

will increase the amount of data largely and the way the occupational hygienist will use this for exposure assessment.

But overseeing all of these changes, in the end, it will still be the question whether we as occupational hygienist are able to tell our stories in a way that companies and governments see the business relevance of our case. To get our business back on the political agenda we have to learn to communicate about risks in the right way and address our skill gaps.

1770c IRELAND'S REGULATORY FRAMEWORK ON OCCUPATIONAL SAFETY AND HEALTH: PREVENTION AND ENFORCEMENT, POLICY AND PRACTICE

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An overview of the evolution of workplace safety and Health including wellbeing and mental health in workplaces in Ireland since 1989 with a particular focus on the period since 2005. I will outline the operational policy and practice of the Health and Safety Authority in terms of prevention and enforcement up to and including prosecution.

I will explore the legislative base, the information and advice platforms, our collaborative and partnership working, provision of tools to duty holders and proportionate risk based enforcement. The objective has been to raise awareness across the population and duty holders, to change behaviours, and to hold the non-compliant to account.

The Authority has developed a number of three year rolling strategies over the periods which have guided the development of annual programmes of work. The authority has been instrumental in developing some internationally recognised and acclaimed models and tools for implementing a preventive approach.

The authority has adopted the use of social media to promote the messages and has also become active in the national education systems to promote and train students so they are ready and competent with an appreciation of the duties of care owed to them when they enter the workforce.

We have also worked in a very collaborative and partnership manner engaging other state organizations as well as private sector representative groups including OSH community voluntary groups in promoting a common message and developing and implementing agreed action plans. Other aspects to be covered include research to underpin objective interventions, which are evidence based and evaluating their impacts.

I will review performance achieved over the period also outline the difficulties and challenges still facing the organisation which will require further work to achieve the sustained downward trend that is sought in occupational safety, health, wellbeing and mental health.

1770d TRENDS IN MUSCULOSKELETAL DISORDERS

Yushi Fujita. *The International Ergonomics Association*

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1770e THE STRUGGLE OF SOCIAL DIMENSION ON OCCUPATIONAL HEALTH WITH ENVIRONMENTAL AND ECONOMIC CHANGES

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Environmental and economic changes that have a great impact on occupational health will be reviewed both macroscopically and microscopically.

A macroscopic principle for a desirable national and societal system of occupational health and safety (OSH) will be introduced to define the social dimension and responsibility on OHS. In this perspective, it will be discussed:

1. the importance of social dimension of OHS;
2. the role of governmental and public sectors in the viewpoint of social dimension to change industry and commerce in response to calls for social and responsible business and OHS; and
3. countervailing forces for hope in the future.

1770f THE CASE OF RISING OCCUPATIONAL HEALTH STANDARDS IN SINGAPORE

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Mining Occupational Safety and Health

1057 MERCURY EXPOSURE AND RELATED HEALTH PROBLEMS AMONG ARTISANAL AND SMALL SCALE GOLD MINING COMMUNITY IN CHUNYA DISTRICT TANZANIA

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Background Human exposure to elemental mercury occurs mainly through inhalation of vapours, contact and ingestion through consumption of contaminated sea food.

Objective To assess the magnitude of health problems related to mercury exposure among artisanal and small scale gold mining community in Chunya District.

Methodology Analytical cross section study was conducted in gold mine community in Chunya District. A multistage random sampling method was used to recruit study participants from Saza and Makongorosi mining area recruited as exposed and individuals from two wards surrounding the mining area as unexposed group. Data was collected by a pre-tested interview schedule administered face to face to the interviewee