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Assessment of Health and Safety Provisions for Lecturers in Rivers and Bayelsa State

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ABSTRACT
This study assessed the health and safety practices for lecturers in universities in Rivers and Bayelsa States of Nigeria. Five research questions and four null hypotheses guided the study. The Analytic descriptive survey research design was adopted in the study. The population of the study was 3,343 lecturers from the five universities in the two States. This comprised 806 from Bayelsa from the five universities; and 2531 from Rivers State with three universities. The sample size of 385 was used for the study drawn using the stratified random sampling technique. Instrument for data collection was the researcher's structured questionnaire that was face and content validated by three validates. An overall reliability index of 0.83 was obtained using the Cronbach Alpha Method. The mean was used to answer the research questions, while the one-way analysis of variance (ANOVA) was used to test the null hypotheses at the probability level of 0.05. Findings among others revealed availability of health and safety and facilities in Rivers and Bayelsa was low. Based on the findings, it was recommended that the awareness of health and safety practices among lecturers seems high, management of the various institutions should employ the services of trained safety personnel to sensitize staff on the relevance of health and safety policies in the university with the use of static and electronic media and the management of the university in conjunction with education ministry should constitute functional disciplinary committee on safety that will help in ensuring safety compliance of health and safety practices for lecturers' campaigns on health and safety policies be organized by the management of the institutions through the use of electronic and static media.
Keywords: Safety Awareness, Health Practices, Health and Safety Facilities

INTRODUCTION

Every organisation whether profit or non – profit oriented strives to achieve its corporate objectives. Achieving these objectives to a large extent depend on a competent workforce with established safety and health culture and practices. This invariably means that a successful safety system should be practice–based. This further underscores the need for the establishment of safety and health policies in the organisation. The importance of safety practices in an organisation may have contributed to an effective safety system management geared at management commitment to occupational health and safety assignment of responsibility, occupation safety and health procedures, occupational health and safety communication, mechanisms, hazard identification, prevention and control; accident investigation, occupational health and safety training, documentation and evaluation of programme effectiveness.

The word 'safety' denotes a condition of being secured from envisaged danger, risk or injury. It is also the state of one being protected from harm or other negative consequences. This means that any action that is performed in an organisation that exposes the individual to risk is said to be harmful, unsafe and hazardous. Health, on the other hand is concerned with the individual's all round physical, mental and social wellbeing. It is the soundness of the individual's physical and mental aspects. Similarly, practices are activities that encapsulate a course of actions and procedures directed to organisations. These practices provide an overall guide that specify the limit and direction to which the organisation operates.

Despite the importance of preventing occupational injuries, which is a function of health and safety policy, work-related diseases, injuries and accidents have been on the increase. It is therefore not

surprising that the starting point for developing and implementing a safety management system lies on explicitly stated safety practice.

Extent of Awareness of Health and Safety Practices

Awareness of health and safety practices is very important in every organisation. Employees are provided with opportunity to adequately understand the practices surrounding the organisation. It is identifiable that one of the major causes of not being able to control occupational injuries is the limited knowledge and perception of the importance of occupational safety and health in employers and employees as Hu et al (1998) noted that work-related injuries and accidents were significantly associated with insufficient knowledge and unsafe behaviours for both employers and employees. The concept of awareness ordinarily can be categorised into six. The activity awareness as one form of awareness is concerned with the past, present and future of an object. It is the state of the art in a particular area of interest. With regard to health and safety policies, Anyanwu, Akaraula and Nwaogazie (2016) observed that there is an average level of awareness with low implementation practice among respondents. This finding however relates to a study on evaluation of fire safety management in a higher education institution which was the areas of interest, thus depicting activity awareness.

Another form of awareness is cultural. It refers to a person's knowledge and perceptions about foreign cultures, their values, beliefs and perceptions. In this instance, the occupational health and safety needs of employees in an organisation is some of the attributes in this form of awareness. In line with this, Akinwale and Olusanya (2016) reported that changes at the workplace have overshadowed the traditional approach to safety, thereby expanding the scope of occupational hazards. They added that Africans have witnessed high rates of occupational hazard in different organisations. In addition, Treiber (2005) averred that the number of accidents is much higher in Africa compared to situation in Europe and North America. This form of awareness is culture-based since ideas and activities are predominantly in a specified culture. Similarly, social awareness is another form of awareness. This form of awareness describes the things people become conscious of in a social context. It helps to minimise unwanted interruption and disturbances of individual work as co-workers. In this instance, management in every organisation performs the task of disseminating, educating and alerting employees on the relevance of different practices, in which case, health and safety practices. However, Olutuase (2014) in a study discovered that the company does not adequately and timely supply personal protective equipment to employees, thus, exposing the workers to risk. Even where management and staff are aware of personal protection and provide safety and health equipment, they are likely to be less aware of their responsibility in minimizing injuries and accidents in the workplace.

Similarly, workplace awareness is identified as another form of awareness. This awareness refers to knowledge about the workplace design and job characteristics of co-workers. It is however related to other forms and aspects of awareness. This may have informed Njeru (2014) to state that an effective Occupational Safety and Health Management System (OHSMS) promotes consultation in the workplace and engages employees and other stakeholders in safety and health processes and issues. With regard to location awareness which is a form of awareness, this is also referred to as location-based awareness. It is the physical location of an object. In this form of awareness, Efiok, Oluseye, Uduak and Olalekan (2015) observed that workers perception of safety in the work place may be positive, negative or neutral. They added that when learned and appropriately internalised, safety culture creates a climate that influences how well people plan, communicate and make decisions concerning their health and safety.

In terms of knowledge awareness, it is the ability of a person to judge another person's knowledge about a given object. This is another form of awareness. In the context of this study, the practice of health and safety practices in a given locality may be compared with those outside the locality, and even different organisations. The idea surrounding this comparison is to identify areas of deficiency and possibly identify strategies for improving them. Idubor and Oisamoje (2013) rightly observed that the standard of occupational health and safety in Nigeria is weak and that even where there is compliance, is only meeting the minimum requirement. Hence, the awareness of health and safety practices in organisation is an attribute of action by both the management as well as the employees to respond to a given circumstance in the environment. Promotion of employers' awareness of OHS in

small sized industries in particular, is warranted to enhance better compliance, and a focus for these efforts is identified by this investigation.

Provision of Health and Safety Facilities

In all organisations including institutions of learning, the health and safety of employers and employees have been conceived as a matter of concern. It is therefore not surprising that the quality and quantity of the school physical work environment may have serious effects on the health and productivity of academic staff (Akinditure, 2011).Writing on this, Armstrong (2009) indicated that health and safety policies are concerned with the protection of the organisation employees from hazard at work and to indicate how this protection will be provided. The Labour Safety, Health and Welfare Bill of 2012 and the Factory Act of 2004 emphasizes sufficient and suitable lighting, whether natural or artificial, in every part of a work environment where work activities are being undertaken; all artificial lights used in the work place are placed and shaded so no employee or student is subjected to avoidable glare; windows and skylights used for the lighting of work spaces at the school are as reasonably as possible kept free from obstruction, and clean on both sides, unless for the purposes of reducing heat or glare, they are provided with a blind, shade, curtain or other shading material.

Apart from physical facilities for enhancing lecturer's productivity, lecturers are seen as major determinant of any educative process in universities. This is not unconnected with the fact that the state of physical facilities has the tendency of influencing staff behaviour positively or negatively. To this end, Owuamanam (2005) noted that the availability of these facilities will enhance integrity of academic activities and productivity of the staff. In a related development, Tafida (2000) indicated that the lack of enthusiasm and professional commitment of academic staff in universities is associated with the poor state of the school physical work environment. This implies that the state of physical facilities in universities can be a great source of motivation to lecturers, while its inadequacy is a source of disenchantment and frustration on them.

With regard to research, Lertputtarak (2008) reported that it provides an important background for academic staff to become successful lecturers. In addition, it enhances the quality of teaching effectiveness and reinforces many of the skills that are required for effective teaching. Apart from competence in professional duties, Joyce (2006) noted that research and publications are compulsory indices or indicators of assessment of academic productivity of lecturers. This idea corroborates with Haliso and Toyosi (2013) that lecturer's role depends on the quality information used. It further presupposes that adequate and appropriate library facilities are necessities to avoiding under productivity among lecturers.

Statement of the Problem

It is evident from the background that the implementation of health and safety practices is of vital importance in effective service delivery in universities. However, available literature and studies on health and safety practices has not revealed the level of its practice by lecturers in the universities when compared with industries despite the Labour Safety, Health and Welfare Bill of 2012, and other related Acts which aim at protecting the health and safety of the Nigerian workers. This uncertainty of the level of the practices has resulted to several empirical studies by scholars to ascertain the extent of its implementation in various organisations in Nigeria. Similarly, since the provision of Labour Safety, Health and Welfare bill of 2012 and other related Acts that were aimed at protecting the health and safety of Nigeria workers vis-a-vis improved performance of employees in their various organisations, the practice seems not to be assessed in universities in Rivers and Bayelsa States. This is evident on the poor attitude of employees on safety and health related issues and the increased rate of work-related diseases, injuries and accidents. Hence, the need to assess the health and safety practices in universities in Rivers and Bayelsa States. The problem of this study therefore was to assess the health and safety practices in universities in Rivers and Bayelsa States, Nigeria.

Aim and Objectives of the Study

The study assessed the health and safety practices for lecturers in universities in Rivers and Bayelsa States in Nigeria.

The objectives were specifically to ascertain:

1. The extent of awareness of health and safety practices by lecturers in universities in Rivers and Bayelsa States.

2. The extent to which health and safety facilities are provided for lecturers in universities in Rivers and Bayelsa States.

Research Questions

The study was guided by these questions

1 What is the extent of awareness of health and safety practices by lecturers in universities in Rivers and Bayelsa States?
2 What is the extent to which health and safety facilities are provided for lecturers in universities in Rivers and Bayelsa States?

Hypotheses

The following null hypotheses were formulated and tested at 0.05 level of significance:

1 $Ho_{1:}$ There is no significant difference in the mean ratings of lecturers on the extent of awareness of health and safety practices amongst universities in Rivers and Bayelsa state.
2 $Ho_{2:}$ There is no significant difference in the mean ratings of lecturers on the extent to which health and safety facilities are provided amongst universities in Rivers and Bayelsa state.

METHODOLOGY

This study adopted an analytic descriptive survey design. Analytic descriptive survey is a type of descriptive survey that not only describes certain characteristics of the sample as they are at the time of study but, goes further to compare for the various strata of the sample through the use of hypothesis (Nwankwo, 2013).

The present study is an analytic descriptive design is considered most appropriate for the study since the researcher exploited the information that was obtained from the respondents in drawing inference of the current state of what is being studied, which were described without manipulation of any variable. The population of the study included the five public universities in Rivers and Bayelsa states with a corresponding population of 3,343 lecturers. A breakdown of the population shows there were 806 from Bayelsa State with two universities; and 2,537 from Rivers State with three universities. Further breakdown of the population is as follows: University of Port Harcourt 1392, Rivers State University 724, Niger Delta University 550, Ignatius Ajuru University of education 421, Federal University, Otuoke 256. (Source: Personnel (Academic) Unit of the various universities, 2017).

A sample size of 385 lecturers was chosen for the study using Taro Yamen's formula to determine the minimum sample size. The researcher employed a proportional stratified random sampling technique. The stratified random sampling technique was used to select the sample from each stratum in the various universities. The research instruments for the study are in two sections. Section A contains demographic information of the respondents while B contains questionnaire titled, "Assessment of Health and Safety Practices Questionnaire" (AHSPQ) using Likert modified scale of 4 -point scale of very high extent (4-points), high extent (3-points), low extent (2-points) and very low extent (1-point). The reliability index of 0.83 was obtained using Cronbach Alpha method. Data collected from the respondents were analysed using mean scores to answer all the research questions, while the One-way Analysis of Variance (ANOVA) was used to test the four null hypotheses at 0.05 level of significance.

RESULTS AND DISCUSSION

Research Question 1 *What is the extent of awareness of health and safety practices by lecturers in universities in Rivers and Bayelsa States?*

Table 1.1: Awareness of health and safety practices by lecturers in universities in Rivers and Bayelsa state

S/NO	ITEMS	MEAN	SD	DECISION
1	Regular check-up of lecturers to keep fit	2.77	.820	Accepted
2	Reporting of broken facilities to authorities	2.94	.743	Accepted
3	Demanding for compensation for sustaining injury while on active service	2.62	.744	Accepted
4	Use of appropriate safety gadgets during practical sessions where necessary	2.79	.777	Accepted
5	Prompt application of first aid when accident occurs	2.77	.791	Accepted
6	Delivery of lectures in a conducive learning environment	3.06	.838	Accepted
7	Prompt reporting of accident to management	2.88	.717	Accepted
8	Demand for health and safety benefits from university management	2.57	.719	Accepted
9	Insisting on provision of decent environment for teaching	2.66	.786	Accepted
10	Requesting the assistance of the management in replacement of safety gadget in the classroom	2.57	.742	Accepted

CRITERION MEAN(X) = 2.5 **Average Mean= 2.76**

Note: In the above table, the decision of **"Rejected"** means that the respondents did not agree with the item statement (which is below the criterion mean of **2.5** or is of a low extent) while **"Accepted"** means that the respondents agree with the item statement to a high extent (which is above the criterion mean of **2.5**). This is well explained as follows: clusters B- E with mean scores of 3.50 – 4.00 (very high extent); 2.50 – 3.49 (high extent); 2.00 – 2.49 (low extent) and 1.00 – 1.99 (very low extent). Therefore, based on the average mean of 2.76 which is above the criterion mean of 2.5, it was noticed from Table 1.1 that the lecturers accepted all the item statements and thus, showed a high extent of awareness to health and safety practices. This means that lecturers are not ignorant of health and safety practices needed in the university environment.

Research Question 2: *What is the extent to which health and safety facilities are provided for lecturers in universities in Rivers and Bayelsa States?*

Table 2.2: Provision of health and safety facilities for lecturers in universities in Rivers and Bayelsa state

S/NO	ITEMS	MEAN	SD	DECISION
11	Safety materials are provided in classrooms	2.48	.714	Rejected
12	Medical services are provided for increased performance	2.68	.730	Accepted
13	Conducive classrooms are provided for enhanced performance	2.62	.762	Accepted
14	First aid box is provided in classrooms	2.45	.740	Rejected
15	Safety gadgets are provided in the classroom in cases of emergency	2.41	.721	Rejected
16	Caution signs are provided for adherence	2.47	.788	Rejected
17	Teaching aids that require precautionary measures are strategically kept in the classrooms	2.43	.727	Rejected
18	Electricity is provided in classroom for enhanced academic activities	2.46	.798	Rejected
19	Offices of lecturers are equipped with safety gadgets	2.38	.761	Rejected
20	Ambulances are strategically positioned for rescue missions of employees	2.27	.766	Rejected
	CRITERION MEAN(X) = 2.5	**Average Mean= 2.46**		

From the average mean of 2.46 which is below the criterion mean of 2.5, it was noticed from table 2.2 that the lecturers accepted only two items (items 12 and 13) and rejected eight items, thus, showing an unacceptable or low extent to which health and safety facilities are provided for lecturers in universities in Rivers and Bayelsa States. However, the lecturers agreed to a high extent that they are provided with 'medical services' and 'conducive classrooms' for increased performance (items 12 and 13 respectively).

Hypothesis 1: There is no significant difference in the mean ratings of lecturers on the extent of awareness of health and safety practices amongst universities in Rivers and Bayelsa

Table 1.3a: Mean rating for extent of awareness of health and safety practices amongst universities in Rivers and Bayelsa

Universities	N	Mean	Std. Deviation	Std. Error
UNIPORT	146	2.6110	.48182	.03988
RSU	78	3.1282	.44163	.05000
IAUOE	49	2.9959	.19468	.02781
NDU	61	2.5525	.27240	.03488
FU-OTUOKE	28	2.5786	.29609	.05596
Total	**362**	**2.7622**	.46307	.02434

Table 1.3b: ANOVA summary for difference in the extent of awareness of health and safety practices amongst universities in Rivers and Bayelsa

Sources of Variation	Sum of Squares	Df	Mean Square	F	Sig.	Decision
Between Groups	20.093	4	5.023	31.286	.000	**Significant,** P< 0.05.
Within Groups	57.319	357	.161			
Total	77.412	361				

The average mean rating (mean of 2.76 which is above the criterion mean of 2.5) from table 1.3a showed that there is a high extent of awareness of health and safety practices amongst universities in Rivers and Bayelsa.

However, one-way Analysis of Variance (ANOVA) was used to test if a significant difference exists in the mean ratings of lecturers on the extent of awareness of health and safety practices amongst universities in Rivers and Bayelsa.

Results from table 1.3b above shows that computed ANOVA (F) at df (4, 357) is 31.29, with a P value (0.00) lower than the chosen alpha (P< 0.05); thus, the null hypothesis is rejected. This means that there is a significant difference in the mean ratings of lecturers on the extent of awareness of health and safety practices amongst universities in Rivers and Bayelsa.

Hypothesis 2: There is no significant difference in the mean ratings of lecturers on the extent to which health and safety facilities are provided amongst universities in Rivers and Bayelsa state.

Table 1.4a: Mean rating on the extent to which health and safety facilities are provided amongst universities in Rivers and Bayelsa

Universities	**N**	**Mean**	**Std. Deviation**	**Std. Error**
UNIPORT	146	**2.2171**	.44075	.03648
RSU	78	2.8577	.52137	.05903
IAUOE	49	2.5163	.16118	.02303
NDU	61	2.5213	.30447	.03898
FU-OTUOKE	28	**2.4536**	.35117	.06636
Total	**362**	**2.4652**	.47240	.02483

Table 1.4b: ANOVA summary for difference in the extent to which health and safety facilities are provided amongst universities in Rivers and Bayelsa

Sources of Variation	Sum of Squares	Df	Mean Square	F	Sig.	Decision
Between Groups	21.325	4	5.331	32.130	.000	**Significant,** P< 0.05.
Within Groups	59.236	357	.166			
Total	80.561	361				

The average mean rating (mean of 2.46 which is below the criterion mean of 2.5) from table 1.4a showed that there is a low extent to which health and safety facilities are provided amongst universities in Rivers and Bayelsa. Specifically, two out of the five universities in Rivers and Bayelsa recorded a low extent to which health and safety facilities are provided. They are university of Port Harcourt (X= 2.217) and Federal University Otuoke (X= 2.45).

However, one-way Analysis of Variance (ANOVA) was used to test if a significant difference exists in the mean ratings of lecturers on the extent to which health and safety facilities are provided amongst universities in Rivers and Bayelsa. Results from table 1.4b above showed that computed

ANOVA (F) at df (4, 357) is 32.13, with a P value (0.00) lower than the chosen alpha (P< 0.05); thus, the null hypothesis is rejected. This means that there is a significant difference in the mean ratings of lecturers on the extent to which health and safety facilities are provided amongst universities in Rivers and Bayelsa.

DISCUSSION OF FINDINGS

Extent of Awareness of Health and Safety Practices amongst Universities

The result of the study states that there is a high extent of awareness of health and safety practices amongst universities in Rivers and Bayelsa states. Also, the hypothesis states that there is a significant difference in the mean ratings of lecturers on the extent of awareness of health and safety practices amongst universities in Rivers and Bayelsa state. This means that the extent of awareness of health and safety practices (though high) differ amongst the universities in Rivers and Bayelsa state. The result from the research question implies that the respondents have full knowledge of health and safety practices in the university system. To very high extent they agreed to all the item statements, some of which include: 'regular check-up of lecturers to keep fit', reporting of broken facilities to authorities, demanding for compensation for sustaining injury while on active service, use of appropriate safety gadgets during practical sessions where necessary, delivery of lectures in a conducive learning environment, prompt reporting of accident to management etc. This result is in agreement to Efiok, Oluseye, Uduak and Olalekan (2015), their findings revealed that the level of awareness of safety induction by employees was high. Similarly, Lawrence (2010) conducted a study titled; the extent of compliance with occupational safety and health regulations at registered workplaces in Nairobi. Findings revealed that 90% of the respondents were aware of the existence of the occupational safety and health Act, 2007.

However, in disagreement to the present findings, Windapo and Oladapo (2012) indicated that there is lack of awareness in most developing countries such as Nigeria for OHS regulations and practice. The absence of information or awareness makes the OHS ineffective and thus, manual impact on the employees. Also, Anyawu, Akaranta and Nwaogazie (2016) revealed an average level of awareness and a low implementation/practice amongst the respondents.

Provision of Health and Safety Facilities in Universities

The third result of the study states that there is a low extent to which health and safety facilities are provided for lecturers in universities in Rivers and Bayelsa states. Also, there is a significant difference in the mean ratings of lecturers on the extent to which health and safety facilities are provided amongst universities in Rivers and Bayelsa state. This means that the extent to which health and safety facilities are provided is low, and differ amongst the universities in Rivers and Bayelsa state. The lecturers accepted only two items, 'medical services are provided for increased performance' and 'conducive classrooms are provided for enhanced performance', and rejected eight items, 'safety materials are provided in classrooms, first aid box is provided in classrooms, safety gadgets are provided in the classrooms in cases of emergency, caution signs are provided for adherence, teaching aids that require precautionary measures are strategically kept in the classrooms, electricity is provided in classroom for enhanced academic activities, offices of lecturers are equipped with safety gadgets, ambulances are strategically positioned for rescue missions of employees'. Thus, showing an unacceptable or low extent to which health and safety facilities are provided for lecturers in universities in Rivers and Bayelsa States. However, the lecturers agreed to a high extent that they are provided with 'medical services' and 'conducive classrooms' for increased performance. This result is in agreement to Ejiogu, Nwachukwu and Madu (2016), and Anyawu, Akaranta and Nwaogazie (2016) that the safety status of classrooms and sanitation facilities were low and there is an average level of awareness and a low implementation/practice amongst the respondents. This result further agrees with Hu, Lee, Shiao, and Guo (1997), which showed that the employers were better aware of their responsibility for posting safety warnings, personal protection and providing safety and health equipment.

CONCLUSION

The study concluded that health and safety practices are available for lecturers in universities in Rivers and Bayelsa States.

RECOMMENDATIONS

The following recommendations were made based on the findings**:**

1. Though the awareness of health and safety practices among lecturers seems high, management of the various institutions should employ the services of trained safety personnel to sensitize staff on the relevance of health and safety policies in the university with the use of static and electronic media.
2. The management of the university in conjunction with education ministry should constitute functional disciplinary committee on safety that will help in ensuring safety compliance of health and safety practices for lecturers'.

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