IMPLEMENTATION OF THE GHS

Cooperation with other international organizations

Cooperation between the World Health Organization and the United Nations Sub-Committee of Experts on the GHS

Transmitted by the World Health Organization (WHO)

Purpose

1. The purpose of this document is to provide an update to the Sub-Committee on the status of the work being undertaken by World Health Organization (WHO) to assist implementation of the Globally Harmonized System of Classification and Labelling of Chemicals (GHS).

Background

2. For WHO and its Member States, health is a key aspect of human security and a global health agenda to address the underlying determinants of health is being implemented. Setting norms and standards, promoting and monitoring their implementation, providing technical support, catalysing change and building sustainable institutional capacity are among WHO's core functions. These functions are critical to prevent disease through healthy environments. Dissemination and use of globally harmonized information about the hazards of chemicals is of high importance in this regard.

3. WHO is contributing to the implementation of the GHS in accordance with:

   - ECOSOC Recommendations that all UN Programmes and specialized agencies take appropriate steps to amend their instruments to give effect to the GHS (ECOSOC Resolution 2005/53); and

   - Integrating implementation efforts with activities to enable best use of WHO chemical risk assessment products at the national level; and
A work plan of the UNSCEGHS for the biennium 2007-2008 to explore a possible working relationship with WHO to assist implementation of the GHS in relevant activities/instruments among global health partners (UNSCEGHS ST/SG/AC.10/C.4/24).

4. As appropriate, WHO continues to work in cooperation with sister UN agencies (e.g. ILO, FAO, UNITAR) and under the auspices of the Inter Organization Programme of the Sound Management of Chemicals (IOMC). WHO welcomes the opportunity to formally report on progress to the Sub-Committee.

Progress Report

5. Progress in relation to WHO instruments and products is reported below, as well as other activities directed at GHS implementation.

**WHO Recommended Classification of Pesticides by Hazard**

6. This instrument was established by the World Health Assembly in 1975 (WHA 28.62). The Classification continues to be widely used, particularly by developing countries, to assist in the safe management of pesticides. It is used in a number of ways e.g. by reference in country legislation, in the FAO Code of Conduct on the Distribution and Use of Pesticides and in guidelines for development assistance such as those established by the World Bank.

7. The WHO Recommended Classification of Pesticides by Hazard provides a simple ranking system which lists the more or less hazardous forms of pesticides using a system of classification criteria for acute toxicity. While the classification of each pesticide is largely dependent on acute toxicity data, other health end-points such as cancer are taken into account when data are available. WHO is in the process of updating the Recommended Classification of Pesticides by Hazard and making it compatible with the classification criteria of the GHS.

8. The completion of this work has been delayed by staff changes. This has now been resolved and it is anticipated that work will resume early in 2009.

**International Chemical Safety Cards (ICSC)**

9. International Chemical Safety Cards (ICSC) are prepared and updated in a collaborative effort between the ILO and WHO with the support of the European Commission and a global network of participating institutions, experts in the field of toxicology, occupational health and safety, poisons centre experts and medical practitioners.

10. ICSC provide essential health and safety information, including hazard information; information on signs and symptoms to help in the recognition of cases of inadvertent exposure; precautionary information in cases of fire, explosion, spillage, emergency response, storage, and environmental data. ICSC are prepared using a system of standard phrases and classification criteria published in a "Compilers Guide" (http://www.who.int/entity/ipcs/publications/icsc/comp_guide.pdf).
11. The ICSC are available free-of-charge in 24 languages. ICSC in 17 different languages are available on the internet: including Chinese, Japanese, Korean, Swahili, Thai, Urdu, Vietnamese as well as many European languages. Very high usage rates are recorded, e.g. in 2008, there have been an average of 140,600 downloads per month from the ILO website (http://www.ilo.org/public/english/protection/safework/cis/products/icsc/index.htm) and an average of 64,500 sessions per month for the English versions from the IPCS INCHEM web site (http://www.inchem.org). The website of the US National Institute for Occupational Health and Safety (NIOSH) is a further effective distribution channel providing linkages to the web sites of national participating institutions throughout the world and for the ICSC in languages other than English (http://www.cdc.gov/niosh/ipcs/icstart.html).

12. Since April 2006 WHO has started to include GHS classifications in new and updated ICSCs. To date 194 chemicals have been considered and 137 have met the criteria for GHS classification.

13. The development of a new database for producing and disseminating ICSCs started in 2007. The revision of sentences required for the new database also necessitates the complete revision of the Compiler's Guide. During this process the opportunity will be taken to align the classification criteria and, in some cases, the phraseology used in the ICSCs with that of the GHS. It is anticipated that this work will be completed in 2009.

Precautionary information

14. The precautionary information provided in the GHS is of great relevance to the health sector since this information can be used to guide the medical management of cases of exposure to chemicals and chemical products. In some countries this may be the only information readily available to health practitioners. WHO is participating in the work of the UNSCGHS correspondence group that is reviewing the need for combined hazard and precautionary statements to ensure that health sector needs are kept in mind. WHO will also contribute its experience of assigning precautionary statements in the ICSC process.

Capacity building

15. WHO is working with UNITAR and ILO to include the health sector in capacity building activities for GHS implementation. In May 2008 WHO held a one-day health-sector workshop on the GHS and SAICM immediately before the joint UNITAR, ILO and WHO Regional Workshop on Chemical Hazard Communication and GHS Implementation for ECOWAS Countries, in Abuja, Nigeria. Further joint activities are planned in 2009.

16. The availability of the ICSCs as a multilingual resource for worker safety, as well as a resource for countries implementing the GHS will continue to be promoted by WHO staff in different fora, for example at capacity-building workshops concerning the GHS, management of chemical incidents, control banding etc.
Conclusion

17. WHO continues to make progress in its work on implementation of the GHS, subject to the availability of resources. Further consultation and information on the progress of the initiatives reported above will be made available through the WHO web site.

18. WHO intends to continue its cooperation with the UNSCEGHS in GHS implementation activities. UNSCEGHS will be notified of further progress expected before its next meeting and details will be provided of any consultative processes.