**Bringing Healthcare to Artisanal Miners in Zimbabwe**

Limited access to primary health services in artisanal and small-scale mining characterises the harsh realities of excessive exposure to silica-containing dust, overcrowding and poor living conditions. Zimbabwe is currently experiencing a high burden of TB, silicosis and HIV among communities of small-scale and artisanal miners. Multi-sectoral and innovative interventions are required to stem this triple epidemic in Zimbabwe. The risk of silicosis increased due to the severity of exposure to silica dust.

Silicosis is a lung disease that comes as a result of exposure to silica, which is found in dust. The risk factors among subsistence miners have to do with the work they do—digging, blasting and other related activities.

The burden of respiratory diseases affects small-scale, artisanal miners, popularly referred in Zimbabwe as amakorokoza/ (in Ndebele) because of various socioeconomic factors like lack of protective clothing, limited access to health care and a lack of knowledge about the diseases and preventive measures they can take when engaging in their operations. The miners are also exposed to sexually transmitted infections due to prevalence of sex work in mining communities.

To provide basic healthcare services to the artisanal miners, Doctors Without Borders (MSF) is running a medical outreach initiative in Gwanda District, Matabeleland South Province, supporting the Ministry of Health and Child Care (MoHCC) in reaching out to hard-to-reach populations, specifically targeting communities occupied in artisanal small-scale gold miners with a comprehensive basic health care outreach programme. MSF selected Gwanda district for an intervention because of poor health indicators in the artisanal mining community.

The outreach programme aims to bridge the health services gap and bring essential healthcare services directly to the miners’ doorsteps. By working hand in hand with the MoHCC, MSF provides access to communicable and non-communicable diseases prevention, screening and treatment.

“We noted some of the main gaps and partnered with the Ministry of Health and Childcare to conduct outreach programmes to artisanal mining sites. Our goal is not only to address the immediate health needs of these miners but also to empower them with the knowledge and tools to protect themselves and their communities in the long run, and the screening is for free,” said Dr Munyaradzi Sidakwa, Project Medical Responsible.

Host communities and small-scale, artisanal miners in hard-to-reach areas delay seeking medical care. They do not follow through with referrals; they struggle to adhere to treatment; they also struggle to access affordable care; and they frequently rely on traditional treatments that are readily available and easily accessible.

The miners are also hard to reach with public health information because of their mobile nature, they move from one place to another in search of rich gold deposits. Distance has been one of the major hindrances to access medical care for miners and host communities and this has ultimately affected their health seeking behaviour. They have to travel for anything between six and 30 kilometres to access the nearest health facility.

Meandering through the bumpy roads to the artisanal mining sites, MSF teams reach the artisanal mining areas. The patients will be waiting, heeding the call after a two-day mobilisation by the health promotion team, two days prior to the medical outreach. Women and children are the first to come. Men trickle in during lunchtime as they work underground. Past midday, tired and weary, they join the queue to get screened and medication.

MSF teams, comprising of a doctor and nurses, pharmacy technicians, and health promoters, organise outreach trips to artisanal mining sites scattered around Gwanda district to provide medical care, and on some days, they go to host communities. Outreach is done four days a week, with the teams visiting two different locations per day.

Each day, they attend to new patients, seeing a minimum of 70 patients in the mining locations and over 200 patients in communities. The medical services include free screening for conditions such as TB, HIV, cervical cancer screening, hypertension, and sexually transmitted infections and family planning services. Medications are provided for free at outreaches; patients who cannot be managed at outreach or require advanced interventions are referred to Gwanda Provincial Hospital.

To date, MSF teams have reached over 4.000 artisanal miners and host communities with outreach services.

“It is hard for them to reach the facilities; hence, during such programmes, we go to the mining sites. We give a comprehensive package and address the health challenges being faced by the artisanal miners, which are HIV, TB, silicosis, limited access to condoms and family planning methods, STIs, drug and substance use and mental health issues,” Dr Sidakwa added.

The demand for services is high, with the mining community appreciating the efforts by MSF teams to bring health care services closer to where they are.

“I find it hard to visit the clinic, even when I feel sick. During the day, we will be busy in the mining holes, so I better sacrifice to get money to fend for my family. We suffer from the inside with generalised aches and pains but we just ignore them, but chest pains are severe. Now that we are getting medical services here, it is easier for me,” said Amon Ndhlovu, one of the artisanal miners.

Effective control of TB, silicosis, and HIV among ASMs requires addressing the identified knowledge gaps and barriers that are faced by ASMs in accessing personal protective equipment and healthcare services. This will require multi-sector collaboration and the involvement of ASMs in co-designing a package of healthcare services that are tailored for them.

To ensure sustainable access to healthcare services by artisanal miners, MSF recommends stakeholders to collaborate with MoHCC to ensure that artisanal miners access health services with establishment of health posts in places nearer to artisanal miners.