1. To approve the attached:
   The concept of implementing the state policy for the elimination of diseases related with exposure to asbestos-containing dust, for the period until 2020 and further perspectives (hereafter referred to as the Concept);
   Action plan to the Concept.
2. The Ministry of Health of the Russian Federation to coordinate and control execution of the action plan approved by this decree.
3. To recommend executive authorities of the constituent entities of the Russian Federation to consider provisions of the Concept in their activities.
C O N C E P T
of implement the state policy for the elimination of diseases
related with exposure to asbestos-containing dust, for the period until 2020
and further perspectives

I. Introduction

The concept of implement the state policy for the elimination of diseases related with exposure to asbestos-containing dust, for the period until 2020 and further perspectives (hereafter referred to as the Concept) has been developed in accordance with paragraph 10 of the Global plan of action on workers’ health 2008-2017 endorsed at the 60th World Health Assembly (Resolution WHA 60.26 of 23 May 2007) and item 10 of Parma Declaration on Environment and Health adopted by the representatives of Member States in the European Region of the World Health Organization (WHO) at the Fifth Ministerial Conference on Environment and Health (EUR/55934/5.1 Rev.2 of 11 March 2010).

The danger to human health is posed by asbestos-containing dust (i.e. dust containing airborne asbestos fibers) generated during asbestos mining and milling as well the production, use and disposal of asbestos-containing products.

The commercial term “asbestos” designates a group of 6 naturally-occurring fibrous serpentine (chrysotile asbestos) or amphibole minerals (actinolite, amosite, anthophyllite, crocidolite, and tremolite) (hereafter referred to as the amphiboles), having the same fields of application in industry and differing in their mineralogical structure, physicochemical properties, and biological aggressiveness.

The prerequisite for the development of diseases induced by the exposure to asbestos-containing dust (hereafter referred to as asbestos-related diseases) is the accumulation of asbestos fibers in the human respiratory organs in quantities exceeding compensatory abilities of the organism.
The exposure to asbestos-containing dust in uncontrolled conditions increases the risk of bronchopulmonary and oncological diseases, the most important of them being asbestosis, chronic bronchitis and malignant neoplasms of the upper airways, bronchi, lungs, pleura, and other organs and systems.

Chrysotile fibers easily dissolve in biological media and are removed from lungs in short term. Thereby the prerequisite of their accumulation is a long-term (during many years) inhalation exposure to fibers in concentrations, many time higher than the permissible exposure limits established at present for the working zone air and ambient air.

Amphibole fibers persist in the respiratory organs and their accumulation can occur during a long-term inhalation exposure to fibers in low concentrations.

Until 1970s all types of asbestos were used without any control almost in all industries all over the world (especially in industrially developed countries); over 3 000 asbestos-containing products are known to date. This led to an increase in rates of asbestos-related diseases and mortality not only among the workers, but also in the general population, the result of which was the ban on all types of asbestos in the majority of European countries.

The Russian Federation has deposits of all types of asbestos. Only chrysotile has been used for civil purposes. Amphiboles were mined in several places in 1947-1994 in small quantities for special purposes (ca. 40 000 tons for the whole history of mining). At present, all amphibole mines are closed, and the use of amphiboles has been banned since 1999.

For many decades Russia has been the world largest producer and consumer of chrysotile (today it accounts for over a half of all world production and ranks third by the volume of consumption after China and India). Chrysotile asbestos mined nationally, in contrast to chrysotile mined elsewhere, is almost free of amphibole admixtures.

To obtain reliable data on health risks for workers and general population posed by the current use of chrysotile, a comprehensive epidemiologic study has been launched within the Federal Purpose-oriented Program “National System of Chemical and Biological Safety of the Russian Federation (2009-2014)” approved by Decree № 791 of the Government of the Russian Federation dated 27 October 2008.

In many industries employing hundreds of thousands of workers (energetics, chemical production, metallurgy, shipbuilding, etc.), there is lack of alertness to asbestos. It is necessary to improve information support of
specialists, workers, and population regarding basic safety measures to be taken in the use of asbestos.

Distinctive features of the occurrence, development and clinical course of the asbestos-related diseases assume the priority of preventive actions. Moreover, it is necessary to ensure preventive actions to be taken not only among the workers involved in asbestos mining and milling and in the production of asbestos-containing materials and products (about 25 thousand people) but also among the workers employed by industries consuming these materials and products (the number of such workers should be specified during the development of the National Asbestos Profile). It is also necessary to provide access to health care and social security to the people exposed to asbestos both occupationally and environmentally.

Planning of activities for elimination of asbestos-related diseases cannot be successful without a comprehensive preventive assessment of introducing asbestos substitutes in different industries in accordance with Article 10 of ILO Convention № 162 on safety in the use of asbestos.

At present the main problems in the sphere of securing safety in the use of asbestos in Russia include:

- incomplete understanding of contingents exposed to asbestos due to the absence of assessment of exposure to dust containing asbestos and other natural and man-made fibers in some industries consuming fibrous materials (with the exception of asbestos mines and mills and the production of asbestos-containing materials);

- the lack of ranking of asbestos-containing materials and products by the extent of probability of their emitting substances that are hazardous and dangerous for human health and the environment;

- imperfection of the current system of diagnostics and registration of asbestos-related diseases and the necessity to improve registration of occupational diseases and develop national registries of occupational diseases and malignant neoplasms;

- the lack of data of comprehensive epidemiologic studies on health risks posed by different types of activities involving the use of asbestos under modern conditions; and

- insufficient knowledge of the population about possible health risks from the use of asbestos and its substitutes and safety measures.
Thus, the need to prevent possible medical, sanitary, and socioeconomic consequences of the uncontrolled use of asbestos and materials proposed as its substitutes is the determining factor in adopting the Concept.

II. The objective and targets of the Concept

The objective of the Concept is protection of workers’ and public health by taking measures aimed at creating conditions for decreasing the rates of asbestos-related diseases and deaths and a step-by-step elimination of these diseases in the Russian Federation.

The targets of the Concept include:

Phase I (until 2015):

- a complete inventory of volumes of the past (over 40 years) and current use of asbestos with identification of objects and types of activities with possible asbestos exposures exceeding the permissible levels;
- identification of all groups of workers and population that might have been or might be occupationally or environmentally exposed to dust containing asbestos and other natural and man-made fibers in concentrations that exceed the permissible levels;
- an improved diagnosis of asbestos-related diseases through a 100 per cent coverage with pre-employment and regular preventive medical examination of people with current or past (within the past 40 years) occupational exposure to asbestos and/or other natural and man-made fibers to ensure early diagnosis of diseases using modern diagnostic and exposure criteria for their recognition and treatment;
- retraining of 50 per cent of specialists rendering medico-sanitary services to workers involved in asbestos mining and milling and also in the production, use and disposal of asbestos-containing products in modern techniques of prevention, diagnostics, treatment and medical rehabilitation of cases of asbestos-related diseases;

Phase II – until 2020:

- minimization of risks from asbestos exposure (a 50% reduction in the number of people exposed to asbestos concentrations that exceed the permissible exposure limits);
- retraining of 100 per cent of specialists rendering medico-sanitary services to workers involved in asbestos mining and milling and also in the production, use and disposal of asbestos-containing products in modern techniques of
prevention, diagnostics, treatment and medical rehabilitation of cases of asbestos-related diseases;

training of all workers handling materials containing asbestos and/or other natural and man-made fibers in safety measures, and improvement of information support of the population about risks posed by the exposure to dust containing such fibers and about measures for prevention of this exposure;

Phase III – until 2025 – a 50% decrease in the rates of asbestos-related diseases compared to those in 2015; and

Phase IV (until 2060) – elimination of asbestos-related diseases (reduction of their incidence rates to background values).

II. Political and legal grounds for taking strategic actions for elimination of asbestos-related diseases

On the 72\textsuperscript{nd} session of the General Conference of the International Labor Organization representatives of 142 countries adopted ILO Convention \# 162 concerning safety in the use of asbestos dated 24 June 1986 (hereafter referred to as the Convention).

The Convention covers all the main types of activities with potential occupational asbestos exposure of workers. The document envisages measures for protection against and prevention of asbestos exposures and regulates techniques of monitoring occupational hazards and workers’ health.

The Convention obliges employers to promote dissemination of information and education of workers in issues of health hazards due to occupational asbestos exposure and to support the development of the regulatory and legal basis and instructions of workers in safety in the use of asbestos.

The Russian Federation supported the provisions of the Convention and adopted Federal Law \# 50-FZ of 8\textsuperscript{th} April 2000 on Ratification of ILO Convention \# 162 on safety in the use of asbestos.

The 60\textsuperscript{th} Session of the World Health Assembly (Resolution WHA60.26 of 23\textsuperscript{rd} May 2007) adopted “Workers’ Health: Global Plan of Action 2008-2017” that envisages a global campaign for elimination of asbestos-related diseases and notes that it should be carried out taking into account the differential approach to regulating different forms of asbestos.

IV. Strategic actions for elimination of asbestos-related diseases
The strategy for elimination of asbestos-related diseases in the Russian Federation includes a step-by-step implementation of comprehensive actions taking into account the differential approach to regulating different types of asbestos and asbestos-containing products at the federal, regional and enterprise levels.

Actions taken at the federal level will include:
- preparation of the first version of the National Asbestos Profile by 2015 and its revision every 5 years based on the results of appropriate medico-social (including epidemiological) and economic studies and reporting to the Government of the Russian Federation;
- improvement of the current regulatory, legal and methodological framework in the sphere of safety in the use of asbestos and other natural and man-made fibers;
- ensuring of a differentiated approach to regulating different forms of asbestos;
- improvement of organizing medical and sanitary care for people who might be exposed to asbestos-containing dust;
- monitoring and evaluation of effectiveness of actions for prevention of asbestos-related diseases within the framework of the socio-hygienic monitoring carried out in the Russian Federation;
- improvement of the state sanitary and epidemiologic surveillance and state control in the sphere of occupational safety in asbestos mining and milling and also in the production, use and disposal of materials containing asbestos and other natural and man-made fibers; and
- development and provision of availability of information materials on possible risks and their prevention in the use of asbestos, asbestos-containing materials and its substitutes for target groups of professionals and population.

Improvement of the regulatory, legal and methodological framework in the sphere of safety in the use of asbestos and other natural and man-made mineral fibers includes:
- revision of occupational safety standards, typical labor safety instructions and state sanitary and epidemiologic rules and standards; and
- preparation and approval of control procedures for measurements of concentrations of fibrous particles in the work environment and ambient air, for establishing the presence and type of asbestos in materials and products.

Ensuring a differentiated approach to regulating different forms of asbestos includes:
ranking asbestos-containing materials and products by the extent of risk using the extent of binding and the probability of fiber emissions as criteria;
categorizing types of activities by the extent of risk of asbestos exposure (taking into account the amount, type of products and the form of asbestos in them, duration and levels of probable exposure) and introduction of practical tools of assessment and management of risks from potential exposures;
determining groups of population with possible occupational and environmental exposures to dust containing asbestos and other natural and man-made mineral fibers in concentrations above the permissible levels;
ensuring control over observing the ban on amphiboles and sprayed-on friable insulation containing all types of asbestos;
creating conditions for measuring and monitoring of concentrations of airborne asbestos-containing dust and dust containing other natural and man-made fibers in the laboratories of regional profile research centers (at least 4) and in the national reference laboratory based on the Federal state budgetary institution "Scientific Research Institute of Occupational Health" of the Russian Academy of Medical Sciences;
ensuring a comprehensive evaluation of possible risks for health of workers and general population and the environment when introducing asbestos substitutes.

Improvement of organizing medical and sanitary care of people who might be exposed to asbestos-containing dust includes:

studies to reveal indices determining predisposition to health effects of chrysotile-containing dust of some groups of population and biomarkers of asbestos exposure;
development and introduction of modern diagnostic and exposure criteria of detection, diagnosis, and registration of asbestos-related diseases;
development and approval of standards of rendering medical care to patients with asbestos-related diseases; and
organization of registration of asbestos-related diseases in line of the development of national registries of occupational and cancer diseases.

Actions taken at the regional level will include:
development and implementation (based on public-private partnership as well) of regional programs for prevention of exposure to asbestos-containing dust from anthropogenic and natural sources in accordance with the legislation of the constituent entity of the Russian Federation;
carrying out socio-hygienic monitoring in the constituent entity of the Russian Federation including organization of monitoring, analysis, evaluation and prediction, and also establishment of the cause-effect relationship between environmental asbestos exposure (including those resulting from natural weathering of rocks) and public health;

providing health services to individuals that are exposed to asbestos and/or have asbestos-related disorders, including pre-employment medical checkups and regular medical examinations of individuals with current or past (in the past 40 years) occupational exposure to dusts containing asbestos and/or other natural and man-made fibers (taking into account specifics of health disorders related to such fibers), in accordance with the legislation on occupational safety and health, introduction of modern techniques of medical diagnosis of early signs of asbestos-related disorders in workers, proper registration of asbestos-related diseases;

retraining specialists rendering medical services to asbestos miners, millers, workers involved in the production, use, and disposal of asbestos-containing products, and the population residing in the areas of constituent entities of the Russian Federation with potential non-occupational exposure to asbestos-containing dust; and

ensuring public awareness of risks posed by exposure to dusts containing asbestos and/or other natural and man-made fibers and measures for exposure prevention among the population of the constituent entity of the Russian Federation.

Actions taken at the enterprise level will include:

development of proposals and implementation of measures at industrial enterprises, in sanitary protection zones and in zones of protective actions within the framework of development and implementation of programs for prevention of population exposure to asbestos-containing dust from anthropogenic and natural sources;

ensuring compliance of individual entrepreneurs and legal entities with requirements of the current sanitary legislation on:

development and implementation of preventive actions aimed at prevention of contamination of the work environment and ambient air of populated areas with dust containing asbestos and/or other natural and man-made fibers;

carrying out production control (including the laboratory control) of observing sanitary rules and taking sanitary anti-epidemic (preventive) actions during activities with potential contamination of the work environment and
ambient air of populated areas with dust containing asbestos and/or other natural and man-made fibers;

providing special training in safety issues for workers handling materials containing asbestos and/or other natural and man-made fibers; and

substantiation of safety of new types of products containing asbestos and/or other natural and man-made fibers and of the technology of their production for human health.

Implementation of the Concept will help the Russian Federation fulfill international obligations to eliminate asbestos-related diseases.

V. Responsible executives and participants of implementing the Concept

Actions for amendment of the legislation of the Russian Federation on asbestos-related diseases are taken by the federal executive body responsible for developing state policy and legal regulation in the sphere of public health, and on issues of the safe use of asbestos – by the federal executive body responsible for developing state policy and legal regulation in the sphere of occupational safety and health.

Actions for improvement of surveillance and control of safety in the use of asbestos are taken by the federal executive body responsible for control and surveillance in the sphere of securing sanitary and epidemiologic welfare of population and the federal executive body responsible for control and surveillance in the sphere of occupational safety and health.

Actions for provision of medical services and social security are taken by regional and local authorities and appropriate organizations.

Actions for conducting scientific medico-hygienic studies are taken by appropriate organizations of the federal executive body responsible for drafting the state policy and legal regulation in the sphere of public health, the federal executive body responsible for control and surveillance in the sphere of securing sanitary and epidemiologic welfare of population and the Russian Academy of Medical Sciences.

Individual entrepreneurs and legal entities involved in chrysotile mining and milling, production, use and disposal of chrysotile-containing products shall ensure compliance with requirements of the sanitary legislation and occupational safety regulations and participate in programs for prevention of asbestos-related diseases.
VI. Information provision of the Concept

The National Asbestos Profile is the basis for information provision and managerial decisions on correcting actions for elimination of asbestos-related diseases in the Russian Federation.

The National Asbestos Profile defines the situation with regard to consumption of the various types of asbestos, populations at risk from current and past asbestos exposures exceeding the permissible exposure limits, and describes the incidence and prevalence of asbestos-related diseases. It is the instrument of monitoring and assessing efficiency of results of actions taken within the implementation of the Concept that shall be updated every 5 years.

VII. Management and phases of implementing the Concept

The system of management of implementing the Concept is aimed at the achievement of the objective, the effectiveness of actions, and a long-term sustainability of obtained results based on the data of the National Asbestos Profile. The phases of implementation of the Concept are established by the action plan. Responsible executives and participants of the action plan are defined by Section V of the Concept.

In order to eliminate asbestos-related diseases in the Russian Federation, a complex of strategic actions shall be taken step-by-step in 4 phases.

Phase I (until 2015) will include preparation of the first version of the National Asbestos Profile and measures for conducting additional medico-social (including epidemiologic) and economic studies to fill the data gaps on:

- volumes of the asbestos use and types of activities with possible asbestos exposures above the permissible exposure limits;
- workers and groups of population with possible past and/or current occupational and environmental exposures to dust containing asbestos and other natural and man-made fibers exceeding permissible levels; and
- the prevalence of asbestos-related diseases.

Phase II (until 2020) will include measures aimed at a considerable decrease in the number of individuals exposed to asbestos in concentrations exceeding permissible levels, including measures for education of specialists
and target groups of workers and population on prevention of asbestos-related diseases.

Phase III (until 2025) will include additional actions (based on data of the National Asbestos Profile) aimed at a significant decrease in incidence rates of asbestos-related diseases.

Phase IV (until 2060) envisages elimination of asbestos-related diseases (bringing disease incidence rates to background levels).

VIII. Funding of the Concept


Implementation of the Concept in the constituent entities of the Russian Federation is funded according to the legislation of the constituent entities of the Russian Federation.

Implementation of the Concept in chrysotile mines and mills and in the production of chrysotile-containing materials and products is financed by individual entrepreneurs and legal entities from their own funds in accordance with the sanitary legislation and legislation on occupational safety and health.
**ACTION PLAN**

to the Concept of implement the state policy for the elimination of diseases related with exposure to asbestos-containing dust, for the period until 2020 and further perspectives

<table>
<thead>
<tr>
<th></th>
<th>Responsible executives</th>
<th>Time of performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Introducing amendments to certain legislative acts of the Russian Federation in terms of ensuring registration of asbestos-related diseases within the framework of developing national registries of occupational diseases and cancer diseases</td>
<td>Ministry of Health of the Russian Federation, Rospotrebnadzor*, Russian Academy of Medical Sciences</td>
</tr>
<tr>
<td>2.</td>
<td>Introducing amendments to the Federal Purpose-oriented Program “The National System of Chemical and Biological Safety of the Russian Federation (2009 - 2014)” in terms of: Conducting a representational epidemiologic study of the prevalence of asbestos-related diseases, other medico-social studies to establish basic indicators of the National Asbestos Profile;</td>
<td>Ministry of Health of the Russian Federation, Rospotrebnadzor</td>
</tr>
</tbody>
</table>
Developing guidance documents and information materials on prevention, diagnosis, treatment and rehabilitation of patients with asbestos-related diseases to be included in programs of post-graduate professional training of medical professionals;
Informing the population residing in areas of potential exposures to natural sources of dust containing amphiboles and chrysotile miners and millers

| 3. | A report to the Government of the Russian Federation on the implementation of the Concept of implementing the state policy for elimination of asbestos-related diseases for the period until 2020 and beyond with the National Asbestos Profile attached | Ministry of Health of the Russian Federation, Ministry of Labor and Social Security of the Russian Federation, Rospotrebnadzor, Russian Academy of Medical Sciences | 2015, 2020 |

| 4. | With account for the National Asbestos Profile, introduction of amendments concerning safety in the use of asbestos to regulations of the federal executive bodies including:  
State sanitary and epidemiologic rules and standards;  
Standards of occupational safety, rules and typical instructions on labor protection;  
Method guidelines for control of concentrations of fibrous particles in the workplace air and ambient air of populated areas, detection of the presence and types of asbestos in materials and products | Rospotrebnadzor, Ministry of Labor and Social Security of the Russian Federation | 2016 |
<table>
<thead>
<tr>
<th></th>
<th>Responsible executives</th>
<th>Time of performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.</td>
<td>Adoption of standards of medical care for patients with asbestos-related diseases</td>
<td>Ministry of Health of the Russian Federation</td>
</tr>
<tr>
<td>6.</td>
<td>Adoption and implementation of regional programs for elimination of asbestos-related diseases (pilot projects in the constituent entities of the Russian Federation with chrysotile asbestos mines and mills) with account for the National Asbestos Profile</td>
<td>Executive authorities of the Orenburg and Sverdlovsk Regions (subject to approval)</td>
</tr>
</tbody>
</table>

* Rospotrebnadzor is the Federal Service for Surveillance in the Sphere of Consumer Rights Protection and Human Welfare