

Asian Asbestos Congress 2006 in Bangkok

The Bangkok Declaration on elimination of asbestos and asbestos-related diseases

Preamble

The Asian Asbestos Conference was organised by the Ministry of Public Health, Thailand on 26-27 July, 2006, with Co-organization of the Ministry of Labour, Thailand and co-sponsored by the International Labour Office (ILO), the World Health Organization (WHO), International Ban Asbestos Secretariat (IBAS) and the International Commission on Occupational Health (ICOH). The Conference was attended by 300 participants, from 26 Asian Pacific, African, European and North-American Countries, including experts, administrators, representatives of Building and Woodworkers International (BWI) and industries.

The Conference,

- recalling the ILO Resolution on Asbestos, the ILO Conventions on Occupational Cancer (No. 139), Safety in the use of Asbestos (No. 162) Occupational Safety and Health (No.155), Occupational Health Services (No. 161) and Labour Inspection (No. 81),
- recalling the WHO Global Strategy on Occupational Health for All and the WHA Resolution 58.22 on Cancer Prevention and Control,
- considering the ICOH International Code of Ethics for Occupational Health Professionals, and having discussed the situation of asbestos exposures and related morbidity and mortality in Asia, and compared national asbestos experiences and highlighted international developments regarding the global asbestos epidemic, has thereby agreed on the following appeal to Governments, Inter-Governmental and other International Organizations, NGOs, Professional Occupational Health and Safety and Public Health Organizations, Industries, Businesses and other Communities:

1. Total Ban of Asbestos

Asbestos mining, the use and recycling of asbestos and asbestos-containing products should be totally banned in all countries. The removal and disposal of existing asbestos must be conducted under the stringent regulation and control by following the principle of highest level of protection.

2. Protection of Workers and the Public

In protection of health and safety of workers from asbestos hazards, primary prevention must be taken as an over-arching principle. Good practices guidelines by Inter-Governmental Organizations on prevention and elimination of asbestos hazards must be considered and implemented at national level.

Without prejudicing the primary responsibility of the Employers and Producers of asbestos and related products and the responsibility of the national Governments to safeguard the safety and health of workers and the general population, the programs and measures for asbestos risk management must be developed in collaboration and with the active participation of the at risk groups.

3. Alternatives

Numerous safer alternatives are available and should be used in substitution for asbestos. International data bank and guidance on the properties of substitutes, their availability and use should be organized.

4. Exchange of Information

Up-to-date and accurate information on the health hazards related to use of asbestos should be accumulated and disseminated through collaborative actions taken by Inter-Governmental Organizations, national governments, occupational health and safety experts, interest groups and other relevant organizations including Trade Unions and Employers' Organizations.

Awareness raising campaigns on asbestos hazards must be undertaken, implemented and monitored systematically.

5. Just Transition and the Prevention of Asbestos Dumping

Every effort should be made to secure effective transition towards non-asbestos technologies. Moves to transfer asbestos production and disposal to developing and newly industrializing countries should be prevented through Inter-Governmental and other International Organizations by using their instruments and through national legislation and other national actions, including National Action Program on Asbestos.

6. Corporate Social Responsibility

Multinational Corporations with major production facilities in countries where asbestos is banned must adopt corporate global policies for avoiding the use of new asbestos products and carefully managing in-place asbestos products in existing infrastructure.

7. Surveillance, Fair Compensation and Treatment of Asbestos-related Diseases

Programs for the earliest possible detection and appropriate surveillance of asbestos-related diseases among exposed workers must be organised at national level. Asbestos patients and their families must be appropriately and without delay compensated. The asbestos-injured patient must have access to competent diagnostic and treatment services and necessary support services must be provided. Empowerment of patients and their families should be regarded as a high priority.

8. International Collaboration:

International collaboration on asbestos elimination, management and control must be strengthened. Such collaboration must include the active participation of asbestos patients, workers, trade unions, politicians, employers and their organizations, academics and researchers, lawyers, grassroots organizations, other relevant agencies and interested groups in industrialized and in developing countries in both the Northern and Southern hemispheres. Successful strategies identified through such collaboration should be exchanged through existing and new networks.

International Development Banks must adopt best practice policies to avoid the use of asbestos and asbestos products in new projects, carefully manage in-place asbestos products and support the development of safer alternatives in order to facilitate the effective implementation of national asbestos bans.

Human beings have the right to work and to live in a healthy environment. The tragic repercussions of the widespread epidemic of asbestos-related diseases must be prevented as a fundamental human right.

Bangkok 27 July 2006

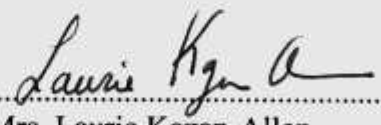
On behalf of the Conference participants,



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Dr. Kamjad Ramakul
Chairman of the Asian Asbestos Conference
2006, Bangkok



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Professor Jorma Rantanen
President, International Commission on
Occupational Health, Helsinki



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Mrs. Laurie Kazan-Allen
International Ban Asbestos Secretariat, London