Introduction

“Poverty is sin. I would rather die than be poor!!”, said one super-rich Kenyan politician.

One of the main concerns in my country, Kenya, is poverty and decreased living standards as a result of the serious economic downturn that has taken place since 1989. Today more than 5,000 enterprises in Kenya are in the red financially. It is very common to hear through the media that a certain business enterprise has suffered irreparable financial losses and has been put under receivership by their bankers. But surprisingly, despite the very lean economy, only banks make huge profits in Kenya. These factors create unemployment, poverty, political instability and, consequently, health issues.

The Government of Kenya enacted the Factories and Other Places of Work Act, Cap. 514 laws of Kenya as early as in 1951. That was before independence, which came much later – in 1963, more than ten years after this statute had come into being. This statute and its subsidiary legislation have been in force all these years; a few amendments have been made from time to time. The statutes are meant to make provision for the health, safety and welfare of persons employed in factories and other similar workplaces, and for matters incidental thereto and connected therewith. The Factories and Other Places of Work Act only provides for the basic requirements in terms of occupational health, safety and welfare.

In Kenya today, the total population is about 32 million, 70% of whom live below the poverty line. The population is rising rapidly. Young men and women are leaving various institutions of learning in search of nonexistent employment opportunities in a virtually stagnant economy. Negative economic growth is a reappearing threat. This paints a very grim picture as concerns the provision of safe workplaces and a healthy living environment. Although the Government and the private sector are nowadays called ‘partners’ in development, the environment, health, safety and welfare of workers are not improving as could have been expected.

The study and methods

The main objective of this study was to examine the impact of employment scarcity on the provision of elements of occupational health, safety and welfare in various places of work, which fall under the Act, in the locations of Mombasa City, Malindi, Kilifi, and the Voi town in the Coast Province of Kenya. The focus of interest centred particularly on the provision of the following:

(a) Safe conditions and systems of work
(b) Personal protective clothing and devices
(c) First-aid materials, including the availability of a person trained in first-aid.

The following methods were used to generate the data studied:

(a) Routine inspections with a rapid assessment of the occupational health and safety hazards therein
(b) Review of personal protective equipment and first-aid materials provided for the use of workers
(c) Personal interview of either the owner or the person in control of the workplace.

A total of 120 factories and related workplaces were visited in the course of the year 2001. The factories and related places of work were sampled at random in the course of my normal duties as an Occupational Health and Safety Officer. The workplaces visited included factories, warehouses, wood workshops, and construction sites. The number of workers varied from one workplace to another.

Indicators of unsafe working conditions were:

Noise, heat, vibration, electrical hazards, fumes, exhaust gases, dust, fungi, heights, worn-out material or equipment, poorly maintained machinery.

Table 1. Various parameters used to generate data from the field.

<table>
<thead>
<tr>
<th>WORKPLACES</th>
<th>TOTAL</th>
<th>Number of workers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workplaces visited</td>
<td>120</td>
<td></td>
</tr>
<tr>
<td>Full provision of PPE*</td>
<td>33</td>
<td>1,143</td>
</tr>
<tr>
<td>Incomplete or no PPE</td>
<td>87</td>
<td></td>
</tr>
<tr>
<td>Complete first-aid</td>
<td>78</td>
<td></td>
</tr>
<tr>
<td>Incomplete first-aid</td>
<td>42</td>
<td></td>
</tr>
<tr>
<td>Safe conditions</td>
<td>54</td>
<td></td>
</tr>
<tr>
<td>Unsafe conditions</td>
<td>66</td>
<td></td>
</tr>
</tbody>
</table>

* PPE = personal protective equipment

C. B. Odhiambo
Kenya
Lack of personal protective clothing or equipment was indicated by:
No overalls or dust coats, no safety shoes, no safety devices to prevent falls, no eye protection, torn or damaged protective clothing and devices.

Absence of first-aid materials was indicated by:
No first-aid box, inadequate first-aid materials, no trained to give first-aid, first-aid box not accessible.

Results
The results of the study are shown in Table 1 on page 65.

Discussion
From the results of the survey it is easy to recognize that many workplaces – in fact 73% out of all the workplaces visited – were not providing full protective clothing and devices. In most cases the employees were either using their personal clothing or decided on their own protection themselves.

These attitudes and behaviour stem from the fact that many people seek the very scarce employment opportunities, even only one day’s work, regardless of the hazards involved. The main goal of the employee, or the would-be employee, is to get work and earn some money to feed his family for at least a day. This means that a person who is not ready to take the scarce and risky or hazardous jobs that are available would not survive anywhere in Kenya. The employers seem to capitalize on the scarcity of employment, exploiting employees as much as possible. The hardest hit are young employees, the less educated, the unskilled and those from poverty-stricken backgrounds. These employees seem not to have many alternatives in Kenyan towns and on large plantations.

In many circumstances the employer would claim that the workers (the casual labour) found on his premises just got the job that particular morning, even if they had been working in the same factory or place of work for at least a month or so. When pushed further to explain the illegal practices in his undertakings, the employer or his agent would claim that they are doing the employees (the casual labour) a big favour by giving them the job in the first place. In addition to those personal sentiments, the employer or his agent would go further to say that the job will soon be ending anyway, so he sees no reason why the company should spend more money on protective clothing and devices.

The survey results indicate that 35% of the total number of workplaces did not have complete first-aid materials. The actual figure is lower because in many of the places of work visited, the first-aid box and its content are accessible and can be used only by the permanently employed staff of the establishment or the company. The so-called ‘casual labour’ are not supposed to use the first-aid materials. Immediately such a casual worker is hurt, he would be told by the employer to take his day’s due and go to the nearest dispensary, clinic, or hospital and not come back to the workplace until he is fully recovered. However, his job is not guaranteed even if he does return later.

The reason for this behaviour is that the names of such employees are not supposed to be found in the company’s employment records. If the name of an injured employee were found on the records, he might then be entitled to workman’s compensation claims. Since so many such accidents occur, there is a high possibility that the premium for the compensation insurance might go up. This would be another added cost that the employer would not wish to shoulder.

As concerns the provision of first-aid materials, it was found that the cost of replenishing one or two items that run out is not prohibitory. The employers would rather stock their first-aid boxes for ‘show’ to the officers of the Directorate of Occupational Health and Safety Services than stock them for use by the many employees (the casual labour) in their establishments.

Conclusion
Even though everybody is talking about the globalization of trade, manufacturing, and other related matters including occupational health and safety, in many parameters a developing country such as Kenya still has a long way to go in order to be comparable with countries in the industrialized world.

This study makes it blatantly obvious that so long as most of the Kenyan population are not meaningfully employed in any sort of income generating activity, the question of providing safe workplaces and safe conditions of work will be an expensive mirage. A poor and hungry man is not selective in terms of employment and is never attentive to instructions or training of any kind – be it on occupational health and safety or personal hygiene. Hence, by extension, if poverty is not eradicated from Kenya urgently, then it will destroy all the gains which had been made in the provision of safe and healthy places of work.

Literature

Charles B. Odhiambo
Directorate of Occupational Health & Safety Services
P.O. Box 85989
Mombasa
Kenya.
E-mail: nyawawa@hotmail.com