

# BARRIERS IN THE IMPLEMENTATION OF OCCUPATIONAL HEALTH AND SAFETY MANAGEMENT IN MSMEs OF SAS NAGAR

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## ABSTRACT

**Paper aims:** The main aim of this research is to determine the main barriers in the implementation of occupational health and safety management systems OHSMS in the MSMEs of SAS Nagar from the point of view of employer, worker and the supervisor.

**Research Method:** Survey is conducted with the stakeholders like employer, supervisor, workers of 3 MSMEs located in SAS district of Punjab who influence the safety culture in MSMEs as these stakeholders can directly help in identifying the main barriers in the implementation of OHSMS in MSMEs.

**Main findings of the Study:** Employer and supervisor tend to blame workers and the government for the barriers in the implementing OHSMS, and workers tend to blame management for the difficulties in the implementation of safety management systems.

**Implications for theory and practice:** The barriers in the implementation of the health and safety management should be overcome by following the safety practices in day to day working culture and improving the working conditions of the workplace to minimise the work accidents.

**Keywords:** Occupational Health and Safety Management System, Barriers, Workplace Accidents

## 1. INTRODUCTION

The MSMEs are an important sector of industry across the globe in terms of contribution to employment generation and economic growth. Micro small and Medium Enterprises (MSMEs) play a major role in the development of economies, particularly in developing countries like India. MSMEs account for the majority of businesses worldwide and are important contributors to job creation and global economic development of any country. These numbers are significantly higher when informal SMEs are included. In India, the MSME sector contributes 30% to Gross Domestic Product (GDP) and 48% of the exports. Despite their crucial role for economic growth and development of the country, MSMEs often face considerable challenges to provide safe work environment to the employees. Employment in these enterprises is more often characterized by poor and unsafe working conditions, and low-quality and low-skilled jobs. Even if there is no single reliable source of information on the proportion of occupational accidents in MSMEs, a number of empirical studies show that MSMEs are more prone to higher occupational injury and fatality rates. Occupational accidents in MSMEs are much higher compared to those in large firms, as demonstrated by studies stressing the presence of a significant “size effect” – meaning that there is a higher incidence in small establishments than in larger ones. The work environment of MSMEs is more dangerous than that of large enterprises. Moreover, interventions to manage risks in small enterprises are ineffective because of few available resources and lack of solid management and awareness of work safety.

Efforts to prevent accidents and deaths are very important because of their relationship to the integrity of the human being and the survival rate of these companies. After doing all the efforts for implementing occupational health and safety measures there are so many barriers in the implementation of system properly from the point of view of employer and workers.

## 2. OBJECTIVES OF THE STUDY

- i. The main objective of the study is to find out the main barriers in occupational health and safety from the point of view of employer in MSMEs of SAS Nagar district of Punjab.

- ii. To study the barriers in the implementation of the occupational health and safety measures from the workers perspective in MSMEs.

### 3. Need of the Study

Although the policies are available at national level and state level for the safety of the workers but despite of that, there are so many problems in the implementation of occupational health and safety measures in the MSMEs. Many researchers have found that occupational health and safety management policies to focus mainly on larger enterprises, leaving out the large group of MSMEs which are part of informal sector. MSMEs are having heterogeneous nature like their geographical dispersion, lack of cohesive representation and relatively short life spans – all of which makes them difficult to target and consequently difficult to regulate and also to make sure that all the safety policies are properly executed in the MSMEs. In SAS Nagar district of Punjab, there is still a lack of reliable information and data on the annual deaths and injuries of workers in the workplace, due to under-reporting – especially among MSMEs which shows that there must be barriers in the compliance of health and safety policies. Despite of the fact, there are so many studies conducted in this regard but no study has been conducted for this region. Even when statistics on occupational accidents and diseases are available, the data provided are often not disaggregated by size of enterprise. Government institutions often lack adequate resources for ensuring OSH compliance in MSMEs.

### 4. METHODOLOGY

For the undertaken study, researcher has conducted the survey opinion not only of employer but also of workers responsible for workplace safety. Employer who are formally responsible for management of OHS in MSMEs. Data were collected through personal interviews from the workers of the organisation because most of the workers are not much educated. A sample survey of 3 MSMEs is conducted and a total of 3 owners, 15 supervisors, and 75 workers was taken as per requirement. Data were analysed separately for the owners and supervisors of MSMEs of small enterprises and for the employees. For the two groups, the mean and the standard deviation of the scores for each barrier were determined. Ten barriers with the highest average were selected for each group. The results of the two analyses were compared with each other and with those of other surveys. Data were collected through a Likert scale questionnaire, which is widely used to measure attitudes, opinions, and preferences.

- Barriers in the implementation of the occupational health and safety measures from the point of view of employer.

For the owners group, the main barriers are: Systematically wrong behaviour of personnel; Stringent legal requirements; Personnel inadequately involved in OHS activities; Bureaucracy in the legal system; Absent or ineffective information collection system; Lack of awareness of OHS relevance by workers; Absent or ineffective information; Absent or ineffective communication. Most of the main barriers, in the view of the owners, are related to the behaviour of employees; for example, the owners considered the inadequate behaviour, the inadequate involvement in OHS activities.

- Barriers in the implementation of the occupational health and safety measures from the point of view of workers.

Prioritization of production over safety; Management not adequately skilled about OSH; Inadequate dedication of economic resources; Inadequate OHS policy

**Table -Mean and standard deviation of responses.**

Barriers	Employers	Workers
1. Systematically wrong behaviour of management	3.47 (1.18)	4.29 (0.96)
2. Management not adequately skilled about OSH	3.24 (1.28)	3.81 (1.08)
3. Lack of knowledge of the criticalities of the company by management	3.34 (1.17)	4.00 (1.22)
4. Lack of knowledge of the effect of the interventions	3.18 (1.04)	4.00 (1.05)
5. Inadequate OHS policy	3.26 (1.20)	4.00 (1.00)
6. Personnel inadequately involved in OHS activities	3.55 (1.18)	3.95 (0.92)
7. Inadequate dedication of economic resources	3.24 (1.02)	4.05 (1.07)

8. Absent or ineffective communication	3.42 (1.22)	4.00 (0.84)
9. Absent or ineffective information	3.42 (1.20)	4.09 (1.09)
10. Prioritization of production over safety	3.39 (1.28)	4.33 (0.91)
11. Difficulty in planning the OHS activities	3.18 (1.16)	3.95 (0.92)
12. Systematically wrong behavior of personnel	3.68 (0.96)	3.86 (0.96)
13. Personnel not adequately skilled	3.29 (1.06)	3.81 (1.03)
14. Lack of knowledge of the criticalities of the company by workers	3.29 (1.04)	3.76 (1.04)
15. Lack of awareness of OHS relevance by workers	3.42 (1.18)	3.76 (1.04)
16. Lack of technical resources	3.34 (1.10)	4.19 (0.93)
17. Absent or ineffective information collection system	3.47 (1.06)	3.52 (1.03)
18. Stringent legal requirements	3.63 (1.05)	3.24 (1.34)
19. Bureaucracy in legal system	3.50 (0.98)	3.38 (1.32)
20. Behavior of trade unions	2.88 (1.20)	2.95 (1.40)
21. Lack of guidelines from controlling authorities	3.23 (1.12)	3.33 (1.28)

## 5. CONCLUSION

MSMEs have limited access to the required resources due to financial constraints. As a result, there are difficulties to be faced by the owners to implement the occupational health and safety measures. Employees are subject to many occupational health risks, which are difficult to prevent, especially when the owners apply management styles that are traditional in nature, egocentric and to external regulations and interventions.

Basically, MSMEs are characterized by personal and informal management by the owner, independence, limited market share, high resource constraints, operation under extreme financial pressure, high start costs, profitability, and high potential to failure - short life cycle. One of the reasons for not implementing OHSMS in small enterprises is the very high investment required; thus, the system is perceived by the owners to have superfluous cost with unattractive benefits.

The commitment of the owner and the participation of workers go hand in hand; thus, initiatives should be simple, short, clear, related to tangible tasks, and easily adaptable to existing organizational structures because of low qualification and constraints in budget, personnel and time. Occupational health and safety conditions in MSMEs of SAS district of punjab can be characterized by the high rates of work-related accidents reported in official statistics. These conditions undermine corporate performance, destruct company images, and incur high social and financial costs. These indices are only a reflection of the poor OHS management and the lack of public policies aimed at this sector. The situation is worse in MSMEs mainly due to their financial, technical, and personal constraints.

Need to address the poor workplace conditions of MSMEs, but the effective implementation of occupational and safety measures faces several barriers from both the employer side as well as employee side. These barriers should be identified to be overcome. Employer and supervisor tend to blame employees and government for difficulty in implementing OHSMS and perceive systematically inadequate behaviour of workers, strict legislation, bureaucracy, inadequate employee involvement in OHS activities, and lack of awareness of OHS relevance by employees as main barriers. Workers tend to blame management and resource allocation for this difficulty; their perceived main barriers are difficulty in obtaining authorizations, lack of organizational coherence and flexibility, lack of technical resources, inadequate dedication of financial resources, inadequate OHS policy, and lack of knowledge about the effects of OHS interventions by management.

## 6. Safety intervention programmes for the MSMEs.

It has been observed that the adequate and effective OHS resources and support in MSMEs have not generally been provided. In the literature identification of problems and challenges faced by employers, workers, enforcement agencies and researchers in relation to the development and implementation of OHS

interventions has been found. There is a general consensus that safety intervention models developed for larger companies are ineffective with MSMEs and that difficulties contacting micro and smaller enterprises, their geographical dispersal and their short life spans, have all helped ensure that they have been left more or less to their own safety policies and not complying with the policies made by the Government.. A variety of models and preventive approaches have been developed at the international and national levels for use with small enterprises, the most common being the use of different types of checklists, implementation of OHS management systems and other preventive programmes. It has been suggested that the most successful methods appear to be tailored, action-oriented, low-cost approaches, combining health and safety with other management goals, and based on trust, participation and dialogue. Other approaches include: training and educational interventions, engineering and industrial hygiene interventions, a combination of industrial hygiene, health promotion and behavioural interventions and enforcement. Interventions need to take the characteristics of the owner-manager into account Thus, interventions also need to help the owner-manager maintain an identity as a good employer and therefore avoid criticism of the enterprise, contribute to employee satisfaction, set standards for an acceptable working environment that can be accepted by peers in the industry sector and increase legitimacy among industry sector stakeholders. the main drivers for this as: positive management and worker attitude towards health and safety, availability of guidelines, involvement of management in the production process, availability of economic resources, communication. The model takes its onset in a legislative standard that is built into intervention programmes including three instrument pillars: inspection to enhance compliance, recognition of the standard by the stakeholders in the industry sector and dissemination of information to small enterprises. These three instruments create the mechanisms, within their particular contexts, that should encourage the owner-manager to pursue the standards: express societal legitimacy, signals of social acceptance and, provision of knowledge about the consequences of implementing or not implementing improvements. Since MSMEs are so numerous, geographically dispersed and diverse, one of the largest challenges is reaching MSMEs with interventions. The standards need to be described and communicated through regulation, including inspections that address specific health and safety issues, provide specific advice to solve the issues, be based on a dialogue with the owner-manager, and involve the social partners in the industry to secure legitimacy, implement ability and responsibility for support of the standards. The support system needs to provide specific tools (not risk assessment tools) that provide concrete/specific solutions that are integrated into business strategies and should be based on a variety of different types of intermediaries that have personal contact to the owner managers and understand the business context. Some of the most recent research has started to look more thoroughly at how different intermediaries can be used and what strategies should be applied to engage them. MSMEs are influenced by a range of stakeholders in both their internal and external environments. Key stakeholder groups that influence OHS management in MSMEs include: customer, enforcement agencies, health and safety professionals, insurance companies, suppliers, trade associations, chambers of commerce and vocational training institutions. Different factors encourage the different types of small business stakeholders, as mentioned above, to address OHS improvements via intervention programmes. Thus, interventions not only need to address the characteristics of the MSMEs but also of the intermediaries who deliver the interventions to the SMEs. a better OHS intermediary could be characterised by: their commitment to align OHS activities with their business interests, already being engaged in delivering OHS products and services, seeking new ways of providing goods and services to small enterprises, being connected to small businesses through formal, informal or interpersonal relationships and, being innovative.

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