

Trust has paid out R134m compensation to silicosis sufferers

The Q(h)ubeka Trust has awarded R134m in compensation to qualifying former Anglo American South Africa and AngloGold Ashanti mineworkers suffering from silicosis.



Dr Sophia Kisting-Cairncross

Founded in March 2016, the trust was established with the specific purpose of distributing the R395m settlement won to compensate 4,365 ex-mineworkers from South Africa, Swaziland and Lesotho who may be suffering from silica-related occupational lung diseases as a result of the failure by the mines to prevent workers' exposure to silica dust. This is completely separate from the recently settled class action against various South African mining companies on the back of the successful conclusion of a lengthy compensation battle.

Medical evaluation

The claims process starts with a comprehensive medical evaluation of each claimant. The trustees' decision to partner with local healthcare service providers to perform the medical assessments was aimed at bringing services closer to the claimants as well as contributing to the upskilling of healthcare professionals in the diagnosis of occupational lung diseases.

"We believe that this has not only had a positive impact on our claims process but has also contributed enormously to the level of care provided to ex-miners in these areas. We hope that it will be a lasting legacy that will also be beneficial to the bigger class action settlement trust and for public health as a whole," says trust chairperson, Dr Sophia Kisting-Cairncross.

To date, approximately 3,160 of the claimants have been referred for medical assessments, just over half of those assessed have been determined to be suffering from silicosis.

Approximately half of the outstanding claims are of deceased claimants, the majority of whom died before the establishment of the trust. Due to the lack of medical records, it would be more difficult to determine whether the deceased had silicosis. The trustees, however, are exploring many different possibilities to obtain whatever medical information may be stored with different entities.

According to Kisting-Cairncross, this lack of medical records is one of the most significant challenges faced. The trustees are also currently working with several specialists on pioneering work to develop an instrument to confirm the presence of silicosis in the absence of medical records. "We cannot fail our widows and the families of the mineworkers who have suffered tremendously by their loss."

Employment records

Other significant hurdles the trustees continue to face in determining compensation eligibility is establishing that claimants worked for at least two years at Anglo American South Africa and AngloGold Ashanti Limited mines. The employment record keeping by the mines has generally been very poor for this group of workers, which significantly complicates this step of the process.

In terms of the trust deed which sets out the claims criteria, the trust has until April 2019 to complete the medical assessments of all claimants. Locating claimants has been difficult because many contact numbers provided are no longer valid and claimants have since moved home with no forwarding addresses. The trustees have employed every means at their disposal to find these claimants.

The compensation paid to date represents a first payment to claimants. A further distribution will be made once all claimants have been medically assessed and could be a similar amount paid to beneficiaries.

Quality of life

The work of the trust extends beyond achieving compensation in terms of this settlement agreement to assisting claimants apply for statutory benefits under the Occupational Diseases in Mines and Works Act (ODMWA), thereby securing potential additional compensation. To date, the trust has submitted 351 applications to the Medical Bureau for Occupational Diseases. A further 600 applications are being prepared for submission by October 2018.

"We believe passionately in the importance of the work we are doing and we are absolutely determined to see all qualifying claimants, and the families of deceased qualifying claimants, compensated for their illnesses, and while we know that money can never restore these claimants to full health, or return the deceased claimants to their loved ones, the compensation will contribute towards helping them with medical bills and perhaps contribute to enjoying a better quality of life they deserve," she said.