stakeholders:
- Institute of Public Health of Serbia - implementing agency
- Ministry of Health
- Ministry of Environment Protection/Department for chemicals
- SEPA
- Mining and Metallurgy Institute Bor (contaminated sites)
- Faculty of Farmacy, Toxicology department (chemicals)

Aims:
- positioning health sector in multisectoral management of contaminated sites and chemicals
- Defining future steps and key stakeholders
Documents, methodology & research and information

Gap Analysis Report

Roadmap for sound management of CSs in R.of Serbia through multisectoral approach

Adapting SENTIERI epidemiological approach to current availability of health and environment data
Elements of the Roadmap

- **Aim** of this document
  - clearly demonstrate the rationale, the focused target, and methodology on which necessary future activities should be based to achieve the main goal of improving the synergies in multi-sectorial approach to sound management of contaminated sites in Serbia, both on local and national levels.

- **More specific objective**
  - to integrate all relevant social capacities in order to establish a unique, adequate and operational system for monitoring the effects of industrial production on deriving from it contaminated sites and the exposed population living at their vicinity.
Methodology

I. Gap Analysis Report

Deficiencies

RECOMMENDATIONS

II. STRATEGIC PLAN (ROADMAP)

- Expanding the knowledge base
- Monitoring & reporting
- Leadership & cooperation
- Strengthening institutional capacities

-ACTIONS -INDICATORS EXPECTED RESULTS TIMEFRAME
I. Expanding the knowledge base

Building and disseminating the evidence and knowledge relating to:

• the impacts on health of CSs,
• the effectiveness (in health terms) of policies, and interventions to address contamination and its sources that have been undertaken by different sectors.
• identifying knowledge gaps and the promotion of innovation and research needed to address the impacts CS on health;
II. Monitoring and reporting

- Harmonization of environmental monitoring at CSs (methodologically: measuring points, dynamics and test parameters, in line with the situation on the ground) MEP, SEPA, IPHs Network, local self-government

- Establishing of a working group and drafting bylaws regulating the CS Cadastre and the soil monitoring program - MEP, Government of the RS

- Creating an application for delivering data to the CS Cadastre - SEPA

- Training of the person responsible for customer support in sending data, checking and processing of data, as well as maintenance of the CSs information system for delivering data to SEPA; SEPA

- Defining HIA indicators for monitoring impact of environment at CSs on health of the exposed population - MoH, MEP, SEPA, IPHS

- Development of information sub-systems and models for assessing the impact of pollution from the environment of the CS on the health of the exposed population - SEPA, IPHS, IPHs Network
III. Leadership and coordination; Leveraging health sector leadership and coordinated action at the country, region and local levels in order to enable an appropriate and adequate response to the dimension of environmental health issues related to CSs.


- Adoption of the Plan of horizontal and vertical communication and coordination of the activities of the multisectoral working body

- Responsibility of: MoH & Intersectorial expert body
IV. Strengthening institutional, technical and financial capacities

- Building the capacity to analyze and influence policy and decision-making processes in support of joint action on environmental pollution and health in CSs:

- Support the development of strategies and action plans to reduce overall pollution and health risks, at national level or in local areas, as well as to support the implementation of international recommendations like those provided by WHO.

- The aim of the activities in this area is to strengthen the capacities, above all the institutional ones, in order to create a center of knowledge and coordination for program monitoring of the impact of contaminated sites on the environment and health of the population.

- Strengthening the technical and personnel capacities of laboratories of the IPHs creates conditions for laying the foundations for human biomonitoring, which plays a vital role in the process of assessing the exposure of the population to hazardous substances.
Capacity building/1

- Establishment of an organizational unit (OU) for monitoring the impact of CSs on the environment and health of the population at IPHS
- Defining the activities of the OU
- Development of a customized methodology for EHIA of the exposed population:
  - Customize methodology based on the SENTIERI method
  - Adopt methodology
  - Testing methodology in a pilot project
  - Develop an SOP for the application of methodology
  - Application of methodology in the Program of General Interest of the MoH
- Establishment of a sustainable system for financing environmental monitoring - Competent ministries, SEPA
- Harmonization of capacities for human biomonitoring in accordance with the needs and situation on the ground

- Stakeholder entity: OU for monitoring the impact of CSs on E&H of the population (IPHS), competent ministries, SEPA
Technical and HR capacity building/2

- Capacity assessment of laboratories in terms of staff, equipment and space
- **Assessment of needs** in terms of equipment, personnel, space and finance for capacity building of HBM laboratories
- Raising the technical capacities of laboratories (equipment, methods ...)
- Conduct training for capacity building of human resources for the implementation of HBM
- Visits / training in EU countries' laboratories

- Development of **SOPs for determination of hazardous substances in human biological material**

- **Stakeholder entity:** OU for monitoring the impact of CSs on E&H of the population (IPHS), competent ministries, SEPA
**Advantages & misadvantages of this document:**

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<tbody>
<tr>
<td>A good starting point for better management of CSs through multisectoral approach</td>
<td>Only 2 ministries involved in the „multisectoral“ cooperation; any further step should involve</td>
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<tr>
<td>Gives a realistic picture of needed capacity building in all of the 4 fields</td>
<td>CB measures need to be harmonized within a broad umbrella of institutions and ministries</td>
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<td>It focuses on vulnerable population groups exposed to contamination with hazardous substances</td>
<td>It does not include occupational exposure assessment for workers at the CSs</td>
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<td>It speaks of the awareness raising and education of the population exposed to harmful effects of CS</td>
<td>It says nothing on the issue of COMMUNICATING RISKS</td>
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<tr>
<td>Willingness to proceed in improving and adapting new epidemiological methods in order to implement ecological epidemiological studies linked to CSs</td>
<td>Defined environmental data still not available in the scope that fits the needs for correlating with health data, for reliable epidemiological studies.</td>
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Road Map for involving health sector in chemicals management

ENHANCING HEALTH SECTOR ENGAGEMENT/CONTRIBUTION TO SOUND CHEMICALS MANAGEMENT IN SERBIA TILL 2030

ROAD MAP

INSTITUTE OF PUBLIC HEALTH OF SERBIA

Action Plan

I. Leadership and Coordination
II. Institutional Capacity
III. Knowledge & Evidence
IV. Risk Reduction
Activities crucial for the Road Map implementation

• Establishing of a Joint body for Chemicals and Health by the Ministry of Health (Public Health Sector):
  ✓ multistakeholder character
  ✓ implementing the RM activities, in all 4 segments
  ✓ enables rapid response of all sectors in activities according to IHR, concerning chemicals
A 3rd step in involving health sector in chemicals.....

• WHO supported project: „Strengthening of national capacities for assessment of chemicals risks to guide risk reduction decision“ (June-November 2021)
• Implementing Agency: IPHS, supported by the MoH

  o To review and update national methodological documents on chemicals RA (individual chemicals and combined risks) and to develop proposals for infrastructure development based

  o To prioritize chemicals for further assessment of risks

  o To map health risks of 1-2 chemicals to demonstrate benefits of RA for decision-making
Key words for the new beginning.....

- **Capacity building:** Who? What? Where? How much?
- **More** involved **stakeholders** (sectors, institutions)
- Stronger involvement of the **local level**
- **International cooperation** (WHO, UNEP....SAICM)
- Moving from **project** to **programme** activities
- **Corporate responsibility** (PPP)
- **Future cooperation of participants** in the project for stepping forward is a **MUST!**
THANKS FOR YOUR ATTENTION!