Southern African heads of state join forces to end tuberculosis in the mining sector

30 August 2012 – Johannesburg – South Africa has started addressing serious issues around the conditions under which miners live and work in a more focused way in the wake of the recent platinum mine tragedy. As the country begins a fresh examination of the rights of miners, South Africa and neighbouring countries are also confronting an ongoing debacle – one that has, virtually unnoticed, been taking the lives of thousands of mine workers and their families every year: tuberculosis (TB).

A regional initiative to confront this issue was taking shape just as the platinum mining crisis unfolded. Two years of efforts by a trio of health ministers culminated on August 18 in a pledge by Southern African Heads of State to address the raging tuberculosis (TB) epidemic among current and ex-mine workers, their families and affected communities. In a major step, the Declaration on TB in the Mining Sector, a legal instrument, was signed at the Summit Meeting of the Southern African Development Community (SADC) Heads of State and Government.

“For more than one hundred years, legions of miners in the Southern African region have been suffering from and dying of tuberculosis. This declaration gives us the opportunity to change this lamentable situation, and the Stop TB Partnership is fully committed to supporting an action plan to realize the aims of the declaration and its implementation,” said Dr Lucica Ditiu, Executive Secretary of the Stop TB Partnership.

Three members of the Stop TB Partnership Coordinating Board have been the driving force behind the initiative that led to the Declaration: Dr Aaron Motsoaledi, Minister of Health of South Africa; Dr Mphu Ramatlapeng, Vice-Chair of the Global Fund Board and former Minister of Health of Lesotho; and Mr Benedict Xaba, Minister of Health of Swaziland. The three raised the issue of TB and mining to the SADC agenda in November 2011. This was followed in March 2012 by a SADC stakeholders meeting in Johannesburg – supported by the International Organization for Migration (IOM), the Stop TB Partnership, the World Bank and other partner organizations - at which representatives from governments, trade unions, the private sector, nongovernmental organizations and donors provided their inputs. The declaration was subsequently endorsed by SADC ministers of health, labour and justice, paving the way for signatures by the Heads of State.

“Addressing TB in the mines in a way that covers cross-border issues is crucial to progress against the epidemic in Africa, and we congratulate the SADC heads of state for cementing their commitment to moving towards zero TB infections, zero TB deaths and zero TB stigma,” said Dr Mario Raviglione, Director of the World Health Organization Stop TB Department.

Mine workers in South Africa currently have the highest rate of TB in the world; and an estimated one-third of TB infections in the Southern African region are linked to mining activities. Recent research has estimated that 3% to 7% of miners are becoming ill with the disease each year. Because the mining industry in South Africa is heavily dependent on
migrant workers from surrounding countries - particularly Lesotho, Mozambique and Swaziland – the mines serve as a wellspring for infection. Each migrant worker who returns home with TB spreads the disease to an estimated 10 to 15 people in his community.

“IOM remains committed to support SADC member states to address TB and HIV in the mining sector. Promoting the health of migrants benefits both sending and receiving countries as well as employers, their families, and society as a whole. The signing of this Declaration is a step in the right direction towards the realization of healthy migrants in healthy communities,” said Dr Erick Ventura, Regional Migration Health Coordinator and Chief of Mission, IOM South Africa.

A preliminary analysis on the South African mining sector, performed at the request of SADC, has identified five interventions needed to address TB among mine workers, former mine workers, their families, and affected communities: 1) look actively to find people with TB and provide them with prompt treatment; 2) eliminate conditions that lead to high rates of TB in the mines; 3) improve TB treatment; 4) actively seek former mine workers who could have TB; and 5) create a legal and regulatory framework that provides compensation for occupational disease among miners. The estimated annual cost of the TB epidemic in the South African mining sector alone is more than US$ 880 million; while taking these steps would cost US$ 570 million - a third less.

“The Declaration is a significant expression of the highest levels of political will,” Dr Ditiu said. “Now it is critical that governments, companies, civil society, and development partners come together to drive new approaches and new ways of doing business so we can turn the tide of the TB epidemic in Africa.”


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