



# **Extent Of Implementation Of The National Occupational Health And Safety Policy In Public Universities In Rivers State**

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**Abstract:** The study assessed the extent of implementation of the National Occupational Health and Safety Policy (NOHSP) in public universities in Rivers State, Nigeria. A total of 758 workers from public universities in Rivers State (UPH, RSU, and IAUE) were surveyed. The data analysis was conducted using SPSS, employing techniques such as means, standard deviations, and z-tests. The findings of the study revealed that: the overall extent of implementation of the NOHSP in public universities in Rivers State was relatively low, with a grand mean of  $(2.46 \pm 0.925)$ . Among the different components of the policy, the implementation of sanitation  $(2.57 \pm 0.880)$  and welfare  $(2.55 \pm 1.00)$  were high, while the implementation of PPE  $(2.41 \pm 0.88)$  and structure  $(2.36 \pm 0.960)$  were low. It was concluded that the level of extent of implementation of NOHS in public Universities in Rivers State is low with sanitation being the most implemented component and welfare being the least implemented. Based on these findings, it is recommended among others that public universities in Rivers State should focus on improving the implementation of all components of the NOHSP, with particular attention to areas where implementation is currently low, such as the structural aspect.

**Keywords:** Implementation, National Occupational Health and Safety, Policy, Public Universities

## **INTRODUCTION**

Occupational health and safety are integral components of any thriving economy as they are related with economic activities undertaken in the country. As the economic activities grow and expand, occupational injuries and diseases are more likely to increase among workers in different sectors of economy. Thus, occupational health and safety is linked to all industries, businesses and trade, including traditional manufacturing centres, information technology companies, healthcare, nursing homes, schools, and universities (Hughes & Ferrett, 2016). This may result in high occupational health and safety services demand, which might be difficult to meet by developing countries that are prioritizing economic expansion without regard to their impact on occupational health and safety (Mrema et al., 2015).

Ensuring safety in the workplace is critical for a variety of reasons. Workplace accidents and injuries can have a severe impact on the workers, their families, and the economy (Leka et al., 2018). Workplace accidents can result in physical injuries, disabilities, and even death (da Silva & Amaral, 2019), leading to reduced productivity, increased healthcare costs, and lost income (Ramos et al., 2020; Zhang et al., 2020). Additionally, workplace accidents can create emotional and psychological trauma for workers and their families (Leka et al., 2018), leading to stress, anxiety, and depression. Apart from the legal and ethical obligation, safety in the workplace is crucial for maintaining a positive organizational culture (Petersen et al., 2019). Prioritizing safety demonstrates an employer's commitment to the well-being of their employees, which fosters a culture of trust and respect, and leads to increased employee satisfaction,

engagement, and loyalty (International Labour Organization [ILO], 2021). To ensure that companies incorporate OHS in their organizational culture, government often develop a policy which mandates the implementation of OHS as a work culture.

Policy is a law, regulation, procedure, administrative action, incentive, or voluntary practice of government and other institutions. It is a guideline to guide decisions and achieve rational outcomes. The National Center for Biotechnology Information (NCBI) defines policy as "a written statement that outlines the rules, procedures, and principles that an organization follows to achieve its goals" (Hendricks, 2015). According to Nderitu, Mwaura, & Gichuhi (2019), policy implementation has been generally defined a series of activities undertaken by government and others to achieve the goals and objectives articulated in policy statements. A comprehensive policy framework is essential to address the diverse challenges associated with workplace health and safety.

In Nigeria, the current occupational health and safety policy that is being implemented is the National Policy on Occupational Health and Safety (NPOHS) 2006. NPOHS 2006 is a guide to Occupational Safety and Health in Nigeria is the government's approach for achieving a National development philosophy of building a united, self-reliant and egalitarian economy through minimizing so far as is reasonably practicable, the causes and effects of hazards inherent in the working environment in response to her ratification of Convention 155 on Occupational Safety, Health and Working Environment (ILO, 2016). The Policy came into force in November, 2006. The objectives are: a) to create a general framework for the improvement of working conditions and the working environment; b) to prevent accidents and departures from health arising out of or in the course of work; c) to ensure the provision of occupational safety and health services to workers in all sectors of economic activity (ILO, 2016; Olurinola et al., 2014). The National Occupational Health and Safety (OHS) Policy represents a cornerstone in the commitment to safeguarding the well-being of the workforce and ensuring a secure working environment within a nation.

The level of implementation of these policies can vary depending on the country, industry, and company. In general, there has been a growing emphasis on workplace health and safety in recent years, with many countries and organizations implementing stricter regulations and policies. According to a report by the International Labour Organization (ILO) published in 2021, about 2.3 million workers die each year as a result of occupational accidents and diseases. This highlights the importance of implementing effective occupational health and safety policies. The report also notes that there has been progress in reducing the number of workplace accidents and diseases in some countries, but more needs to be done to ensure that workers are protected. (ILO, 2021). For instance, in the European Union, the European Agency for Safety and Health at Work (EU-OSHA) is responsible for promoting workplace health and safety. According to EU-OSHA, the level of implementation of occupational health and safety policies varies across member states, but there has been progress in recent years. EU-OSHA notes that the COVID-19 pandemic has highlighted the importance of workplace health and safety and has led to increased efforts to protect workers. (European Agency for Safety and Health at Work, 2020). While there has been progress in implementing occupational health and safety policies, more needs to be done to ensure that workers are protected. (Occupational Safety and Health Administration, 2021). The COVID-19 pandemic has highlighted the importance of workplace health and safety, and it is likely that there will be continued efforts to improve workplace safety in the coming years.

In schools, occupational health and safety is an issue that affects all individuals associated with the school, including students, teachers, administrators, personnel, parents, and other visitors (OHS in schools, 2017). According to the Occupational Health and Safety Hazard Classes Communiqué (2012), some levels of education (preschool, primary, general secondary school, and university) are classified as "less hazardous," while technical and vocational secondary school (excluding disability education), technical and vocational secondary school (excluding disability education), and apprenticeship education are classified as "hazardous". Science labs, gyms, cafeterias, and school yards are major places where accidents take place, but injuries can also occur in classrooms, hallways, and auditoriums. In the university environment, some common health and safety hazards include but not limited to: adverse

weather, biological agents, display screen equipment, electricity, fire, hazardous substances, lone working, machinery, manual handling, noise, slips, trips and falls, mental stress (resulting from fatigue, workload issues, role conflicts and other diagnosable organisational stresses), vehicles and workplace transport, vibration, violence and aggression, working at height, and working in confined spaces (Wariowei & Nwogu, 2018).

Implementation of occupational health and safety policy is of cardinal value to any organization or business. Implementation results in employees being protected from harm, danger or loss which could lead to greater productivity and more commitment in the workplace. By implementing the relevant policies, the organization would have an improved relationship with employees, for the reason that the organization demonstrates that the rights of employees are respected and protected. An organization or business can also improve their financial standing and public image by implementing occupational health and safety policy. This can be achieved by minimizing or eliminating claims for compensation due to negligence of the employer or harm sustained by the employee. (Hall & DeLannoy, 2014).

In public universities, the implementation of these policies is crucial to promoting a safe and healthy work environment for academic and non-academic staff (Okafor, & Egbule, 2018). Successful implementation of occupational health and safety policy comes with a lot of benefits which include; reduction of litigation, reduction of accidents and illness in the organization which improves productivity and hence better performance; as well as improved image of the organization. (Kaguathi, 2018).

However, the extent to which this policy is effectively implemented in public universities in Rivers State remains an underexplored area. This study seeks to address the gap in knowledge by investigating the extent of the implementation of the National Occupational Health and Safety Policy within the context of public universities in Rivers State. Identifying the gaps, and successes in the implementation process will contribute valuable insights for policy enhancement and the promotion of a safer and healthier working environment within the academic sector.

### **Research Questions**

- 1) What is the extent of implementation of structure component of national occupational health and safety policy in public universities in Rivers State?
- 2) What is the extent of implementation of sanitation component of national occupational health and safety policy in public universities in Rivers State?
- 3) What is the extent of implementation of Personal Protective equipment (PPEs) component of national occupational health and safety policy in public universities in Rivers State?
- 4) What is the extent of implementation of welfare and workers compensation component of the national occupational health and safety policy in public universities in Rivers State?

### **METHODOLOGY**

Descriptive survey design was considered appropriate for this study because, it is a type of survey that generates data from a section of the population describing events based on their occurrence in the natural setting at a point in time. (Elendu, 2010). A sample size of 758 confirmed staff of public universities in Rivers State drawn using multistage sampling procedures consisting of simple random sampling technique, proportionate stratified sampling technique, and convenient sampling technique from the population of seven thousand, three hundred and one (7301) staff of public universities in Rivers state was used for the study.

The researcher used a validated questionnaire and check list to generate data for the study. The questionnaire was titled: Extent of Implementation of National OHS Questionnaire (EINOHSQ), which comprised of two sections, A and B. Section A generated socio-demographic data (age and ownership of university), while B contained items to elicit information on the extent of implementation of national occupational health and safety policy implementation. The questions were structured using 4 point modified Likert rating scale options of “very high extent” (VHE, (4 points), “High Extent” (HE) (3 points), “Low Extent” (LE) (2 points), “Very Low Extent” (VLE) (1 point). The copies of the questionnaire were taken to the works departments of the universities and administered to confirmed staff

through the Head of Works Department of the universities. The filled copies of the instrument was retrieved on the spot and a return rate of 661 (87.2%) was gotten. The data that were generated were analyzed using descriptive statistics of Mean and Standard Deviation and inferential statistics of z-test. To determine the extent of OHS implementation, mean values <2.00 =very low; 2.00-2.49= low; 2.50-3.00 =High; >3.00 =very high. To determine the challenges, mean values < 2.50 = disagreed while those ≥2.50 = agreed.

## RESULTS

**Table 1: Summary of mean and standard deviation analysis on the extent of implementation of structure component of national occupational health and safety policy in public universities in Rivers State**

S/No		N	Mean	S.D	Remark
1	Building is adequately illuminated	691	2.34	1.02	Low extent
2	Building is adequately ventilated	691	2.38	0.88	Low extent
3	The building are spacious and allow easy movement	691	2.43	0.98	Low extent
4	The drainages system is adequate enough to prevent flooding	691	2.39	0.96	Low extent
5	building is built strong and well-fixed to avoid collapse	691	2.24	0.95	Low extent
	<b>Aggregate</b>		<b>2.36</b>	<b>0.96</b>	<b>Low extent</b>

\*critical mean = 2.50; max 4.0; min 1.0

\*decision mean: <2.00 =very low; 2.00-2.49= low; 2.50-3.00 =High; >3.00 =very high

Table 1 showed that the mean scores for all the indicators were below the criterion mean of 2.50, with scores ranging from 2.24 to 2.43. This indicates that the extent of implementation of the structure component of the national occupational health and safety policy in public universities in Rivers State was low. The standard deviation (SD) scores range from 0.88 to 1.02, suggesting that the responses were quite consistent across the sample.

The aggregate mean score for all the indicators was 2.36, which was also below the critical mean of 2.50. Based on the decision mean values provided in the table, the extent of implementation was categorized as low. This suggests that the structure component of the national occupational health and safety policy is inadequately implemented in public universities in Rivers State.

**Table 2: Summary of mean and standard deviation analysis on the extent of implementation of sanitation of national occupational health and safety policy in in public universities in Rivers State**

S/No		N	Mean	S.D	Remark
6	Workplace is clean and free from waterlogs	691	2.62	.87	High
7	Refuse and other wastes within the premises are disposed of in a safe and sanitary manner	691	2.88	.93	High
8	Toilet facilities was provided	691	2.66	.83	High
9	Washing facilities are provided with soap or detergent, hand sanitizer, air driers or single services towels	691	2.27	.95	Low
10	Adequate cleaning staff are provided	691	2.44	.84	Low
	<b>Aggregate</b>	<b>691</b>	<b>2.57</b>	<b>.88</b>	<b>High</b>

\*critical mean = 2.50; max 4.0; min 1.0

\*decision mean: <2.00 =very low; 2.00-2.49= low; 2.50-3.00 =High; >3.00 =very high

Table 2 shows that the mean scores for first three of indicators were above the critical mean of 2.50, while the last two were below the critical mean of 2.50 with scores ranging from 2.27 to 2.88. This indicates that the extent of implementation of the sanitation component of the national occupational health and safety policy in public universities in Rivers State were not uniform. Hence were categorized from low to high. The standard deviation (SD) scores range from 0.825 to 0.949, suggesting that the responses were

relatively consistent across the sample. However, the aggregate mean score for all indicators was 2.57, which was above the critical mean of 2.50. Based on the decision mean values provided in the table, the extent of implementation is categorized as high.

**Table 3: Summary of mean and standard deviation analysis on the extent of implementation of Personal Protective equipment (PPEs) component of national occupational health and safety policy in public universities in Rivers State**

S/No		N	Mean	S.D	remarks
11	There is provision of suitable and adequate protective clothing and appliances	691	2.36	.86	Low
12	There is proper training on the use of existence PPEs	691	2.47	.72	Low
13	Proper maintained of PPEs	691	2.38	.88	Low
14	School administrators show good PPEs usage	691	2.43	.98	Low
<b>Aggregate</b>		<b>691</b>	<b>2.41</b>	<b>.86</b>	<b>Low</b>

\*critical mean = 2.50; max 4.0; min 1.0

\*decision mean: <2.00 =very low; 2.00-2.49= low; 2.50-3.00 =High; >3.00 =very high

Table 3 data indicated that the provision of suitable and adequate protective clothing and appliances, proper training on the use of existing PPEs, proper maintenance of PPEs, and good PPEs usage by school administrators were all implemented to a low extent, with mean scores ranging from 2.36 to 2.47. The aggregate mean score for PPEs implementation was 2.41, which was also considered low. The critical mean score for decision making was set at 2.50, indicating that the overall extent of PPEs implementation was below the high level.

**Table 4: Summary of mean and standard deviation analysis on the extent of implementation of welfare and workers compensation component of the national occupational health and safety policy in public universities in Rivers State**

S/No		N	Mean	S.D	Remark
15	Provision of drinking water	691	2.49	.99	Low
16	Provision of changing room	691	2.63	.96	High
17	Provision of well-equipped First Aid facilities	691	2.18	.91	Low
18	Proper removal of dust, fume or other impurity	691	2.46	1.05	Low
19	Factory or special workplaces should not be overcrowded	691	2.64	.98	High
20	Provision of social and recreational facilities	691	2.78	1.07	High
21	Proper emergency response plan	691	2.46	.90	Low
22	Provision of pension funds.	691	2.80	1.07	High
23	Provision of leave grant	691	2.60	1.14	High
24	There is a periodic workplace leave for workers	691	2.85	1.14	High
25	Promotion of employees	691	2.50	.98	High
26	Provision of rehabilitation to employees with work related disabilities	691	2.38	.89	Low
27	There is provision for Employees dependents medical care	691	2.43	.89	Low
28	Provision of healthcare for workers	691	2.54	1.00	High
<b>Aggregate</b>		<b>691</b>	<b>2.55</b>	<b>1.00</b>	<b>High</b>

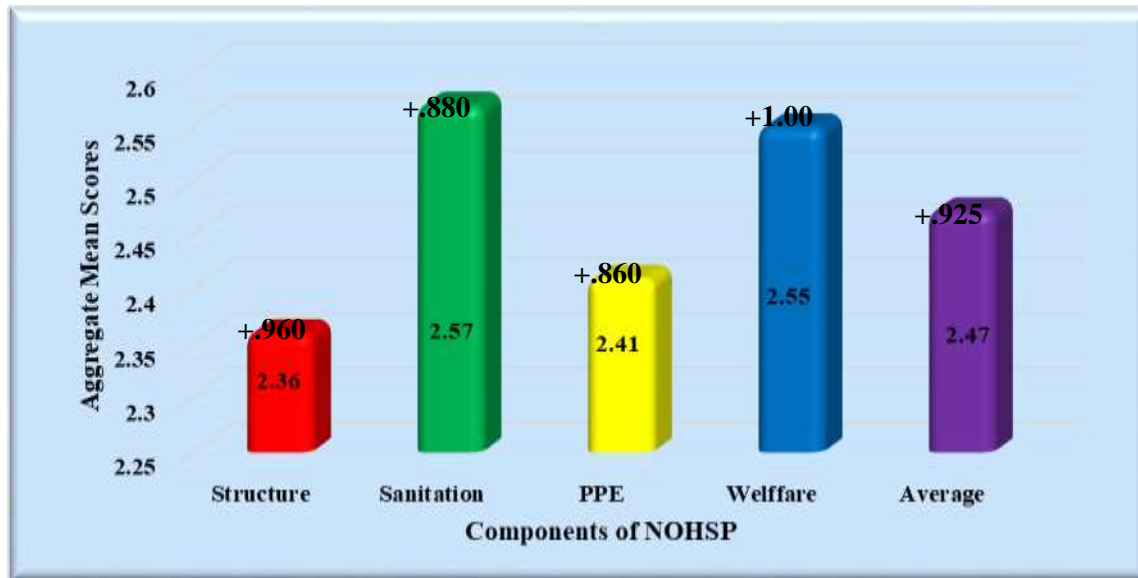
\*critical mean = 2.50; max 4.0; min 1.0

\*decision mean: <2.00 =very low; 2.00-2.49= low; 2.50-3.00 =High; >3.00 =very high

Table 4.5 indicated that the provision of social and recreational facilities (Item 20), provision of pension funds (Item 22), periodic workplace leave for workers (Item 24), and provision of healthcare for workers (Item 28) had high mean scores ranging from 2.78 to 2.85, with remarks ranging from high to high. This implies that these components of the welfare and workers compensation aspect of the policy were relatively well-implemented in public universities in Rivers State.

However, some components had mean scores below the critical mean of 2.50, indicating a low level of implementation. These included provision of well-equipped First Aid facilities (Item 17), provision of

drinking water (Item 15), provision of rehabilitation to employees with work-related disabilities (Item 26), and provision of employees' dependents medical care (Item 27). These items had mean scores ranging from 2.18 to 2.54, with remarks ranging from low to high.



**Figure 1: Summary of aggregate mean and standard deviation analysis of extent of implementation of NOHSP in public Universities in River State**

Figure 1 provided the summary of the aggregate mean and standard deviation analysis of the extent of implementation of NOHSP components in public universities in Rivers State. The mean score for structure was the lowest among the components, with a mean score of 2.36 and standard deviation of 0.96. Sanitation had the highest mean score of 2.57 and a standard deviation of 0.88, followed by welfare with a mean score of 2.55 and a standard deviation of 1.00. PPE had a mean score of 2.41 and a lowest standard deviation of 0.86. The implication of these findings is that the implementation of NOHSP components in public universities in Rivers State was not consistent across all the components. The highest mean score in sanitation implies that the universities were doing well in ensuring that the environment is clean and hygienic, while the lowest mean score in structure suggested that the implementation of NOHSP infrastructure was poor.

## DISCUSSION

The findings of this investigation revealed that the average scores obtained for the NOHSP components varied from 2.36 to 2.57, suggesting a level of implementation that is somewhere in the middle. The component with the lowest mean score was structure, whereas the one with the highest mean score was sanitation (2.57). The extent of implementation of the National Occupational Health and Safety Policy (NOHSP) in public universities in Rivers State was collectively low (grand mean =  $2.46 \pm 0.93$ ), with the sanitation being the most implemented component (aggregate mean =  $2.57 \pm 0.88$ ) and structure being the least implemented (aggregate mean =  $2.36 \pm 0.96$ ).

These results suggest that there is still a significant amount of opportunity for improvement in the manner in which NOHSP is implemented at public universities located in the state of Rivers. The results are not in line with those of earlier research, which found a high degree of compliance with occupational health and safety rules in Nigerian businesses. The findings are similar with those of prior studies. For example, Fapohunda and Azeez (2017) conducted a research in which they discovered that the application of occupational health and safety rules in Nigerian construction sites was only modest. According to the findings of another research that was conducted by Iwu-James and Olumide (2018), the degree of

application of occupational health and safety measures in Nigerian manufacturing enterprises was modest. Ezejiolor and Ugoani (2021) conducted a research that revealed a high degree of adoption of occupational health and safety procedures in Nigerian oil and gas businesses. The results of this study, on the other hand, contradict those of the Ezejiolor and Ugoani study. This disparity could be attributable to the fact that the oil and gas industry is subject to stringent safety rules, and that businesses operating within the industry are compelled to comply with those standards.

The results of this research have a number of repercussions that can be traced back to the introduction of NOHSP at public universities located in the state of Rivers. To begin, there is a need among the administration and staff of public universities for a greater knowledge of the significance of occupational health and safety. Second, in order to guarantee the successful application of NOHSP at public institutions, there is an urgent need for enough finance as well as the availability of resources. Finally, there is a need for effective enforcement and monitoring of occupational health and safety rules by the appropriate authorities in order to guarantee compliance with these policies.

Occupational health and safety regulations in Nigeria were only partially implemented, according to a number of studies that were conducted there (Adeleye et al., 2016; Ajayi et al., 2017; Ezejiolor et al., 2019). Ajayi et al. (2017), for instance, discovered that less than half of the manufacturing enterprises that were assessed in Nigeria have a documented occupational health and safety strategy, and an even smaller percentage had properly implemented it. Similarly, Adeleye et al. (2016) found that the implementation of occupational health and safety policies was generally poor in the Nigerian construction industry. Only 12% of the construction firms that were surveyed had a written policy, and only 2% of those firms had effectively implemented the policy. The low mean scores for the NOHSP implementation that were seen in this research are in line with these results, which are compatible with them.

Yet, there have been reports of significantly greater levels of compliance with occupational health and safety laws in Nigeria, as stated by a number of studies. For instance, Amusan and Oyebisi (2013) discovered that more than 70 percent of the manufacturing companies assessed in Nigeria had a documented occupational health and safety policy, and more than 50 percent of those businesses had properly executed it. In contrast, Ajayi et al. (2017) found substantially lower levels of implementation in the same industry, and their results stand in stark contrast to the data presented here. In a similar vein, Olorokun and Ezejiolor (2015) conducted a research in which they discovered that the majority of hospitals they investigated in Nigeria have a written occupational health and safety policy, despite the execution allegedly being subpar. According to the findings of these research, the degree to which occupational health and safety rules are put into practise in Nigeria may vary considerably from one industry or sector to another.

## **CONCLUSION**

Based on the findings, it can be concluded that the extent of implementation of NOHSP in public universities in Rivers State is low, with sanitation being the most implemented component and welfare being the least implemented.

## **RECOMMENDATION**

Based on the findings, it was recommended that public universities in Rivers State should focus on improving the implementation of all components of the NOHSP, with particular attention to areas where implementation is currently low, such as the structural aspect. This could involve allocating resources, conducting training programs, and regularly assessing and monitoring progress.

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