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Volume 31, Issue 1, 2025



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SUMMARY

EX-MINEWORKERS OCCUPATIONAL LUNG DISEASES GUIDE

Your Health, Our Priority

The Minerals Council and some of its partners have recognised that mineworkers have poor access to healthcare and support services post-employment. To address this, we have collectively developed this booklet to inform the ex-mineworker about common occupational diseases and illnesses that may affect them during and after their mining career. Within the booklet, they will be informed about the assistance and support available to them and their families should they be diagnosed.



What is an Occupational Lung Disease?

An Occupational Lung Disease (OLD) is a medical condition that affects the lungs and respiratory system. These harmful substances can include dusts, fumes, gases, vapour, or fibres that are inhaled over time, leading to inflammation, scarring, or other damage to the lungs.

This booklet covers a variety of topics in great detail including:

- Information about occupational health.
- Guidance on prevention and early detection.
- The different types of healthcare benefits available to you should you have an OLD.
- How to access these benefits (compensation).
- Support services available to you from the Department of Health, Department of Labour, mining companies, trade unions, pension funds and other institutions.



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From the Editor . . .



**Gill Nelson,
Editor-in-Chief**

It would be remiss of me not to write about the Trump administration's recent directives to withdraw the life-saving President's Emergency Plan for AIDS Relief (PEPFAR) and the United States Agency for International Development (USAID) funding from South Africa (and many other countries). PEPFAR had been instrumental in supporting HIV/AIDS prevention and treatment initiatives in South Africa since 2003. The consequences are dire for the hundreds of thousands of

HIV-positive people, those with TB, and others who rely on US funds for survival. The cuts have affected more than 40 USAID-funded health projects in South Africa, including non-profit organisations like the Anova Health Institute. The consequences are that [an estimated 500 000 South Africans will die](#) and a similar number will become infected in the next 10 years.

Research programmes and researchers have not been spared from the fallout. During the past Human Rights weekend in South Africa (ironically), [letters were received from the US](#), ending billions of Rands of funding, with immediate effect, to university HIV and TB grants. Institutions affected by the cut in funding include the Centre for the Aids Programme of Research in South Africa (CAPRISA) and the Wits Reproductive Health and HIV Institute (WRHI). In addition to the general population, HIV has been the cause of morbidity and mortality for many thousands of workers in South Africa since the 1990s, while TB has affected mine and other workers for more than 100 years. Both diseases are, therefore, often included in other aspects of occupational health research.

These funding cuts have severe consequences, globally. On 20 March, the World Health Organization (WHO) released a [press statement](#), calling for "urgent action to address worldwide

disruptions in tuberculosis services putting millions of lives at risk".

The statement in the aforementioned letters that "they ... ultimately do not enhance health, lengthen life, or reduce illness" is short-sighted as South Africa is a world leader in this field and both diseases, which also affect Americans, albeit at lower rates than in our country. In 2024, [more than 10 000 cases of TB](#) were provisionally reported in the US (3 cases per 100 000 population), an increase from 2023, [while the rate of HIV was 11.3%](#) in 2022. Ironically again, Monday, 24 March was [World TB Day](#), with the theme, *Yes! We Can End TB: Commit, Invest, Deliver*.

This latest development will add to the already massive job losses. Many academics and research administrators, field workers, data capturers, and others have found themselves suddenly and unexpectedly jobless – only a few are 'lucky' enough to have been retrenched with at least some means of supporting themselves in the short term. It is not a simple matter of finding a job at another research institute. Even those with decades of experience are not being spared and have joined the large pool of job seekers. Incidentally, [unemployment amongst graduates](#) in South Africa was reported to be almost 10% at the end of 2024. Postgraduate students and postdoctoral researchers are among those who have already lost funding, leaving their academic careers hanging in the balance.

Meanwhile, the University of KwaZulu-Natal (UKZN) presented the results of a small [HIV cure trial](#), using combination immunotherapy, at a conference in San Francisco in early March. Twenty percent of participants "remain off ART and are virally suppressed after one-and-a-half years". This provides hope that there might not be a need for lifelong medication in the near future. The trial was led by Prof. Thumbi Ndung'u, who stated that "... it proves that complex HIV cure research can be successfully conducted in resource-limited settings where the need is greatest, and highlights the importance of including African populations in global scientific advancements." This development could potentially save lives in America too.

It is not only USAID funding that has ended. A \$2.5 million grant from the National Institutes of Health (NIH) National Institute for Allergies and Infectious Diseases was [cancelled](#) on Human Rights Day, two-and-a-half years before it was due to end. An article published in *Science* on 14 March 2025 alerts researchers that the NIH "could terminate all grants that fund work in that country [South Africa] within days".

It is, indeed, a dark time for health research in South Africa. 

ANNOUNCEMENT

Late last year, SASOM conducted a survey amongst its 458 members about their perceived value of the questionnaire prepared for each issue of *Occupational Health Southern Africa*, which could earn them Continuing Education Units (CEUs) if answered correctly. Unfortunately, only 44 members responded. While 75% and 79% responded positively to questions about the value of the Journal, and 52% said that the topics covered in the Journal were relevant to their fields of practice, only 47% said that the CEU points offered were valuable. For this reason, SASOM has made the decision to discontinue the CEU questionnaire in the Journal.

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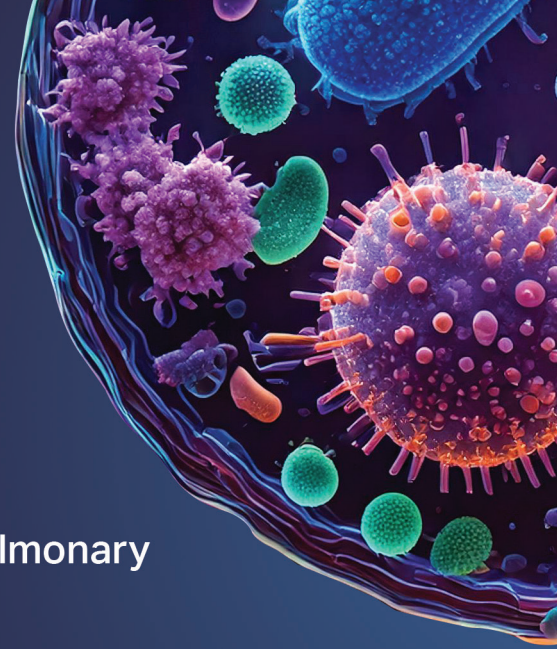
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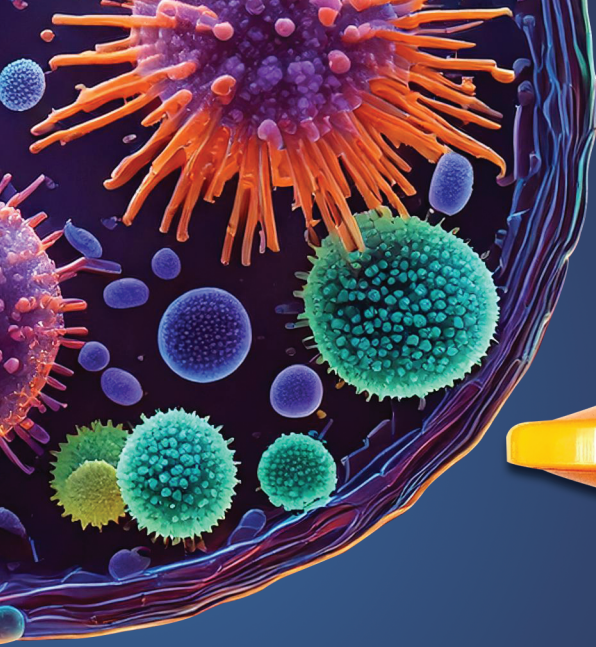
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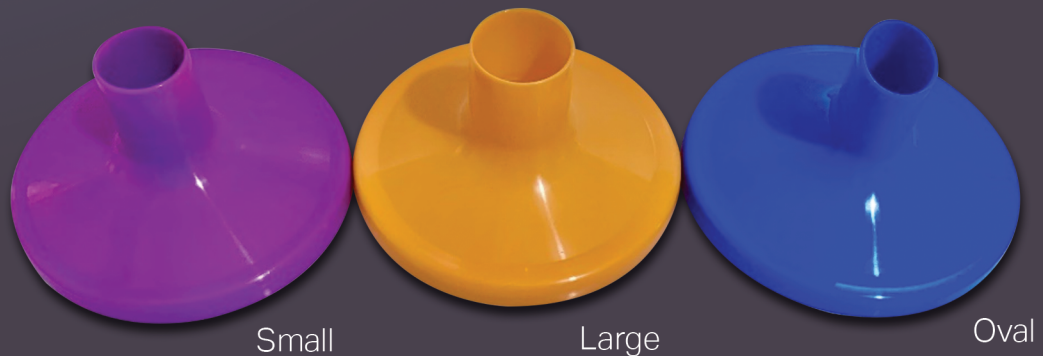
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Dingani Moyo

Dingani Moyo is an associate professor at the National University of Science and Technology in Zimbabwe, and an honorary senior lecturer at the University of the Witwatersrand in South Africa. He stands as an ambassador for occupational medicine in east, central, and southern Africa, and the world at large, where he has contributed immensely to the development of the discipline. He was born in Gweru, in the Midlands Province of Zimbabwe, and he hails from a rural village in Zhombe, outside the town of Kwe Kwe.

Prof. Moyo qualified as a medical doctor in 1994 from the University of Zimbabwe, and did his internship at Mpilo Central Hospital and United Bulawayo Hospitals in Bulawayo – ‘The City of Kings’ – in Zimbabwe. After his housemanship, he worked at Gweru Provincial Hospital before joining the Zimbabwe Mining and Smelting Company (Zimasco) Pvt Ltd, the biggest chrome mining company in the country at the time. Joining Zimasco was the genesis of his journey of a thousand miles into occupational health. After Zimasco, he joined Debswana Diamond Mining Company at Orapa Mine Hospital in Botswana, and later moved to head the Occupational Health Services at Norilsk Nickel’s Tati Nickel Mining Company in Francistown, Botswana. Thereafter, he rejoined Zimasco as the Group Health Services Manager, overseeing the company’s hospital and its five occupational health clinics across the country.

Prof. Moyo was driven by his insatiable appetite to reach the highest echelons of occupational health. He obtained several qualifications in a bid to improve his skills, including:

1. Fellow of the Royal College of Physicians of Ireland (FRCP)
2. Fellow of the Faculty of Occupational Medicine of Ireland (FFOM)
3. Member of the Faculty of Occupational Medicine of Ireland (MFOM)
4. Master (Hons) of Occupational Health and Safety (MOHS), University of Newcastle, Australia
5. Master of Applied Health Services Management, University of Newcastle, Australia
6. Bachelor of Medicine and Bachelor of Surgery degrees, University of Zimbabwe

In 2012, while attending the International Commission on Occupational Health (ICOH) congress, Prof. Moyo advocated for occupational health professionals in Zimbabwe to become ICOH members; he served as the first ICOH National Secretary for Zimbabwe (2012–2015). He has served on the ICOH Board for two triennia, 2015–2018 and 2022–2024, during which times he contributed to the global development of occupational health. In 2024, Prof. Moyo was elected as a Fellow of the prestigious Collegium Ramazzini, a select group of no more than 180 fellows from more than 40 different countries, each of clear personal and professional integrity, distinguished by their contributions to occupational and environmental health. In 2024, in recognition of his contribution to occupational health, he received two awards from the Society of Occupational Medicine (SOM) in the United Kingdom: 1) Outstanding contribution to the global development of occupational health, and 2) Outstanding contribution to occupational health research. He has published more than 50 research papers and more than 60 technical reports.



Professor Dingani Moyo

Prof. Moyo serves on the ICOH Working Group on Modernisation of ICOH Processes and Practices. He also serves on the Board of Trustees of OSHAfrica and heads the Education and Competency Improvement Scientific Committee. He also serves on the Education Committee of the Faculty of Occupational Medicine (FOM), Ireland.

Prof. Moyo has led several regional projects in southern Africa. Under the Global Fund Project, TB in the Mining Sector, he was the technical lead for the establishment and operationalisation of 11 occupational health service centres in seven southern African countries. He was involved in the training of healthcare personnel on spirometry, audiometry, and diagnostics for TB and occupational lung diseases (OLDs). Under the East, Central and Southern Africa Health Community (ECSA-HC), Prof. Moyo developed four generic mine health and safety standard operating procedures (MHS SOPs) for TB, HIV, and OLDs, and four country-specific MHS SOPs on the same for each of nine countries in the ECSA-HC. Under the African Union Development Agency (AUDA-NEPAD), Prof. Moyo developed a regional strategic framework for occupational safety, health, and environment for artisanal and small-scale miners (ASMs), and an occupational health services framework for Malawi and the Kingdom of Lesotho. Prof. Moyo assisted the Kingdom of Lesotho in developing the following documents for ASMs: 1) Occupational health, wellness, safety, and environment (OHSE) policy, 2) Handbook for OHSE, 3) Information, education and communication (IEC) strategic plan and communication advocacy on OHSE, and 4) Medical surveillance guidelines for ASMs.

As Prof. Moyo consolidates his contribution to occupational health, he is currently focusing on establishing a Master of Medicine degree in Occupational Medicine at the National University of Science and Technology in Bulawayo, Zimbabwe. He is very keen on mentoring upcoming specialists and practitioners in the field. [🔗](#)

Assessing pulmonary tuberculosis in South Africa's mining industry: a trend analysis, 2015–2022

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Zungu M, Balfour T, Barker S, Spiegel J, Lockhart K, Kistnasamy B, Malotle M, Yassi A. Assessing pulmonary tuberculosis in South Africa's mining industry: a trend analysis, 2015–2022. *Occup Health Southern Afr*. 2025; 31(1):4-11. doi: 10.62380/ohsa.2025.31.1.1

ABSTRACT

Background: The South African mining industry (SAMI) has long faced a high burden of tuberculosis (TB). Recognising the need to strengthen employer interventions, the Masoyise iTB project was launched in 2015 to focus on reducing the impact of TB, and was expanded in 2019 into the Masoyise Health Programme (MHP) to include human immunodeficiency virus (HIV), occupational lung diseases, and non-communicable diseases in the SAMI.

Objectives: To assess the impact of the MHP, by describing trends in TB notification rates in the SAMI from 2015 to 2022.

Methods: We conducted an ecological study to analyse trends in TB case notifications from the MHP, Mine Health Safety Inspectorate (MHSI), Medical Bureau for Occupational Diseases (MBOD), and the general South African population. Data were plotted and tabulated, focusing on rates before and since the implementation of the MHP. Poisson regression analysis was used to calculate the average annual rates of change in TB case notifications.

Results: At the inception of the MHP, TB rates were 1 225 and 523 per 100 000 population in the SAMI and general population, respectively. From 2015 to 2022, the annual rate of decline in TB case notifications in the SAMI outpaced that of the general population, at 16.1% and 6.7%, respectively. The gold mines had a higher rate of decline in TB cases (17.5%; 95% CI 16.6–18.5). In 2022, the TB incidence rate was higher for gold (631 per 100 000 population) than for other commodities in the SAMI, and for the general population (354 per 100 000). The rate reductions in the MHP database were similar to those shown in the other SAMI-related databases (annual rate reductions were 17.1%, 95% CI 16.6–17.7 and 16.3%, 95% CI 15.5–17.0 for the MHSI and MBOD, respectively).

Conclusion: Industry initiatives play a crucial role in multi-sectoral strategies to tackle public health challenges in the SAMI. The trends in TB notification rates support ongoing collaboration amongst SAMI-related organisations and programmes to protect workers' health, with an emphasis on gold miners in which TB rates remain highest.

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Exposure dose metrics, instrumentation, and operating procedures for occupational exposure assessment for nanomaterials and nanoparticles: a scoping review

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Keywords

engineered nanoparticles, inhalation exposure, measurement strategy, exposure assessment

How to cite this paper

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ABSTRACT

Introduction: The rapid emergence of nanotechnology has resulted in the potential for workplace exposure to airborne particles in the nano-range, but consensus on exposure dose metrics hinders measurement strategies and evaluation. Thus, the association between exposure and adverse health outcomes is challenging to establish.

Aim: The aim of this scoping review was to describe current exposure dose metrics, instrumentation, and strategies for quantifying occupational exposure to nanomaterials and nanoparticles.

Methods: Peer-reviewed manuscripts and articles published from January 2008 to November 2024 about exposure dose metrics, instrumentation, and standard operating procedures for quantifying nanomaterials and nanoparticles in occupational settings were identified, using Google Scholar, PubMed, and ScienceDirect. Search phrases were (“direct reading instruments” OR “exposure dose metric” OR “human risk assessment”) AND (“nanoparticles manufacturing” OR “occupational exposure assessment” OR “standard operating procedures for exposure assessments”) AND “sampling techniques”.

Results: Five hundred peer-reviewed papers were identified, 118 of which were included in the review. Most of the literature reviewed focused on inhalation as an exposure route. Mass concentration was the most commonly used exposure dose metric. The chosen exposure dose metric appeared to be influenced by the availability of the data collection instrument. Six real-time monitoring instruments were widely used: four particle sizers and two particle counters. Only one particle counter that was used measured three exposure dose metrics (concentration, mass, and size); the others measured only one exposure dose metric. The filter-based method was widely preferred for sampling. Various analytical methods were used to characterise nanomaterials and nanoparticles.

Conclusion: There is no consensus on exposure assessment methodology in the nanotechnology field, hindering the ability to compare exposure scenarios and to draw conclusions about associations between exposures and adverse health outcomes. Africa lags behind other continents in the use of exposure dose metrics other than particle mass concentration. A combination of real-time instrumentation, analytical methods, and exposure models is needed to provide an integrated exposure assessment methodology, and to standardise exposure quantification in the rapidly growing nanotechnology field.

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Psychosocial support services for emergency medical services personnel in the City of Tshwane, South Africa: availability and accessibility

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Keywords

emergency medical services personnel, first responders, mental health, psychosocial risks, resilience

How to cite this paper

Makgolo RM, Havenga Y, De Villiers M. Psychosocial support services for emergency medical services personnel in the City of Tshwane, South Africa: availability and accessibility. *Occup Health Southern Afr*. 2025; 31(1):25-31. doi: 10.62380/ohsa.2025.31.1.3

ABSTRACT

Background: Emergency medical services (EMS) personnel are exposed to dangerous, challenging, and emotionally draining work situations as they reach out to survivors of emergencies to provide physical and emotional support. Attending to life-threatening incidents while being directly exposed to personal safety threats is common.

Objective: We described the availability and accessibility of psychosocial support services for EMS personnel in the City of Tshwane, South Africa in 2022.

Methods: A descriptive qualitative research design was used. Twelve EMS personnel were purposively sampled from one of the seven regions in the City of Tshwane, and data were collected using semi-structured interviews. Data were analysed using qualitative content analysis.

Results: Despite the available services for EMS personnel, which they acknowledged, the utilisation thereof was poor. This was due to the limited numbers of service providers and inadequate referral procedures. Peer and self-support were alternative strategies used, and private professional services were consulted. While there is a need for psychosocial support for EMS personnel, barriers such as concerns about stigmatisation, referral difficulties, and resource limitations prevent access to, and use of, services.

Conclusion: There is a dire need for preventive and supportive psychosocial interventions for EMS personnel. Strengthening psychosocial support for these healthcare professionals can prevent burnout and increase resilience. Support services should address psychosocial hazards in the workplace and psychosocial health literacy, and be supported by management.

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Breaking barriers: women's impact on occupational hygiene in South Africa

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Keywords

women in mining, gender equality, women in leadership, workplace diversity, empowerment

How to cite this paper

Franken A, Du Preez K, Du Preez S, Hills J, Keretsetse G, Lourens E, Manganyi J, Mundy N, Selenati-Dreyer Z, Van Niekerk J. Breaking barriers: women's impact on occupational hygiene in South Africa. *Occup Health Southern Afr*. 2025; 31(1):32-37. doi: 10.62380/ohsa.2025.31.1.4

ABSTRACT

The field of occupational hygiene was founded by, and historically dominated by, men. However, as more women entered the workplace, they also entered the field of occupational hygiene. This paper highlights the contributions of women to the field of occupational hygiene, globally, and provides a brief overview of the history of women in occupational hygiene in South Africa. It also highlights the impact of women in the Southern African Institute for Occupational Hygiene (SAIOH), the National Institute for Occupational Health (NIOH), the mining industry, academia, and government – specifically, the South African Department of Employment and Labour. The emphasis of this paper is largely focused on the field of occupational hygiene, but the connection to occupational health should not be overlooked. As an all-female authorship, we wish to encourage young women interested in science to enter the fields of occupational health and occupational hygiene, by showcasing the impressive progress that has been made by women.

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Major Hazard Installation Regulations, 2022: Reminder of key dates for compliance by duty holders

Kate Collier: Partner, Webber Wentzel

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Mufaro Sambaza: Candidate Attorney, Webber Wentzel

The Major Hazard Installation (MHI) Regulations were published in January 2023, repealing the 2001 MHI Regulations. Webber Wentzel previously published an [article](#) outlining key timelines for compliance with the amended MHI Regulations. The MHI Regulations should be read together with the published Explanatory Note, which provides guidance to duty holders on interpreting the MHI Regulations and ensuring compliance.

The implementation of the MHI Regulations follows a staged approach over 36 months, with duty holders expected to have already complied with several obligations, while others take effect by January 2026. Duty holders should be carefully tracking their progress to ensure that any actions requiring time for implementation are properly planned.

Obligations already in force and which duty holders can be assessed against

By now, the following steps should have been completed by duty holders and embedded into safety management systems:

1. Designation of a competent, responsible person or persons (with the appropriate qualifications in high-hazard establishments) in full-time capacity to monitor compliance with the Occupational Health and Safety Act (OHSA) and MHI Regulations;
2. Reviewing and updating emergency plans for existing establishments to ensure alignment with SANS 1514;
3. Training on the MHI Regulations and general good practice for employees involved in the processing, handling, and storage of hazardous substances. There are three types of training provided for in the Explanatory Note, (i) general awareness/familiarisation training, (ii) induction training, and (iii) function-specific training. The training must be periodically reviewed and supplemented with refresher training being carried out periodically and at least every 12 months. Training must also be provided when there is a change in the establishment or when the MHI risk assessment has been revised; and
4. Submission of the updated notifications of existing establishments to the relevant Chief Director and local government by 31 January 2025. This submission should have included the various required documents, such as the permission on land use,

letter of appointment of the competent person, inventory lists, most recent risk assessment, site maps, and information regarding neighbours within the impact zone. Once registered, the duty holder must conspicuously display the certificate of registration.

The MHI Regulations prescribe that failure by a duty holder to comply with the MHI Regulations, including obligations that were required to be met by the end of January 2025, constitutes an offence. Upon conviction, penalties may include fines ranging from 500 000–5 000 000 ZAR or imprisonment for a period not exceeding 24 months.

Future compliance obligations

Looking ahead, the MHI Regulations require high-hazard establishments to meet certain obligations by 31 January 2026. The following compliance obligations should remain a priority for high-hazard establishments (Table 1).

Scope of application and exemptions

Establishments that were previously classified as MHIs under the repealed 2001 MHI Regulations, but no longer meet the definition under the amended MHI Regulations, must take steps for reclassification, as outlined in the Transition Strategy detailed in the Explanatory Note. The Transition Strategy, a new concept introduced in the Explanatory Note, is not referenced in the MHI Regulations themselves. It seeks to address specific transitional arrangements for establishments that require re-evaluation in light of the amendments.

For declassification and deregistration, duty holders must submit an exit report generated by an approved inspection authority (AIA), the prescribed Form A, various additional documents as specified in the Transition Strategy, and local government support documentation. These must be submitted to the Provincial Operations for approval.


The Explanatory Note specifies that certain establishments may fall outside of the scope of the MHI Regulations, including those excluded under Regulation 2(6), which precludes nuclear installations governed by the Nuclear Energy Act No. 131 of 1993. These are characterised by hazards created by ionising radiation,

Table 1. Compliance obligations for high-hazard establishments

Regulation	Deadline	Compliance requirement
Regulation 11	31 January 2026	Major incident prevention policies for high-hazard establishments must be finalised and recorded in the format prescribed in Regulation 11 and Annexure C of the MHI Regulations. (After 31 January 2026, this requirement will apply to all establishments.)
Regulation 12	31 January 2026	Comprehensive safety reports for high-hazard establishments, including the contents of Annexure D of the MHI Regulations, must be submitted to the Chief Inspector.
Regulation 13	31 January 2026	Existing high-hazard establishments must apply for a licence to operate with the Chief Inspector.

or where ionising radiation is present in a nuclear establishment. However, the enforceability of these exclusions is in question, as the Explanatory Note is not legally binding. Other establishments that fall outside the scope of application of the MHI Regulations are offshore establishments; mining establishments; transport of dangerous substances in transit and outside establishments (governed by separate legislation); and establishments operated within military, civil, and aviation sectors.

While the MHI Regulations generally apply to all MHIs, low- and medium-hazard establishments are not required to prepare safety reports or apply for a licence to operate. Additionally, low-hazard establishments are exempt from developing a major hazard prevention policy.

Duty holders must track key compliance deadlines and ensure ongoing compliance, as contravention of the MHI Regulations may result in fines or imprisonment. Furthermore, an inspector may determine that a duty holder's non-compliance exposes employees to a health or safety risk, and may prohibit the use of the plant, workplace, or machinery until compliance is achieved. There are significant operational and legal risks associated with non-compliance with the MHI Regulations. 

UPCOMING EVENTS

SOUTH AFRICA

SAIOH Annual Scientific Conference
 Radisson Blu Hotel, Umhlanga, South Africa
 20-23 October 2025
 Website: <https://www.saioh.co.za/page/SAIOHConference2025>

INTERNATIONAL

9th World Conference on Research Integrity (WCRI)
 The Westin Bayshore Hotel, Vancouver, Canada
 3-6 May 2025
 Register: https://wcri2026.org/?utm_campaign=website&utm_medium=email&utm_source=sendgrid.com

Asbestonomy 2025
 Berlin, Germany
 24-25 June 2025
 Register: <https://asbestonomy.com/>

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A-OSH EXPO 2025 – workplace safety is more than a checklist

Workplace safety, while driven by compliance with Occupational Health and Safety Act regulations, should be more than just a checklist. Because it directly impacts on employee wellbeing, business continuity, and productivity, it should be considered a critical, non-negotiable part of all stakeholders' working lives. The management of organisations needs to play a proactive role in ensuring buy-in from employees by implementing a pre-emptive safety strategy.

"The cost of inadequate or ineffective workplace safety practices is immense, and can include increased workplace injuries, legal and financial implications, decreased employee morale and productivity, and damage to an organisation's reputation", says Mark Anderson, Portfolio Director at Specialised Exhibitions – a division of Montgomery Group.


Anderson says that finding the right solutions to match a specific workplace environment should be a top priority for organisations serious about occupational safety and health (OSH) compliance. *"This starts with risk assessments, which will identify areas of strength and weakness in the organisation's OSH profile. It also includes appropriate training, and the adoption and implementation of high-quality safety products and technology. A visit to A-OSH EXPO 2025 is the best starting point for risk and safety managers, as each of these modalities is covered extensively by the exhibitors."*

Co-located with Secorex South Africa, Facilities Management Expo, and Firexpo – at Gallagher Convention Centre in Midrand from 3–5 June 2025 – A-OSH EXPO is Africa's largest and most comprehensive one-stop source of OSH solutions. *"This means that not only do organisations save a substantial amount of time and effort in finding what they need, but their interactions with the knowledgeable and highly experienced exhibitors means that they are given sterling advice on their OSH requirements",* says Anderson.

Anderson points out that the free-to-attend Saioosh Seminar Theatre and the Working at Height and Safety Seminar Theatre are currently being populated with highly informative seminar sessions, guaranteed to provide the latest and most topical information on current trends and OSH regulations. *"To find out more about companies exhibiting at A-OSH EXPO, the seminar sessions, and other important expo information, visit our show website at www.aosh.co.za."*

See some of the A-OSH EXPO 2024 highlights here: <https://youtu.be/SBIJRHVUxZM?si=3G6BUoPEgPGo-MQq>

Attendance at A-OSH EXPO and the co-located Secorex South Africa, Facilities Management Expo, and Firexpo is free. Visit www.aosh.co.za to register.

Organisations wishing to exhibit at A-OSH EXPO 2025 can contact the A-OSH EXPO team on zelda.jordaan@montgomerygroup.com or johan.vanheerden@montgomerygroup.com to book a space, or capitalise on a sponsorship opportunity. 



The widest array of OSH solutions, all under one roof, make a visit to A-OSH EXPO 2025 a must

Photograph: Montgomery Group

SASOM news

Claudina Nogueira: Occupational health consultant; SASOM ExCo member; ICOH National Secretary for South Africa (2024–2027); WHWB President (2024–2025)

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Claudia Frost: SASOM National Office Coordinator

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SASOM ANNUAL CONFERENCE 2024

The South African Society of Occupational Medicine (SASOM) hosted its annual conference on Saturday, 9 November 2024, in association with the SASOM Annual General Meeting (AGM). The last SASOM ExCo meeting of the year was held on Friday, 8 November 2024. The three events, hosted by the SASOM Western Cape Chapter, were held in hybrid format, at the Vineyard Hotel, Newlands, Cape Town, using the SASOM Zoom platform. SASOM takes this opportunity to thank the organisation that provided the exhibition and sponsorship for the conference: Tealio – Occupational Health Software for Workplaces and Educational Institutions (www.tealio.ai), represented by Benjamin Amoils and his team.

The conference was themed *Occupational health in the digital age: navigating the challenges*, and was accredited by the South African Medical Association (SAMA) for seven Continuing Professional Development (CPD) points/units for full attendance (one ethics and six clinical points). The conference was opened by the SASOM



Two chairs are better than one

Dr Itumeleng Ntamatamala, SASOM Western Cape Chapter and UCT (L) and Dr Geoffrey Tafaune, SASOM Treasurer, Gauteng Department of Health and Wellness, and University of Pretoria (R), co-chaired the sessions of the SASOM Annual Conference 2024

Photograph: Claudina Nogueira (South Africa)

Chair, Prof. Daan Kocks, who welcomed the 37 onsite and 91 online delegates.

The morning session was chaired by Dr Itumeleng Mtatamala, occupational medicine specialist and senior lecturer from the University of Cape Town (UCT). Four presentations were delivered:

- o Dr William Kleynhans (Cipla South Africa, and Ocule Health) presented 'Data-driven workplace health: using AI and big data to predict and prevent workplace injuries and diseases'.
- o Prof. Rodney Ehrlich (UCT) presented 'Understanding the challenges of using computer-aided detection for occupational tuberculosis and silicosis'.
- o Prof. Shahieda Adams (UCT) presented 'Mental health in the digital age: navigating the challenges of the hyperconnected workplace and 24/7 work cycle'.
- o Dr Zahida Sunday (Western Cape Government Health and Wellness (WCGHW)) presented 'Case studies: Occupational Health and Safety Information System (OHASIS) – reflections on introducing digital health technologies into an existing occupational health programme'.

The afternoon session was chaired by Dr Geoffrey Tafaune (Gauteng Department of Health and Wellness, and the University of Pretoria). Two presentations were delivered, followed by a panel discussion:

- o Dr Nomonde Buyiswe Mabuza-Moloele (Qalo Digihealth (Pty) Ltd) presented 'Delivery of workplace health and wellness in the digital age: integrating 4IR technology and wearables in the workplace'.
- o Dr Jan Lapere (Private practitioner – occupational medicine, medico-legal and social labour law, Gqeberha, and SASOM ExCo member) presented 'Ethical and legal considerations for using wearables and other worker monitoring digital technologies in the workplace'.
- o Dr Casper Joubert (Tygerberg Hospital, Cape Town) chaired a panel discussion on 'The future of work in the digital age: what the next decade holds'. Panel members were Prof. Mohamed Jeebhay (UCT), Dr Shamila Fakie (Medscheme Holdings, South Africa), and Dr Marion Morkel (Sanlam, South Africa).

SASOM ANNUAL GENERAL MEETING 2024: A YEAR IN REVIEW

The AGM followed the conference. Prof. Daan Kocks (SASOM Chair) read the 2024 annual report prepared by the SASOM 2024 National Secretary, Dr Frank Fox, and highlighted the several activities and outcomes in 2024.

SASOM National Office

- o The SASOM office bearers for 2025 are Prof. Daan Kocks (Chair), Dr André Kotzé (Vice Chair), Dr Frank Fox (Secretary), and Dr Geoffrey Tafaune (Treasurer).

- o As of 31 October 2024, SASOM had 459 members, including nine honorary members. By mid-February 2025, following a membership marketing and renewal drive, 176 members (38%) had renewed their memberships, and 12 new members (1%) had joined the Society. SASOM members also reside in Botswana, Canada, Namibia, Zimbabwe, the United Kingdom, and other countries.

SASOM awards

- o In recognition of their unwavering dedication and contributions to the fields of occupational medicine and occupational health, SASOM bestowed honorary membership awards on Dr Jan Lapere and Dr André Kotzé.
- o Ludwick Lebaka (Sibanye Stillwater) was the winner of the [SASOM Annual Author Prize](#) for 2023. On behalf of *Occupational Health Southern Africa*, SASOM encourages researchers working in the field of occupational health to publish their research findings. SASOM provides a cash award to a novice author who is the first author of the best paper published in the Journal in a calendar year. Membership of SASOM is not a criterion.

SASOM Guidelines

SASOM Guidelines are provided to members in good standing, at no cost. Efforts to update and standardise the Guidelines continued throughout the year. Two Guidelines were updated during 2024, viz. 'Alcohol and drug abuse in the workplace' and 'Ethics and professional conduct for occupational medicine practitioners'. A third update is currently under review – 'Radiation and heat exposure'.

SASOM website

- o From November 2023 to October 2024, unique visitors to the website totalled more than 6 000. This highlights the importance of a user-friendly and informative digital platform.
- o SASOM expanded its online presence with the creation of [Facebook](#) and [LinkedIn](#) pages, with the intent of increasing member engagement, sharing industry updates, promoting events, and fostering professional networking within the occupational medicine community.

SASOM and Occupational Health Southern Africa

- o Prof. Daan Kocks thanked SASOM ExCo members, Claudina Nogueira, for her facilitation of the publication of SASOM's pages in the Journal, and Prof. Mary Ross and Mrs Claudia Frost (SASOM National Office Coordinator), for drafting and facilitating the CPD questionnaires based on the published content of *Occupational Health Southern Africa*, respectively. Members were able to earn three CPD/CEU points per questionnaire, potentially earning 12 points per annum. Despite the time and effort spent developing the questionnaires, participation from SASOM members is disappointingly low; less than 10% of members submitted answers to the questionnaires in 2024. Hence, SASOM will no longer offer the questionnaire for SASOM members to obtain CPD points.
- o Prof. Daan Kocks wrote a [guest editorial](#) for the third issue of the Journal (July–September 2024). He raised the issue of the complexity of a competent person's knowledge and cognitive need to function in the world of occupational health.

SASOM liaison

- o Formal communication with organisations engaged in the enhancement of occupational medicine continued with SASOM ExCo members (co-opted) from the National Institute for Occupational Health (NIOH), the Compensation Commissioner (CC), the International Commission on Occupational Health (ICOH), the South African Society of Travel Medicine (SASTM), and the Mine Medical Professionals Association (MMPA).
- o Liaison with other organisations continued, nationally and internationally, reinforcing SASOM's regional and global presence throughout 2024, and included the South African Department of Employment and Labour, the SAMA, the Council for Health Service Accreditation of Southern Africa (COHSASA), the International Occupational Medicine Society Collaborative (IOMSC), and the American College of Occupational and Environmental Medicine (ACOEM).
- o SASOM continues to provide professional advice and support to members upon request, and is fortunate to have access to top occupational medicine practitioners (OMPs) and a qualified OMP with an MLB (Master of Laws) degree to offer comprehensive guidance.

SASOM outlook for 2025

- o 2024 was marked by progress and strategic investments aligned with SASOM's vision and mission. While financial challenges were noted, the strong asset base and non-operational income provided stability. The ongoing dedication of the SASOM National Office, branch representatives, and members is integral to these successes.
- o SASOM aims to increase membership, expand event participation, and continue updating Guidelines. The 6% increase in membership fees for 2025 will support these objectives and sustain SASOM's strategic initiatives.

SASOM and ICOH activities in 2024

The ICOH Scientific Committee on Biohazards and Occupational Health, chaired by Prof. Mary Ross (specialist in occupational medicine, public health, and travel medicine; professor at the University of the Witwatersrand; and SASOM ExCo member), organised a webinar on 27 March 2024, titled 'Occupational infections: reports from South Africa'. The three talks were:

- o 'Working remotely: cautionary tales from Africa': Dr Albie de Frey (International Health Management Consultants, Geneva; WHO Expert Roster on Travel Health)
- o 'Q fever as an occupational disease': Prof. John Freaan (Editor-in-Chief of *Tropical Medicine and Infectious Disease*; National Health Laboratory Service; University of the Witwatersrand and University of Pretoria)
- o 'COVID-19: strategies for healthier and safer workplaces in non-healthcare settings': Dr Itumeleng Ntamatama (UCT)

Several SASOM members participated in the planning and organisation of ICOH's 34th International Congress on Occupational Health (ICOH2024) in Marrakesh, Morocco, from 28 April to 3 May 2024. As an ICOH affiliate member, SASOM invited members in good standing, whose abstract submissions had been accepted for the ICOH2024 Congress, to apply for partial funding

to attend the congress; four members were sponsored. SASOM was instrumental in marketing the ICOH2024 Congress, by providing updates through the SASOM pages of *Occupational Health Southern Africa* during the two-year interval between the ICOH2022 Digital Congress and the ICOH2024 Congress, and a [report on the congress](#). The first announcement of the 35th International Congress on Occupational Health (ICOH2027) in Mumbai, India, from 14 to 19 February 2027, was published on 4 March 2025 and can be accessed at: www.icohweb.org/site/multimedia/events/pdf/ICOH%202027%20FIRST%20ANNOUNCEMENT_hyperlinked.pdf

Claudina Nogueira (ICOH National Secretary (NS) for South Africa and SASOM ExCo member) collaborated with three other ICOH NSs from the 'global South' – Argentina, Colombia, and Peru – to offer a webinar titled, 'Occupational health and safety in mining: an overview of management, legislation, and current challenges in low- and middle-income countries (LMICs)'. Dr Diana Cuervo, NS for Colombia, is thanked for personally covering the costs of the recordings and the translations of the presentation transcripts.

Webinars hosted by SASOM in 2024

SASOM held a National Roadshow in three sessions, on 3 July (hybrid format in Gqeberha), 14 August (virtual format), and 16 October 2024 (hybrid format in Umhlanga, Durban). The broad theme was *Occupational medicine is a highly specific discipline in workers' health*. The three sessions had their own sub-themes, viz. *Occupational medicine as a peer-based discipline*, *Peer-review networking of OMPs*, and *Duties and responsibilities of OMPs*. The Roadshow, which was accredited for CPD points by the SAMA, was organised in response to the many concerns raised by OMPs regarding service provision by non-OMPs, convoluted and illegal business settings, and unethical occupational medicine.

The SASOM Western Cape Chapter remained active throughout 2024 and hosted several webinars:

- o 26 March – SASOM/MEDICHEM session: tackling chemical hazards in the workplace
- o 14 May – Neurodiversity in the workplace: addressing the shape-shifting needs of neurodiverse adults
- o 18 June – Aviation and maritime medicine: recent developments
- o 6 August – Fitness to work: an update
- o 17 September – i) Groote Schuur Hospital occupational medicine clinic case reviews, and ii) Incapacity management within a large organisation
- o 27 October – Occupational medicine in practice: reflections by industry experts

SASOM supported the first (virtual) South African National Symposium on Occupational Heat Exposure, organised by the Discipline of Occupational and Environmental Health, University of KwaZulu-Natal, Durban. The two days (25–26 November 2024) of stimulating discourse on occupational heat exposure convened international experts, senior government policymakers, researchers, and occupational health professionals to address a most pressing and emerging global issue in the workplace.

AROUND THE WORLD IN OCCUPATIONAL HEALTH

WHWB is the newest ICOH affiliate member

Workplace Health Without Borders (WHWB), an international non-profit volunteer organisation, became an ICOH affiliate member in February 2025. WHWB (International) is



a registered Canadian charity with three independent branches in the United States (WHWB-US), United Kingdom (WHWB-UK), and Australia (WHWB-Australia); the WHWB-Africa branch is under development. WHWB's values and objectives are aligned with those of ICOH, and there are many synergies in terms of promoting and enabling good practices and expertise in global occupational health.

Founded by occupational hygienists in 2011, WHWB is a global network of concerned occupational health professionals who volunteer to advance WHWB's mission, viz. 'To prevent work-related disease and injury around the world through shared expertise, knowledge, and skills'. Membership is open to all those who share WHWB's goals and vision – 'Imagine a world where workers, their families and communities, do not get ill because of their work'. WHWB's primary focus is the health and safety of workers who have limited access to occupational health and hygiene expertise, whether in LMICs or richer nations.

To enable its mandates and activities, WHWB has various standing committees and working groups. The Healthcare and Heat Stress Working Groups are more recent additions to WHWB.

Examples of WHWB work include i) conducting occupational hygiene training sessions in collaboration with agencies and institutions in host countries, using training materials developed by the Occupational Hygiene Training Association (OHTA) and delivered by professional occupational hygienists and occupational health professionals (WHWB is an accredited OHTA training provider); ii) conducting research to evaluate worker exposures to hazardous agents such as silica, asbestos, and chemicals; iii) assessing the health hazards of workers involved in waste handling and recycling; iv) connecting occupational health professionals around the world with experienced professionals, through a mentoring programme; v) advocacy, professional, and public awareness; and vi) capacity-building in occupational health and hygiene.

WHWB members organise, sponsor, and speak at seminars and other professional events, present to universities and schools, and are available to the media to discuss global occupational health and safety. During the Pandemic, WHWB held 22 webinars on topics related to COVID-19 and infection control and offered a webinar series on asbestos and silica exposure, including that from engineered stone countertops. Other topics were the impact of climate change on workers, innovative strategies for reaching rural workers, control-banding tools, and lessons learned from epidemics. All [webinar recordings](#) are available on the WHWB YouTube channel. A recent initiative undertaken by WHWB is the coordination of the 'Global Occupational Safety and Health (GOSH) Coalition', which emerged from the ICOH2024 Congress. The driving force was the conviction that occupational health and safety do not receive the global focus they deserve, considering their impact on global health. This is demonstrated by the almost three million work-related fatalities each year, over and above the 374 million non-fatal workplace injuries and diseases reported worldwide. GOSH issued a 'Call to Action' for occupational health and safety to be elevated on the global agenda, including several specific measures. To date, 18 organisations have participated in GOSH (including WHWB and ICOH).

See the [WHWB website](#) for more information, and the [2024 WHWB Progress Report](#).

The 52nd Annual MEDICHEM Conference 2025

MEDICHEM, another ICOH affiliate member, is a global organisation dedicated to occupational and environmental health within the chemical industry. The 52nd Annual MEDICHEM Conference was held

at the Burjeel Hospital in Abu Dhabi, United Arab Emirates (UAE), on 17 and 18 February 2025. Themed *Sustainability and Environmental, Social and Governance (ESG) considerations in the chemical sector*, the conference convened industry experts and occupational and environmental health professionals to share knowledge, expertise, and advancements in chemical regulations, safety protocols, and best practices. Delegates and presenters joined to elevate industry standards, promote innovation, and contribute to the creation of a safer, more sustainable, and efficient industry.

Although the conference was held onsite in Abu Dhabi, several of the invited speakers presented virtually. Invited presentations are listed below:

- o Bassel Elshaboury (Head of Marketing for Henkel Consumer Brands across the regions of Latin America, Middle East and North Africa, Central Asia, and Australia and New Zealand) presented 'Sustainability in the chemical industry'.
- o Dr Tee Guidotti (consultant in health, safety, environment, sustainability, and occupational health and medicine, USA) presented (virtually) 'New challenges to sustainability in the chemical sector'.
- o Dr Manijeh Berenji (Chief of Occupational Health at VA Long Beach Healthcare System and Lead of Academic and Community Partnerships at the University of California Center for Climate, Health and Equity, USA) presented (virtually) 'Innovations in chemical risk management: harnessing the power of health informatics'.
- o Dr Ade Mutiara (occupational health and medicine specialist and Secretary of the ICOH Scientific Committee on Occupational Medicine, Indonesia) presented 'Occupational health, technology, and ESG in the chemical industry'.
- o Dr Sunisa Chaiklieng (professor of occupational health and safety and Head of the Department of Occupational Safety and Environmental Health, Faculty of Public Health, Khon Kaen University, Thailand) presented 'Automotive gasoline: history

- and issues of chemical exposure and risk assessment for occupational health surveillance'.
- o Dr Aida Lucia Fajardo Montiel (chemical engineer and research professor in engineering and technology, University of Guadalajara, Mexico) presented (virtually) 'Assisting small- and medium-sized enterprises (SMEs) by providing essential information on occupational health in the context of ESG: insights from Mexico and Latin America'.
- o Nanisuria Aris (certified occupational hygienist and Lead of Industrial Hygiene in a major oil and gas company, Qatar) presented 'Occupational heat stress: reducing health risks through simple interventions in high-exposure environments using the ESG strategy of sustainability'.
- o Prof. Janvier Gasana (professor of occupational and environmental medicine (OEM), Founder/Chair of Global Applied Prevention Center Inc. (GAPCI), USA, and current Chair of MEDICHEM's Education Development Training) presented 'Global lead exposure among children and the general population'.
- o Prof. Marianne Cloeren (associate professor in the Division of Occupational and Environmental Medicine, Department of Medicine, University of Maryland School of Medicine, USA) presented (virtually) 'Leveraging OEM expertise to prepare organisations for the ESG challenges presented by climate change'.
- o Dr Kaveri Rangappa (medical professional, public health and AI specialist advancing innovative solutions in digital modelling, India) presented (virtually) a documentary titled *The legacy of toxic waste unfolds: unveiling the chemical crisis in the Middle East*.
- o Dr Sami Béq (physician executive with extensive expertise in healthcare, specialising in preventive medicine, population health, and digital health, USA) presented (virtually) 'Fostering lifestyle at work: a catalyst for occupational health and ESG in the chemical industry'.



52nd MEDICHEM Annual Conference, Abu Dhabi, presenters and organisers

L to R: Dr Ashish Mishra (Chief Health and Wellbeing Officer, Hindustan Unilever Limited (HUL), ICOH and MEDICHEM Board member, Vice President of the Indian Association of Occupational Health (IAOH), India); Dr Ade Mutiara (Secretary of the ICOH Scientific Committee on Occupational Medicine, Indonesia); Dr Alex Govender (SASOM member, South Africa); Prof. Ibrahim Bani (Yale University, USA, Sudan and UAE); Prof. Janvier Gasana (Founder/Chair of Global Applied Prevention Center Inc. (GAPCI), and Chair of MEDICHEM's Education Development Training, USA); Dr Nahyan Helal (consultant specialist in occupational medicine and occupational health, UAE); Dr Samah Nur (Sudanese American who manages a clinic in UAE); Prof. Sunisa Chaiklieng (Faculty of Public Health, Khon Kaen University, Thailand); and Fahad Al Saiqal (Abu Dhabi National Oil Company – ADNOC)

Photograph: Courtesy of Prof. Janvier Gasana (USA)



The Sheikh Zayed Grand Mosque

The largest place of worship in the UAE, a centre for learning about Islam and culture in Abu Dhabi, and one of the country's most important tourist attractions. L to R: Dr Basheer Ahamed Taj (Abu Dhabi National Oil Company – ADNOC); Dr Ade Mutiara (Secretary of the ICOH Scientific Committee on Occupational Medicine, Indonesia); Dr Alex Govender (SASOM member, South Africa); and Prof. Sunisa Chaiklieng (Faculty of Public Health, Khon Kaen University, Thailand)

Photograph: Dr Ade Mutiara (Indonesia)

- o Dr Ashish Mishra (Chief Health and Wellbeing Officer, Hindustan Unilever Limited (HUL), ICOH and MEDICHEM Board member, Vice President of the Indian Association of Occupational Health (IAOH), India) presented 'MEDICHEM and the ICOH Scientific Committee on Occupational Health in the Chemical Industry', and moderated a panel titled 'Multidisciplinary approach to ESG in the chemical sector'.
- o Claudina Nogueira (occupational health consultant and medical biochemist, ICOH National Secretary for South Africa, President of WHWB, and SASOM ExCo member, South Africa) presented (virtually) 'Occupational health in the global context of sustainability – ICOH's past and present role'.

ICOH SC AP and IOSH host a joint webinar on asbestos and silica hazards

The ICOH Scientific Committee on Accident Prevention (SC AP), chaired by Dr Karen Michell, and the Construction Group of the Institute of Occupational Safety and Health (IOSH, UK), vice-chaired by Dr Shaun Lundy, hosted a webinar on 30 January 2025, titled 'Tackling asbestos and silica hazards: lessons for occupational safety and health professionals'. The objectives of the webinar were i) to explore the health consequences of asbestos and

silica exposure, including asbestosis, silicosis, and mesothelioma, ii) to gain insights into the UK asbestos ban, Australia's engineered stone ban, and their implications for workplace safety, iii) to recognise environments and practices that pose risks for high-silica and asbestos exposure, and iv) to discuss the critical role of occupational health and safety professionals in preventing exposure, managing risks, and protecting workers' health through practical measures and best practices. Dr Kevin Hedges (WHWB Board member and Occupational Health Clinics for Ontario Workers Inc. (OHCOW), Canada) was invited to provide a background to asbestos and silica use, to set the scene on global aspects of asbestos and silica, and to participate in a discussion panel with Dr Shaun Lundy, moderated by Dr Karen Michell. Close to 900 participants attended the webinar from around the globe, mostly from the UK (493), followed by South Africa (81), Ireland (37), the UAE (33), the USA (31), and Saudi Arabia (25). The recording of the webinar is available at: <https://www.youtube.com/watch?v=c0q4XITUeF8>.

IMPORTANT UPDATE FROM THE SASOM NATIONAL OFFICE: ADDRESSING RECENT TECHNICAL CHALLENGES AND SERVICE IMPROVEMENT

SASOM is appreciative of its members' patience and continued support as it navigates operational challenges that have recently impacted its response times. At the start of the year, SASOM experienced technical disruptions following multiple hacking attempts and a Microsoft upgrade, which affected e-mail systems. As part of the resolution, SASOM introduced a new correspondence e-mail address, office@sasom.org, which was communicated to members via e-mail, WhatsApp, and the website on 6 February 2025.

While the website remained fully operational – allowing members to sign up, log in to the member zone, renew their membership, print certificates, and access all SASOM resources – some members made direct bank payments without following the online renewal process. Since financial reconciliations are not conducted daily, this resulted in a delay in granting platform and resource access to said members. Coupled with the existing backlog, this caused concern among members.

SASOM is taking several measures to improve its service delivery and ensure a smoother experience for all members, including:

- o Automation and process efficiency – members are encouraged to complete renewals via the online platform to ensure faster processing and minimise the administrative burden (www.sasom.org/membership)
- o Enhanced communication – more effective interaction channels are being streamlined to provide faster updates on service disruptions
- o Process optimisation – SASOM is refining its financial reconciliation and membership verification procedures to reduce delays
- o Improved system stability – the recent e-mail system changes aim to enhance reliability and reduce technical disruptions

The online process maintains efficiency, ensures timely access to services, and minimises administrative costs and fees. Please note that an additional administrative fee of R75 will be charged for any manual renewals of SASOM membership.

SASOM deeply values its members' ongoing support and trust in the Society, and appreciates their patience and understanding as it continues to streamline and improve its operations. [👉](#)

SAIOH news

The Southern African Institute for Occupational Hygiene (SAIOH) is dedicated to its members and the advancement of the occupational hygiene profession. As part of our commitment, we regularly share updates and developments with our members. SAIOH thrives through your active involvement and ethical contributions in the field of occupational hygiene. To further strengthen our community, we encourage feedback and input on the matters discussed in this edition of the Journal.

SAIOH PRESIDENT'S ADDRESS

Karen du Preez: SAIOH President
e-mail: president@saioh.co.za



Karen du Preez
Photograph: courtesy of SAIOH

The legacy of SAIOH

The Southern African Institute for Occupational Hygiene is a professional body recognised by the South African Qualifications Authority (SAQA) and the International Occupational Hygiene Association (IOHA), with approximately 1 000 members. The management team and Council members who serve SAIOH volunteer their time and expertise to contribute to the vision and mission of SAIOH. What motivates someone with a demanding day job to take up a position that places

another claim on their already limited time? The answer is 'legacy', which can be defined as the long-lasting impact of specific past events or actions. The actions and commitment of past and present leaders of SAIOH have contributed to the growth of SAIOH and paved the way for incoming members to excel. Standing at the beginning of my tenure as SAIOH President, I acknowledge these past actions and contributions. I know the road has been travelled by great names in occupational hygiene, and following in their footsteps is a privilege and an honour.

My commitment to SAIOH members is to build on the great example set by past presidents, who served the occupational hygiene profession and SAIOH's best interests with passion and dedication. Together with the Council and management team, my focus will be on identifying and implementing projects that align with SAIOH's strategic objectives, to enable our members to practise sound and ethical occupational hygiene that ensures safer and healthier workplaces. My invitation to our members is to utilise the opportunities that SAIOH provides you to grow professionally, and excel as occupational hygiene professionals in southern Africa and beyond.

NATIONAL COUNCIL FEEDBACK

Karen du Preez: SAIOH President
e-mail: president@saioh.co.za
Deon Jansen van Vuuren: SAIOH General Manager
e-mail: deon.jvvuuren@gmail.com

The SAIOH Management Board has retained the momentum of 2024 with various meetings and collaborative discussions. The first Management Board meeting took place on 3 February 2025, followed by the SAIOH strategic session and first Council meeting on 26 and 27 February 2025, respectively.

Other interactions include:

- September and October 2024: Impromptu Zoom and MS Teams meetings were held with the conference organising and planning committee.
- 16 October 2024: The Department of Employment and Labour held a successful Occupational Health and Safety (OHS) Strategy Conference and the signing of the OHS Accord at Emperors Palace.
- November 2024, January and February 2025: Information about several occupational hygiene-related webinars was circulated to SAIOH members.
- 21 November 2024: SAIOH Professional Certification Committee (PCC) Chief Examiner represented SAIOH at the South African Society of Occupational Health Nursing Practitioners (SASOHN) Annual Conference in White River, Mpumalanga.
- 25 and 26 November 2024: SAIOH participated in the Occupational Heat Exposure Symposium organised by the University of KwaZulu-Natal.
- 27 November 2024: SAIOH participated in the *Occupational Health Southern Africa* Editorial Board meeting.
- 29 November 2024: SAIOH participated in the Mine Health and Safety Council's heat tolerance screening workshop.
- 29 November 2024: SAIOH attended the Occupational Hygiene Approved Inspection Authority (OH AIA) Association's meetings.
- Naadiya Mundy, representing SAIOH management, attended ongoing meetings with Workplace Health Without Borders (WHWB), the International Occupational Hygiene Association (IOHA), and other occupational hygiene organisations to discuss and implement strategies to address global threats to occupational hygiene. These threats have been exacerbated by the [US Congress' call to abolish their Occupational Safety and Health \(OSH\) Act](#).

SAIOH strategic plan

The current SAIOH strategic (5-year) plan is steered by Jaco Pieterse. This is discussed, and progress is evaluated at the monthly SAIOH Management Board and quarterly Council meetings.

Ethics

NGO Law is currently conducting a review of the SAIOH Ethics Policy and Procedures. We have received their initial feedback, along with additional questions for SAIOH regarding specific procedures. The

review of our procedures is urgent as it is important for the Ethics Committee to begin with implementation, and it is also a crucial item in the SAIOH strategy (#3).

Note: From 1 January 2023, all SAIOH-certified members are required to provide proof that they have completed an acceptable occupational hygiene ethics training course. A one-year phase-in period was allowed during 2022. Terry McDonald, of the British Occupational Hygiene Society (BOHS), presented Professional Development Courses (PDCs) during the 2021 and 2022 Annual Conferences and again on 25 July 2024. These online seminars are available to purchase.

SAIOH branch activities

The Western Cape and Gauteng branches each held successful meetings in November 2024. In Gauteng, the high turnout overwhelmed SAIOH's Zoom capacity, leading to technical difficulties. The Western Cape branch (in-person) held an innovative quiz on all things related to SAIOH. Both branches are preparing for their first meetings of 2025. Members are reminded to stay alert for our Mailchimp notifications.

Unfortunately, the Central (Free State), Northern Cape, and Mpumalanga branches remain inactive.

SAIOH 2025 Annual Scientific Conference

The conference dates have been confirmed as 20–23 October 2025. Members are requested to save the date and keep a lookout for abstract submission dates.

The 2025 SAIOH Conference will be held on 20–23 October 2025 at the Raddison Blu Hotel, Umhlanga, Durban and will be hosted by the KwaZulu-Natal branch of SAIOH.

Occupational Hygiene in Practice – Navigating New Workplace Challenges

SAIOH ANNUAL CONFERENCE 2025
DURBAN, SOUTH AFRICA



International Occupational Hygiene Association Board, the National Accreditation Recognition Committee, and Occupational Hygiene Training Association feedback

The Occupational Hygiene Training Association (OHTA) and the IOHA continue to publish their newsletters. Links are e-mailed to all SAIOH members and published on the SAIOH website: www.saioh.co.za

The OHTA *Global Link* and IOHA *Global Exposure Manager* (GEM) newsletters are posted on the SAIOH website and sent to all members via Mailchimp as soon as they become available.

Deon Jansen van Vuuren's representation of SAIOH on the IOHA Board and the National Accreditation Recognition Committee (NARC) concluded on 31 December 2024. The PCC Exco has nominated Corlia Peens as the new IOHA Board Director and member of the NARC, effective 1 January 2025.

Several IOHA and NARC meetings took place in October, November, and December 2024, including an IOHA Governance Meeting on 19 October 2024, where the draft IOHA strategy document for 2026–2030 was considered.

Excellent news

SAIOH was informed by IOHA, just before the Botswana Conference in October 2024, that the NARC renewed the SAIOH PCC's system for another five years.

SAIOH Technical Committee feedback

The SAIOH Technical Committee's research on welding fumes, encompassing both measurement and analysis, was spearheaded by Dr Ivan Niranjana, the SAIOH Technical Portfolio Coordinator. A sub-committee, comprised of SAIOH and OH AIA Association members, has already convened to develop a technical and position paper on this topic. The final position paper is expected in 2025.

Our second Technical Committee has started developing technical procedures and a SAIOH position paper on heat stress management. Unfortunately, the death of Schu Schutte was a setback. We have since commenced co-ordination with the Council for Scientific and Industrial Research (CSIR) and Dr Johan Kielblock to conduct the necessary research. The deadline for this is mid-2025. The focus remains two-fold: to develop a technical paper, and to enable SAIOH to provide comprehensive and relevant proposals to strengthen the recently launched Physical Agents Regulations (PAR), formerly known as the Environmental Regulations for Workplaces.

Wessel van Wyk, the previous technical co-ordinator, is still involved in finalising a position paper on real-time monitoring. Once this document receives approval from the SAIOH PCC Exco's sub-committee and Technical Committee, it will be circulated to all SAIOH members and stakeholders.

Communications

SAIOH publishes its newsletter/Presidents' page in two electronic media formats, namely *Occupational Health Southern Africa*, and the *African OS&H magazine* (A-OS&H).

Numerous interactive communications were accomplished in the final months of 2024 and the first two months of 2025:

- November 2024: the then SAIOH Vice President, Karen du Preez, gave a presentation on SAIOH at the Tshwane University of Technology (TUT) for their 3rd-year students.
- February 2025: Deon Jansen van Vuuren, representing SAIOH, spoke about heat stress to the Diploma in Occupational Health students at the University of the Witwatersrand School of Public Health.
- SAIOH communicates daily with its stakeholders via e-mail, Mailchimp notifications, phone calls, and virtual meetings. These

communications cover important news, technical information, legislation changes, new standards, occupational hygiene job opportunities, occupational hygiene products and services, courses, and webinars on occupational hygiene, health, and occupational and environmental safety.

- Several communications were held with the American Industrial Hygiene Association (AIHA), regarding the threat to occupational health and safety in the USA.

Several e-mail notifications on occupational hygiene and health webinars and short courses were distributed towards the end of 2024 for IOHA, WHWB, South African Society of Occupational Medicine (SASOM) webinars, the SASOHN Annual Conference, and Safety-First’s Fire Conference.

Several online events and webinars were recently hosted by our stakeholders and attended by SAIOH management, members, and staff, including:

- 30 January 2025: WHWB webinar on asbestos and silica risks
- 12 February 2025: University of Johannesburg Occupational Health Department’s lecture on ‘The impact of new technologies on occupational health’

FROM THE PROFESSIONAL CERTIFICATION COMMITTEE

Lee Doolan: SAIOH PCC administrator
e-mail: lee@saioh.co.za

Deon Jansen van Vuuren: SAIOH General Manager
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Ivan Niranjana: PCC Chairperson
e-mail: ivann@dut.ac.za

Professional Certification Committee (PCC) members are SAIOH-registered occupational hygienists (ROHs) with at least five years’ experience at this level, volunteering their time to ensure that the certification processes are in line with South African requirements and international occupational hygiene practices. The PCC processes and procedures are documented in Chapter 2 of the SAIOH Quality Manual, and assessors undergo regular instruction and training through meetings and webinars.

The PCC is supported by highly skilled and dedicated administrative staff, who adhere to strict professional conduct to provide the best possible service to all members. The PCC administrators, in handling communication with members regarding the sensitive topic of assessment processes and outcomes, occasionally have challenging conversations with members. We urge all members to treat staff and volunteers with respect and dignity at all times. SAIOH regularly provides members with updates on rules, guides, ethics, compliance, and more. We value each member and strive to maintain a community where everyone feels respected and valued.

Certification assessments

A summary of results for the assessments that took place from mid-March to December 2024 is provided in Table 1.

PCC news

- The PCC Exco nominated a new Chief Examiner, Dr Goitseman Keretsetse.
- The PCC is developing an electronic written assessment on the MS Excel platform to replace the current learning management system (LMS) electronic assessment system. This task is proving to be more challenging than anticipated, especially as we aim to convert all certification assessments to multiple-choice format. This work is ongoing.
- The PCC’s written assessments will continue to be conducted in hard copy format until a new system is finalised and implemented.

PCC activities

- The subcommittee responsible for revising the skill set/self-assessment tool meets biweekly. They have completed work on the 17 skill sets and are developing scenario questions aligned with the skill set module requirements for use in oral assessments. PCC members convened on 14 February 2025 for the first of a series of training workshops.
- The PCC ExCo held an official handover session on 24 January 2025, during which the previous Chair, Vice Chair, and Chief Examiner officially transferred their duties to the new PCC management team. The new team comprises Dr Ivan Niranjana as Chair, Andre van Rooyen as Vice Chair, and Dr Goitseman Keretsetse as Chief Examiner.

Table 1. SAIOH PCC certification assessment results for 2024

Certification category	Written assessments				Oral assessments			
	Assessed	Passed	Failed	Pass rate	Assessed	Passed	Failed	Pass rate
	n	n	n	%	n	n	n	%
OH assistant	245	240	5	98.0	0	0	0	-
OH technologist	84	70	14	83.3	101	58	43	57.4
Occupational hygienist	41	22	19	53.7	34	18	16	52.9
Total	370	332	38	89.7	135	76	59	56.3

Table 2. SAIOH PCC written and oral assessment dates and deadlines, 2025

Assessment type	Deadline for applications	Deadline for assessment evaluations and payment	Assessment date
Written	12 January	14 February	14 March
Oral	-	-	Week of 11 April
Written	25 April	30 May	27 June
Oral	-	-	Week of 25 July
Written	1 August	5 September	3 October
Oral	-	-	Week of 14 November

We thank the previous incumbents, Corlia Peens (Chair) and Maryke van der Walt (Chief Examiner), for their excellent service. The PCC assessment dates for 2025 are in Table 2.

Occupational Hygiene Skills Forum

The SAIOH Occupational Hygiene Skills Forum (OHSF) was established to oversee all aspects related to the recognition of occupational hygiene training materials, such as asbestos training courses, and occupational hygiene training short course providers and institutions. The forum is also responsible for the development and management of assessment and examination systems.

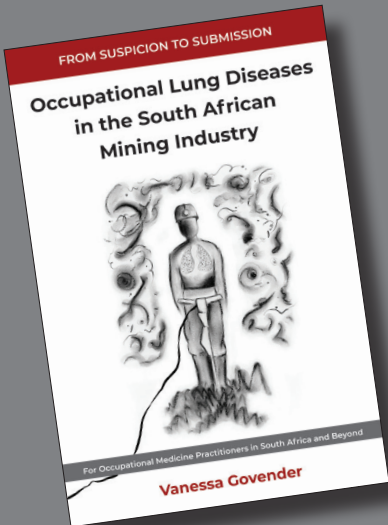
The OHSF took part in the OHTA Approved Training Provider forum meetings in 2024/2025. The OHSF is making good, albeit slow, progress with the accreditation of tertiary institutions and is in the final stages of evaluating the Cape Peninsula University of Technology’s (CPUT) occupational health qualification. Qualifications offered by North-West University (NWU) and the Tshwane University of Technology (TUT) are already recognised. Several universities,

including those from Botswana and Uganda, are scheduled to meet in early 2025 to discuss their curricula. All tertiary institutions that offer occupational hygiene qualifications are encouraged to contact the PCC Administrator, Lee Doolan, for information regarding application for recognition: lee@saioh.co.za


Details of recognised training providers and recognised qualifications are available on the SAIOH website (www.saioh.co.za). This makes it easier for students and certification candidates to select suitable occupational hygiene training programmes that meet SAIOH and international certification requirements.


Dr Hennie van der Westhuizen contributed to the OHSF by developing draft questions based on an article previously published in *Occupational Health Southern Africa*, to pilot an additional Continual Professional Development (CPD) activity. This initiative will allow members to earn CPD points and promote more active involvement in the Journal. SAIOH is preparing to launch this activity during the second quarter of 2025 and, thereafter, at least biannually, based on interest and participation of members. [↗](#)

NEW BOOK



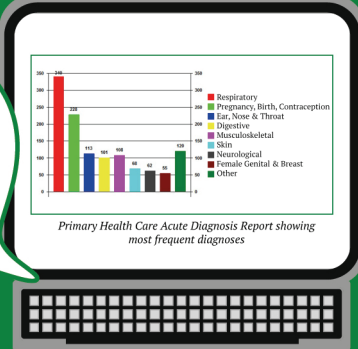
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Leading in a world of diversity, equity, and inclusion: creating a sense of belonging

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INTRODUCTION

Diversity, equity, and inclusion (DEI) is not only a matter of compliance, but is imperative for organisational success, good corporate governance, and sustainability of business. In the context of a dynamic and globalised world, organisations have come to embrace diversity and foster inclusive culture, not only as an ethical and moral essential, but also to yield tangible and significant benefits.¹ Employees who are engaged and feel valued are more likely to be committed, dedicated, and motivated to give their best at the workplace² (see Figure 1). In an attempt to empower historically disadvantaged persons, South Africa enacted legislation in the first decade of democracy, such as the Employment Equity Act No. 55 of 1998, the Skills Development Act No. 37 of 1998, and the Promotion of Equality and Prevention of Unfair Discrimination Act No. 4 of 2000, amongst others. The measurement of the efficacy of these pieces of legislations has proven to be complex.³ Reflecting on the progress made, the figures make the task seem impossible. However, learning from previous successful projects, and celebrating small gains, could be the impetus that is required for organisations to pursue the noble idea of DEI. Extensive research and advocacy in the international context have underscored the pivotal role of DEI in the modern workplace.⁴ Combining employees from diverse backgrounds, thereby creating an inclusive culture, allows the organisation to receive fresh

perspectives about complex problem-solving, sparking creativity and driving needed innovation within the organisation.⁵

The purpose of this reflective article is to remind us of our context and reasons for believing that DEI is imperative for the success of organisations, and to share good stories.

INTER-GENERATIONAL WORKFORCE PROFILE IN A WORLD OF DIVERSITY, EQUITY, AND INCLUSION

For the first time in history, there are four generations in the workplace as people are living longer and working into their old age. The strategies used to manage different generational groups working in an organisation are expected to focus on reducing the differences between them, whilst maintaining their diversity. Choosing the most effective strategy starts with knowing and understanding the characteristics of each generation⁷ (see Table 1).

The generational mix poses a major challenge to leaders in creating an inclusive culture and a sense of belonging for all workers. It is, therefore, important that organisations adopt nuanced and tailored strategies that acknowledge and accommodate intersecting identities of the workforce, to enhance psycho-safety within teams and aid employees to be authentic.¹ A one-size-fits-all approach should no longer be the order of the day in the workplace. Each generation, by and large, has its own unique world view and is motivated by different factors.

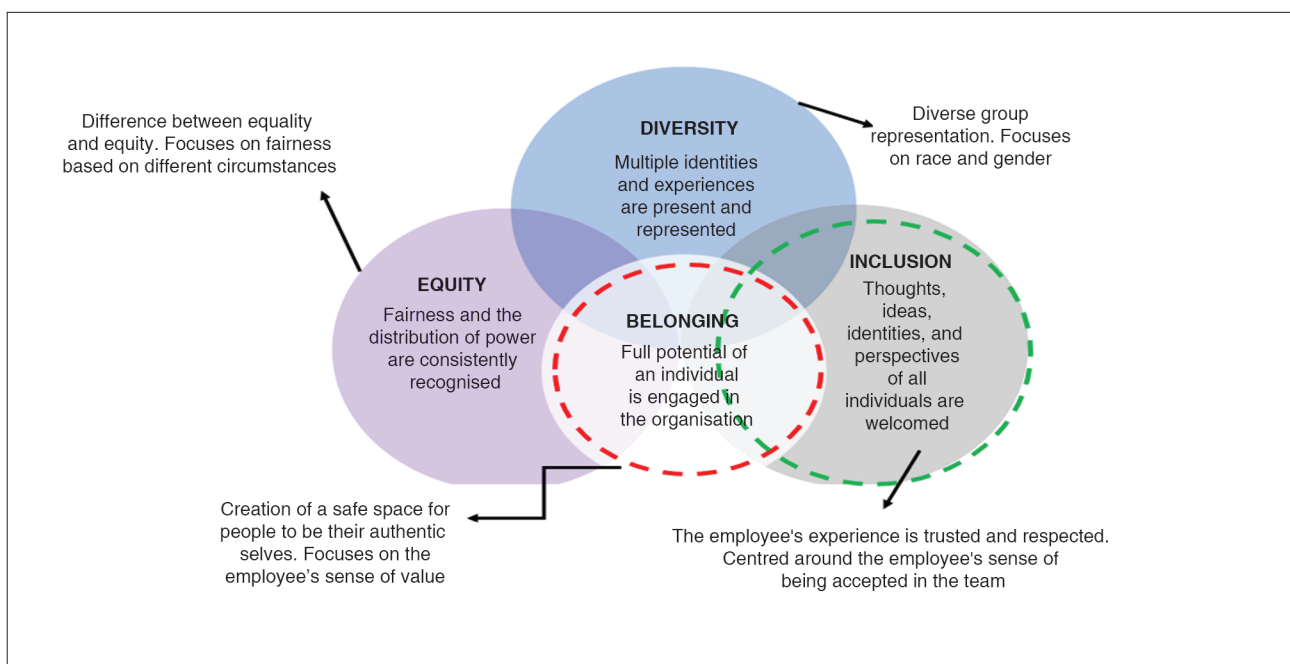


Figure 1. Diversity, equity, inclusion, and belonging

Adapted from Burnette, 2019⁶



Table 1. Traits of different generations

<p>Boomers Motivated by: positive attitude, economic prosperity, navigating complex environment Worldview: strong work ethic, resilience, no-nonsense attitude Career: organisational career defined by the employee</p> <p>Gen X Motivated by: independence, clearly formulated expectations, career development, short-term results Worldview: autonomous, pragmatic, lifelong learning, opportunities to enjoy life Career: loyal to the profession, not the employer</p> <p>Millennials Motivated by: responsibility, the quality of their manager, unique work experiences Worldview: seek challenge, development, growth, fun, work-life balance Career: work with the organisation, not for them</p> <p>Gen Z Motivated by: diversity, personalisation, individuality, creativity, innovation Worldview: self-identity, value independence and individuality, exploration, new technologies Career: want to enjoy themselves in the workplace and prove themselves</p> <p>It is, therefore, imperative for leaders to treat work team members as individuals, if they are to build high-performing teams and create sustainable organisations.</p>

Source: *Managing different generations in the workplace*⁷

Table 2. Leadership and female representation at Harmony Gold Mining Company

	Target %	HDPs ¹		Female HDPs		
		Actual FY24	Actual FY23	Target %	Actual FY24	Actual FY23
Board ²	50	67	67	20	25	25
Executive management	50	57	60	20	24	25
Senior management	60	62	58	25	27	27
Middle management	60	63	60	25	29	28
Junior management	70	72	70	30	21	21
Core and critical skills	60	74	73	n/a	n/a	n/a
People living with disabilities	1.5	0.3	0.3	n/a	n/a	n/a

¹ HDPs include women and exclude white males and foreign nationals

² Harmony's three executive directors are included as board members

FY: financial year, HDPs: historically disadvantaged persons

Source: *ESG Report 2024*⁸

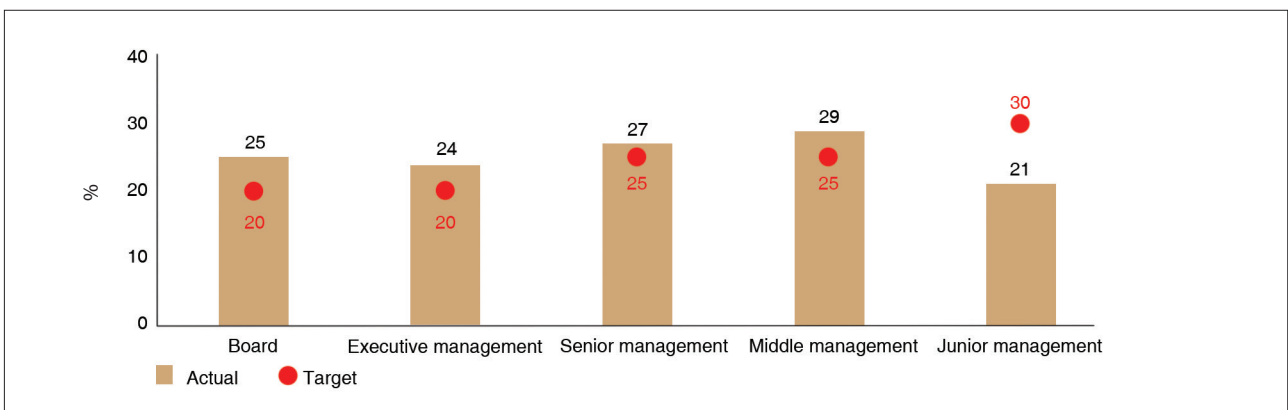


Figure 2. Women in the Harmony Gold Mining Company workforce

Source: *ESG Report 2024*⁸

CELEBRATING SMALL GAINS

At Harmony Gold Mining Company, we firmly believe in mining with purpose, and building a sustainable future, where mining is not only about extracting resources but also about empowering communities, advancing environmental stewardship, and driving inclusive economic growth.

Harmony is intentional and strives to maintain and enhance DEI programmes across all its operations. We recognise that mining is still a predominately male industry, and we foster an inclusive culture through development of gender-sensitive policies. We aim to create a level playing field for all employees, with an equity eye on women with respect to skills development and representation

across all (including technical) levels (see Table 2 and Figure 2). We also focus on creating a conducive and safe environment for women, so that they want to work for Harmony. We are intentional about understanding gender issues across all our operations, with the aim of continuously improving the everyday working experiences of our employees, particularly women. To support this, we conducted a survey about gender-based bias and workplace bullying, including sexual harassment. The findings have been widely communicated to all our employees, stakeholders, and executives up to Board levels, where implementation plans are monitored.

Harmony has been recognised for its commitment to gender equality, as evidenced by its inclusion, for the fifth consecutive year, in the Bloomberg Gender Equality Index. The Index tracks the performance of public companies committed to supporting gender equality through policy development, representation, and transparency. In 2024, Harmony was honoured for its efforts in striving for DEI, and was awarded the overall winner in the Standard Bank Top Women Awards, in the category of Standard Bank Top Women Business in Construction, Infrastructure and Mining 2024.

The story of Khethiwe Mothobi, the managing director of Tailor Made Trading and Projects bears testament to this. The company, which was founded by Khethiwe in 2017, is based in Welkom, Matjhabeng Municipality. It is the only black women- and youth-owned company in South Africa that specialises in demolition, rehabilitation, and shaft filling.

Khethiwe, as the founder and managing director of Tailor Made, shared her success story with the Harmony family. She partnered with Harmony Enterprise and Supplier Development (ESD) for procurement readiness, gap analyses, and pre-technical assessment in a mentorship programme. In 2020, her company was awarded its first contract; in 2021, she received a three-year contract to supply bulk cement; in 2022, she was awarded a five-year contract to run the Harmony canteen at the company's mine worker hostels; and, in 2023, she was awarded additional rehabilitation contracts. In 2024, Khethiwe was featured in the 19th Edition of Standard Bank Top Women.⁹

Khethiwe was asked: "How has Harmony's ESD and mentorship impacted you and your business?" She responded: "Harmony was a turning point to me. The mentorship sessions from ESD equipped me in ways no other school of life could have. I learned about managing finances, human resources practices, and importance of having systems, procedures, and policies in the workplace. My workforce grew by 50% just from the investment Harmony made and contributed to Tailor Made. My finance got a massive boost as well, but most importantly, we managed to grow our service offering not just vertically anymore; we are now horizontal as well. I can never thank Harmony enough for what they did and continue to do for me and Tailor Made."

This is one of many beautiful stories of meaningful partnership that gives Harmony, as a company, a reason to continue to empower women in the interests of creating an inclusive economy.

IMPORTANCE OF DEI IN THE WORKPLACE

- Improves bias awareness – avoiding unconscious biases in decision-making
- Promotes a healthy and conducive working environment for all
- Increases the talent pool (attracting Millennials and Gen Z employees)
- Boosts employee engagement (creating successful teams)
- Improves decision-making (multiple perspectives)
- Improves performance (diverse companies were reported to have up to 36% more profitability) (Hunt et al., 2015)¹⁰

A Deloitte University study, published in 2020, found that DEI and belonging offers a company a 46% competitive advantage in the industry, 40% better and more accurate decision-making, 34% increase in financial performance, improved retention rates, and more cutting-edge innovation.¹¹

CONCLUSION

There has been progress in promoting DEI, but challenges remain. With commitment from leadership, companies can employ various strategies to enhance DEI within the workplace. Companies that prioritise DEI will enjoy significant benefits, including an abundance of innovation and creativity, increase in employee engagement, improvement in retention rates, and improved financial performance. Implementation of gender-sensitive and anti-discriminatory policies improves organisational ability to promote DEI.

Organisations that show commitment to DEI are recognised and honoured by global societies/bodies that promote DEI. For the managers of today to manage intergenerational group differences effectively, whilst maintaining diversity, they need to understand and appreciate the characteristics of each generation.

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