Chapter 3.3
Community Health and Safety

BACKGROUND
Responsibly operated mines can play an important part in improving public health, but poor management of impacts can expose local populations to additional health and safety risks.

Both the identification of potential mining-related health and safety impacts, as well as the mitigation of those impacts will be most successfully achieved when undertaken in partnership with local stakeholders such as local community representatives, government officials, health service providers, public health officials, and community development workers, as well as mine workers who live in communities.\(^{129}\)

OBJECTIVES/INTENT OF THIS CHAPTER
To protect and improve the health and safety of individuals, families, and communities affected by mining projects.

SCOPE OF APPLICATION
RELEVANCE: This chapter is relevant for any mining project that may have impacts on community health and/or safety. Operating companies may provide evidence that this chapter is not relevant if they can demonstrate that there are no communities that may be affected by their current mining activities or potential mine expansions.

The specific provisions related to HIV/AIDS, tuberculosis and malaria (criteria 3.3.4) are only relevant at operations where the community health and safety risk and impact assessment has identified that HIV/AIDS, tuberculosis and/or malaria pose a significant risk to worker and/or community health.

Community Health and Safety Requirements

3.3.1. Health and Safety Risk and Impact Scoping

3.3.1.1. The operating company shall carry out a scoping exercise to identify significant potential risks and impacts to community health and safety from mining-related activities. At minimum, the following sources of potential risks and impacts to community health and/or safety shall be considered:\(^ {130}\)

a. General mining operations;

b. Operation of mine-related equipment or vehicles on public roads;


\(^ {130}\) Some or all of these risks and impacts may have been scoped as part of the ESIA (IRMA Chapter 2.1), or other IRMA chapters. If so, there is no need to re-scope the issues in a standalone Community Health and Safety Scoping exercise.
c. Operational accidents;
d. Failure of structural elements such as tailings dams, impoundments, waste rock dumps (see also IRMA Chapter 4.1);\(^{131}\)
e. Mining-related impacts on priority ecosystem services;\(^{132}\)
f. Mining-related effects on community demographics, including in-migration of mine workers and others;
g. Mining-related impacts on availability of services;
h. Hazardous materials and substances that may be released as a result of mining-related activities;\(^{133}\) and
i. Increased prevalence of water-borne, water-based, water-related, and vector-borne diseases, and communicable and sexually transmitted diseases (e.g., HIV/AIDS, tuberculosis, malaria, Ebola virus disease or others) that could occur as a result of the mining project.

3.3.1.2. Scoping shall include an examination of risks and impacts that may occur throughout the mine life cycle (e.g., construction, operation, reclamation, mine closure and post-closure).

3.3.1.3. Scoping shall include consideration of the differential impacts of mining activities on vulnerable groups or susceptible members of affected communities.

### 3.3.2. Risk and Impact Assessment

3.3.2.1. The operating company shall carry out an assessment of risks and impacts to:\(^{134}\)

a. Predict the nature, magnitude, extent and duration of the potential risks and impacts identified during scoping; and

b. Evaluate the significance of each impact, to determine whether it is acceptable, requires mitigation, or is unacceptable.\(^{135}\)

### 3.3.3. Risk and Impact Management and Mitigation

3.3.3.1. The operating company shall document and implement a community health and safety risk management plan that includes:

a. Actions to be taken to mitigate the significant risks and impacts identified during its risk and impact assessment; and

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131 It is possible that as part of a mine’s waste management approach a scoping assessment may have been undertaken to identify risks to community safety from tailings dams, impoundments, waste rock dumps and other waste facilities. If such a scoping exercise was done, and risks to community health or safety were identified, then these risks should have been (or should be) further assessed to determine the significance of the risks to community health and safety. This may have been (or may be) done as part of the Community Health and Safety Risk and Impact Assessment in section 3.3.2 or another assessment such as an ESIA (see IRMA Chapter 2.1).

132 See also IRMA Chapter 4.6. Potential impacts on priority ecosystem services should have been identified as part of the scoping exercise for IRMA Chapter 4.6. If any of the identified potential impacts create risks to community health or safety, they should be further assessed to determine the significance of those risks.

Mining-related impacts on priority ecosystems services that could pose a risk to communities include, for example, land use changes or the loss of natural buffer areas such as wetlands, mangroves, and upland forests. These systems often mitigate the effects of natural hazards such as flooding, landslides, and fire, and if lost or damaged may result in increased vulnerability and community safety-related risks and impacts. Also, the diminution or degradation of freshwater may result in health-related risks and impacts. (IFC. 2012. Performance Standard 2. Para. 8).

133 See IRMA Chapter 4.1 for more requirements related to hazardous materials.

134 Some or all of these risks and impacts may have been assessed as part of the ESIA (IRMA Chapter 2.1), risks in 3.3.1.1.d may have been assessed as part of a mine waste risk assessment (IRMA Chapter 4.1), and risks to human health and safety related to impacts on priority ecosystem services in 3.3.1.1.e may have been assessed as part of a scoping exercise as per Chapter 4.6. If the full range of risks to community health and safety were assessed elsewhere, there is no need to duplicate efforts.

135 As per requirement 3.3.5.1.b, stakeholders must be involved in the assessment of the significance of the risks.
b. Monitoring that will be conducted to ensure that measures to prevent or mitigate impacts remain effective.

3.3.3.2. Mitigation measures shall prioritize the avoidance of risks and impacts over minimization and compensation.

3.3.3.3. The community health and safety risk management plan shall be updated as necessary based on the results of risk and impact monitoring.\textsuperscript{136}

\textbf{3.3.4. Specific Provisions Related to HIV/AIDS, Tuberculosis, Malaria and Emerging Infectious Diseases}

3.3.4.1. If the operating company’s risk and impact assessment or other information indicates that there is a significant risk of community exposure to HIV/AIDS, tuberculosis, malaria or another emerging infectious disease related to mining activities, the operating company shall develop, adopt and implement policies, business practices, and targeted initiatives to address identified risks, and shall:\textsuperscript{137}

\begin{enumerate}
\item In partnership with public health agencies, workers’ organizations and other relevant stakeholders, create and fund initiatives to educate affected and vulnerable communities about these infections and modes of prevention of them, commensurate with the risks posed by mining;
\item Operate in an open and transparent manner and be willing to share best practices for the prevention and treatment of these diseases with workers’ organizations, other companies, civil society organizations and policymakers; and
\item Make information publicly available on its infectious disease mitigation program.
\end{enumerate}

3.3.4.2. If the assessment demonstrates a significant risk of community exposure to HIV/AIDS, tuberculosis or malaria from mining-related activities, the following prevention and mitigation strategies shall be applied, as appropriate:\textsuperscript{138}

\begin{enumerate}
\item In relation to HIV/AIDS, the operating company shall, at minimum:
  \begin{enumerate}
  \item Provide free, voluntary and confidential HIV testing and counseling for all mine workers and employees;
  \item Provide HIV/AIDS treatment for workers and employees where it cannot reasonably be assumed that this will be provided in an effective manner by public or private insurance schemes at an affordable rate;
  \item Provide access for contractors to education and other preventative programs, and work with the operating company’s or facility’s contracting companies or others to identify ways for contract workers to access affordable treatment; and
  \item Work with public health authorities, communities, workers’ organizations and other stakeholders towards ensuring universal access to treatment for dependents of mine workers/employees and affected community members.
  \end{enumerate}
\item In relation to tuberculosis, the operating company shall, at minimum, provide free and voluntary testing for mine workers/employees where it is not reasonably likely to be provided by public or private health programs at an affordable rate; and
\item In relation to malaria, the operating company shall, at minimum:
\end{enumerate}

\textsuperscript{136} Updated “as necessary” should be interpreted as meaning that plans should be updated whenever monitoring or other information indicates that impacts on community health and safety have occurred, or that changes to the mining project (e.g., expansions, changes in operations and practices, etc.) may create new risks that need to be mitigated.

\textsuperscript{137} This requirement is only relevant if there is a significant risk of community exposure to HIV/AIDS, tuberculosis, malaria or another emerging infection disease that is in some way related to the presence of the mining project.

\textsuperscript{138} This requirement and/or sub-requirements are only relevant if there is a significant risk of community exposure to HIV/AIDS, tuberculosis, malaria or another emerging infection disease that is in some way related to the presence of the mining project.
i. Develop a vector control plan;
ii. Ensure that company facilities are not breeding environments for malaria-carrying mosquitoes; and
iii. Provide protection from infection by malaria-carrying mosquitoes in company facilities and any company-provided housing.

3.3.5. Stakeholder Engagement

3.3.5.1. The operating company shall collaborate with relevant community members\(^{139}\) and stakeholders, including workers who live in affected communities and individuals or representatives of vulnerable groups, in:

a. Scoping of community health and safety risks and impacts related to mining;
b. Assessment of significant community health and safety risks and impacts related to mining;
c. Development of prevention or mitigation strategies;
d. Collection of any data needed to inform the health risk and impact assessment process; and
e. Design and implementation of community health and safety monitoring programs.

3.3.6. Reporting

3.3.6.1. The operating company shall make information on community health and safety risks and impacts and monitoring results publicly available.

NOTES

Infectious diseases such as HIV/AIDS, tuberculosis, malaria or other emerging infectious diseases (e.g., Ebola virus disease, sexually transmitted diseases, etc.) may present risks for some mining projects and communities. If significant risks related to infectious or communicable diseases are identified during the community health and safety risk and impact assessment process, then companies are expected to take steps to mitigate and monitor their impacts. This chapter highlights HIV/AIDS, TB and malaria in particular, because the mining industry has significant exposure to those diseases in some parts of the world, and best practices have been established by mining companies to minimize their impact in relation to those diseases.\(^{140}\) Recent experience with Ebola virus in Liberia has demonstrated that mining operations can also play a key role in combatting other infectious diseases that threaten their workers and communities.\(^{141}\)

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\(^{139}\) Relevant community members include women, men, children or their representatives, other vulnerable groups (e.g., ethnic minorities, the elderly, health-compromised individuals, children) or their representatives, public health providers, government health agencies, and workers who live in affected communities. A review of government statistics on various diseases may help to reveal other relevant populations.


### CROSS REFERENCES TO OTHER CHAPTERS

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<td>1.1—Legal Compliance</td>
<td>As per Chapter 1.1, if there are host country laws governing or requiring community health assessments, the operating company is required to abide by those laws. If IRMA requirements are more stringent than host country law, the company is required to also meet the IRMA requirements, as long as complying with them would not require the company to violate host country law.</td>
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<td>1.2—Community and Stakeholder Engagement</td>
<td>Stakeholder engagement in community health and safety assessment, mitigation and monitoring must comply with the general stakeholder engagement requirements in Chapter 1.2. In particular, it may be important for some capacity building to occur to ensure that community members can engage in the risk assessment process, including development of mitigation and monitoring, in a meaningful way. (See requirement 1.2.3.1) And 1.2.4 ensures that communications and information are in culturally appropriate formats and languages that are accessible and understandable to affected communities and stakeholders, and that they are provided in a timely manner.</td>
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<td>1.3—Human Rights Due Diligence</td>
<td>There are a number of community-health-related human rights (e.g., Right to Health, Right to Security of Person, Right to Adequate Housing, Right to Food, Right to Water, Right to Clean Environment, Right to Adequate Standard of Living, etc.) that may be affected by mining. These issues should be assessed during the human rights impact assessment process in Chapter 1.3.</td>
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<td>1.4—Complaints and Grievances Mechanism and Access to Remedy</td>
<td>Affected community members and stakeholders have the right to access the operational-level grievance mechanism if they have concerns about community health and safety issues related to mining project.</td>
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<td>2.1—Environmental and Social Impact Assessment and Management</td>
<td>The community health and safety risk and impact assessment does not necessary have to be a standalone assessment. It may be carried out as part of the ESIA, as long as the elements listed in this chapter are included in that assessment.</td>
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<td>2.5—Emergency Preparedness and Response</td>
<td>Mitigation measures related to community health and safety may be incorporated into or developed as part of the emergency response plan (ERP) as per Chapter 2.5. For example, if risks related to particular hazards such as chemicals transportation accidents or breaches of tailings impoundments are identified, there may be the need to incorporate into the ERP appropriate methods to alert and possibly evacuate community members as quickly and safely as possible.</td>
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<td>3.1—Fair Labor and Terms of Work</td>
<td>Requirement 3.1.3.1 mandates fair treatment in employment relationships, and prohibits operating companies from making discriminatory employment decisions on the basis of personal characteristics unrelated to inherent job requirements, such as HIV/AIDS status (see requirement 3.3.4.2).</td>
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<td>3.2—Occupational Health and Safety</td>
<td>The assessment and mitigation of health and safety risks to workers while engaged in mining-related activities are addressed in Chapter 3.2. However, workers may also live in communities that may be affected by mining-related activities, and if so, they should also be included as stakeholders in community health and safety assessment, mitigation and monitoring. HIV/AIDS testing may be included in worker health surveillance mentioned in 3.2.4.2. As per 3.2.4.2.b “Health surveillance shall be carried out in a manner that protects the right to confidentiality of medical information, and is not used in a manner prejudicial to workers’ interests.”</td>
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<td><strong>3.6—Artisanal and Small-Scale Mining</strong></td>
<td>If artisanal and small-scale mining (ASM) is occurring in the vicinity of the industrial scale mine that is participating in IRMA, the ASM operating entities and miners would be considered stakeholders and/or members of affected communities, and should be included in the scoping and assessment of risks to community health and safety, as well as in any programs related to HIV/AIDS, tuberculosis, malaria or emerging infectious diseases.</td>
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<td><strong>4.1—Waste and Materials Management</strong></td>
<td>Chapter 4.1, requirement 4.1.2.1, requires the identification of all materials, substances, such as chemicals, and wastes (other than mine wastes) associated with the mining project that have the potential to cause impacts on human health, safety, the environment or communities. And requirement 4.1.3., requires the identification of chemical and physical risks associated with mine waste materials (e.g., tailings, waste rock, spent ore from heap leaches, and residues and fluid wastes from mineral processing), which could include risks to community health and safety.</td>
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<td><strong>4.2—Water Management</strong></td>
<td>Requirement 4.2.5.2 requires a company to develop and implement procedures for rapidly communicating with stakeholders in the event that there are changes in water quantity or quality that pose an imminent threat to human health or safety.</td>
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<td><strong>4.6—Biodiversity, Ecosystem Services and Protected Areas</strong></td>
<td>4.6.1.1.e requires scoping of mining-related impacts on priority ecosystem services. This may have been done during the ESIA, as part of a biodiversity and ecosystem impact assessment as per Chapter 4.6, or scoped as part of the community health and safety scoping (3.3.1). Regardless of when the scoping occurred, if there were risks community health and safety related to potential impacts on priority ecosystem services, those risks should be further evaluated in the community health and safety risk and impact assessment process (3.3.2).</td>
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