

---

# Training for Occupational Safety and Health

*Fareed Abdullah*

The focus of a national drive for Training for Occupational Safety and Health (OSH), this article argues, should be on increasing awareness and training workers on the shopfloor, rather than training highly skilled medical and nursing staff. The demand for these latter personnel will grow naturally with an increase in the awareness of OSH.

## Training for OSH

Once a democratic government is elected into office, the possibilities of making meaningful inroads into the improvement of OSH become real and we need to encourage the discussion on future strategies. Profound changes in OSH will require the personnel and skills for the implementation of these strategies. The subject of training these OHS personnel is addressed in this article.

There are three levels of training for OSH. The most obvious of these is that of training OSH professionals, that is, doctors, nurses, hygienists, physiotherapists, speech therapists, ergonomists, safety professionals, safety engineers and occupational therapists, all of whom have an important role to play in the provision of OSH care for South African workers.

Another level at which training in OSH takes place is on the shopfloor, a task which includes:

- improving the general awareness of OSH in the workplace;
- training of health and safety representatives;
- training of workers and management in OSH;
- training of safety engineers and technicians; and
- the training of medical, nursing and allied staff

A third level at which training needs to be considered for occupational health is at the level of policy makers in the state, in companies and in trade unions as well as other bodies engaged in the development and evaluation of occupational safety and health policies. These policy makers require a specific set of skills to enable them to assist with the determination of OSH policies. However, we will not deal with the training of this group of individuals in this article.



Workers need to have sufficient knowledge of OSH in their workplace to effectively demand better conditions. *Photo: Karen Hurt*

A criticism which relates to the course content of the NOSA training programme is that it tends to focus on machines and machine safety rather than the modern industrial work process. Its teaching methodology is old-fashioned and deals mainly with technical points of OSH legislation, rather than on the recognition of hazards and improvement of health and safety conditions in workplaces.

Whilst NOSA has played a role in occupational safety, claims that it is leading the world on health and safety training appear to be a little far fetched. On the whole, awareness and general knowledge of health and safety in South African workplaces is low. Health and safety standards in our workplaces are nowhere near

acceptable, and there is a need for a national drive to improve health and safety conditions.

A small amount of training is taking place through the independent trade union movement and service organizations linked to it. This training is more comprehensive and focuses on identifying safety and health hazards in the workplace and ways of improving these working conditions. Trainees at these programmes are often shop stewards with some influence on the shopfloor. On the whole, however, these individuals are lost to health and safety, either because they have no structured intervention to fit into or they are not appropriately located in the plant.

The solution to this problem lies in linking health and safety to broader education and training and job grading in the workplace. Together with progressive legislation, an infrastructure for effective measures to tackle OSH on the shopfloor can be established. Legislation and strong trade union organization is necessary for OSH improvements in our workplaces, but training is an important part of this drive. A new and creative model is needed for OSH training on the South African shopfloor. Training for OSH on the shopfloor should not be



OSH legislation must recognize hazards and improve health and safety conditions in the workplace. *Photo: Medico Health Project*

separated from education and training of workers in general; and proposals for the former must be made within a broad framework of the later.

The field of education and training for a new South Africa is vast and there are entire organizations and research projects dedicated to this investigation. We will not even attempt to summarize the issues involved. What is necessary for our purposes is to note that health and safety training on the shopfloor should not be isolated from broader strategies for education and training of workers.

## **NUMSA Model**

One such model is the NUMSA (National Union of Metalworkers of South Africa) proposal for education and training in the engineering industry. This is the first time that a proposal on education and training has a bearing on health and safety in the country. NUMSA revises and simplifies the system of grading in the engineering sector and proposes a modular system of job grading in the engineering sector. The proposals aim to develop a highly skilled workforce, with a broad base of knowledge and skills enabling it to perform a variety of tasks, including OSH. To make up for the backlogs in apartheid education the NUMSA proposals look to integrating adult basic education, the formal schooling system and tertiary institutions such as technikons and universities.

Job grading and salary scales would then be based on the level of training (the number and levels of modules completed by a worker). This introduces a financial incentive to workers to acquire training, especially in health and safety. Should the proposals be implemented, this will inject a new desire on the part of workers to train in health and safety. Health and safety would become a core concern in our workplaces.

This training should contribute to improving workers' status in the plant in terms of their job grades. Combined with a general health and safety awareness campaign nationally, such a body of workers trained in health and safety would have a remarkable impact on OSH.

These incentives together with effective legislation on health and safety is the way forward for advancing OSH on the shopfloor. It will serve to increase the general awareness of safety and health amongst workers and management but also provide plant specific OSH skills to some of the workers in the plant. This brings us to our next area of discussion; the training of professionals in OSH.

## **Training of Professionals**

Making recommendations for the training of occupational health professionals can become a fruitless exercise. Thus, the training of OSH professionals will take



It is a better idea to change the design of a machine to make it safe, rather than treat someone who is injured by such a machine. *Photo: unknown*

place only when there is an expressed need for it. Given the low level of awareness of OSH at present, the demand for professionals is limited. As workers' awareness of OSH increases so too will the demand for more skilled individuals increase.

Another important factor is that South African workers are more interested in the provision of basic PHC for themselves and their families rather than for a specialized occupational health care programme. This is because of the increasing cost of health care and medical aids. In a previous article, the author argued that PHC should be provided on site by employers, as a result of the collapse of the public health system (CH #33, Nov. 1990: Post apartheid OHSs - Policy Guidelines). *The greater need in workplaces is for doctors and nurses with a broader base of skills, rather than for those highly skilled in OSH.* A certain basic amount of training must be provided to medical and nursing staff who are located in the workplace, but care must be taken for appropriate training.

Training in OSH for hygienists, doctors and nurses in South Africa is limited and there is consequently a shortage of these professionals in the order in which they are mentioned. There is also a shortage of rehabilitation workers (physiotherapists and occupational therapists) who work in occupational health.

Only one South African university offers a Masters course in occupational

hygiene, and three other universities offer diplomas in occupational health for doctors. Most universities and nursing colleges offer a diploma in occupational health nursing. The short answer to this situation is that there is a need for more training of professionals in OSH. With more stringent legislation on the cards, the legal requirements for companies to provide improved OSH standards in their plants will increase the need for skilled occupational health professionals.

Undergraduate training of medical doctors in OSH is limited to a few hours of training in the entire six year programme. Graduates from medical schools emerge from these institutions of learning with no knowledge of the discipline of occupational medicine and a poor attitude to the discipline. Occupational medicine is relegated to the practice of completing forms for Workmen's Compensation. As a result, the bulk of occupational disease, which presents itself to general practitioners and hospital doctors, does not receive the attention that it deserves. We estimate that a large amount of occupational disease goes undiagnosed and unrecorded.

In the majority of factories where doctors are appointed on a part time basis, the focus is on non-occupational primary health care. This is mainly because workplace based services have to provide a service which is not provided by the state. A contributory factor is the absence of medical and nursing staff in OSH.

Whilst the training of medical personnel may have an important impact on the prevention of occupational illness, their main role is in the early detection and prevention of occupational illness. At present the vast majority of workplaces are not evaluated regularly for occupational hazards. Where this is being done, the services of engineers and laboratory or technically skilled workers are being used. There needs to be a major drive to train occupational hygienists throughout the country. Technikons and universities must introduce courses up to Masters level in industrial and occupational hygiene.

The curricula of engineers needs to investigate upgrading the health and safety components to them in all the major engineering disciplines. "To remove the hazard at the design stage" is the well known dictum of all occupational health workers, which should be applied. There are awesome challenges facing the occupational safety and health movement in South Africa. Training personnel and developing skills are crucial to the task of meeting those challenges.

*Fareed Abdullah works for the Industrial Health Research Group  
at the University of Cape Town*