

MATERIAL ISSUES / SOCIAL

GRI / SASB / Policies and standards

EMPLOYEE AND COMMUNITY HEALTH



PRIORITISED SDG

The health of our employees and communities remained a key material issue. Our approach is driven by the inter-dependence between employees and community health and is informed by occupational environment as well as social determinants of health.

Our aspiration remains to create healthy workplaces, healthy employees and healthy communities. The health strategy aims to be proactive and focus on prevention both in the short- and long-term. We manage risk inside and outside the mine fence by reducing harmful workplace exposures, optimising employee fitness for work and general wellbeing, as well as minimising negative impacts on communities while leveraging opportunities to improve community health systems and our social licence to operate.

We work to embed the health discipline into the overall business strategy through our focus on comprehensive risk management processes. We provide baseline and ongoing information on internal and external risk and inform evidence-based critical controls and management initiatives. We must ensure availability of capable, adequately skilled and responsive personnel supported by bespoke policies, standards and process for each local context.

Information management is also critical to ensure that information is captured, analysed and used to inform decision-making. We endeavour to undertake occupational risk baselines and community baseline health impact assessments to ensure that we understand workplace exposures, community health needs and are responding to those.

Given our diverse portfolio of assets in jurisdictions across varying levels of development and risk profiles, we face different challenges across the globe. These are, however, standardised into a group of ten broad risk categories that are assessed on a quarterly basis to allow operations to continuously assess prevailing and emerging risks. In addition to unprecedented COVID-19 pandemic that affected our operations, African mines still face high burdens of communicable diseases like malaria and HIV/AIDS in the workforce, and remain partially reliant on external critical skills in areas like occupational hygiene and emergency medicine. It is also frequently challenging to access optimal medical services in-country. The remote training programme developed with support from the University of the Witwatersrand, in Johannesburg to build some of the identified

Ghana - Obuasi



“Collaboration and partnerships to address the outbreak at local, industry and national level were considered as key pillars of AngloGold Ashanti’s strategy to control and manage the pandemic.”

critical skills in occupational hygiene in African operations was temporarily stopped due to COVID-19 restrictions. The training programme, to reduce over-reliance on expatriates, has to date produced five intermediate-level occupational hygiene technicians.

Non-communicable diseases such as diabetes, hypertension and cancer, still account for most of ill-health absenteeism. The importance of this risk was further elevated by the emergence of the COVID-19 pandemic which indicated that people with chronic diseases are at higher risk of developing severe forms of the disease which could be fatal.

Interventions to support the health and wellbeing of employees have been strengthened and focus on education, information and

MATERIAL ISSUES / SOCIAL continued

Employee and community health

awareness on preventive measures as well as ensuring access to early diagnosis and good quality treatment. We introduced various campaigns for communities on the prevention of multiple challenges presented by COVID-19, HIV, malaria, chronic illnesses and other relevant local issues. This is complemented by mental health support, which is also available to dependents. In Ghana the Iduapriem operation contributed to setting up a breast cancer screening facility in Tarkwa.

Despite the difficulties experienced during this extraordinary year with disruptions to planned work, all operations managed to continue workplace exposure monitoring and met the annual target of at least 70% monitoring, especially for noise and dust.

Our Africa operations made significant progress in improving occupational health capabilities:

In Ghana, Obuasi completed an in-house accredited occupational hygiene laboratory and the second phase of its baseline occupational hygiene survey.

A new modernised occupational health centre was constructed at Iduapriem in order to better facilitate linkages between occupational hygiene and occupational medicine.

Geita expanded its baseline occupational hygiene assessments to include a comprehensive ergonomics technical assessment by independent specialists from Muhimbili University in Tanzania.

Siguiri mine in Guinea received more modern occupational hygiene equipment to monitor noise and dust.

As anticipated, the exit of the South African assets from the AngloGold Ashanti portfolio has altered the profile of health risk as the majority of occupational disease cases had historically been associated with South African operations. This is mainly due to over-exposures over long periods of time as well as the high-risk nature of deep-level mining operations.

For 2020, there were no occupational disease cases reported outside of South Africa and a 47% year-on-year reduction in all occupational disease frequency rate (AOFDR) was recorded. We recognise that this is not a time for complacency and are focused on a preventative and proactive approach to employee and community health.

The start-up of our annual malaria control programmes across the region was delayed, but was eventually completed across the African operations. Our world-class Ghana malaria programme sprayed over 1 million structures, protecting more than 1,300,000 people against malaria and created 1,300 temporary jobs in local communities. This programme is a public-private partnership initiative that started after the successes of the initial AngloGold Ashanti-led community malaria programme. These were recognised by the government and nominated to receive a Global Fund grant to expand activities. In 2020, the programme operated in 16 districts of Ghana as well as 45 national

prisons. Based on a strong performance, the programme secured additional funding from the Global Fund to continue work in the 16 districts through years 2021 to 2023.

We continued to use our malaria spraying platforms to support COVID-19 environmental hygiene initiatives at both Obuasi and Iduapriem. This programme received financial support from both AngloGold Ashanti and the Global Fund.

As at 31 December 2020:

Total number of confirmed COVID-19 cases (employees and contractors)

1,779

Total number of COVID-19 related deaths (employees and contractors)

13*

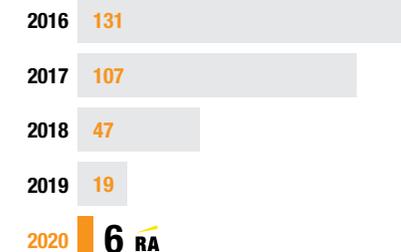
Total number of tests conducted (employees and contractors)

29,029

* Including eight deaths at the South Africa operations

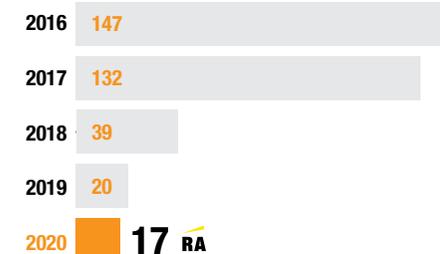
New cases of silicosis

(number of new cases)



Noise-induced hearing loss (NIHL)

(number of cases)



All occupancy disease frequency rate (AOFDR)

(per million hours worked)

