



## **Model Provinces Committee Submission to Minamata Convention Secretariat**

### **Preamble**

The Model Provinces Committee is an arm of the World Alliance for Mercury-Free Dentistry, who sought out NGO leaders at the provincial level (depending on the country, called provinces, states, regions, or counties) to implement the transition to mercury-free dentistry and to demonstrate to their countries and regions the feasibility and advantages of alternatives to amalgam.

Successful model campaigns include Edo State, Nigeria; Enugu State, Nigeria; Odisha State, India; Khyber Pakhtunkhwa Province, Pakistan; Ben Arrous Region, Tunisia; and Mombasa County, Kenya.

This statement from the Model Provinces committee provides information related to the availability, technical, economic feasibility, environmental, health risks and benefits of the non-mercury alternatives to dental amalgam.

The model province overall objective is to contribute to reduced risk from amalgam use to human health and the environment. The World Alliance for Mercury- Free Dentistry provides technical support and funds adoption of non-mercury alternatives to amalgam through advocacy and campaigns globally to increase awareness of amalgam risks in different countries and this statement promotes sharing of experiences.

### **Model Campaigns at the Provincial Level**

#### **Edo State, South-South, Nigeria**

The Edo State model project adopts the use of multiple-level approach to stakeholders in the dental amalgam value chain with a central focus on mercury free dentistry. The Pediatrics Unit of the University of Benin Teaching Hospital (UBTH), the largest public hospital, has phased out amalgam use for children since 2018. This is based largely on awareness raising advocacy which has greatly reduced the dental *health risk* to children. In addition, amalgam is currently not the first line of dental treatment prescription at the UBTH and private clinics as non-mercury alternatives are readily *available* and they include Composites and Glass Ionomer Cements (GICs).

#### **Enugu State, South-East, Nigeria**

The Nigerian Dental Association (NDA), Enugu State branch has recorded increased use of *non-mercury alternatives to dental amalgam* in most dental clinics. The State NDA chairman, Dr. Emedom Elias, has reported that over 89% of the dental clinics now use non-mercury alternatives which are *available*. The State Ministry of Environment has engaged the media to

educate the people on the *environmental health risk* associated with the use of amalgam. The head of pollution in the Ministry of Environment, Mrs Chinwe Nwuko is spearheading governmental efforts in coordination with other ministries and civil society to create awareness on amalgam phase-out.

### **Mombasa County, Kenya**

The Mombasa County initiative has utilized field visits, interviews with practitioners and clients, and a budget analysis of the County Department of Health to assess the availability of non-mercury alternatives to dental amalgam. The existence, use and *affordability* have been established of the following materials in public and private clinics: Tooth-coloured composites; Glass ionomer cement (GIC); artificial dental crowns; Porcelain; and Gold. Practitioners are well trained on their use and have requisite equipment. They also report that composites and some crowns are cheaper to the client than amalgam and could enhance public access to dental healthcare. The County government budget offer fair investments for GIC, composites and crowns as well as requisite equipment, materials and human resources. Significantly, the County Department of Health, the main hospital for all of coastal Kenya, and some private clinics have discontinued the use of dental amalgam on expectant and breastfeeding mothers and children below 12 years. This policy demonstrates the viability of mercury-free dentistry and the protection of high-risk groups from *health risks*.

### **Ben Arrous Region, Tunisia**

The Ben Arrous region has produced a consensus plan of action and interventions for mercury free dentistry to be coordinated by the General Directorate of Health in partnership with dental schools and civil society. A paper by the chief dental officer about this campaign has been written and publicized. This action plan has received an overwhelming stakeholder support for non-mercury alternatives to dental amalgam.

### **Odisha State, India**

The Odisha State initiative, has a stakeholder' steering committee in place providing guidance and interface with the Government Department of Health and Climate Change and relevant stakeholders. There is a firm understanding with stakeholders for ending use of amalgam and a change to non mercury alternatives.

## **Conclusion and Recommendation**

The campaigns at the provincial level are working. They bring together local government with civil society stakeholders, including dental leaders and dental schools, consumer groups and child advocates, and environmental NGOs, to hammer out solutions and to accelerate the transition to mercury-free dentistry. They build awareness of the mercury and its risks to consumers, dental workers, and the environment.

Equally important, these campaigns are a model to their nations and regions. They demonstrate that effective and efficient steps can be taken to shift oral health care away from amalgam and to the alternatives, and in particular to take an essential first step, such as ending amalgam for children and young women, that will accelerate the transition to mercury-free dentistry.

Continued campaigning, awareness raising activities is important. It is also important that work to phase out amalgam continue.