

**A STUDY ON THE EFFECTIVENESS OF LEGAL PROVISIONS ON INTERNAL SAFETY AND  
HEALTH SYSTEMS AND PRACTICES OF PUBLIC SECTOR ORGANIZATIONS IN UGANDA**

By

Peter Kagawa

**THESIS**

Submitted to

KDI, School of Public Policy and Management

in partial fulfillment of the requirements

for the degree of

**MASTER OF PUBLIC POLICY**

**2011**

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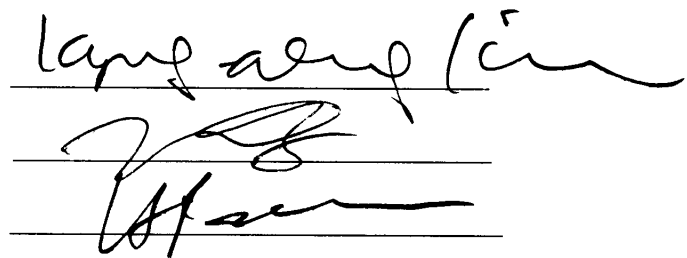
**MASTER OF PUBLIC POLICY**

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The image shows three handwritten signatures, each written on a horizontal line. The top signature is the most legible and appears to be 'Kang Younguck'. The middle signature is more stylized and less legible. The bottom signature is also stylized and less legible.

## **ABSTRACT**

This thesis focused on the study of the effectiveness of legal provisions on internal safety and health systems and practices of the Public sector organizations of Uganda. Such legal provisions are enshrined in the Constitution and other laws such as the Occupational Health and Safety Act, 2006.

Whereas the legal provisions meant to promote internal health and safety systems at work places are well spelt out, there is lack of strict adherence to those provisions by Public Service organizations in Uganda. Yet, at the global level, this area has attracted much attention because of the civil and criminal penalties, including litigation costs that are associated with non-compliance.

In this regard, recommendations have been provided to improve the implementation of the legal provisions on health and safety in the Public Sector. These, among others, include: consideration of budget items for health and safety activities, promotion of employee awareness, and monitoring of health and safety systems in Public sector work places.

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## CHAPTER ONE

### INTRODUCTION

#### 1.1 Background to the Study

In Uganda, the workplace health and safety laws and regulations are embedded in the Constitution, and various Acts such as the Factories Act, Workers' compensation Act, and Occupational Safety and Health Act. In these laws, the employers are charged with the responsibility of protecting the employee health and safety at the workplace. For example, the Factories Act defines and regulates the health standards regarding cleanliness, overcrowding, ventilation, lighting, drainage of floors, and sanitary conveniences. It also defines and regulates the safety standards regarding prime movers, water wheels, electric generators and motors, and transmission machinery. The violation of such laws and regulations carry penalties for the employer and sometimes the owner of the premises. These seem to compel some employers to adhere to the set standards and procedures.

However, the question was whether such laws are sufficient and capable of influencing the health and safety systems and practices in Public service Ministries, Departments, and Local Governments especially when their major focus is on Factories/Industries and the related "machine-based" workplaces like manufacturing and transportation. Even in the machine-based workplaces, the technology has tremendously changed, leading to an increase in the health and safety risks. For example, William K. Mukasa Senyonjo (2005) notes that "the rapid growth in construction industry has brought about increased threat to occupational safety and health and as such there have been a number of injuries and accidents (fatal) in the recent past..."

From a global perspective, the recent years have witnessed a dramatic increase in the number of occupational safety and health regulations, with which employers must comply, and the civil and

criminal penalties faced by employers when they fail to do so (Steven R. Mc Cown, 2008). For Uganda, a new Act (Occupational safety and health Act, 2006) was enacted by the Parliament. It is believed that this will address some of the new concerns and challenges that are coming up in the global workplace. In these new global concerns, the employees are being seen as crucial partners in ensuring health and safety at the workplace.

In Uganda, the Ministry of Labor, Gender, and Social Development is responsible for formulating and enforcing laws regarding safety and health at the workplace. A department of safety and health has been in existence since 1965. The mission of this department is to ensure safety and health at all workplaces and in the work environment. Its mandate is to evaluate and control physical, chemical, physiological, social and technical factors that affect a person at work and the work environment. And its objectives are:

- I. To minimize occupational accidents, diseases and disabilities
- II. To promote good health at the workplace
- III. To promote a good work environment for workers
- IV. To promote the construction of environmentally friendly workplaces.

Similarly, the Uganda's Public Service Reform Programme Strategic Framework (2005/6-2009/10) caters for "A more enabling and empowering work environment". However, it does not set out any tangible preventive measures for employees' safety and health threats at the workplace. This thesis, therefore, explored the available safety and health practices and the extent to which the existing internal health and safety systems and practices at the workplace have been in line with the laws and regulations. The thesis is based on the Case study of Government Ministries, Departments, and Local governments of Uganda.



The thesis report is organized and presented under the following headings: the introductory chapter one provides a general background to the study of the health and safety at the workplace and it focuses on Uganda situation and the global trends. Chapter Two reviews literature of previous work relating to health and safety at the workplace so as to define, explain, and justify the need for this particular study. Chapter three explains how data was collected or generated. It also explains how data was analyzed. Chapter four contains the presentation, interpretation, and discussion of research findings. Chapter five presents the extent to which the research objectives would have been achieved. Lessons learnt and recommendations for a positive change are provided. Conclusions about the research findings are also presented under this chapter.

## **1.2. Statement of the Problem**

The laws and regulations regarding occupational health and safety in Uganda have been in existence for over fifty years. However, their major focus (for example, the Factories Act, 1964) has been on regulating health and safety in workplaces that exhibit high levels of potential hazards. This has tended to create the impression that many workplaces, including Public service organizations do not take safety and health of employees as a priority. Therefore, this thesis sought to establish the facts about the existence of internal safety and health systems in Public service organizations; and where they exist; the motivation or influence for their existence was documented.

## **1.3. Purpose of the Study**

The purpose of the study was to document the status of Occupational health and safety, and provide baseline data that can support a positive change in the internal health and safety systems and practices of the Ministries, Departments, and Local governments of Uganda. The managers and policy makers are provided with vital information regarding loopholes in the laws and regulations, and the implementation of these laws. The thesis also provides recommendations (based on findings) for

improvement of employees' safety and health at the workplace.

The specific objectives of this study or thesis were:

- I. To assess the adequacy of the Uganda laws in addressing employees' health and safety at the workplace.
- II. To find out the effectiveness of the laws and regulations on internal health and safety systems and practices in Ministries, Departments, and Local Governments of Uganda.
- III. To make recommendations for improvement of health and safety of employees at the workplace.

#### **1.4. Research Questions**

Based on the above problem statement and purpose of the study, this research sought to answer three major questions. These included:

- I. What internal occupational health and safety systems and practices exist in Public service Ministries, Departments, and Local governments of Uganda?
- II. In what way have the Laws and regulations of Uganda on internal occupational health and safety systems and practices been implemented in the Public service Ministries, Departments, and Local governments of Uganda?
- III. Are the laws and regulations in Uganda adequate to influence Public service Organizations to create healthy and safe workplaces and environments?

## CHAPTER TWO

### LITERATURE REVIEW

This chapter focuses on literature of previous work relating to health and safety at the workplace so as to define, explain, and justify the need for this particular study. It specifically presents a review of Uganda's laws on Occupational safety and health; the safety and health issues in Uganda; and the global trends of Occupational health and Safety.

#### 2.1. Occupational Safety and Health Laws in Uganda

The supreme laws of Uganda are embedded in the Constitution of the Republic of Uganda, 1995. In this constitution, article 40 stipulates that the Parliament shall enact laws to provide for the right of persons to work under satisfactory, safe, and health conditions. It also provides for the need to enact laws that will ensure that every worker is accorded rest and reasonable working hours and periods of holiday. It is on the basis of these constitutional provisions that a number of Acts of Parliament have been enacted to regulate workers' health and safety at the workplace and its environment.

Specifically, the provisions of the constitution have been translated into more detailed procedures, rules, and regulations for safety and health at workplace through the relevant Acts such as Workers' compensation Act, Factories Act, and Occupational health and safety Act. Before 2006, the Factories Act, 1964 and its subsidiary amendments were the main reference for the procedures, rules, and regulations regarding occupational safety and health at the workplace. This Act regulated the safety issues relating to prime movers, water wheels, electric generators and motors, and transmission machinery. It also regulated health issues relating to cleanliness, overcrowding, ventilation, lighting, drainage of floors, and sanitary conveniences. Though still relevant and enforceable, the Occupational safety and health Act, 2006 came into force to harmonize it with other laws. The Occupational Safety and Health Act also covered new safety and health challenges that had emerged over the years.

Generally, the safety issues that are addressed by the occupational health and safety Act include: fire preparedness, safety of machinery, plant, and equipment, hazardous material, and special provisions for chemical safety. On the other hand, some of the health and welfare issues addressed include: provision of adequate sanitary conveniences, washing facilities, cloakrooms, facilities for sitting down and meals, and first aid at the workplace. In this Act, the Commissioner for Occupational Safety and Health is charged with the responsibility of keeping a register of all workplaces in the country. This is mainly to facilitate the work of inspectors who are responsible for the physical monitoring of all workplaces to ensure adherence to the Act. The Act further empowers the Inspectors to carry out prosecution of employers who violate its provisions.

It further provides for the duties and responsibilities of the workers such as reporting dangerous situations to the immediate supervisor. In strengthening this provision, it protects employees from any penalties by the employer that may be against the provisions of the Act. Therefore, the employees can exercise their duties without fear of being penalized by the employer. Though this is the legal provision, it may not necessarily be the practice in the workplaces; and therefore, the researcher sought to establish the actual practice.

## **2.2. Occupational Safety and Health Issues in Uganda**

Uganda has faced a number of challenges relating to safety and health at the workplace. In the construction industry, fatal accidents have been experienced, claiming hundreds of lives. The increase in the threat to occupational safety and health in the construction industry has been attributed to the rapid growth of the industry. Senyonjo (2005) noted that the growth rate of 40% has led to the increase in fatal accidents due to: lack of clear policy by government on how construction industry should operate; limited number of safety and health inspectors to enforce the regulations; and low attitude towards safety and health by clients, among others. These seem to suggest that the legislations in

place are not being implemented as expected.

In agriculture, the major cases of occupational safety and health issues have been related to the use of chemicals. According to Omara (2002), agricultural workers use or are exposed to a wide variety of toxic and often persistent and bio-cumulative synthetic chemical pesticides-herbicides, insecticides, and fungicides. The exposure is increased when such workers live where they work; in some cases they are severely poisoned or suffer long-term effects as a result.

Similarly, Omara (2002) further points out other factors that lead to poisoning. For example, used empty pesticide containers are given to workers as incentives and they convert them for domestic use such as storing water or food. This clearly indicates that the guidelines that are contained in the occupational safety and health regulations are not necessarily followed. In a similar aspect, the workers lack sufficient protective wear, and are not aware of pesticide hazards to human health and the environment. However, this may not be the case with the multinational Enterprises involved in agriculture. For example, Kinyara sugar works applies the comprehensive occupational safety and health policy of its managing company, Booker Tate (BT) with minor adjustments consistent with Ugandan legislation (Kinyara Sugar works, 2001)

In Public Service office settings and other facilities, fire, sanitation, ventilation, and inhalation of “unclean” air have been some of the profound issues. In the recent past, the “Buddo fire incident” of April 14<sup>th</sup> 2008 has been one of the most devastating safety issues. As reported in The New vision newspapers of 15<sup>th</sup> April 2008, twenty school girls aged between eight and nine died in the inferno that razed down their dormitory. Such incidents may occur in other public service organizations if proactive mitigation measures are not put in place.

These issues also cut across different sectors of the economy. For example, J.T Aguma-Acon (1999) asserts that small-scale industries in Uganda, such as metal fabrication, textiles and garments, food and beverages, wood craft, technical and electrical services, printing and graphics, and handicraft do not consider occupational health and safety as a priority. He further notes that most of them do not benefit from visits of the occupational health and safety department. This is because some of them do not fall within the regulations of the Factories Act, 1964. Therefore, the occupational hazards that are experienced in such sectors may not receive the appropriate attention. However, such a situation may not necessarily be due to inefficient regulations alone.

Paul Obua and Andrew Okimait (2001) note that the department of occupational health and safety is faced with the challenge of inadequate health training and research, limited staff, inadequate funding, and obsolete legislation. They further observe that;

*“The practice of occupational health is so far limited to workplaces which can afford a doctor, nurse, medical assistant or nursing aide, on a full-time or part-time basis depending on the resources of the undertaking and the benevolence of the employer. This service is still limited to few big industrial enterprises. When present, the "Occupational Health Service" is usually curative only, since the workers, employers and health staff have a preference for curative medical measures and little regard for prevention.*

*Trade unions, where they exist, may not know about the preventive orientation of occupational health and safety, but may rather portray occupational health as something for the future rather than for the present.*

*The smaller workplaces, which employ probably 60% of the workers in the formal sector, cannot afford even a curative service, however modest. This group is most unlikely to be supervised, even when the Occupational Safety and Health Department is doing its best...”*

They seem to suggest that the implementation of the workplace safety and health laws and regulations is far below the expected standards. It also implies the existence of risky or unsafe work environments in Uganda, of which Public Service Ministries, Departments, and Local governments may not be exceptional.

In the recent past, great concern has been placed on new health issues that have emerged. HIV/AIDS has been a major threat to the country for the last two decades. It is no surprise that different sectors have come up with a number of policies aimed at controlling the spread of the Virus. The Public Service HIV/AIDS policy is for example, in place and the guidelines for its implementation are closely followed. The education sector has also developed and implemented an HIV/AIDS policy that focus specifically on the Safety and Health needs of the education sector.

In the Public service, employees in the health sector settings such as hospitals seem to be at a higher risk of coming in contact with unsafe situations. The health sector has been confronted with infectious diseases such as Ebola, Marburg, and HIV, and yet it lacks adequate capacity to deal with workplace health and safety (The Monitor newspapers, 11<sup>th</sup> September 2008). For example, the 2007 Ebola outbreak in Bundibugyo district claimed lives of five health workers; while that of 2000 in Gulu district claimed the lives of seven health workers, including the medical superintendent. The same newspaper further reports that many of the occupational health cases are not reported to the responsible ministry. This implies that the statistics on the shortcomings of occupational health and safety may not be readily available.

Similarly, it is reported that the risk is worsened by the emergence of drug resistant mycobacterium that is difficult to treat. This is worsened by other hazards such as heat from boilers and autoclaves, air pollution in mortuaries and laboratories, vibration and noise, assault and violence especially in mental

clinics. Some of these conditions such as air pollution may be prevalent in Public service ministries, especially in records centers that tend to have a lot of paper dust.

The Public Service Strategic framework gives great attention to the prevention and treatment of HIV/AIDS when it comes to the theme of “a more enabling and empowering work environment”. Under the same theme, it provides for the need to improve the technological and communication tools. Here, the mitigation measures for the possible negative effects of such developments are not spelt out. Similarly, issues of air pollution and related hazards are not tackled at all.

The advancement in technology has brought about new challenges. The use of computers and other modern gadgets in office create safety and health threats on the employees’ side. For instance, eye strain, neck and back strain have been associated with the use of computers. These new challenges require the adoption of new policies and standards that can help mitigate the effects on the employee health. Such proactive measures seem to be lacking in the Public service strategic framework.

The threat of employee safety by criminals like armed thugs has also been experienced in Uganda. This has become a major concern especially with the emergence of terrorist attacks all over the world. In Uganda, bomb attacks in urban centers have been experienced in the past decade. For example, thirteen people were injured when home-made bombs exploded in a building in the south-eastern town of Jinja (The New vision newspapers, 9<sup>th</sup> July 2001). These are some of the emerging issues that may require further improvement of the existing safety measures in workplaces so as to safeguard employees. As Catherine Williams (2008) stated, one area that is sometimes overlooked in employee safety is the identification card. And yet, it is very helpful to have workers wear id cards so as to keep track of them, and at the same time isolate strangers who may threaten their safety.



### **2.3. Global Trends of Occupational Safety and Health**

In the global world, safety and health of employees at the workplace and work environments has taken a new trend. More detailed laws, regulations, procedures, and practices have emerged. These have been motivated by both the complexity of safety and health challenges and the need to cut down litigation costs resulting from employer's failure to provide a healthy and safe working environment (Catherine Williams, 2008).

The result of this has been the adoption of proactive occupational health and safety measures, regardless of the nature of the workplace. The traditional view that occupational health and safety is only a major concern of workplaces with explicit hazards such as the manufacturing industries has been challenged. Today, virtually all workplaces are considered unsafe. For example, the advancement in technology has made the use of computers and related gadgets like photocopiers part of many workplace settings. In this regard, new challenges have emerged.

McCown (2008) asserts that these technological changes "sometimes cause a few problems with accessibility for disabled users, especially as small touch screens have replaced the old large, easily recognizable buttons". These can lead to higher occurrence of injuries in the workplace. Consequently, the health and safety issues have also focused on the diversity at the workplace. Needs of special groups such as the disabled and women have been advocated for in the workplace health and safety policies and systems design.

New challenges of workplace safety such as increased terrorist threats in the recent past have led to the emergence of new safety procedures at the workplaces. Condrey (2005), points out that it is important to have employees in charge of safety. Such employees, in addition to their regular jobs will assist to monitor the safety of workers. This implies that the proactive approaches to occupational

health and safety have tended to greatly involve the employees. Similarly, Williams (2008) affirms the need for educating employees about health and safety at the workplace. She asserts that;

*“Accidents can happen, and will. However, if you do your best to educate your workers on the dangers and safety concerns, you are taking a step in the right direction. Many organizations make Employee Safety a big deal. They place large and very visible signs up on the walls stating how many days since the last injury. This keeps the workers aware of their safety record. In return, most companies reward their employees for so many consecutive days without an injury. Perhaps by giving company cookouts or a party to address their satisfaction for a great safety record...”*

These innovations have emerged as a result of the increase in the occupational laws and regulations that carry tough penalties. In a bid to cut down litigation costs, employers have established workplace systems with keen interest in employees' health and safety. The involvement of the employee has also been very crucial. The question is whether similar innovations exist in the Public service ministries, departments, and Local governments of Uganda.

## CHAPTER THREE

### RESEARCH METHODOLOGY

The study was based on both secondary and primary data collected by the researcher. The data was coded and analyzed to generate explanatory and descriptive information.

#### **3.1. Sample Area and Size**

The researcher randomly sampled and administered questionnaires to respondents from 30 Central government Ministries and Departments, and 93 District local governments of Uganda. Staff lists were used to sample two respondents from each unit, which raised a total of 246 respondents. In-depth interviews were also conducted with two senior managers in the Department of occupational safety and health, Ministry of gender, labor, and social development. These were purposively sampled by the researcher so as to enrich the research findings.

#### **3.2. Data Collection**

The secondary data was collected from the law books, government policy documents, journals, media reports, relevant online websites, and published academic and research literature. On the other hand, the primary data was collected using a questionnaire which was designed and administered to the 246 respondents. The questionnaire contained both closed and open ended questions so as to enable the respondents to express their opinions and also provide explanations on different issues. An interview guide was used to conduct the interview with the two senior managers of the department of occupational safety and health.

#### **3.3. Data Analysis and Presentation**

The data was sorted, coded, synthesized, and presented under headings and sub-headings that served to meet the purpose and objectives of this research. Descriptive statistics and tables were utilized in the explanation and discussion of the data.

## CHAPTER FOUR

### PRESENTATION OF FINDINGS

This chapter presents the analysis of the results of the study. It comprises of descriptive statistics. The main data was collected using a structured questionnaire whose responses were anchored on a five (5) point likert scale ranging (1-strongly disagree, 2-disagree, 3-not certain, 4-agree, 5-strongly agree). The Statistical Package for Social Scientists (SPSS) was used to analyze the data and response means and standard deviation were established. The findings are presented in tables and figures.

The statistics show the analysis results in respect of internal safety and health systems in public sector organizations in Uganda. Therefore, the researcher presents the analysis and interpretation of the data collected from the different respondents, under different themes based on the research objectives.

The objectives were to assess the adequacy of the Uganda laws in addressing employees' health and safety at the workplace; to find out the effectiveness of the laws and regulations have influenced the internal health and safety systems and practices in Ministries, Departments, and Local Governments of Uganda; and to make recommendations for improvement of health and safety of employees at the workplace.

#### **4.1. Presentation and Analysis of Findings**

This sub-section presents the analysis of findings. The mean and standard deviation have been used to interpret the quantitative research findings, which have been presented in tables. The qualitative research findings are presented under sub section 4.2. These sub-sections were guided by the various objectives as presented below:

**4.1.1. Objective 1: to assess the adequacy of the Uganda laws in addressing employees' health and safety at the workplace**

Table 4.1.1: Adequacy of Uganda Laws in addressing employees' health and safety at the workplace

Issue	Mean	Std. Dev.
Government has a written safety and health program	2.86	.743
Employees are involved on safety committees	2.14	.804
There are written safety rules/procedures	2.84	.688
There are safety inspections/hazard assessments	3.02	.801
There is safety and health training	3.35	.650
There are safety and health promotion activities	2.42	.852

From the analysis results in table 4.1.1 above, it was revealed that government has a written safety and health program. This was proved by the mean analysis result of 2.86. However, the analysis indicated that employees were not significantly involved on safety committees as showed by mean analysis of 2.14. Despite this, government has in place written safety rules/procedures (mean 2.84), safety inspections/hazard assessments (mean 3.02) safety and health training (mean 3.35). On the other hand, the analysis showed that there is no health promotion activities at workplaces (see mean 2.42).

**4.1.2. Objective 2: to find out the effectiveness of the laws and regulations on internal health and safety systems and practices implemented in Ministries, Departments, and Local Governments of Uganda.**

Table 4.1.2: Government's programs on health and safety

Issue	Mean	Std. Dev.
Government conducts safety and health training to managers	3.33	.837
Government conducts safety and health training to supervisors	2.72	.666
Government conducts safety and health training employees	2.35	.923
Government conducts training on accident investigation	2.44	1.031
Government conducts training on personal protective gear	2.42	.852
Government conducts training on hazard communication	2.77	.895
Government conducts training on electrical safety	2.40	1.050
Government conducts training on office safety	3.07	.704
Government conducts training on respiratory protection	2.40	1.050
Government conducts training on first aid	3.16	.871
Government conducts training on emergency response procedures	3.30	.513

From the above table, it is observed that whereas government significantly conducts safety and health training to managers (mean 3.33) and supervisors (mean 2.72), employees are provided with sufficient

training on safety and health issues as revealed by the mean analysis of 2.35. At the time this study was carried out, it was found out that government was not conducting training on accident investigation (mean 2.44) and personal protective gear (mean 2.42).

However, the mean analysis showed that government adequately conducts training on office safety (mean 3.07) and hazard communication (mean 2.77) though inadequately provides training on respiratory protection and electrical safety as indicated by mean analyses of 2.40. This study further revealed that government adequately provides training on first aid as proved by the mean analysis of 3.16 and on emergency response procedure (mean 3.30).

Further analysis was made on emergency safety and health aspects in government ministries and departments. The results are presented in table 4.1.3.

Table 4.1.3: Emergency safety and health aspects

Issue	Mean	Std. Dev.
Provision of personal protective gear where needed	2.21	.989
The organization uses engineering controls like ventilation systems to prevent workplace injuries	2.86	.560
The organization uses administrative controls like job rotation to prevent workplace injuries	2.98	.859
The organization uses safety communication materials to promote health and safety at work	3.23	.684
Safety and health aspects are considered when purchasing new equipment, devices and products	2.91	.750
All workplace injuries and illnesses are reported and investigated	2.44	1.031
The organization has an Emergency Response Plan	2.84	.974
All employees know how to respond to an safety emergencies	2.42	.852
The organization maintains alarms and fire extinguishers	3.00	.724
Emergency phone numbers and building maps displayed	2.93	.593

From this table, it is observed that in most of the government ministries and departments, employees are not provided with personal protective gear where needed (see mean 2.21). However, the analysis results (2.86) in this table show that most ministries and departments use engineering controls like ventilation systems to prevent workplace injuries.

The analysis of findings also indicated that while purchasing equipment, devices and/or products, safety and health aspects are considered (mean 2.91). However, considering the mean of 2.44, it was revealed that not all injuries and illnesses are reported and even those reported, not all are investigated. Though not all, most of the organizations have emergency response plans in place (2.84).

In spite of the fact that organizations maintain alarm and fire extinguishers (mean 3.00) with emergency phone numbers and building maps displayed (2.93), the analysis revealed that a few (2.42) of the employees know how to response to safety and health emergencies. It was also noted that Ministries, Departments, and Local Governments use administrative controls like job rotation to minimize work place injuries (mean 2.98). Communication materials for promotion of health and safety at work place were available (mean 3.23).

The mean analysis on government, institutional and/or department inspection and concern on safety and health facilities and aspects was also carried out. The results are presented in table 4.1.4.

Table 4.1.4: Government, institutional and/or department inspection and concern on safety and health facilities and aspects

Issue	Mean	Std. Dev.
The organization reviews all serious accidents and safety threats	1.98	.672
The organization regularly makes safety inspection/planned safety observation	2.21	.989
The organization recognizes outstanding safety performance	2.86	.743
The organization budgets for accident prevention activities	2.14	.804
The organization follows all established safety rules and procedures	2.84	.688
I report unsafe conditions and accidents to their supervisor	3.02	.801
Government conduct formal safety and health inspections of employee work areas	3.35	.650
Government conduct formal safety and health inspections of parking lots/sidewalks	3.07	.856
Government conduct formal safety and health inspections of ventilation systems	3.21	.638
Government conduct formal safety and health inspections of emergency eye wash units/showers	2.42	1.776
Government conduct formal safety and health inspections of electrical panels/wiring	2.95	.899
Government conduct formal safety and health inspections of fire extinguishers	2.81	1.006
Government conduct formal safety and health inspections of ladders/stairs	2.84	.785

The analysis showed that government departments and/or organizations/institutions do not regularly budget for safety and health aspects, activities, equipment and devices (mean 2.14); they do not review all serious accidents (mean 1.98) and do not regularly make safety inspection (mean 2.21). On the other hand, government recognizes outstanding safety and health performance (mean 2.86), and organizations, institutions and departments follow established safety rules and procedures (2.84).

Although the analysis showed that employees report unsafe conditions and accidents to their supervisors (mean 3.02), it was reported that their supervisors do not conduct safety and health inspections on some conditions that could lead to accidents (mean 2.42). However, the analysis showed that government conducts formal safety and health inspections on employee work areas (mean 3.35), on parking lots/sidewalks (mean 3.07), on ventilation systems (mean 3.21), on electrical panels/wiring (mean 2.95), on fire extinguishers (mean 2.81) and on ladders or stairs (mean 2.84).

#### **4.2. Presentation of Qualitative Research Findings**

As a result of the qualitative approach used to collect information on the effectiveness of legal provisions on the internal safety and health systems and practices of public sector organizations in Uganda, the findings have been presented in a narrative rather than a statistical form basing on the objectives of the study.

The Occupational safety and health Act, 2006 was enacted to help protect employees against various health and safety hazards, with penalties against employers who violate the law. This study found out that as a result of this, many public organizations have in place various policies and regulations on safety and health as one employee from the Ministry of Works and Transport said;



*“....the health standards regarding cleanliness, ventilation, drainage, health and safety of machinery and equipment are clearly defined and regulated”.*

According to Obua & Okimait (2001), occupational health and safety is faced with the challenge of inadequate health training and research, limited staff, inadequate funding, and obsolete legislation. Despite this, respondents from the Kampala City Council (KCC) said *“workers are protected by KCC because it has in place a law protecting workers’ safety and health, which are clearly stipulated in the Constitution of the Republic of Uganda and the Local Government Act”*. This means that there are safety and health laws, which are sufficient and relevant to employees.

Another respondent from the Ministry of Public Service also reported that; *“employee safety and health was protected by the Occupational Health and Safety Act as stipulated by the Constitution of Uganda”*. This was closely related to responses from the Ministry of Water and Environment where one respondent said; *“the law regarding workers’ compensation and the occupational safety and health Act are more appropriate for workers in the Ministry of Works.”* These responses are a clear indicator that government ministries and organizations have in place safety and health laws, which are applicable though may not be sure of how they are to be implemented.

In response to a question regarding the sufficiency and relevancy of workplace safety and health laws in the Public service, it was revealed that the laws are sufficient and relevant. This was implied by employees among whom one from the Ministry of Health said;

*“.....the laws would be sufficient; however, they are not efficiently and appropriately implemented. Imagine a worker maimed by a machine in the construction or quarrying process, it takes years for a worker to get compensated or even not considered”.*

Another from the Ministry of Water and Environment said;

*“...the laws are sufficient and relevant however, government does not seem to comply. And, even though the laws provide for civil and criminal penalties , many employees fear or just ignore to sue government for reasons that it will take them years to be compensated or even not”*

On this aspect, a senior manager from the Ministry of Gender, Labor, and Social Development seem to imply that the low levels of compliance in the Public Service are due to lack of awareness. He said;

*“...the laws would be sufficient and relevant to the public service if employees were educated on health and safety issues so as to increase their awareness and vigilance in this area.....”*

However, in view of the general employees' responses to the requirements of the workplace safety and health laws, this study revealed that government has to a great extent responded to safety and health requirements by providing the legal framework, without much emphasis on implementation. For instance, most of the employees from the different government ministries and departments proved this as one of them said;

*“...public sector organizations are willing to comply with the requirements for the workers' safety and health laws. However, government seems to be so reluctant toward their implementation.....”*

Another employee from the Ministry of Public service said;

*“...public organizations are now providing training to employees on various health and safety aspects like terrorism, accidents, office safety.....”*

This is in line with Williams (2008) who argues that one of the best tools for employee safety is education. She asserts that, accidents can happen, and will happen, adding that many organizations make employee safety a big deal.

The Ministry of Public Service is the custodian of all government ministries and organizations. Therefore, this implies that there is some positive response to the safety and health requirement. In addition to this, respondents also reported that their organizations were providing their employees with training on emergency response procedures, injury, and personal safety. For example, one employee from the Uganda Public Service Commission (PSC) stated that;

*“our organization provides workers with training on emergency response procedures more especially fire, injury safety, and personal protection....”*

Another Senior Manager from Ministry of Gender, Labor, and Social Development also reported that; “we have a program, which is aimed at promoting staff safety and health. Employees get engaged in safety and promotion activities every quarter..... Specifically on safety and security, it started during the time when terrorism attacks and threats were experienced here.....”

The responses from Bundibugyo District Local Government also indicate that the district has positively responded to the safety and health requirements as reported by one respondent that; *“the department responsible for staff welfare regularly makes inspection and monitoring to ensure staff safety and welfare.....”* This study also found out that a few government institutions, in response to the safety and health requirements put in place budget provisions for their activities as reported by respondents from more or less all Ministries.

Lastly, according to Omara (2002), workers more especially agricultural workers use or are exposed to a wide variety of toxic and often persistent and bio-cumulative synthetic chemical pesticides, herbicides, insecticides, and fungicides. However, some respondents in the Ministry of Agriculture, Animal Industry, and Fisheries raised concerns that there are ministries and departments that do not systematically follow the laws regarding handling of chemicals, including those used in regular fumigation of work premises. This probably could have hidden health effects that may be experienced by workers after a long period of time.

## CHAPTER FIVE

### CONCLUSION

This chapter is a synthesis of earlier discussions. It brings together the research objectives, questions, and findings of the study so as to come up with conclusions. The discussion is guided by research questions together with the related literature.

#### 5.1. Summary and Discussion

In summary, the subject of this study in the public sector was; “the effectiveness of the legal provisions on the internal safety and health systems and practices of public sector organizations in Uganda”. The principle endeavor of this research was to examine and analyze the adequacy of safety and health aspects in public institutions and departments. Therefore, understanding the state of affairs in employee safety and health in government ministries and departments has been the general objective of this study.

The research focused on the adequacy of the Uganda laws in addressing employees’ health and safety at the workplace; finding out how the laws and regulations have impacted on the internal health and safety systems and practices in Ministries, Departments, and Local Governments of Uganda; and make recommendations for improvement of health and safety of employees at the workplace.

The study adopted the descriptive and quantitative research designs. The purpose of this choice of research design was to enable the researcher get an in-depth understanding of the aspects of and issues relating to safety and health of employees at workplace in Public Institutions and Departments.

The findings have been presented using tables and figures. It was observed that whereas the law provides for safety and health of employees at workplace in Uganda, several Government Ministries,

Institutions and Departments lacked adequate safety and health provision to protect employees' safety and health at their workplace. The case study research design therefore provided the basis for understanding these aspects and issues relating to the law governing employees' safety and health at work places in Uganda's Public Service.

Results of this study revealed that whereas there was a law providing for employee safety and health at work in Uganda, it is not so effective with regard to employees in government ministries, departments and local governments. Therefore, there is a need for government to significantly involve employees on safety committees.

Whereas government provides training on several safety and health aspects in its ministries and departments, most of the employees are ignorant on how to respond to emergency conditions at work. This is in spite of the presence of emergency response plan. It is therefore, important to note that employee safety and health can only be guaranteed if all aspects relating to safety and health at work are considered. This involves consideration of safety and health issues when purchasing any equipment, devices or product to be used at work.

This study proved that while most of the safety and health issues are reported by employees to their supervisors, not all of them are considered and/or investigated. This can pose more risks to employees given that even what is taken as minor can turn to be a serious health problem for an employee.

## **5.2. Recommendations and Conclusions**

In the previous sections of this study, it is noted that to a less extent, the law on safety and health of employees at workplace is insignificantly effective in protecting and promoting employees' safety and health. This therefore, means that there is inadequacy of safety and health precautions in the public

sector.

It is hereby recommended that government of Uganda should consider involving employees on safety and health committees as this will enable them advocate for their fellow employees' safety and health at workplace.

Government should also put in place safety and health promotional activities in public institutions. This will make employees feel a sense of belonging and participation. Similarly, government should consider conducting training on personal protective gear, accident investigation, electrical safety and respiratory protection for its employees. This will enable them to understand how to respond to emergency safety and health aspects and/or incidents at work place.

In addition to the above, government should also put much emphasis on providing personal protective gear to its employees deployed in workplaces that present risky environments with regard to health and safety. This will reassure employees of their health and safety, which in turn contributes to employee job satisfaction and productivity.

Employees should also endeavor to report all workplace injuries and illnesses. But, such reports will only make meaning if supervisors investigate all reported injuries and illnesses and respond to them. This will help to encourage employees to make further reports and love their work. Government should endeavor to review all serious accidents and safety threats and regularly make safety inspection/planned safety observation. This will help its departments to ensure employee safety and health in the future.

This study revealed that a few Government Ministries and Departments, including local governments make annual budgets for employee safety and health. Therefore, government should take the initiative of making budget provisions for health and safety, with a component for monitoring and evaluating the performance of these budgets to ensure they benefit its employees as intended. This will help in promoting accountability and transparency among Accounting Officers.

Further, government should also conduct formal safety and health inspections of emergency eye wash units/showers. This is because the most vulnerable employees like the disabled are most likely to fall victims of such aspects, and appropriate facilities for them should be in place and functional at all times.

Finally, it is recommended that for in-depth understanding of the subject under study, further research is needed in the areas of; (1) budgetary allocation and public employee safety and health at workplace; (2) safety and health at workplace and employee performance in public institutions; and, (3) safety and health and employee job satisfaction in the public sector in Uganda.



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## APPENDIX I: QUESTIONNAIRE

**Introduction:**

Dear respondent,

I am Peter Kagawa, a Masters Student of Public Policy and management. I am carrying out a study on the effectiveness of legal provisions on internal safety and health systems and practices of public sector organizations in Uganda.

You have been randomly selected to participate in this study and your cooperation is kindly sought. Please note that this research is mainly for academic purposes and partly a baseline for future managerial improvements of public service internal safety and health systems and practices. Your cooperation is highly appreciated. Please tick or fill as appropriate. Thank you

**Section 1: Background Information**

1. Ministry/Department/Local Government: \_\_\_\_\_
2. Job Title: \_\_\_\_\_
3. Name of Respondent (Optional): \_\_\_\_\_
4. Date: \_\_\_\_\_

**Section 11: Adequacy of Uganda Laws in addressing employees’ health and safety at the workplace**

**Instructions**

Indicate the extent to which you agree with the following observations on legal provisions addressing employees’ health and safety at the workplace, specifically in your ministry/department/local government.

Please use the key below to answer the following questions by indicating: (1) for strongly agree, (2) for disagree, (3) for not certain, (4) for agree, and (5) for strongly agree.

Issue/rating	1	2	3	4	5
1. Government has a written safety and health program					
2. Employees are involved on safety committees					
3. There are written safety rules/procedures					
4. There are safety inspections/hazard assessments					
5. There is safety and health training					
6. There are safety and health promotion activities					

Please explain how safety and health issues are addressed in your organization’s activities:  
 .....  
 .....

**Section 111: Government’s programs on health and safety**

**Instructions**

Indicate the extent to which you agree with the following observations on Government’s programs on health and safety at the workplace, specifically in your ministry/department/local government.

Please use the key below to answer the following questions by indicating: (1) for strongly agree, (2) for disagree, (3) for not certain, (4) for agree, and (5) for strongly agree.

Issue/rating	1	2	3	4	5
1. Government conducts safety and health training to managers					
2. Government conducts safety and health training to supervisors					
3. Government conducts safety and health training employees					
4. Government conducts training on accident investigation					
5. Government conducts training on personal protective gear					
6. Government conducts training on hazard communication					
7. Government conducts training on electrical safety					
8. Government conducts training on office safety					
9. Government conducts training on respiratory protection					
10. Government conducts training on first aid					
11. Government conducts training on emergency response procedures					

#### Section IV: Emergency safety and health aspects

Indicate the extent to which you agree with the following observations on emergency safety and health at the workplace, specifically in your ministry/department/local government.

Please use the key below to answer the following questions by indicating: (1) for strongly agree, (2) for disagree, (3) for not certain, (4) for agree, and (5) for strongly agree.

Issue/rating	1	2	3	4	5
Personal protective gears are provided where needed					
The organization uses engineering controls like ventilation systems to prevent workplace injuries					
The organization uses administrative controls like job rotation to prevent workplace injuries					
The organization uses safety communication materials to promote health and safety at work					
Safety and health aspects are considered when purchasing new equipment, devices and products					
All workplace injuries and illnesses are reported and investigated					
The organization has an Emergency Response Plan					
All employees know how to respond to an safety emergencies					
The organization maintains alarms and fire extinguishers					
Emergency phone numbers and building maps displayed					

#### Section v: Government inspection and concern on safety and health facilities and aspects

Indicate the extent to which you agree with the following observations on Government Inspection and Concern on safety and health facilities and aspects at the workplace, specifically in your ministry/department/local government.

Please use the key below to answer the following questions by indicating: (1) for strongly agree, (2) for disagree, (3) for not certain, (4) for agree, and (5) for strongly agree.

Issue/rating	1	2	3	4	5
The organization reviews all serious accidents and safety threats					
The organization regularly makes safety inspection/planned safety observation					
The organization recognizes outstanding safety performance					
The organization budgets for accident prevention activities					
The organization follows all established safety rules and procedures					
I report unsafe conditions and accidents to their supervisor					
Government conduct formal safety and health inspections of employee work areas					
Government conduct formal safety and health inspections of parking lots/sidewalks					
Government conduct formal safety and health inspections of ventilation systems					
Government conduct formal safety and health inspections of emergency eye wash units/showers					
Government conduct formal safety and health inspections of electrical panels/wiring					
Government conduct formal safety and health inspections of fire extinguishers					
Government conduct formal safety and health inspections of ladders/stairs					

Any other comments? If yes, state them here below:

.....  
 .....

END

## APPENDIX 2: INTERVIEW GUIDE

### INTERVIEW GUIDE FOR THE SENIOR MANAGERS OF THE DEPARTMENT OF OCCUPATIONAL SAFETY AND HEALTH

#### **Theme 1: Adequacy of the law**

- ✧ What safety and health laws are applicable to the Public service Ministries, Departments, and Local Governments of Uganda?
- ✧ In your view, are these Workplace safety and health laws sufficient and relevant to the Public service?

#### **Theme 2: The internal safety and health systems and practices**

- ✧ What is the current response of Public sector organizations to the requirements of the workplace safety and health laws?
- ✧ What internal safety and health systems exist in the Ministries, Departments, and Local Governments of Uganda?

#### **Theme 3: Workplace safety and health proposals for improvement**

- ✧ What are the problems and shortcomings in the implementation of the safety and health laws in the Public sector?
- ✧ What can be done to improve workplace safety and health in the Public sector?