

## Assessment of adherence to and compliance with occupational health and safety standards in public organizations in Tanzania: A case of regional administration and local government

Said Sudi Khassim<sup>1</sup>  
Eliza Costapius<sup>2</sup>

<sup>1</sup>saidjudk@gmail.com  
<sup>2</sup>elizacostapius@gmail.com

<sup>1,2</sup>University of Dodoma, Tanzania

<https://doi.org/10.51867/ajernet.6.2.37>

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### ABSTRACT

*This study explored adherence to and compliance with occupational health and safety standards in public organizations in Tanzania with reference to regional administration and local government. The social cognitive theory was used as the theoretical framework. The study adopted a descriptive research design. The target population was 500 people. A sample of 120 respondents drawn from the regional administration and local government, Tanzania was used., Simple random sampling, and purposive sampling were used to obtain different categories of respondents. The data collection methods were questionnaires and interviews. The Statistical Package for Social Sciences (SPSS) program was used to code and process the data that was gathered through the questionnaire and used to analyze quantitative data. Qualitative data was analyzed using thematic and content analysis. It was revealed that the factors affecting the adherence and compliance of OHS standards such as individual factor, institutional factor, economical factor and leadership in power are thought to have an impact on employees' decisions to adhere and comply with occupational safety and health rules. The findings show that "experience" makes employees learn more about OSH and the risks associated with enforcing it. Moreover, research findings indicate that employees who have more years of experience at work tend to neglect OSH practices. In addition to that data findings imply that staff training in the workplace reduces accidents and injuries making employees more cautious when performing their duties. It was concluded that OSH practices are not only significant to stakeholders in the organization but also third parties, thus why the law requires every organization to set guidelines rules and effective occupational health and safety practices in their work place. Furthermore, the OHS committee lacked full support to execute their duties concerning employee's wellbeing as they had limited resources to conduct trainings to employees as well as presence of few OSH equipment in the organization. Lastly, Training and education concerning occupational, health and safety regulations are not provided effectively to employees. Respondents revealed that people who get training concerning OSH practices are head of departments who in contrary do not share the details to the targeted audience who are directly working in the field.*

**Keywords:** Adherence and Compliance, Occupational Health, Safety Standards, Tanzania

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### I. INTRODUCTION

Occupational Safety and Health (OSH) management practices across the world empower organization to minimize the likelihoods of work related diseases, injuries, deaths together with all other forms of hazards among organizational employees. The ever-growing challenges and dynamics of adhering to the standards relating to occupational safety and health in all forms of workplaces call for a great need of widening awareness on occupational safety and health standards in public and private sector workplaces. According to International Labor Organization (ILO, 2011) and Ajmal (2021) the field of Occupational Safety and Health (OSH) is basically referred to as the discipline of foreseeing, identifying, evaluating and supervising risks originally in or from the workplace that could harm organization's employee's health and well-being. This includes considering the likely effect on the nearby societies and the overall surroundings close related to the workplace concerned. Hence bringing in place policies and procedures to avoid, regulate, control, minimize or remove human, social together with economic costs resulting from occupational hazards and risks in the modern workplaces (Fruhen et al., 2019; Lestari et al., 2019).

OSH practices remain one of the greatest essential phenomena of the social concerns in the world of work today. For the promotion and maintenance of the highest level of mental, psychological and well-being of workforces in all types of employments in the workplace, this term includes adaptation of the working environment which is safe and health to the employees. Hence OSH domain invites a comprehensive variety of arrangements, abilities understanding and organized capabilities useful for managing together with applying the entirely mechanics which enable Occupational Health and Safety practices to operate in all levels of the country's systems (Lestari et al., 2019; Ajmal, 2021).

At the international, regional and national level attention has rapidly increased towards promoting safe and healthy working conditions for workers in the workplaces. Parallel to that, all governments, businesses and workers have a commitment in enhancing occupational health and safety in all types of employment (ILO, 2011). Safety management practitioners across the ever-changing world of work are responsible for developing procedures, measures, standards and systems for curbing risks and contacts that are harmful to both individuals and properties for the workplaces. Managers and administrators are tasked to implement most occupational operational tasks and financial moralities for effective use of organizational properties and assets. This serves to appreciate the importance of adhering to the health and safety practices in their responsible workplaces (Kessy & Rutasimbala 2021).

Regardless of global efforts to address OSH concerns in developed, developing and less developing countries, high number of work-related fatalities still occurs every year (Wambilianga et al., 2015). In developed countries including Germany, USA, Norway, Sweden and other industrially rising countries including China and India OSH agenda has been one of the key agendas for ensuring healthy workforce in place. Situation is on the rise in countries such as Latin America, the Caribbean, India and China as well as in sub-Saharan Africa such that work-related accidents cause fatalities injuries and absence from work (ILO, 2011).

In the African context, numerous initiatives have been done by many researchers beyond the boundaries including Kumar et al., (2017) in India, Okikiola et al., (2021) in Nigeria and Abaya et al., (2021) in Kenya. The studies focus on assessing the OSH standards' awareness, knowledge and its compliance together with the effect of OSH standards on employees' performance. Also, the studies revealed the issues upsetting occupational safety and health compliance on manufacture site respectively. The studies further observed that, the compliance with safety and health awareness on construction place in India is generally poor, as both technical and construction labors have little knowledge on safety and health matters. Similarly, there are still insufficient protective measures for reduction of occupational safety and illness in organizations in Nigeria which unfavorably affect employees' performance.

In Tanzania, all OSH related matters are legally originated administered from view of the OSH Act of 2003. This legislation aims at ensuring that, the duty of the management in the organization is to protect all employees from injured, accidents and work-related diseases. In the Tanzanian organizations, the issue of safety administration and management must be flexible and regularly considered the ever-changing working conditions. The respective managers can influence safety performance by translating the national legislation in implementable local organizational policies and guidelines. This helps to ensure great safety performance, the provision of resources to realize the objectives of these strategies, the holding of local managers responsible and accountable for their safety performance, the provision of resources to realize the objectives of these policies, among other things (Kessy & Rutasimbala 2021).

The public sector organizations in Tanzania are directed to apply and observe the OSH Act, of 2003 for their all-human resources management related undertakings (United Republic of Tanzania [URT], 2004). The need to underscore the actors' level of awareness for the adherence and compliance of OSH standards is envisaged to be of paramount importance. This serves a useful gear towards administering OSH related matters in public organizations workplaces in Tanzania. The efficiency of managing occupational risks continues to be a concern for developing countries including Tanzania. Despite the existence of OSH guidelines, programmes and administration for safety management practices, less remains to be known on the level of adherence and compliance of OSH standards in the Tanzanian public organizations (Kessy & Rutasimbala, 2021). This study therefore will reveal the adherence and compliance of OSH standards in the Tanzanian public organizations where regional administration and local government was used as the case study.

### **1.1 Statement of the Problem**

Occupational health and safety practices has received a considerable attention as a result of pressure from trade unions, labor regulations and progressive attitude of owners of the businesses to avail decent and safe workplaces (ILO, 2011). The scope of OSH management and administration in Tanzania is drawn from the OSH Act of 2003. This requires both public and private organizations to commit themselves to avail all forms of required resources for regular creation, execution, retain and evaluate OSH policies, procedures and guidelines. This among other things aims at sustainably ensuring safe, efficient and productive workplaces for organizational employees (URT, 2003; Liu et al., 2020).

According to OSHA Annual Performance Report in the year (2020), the level of compliance among public organizations dropped to 0.7% among the 20,016 inspected workplaces as compared to the two previous years of 2018 and 2019. This clearly shows that the level of compliance in the surveyed Tanzanian public organizations is in a drastic fall (Shilla, 2021).

Despite the widely known aspects of OSH related practices in both Tanzanian private and public organizations (Mrema et al., 2015; Kessy & Rutasimbala 2021), less remains to be known on the level of adherence and compliance of OSH standards in the Tanzanian public organizations. The widely covered aspects include OSH implementation,

roles and the adherence to safety and health measures in public and private organizations respectively, leaving the level of adherence and compliance of OSH standards in the public organization's workplaces less covered in the body of knowledge. This poses a rationale of undertaking this study to reveal the adherence even compliance of OSH standards for the Tanzanian public organizations where regional administration and local government is the case under study.

## 1.2 Research Objective

The study aims to assess adherence and compliance of occupational health and safety standards in public organizations in Tanzania: A case of regional administration and local government

## II. LITERATURE REVIEW

### 2.1 Theoretical Review

#### 2.1.1 Social Cognitive Theory

Social Cognitive Theory was introduced by Albert Bandura in 1989. It posits that the learning occurs as a process in a social context with a vibrant and mutual-relations between individual persons, environment and behavior. The social influence aspects are central to the theory's arguments and their emphasis on external and internal social reinforcement in the organizational context. These aspects also stand as the unique feature of the theory is the emphasis on (Bandura, 1989). Organizational working environment is envisaged to shape personal behavior henceforth enabling people engage in a specific behavior or stop pursuing the behavior. The theory further posits reasons on why a person engages in workplace behaviors in a period of time.

The theory strongly suggests that inner forces cannot totally be termed to shape and control the organizational working environment. This theory comes in to posit how social influences affect how an individual behaves. This includes the dimension on how people think, believe and feel, such that the theory assumes human beings are neither driven by inner forces within themselves nor automatically shaped and controlled by the surrounding environment. People are assumed to directly support their own motivation, behavior and development responses within a network of reciprocally interacting influences from the workplace.

In any given workplace, employees are characterized within this theoretical perspective such that a number of basic diverse capabilities are sought to be highly influential (Bandura, 1989). The theory further asserts that behavior depends on social environment and its dynamics or changes. In the course of underscoring OSH practices in the organizational working environment, these are new practices in the workplace towards achieving improved safety. The existing interaction between the employees' behavior, personality and the organizational working environment envisaged the crafting of the Social Cognitive Theory (SCT) with a pillar called reciprocal determinisms.

Organizational working condition which stands as SCT major standpoint is which lie on the factors that can affect human behavior including industrial related safety attributors OSH safety training on assessment, inspection and awareness. Consequently, the theory fails to critically to posits the relations between employers who can have to closely collaborate with their employees in the whole procedure of managing OSH matters and the course of improving organization working environment. Following the limitations of the Social Cognitive Theory in being able to contends facilities which protect the employees from industrial risks, this study revealed the accessibility of protective measures that can be used in organizations to ensure decent working environment during organization operations in order to reduce accidents, injuries and work-related diseases (Kessy & Rutasimbala, 2021).

### 2.2 Empirical Review

Following the review of similar studies across the world, this section was brought into existence. Donato et al., (2020) conducted a study on OSH management practices, a case of micro-and small-sized enterprises, a case of waste management sector in Portugal. Questionnaires were one among the tool used to collect data about OSH management practices. The results of the study revealed that micro and small-sized waste management firms present numerous constrains with respect to OSH management practices. Many enterprises still do not have systematized protective services. Furthermore, OSH guidelines, rules and procedures, risk assessment, training programs and accident recording mechanisms were found to be non-existence in several cases. The time devoted by the employers to OSH matters and the support of the external advisory service was also low for some firms.

Phiri (2017) evaluated the application of health and safety regulations on building construction sites in Zambia. The study primarily focused on examining the government agencies and regulators tasked with upholding health and safety regulations. The study found that there were insufficient health and safety regulations, including construction businesses' inability to establish safety committees, formulate company safety policies, and carry out health and safety training and inspections. Additionally, it was established that the OSH Act duplicates other laws and regulations and that institutional functions overlap. As a long-term solution, the researcher recommended completing

the creation of the entire OSH Policy. Additionally, the researcher suggested that the National OSH Authority be established to oversee the management, administration, and execution of OSH programs in Zambia.

Eyiah et al., (2019) assessed OSH regulations in construction industries in Ghana. The study's findings showed that the current legislative and regulatory framework for OSH is hardly functional. Stakeholders were aware of various rules and regulations, but they were generally unable to identify the specific legislation and the relevant issues. As a result, compliance is determined to be unreliable. The main recurring factors affecting the effectiveness of OSH rules and regulations include disregard and lack of priority for OSH, lack of training, lack of resources for OSH, incapacity of supervisory and administrative institutions and lack of OSH education within construction firms. The study's findings serve as an introduction to planned actions targeted at enhancing adherence to OSH laws and regulations in Ghana's construction sector.

Gozibert and Kitaly (2021) performed a research to “assess the adherence of safety and health measures in building materials retail shop in Ilala Dar es Salaam”. The research intended at examines awareness and practices of both employees and employers about safety and health measures. The findings obtained shown that, a large majority of owners of the business and employees are conscious of safety and health measures but they are poor on safety and health practices, where by the degree of understanding on safety and health measures amongst the owners of the business was as greatest as of (70.8%) and (64.4%) among workers. Then majority of the owners of the business (80.0%) and employees (92.0%) realized to have poor knowledge in safety and health practices. Consequently, the data obtained from the study revealed that, there were extensive inconsistency among their understanding on OSH and practices among the owners of the business and employees in building materials wholesale shop. It is suggested that, proper and suitable knowledge can be assimilated through formal training delivered OSH Authorities like OSHA in Tanzania.

The review of the above literatures has inadequately addressed the role of OSH standards practices on organizational performance. This result to the need of revealing the level of adoption, adherence and compliance in the policies as well as the factors affecting the adherence and compliance of OSH Standards in Public Service Organizations. The skimpy fewer known aspects leave public sector organizations less studied and which is therefore stands as the main focus of this study.

### III. METHODOLOGY

#### 3.1 Study Area

This study setting was in Dodoma region at regional administration and local government. The researcher decided to choose this study area due to its uniqueness in serving a diverse population with varying professions and needs making it an ideal setting to investigate how employees comply with occupational, health and safety standards.

#### 3.2 Research Design

According to Kothari, (2007), research design is considered as the actual strategy or plan of action for gathering data, organizing and analyzing it with the aim of attaining the relevance of research. This study adopted a descriptive research design. Without influencing the study in any way or in any manner, a descriptive research design was used hence because it comprises describing, observing and explaining individuals' behavior of a subject. This design was very beneficial since the study used a short period of time and constructed at a single case study. According to Kombo and Tromp (2006), descriptive research design was helpful since saved time and resources by letting the researcher gather information from one place and respondent only once in a time. The selected research design to be employed also is sought to be useful in realizing the individual employee feelings and perceptions in regard the subject matter under study.

#### 3.3 Target Population

The target population of the study consisted of 500 people who were the employees of regional administration and local government in Dodoma, Tanzania.

#### 3.4 Sample Size and Sampling Procedure

Probability sampling is choosing members based on a known probability. This study used probability sampling where a researcher selects individuals to participate and everyone has equal chance to be selected. This study also used purposive sampling to select key informants and members to participate in the focus group discussions since they were being convenient to provide reliable information for the study.

The sample size of any study entails the units in the sampling frame designated above, which yield. the variables of interest. The study used Yamane's formula to obtain the sample size. For the purpose of this study a

sampling intensity of 5% will be adopted. This corresponded to 120 workers meaning that 30 workers were being randomly picked from each of the four mainly selected departments from the study area.

### 3.5 Data Collection Instruments and Procedures

Creswell (2014) defines data collection instruments as the specific tools or strategies that researchers use to collect data from participants in a study. These instruments help researchers gather information that is relevant to their research questions and objectives. This study used questionnaires and interviews as data collection tools.

### 3.6 Reliability and Validity

The researcher's conclusions must therefore be trustworthy and legitimate. Any researcher seeking high-quality research should take validity and reliability into account while planning a study interpreting the findings, and presenting the findings. As recommended by Kothari (2004), this study achieved validity in a number of ways. First, it involved carefully crafting questions and pre-testing questionnaires to ensure that they are understandable and those potential issues are detected early on, allowing for the easy identification of remedies. Second, in order to find and fix mistakes and omissions made during data recording, the gathered data was edited. The goal is to achieve accuracy, consistency, and completeness. A sufficient number of questions were created and formulated by the researcher for this study and questionnaires were used to gather data from a variety of respondents. But the purpose of the reconnaissance was to test the equipment.

### 3.7 Data Analysis

Examining survey or experiment data and drawing conclusions and deductions is known as data analysis. The Statistical Package for Social Sciences (SPSS) program was used to code and process the data that was gathered through the questionnaire and used to analyze quantitative data. The researcher conducted more dependable and scientific study with the aid of the SPSS software. To measure frequencies, percentages and create tabular and graphic representations, descriptive data analysis methods was utilized to analyze quantitative data. Qualitative data was analyzed using thematic and content analysis.

## IV. FINDINGS & DISCUSSION

### 4.1 Response Rate

120 respondents took part in this study; however, only 110 respondents were able to fully participate in both interviews and questionnaires for the sake of this study. This is demonstrated in the table below:

**Table 1**

*Response Rate*

No.	Participants	Frequency	Percentage
01.	Expected Participants	120	100%
02.	Fully Participated	110	91.6%

The response rate is favorable and pleasing because there was less room for distinctions among participants and non-respondents once response rates are elevated, survey outcomes are more likely to be generalizable to the population sampled while there is less room for response bias. Saunders et al. (2019) indicate, the majority of statistics concur that a sample size of 100 is necessary to obtain any form of significant results.

High response rates increase the possibility that survey findings may be generalized to the population studied and decrease the risk of response bias by lowering the possibility for distinctions among participants and non-respondents. Data gathered from interviews has been assessed, qualitatively summarized, and interpreted by combining it with quantitative statistics.

### 4.2 Factors affecting the Adherence and Compliance of OHS Standards

Factors affecting the adherence and compliance of OHS standards in regional administration and local government provided a road map in assessing health safety standards. These factors are individual factor, institutional factor, economic factor and leadership style factor. Since the study sought to assess factors affecting the adherence and compliance of Occupational health and Safety Standards, analysis of the data was presented in tables. To a greater end the study provides a descriptive analysis of the respondent's views on the overall issues of factors affecting the adherence and compliance of OHS standards. Extent to which Individual factor affects compliance on OHS; Extent to which Institutional factor affect the compliance on OHS; Extent to which economic factor affect the compliance on OHS and Extent to which Leadership in power affect the compliance on OHS Standards.

#### 4.2.1 Extent to which Individual Factor Affect the Adherence & Compliance of OHS

According to data findings, every individual perceives different regarding OSH practices in the organization. Variables such as experience, level of awareness, education and training determine the level of an individual's adherence towards these practices.

For instance, respondents indicate that most of them do not know their right towards health and safety practices. However, some respondents reveal that employees have negligence to adhere to these practices despite of being given protective gears, gloves, masks and other safety tools for protection while working. The data obtained are as stipulated in table 4.13 below.

**Table 2**

*Extent to which Individual Factor Affect the Compliance on OHS Standards*

S/N	Option	Frequency	Percentage
1	Small Extent	05	4.5%
2	Moderate Extent	15	13.6%
3	Large Extent	60	54.5%
4	Very Large Extent	20	18.9%
5	Not at all	10	9.0%
	Total	110	100.0

According to table 4.13, 60 respondents (54.5%), indicated in Table 4.13 above answered that, individual factor affecting the compliance of OHS Standards are since TBS employees especially those who are working in laboratories do not obey OHS procedures and guidelines. Where by 20 respondents (18.9%) answered that, individual factor affects to very large extent, 10 respondents (9.0%) respondents delivered that not at all that, the individual factor might affect the compliance on OHS Standards. From the summary of the above table, it is well concluded that, TBS employees especially who are working in laboratories and those who conduct fuel marking exercise fail to take precautions for the sake of their health in their workplaces especially during sample testing

One of the interviewees said;

*"It is a pity on how mechanical lab employees fail to take safety precautions for the sake of their wellbeing. If a supervisor suddenly conducts an inspection in these labs, he will discover that employees do not take caution against hazards to protect their health in their workplaces."*

Regarding work experience, respondents indicate that;

*"As years of employment mounted, RALG employees became less eager to adhere to workplace and safety laws."*

This is particularly true for employees who have been employed for a while because they often use their experience instead of following safety procedures because they assume they understand everything. It may be argued that workers who spend more time at their jobs become accustomed to it and are less likely to take extra precautions to ensure their health and safety. Contrarily, rookie employees tend to be more careful and adhere carefully to working occupational and safety laws.

It was discovered that providing staff training in the workplace had a 5% positive link with paying focus on risks related to occupational health and safety. One of the interviewees stated that;

*"Workers and staff members who receive training are more knowledgeable about the risks to their personal health and safety at work as well as the regulations that govern those risks. Options for training aid in the discovery of new root causes and allow staff members the chance to voice any concerns they may have about executing OSH regulations."*

Therefore, this implies that employees who get training relating to OSH practices have a high possibility of performing efficiently and effective in their jobs as they will be extra careful to not cause harm or get injury in their work place.

#### 4.2.2 Extent to which Institutional Factor Affect the Compliance on OHS Standards

The findings of this study indicate that for occupational, safety and hygiene practices to be effective the organization should be supportive in allocating budget to support OSH related activities, implement OSH policies and the organization should commit to a vision of implementing and executing occupational, safety and hygiene practices. Results from respondents are shown in the table below;

**Table 3***Institutional Factors*

Variable	Frequency	Percentage
Supportive budget	27	24.5%
Presence of OSH policies	16	14.5%
Organization vision	33	30%

From the data above, it implies that institutional factors are least taken into consideration in relation to administer OSH practices at RALG, as only 27(24.5%) respondents indicated the availability of supportive budget, 16 (14.5%) respondents are aware of OSH policies and only 33(30%) respondents agree of the existence the organization vision towards executing occupational, safety and hygiene practices.

One of the interviewees (Secretary of the OHS Committee) stated that;

*Often in budget reallocation the element of the OHS matters is often not given much priority and frequently the budget related to OHS matters is reduced or moved to the next financial year."*

**4.2.3 Economic Factors**

Data findings indicate that safety and hygiene equipment have been used for a long time without replacement. Several reports of employees imply to be dissatisfied with tools and equipment that they use in their work places as the tools have torn out or start to malfunction decreasing productivity hence hindering their performance. Also, respondents reveal that top management may adjust or repair a little equipment's used since most of the spare parts are not available in the country until making purchase from abroad of which is expensive and it costs a lot of money. One of the respondents said;

*"This equipment's have loosened out and they are very ineffective, in fact they slow down operations, when supervisors are informed but such scenarios their response is that there is no enough budget available at the moment as it may take a long to finally work on it, this increases risks of accidents and injuries in our work place and also it affects our health and hygiene."*

**4.2.4 Leadership in Power**

It is a common custom for every organization to prioritize certain matters and neglect some depending on who is in power and what are his/her a goal. This is also similar to TBS as respondents indicate that they perceive occupational, safety and health practices differently depending on who is at the top management. This has been noted by few participants who claimed that;

*"Five years ago, the top management used to be more active in issues concerning occupational, safety and health practices of employees and they used to carry out frequent inspections, trainings and seminars so as to educate employees to be keen and maintain their wellbeing in the workplace."*

Therefore, from above finding, it is quite clear that OSH practices will only be active and effectively implemented at RALG when the people in power especially leaders emphasize and provide full support for it to operate smoothly otherwise nothing can be done to impact a behavioral change concerning OSH practices.

**4.2.5 Level of awareness on Policy, Procedures and Guidelines**

The information in the table below demonstrates how much the respondents knew about RALG Policy, Procedure and Guidelines for Occupational Health and Safety:

**Table 4***Level of Awareness on Policy, Procedures and Guidelines*

S/N	Option	Frequency	Percentage
1	Yes	33	29 %
2	No	54	57.1%
3	Not sure	23	24.5%
	<b>Total</b>	<b>110</b>	<b>100.0</b>

According to Table 4.11, most of the participants had no idea if there was policy, procedures and guidelines in place at their spot of employment regarding occupational health and safety practices. Of the 54 participants, 57.1% rejected that such a policy, procedures and guidelines existed, while 23 participants, or 24.5%, were not sure of the existence of such a policy, indicating ignorance. All of this demonstrates the degree to which RALG employees lack knowledge on matters that are essential to their protection in the workplace.

The policy, procedures and guidelines on concerns related to occupational health and safety is only known to 33 respondents (29%). When participants were questioned about how they learned about the policy, procedures and guidelines some said they did so by attending seminars/conferences/training, others said they received it when they joined the organization, and still others could not recall how they first learned about the occupational health and safety policy, procedures and guidelines.

The researcher inquired about the presence of the organization's occupational health and safety policy, procedures and guidelines and if the employees they aware of such policy with the respective Directorate known as Directorate of Human Resource and Administration (DHRA). The majority of the participant's answer was that there were not aware in the OHS policies, procedures, or guidelines. One of the people the researcher spoke added that;

*"The RALG relies on guidance from the Ministry of Health along with on the National Policy on workplace Health and Safety established in National Health Policy of 2003 because there are no organization policies, procedures, or guidelines on workplace health and safety".*

The reply goes on to claim that occupational health and safety is not heavily covered in the policy, procedures, or guidelines, but instead is supplied:

*"The Ministry will guarantee that workers are protected from dangers and management of the organization is responsible for ensuring that employees have a complete understanding of safety at their workplaces in accordance with the Ministry's guidelines."*

In addition to that, the participants stated that neither employers nor employees understood their rights and obligations because OSH procedures and guidelines place were not effectively implemented. However, one of the responses pointed out that, the RALG contain "Standard Operation Procedures" through OHS Committee that deal with the safeguarding of the work and the performance of duties.

The procedures framework how an employee might perform duties while also continuing to be safe from work-related diseases or accidents that may occur in the course of performing the services. It is evident from the participants' responses that RALG lacked an occupational health and safety policy and they don't have awareness of safety-related matters.

Even though in Section 96 of Tanzania's Occupational Health and Safety Act (Act No. 5 of 2003) which states that, every employer shall have to prepare a written policy and its guideline on the protection of health and safety of employees. RALG is still adjusting to establish a policy for OHS-related matters. The policy is in its infancy stage. One of the respondents (Human Resource Manager) revealed that

*"RALG OHS policy is still in its initial stage of implementation as it has been presented to employee's committee for discussion, then to be approved to the management and finally to the board which in fact it will take a time for it to be worked upon."*

#### 4.2.6 Effectiveness of Policy, Procedures and Guidelines to TBS

When requested about the effectiveness of the organization's occupational health and safety policy, procedures, and guidelines to guarantee the safety of the staff and patients, every participant who responded that they were aware of them provided the next response:

**Table 5**

*Effectiveness of Policy, Procedures and Guidelines*

S/N	Option	Frequency	Percentage
1	Yes	11	10%
2	No	86	78.1%
3	Not sure	13	11.8%
4	Total	110	100.0

According to table 4.12, 86 respondents (78.1%), indicated in Table 4.18 above answered that, since RALG is in the process of developing an OHS policy, then we assume its effectiveness will be decent. Therefore, at the moment they cannot say anything about the policy that has not yet been approved and has not yet implemented.

From the data above it is concluded that, at the moment RALG has no OHS policy, guidelines and procedures for that case, it's made respondents fail to explain it effectiveness. The responses from participants demonstrate that even those who claimed to be aware of the policy, procedures, and guidelines are unaware of how effective they are in guaranteeing their safety while performing their duties at the institution. One of the interviewees stated;

*"My subordinates are always complaining of backaches when working and it has been a common habit. When OSHA visited us for regular checks, they revealed that the types of chairs used by employees are not suitable leading to backaches."*

Therefore, from this information it implies that even top management are unaware of such issues regarding safety, health and guidelines in the work place that can be safe to employees to work comfortably.

#### 4.2.7 Management Support Towards OSH Practices

Research findings reveal that some of the respondents from RALG OHS committee are dissatisfied with little support from the top management. They have their deliberate plan in executing OH practices in the organization but they lack budget and support to excel in fulfilling their duties. One of the interviewees stated that;

*“We are lagging behind in fulfilling OSH practices at RALG because top management ignores our allocated budget for the fiscal year which could be used to provide training to employees regarding occupational, safety and hygiene practices in their work places.”*

Therefore, from the data findings, we can conclude that although OSH committee has been having countless efforts, it will still be ineffective unless the top management supports the Committee by approves and support the committee financially in executing these practices.

### 4.4 Discussion

#### 4.4.1 Factors Affecting the Adherence and Compliance of OHS Standards

The section responds to assess the factors affecting the adherence and compliance of OHS standards. These factors include individual factor, institutional factor, economical factor and leadership in power are thought to have an impact on employees' decisions to adhere and comply with occupational safety and health rules.

This finding has been backed by Jonathan (2016), who maintained that in request to prevent workplace safety and health hazards, organizations must distinguish involving the dangers to occupational safety and health of different sexes along with provide job locations that must be performed by both men and women.

The findings show that “experience” makes employees learn more about OSH and the risks associated with enforcing it. Moreover, research findings indicate that employees who have more years of experience at work tend to neglect OSH practices. In addition to that data findings imply that staff training in the workplace reduces accidents and injuries making employees more cautious when performing their duties.

The findings were consistent with Almost et al. (2019), who elaborated that education is important for human development, which is characterized by learning, identifying, and distinguishing between good and wrong. They also contend that a school education provides people with the knowledge and abilities they need to successfully prevent dangers.

#### 4.4.2 Level of Adoption of OHS Standards Policies, Procedures and Guidelines

Most of the participants had no idea if there was policy, procedures and guidelines in place at their spot of employment regarding occupational health and safety problems. All of this demonstrated the degree to which RALG members lack awareness on matters that are essential to their protection in the workplace.

The participants stated that neither employers nor employees understood their rights and obligations since there were no clear policies, procedures, or guidelines in place. However, one of the responses pointed out that the RALG contains "Standard Operation Procedures" that deal with the preservation of the workplace and the performance of duties. While an employee handles dressing injuries, for instance, the guidelines outline the steps to be accompanied to guarantee both the employee and the patient remain kept safe.

The procedures outline how an employee might offer service while also remaining safe from diseases or accidents that may occur in the course of providing the services. As a result, there are guidelines for the personnel on how to be safe while performing their duties. It is evident from the participants' responses that RALG lacked an occupational health and safety policy, procedures and guidelines. What's worse, a sizable portion of the participants lacked clear and detailed knowledge of safety-related topics.

Even though the necessity was stated in Section 96 of Tanzania's Occupational Health and Safety Act (Act No. 5 of 2003), the RALG failed to establish a policy for OHS-related matters. Since the RALG doesn't have a policy, there aren't any suitable standards to ensure that occupational health and safety needs are met. Policies are important because they set criteria on what should be carried out by each party on matters of occupational health and safety, whether an employer or employee.

Most participants expressed dissatisfaction with the steps RALG had taken to ensure their safety whereas engaging in work-related activities, it is evident from the responses given by the participants that nearly all of the RALG staff are dissatisfied with the actions the administration is pursuing. Participants have not seen a written copy of the policy, procedures, and guidelines in their respective departments. This demonstrated the level to which employees are unaware of the RALG policy on occupational health and safety, and as a result, they are unaware of their rights and obligations, which increases the risk in the workplace.

## V. CONCLUSIONS & RECOMMENDATIONS

### 5.1 Conclusions

It was seen that in relation to OHS practices at RALG first motivation and support comes from the top management and then employees follow. This will provide a clear message of the implementation of these policies. In addition to that factor affecting the adherence and compliance of OHS practices at TBS should worked upon to creating a good working environment for employees and their wellbeing in general.

### 5.2 Recommendations

The Ministry has to make sure that Occupational Health and Safety Standards, Policies and Procedures are being complied efficiently. The Ministry should formulate a monitoring team that will visit the organizations by making regular intensively inspections so that to evaluate the organizational safety policies, regulations and guidelines and measure their level of compliance.

The management should formulate and implement a proper policy guiding on occupational health and safety matters. The policy should stipulate clearly rights and responsibilities of both employer and employees. The policy should be able to tell what exactly should be done to make sure that all employees at RALG is working in a safe environment as well as the policy should be able to guarantee the safety in the working environment. The policy should also be provided in each department and RALG should make sure that all employees are aware of the policy.

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