

Employment and Labour on elimination of silicosis in non-mining sectors

The elimination of silicosis in non-mining sectors remains a priority for the Department of Employment and Labour, according to the Department's Labour Policy and Industrial Relations Acting Deputy Director-General, Mr Thembinkosi Mkalipi. Mkalipi said South Africa, as a member of the international community and the International Labour Organization (ILO), has an obligation to reduce workers' exposure to silicosis. He warned that literature continues to show an increase in cases of the disease and emphasised that the Department is focusing on priority sectors where workers remain vulnerable. He was speaking on Tuesday, 10 March 2026, in Kempton Park during a seminar marking the release of research findings on the "Benchmark study on silicosis in non-mining sectors".

Silicosis is an irreversible and progressive occupational lung disease caused by inhaling crystalline silica dust. It leads to inflammation, permanent lung scarring, and severe breathing difficulties. While treatment includes medication and avoiding further exposure, the disease remains fatal in many cases. Workers in sectors such as construction, mining, and stone fabrication are among those most vulnerable.

To determine the prevalence of silicosis, the Department of Employment and Labour commissioned the Council for Scientific and Industrial Research (CSIR), the National Institute for Occupational Health (NIOH), the University of the Witwatersrand, and the Wits Health Consortium to conduct a comprehensive study.

The study aimed to determine the prevalence of silicosis across industries between 2012 and 2018, analyse trends in deaths from silica-related diseases over the same period, and develop occupational health strategies and programmes to reduce exposure to respirable silica dust and eliminate silicosis in South Africa by 2030.

Professor Nisha Naicker, Head of Epidemiology and Surveillance at the NIOH, explained that the project was divided into three work packages.

The first work package focused on prevalence assessment, the second on guiding prioritisation and implementation of elimination strategies, and the third on developing a toolbox of tools and methods for silicosis elimination.

Key findings from Work Package 1 included:

- A total of 225 workers participated in the study
- 178 workers had more than 10 years of work experience
- The majority of participants were from the brick-making sector (40%), followed by construction (34%)
- Participants' ages ranged from 24 to 65 years, with an average age of 45.33 years
- The majority of participants were male (81.78%)
- Participants with more than 10 years of experience had an average of 20.43 years of sector experience, ranging from 11 to 43 years

- None of the participants reported a prior diagnosis of silicosis
- Symptoms suggestive of tuberculosis were experienced by 12.44% of participants during screening
- Chest X-ray results identified one case of silicosis, representing a prevalence of 0.5%. The affected participant was a 45-year-old male crusher operator in the mineral processing sector, with 15 years of experience, and is currently receiving medical care

The Department's Inspection and Enforcement Services branch Deputy Director, Mr Warren Mallon, emphasised that safeguarding the safety and health of workers is a fundamental right.

He noted that occupational accidents, injuries, and diseases carry significant human, social, and economic costs, and reaffirmed the Department's commitment to eliminating exposure to silicosis.

"The Department's National Programme for the Elimination of Silicosis was initiated in 2004," Mallon said. The programme included the training of inspectors and the introduction of employer reporting requirements on worker exposure levels.

He added that, in line with ILO conventions and obligations, South Africa remains on track to achieve the elimination of silicosis by 2030. The Department's Occupational Health and Safety Strategy 2024–2029 also places emphasis on achieving zero injuries and occupational diseases.

The study concluded that there is no single, simple, or reliable method of collecting data on silicosis cases. It recommended strengthening diagnosis processes, improving reporting in terms of the Compensation for Occupational Injuries and Diseases Act and the Occupational Health and Safety Act, establishing a national silicosis register, analysing medical aid databases, and conducting targeted surveys.

The research focused on sectors including construction, artificial stone manufacturing, brick manufacturing, and pottery and ceramics.

Professor Emeritus David Rees of the University of the Witwatersrand, who led Work Package 3, noted that the study assessed silica exposure levels in 11 companies. The findings indicated that workers were at risk of silicosis in all sectors studied, except roof tile manufacturing. He warned that the elimination of silicosis could be undermined if exposure risks are not addressed effectively. [📍](#)

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