

Barriers to compensation for miners and ex-miners with silicosis and/or TB in Allanridge, Free State

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Background

- Silicosis (fibrosis of the lung due to inhalation of silica dust)
- Both silicosis and TB are recognised occupational diseases for miners (silicosis prevalence of 5,7- 6,2% in miners in 2015¹, TB incidence of 278 per 100 000 in miners in 2022²)
- **Under the Occupational Diseases in Mines and Works Act (ODMWA)**, miners and ex-miners are eligible for compensation for either disease if lung function loss is 35% or more.
- **Class action suit** by miners against several gold mining companies resulted in a settlement of R5 billion in 2019 for miners who had contracted TB or silicosis due to their work in certain mines.

¹ Knight, D., Ehrlich, R., Fielding, K. *et al.* Trends in silicosis prevalence and the healthy worker effect among gold miners in South Africa: a prevalence study with follow up of employment status. *BMC Public Health* **15**, 1258 (2015). <https://doi.org/10.1186/s12889-015-2566-8>

² Minerals Council South Africa. 2024. Media Statement: South Africa's Mining Industry tackles TB and has sustainably beaten its 2024 target

Background (cont.)

- **Allanridge** is a gold-mining town in the Lejweleputswa District Municipality of the Free State province in South Africa.
- The **Phathakahle** township is 3 km outside of Allanridge. It was established during the apartheid era to house the mine workers of a gold mining company.



Photo credit: [adamr.stone](#) from Fort Worth, TX, USA - [The Shantytown outside of the Allenridge Commuity Center](#) CC BY 2.0

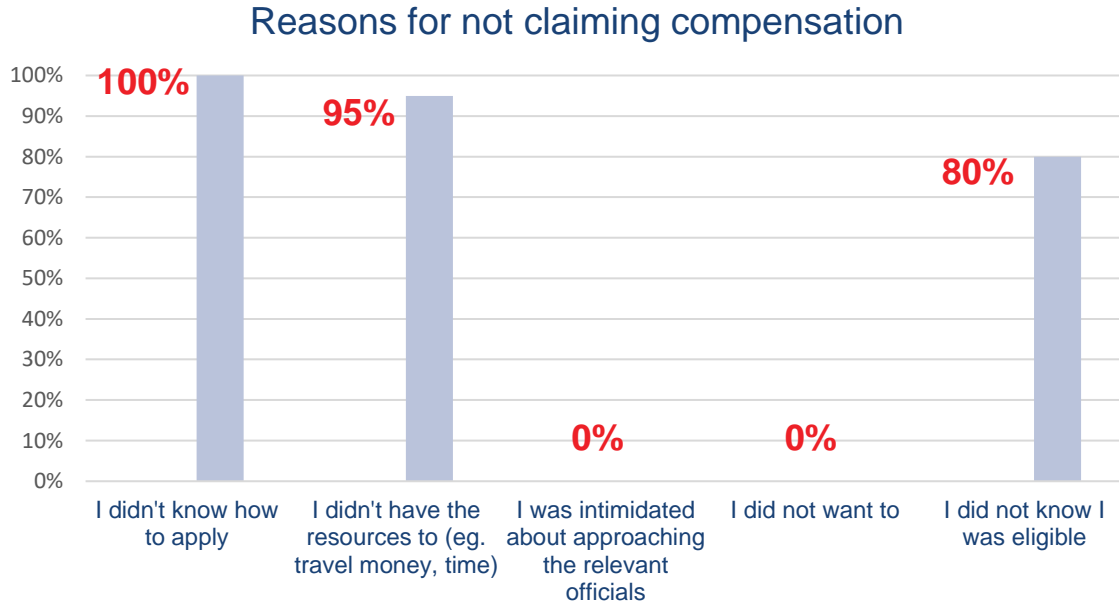
Methodology

- Using OneImpact South Africa, a digital platform developed by Stop TB Partnership, 20 ex-miners with silicosis and/or TB, or their families (where the ex-miner was deceased), who had not claimed compensation were documented in the Allanridge area of the Free State between November 2023 and Jan 2024.
- The reasons for not having previously claimed compensation were later documented.



Results

- 2 respondents had passed away before their reasons for not accessing compensation could be recorded
- 80% of respondents (16/20) also had TB or had someone in the household with TB



Recommendations

1. Those who most need compensation are struggling to access it (limited knowledge and resources). Efforts are required to bring compensation claim processes closer to those who require them by:

- Increasing outreach efforts (online efforts have limited reach)
- Training local outreach workers/social workers in mining/ex-mining communities who can support claimants
- Covering transport costs involved in the application process

2. Community-led monitoring (CLM) efforts such as OneImpact South Africa can reach rural and hard-to-reach communities and document barriers to access services that are otherwise missed. CLM focused on TB services should be scaled up nationally.

Thank you!

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