

OCCUPATIONAL HEALTH

Harmony - Kusasaletu



MINERALS COUNCIL SOUTH AFRICA

#MakingMiningMatter



A 9.5% decrease in the total number of occupational diseases between 2018 and 2019.

QUICK FACTS

3,130

occupational diseases
(3,458 in 2018)

1,403

TB cases reported
(2,066 in 2018)

903

Noise induced hearing loss cases
(886 in 2018)

374

Silicosis cases reported
(465 in 201)

* The health data is only available up to 2019

OVERVIEW OF HEALTH PERFORMANCE

Exposure to various health risks in the workplace has been well documented over the years. The mining industry poses several health challenges, which vary from sector to sector. In the last decade, health-related statistics have improved significantly as the industry has undertaken efforts to reduce occupational health risks.

Tuberculosis (TB), silicosis and noise induced hearing loss (NIHL) are the most common occupational diseases in the mining industry. While NIHL is a health risk in almost all areas of mining, occupational lung disease, particularly silicosis, is a major issue in the gold and coal sectors. In the last decade, the mining industry has made significant strides in reducing incidence of these diseases.

These health statistics draw on data published by the Department of Minerals Resources and Energy (DMRE) for 2019.

Between 2018 and 2019, disease incidence overall showed a marked reduction, with a 9.5% decrease in occupational diseases. Gold had the largest improvement at 31%, followed by platinum (19%) and coal (4%).

HIV counselling declined to 70.2% in 2019 compared to 73.2% in 2018. This is concerning considering that COVID-19 was not a contributing factor. Of those that were counselled, 66.7% tested for HIV.

TB screening improved to 97.3% in 2019 compared to 96.2% in 2018. Screening rates were higher than 90% in all commodities. The total number of TB cases diagnosed has been reducing dramatically, with 1,403 cases diagnosed in 2019 (2,066 in 2018).



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MILESTONE SETTLEMENT

The Tshiamiso Trust was established in 2020 to carry out the terms of the settlement agreement reached between six mining companies and claimant attorneys in the historic silicosis and TB class action. Tshiamiso is a Setswana word that means 'to make good', or 'to correct'.

The trust is responsible for ensuring that all eligible current and former mineworkers across southern Africa with silicosis or work-related TB (or their dependants where the mineworker has died) are compensated.



To view the website, please visit: www.tshiamisotrust.com

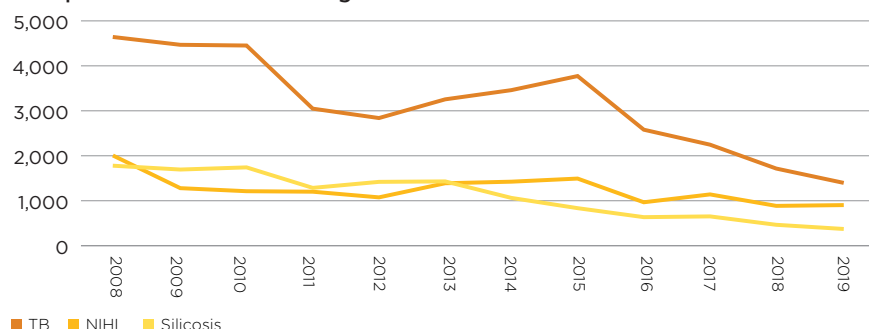
FITNESS TO WORK

The risk presented by fatigue is managed by means of specific occupational health and safety management plans implemented by each mine. Fatigue (a symptom of over-exertion) is a state of physical and mental impairment that reduces alertness and performance. Employees often complain of feeling lethargic, exhausted and tired. Fatigue is multi-faceted but often associated with an individual's circadian rhythm (sleep-wake cycles). If not managed properly, the effects of fatigue are dangerous mentally and physically, leading to debilitating depression, keeping employees away from work, reducing productivity and increasing the risk of occupational injuries.

SPECIFIC MINIMUM STANDARDS

The Department of Mineral Resources and Energy requires mining companies to ensure that employees meet specific minimum standards of fitness to perform work, and provides guidelines for a mandatory code of practice on risk-based fatigue management. Fitness assessments consider records of medical history, including clinical examinations, blood tests and diagnostic radiology, in determining fitness to perform specific jobs on a mine. Wellness encompasses more than fitness to work, however. It is about preventing disease. Practically, this means eating a balanced diet, exercising regularly and achieving work-life balance. It also advocates regular health screening for common diseases, such as HIV, and lifestyle ailments (such as hypertension, diabetes and cancer). It is also important to manage stress through counselling.

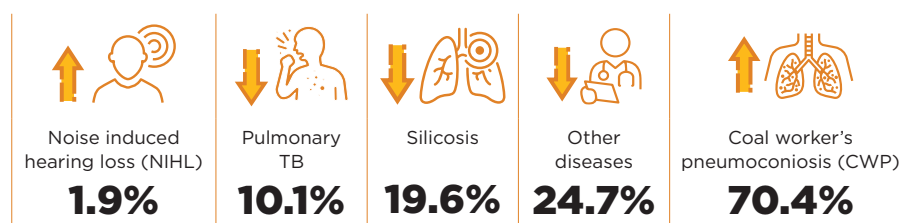
Occupational diseases in mining: 2008-2019*



Source: Department of Mineral Resources and Energy

*Due to a lag in the reporting of health-related performance, the statistics represented are for 2019.

Trends in the main occupational diseases between 2018 to 2019



Source: Department of Mineral Resources and Energy

While the decreases in the incidence of some of these occupational diseases is positive, concerning factors are the regressions shown in 2019 in efforts to meet the respirable silica and coal dust exposure milestones.

The DMRE now monitors mortalities from occupational diseases as well as from natural causes. In 2019 there was a 42% reduction in deaths due to occupational diseases, from 50 deaths in 2018 to 29 deaths in 2019. A total of 1,060 deaths from natural causes were reported in the industry in 2019. The most common causes of mortality were cardiovascular, chronic respiratory and auto immune diseases.

HEALTH PROGRAMMES

The Minerals Council remains committed to reach industry targets on health and safety, assisted by the implementation of various health initiatives. Health programmes were severely impacted by COVID-19 during 2020, with priorities having to be shifted significantly. The Minerals Council played a significant role in leading the industry's response to the pandemic. For more on this, please see the fact sheet on the Industry response to COVID-19.

Masoyise Health Programme

The Masoyise Health Programme is a multi-stakeholder initiative aimed at reducing TB, HIV, occupational lung diseases and non-communicable diseases. Both pulmonary TB and HIV/AIDS are significant public health threats in South Africa. It is estimated that 80% of the country's population is infected with latent TB and 1% develops active TB every year. The Masoyise Health Programme has contributed to an increase in both counselling for HIV and screening for TB.

Khumbul'ekhaya health and safety initiative

In October 2019, the Minerals Council launched Khumbul'ekhaya, a CEO-led strategy to drive a step-change in both health and safety performance in the mining industry. The Khumbul'ekhaya initiative emphasises the need to develop a holistic approach to address health- and safety-related issues in mining, and to develop a system of understanding occupational deaths in and beyond employment.

A COVID-19 seroprevalence survey was conducted in April 2020 in three phases, carried out at two mines - a gold mine in Gauteng and an iron ore mine in the Northern Cape. The first two phases of the survey are complete, indicating that seropositivity was significantly associated with ethnicity, previous positive PCR testing and past COVID-19 symptoms. However, only Phase 1 found contact with an infected person and obesity to be significantly associated with seropositivity and only Phase 2 found working underground and age to be significantly associated with seropositivity.

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