Awareness to Accountability

MASOUISE
Health Programme

ANNUAL
REPORT

2025

health
Department:
Health
REPUBLIC OF SOUTH AFRICA

mineral resources
Department:
Mineral Resources
REPUBLIC OF SOUTH AFRICA

International
Labour
Organization

MHSC
Mine Health and Safety Council

MINERALS COUNCIL
SOUTH AFRICA

NATIONAL HEALTH
LABORATORY SERVICE

NATIONAL INSTITUTE FOR
OCCUPATIONAL HEALTH

NATIONAL UNION OF MINE WORKERS

SOLIDARITEIT
SOLIDARITY

PRIVATE SECTOR FORUM

UASA
THE UNION

UNAIDS

World Health
Organization

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A mining industry that protects and maximises the health and wellness of its employees.

EXECUTIVE SUMMARY

The Masoyise Health Programme (Masoyise HP), led by the Minerals Council South Africa, is a flagship multi-stakeholder initiative advancing the health of mineworkers and peri-mining communities. Evolving from the original Masoyise iTB campaign, it now delivers a broader, integrated health response for the mining industry.

Masoyise HP brings together prevention, screening, treatment, care and health promotion through strong partnerships with government, industry, labour and communities. This integrated model is improving access to services and strengthening coordinated action on priority health risks.

In 2025, the programme remained a key driver of occupational health in the South African mining industry, supporting integrated surveillance, screening, prevention, treatment and reporting across communicable diseases, non-communicable diseases (NCDs), mental health and occupational illnesses.

Performance in 2025 was marked by continuing low tuberculosis (TB) rates, high treatment initiation and success rates, and stronger integration of TB and HIV services. The TB in Gold Mines Working Group (TBGWG) added focused leadership where the burden remains highest, while wider screening for hypertension, diabetes and mental health signalled progress toward more holistic workplace health services.

Strong results were recorded across several TB indicators, alongside improved coverage for obesity, cholesterol and mental health screening, reinforcing the shift toward integrated worker wellness. Progress in preventing occupational lung disease (OLD) among novice workers also reflected stronger prevention efforts.

Cholesterol and mental health indicators were introduced as part of the Masoyise HP reporting framework in 2023. As newly incorporated measures, baseline data was established during this period, and trends should therefore be interpreted with caution. These indicators reflect an expanded focus on NCDs and psychosocial wellbeing, in line with evolving industry health priorities.

However, important gaps remain in antiretroviral therapy (ART) initiation, viral suppression, universal screening coverage, mental health service access and noise-induced hearing loss (NIHL) prevention. Closing these gaps will require stronger integrated prevention, treatment, surveillance, reporting, and continuity of care.

The programme also expanded its focus on women's health and post-employment care for ex-mineworkers, helping to close longstanding gaps in continuity of care.

The Masoyise HP continues to operate in a demanding environment shaped by challenging working conditions, exposure to TB and silicosis, physical strain and growing mental health pressures. Remote sites and shift-based work further challenge access, follow-up and continuity of care. International developments in the form of the withdrawal of funds by the government of the United States (US) to South African health programmes, particularly for HIV, had an impact on provision of services in the country. The Masoyise HP has monitored the impact of these cuts on communities and employees and provided local support where required.

The continuing low TB rates, alongside expanded screening for chronic and mental health conditions, **reflects the growing impact of integrated worker wellness.**

CHAIRPERSON'S REMARKS – Dr Richard Stewart

On behalf of the Masoyise HP, I am pleased to present the major highlights and achievements of the programme in 2025. As Chair of the Steering Committee, I have observed the continued commitment, partnership and leadership that have driven progress in advancing health and wellness across the South African mining industry.

The Masoyise HP remains a flagship multi-stakeholder initiative of the Minerals Council South Africa, focused on addressing TB, HIV, OLDs, NCDs and mental health. Since its launch in 2016, the programme has continued to evolve in response to the changing health needs of mineworkers and mining communities, while remaining firmly aligned to the industry's commitment to Zero Harm.

In 2025, the programme recorded several important milestones. These included the launch of the Masoyise HP 2025–2030 Strategy, which reaffirmed the programme's long-term commitment to integrated, evidence-based and sustainable health interventions; the continued strengthening of TB and HIV prevention and treatment efforts; expanded attention to mental health and employee wellness; and growing emphasis on women's health, NCDs and support for ex-mineworkers.

Among the standout achievements in 2025 was the official launch of the E*x-Mineworkers Occupational Lung Disease Guide,* an important resource developed to support ex-mineworkers with practical information on occupational lung diseases, available services and referral pathways. The guide was launched in March 2025 and made more accessible through translation into Portuguese, Sesotho and isiXhosa, together with audio voice clips to extend its reach.

Another major highlight was the Masoyise HP Satellite Session held during the 12th South African AIDS Conference in September 2025. This platform brought together representatives from government, organised labour, development partners and the private sector to reflect on progress in the HIV response and to reinforce the value of integrated workplace health programmes.

> The achievements of 2025 demonstrate **the power of collaboration** in strengthening prevention, improving care and advancing integrated health responses across the mining industry.

The session also marked the formal launch of the Masoyise HP 2025–2030 Strategy, signalling a renewed commitment to partnership, innovation and sustainability.

The programme also continued to strengthen health promotion and awareness through targeted communication and behaviour change initiatives. These included sustained anti-tobacco messaging, which supported education on the harmful effects of smoking, as well as broader communication efforts designed to improve workplace health awareness, promote prevention and encourage earlier health-seeking behaviour.

In addition, the programme broadened its wellness agenda through focused initiatives on men's health and mental health, recognising the need for more comprehensive and responsive services in the mining industry. The Wellness Coaches Workshop, held in March 2025, further strengthened dialogue and practical learning on mental health in the workplace and reinforced the importance of integrating psychological wellbeing into routine employee wellness programmes.

These achievements reflect the value of sustained collaboration across industry, government, labour and development partners. They also demonstrate that Masoyise HP continues to play a vital role in advancing integrated health responses, strengthening prevention and care, and supporting the mining industry's broader commitment to Zero Harm.

At the same time, the 2025 reporting period highlighted areas requiring continued attention. While the programme has contributed to reductions in TB incidence and improvements in access to treatment, some indicators across screening, continuity of care and occupational health performance still require stronger focus, greater consistency and enhanced accountability.

In this regard, the establishment of the TBGWG represented another important step in 2025. Given the persistently high burden of TB in the gold sector, this initiative provides focused leadership and a more targeted response to the specific risks associated with silica dust exposure, HIV prevalence and ongoing transmission.

I remain confident that, through sustained commitment, strong partnerships and disciplined implementation, Masoyise HP will continue to build on these achievements and deepen its impact in the years ahead.

DR RICHARD STEWART
MASOYISE HP CHAIRPERSON

PROGRAMME OVERVIEW

The Masoyise HP entered its fourth term in 2025, building on the momentum of earlier phases and the strong foundation established by Masoyise iTB (2016–2018). What started as a targeted response to TB and HIV has since evolved into a broader health platform for South Africa's mining industry.

The Masoyise HP strategy, targets and indicators are deliberately aligned with mining industry milestones, South Africa's national and provincial health priorities, and relevant regional and global frameworks. This alignment ensures that the programme remains responsive to evolving industry needs, measurable against recognised benchmarks and consistent with broader public health and occupational health commitments.

Key frameworks informing the programme include:

- Alignment with national/provincial health priorities
- International Labour Organisation (ILO) Recommendation 200 on HIV and AIDS: 2010
- 2021 Political Declaration on HIV and AIDS
- Global AIDS Strategy 2021–2026: End Inequalities, End AIDS
- The World Health Organisation (WHO) End TB Strategy
- Southern African Development Community (SADC) HIV and AIDS Strategic Framework (2010–2025)
- Regional Strategy for HIV Prevention, Treatment and Care and Sexual Reproductive Health and Rights among Key Populations 2024–2030
- The WHO Comprehensive Mental Health Action Plan 2013–2030
- National Department of Health (NDoH) National Strategic Plan for the prevention and control of Non-Communicable Diseases (2022–2027)
- 2024 Mine Health and Safety Council (MHSC) Occupational Health and Safety Milestones.

Today, the Masoyise HP addresses a wider set of occupational and public health priorities.

PROGRAMME FOCUS AREAS

OLDs
Including silicosis and coal workers' pneumoconiosis

NCDs
Including diabetes, hypertension, cancer and cardiovascular diseases

Mental health and wellness
Promoting psychological wellbeing, awareness, prevention and access to support services

Women's health
Advancing gender-responsive health interventions and addressing the specific health needs of women in mining

Cancers
Strengthening awareness, screening and early referral for cancer-related risks and conditions

VISION AND GOAL

Vision:
A mining industry that protects and maximises the health and wellness of its employees.

Goal:
To reduce the impact of TB, HIV, OLDs and NCDs as occupational health threats in the mining sector.

TARGETS

The Masoyise HP aims to improve mineworker health by aligning with national and global priorities, focusing on TB, HIV, NCDs, occupational health, mental health and gender equity.

End HIV and TB as an industry health threat by 2030.	**Ensure there are no new cases of pneumoconiosis among workers who joined the industry after 2024.**	**Achieve industry-wide awareness and screening for NCDs through prevention campaigns, linkage to therapy and promotion of wellbeing by 2030.**	**Achieve industry-wide awareness of, and easy access to, effective mental health services by 2030.**	**Provide industry-wide awareness of, and screening for, women's health, and link women to effective healthcare services by 2034.**

In line with this strategic alignment, the Masoyise HP has set the following goals:

- **TB and HIV:** Screen at least 95% of mineworkers annually and ensure all diagnosed cases are linked to care, while reducing TB incidence below national levels.
- **NCDs:** Screen 95% of employees for major conditions (hypertension, diabetes, obesity, cholesterol) and reduce premature mortality by 33% by 2030.
- **Mental health:** Increase awareness, improve access to services and achieve measurable improvements in outcomes by 2030.
- **Occupational health:** Strengthen prevention and early detection of OLDs and improve workplace safety.
- **Women's health:** Advance gender-responsive health programmes through targeted interventions and health needs assessments.

Taken together, these goals are intended to support a healthier and more productive mining workforce through prevention, early diagnosis and comprehensive care, aligned with national strategies and the United Nations (UN) Sustainable Development Goals (SDGs).

The Masoyise HP is guided by a steering committee that provides strategic oversight and ensures accountability. Since 2025 the committee has been chaired by Dr Richard Stewart, CEO of Sibanye-Stillwater and a member of the Minerals Council Board.

The steering committee comprises representatives from local and international partner organisations, including Minerals Council member companies; organised labour bodies such as the Association of Mineworkers and Construction Union (AMCU), National Union of Mineworkers (NUM), National Union of Metalworkers of South Africa (NUMSA), Solidarity and the United Association of South Africa (UASA); government departments such as the NDoH and the Department of Mineral and Petroleum Resources (DMPR); as well as the MHSC, National Health Laboratory Service (NHLS), National Institute for Occupational Health (NIOH), South African National AIDS Council Private Sector Forum (SANAC-PSF), the ILO, the Joint United Nations Programme on HIV/AIDS (UNAIDS) and the WHO.

The programme implementation is coordinated through four focal areas, each supported by a dedicated team responsible for a critical area of work. These are:

1. Data Management and Reporting Task Team
2. Health and Wellness Task Team
3. Communications and Stakeholder Engagement
4. Support for Junior and Emerging Miners.

This report outlines the activities of the Masoyise HP in 2025.

KEY PROGRAMME PERFORMANCE
against the strategic plan

The Masoyise HP is guided by five strategic objectives that define its priorities and drive its activities across the mining industry. The objectives of the Masoyise HP strategy 2025-2030 are as follows:

(i) Advocacy and research
(ii) Strong partnerships
(iii) Synergy and support
(iv) Accurate data insights
(v) Adopt leading practices.

These focus areas ensure a coordinated, evidence-based and impactful approach to improving health outcomes:

OBJECTIVE 1

ADVOCACY AND RESEARCH
Lead in advocacy and facilitate the generation of strategic information and research for an evidence-based, rights- and gender-sensitive agenda

ACTIVITIES

- **Commission relevant studies**
- **Give unified input to relevant policy papers**
- **Create forums for output**

KEY ACTIVITIES

Masoyise HP produced the *Ex-Mineworkers Occupational Lung Disease Guide,* a practical resource to improve awareness, service access and referral for ex-mineworkers.

Launched on 24 March 2025 in Johannesburg, the guide was translated into Portuguese, Sesotho and isiXhosa, with audio versions to broaden access.

The launch drew regional support, including representatives from the Ministries of Labour of Mozambique and Eswatini, and the High Commissioner of Lesotho.

At the 12th South African AIDS Conference in September 2025, Masoyise HP convened a satellite session to assess progress, risks and priorities in the HIV response across workplace and mining settings. Drawing on the *UNAIDS 2025 flagship report: AIDS, Crisis and the Power to Transform,* Ms Eva Kiwango, UNAIDS Country Director, highlighted gains in the HIV response, rising funding pressure and the need for integrated, innovative action.

She recognised Masoyise HP as a strong model of integrated workplace wellness and multi-stakeholder delivery.

The session also featured a presentation by SANAC-PSF on business's role in the HIV response; a multi-stakeholder panel with labour, TEBA (Pty) Ltd, government and industry representatives; and the launch of the Masoyise HP 2025–2030 Strategy, reinforcing commitment to scale integrated health action and sustain partnership-led delivery.

OBJECTIVE 2

STRONG PARTNERSHIPS

Provide support for effective partnerships, collaborations and implementation

ACTIVITIES

Create effective multi-sector partnerships

KEY ACTIVITIES

Strong partnerships remain critical to sustaining workforce and community health in high-burden settings. Through SANAC-PSF, companies supported integrated screening for employees and surrounding communities, strengthening early detection, timely referral and alignment with the 95-95-95 targets and SDGs.

More details on co-funded partnerships are provided later in the report.

In 2025, significant US funding cuts to South Africa's health programmes, particularly HIV, heightened service delivery risk. Masoyise HP monitored the impact on communities and mineworkers, while several companies increased local support.

The rise in TB notifications in 2025, after years of decline, may signal emerging pressure on affected communities and requires close monitoring.

OBJECTIVE 3

SYNERGY AND SUPPORT

Ensure coordinated access to prevention, counselling, treatment and management of diseases (including behaviour change)

ACTIVITIES

Comprehensive health service delivery and improved monitoring

KEY ACTIVITIES

In 2025, the Health and Wellness Task Team expanded its scope to reflect the broader Masoyise HP mandate and support more integrated health and wellness delivery across operations.

Beyond TB contact tracing, the Task Team oversees TB and HIV management, NCDs, mental health and workplace awareness initiatives, with technical support from the NDoH, including DHIS and Tier.Net guidance. TB contact tracing outcomes are presented later in the report.

Masoyise HP convened a Wellness Coaches Workshop at the Radisson Hotel & Conference Centre, OR Tambo, to strengthen the mining sector's response to workplace mental health. Inputs from FPD, SANAC and Wofsawellness focused on counselling integration, stronger U=U messaging and practical approaches to stress management, resilience and employee wellbeing.

In 2025, Masoyise HP strengthened communications to improve awareness, stakeholder engagement, health advocacy and visibility. A survey assessed the use, relevance and effectiveness of materials shared with stakeholders.

The findings showed strong support for the continuation of the initiative, with respondents confirming that the materials are valuable tools for workplace health promotion and education.

Most participants (67%) preferred monthly distribution, while feedback also indicated active use of the materials in employee engagement and a willingness to strengthen reporting on their application.

In response to these findings, the Masoyise HP is refining its communications approach by moving towards more structured monthly dissemination, aligning content more closely with the NDoH calendar, exploring broader language accessibility and company-level customisation, and developing clearer guidance on how stakeholders can use and report on communication materials to enhance accountability, reach and programme impact.

OBJECTIVE 4

ACCURATE DATA AND INSIGHTS
Aggregate and analyse key health indicators to check industry progress

ACTIVITIES

- Reliable data reports for decision-making
- Continuous training in data reporting
- Track indicators across TB, HIV/AIDS, OLDs, NCDs, mental health, women's health and NIHL

KEY ACTIVITIES

To support accurate data reporting and strengthen industry-wide monitoring, the Annual Occupational Health Information Management System (OHIMS) Refresher Training was held on 30 January 2026 in collaboration with the Department of Mineral and Petroleum Resources (DMPR). On the 20th of June 2025 we convened a second OHIMS training for the mining industry which was well attended by members.

The training served as an important platform to orientate member companies to the updated annual DMPR 164 forms, clarify reporting requirements, and reinforce the importance of timely, complete and consistent submission of occupational health data.

It also provided an opportunity to strengthen shared understanding of reporting expectations, address practical implementation issues and promote improved data quality for decision-making, compliance and ongoing performance monitoring across the sector.

Quarterly monitoring and evaluation engagements with member companies strengthened data quality, consistency and completeness. Data Task Team meetings tracked milestone indicators, resolved reporting issues and supported ongoing oversight of programme data priorities.

Masoyise HP formally commissioned the 2025 Annual Data Report with the NIOH to consolidate and analyse key programme indicators and emerging trends.

A summary is provided later in the report.

OBJECTIVE 5

ADOPT LEADING PRACTICES
Encourage the uptake of proven, data-driven practices across the industry

ACTIVITIES

Socialise data driven policy insights

KEY ACTIVITIES

Established by the Minerals Council's Health Policy Committee, the TBGWG targets the persistently high TB burden in the gold sector. In 2025, the TBGWG advanced leading practices through the development and pilot of a TB Review Tool to strengthen prevention, diagnosis and case management. Tested at four mines across two companies, the pilot generated practical insights to inform wider industry adoption and continuous improvement in TB control.

COMMUNITY OUTREACH
and co-funded partnerships

The Masoyise HP has SANAC-PSF as one of its key stakeholders specialising in community outreach initiatives. Mining companies operate in communities heavily affected by HIV, TB and other chronic conditions, making strong partnerships essential to sustaining both community wellbeing and a healthy workforce. Through collaboration with SANAC-PSF, companies support comprehensive health screening for employees and surrounding communities, enabling early detection, timely intervention and stronger alignment with national, regional and global targets, including the 95-95-95 goals and the SDGs. In the current funding environment, these partnerships are more critical than ever in helping to close HIV and TB service gaps and strengthen community engagement. The programmes completed in 2025 are listed on page 16 to 19.

1. SERITI RESOURCES, AFROCENTRIC GROUP AND AFRICA SKY BLUE COMMUNITY HEALTH SCREENING PROJECT IN MPUMALANGA

Seriti Resources endeavours to contribute to the South African economy by implementing sustainable corporate social responsibility projects. Community development initiatives across all operations are attributed to six key focus areas comprising: education, portable skills training focusing on youth, support to host municipalities, health and sanitation, poverty eradication, and enterprise and supplier development. One such initiative is the partnership programme with SANAC-PSF and AfroCentric Group. The aim of this project was to provide HIV testing services and wellness screening opportunities to 17,000 individuals residing in the following communities:

- Phola/Ogies and surrounding communities (Klipspruit, New Largo and Khutala)
- Siyanqoba and Clarinet communities surrounding Pegasus
- Thubelihle, Kriel town and surrounding farms (Kriel)
- Naledi and Lesedi villages, Masakhane and Mhluzi (MMS)
- Standerton extension 6, Rooikopen farm (NDC) and Morgezon (SG).

Project duration and results

The project was carried out from 7 May 2024 to 3 April 2025. The programme focused mainly on testing community hotspots identified by the NDoH. Of the 17,000 clients tested, 16,530 were tested for HIV. Some clients already knew their HIV status and opted to only receive TB, sexually transmitted infections (STI) and wellness screening. 91% of clients were reached in community hotspots, 5% at taxi ranks and the remaining 4% of clients were reached in formal and informal workplaces, clinics and other centres. During the counselling and testing process, clients receive health education and are referred for treatment follow up and initiation at their local health facilities. They are encouraged to manage their health and reduce risk.

Category	Indicator	Result	Percentage
Project period	Implementation period	7 May 2024 – 3 April 2025	
Service reach	Total clients screened	17,000	
	Clients tested for HIV	16,530	97
	Clients who tested HIV positive	199	1
	Newly diagnosed HIV-positive clients	90	1
	Known HIV-positive clients counselled only	467	3
Testing decisions	Clients counselled who declined testing	3	0.02
Gender distribution	Male	9,180	54
	Female	7,820	46
Referrals and linkage to care	Clients referred for treatment	676	
	Newly diagnosed HIV-positive clients referred for treatment initiation	90	45
	Newly diagnosed HIV-positive clients referred for re-initiation	110	55
	Clients with TB symptoms referred for further screening and treatment	84	0.49
	Clients referred for Post Exposure Prophylaxis (PEP)	1	0.0059
	Clients referred for Pre-Exposure Prophylaxis (PreEP)	215	1.26
	Clients with very high blood pressure referred for follow-up and treatment	184	1.08
	Confirmed ART initiation among clients who tested HIV positive	177	89
Blood pressure findings	Clients with very high blood pressure	915	5.38
	Clients with low blood pressure	2,800	16.47
	Among HIV-positive clients: high blood pressure low blood pressure	 2,990 2,307	 17.59 13.57

Sustainability

- All clients screened in this project that needed follow up, linkage to care and treatment initiation were referred to local health clinics and hospitals.
- Seriti mine further has existing working relationships with all key stakeholders to ensure project sustainability.
- Since the launch of the SANAC-PSF more pressure is on the private sector to contribute directly to achieving the goals of the NSP 2023 to 2028. Therefore, this project can become a blueprint for similar projects in the future.

Project close-out event
The close out event was held on 10 June 2025.

2. EXXARO GROOTEGELUK MINE, AFROCENTRIC AND AFRICA SKY BLUE COMMUNITY LIMPOPO

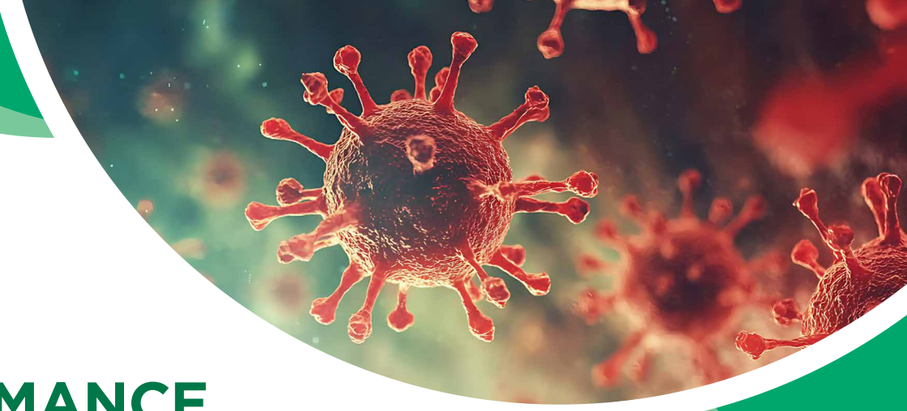
Exxaro's guiding principles are sustainability, stakeholder inclusiveness and collaboration. We improve quality of life, morale, productivity and safety for our employees and communities through a health and wellness strategy that extends beyond compliance with regulations to the sustainability of our industry. The growth and sustainability of our business depend on healthy and resilient employees and host communities. One such initiative is the partnership programme with SANAC-PSF, AfroCentric Group and Africa Sky Blue Community.

Project duration and results
The programme focused mainly on testing nine community hotspots identified by the NDoH. Of the 8,526 clients tested, 8,514 were tested for HIV. Some clients already knew their HIV status and opted to only receive TB, STI and wellness screening. 98% of clients were reached in community hotspots. The table below shows the project results and outcomes.

Category	Indicator	Result	Percentage
Project period	Implementation period	5 Dec 2024 – 30 April 2025	
Service reach	Total clients screened	8,526	
	Clients tested for HIV	8,514	99.9
	Clients who tested HIV positive	301	3.54
Gender distribution	Male	4,092	48
	Female	4,434	52
Referrals	Clients referred for treatment	421	
	Newly diagnosed HIV-positive clients referred for treatment initiation	63	15
	Newly diagnosed HIV-positive clients referred for re-initiation	3	4
	Clients referred for Pre-Exposure Prophylaxis (PreEP)	155	1.82
	Clients with TB symptoms referred for further screening and treatment	6	0.07
	Clients with STI symptoms referred for screening and treatment	15	0.17
	Clients with very high blood pressure referred for follow-up and treatment	134	1.57
	Clients with elevated blood glucose referred for follow-up and treatment	45	0.53

3. EXXARO AND FRF HEALTH PROJECT MPUMALANGA

Exxaro and FRF Health entered a partnership for the screening of 17,045 individuals in Mpumalanga surrounding Matla, Leeuwpan and Belfast mines. The project started on 24 November 2025 and will be concluded in May 2026. The project results will be published in the 2026 Masoyise Annual Report.



PERFORMANCE AND DATA RESULTS

Masoyise HP tracks industry health performance through company data submitted via the Minerals Council OHIMS, hosted by The Health Source. The table below summarises the 2025 programme performance against Masoyise HP, national and global health targets. The annual collected data is analysed by the NIOH. The 2025 annual data report is available on our website.

INDUSTRY PERFORMANCE AGAINST TARGET

ACTIVITY	MILESTONE	2020	2021	2022	2023	2024	2025
Compliance to reporting	Companies on the system	280	281	280	286	289	**299**
	Finalisation of reports (100%)	83.7%	91.5%	91.2%	90.4%	93.8%	**97.6%**
HIV counselling, testing and ART treatment	HIV counselling (95%)	67.3%	67.1%	81.7%	91.4%	81.6%	**87.9%**
	Annual HIV test (95%)	43%	49%	63.7%	62.7%	75.2%	**76.5%**
	ART treatment (100%)	56.2%	46.4%	47.1%	44.3%	43.1%	**54.8%**
TB screening	Annual TB screening (95%)	68%	75.4%	81.7%	92.7%	85.6%	**88.4%**
TB incidence	Below the national TB notification rate 5% year on year reduction for the TB notification rate per 100,000 population	195	221	244	229	162	**173**
NCDs	Employees screened for hypertension (95%)	69%	74%	81.7%	92.1%	87.9%	**88.1%**
	Employees screened for diabetes (95%)	61%	59%	80%	91.5%	84.1%	**89.7%**
	Employees screened for obesity (95%)	**Not part of framework**			87.3%	83.2%	**88.8%**
	Employees screened for cholesterol (95%)				32.6%	27.5%	**72.5%**
	Employees screened for mental health issues (95%)				11.4%	67.7%	**78.1%**
	Linked to mental health care (100%)				38.9%	76%	**80.7%**

** The population at risk for cholesterol screening was identified as all people that are obese, have NCDs as well as those who are HIV positive*
*** Cholesterol and mental health indicators were introduced as part of the Masoyise HP reporting framework in 2023. As newly incorporated measures, baseline data was established during this period, and trends should therefore be interpreted with caution. These indicators reflect an expanded focus on NCDs and psychosocial wellbeing, in line with evolving industry health priorities.*

The findings demonstrate continued improvement in programme participation and reporting compliance. In 2025, a total of 299 companies submitted data to the Minerals Council OHIMS, representing the highest level of participation recorded over the five-year reporting period. Figure 1 on the next page shows the Masoyise HP

reporting companies over the years from 2021 to 2025. Similarly, workforce representation within the system increased to 422,009 mineworkers, reflecting strengthened programme coverage and improved reporting completeness across the South African mining industry. Reporting conformance also improved substantially, with 97.6% of expected reports submitted in 2025.

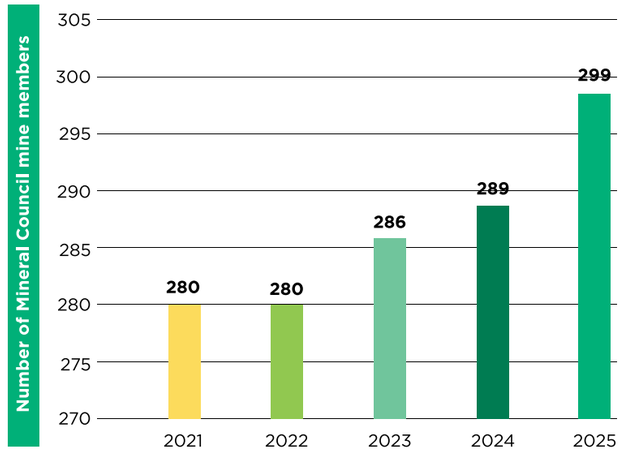


Figure 1: Number of companies reporting on the Masoyise HP OHIMS 2021-2025

Strong performance was observed across several HIV and TB programme indicators. HIV testing coverage increased steadily over the reporting period, while the proportion of mineworkers testing HIV positive continued to decline. ART initiation among newly diagnosed HIV-positive mineworkers improved in 2025, although coverage remained below programme targets. Viral suppression among mineworkers receiving ART remained below the UNAIDS 95-95-95 targets, indicating ongoing opportunities to strengthen adherence support and continuity of care.

TB screening coverage remained high throughout the reporting period, with 88.4% of mineworkers screened in 2025. Figure 2 shows the trends in the percentage of workers screened for TB from 2021 to 2025.

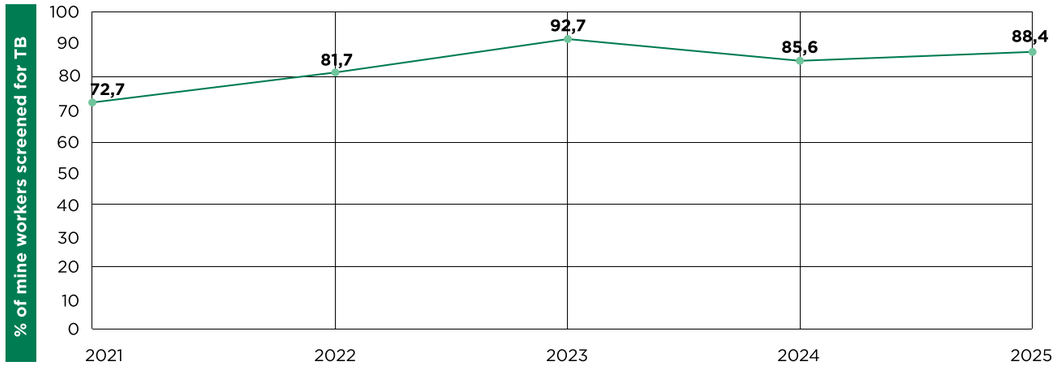
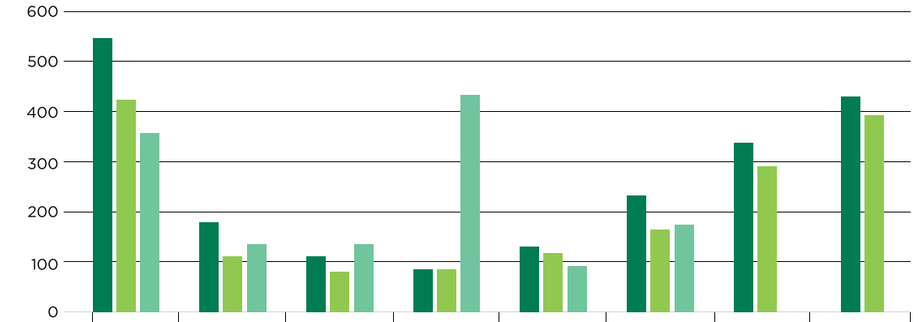


Figure 2: Trends in the percentage of workers screened for TB 2021-2025

The overall TB notification rate among mineworkers remained lower than the reported South African national TB notification rate. Treatment initiation and treatment outcomes among mineworkers diagnosed with TB demonstrated particularly strong programme performance, with 95.3% of diagnosed mineworkers initiated on treatment and a treatment success rate of 95.5%, substantially exceeding the South African national treatment success rate. High ART coverage among mineworkers co-infected with TB and HIV further reflected the strengthened integration of HIV and TB services within the Masoyise HP.

The overall TB notification rate declined from 229 per 100,000 mineworkers in 2023 to 162 per 100,000 in 2024, before increasing slightly to 173 per 100,000 in 2025. Despite this increase, the mining industry's notification rate remained lower than the reported South African national TB notification and WHO-estimated incidence rates during the reporting period (Figure 6). As illustrated in Figure 3, gold and diamond mining reported the highest TB notification rates over the reporting period, although rates declined from 544 per 100,000 in gold mineworkers in 2023 to 354 per 100,000 in 2025. In diamond mining, a reported outbreak of TB at a particular mine led to an unusual surge in TB cases in 2025. Similarly, TB notification rates in platinum mining increased from 110 per 100,000 mineworkers in 2024 to 136 per 100,000 in 2025. TB notification rates within the diamond mining sector increased substantially from 82 per 100,000 mineworkers in 2023 and 84 per 100,000 in 2024 to 430 per 100,000 in 2025. Coal mining also demonstrated an increase in TB notification rates in 2025, while notification rates within the "Other" commodity category declined over the reporting period (Figure 3).



	Gold	Platinum	Coal	Diamond	Other	TB notification	SA TB notification rate	SA TB incidence rate
2023	544	179	110	82	130	229	335	427
2024	420	110	81	84	117	162	287	389
2025	354	136	136	430	91	173		

Figure 3: Trends in TB in commodity specific TB notification rates among mine workers 2023-2025

Significant progress was also observed across NCD and mental health programme indicators. Screening coverage for hypertension, diabetes, obesity and cholesterol remained high overall, with substantial improvements observed in cholesterol screening coverage in 2025.

Figure 4 shows the trends on NCD screening from 2022 to 2025. Obesity and cholesterol screening indicators were introduced in 2022.

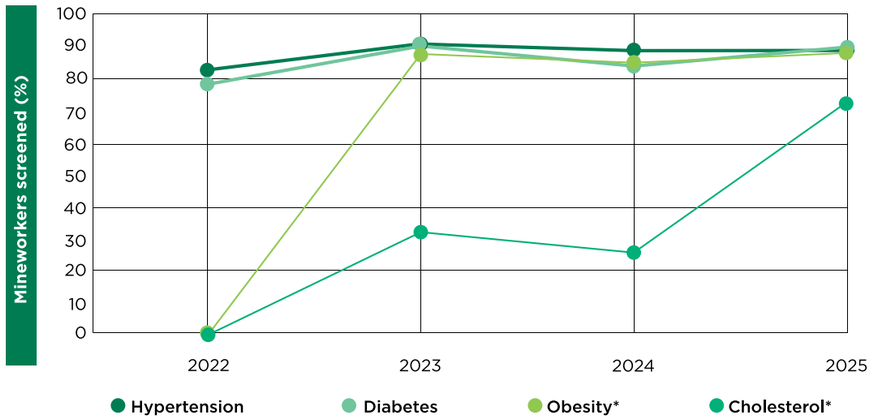


Figure 4: Trends in hypertension, diabetes, obesity and cholesterol screening coverage among mine workers 2022–2025.

Mental health screening coverage and linkage to care also improved, reflecting growing integration of mental health services into occupational health and wellness programmes within the South African mining industry.

Mental health screening coverage and linkage to care also improved, reflecting growing integration of mental health services into occupational health and wellness programmes within the SA mining industry. Mental health screening coverage increased from 63.4% in 2024 to 78.1% in 2025. Among those screened, the proportion identified with mental health challenges decreased slightly from 8.0% to 7.6% over the reporting period. Linkage to mental health care improved from 76.0% in 2024 to 80.7% in 2025 (Figure 5).

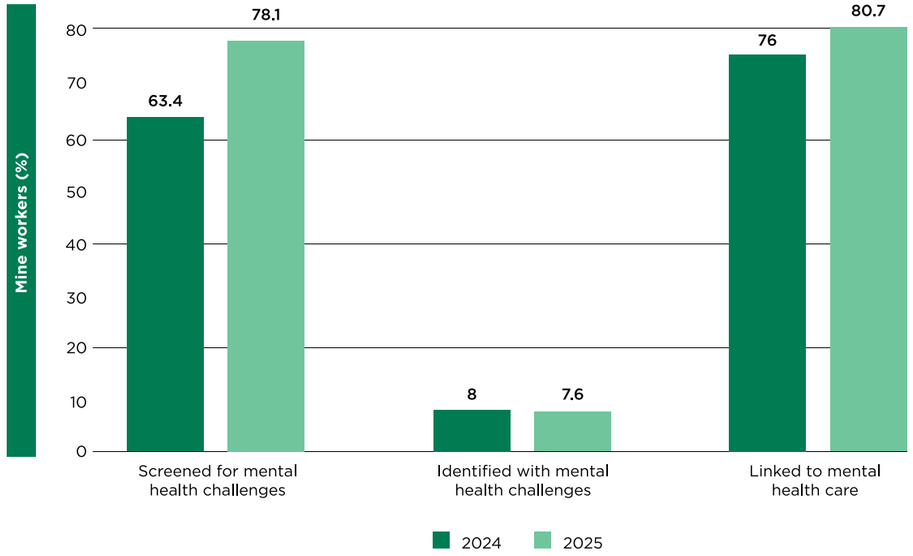


Figure 5: Mental health programme indicators among mine workers 2024-2025

In occupational medicine programmes, encouraging progress continued towards the elimination of OLDs among novice workers, with no new cases of coal workers' pneumoconiosis reported among novice workers during the reporting period. However, occupational hearing loss remained an important challenge, particularly among non-novice workers, highlighting the continued importance of strengthened hearing conservation programmes and occupational exposure control measures. The trends in silicosis and CWP are represented in the table below.

OLDs (silicosis and CWP) in the mining industry 2022–2025

MHP 2030 target	2022		2023		2024		2025	
	N = 426,536		N = 447,079		N = 453,040		N = 422,009	
	Non-novice	Novices	Non-novice	Novices	Non-novice	Novices	Non-novice	Novices
0 number of cases of silicosis among novice workers	171	0 (0.0)	168	2 (0.0)	115	0 (0.0)	134	0 (0.0)
0 number of cases of CWP among novice workers	5	0 (0.0)	6	0 (0.0)	8	0 (0.0)	13	0 (0.0)

Largely, the findings of this report demonstrate the growing maturity and impact of the Masoyise HP as a coordinated industry-wide occupational health initiative. Through sustained collaboration between mining companies, organised labour, government departments and other relevant stakeholders, the programme continues to contribute meaningfully towards improved worker health outcomes, strengthened occupational health systems, and the advancement of safer, healthier and more sustainable working environments within the South African mining industry.

> **Every step towards better prevention,** treatment and care brings us closer to a mining industry where every worker can **return home healthier and safer.**

TB OUTCOMES AND CONTACT TRACING

TB treatment outcomes

The table below summarises TB treatment outcomes among mineworkers receiving TB treatment in 2024. Of the 782 mineworkers diagnosed with TB, 774 (99.0%) were initiated on treatment. Overall treatment success was achieved among 739 mineworkers, corresponding to a treatment success rate of 95.5%, which exceeded the South African national treatment success rate of 71%.

Among mineworkers with successful treatment outcomes, 415 (53.6%) were classified as cured, while 324 (41.9%) completed treatment. Poor treatment outcomes were infrequently reported, with 16 (2.1%) mineworkers recorded as having died, and only 1 (0.1%) case each reported for treatment failure and loss to follow-up. A total of 64 (8.3%) treatment outcomes were classified as not evaluated.

TB treatment outcomes for 2024

TB treatment outcome	TB cases (n= 782) 2024	
	n	%
Initiated on treatment	774	99.0
Treatment success	739	95.5
Cured	415	53.6
Treatment completed	324	41.9
Treatment failed	1	0.1
Died	16	2.1
Lost to follow up	1	0.1
Not evaluated	64	8.3

TB contact tracing

TB remains a main disease in the mining industry. All mining companies are expected to conduct contact tracing of all cases diagnosed. The table below shows the TB contact tracing outcomes over three years 2022 to 2025. In 2025, the TB contact tracing programme continued to demonstrate strong reach and operational performance, with 683 index pulmonary TB cases identified and 3,478 contacts traced, averaging 5.1 contacts per case.

Overall, 3,253 contacts were successfully traced and screened, representing a high tracing coverage of 93.5%, and all TB-positive contacts were initiated on treatment, confirming strong linkage to care. Although yield remained low at 0.92% (30 cases), the programme showed sustained reach and improving performance. There was a sharp increase in cases screened, detected and in the yield due to a diamond company that had a TB outbreak and screened and tested all employees. One company reported a higher number of contacts successfully traced and screened than were originally identified, resulting in an unusually high percentage of 104% for contacts traced and screened in 2024.

TB contact tracing

Indicator	2023	2024	2025
Number of index pulmonary TB clients (cases) identified	244	700	683
Number of contacts identified	1,184	2,431	3,478
Number of contacts per index case	4.5	3.5	5.1
Number of contacts successfully traced and screened	1,137	2,531	3,253
% of contacts traced and screened	96	104.11	93.53
Number of cases detected	9	9	30
Yield (% TB positive from those screened)	0.8	0.4	0.92
% TB positive put on treatment	87.5	100	100

LESSONS LEARNED AND CHALLENGES

LESSONS LEARNED

Partnerships remain central to programme delivery

A key lesson from 2025 was that the success of the Masoyise HP continues to depend on strong collaboration between mining companies, organised labour, government departments and development partners. This multi-stakeholder model strengthened coordination, shared accountability and implementation support, and remained essential in responding to complex workplace and public health challenges across the industry.

Mental health must be embedded within routine wellness services

The increased focus on mental health during 2025 reinforced the need to treat psychological wellbeing as an integral component of employee health rather than a standalone concern. Expanded screening, awareness activities and stakeholder engagement highlighted both the scale of need and the importance of integrating mental health more fully into routine occupational health and employee wellness programmes.

Continuous adaptation is necessary to remain relevant and effective

The development and implementation of the Masoyise HP 2025–2030 Strategy demonstrated the importance of maintaining a programme that can evolve in response to changing workforce health needs, industry priorities and emerging risks. The broadening of the programme's focus to include mental health, women's health and wider wellness issues highlighted the value of regularly reviewing and refining programme strategies, systems and interventions.

Support for ex-mineworkers is an important extension of programme impact

The launch of the *Ex-Mineworkers Occupational Lung Disease Guide* highlighted the importance of extending support beyond active employment. This experience reinforced the need for accessible information, clearer referral pathways and sustained assistance for ex-mineworkers in relation to healthcare services, occupational disease management and compensation processes.

Stronger outcomes require continuity across the care cascade

The 2025 performance results showed that high screening coverage on its own is not enough to achieve programme goals. Improved outcomes will depend on strengthening continuity of care across HIV, TB and mental health services, including counselling, linkage to treatment, adherence support, retention in care and follow-up. This remains particularly important for improving ART initiation, viral suppression, TB case detection and sustained access to support services.

Stronger data systems are essential for accountability and improvement

Another important lesson from 2025 was the central role of reliable data in guiding programme performance, accountability and decision-making. The reporting cycle underscored the need for stronger validation processes, more consistent reporting practices and continued capacity building in data management to improve the quality, completeness and usefulness of programme information.

CHALLENGES

Persistent stigma affecting service uptake

Stigma related to TB, HIV and mental health remained a significant barrier to timely testing, disclosure, treatment adherence and the uptake of support services. This continued to underscore the importance of confidential, employee-centred services, strengthened peer education, workplace awareness initiatives and visible leadership support to create environments that encourage health-seeking behaviour.

Growing complexity of workplace health needs

As the programme continued to evolve beyond its original focus on infectious diseases, it increasingly had to respond to a broader set of health priorities, including chronic disease management, mental health, women's health and post-employment support. This wider scope created greater demand for integrated systems, stronger coordination and additional technical and operational capacity across participating companies and partners.

> The foundation has been strengthened; **the next step is turning progress into lasting health** outcomes for every mineworker and mining community.

CONCLUSION

In 2025, Masoyise HP strengthened its role as a credible and integrated platform for advancing the health of mineworkers and mining communities. During the year, the programme made meaningful progress in TB and HIV prevention and care, expanded screening for NCDs and mental health, maintained momentum in occupational health surveillance, advanced women's health as an emerging priority, and extended its reach through support for ex-mineworkers and community-based partnerships.

Key milestones included the launch of the Masoyise HP 2025–2030 Strategy, the Ex-Mineworkers Occupational Lung Disease Guide, the satellite session at the 12th South African AIDS Conference, the work of the TBGWG, and stronger communication, data and reporting systems. Together, these achievements show that the programme is evolving in step with the changing health needs of the South African mining industry and confirm the value of coordinated action between mining companies, organised labour, government, development partners and affected communities.

At the same time, the report shows that important gaps remain. While TB screening, treatment initiation and treatment outcomes remained strong, further improvement is needed in ART initiation, viral suppression, universal screening coverage, continuity of care, access to mental health services and the prevention of NIHL. The lessons and challenges in this report also highlight the need to reduce stigma, strengthen accountability across the care cascade, improve the quality and use of data, and ensure that programme systems continue to adapt to operational pressures and a growing burden of disease. Community outreach and co-funded partnerships further showed that mineworker health is closely linked to the wellbeing of surrounding communities, especially in a context of funding pressures and ongoing service delivery risks.

Looking ahead, Masoyise HP is well placed to build on the foundation laid in 2025. The next priority is to turn strategy into sustained implementation by strengthening integration across prevention, screening, treatment, referral, follow-up and reporting; scaling leading practices; focusing support on high-burden and underperforming areas; and maintaining the strong partnerships that have shaped the programme's progress to date. With continued commitment, disciplined implementation and shared accountability, Masoyise HP can further accelerate progress towards healthier mineworkers, healthier mining communities and safer, more sustainable working environments across the South African mining industry.

ANNEXURES

Annexure 1: Annual Masoyise Data Report 2025
Link: https://www.mineralscouncil.org.za/component/jdownloads/?task=download.send&id=2733&catid=38&m=0

ABBREVIATIONS AND ACRONYMS

ART	anti-retroviral therapy
DMPR	Department of Mineral and Petroleum Resources
HCT	HIV counselling and testing
HIV	Human Immunodeficiency Virus
ILO	International Labour Organisation
Masoyise HP	Masoyise Health Programme
MHSC	Mine Health and Safety Council
Minerals Council	Minerals Council South Africa
NCDs	non-communicable diseases
NDoH	National Department of Health
NIHL	noise induced hearing loss
NIOH	National Institute for Occupational Health
OHIMS	Occupational Health Information Management System
OLDs	occupational lung diseases
PEP	Post Exposure Prophylaxis
PreEP	Pre-Exposure Prophylaxis
PSF	Private Sector Forum
SADC	Southern African Development Community
SANAC	South African National AIDS Council
SDGs	Sustainable Development Goals
STI	sexually transmitted infections
TB	tuberculosis
TBGWG	TB in Gold Mines Working Group
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
US	United States
WHO	World Health Organisation