

ANNUAL REPORT '22



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Summary

Now in its third term, the **Masoyise Health Programme (MHP)** is a Minerals Council-led, multi-stakeholder programme that leads the South African mining industry's commitment to fight Tuberculosis (TB), Human Immunodeficiency Virus (HIV) and AIDS, Occupational Lung Diseases (OLDs) and Non-Communicable Diseases (NCDs).

This five-part report reflects on the 2022 activities that support the five programme objectives.

Objective one: To gather evidence to shape the national agenda, three studies were commissioned and completed in 2022: Long Covid-19, Surveillance of COVID-19 in Selected South African Mines and Covid-19 Capacity Assessment and Future Utilisation. There were also two hybrid seminars, 2022 World TB Day for South African Mining Industry, held on 31 March, and The future of TB. What is the latest? Held on 9 July 2022.

Objective two: To strengthen partnerships, the regional chambers of mines of the Mining Industry Associations of Southern Africa (MIASA) organised a tour to the Minerals Council. As part of the tour, delegates visited Gold Fields South Deep mine, and this helped to build connections and create cross-border sharing of knowledge.

Objective three: Junior and emerging miners were supported in three campaigns: 5 500 miners were reached in Bojanala District; 830 miners were reached in Govan Mbeki District; and comprehensive health screening of 500 individuals was completed at DRD Gold mine in Gauteng. The need for facilitated and coordinated action is stronger than ever before and will have to be the key focus going forward in reaching the junior and emerging mines.

Objective four: Data from 404 mines with a total of 414 312 employees was analysed. Results show some improvement, but few goals have been reached. All people who work in the sector should be screened for HIV, TB and NCDs. In 2022, the portion of employees who were offered HIV testing and counselling was 87.9%, with a 53% uptake; TB screening increased to 85%; diabetes screening increased to 80%; and high blood pressure screening to 84%. There was a satisfactory drop in TB incidences, but at a positive result rate of 74%, treatment outcomes are still below the WHO End TB target of 90% or above.

Objective five: To support an enabling environment for the MHP, the Steering Committee commissioned a revised strategy. The outcomes of this work will be implemented in 2023. This report also presents a selection of communications campaigns that promote the programme, raise awareness and educate mine employees and peri-mining communities about how to prevent and treat HIV, TB, NCDs and OLDs.

In conclusion, MHP plays an important role in championing the industry's drive to create a workplace that protects workers' health and wellbeing. The MHP is an essential health programme, not only for the mining industry, but for South Africa and the continent. Its performance provides lessons for health programmes across different sectors of the economy as well as the public health interventions of the country.

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Glossary

ART	Antiretroviral Therapy
CWP	Coal Worker's Pneumoconiosis
CoE	Centre of Excellence
DMRE	Department of Mineral Resources and Energy
DoH	Department of Health
HCT	HIV Counselling and Testing,
HIMS	Health Information Management System
HIV	Human Immunodeficiency Virus
HTS	HIV Testing Services
Minerals Council	Minerals Council South Africa
MC- OHIMS	Minerals Council Occupational Health Information Management System
MHP	Masoyise Health Programme
MHSC	Mine Health and Safety Council
MOSH	Mining Industry Occupational Safety and Health
MITHAC	Mining Industry TB, HIV/AIDS Advisory Committee
NCDs	Non-Communicable Diseases
NIHL	Noise-Induced Hearing Loss
OLD	Occupational Lung Diseases
SADC	South Africa Development Community
SABCOHA	South African Business Coalition on Health and Aids
SDG	Sustainable Developmental Goals
STS	Standard Threshold Shift
TB	Tuberculosis
UNAIDS	United Nations Programme on HIV/AIDS

Introduction to the programme

“Nowhere else in the world has a mineral revolution proved so influential in weaving the political, economic and social fabric of a society”¹

+ The mining industry is at the heart of South Africa. It is a key commercial player, generating at least **8.7%** of the gross domestic product in 2021². It is also the driver for many health and safety programmes for both employees and surrounding communities, including the MHP.

Now in its third term, the MHP is a Minerals Council-led, multi-stakeholder programme that leads the South African mining industry’s commitment to fight TB, HIV, OLDs and NCDs³, to foster a mining industry that protects and maximises the health and wellness of its employees. The programme has been one of the progressive and sustainable flagship initiatives of the Minerals Council South Africa (Minerals Council) in achieving Zero Harm. It supports the Minerals Council intent to lead by example and demonstrate progress on transformation, safety, social and environmental imperatives, including sharing leading practices.

MHP is governed by the Steering Committee and in 2022, was chaired by Ms Zanele Matlala, a member of the Minerals Council Board. The Steering Committee includes senior health managers from member companies, stakeholders and partner representatives from organised labour (NUM, AMCU, Solidarity and UASA), government departments (DoH, DMRE), Mine Health and Safety Council (MHSC), National Institute for Occupational Health (NIOH) and the United Nations multilateral organisations like International Labour Organisation (ILO), Joint United Nations Program on HIV/AIDS (UNAIDS) and The World Health Organization (WHO). The programme implementation is carried out through four task teams which focus on data, TB contact tracing, communications and support for junior and emerging miners.

The MHP is aligned with several international and national strategies, including the sustainable development goals (SDGs)⁴, the WHO global plan to end TB⁵, and global strategy for the prevention and control of NCDs⁶.



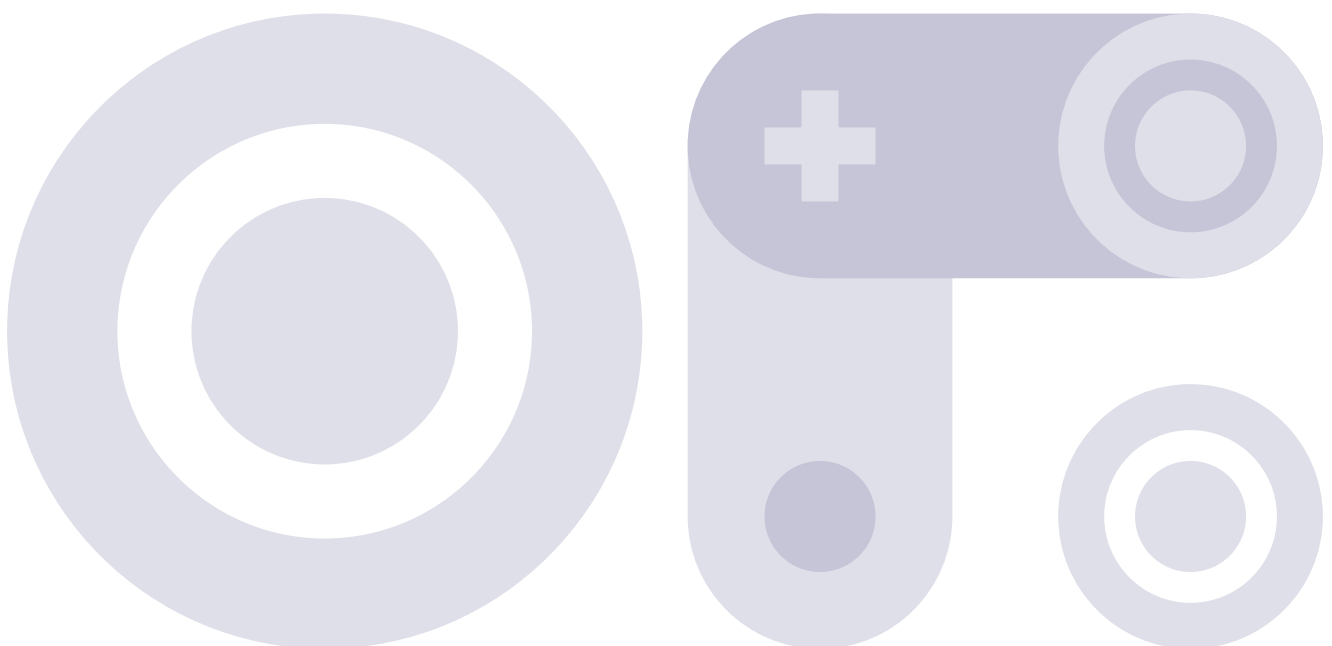
Introduction to the programme

TB remains a focus for the MHP. Mine workers are at an increased risk of exposure to TB and OLDs as they are exposed to silica dust, are likely to live in crowded settings and their working environment has inadequate ventilation⁹. Additionally adherence to screening and treatment is complicated as many mine workers are migrant labourers, which may lead to high default rates¹⁰ that negatively impacts on TB treatment outcomes for mine workers. This is not all doom and gloom, although the South African mining sector had a TB burden much higher than that of the general populations in the past¹¹, there has been a significant decline of TB within the sector in the past few years¹², probably due to the concerted efforts to take meaningful action against the disease. The industry TB incidence rate is now lower than the South African incidence.

There are 48.4 million people living with HIV globally¹³, and South Africa continues to have the highest rate of HIV in the world, with an estimated 7.3 million adults (15 years and above) reported to be infected. Workers in the mining sector are at an increased risk of HIV, with migrant workers and their spouses more likely to become HIV infected¹⁴. While the adult HIV prevalence in South Africa is at least 19.5%¹⁵, among mine workers it is reported to be above 24.6%¹⁶.

South African miners, especially those in gold mines, are also faced with an epidemic of OLDs. In 2007, the burden of Silicosis in South Africa was 32%¹⁷. Miners are exposed to crystalline silica dust, as well as asbestos fibres, which are both responsible for OLDs¹⁸.

Miners are also vulnerable to NCDs like high blood pressure and diabetes. The WHO identified the workplace as a key space to combat NCDs through awareness, education, support and monitoring. To combat the combined burden of TB, HIV, OLDs and NCDs, the MHP monitors and reports on disease reduction, oversees TB contact tracing, supports junior and emerging miners, and develops behaviour change communication. The results of these activities are laid out in this report.



Targets and objectives

The programme's targets are aligned to the SDGs, WHO framework and South African National Policies, as set out in the table below:

Table 1 International, National and MHP targets on TB, HIV and NCDs

<p>WHO End TB strategy - 2025</p>	<ul style="list-style-type: none"> - Find at least 90% of people with TB, including key and vulnerable populations - Place 90% on appropriate treatment - At least 90% successful completion of treatment
<p>UNAIDS fast track strategy on HIV – 2030</p>	<ul style="list-style-type: none"> - 90% of people living with HIV know their status - 90% of people living with HIV are on antiretroviral therapy (ART) - 90% of people on ART have viral suppression
<p>Mining industry milestones</p>	<ul style="list-style-type: none"> - 100% of employees should be offered HIV counselling and testing annually and be linked to an ART programme. - Reduce TB incidence in the mining sector to at or below the South African rate by 2024
<p>MHP targets</p>	<ul style="list-style-type: none"> - 100% of all employees have annual HIV counselling, and link those who test positive to ART treatment - 100% of employees have annual TB screening (cough questionnaire) - 25% relative reduction in prevalence of raised blood pressure by 2025 - Halt the rise in diabetes and obesity by 2025 - 95% of all exposure measurement results to be half the legislated exposure limits for crystalline silica and coal dust by December 2024 - Ensure that there are no new cases of pneumoconiosis reported amongst previously unexposed individuals

Targets and objectives

The programme has these five objectives:

+ Table 2 Objectives

- 1 Coherent policy:** Lead in advocacy and facilitate the generation of strategic information and research for an evidence-based, rights and gender-sensitive agenda
- 2 Strong partnerships:** Provide support for effective partnerships, collaborations and implementation
- 3 Implementation support:** Ensure synergy in access to comprehensive prevention, counselling, treatment, care and management of diseases, including behaviour change
- 4 Accurate data and insights:** Aggregate and analyse key health indicators to monitor industry progress
- 5 Professional conduct:** Create an enabling environment for the Masoyise Health Programme

The activities that are reported on in this document are matched to objectives:

Coherent policy	Commissioned studies, seminars and webinars
Strong partnerships	Tour with Regional Chambers of Mines
Implementation support	Support for junior and emerging miners
Accurate data and insights	<ul style="list-style-type: none">- Report on TB, HIV, AIDS and NCDs- Report on Occupational Hygiene- Report on Occupational Medicine
Professional conduct	<ul style="list-style-type: none">- Revised strategy- Communications campaigns

Coherent policy

Commissioned studies

The MHP's aims lead in advocacy and facilitate the generation of strategic information and research for an evidence-based, rights and gender-sensitive agenda. Commissioning relevant studies is needed to gather evidence.

There were three commissioned studies completed in 2022:

1

Long Covid-19: The study assessed the effects of long Covid on workforce productivity in the mining sector, using data gathered from Impala Platinum, Exxaro Resources, and Sibanye Stillwater. The study found that 6.9% of the study participants with Covid-19 developed long Covid, which did not impact their productivity. The study recommended that mines should undertake regular assessment and identification of employees who had Covid, following updated WHO case definitions. This study, conducted by Public Health and Pharmaceutical Care Innovations (Pty) Ltd, was commissioned in 2021, and completed in May 2022. The full report was circulated to all members and stakeholders.

[View the report](#)

2

Surveillance of COVID-19 in selected South African Mines was conducted by Aurum Institute in three phases, starting in 2021 and concluded in 2022, after the mines began rolling out the COVID-19 vaccine to their employees. The findings in the third wave showed that 35.3% of mine employees were infected with Covid-19. This was higher than the first wave, with a 20.8% infection rate, and the second wave with 24.1%. The vaccination rate was higher among the mining sector than the general population. The study recommended further education in Covid-19 as well as awareness on the benefits of vaccination.

[View the report](#)

3

Covid-19 Capacity Assessment and Future Utilisation. This study focused on three of the Minerals Council's strategic goals:

Goal 1: playing a leadership role in pressing the reboot button for the mining industry;

Goal 2: implementing a Positive Contribution Model; and

Goal 3: to lead by example.

The study was conducted by The Research Institute for Innovation and Sustainability (Pty) Ltd (RIIS) and concluded in 2022.

[View the report](#)

Coherent policy

Seminars and webinars



Studies are not enough. Findings need to be discussed and debated to set an appropriate agenda. To support this objective, two hybrid seminars were held in 2022:

31 March 2022

2022 World TB Day for South African Mining Industry

MHP collaborated with Mine Health and Safety Council, SABCOHA and other partners to host this hybrid event in Cullinan on 31 March 2022. The event had a very strong line up of presenters including Dr Lindiwe Mvusi from NDoH, who presented on the National and Provincial state of TB and HIV, while the CEO of SABCOHA, Mr Siyabonga Jikwana, provided feedback on the National TB Day commemoration activities and the role of the Private Sector Forum. The keynote address was delivered by the MHSC board chairperson, Mr David Msiza.

9 July 2022

The future of tuberculosis. What is the latest?

MHP collaborated with the Mine Medical Professionals Association (MMPA) in hosting a hybrid seminar at Emperors Palace. The seminar focused on global advances in TB prevention, diagnosis and treatment, and reflected on South Africa and the mining industry's response to TB and identify key interventions to be adopted by the South African mining industry to reduce TB morbidity and mortality. Among the presenters were Prof Norbert Ndjeka from the National Department of Health in South Africa, Dr Nazir Ishmail, Team Lead for Diagnostics in Global TB Programme and Dr Medea Gegia, Technical Officer for TB Treatment in the WHO Global TB Programme. Dr Priashni Subrayen, Technical TB Director at Aurum Institute, presented on TB response following the Covid-19 pandemic. The presentation on Artificial Intelligence (AI) computer-aided detection for TB and silicosis was presented by Prof Rodney Ehrlich.

Strong partnerships

The MHP aims to provide support for effective partnerships, collaborations and implementation.

The programme is supported by the Minerals Council Board and governed by the Steering Committee, which is chaired by a member of the Board and consists of senior health managers from member companies, along with stakeholders and partner representatives from organised labour (NUM, AMCU, Solidarity and UASA), government departments (DoH, DMRE), Mine Health and Safety Council (MHSC), National Institute for Occupational Health (NIOH) and the United Nations multilateral organisations like International Labour Organisation (ILO), Joint United Nations Program on HIV/AIDS (UNAIDS) and The World Health Organization (WHO).

MHP continues to build relationships with all stakeholders and learns from them in the process. Coordination with other committees within the Minerals Council, like the Health Policy Committee, helps to shape and lift MHP to greater heights.

Participation in the tripartite structures at Mine Health and Safety Council through Mining Industry's TB, HIV and AIDS Advisory Committee (MITHAC) helps to strengthen the relationships with stakeholders and uphold all expectations for MHP to achieve the goal of a healthy workforce in the mining industry.

Tour of Regional Chambers of Mines

MHP was recognised as a leader in healthcare programmes. During a meeting of the Mining Industry Associations of Southern Africa (MIASA) in Windhoek, Namibia, the regional chambers of mines proposed a tour to South Africa to learn more about the programme.

The tour was planned by the Eastern Central and Southern African Health Community (ECSA-HC) as a MIASA Six-nation Chambers of Mines Information Sharing Tour to the Minerals Council South Africa. It was supported by the Global Fund, and Botswana, Namibia, Tanzania, Zambia and Zimbabwe participated. The CEOs of the Chambers of Mines of Botswana and Namibia, Charles Siwawa and Veston Malango, and the Deputy CEO of the Chamber of Mines of Zambia, Talent Ng'andwe, were part of the tour.

The tour aimed to build capacity, strengthen systems and foster collaboration, coordination and policy advancement among all member states in the SADC region. The programme was planned around the focus areas, with a virtual session on policy and legislation on 5 August 2022, a physical tour to Johannesburg from 10 to 12 August, and the virtual attendance of a Masoyise Health Programme Working Committee meeting on 16 August. The physical tour included a mine visit to Gold Field's South Deep Mine in Carletonville, Gauteng.

The visit was a success, resulting in a commitment to share information and experiences across the region.

Implementation support

One of the ways that the MHP ensures synergy in access to comprehensive prevention, counselling, treatment, care and management of diseases, including behaviour change, is through a special focus on junior and emerging miners. This focus area is driven by the Junior and Emerging Miners Task Team, which helps coordinate activities aimed at supporting small mines and peri-mining communities. The South African Business Coalition on Health and Aids (SABCOHA) assists in providing comprehensive health screening services and facilitating co-funding partnerships to mines that are not able to provide these services.

Support for junior and emerging miners

Towards the end of 2021 and during the first quarter of 2022, more than 5 500 men were reached in Bojanala District linked to Sibanye Stillwater Marikana operation, Anglo Platinum, Siza and Jabula mines and surrounding communities. 830 men were reached in Govan Mbeki District through Overlook, Alpha, Star, Shondoni, Fozandor North and South, Syferfontein, Bosjespruit and Irenedale mines.

With funding from two partners, comprehensive health screenings of 500 individuals were completed during November 2022 at DRD Gold mine in Gauteng.

Opportunities exist to make significant strides in addressing the quadruple burden of disease in the mining sector. The need for facilitated and coordinated action is stronger than ever before and will have to be the key focus going forward in reaching the junior and emerging mines.



Accurate data and insights

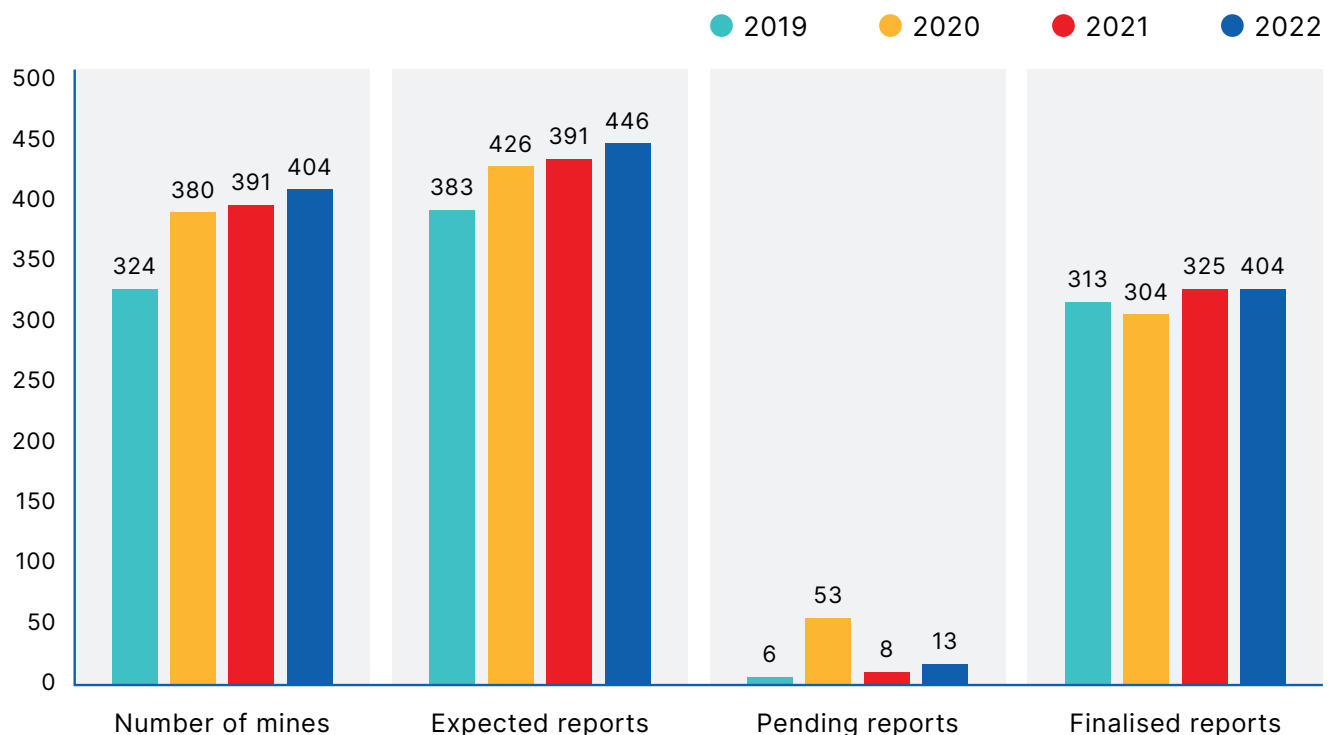
To monitor progress, the MHP has a working committee tasked with overseeing data, TB contact tracing, communications and activities in small mines. This section of this report is drawn from this working committee.

Detailed report on analysis of the TB, HIV and NCD data

All members of the Minerals Council are expected to report a full set of employee health data, using the Minerals Council's Occupational Health Information Management System.

The data used for this report was extracted from the Minerals Council's OHIMS database and analysed across a range of indicators. These indicators are presented as proportions of total number of employees from companies who had reported data for the specified year-end period.

Figure 1 Masoyise reports, 2019-2022



Summary of the HIV, TB and NCD performance

Data was gathered from **114 companies**, representing **404 mines**, with **414 312 employees**. Of these, **32 (27%)** submitted all reports.

- HIV counselling **increased** from 67.1% in 2021 to 83.4% in 2022.
- HIV testing **increased** from 49% in 2021 to 53% in 2022. However, of those who tested positive, only 36.8% were put on an ART programme.
- TB screening **increased** from 75% in 2021 to 85% in 2022. The TB incidence rate for 2022 was 241 per 100 000 population.
- For NCDs, diabetes screening **increased** from 59% in 2021 to 80% in 2022, and high blood pressure screening increased from 74% in 2021 to 84% in 2022.

Table 3 Industry performance against HIV, TB and NCD targets, 2020-2022

Activity	Milestone	2020	2021	2022	
Compliance to reporting	Companies on the system	110	115	118	
	Completeness of reporting	>10%	75	78	81
		11-50%	1	1	1
		60-99%	1	3	4
		100%	30	33	32
HIV counselling, testing and ART treatment	HIV counselling	67.3%	67.1%	83.4%	
	Annual HIV test (100%)	43%	49%	53%	
	ART Treatment	56.2%	46.4%	36.8%	

Accurate data and insights

Table 3 Continued

Activity	Milestone	2020	2021	2022
TB screening	Annual TB screening (100%)	68%	75.4%	83%
TB incidence	Below the national TB incidence rate 5% year on year reduction for the TB incidence rate	195 per 100 000 population	221 per 100 000 population	241 per 100 000 population
NCDs	Employees screened for hypertension (100%)	67%	74%	84%
	Employees screened for diabetes (100%)	59%	59%	80%

HIV programme indicators

While there is a steady increase in performance, none of the industry milestones were reached.

In 2022, there was an overall improvement of the indicators other than those initiated on ART; 87.9% of employees were offered HCT, compared to 73.7% in 2021; 83.4% were counselled for HIV and 53.9% were tested for HIV and 36.8% were started on ART.

Accurate data and insights

Table 4 HIV indicators on MHP, 2019-2021

Activity	Milestone achieved	2019 (n=396 278)	2020 (n=386 904)	2021 (n=391 482)	2022 (n=409 119)
HIV counselled	✘ NO	279 956 (71.0%)	260 265 (67.3%)	262 661 (67.1%)	341 386 (83.4%) ↑
HIV tested	✘ NO	185 377 (47.0%)	168 248 (43.5%)	191 399 (48.9%)	220 512 (53.9%) ↑
Employees offered HCT	✘ NO	308 994 (78.3%)	277 864 (71.8%)	288 580 (73.7%)	359 430 (87.9%) ↑
Employees tested HIV positive	👉 N/A	12 633 (3.2%)	4 764 (1.2%)	11 681 (3.0%)	11 424 (2.8%) ↓
Living with HIV and on ART	👉 N/A	40 296 (10.2%)	42 476 (11.0%)	45 712 (11.7%)	56 751 (13.9%) ↑
HIV positive on ART with viral suppression	👉 N/A	21 984 (5.5%)	23 722 (6.1%)	26 780 (6.8%)	47 490 (11.6%) ↑
Initiated on ART	✘ NO	3 773 (29.9%)	2 681 (56.2%)	5 423 (46.4%)	4199 (36.8%) ↓
HIV positive and on Isoniazid preventive therapy (IPT)		14 077 (3.6%)	14 033 (3.6%)	18 553 (4.7%)	23 240 (5.7%) ↑

Accurate data and insights

TB programme indicators

TB screening, employees reported to DoH and DMR

Shown in Figure 2 Percentages of employees screened for TB, subjected to TB investigation and those on TB treatment, the proportion of employees who were screened for TB symptoms in 2022 was 83.0% and an increase from 75.3% the previous year. Most eligible employees (97.7%) were subjected to TB investigation and 90.3% of qualifying were put on TB treatment, a slight decline from 2021.

Figure 2 Percentages of employees screened for TB, subjected to TB investigation and those on TB treatment

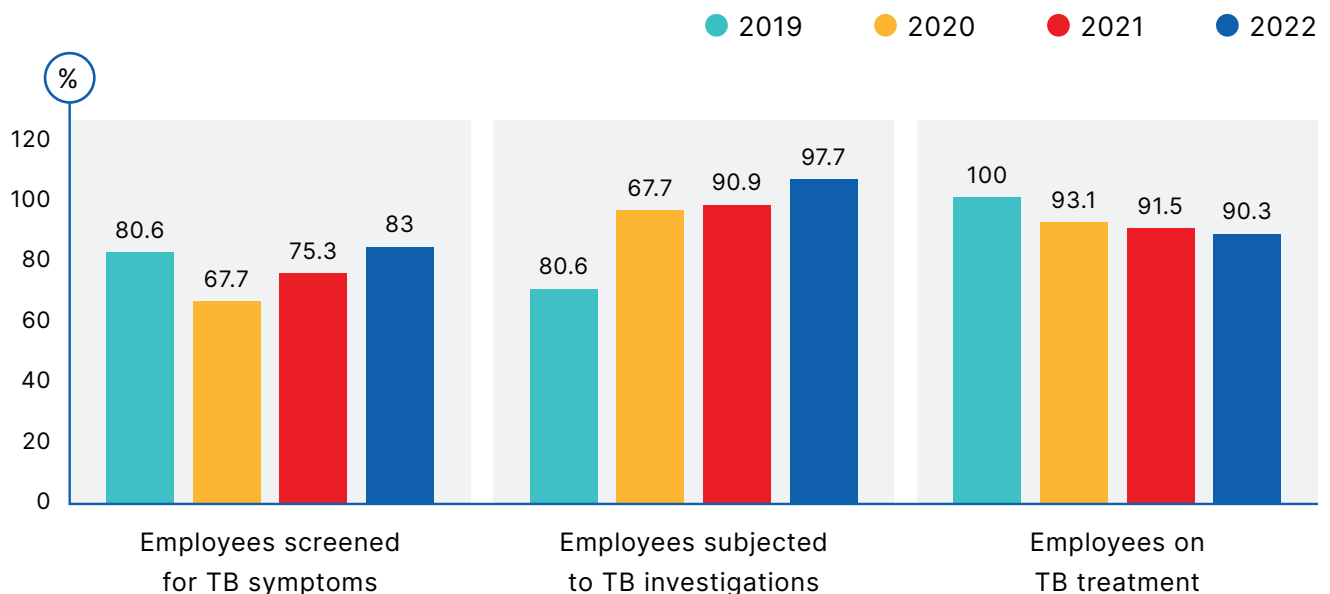


Table 4 shows the number of employees diagnosed with TB reported to the DoH and DMR from 2019 to 2022, and the trends in the proportion of employees screened for TB from 2018 to 2022 are displayed in Figure 3.

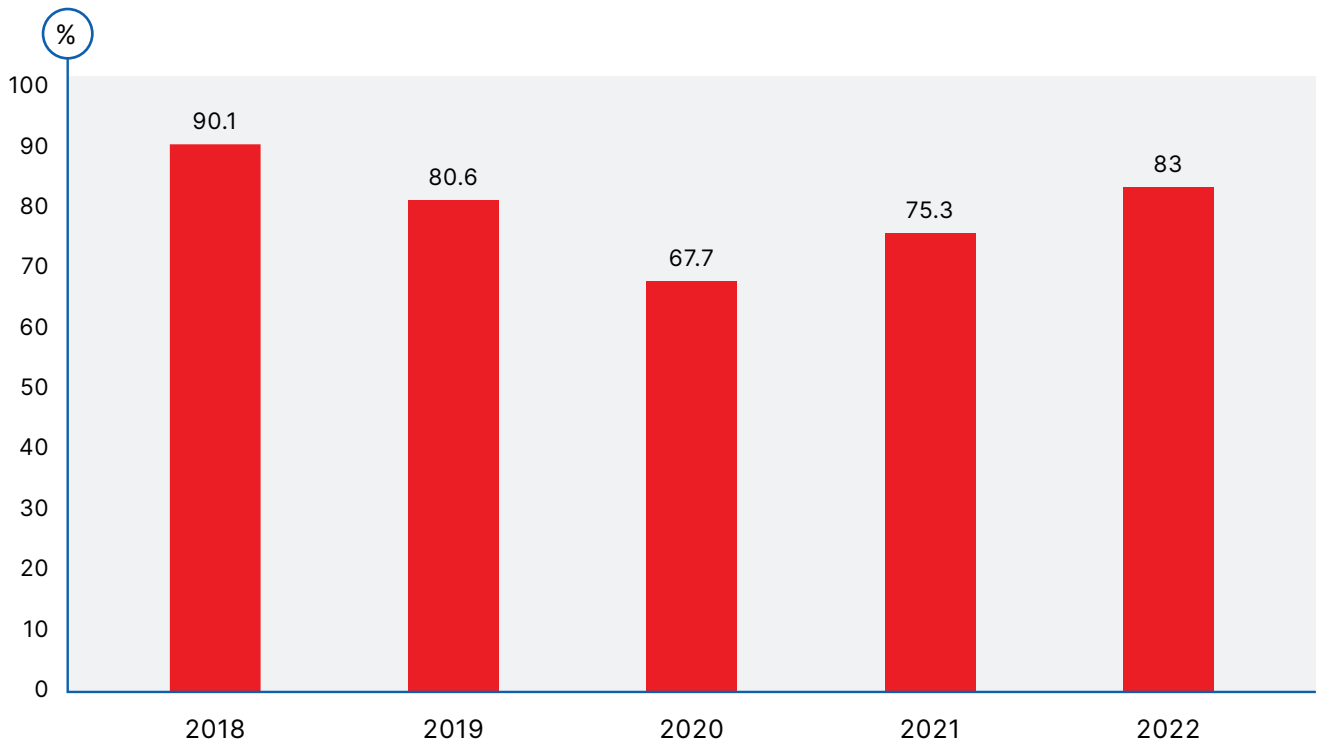
There is a decline of about 10% on employees screened for TB from 2018 (90.1%) to 2019 (80.6%) and a steep decline of 13% from 2019 (80.6%) to 2020 (67.7%). Thereafter, there was a steady increase of 8% from 2020 (67.7%) to 2021 (75.3%) and another 8% increase from 2021 (75.3%) to 2022 (83.0%).

Accurate data and insights

Table 5 Employees screened and reported to DoH and to the DMR

	2019 (n=1156)	2020 (n=756)	2021 (n=866)	2022 (n=988)
Employee notified to DoH	958	656	756	900
Employee notified to DMR	783	630	701	869

Figure 3 Trend of TB screening among employees over a five-year period, 2018-2022



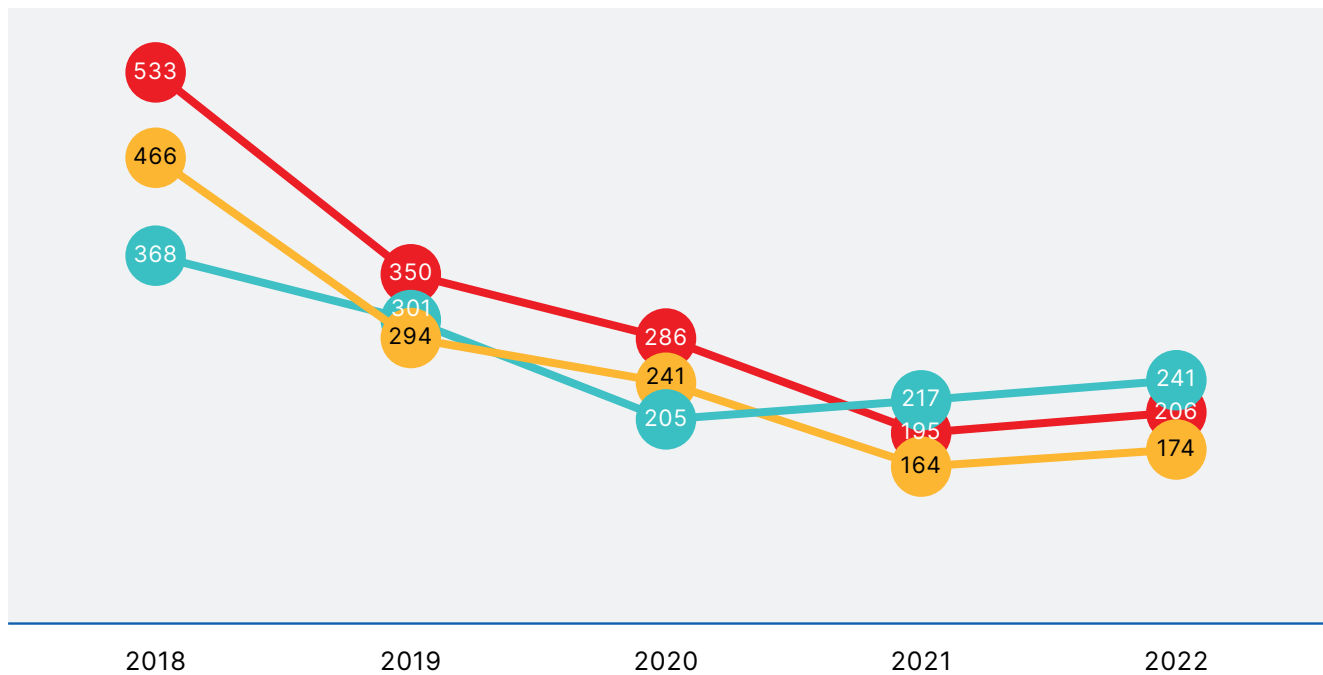
Accurate data and insights

TB incidence and incidence aspirational curve

Figure 4 shows the TB incidence rate from 2018 to 2022, with a slight increase in the TB incidence from 217 to 241 per 100 000 population between 2021 and 2022, respectively.

Figure 4 TB incidence for Minerals Council's employees against general population of South Africa, 2020-2022

● MCSA TBIncidence ● MHSC 20% target ● 5% SA general population target

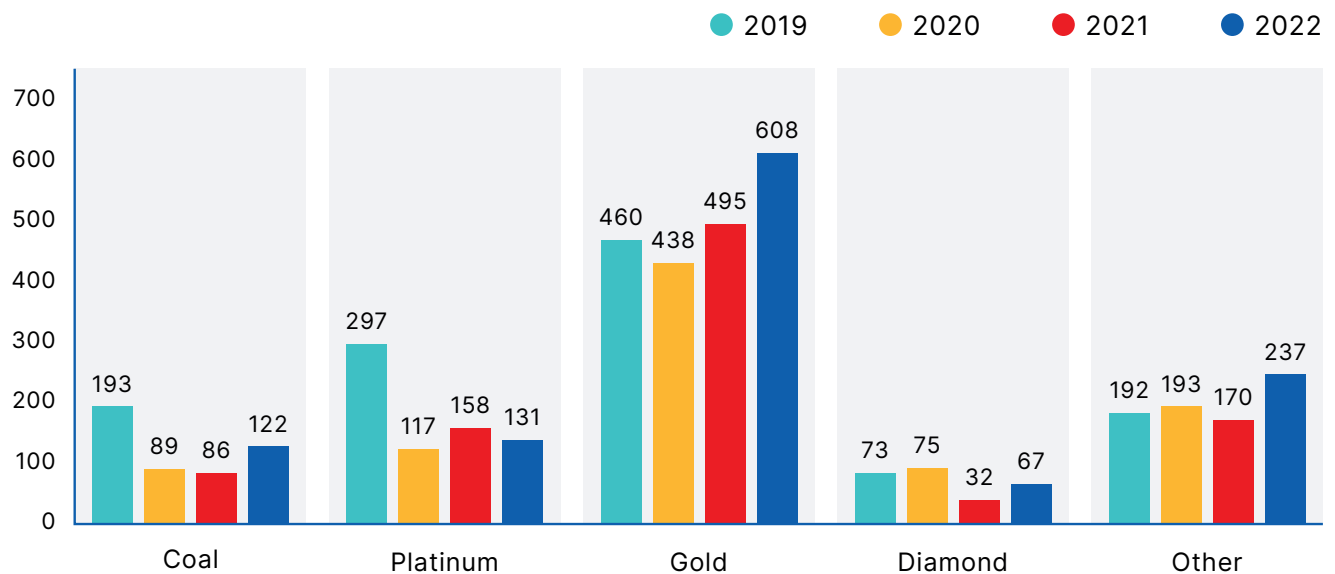


Accurate data and insights

TB incidence across commodities, 2019-2022

Figure 5 shows TB incidence rate by commodity. Gold mines reported the highest TB incidence rate of 608 per 100 000 population in 2022. This was a slight increase from 495 per 100 000 population in 2021. Diamond mines reported the lowest TB incidence rate at 67 per 100 000 population.

Figure 5 TB incidence rate (per 100 000 population) by commodity, 2019-2022



TB contact tracing

Since 2016, three contact tracing task teams have been established: The West Rand, followed by the Bojanala District and Nkangala District.

TB contact tracing was implemented to stop the spread of TB in the mining industry and in the community. It involves finding the people that an infected person has been in contact with, so they can get counselling, testing and, if needed, be put on treatment.

The key TB contact tracing indicators for 2022 are presented in Table 7 Selected TB Contact Tracing Outcomes on the following page:

Accurate data and insights

Table 6 Selected TB Contact Tracing Outcomes

Indicator	Bojanala (NW)	Nkangala (MP)	West Rand (GP)	Other	Total 2021	Total 2022	
Number of index pulmonary TB clients (cases) identified	204	92	578	38	1 316	912	-404 ↓
Number of contacts identified	1 003	673	1 950	237	2 567	3 865	+1 298 ↑
Number of contacts traced and screened	852	627	944	233	1 802	2 656	+845 ↑
% of contacts traced and screened	84.95%	98.89%	48.41%	98.31%	70.28%	68.72%	-1.56% ↓
Number of cases detected	4	1	1	0	0	6	+6 ↑
Yield (% TB positive from those screened)	0.47%	0.16%	0.11%	0	0	0.23%	+23 ↑
% TB positive put on treatment	100%	100%	100%	0	0	100%	+100% ↑

The table shows that generally are in a positive direction, between 2022 and 2021:

- Cases **reduced** by 404, with 1 316 cases in 2021 and 912 cases in 2022.
- Contacts identified **increased** by 1 298, with 2 567 contacts identified in 2021, and 3 865 contacts identified in 2022.
- Contacts traced and screened **increased** by 2 656, with 1 802 traced and screened in 2021, and 2 656 traced and screened in 2022.
- Cases detected **increased** by none to six, with a yield of 0.23%.
- All TB positive contacts were enrolled into care and treatment.

Accurate data and insights

Challenges in data collection

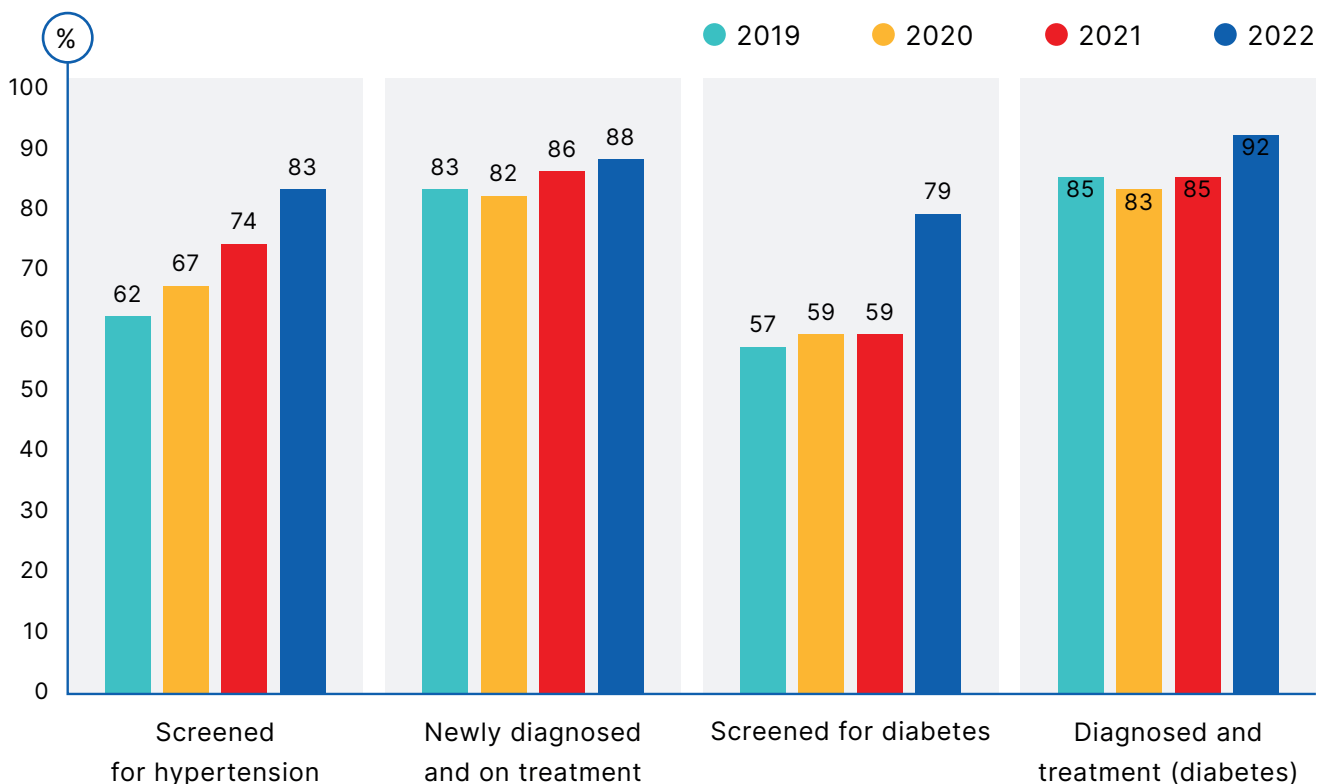
Companies use Minerals Council's OHIMS and Tier. Net, provided by the DoH, to report on contact tracing to the DoH. The DoH is rolling out the latest, much improved version of Tier. Net, at a district level.

The process is delayed as the upgrade requires a Memorandum of Understanding between companies and Regional DoH offices, which can be prolonged as companies are guided by their respective IT policies in the installation of the system. The DoH will roll out the software if the MOU is not signed but discussions are ongoing.

Non communicable diseases indicators

The proportion of employees who were screened for high blood pressure increased by 9% from 74% in 2021 to 83% in 2022. In 2022, 88% of the employees were newly diagnosed with hypertension and on treatment. A steep increase (20%) in the number of employees who were screened for diabetes was observed from 59% in 2021 to 79% in 2022. There was a 7% increase from 85% in 2021 to 92% in 2022 in the percentage of employees who were diagnosed with diabetes and on treatment.

Figure 6 Proportion of employees screened, diagnosed and initiated on treatment for hypertension and diabetes, 2019-2022



Accurate data and insights

Discussion, conclusion and recommendations

Since its implementation in 2016, the MHP has successfully grown the mining industry's focus on TB, HIV and NCDs through collaboration and engagement with tripartite plus structures in the mining industry, using evidence-based interventions.

The impact of Covid-19 is felt on the quantity of data submitted: there was a drop in overall reporting compliance from 82% in 2019, to 75% in 2021 and 73% in 2022. There are several pending reports that have not been finalised, and finalising these will help to boost the compliance in 2023.

While none of the HIV programme targets have been met, the performance targets increased overall in 2022. HCT offering is at a record high, providing better opportunities for counselling and testing, including enrolling workers on ART. However, there was a disappointing 10% decline in qualifying employees who were initiated on ART - a year-on-year decline from 56% in 2020.

TB is both an occupational disease and a disease of public health importance, reaching epidemic proportions in South Africa. Screening, investigating and treating TB cases is needed to reduce the TB burden. The TB screening targets were not met, however, there was an increase in screening and investigations for TB among employees. There was a slight decrease in the proportion of employees started on TB treatment.

TB treatment outcomes are essential indicators of the performance of national TB control programme, and the WHO End TB strategy primarily relies on the set target of $\geq 90\%$ treatment success, which the MHP, at 74%, has not achieved. The failure to meet the target, along with reversal of the steady decline in TB prevalence, can be attributed to the effects of the Covid-19 pandemic. The TB 'Treatment success' indicator decline by in 2022, while the 'Not evaluated' indicator increased for both susceptible and drug-resistant TB. It is of great concern that in this closed and kept population, TB treatment outcomes have reversed, especially since they are indicators that tell us about prevent recurrence of TB disease and drug resistance. The current performance for the TB programme in the mines, with the effects of Covid-19, might explain the slight increase in the TB incidence rate in 2022.

For the NCDs analysis, though the MHP did not reach its set target, its substantial improvement in the number of employees who were screened for hypertension and diabetes for 2022.

As might be expected, the MHP is still growing and reporting and data is a work in progress, which is improving each year.

The MHP is an essential health programme, not only for the mining industry, but for South Africa and the continent. Its performance provides lessons for health programmes across different sectors of the economy as well as the public health interventions of the country.

Professional conduct

Governance and structure

The programme is governed by the Steering Committee, which is chaired by a member of the Minerals Council Board. In 2022, the chair of the Steering Committee was Ms Zanele Matlala.

There are four task teams, which are the cornerstone of the MHP:

1

The Data Task Team helps to consolidate and disaggregate HIV and TB data, focusing on performance and compliance to reporting. This task team also helps with collection of NCD data to help members monitor and report in line with the regulator's expectations.

2

The TB Contact Tracing Task Team helps identify TB index cases from member companies and trace identified contacts in households and communities.

3

The Communication Task Team helps develop and distribute communications material intended to raise awareness of health issues and encourage behaviour change.

4

The Junior and Emerging Miners Task Team helps coordinate small mines and peri-mining communities.

New strategic plan

This, the third term of MHP, runs from 2022 to 2024. In 2022 the MHP Steering Committee accepted financial support from the ILO to develop a strategy for this term. A work plan was developed to guide the activities of the programme while waiting for the ILO processes to unfold for the appointment of the service provider that will develop the new strategy.

The appointment of the service provider was concluded towards the end of 2022 and the consultative process with Masoyise, its partners and stakeholders, began in earnest. The strategy was completed early in 2023 and will be launched with the participation of all stakeholders. Contents of the strategy will be reported in the 2023 Annual Report.

Professional conduct

Communications

MHP's communications helps to create an enabling environment for MPH by making sure that information about the programme, and information created to raise awareness and educate mine employees and peri-mining communities about how to prevent and treat HIV, TB, NCDs and OLDs.

It all starts with a coherent strategy and plans, developed by the Communications Task Team. The plans are linked with the international and national health days, and focus on topics that are relevant to members' employers and communities.

The days are commemorated and promoted using posters, Facebook, animation characters and testimonial video clips from mine employees and companies.

Some of the 2022 communications material includes:

Social media posts



MASOYISE Health Programme

MINERALS COUNCIL SOUTH AFRICA

HAPPY New Year

Masoyise welcomes you into a year of new possibilities and opportunities.

We wish you a safe, healthy, and prosperous new year ahead.

#ChekaImpilo #YourHealthMatters #MakingMiningMatter



A breast cancer video clip, and blood pressure animation were also developed and sent to stakeholders and members.



MASOYISE Health Programme

MINERALS COUNCIL SOUTH AFRICA

The industry continues to provide holistic health programmes including HIV testing services and TB screening

Remember to go for regular check-ups and keep taking your prescribed medication for all pre-existing conditions.

#ChekaImpilo #YourHealthMatters #MakingMiningMatter

Posters

MASOISE Health Programme 

WORLD AIDS DAY

HIV/AIDS treatment involves taking highly effective medicine called antiretroviral therapy (ART). These medicines reduce the level of HIV in your bloodstream (viral load), which keeps your immune system working and prevents illnesses. This is referred to as viral suppression- the ideal is having less than 200 HIV viruses per millimetre of blood.

ART can also reduce the risk of transmitting HIV/AIDS. ART comes in two forms, pills and an injection. The injection is given to people who have an undetectable viral load or who have been virally suppressed.

THERE IS NO CURE FOR HIV/AIDS!
People with HIV tend to live long lives given that they take their medication according to how the doctor prescribes and adopt a healthy lifestyle.

To prevent and manage HIV/AIDS:

- Practice safe sex
- Get tested regularly for HIV and other sexually transmitted diseases
- Practice good hygiene to prevent infections and illnesses
- Follow the doctor's instructions about your prescription
- Don't abuse drugs or alcohol
- Exercise regularly
- Adopt/maintain a healthy diet

SHOULD YOU HAVE ANY SIGNS THAT WORRY YOU, CONTACT YOUR DOCTOR RIGHT AWAY.

GET TESTED FOR HIV/AIDS TO CONFIRM THE DIAGNOSIS

To find out more information, please contact the South African National AIDS Council (SANAC) on 012 748 1000 or visit their website page at sanac.org.za
#WorldAIDSday #HIVawareness #AIDSawareness #WADThema2022 #Equalize and Integrate to End AIDS

[@MasoyiseHealthProgramme](https://www.facebook.com/MasoyiseHealthProgramme) www.mineralscouncil.org.za/work/health-and-safety/masoyise-health-programme

MASOISE Health Programme 

WORLD DIABETES DAY

Diabetes symptoms depend on how high your blood sugar level is. Staying healthy and managing stress levels along with getting enough knowledge about diabetes can help with preventing, managing and treating the disease.

Type 1 diabetes symptoms:

- Nausea
- Vomiting
- Stomachache

Type 2 and gestational diabetes symptoms:

- Increased thirst
- Constant urination
- Sores that heal slowly
- More infections than usual
- Fatigue
- Numb or tingling hands or feet
- Constant hunger
- Dry mouth

How to prevent or manage diabetes:

- Regular physical activity
- Adopt/maintain a healthy diet
- Drink water regularly
- Manage your stress levels
- Healthy lifestyle changes such as weight loss
- Take medicine as prescribed
- Regular check ups
- Keep up to date on diabetes management

IF YOU HAVE SIGNS THAT WORRY YOU, CONTACT YOUR DOCTOR RIGHT AWAY ABOUT GETTING YOUR BLOOD SUGAR TESTED

To find out more information, please contact Diabetes South Africa on 021 425 4440 or at national@diabetessa.org.za
#diabetessupport #WorldDiabetesDay #diabetesawareness

[@MasoyiseHealthProgramme](https://www.facebook.com/MasoyiseHealthProgramme) www.mineralscouncil.org.za/work/health-and-safety/masoyise-health-programme

MASOISE Health Programme 

BREAST CANCER AWARENESS MONTH

According to the Centers of Disease Control and Prevention (CDC), breast cancer is defined as a disease in which abnormal cells in the breast rapidly grow. It is a disease that is more common in women than in men – it accounts for 1% of all breast cancers in men according to the Cancer Association of South Africa (CANSAs).

MEN CAN GET BREAST CANCER TOO!

The symptoms for breast cancer are:

- Lump in the breast or underarm/armpit
- Swelling of part of the breast
- Irritation of the skin on the breast
- Flaking or redness of the skin around the nipple area
- Pain around the nipple area
- Change of the size or shape of the breast
- Pain in the breast area
- Nipple discharge i.e. blood (not including breast milk)

SHOULD YOU PRESENT WITH ANY OF THE SYMPTOMS ABOVE OR HAVE SIGNS THAT WORRY YOU, CONTACT YOUR DOCTOR RIGHT AWAY

#breasthealth #cancersupport #breastcancerwarrior

To find out more information, please contact CANSAs on 0800 22 6622 or visit their website at cansa.org.za

[@MasoyiseHealthProgramme](https://www.facebook.com/MasoyiseHealthProgramme) www.mineralscouncil.org.za/work/health-and-safety/masoyise-health-programme

There is no health without mental health

Remember – It's OK to be sad, angry, afraid or worried – speak to someone you trust and get help

Take part in mental health screening

Get mental health support – you don't need to struggle alone

MASOISE Health Programme

Show your support on Facebook and Twitter:
#Safety&HealthFirst #Khumbul'Ekhaya #RememberHome

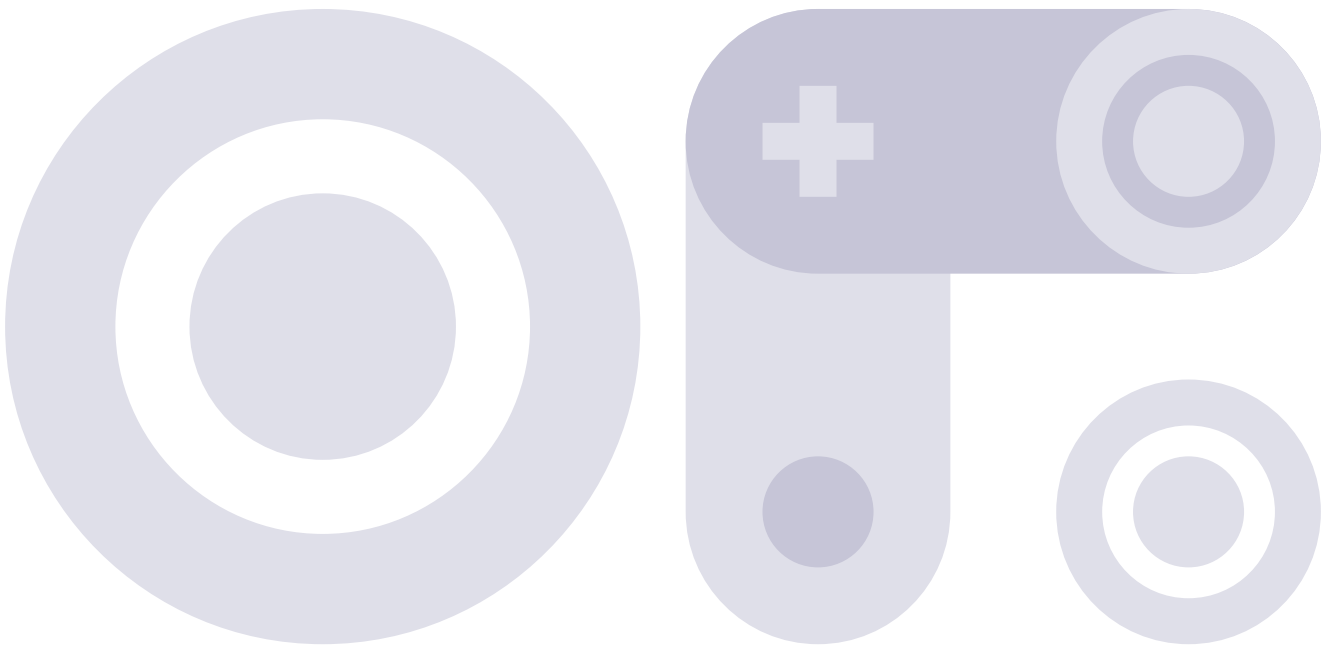


Conclusion

MHP plays an important function in championing the industry's drive to create a workplace that protects workers' health and wellbeing. The MHP is an essential health programme, not only for the mining industry, but for South Africa and the continent. Its performance provides lessons for health programmes across different sectors of the economy as well as the public health interventions of the country.

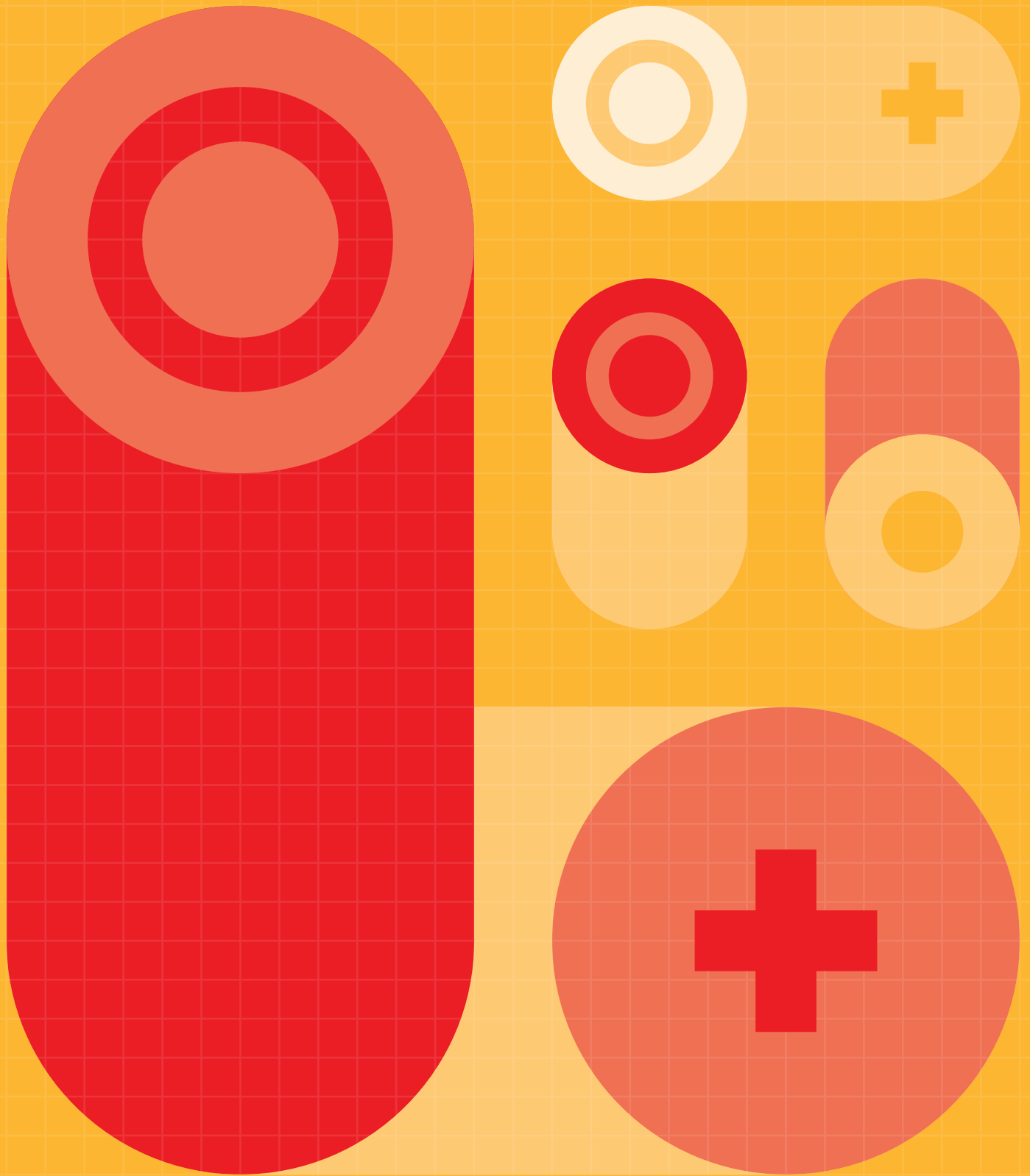


We continue to grow, learn and share our findings with others who strive to champion workers' health and wellbeing, and celebrate those that share our passion.



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