OCCUPATIONAL HEALTH AND SAFETY PARADIGMS IN NIGERIA AND THE UNITED KINGDOM: A JURISPRUDENTIAL ENQUIRY*

Abstract
This work compares occupational health and safety measures in Nigeria and the UK. Occupational Health and Safety (OHS) plays a vital role in ensuring the well-being and productivity of workers across the globe. Nigeria and the United Kingdom (UK) are two countries with distinct socio-economic landscapes and regulatory frameworks governing OHS. This work found and argued that with the enactment of the Employees' Compensation Act (ECA) of 2010 in Nigeria, the health, safety and welfare of the Nigerian worker, at least per legislative activism, has been significantly protected and secured. This, by no means, does suggest that the ECA is an improvement-immune piece of legislation. This paper further found out, and argued, that the 'No Fault Principle' encapsulated in the ECA serves as a cure to the litigation defects of the Factories Act, 1987 and the Common Law principle on prove of breach of the duty of care owed the employee by the employer. It is recommended that the ECA should be amended to allow for latitude in the listing of emerging occupational diseases; and also called for collaboration among government agencies in enforcement of OHS standards. This work was conducted using the doctrinal method to compare and contrast OHS paradigms in Nigeria and the UK, examining legislative frameworks, enforcement mechanisms, cultural attitudes, and the impact of globalization on OHS paradigms in Nigeria.

Keywords: Occupational Health and Safety Paradigms, Compensation, Injuries, Nigeria, United Kingdom

1. Introduction

Nigeria, as a developing economy in sub-Saharan Africa, faces unique challenges in managing OHS due to factors such as rapid industrialization, informal employment practices, and resource constraints.[1] The Nigerian government has enacted legislations, such as the Factories Act of 1987, the Labour Act of 1974, the Employees' Compensation Act of 2010, etc. to regulate workplace safety and protect workers' rights. However, implementation gaps, enforcement challenges, and cultural attitudes toward safety pose significant barriers to achieving optimal OHS standards in Nigeria. The United Kingdom, with its established industrial base and robust regulatory framework, has made significant strides in promoting workplace safety and reducing occupational risks.[2] The Health and Safety at Work Act 1974 serves as the cornerstone of OHS legislation in the UK, emphasizing the importance of employer responsibilities, risk assessment, and employee participation in safety management. The Health and Safety Executive (HSE) plays a pivotal role in enforcing OHS regulations and ensuring compliance across all sectors of the economy. By conducting a comparative analysis of OHS paradigms in Nigeria and the United Kingdom, this study aims to identify key similarities, differences, challenges, and opportunities for improvement. Through an examination of legislative frameworks, enforcement mechanisms, and cultural attitudes, valuable insights can be gained to inform policy decisions, regulatory reforms, and best practices in OHS management. Furthermore, understanding the strengths and weaknesses of OHS systems in Nigeria and the UK can contribute to global efforts in enhancing workplace safety standards and protect workers' health and well-being. By sharing knowledge, exchanging experiences, and fostering collaboration between countries, we can strive towards a future where every worker enjoys a safe and healthy working environment, irrespective of geographical location or socio-economic status.

At the wake of the industrial revolution in the later part of the 18th century, various forms of workplace hazards, accidents, injuries, diseases, etc. became common place in factories, industries, and other workplaces. Because demand had become high, there was need for massive production, and this necessitated the need for more workforce. Women and children were recruited to work in factories and industries, and this was attended with expected industrial inexperience. These industrial hazards led to a lot of fatalities, as the inexperience of the workforce meant mishandling of appliances, gadgets, tools, equipment, and appliances. The capitalist owners of industries were propelled more by the desire to maximise profit, and not the safety, health and welfare of the employees. There was the need for state intervention for the protection of the populace who worked in factories and industries. In 1833, the British parliament enacted, for the first time, a legislation to regulate health and safety of workers in the UK known as the Factories Act, 1833. This became the first time that external intrusion into the *modus operandi* of factories and industries was witnessed. The Factories Act created the office of factory inspectors who were empowered to go into factories and ensure compliance with the provisions of the Act. Though strange to the employers, it was imperative for the health, safety and welfare of the workers. Being a former colony of Britain, Nigeria has imbibed a lot of occupational health and safety practices from UK. Today, the Labour Act, 1974, the Factories Act, 1987, and the Employees' Compensation Act, 2010 could be said to be the primary legislations that regulate occupational health and safety issues. Knowing fully well that Common Law doctrines are still applicable in Nigeria, the Common Law principles as it concerns OHS will still be applicable in Nigeria, but where there is statutory legislation on any legal position, the statutory legislation takes precedence over any Common Law principle that is inconsistent with the legislation. We shall then discus the various legislative frameworks that provide for OHS in Nigeria and the UK.

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[1] CO Okafor, 'Occupational Health and Safety Practices in Nigeria: Challenges and Prospects' (2018) *IJHSSI* 7, 4

[2] AR Hale, *Safety Culture and Risk Management in the Workplace: A UK Perspective* (Routledge 2019)

2. The Labour Act 1974

The Labour Act, 1974 provides generally for issues that relate to contract of employment, protection of wages, terms and conditions of employment, etc. *Prima facie,* this would suggest that the Labour Act will have nothing to do with OHS. However, the Act makes some provisions that deal with OHS in Section 66 of the Labour Act. This implies that even for industrial and agricultural areas that may not qualify as factories and premises for the purpose of the application of the provisions of the Factories Act, 1987, the Minister of Labour and Productivity can make OHS regulations that will apply in such labour health areas. Onyi-Ogelle and Promise have canvassed the position that 'It would appear from the provisions of s. 67 that the main purpose for which 'labour health areas' would be created under the Act is to ensure the health and safety of workers from contagious and infectious diseases, as well as work-related injuries and death in any industrial and agricultural undertaking situated in remote and isolated area'.[3] In the regulations in the schedule to the Act, copious provisions have been made on sanitation, accommodation, medical and surgical treatment of labourers by employers, feeding and care of injured and sick workers before they are taken to the hospital, and such regulations as per dispensaries and hospital for the accommodation and treatment of sick workers in such designated labour health areas.

At Common Law, the employer owes the employee duty of care at work, and in the course of work. However, the employee needs to prove that the employer is in breach of this duty before damages can be awarded against the employer for the employee. There are a number of defences open to the employer, at Common Law, to evade liability. One of such defences is the defence of 'common employment'. By legislative activism, section 12 of the Labour Act has abolished the application of such a defence in Nigeria. Accordingly, in the case of *N.T.C. Limited v. Agunanne*,[4] the Nigerian Supreme Court, with the verve and energy of the tenure of the language of the Labour Act, mercilessly abolished the application of the defence of common employment in Nigeria. Though the Labour Act dwelt more on issues bordering on protection of wages, terms and conditions of employment, and contract of employment, it also made bold and courageous provisions on OHS measures, with the attendant power of the Minister of Labour and Productivity to make regulations on OHS to operate in labour health areas (when so declared by him), and it is interesting to note that such workplaces which may not come under the contemplation of the Factories Act can still be guided by the OHS regulations that the Minister may make, upon being declared as 'labour health areas'. The legislation that is primarily dedicated to OHS measures, procedures, regulations, and enforcement is the Factories Act, 1974.

3. The Factories Act 1987

The Factories Act, 1987 represented a significant revision of the previous legislation in an attempt to meet contemporary OHS standards. Before the enactment of the 1987 Act, it was the Factories Act of 1956 that regulated OHS issues in Nigeria. The pre-independence legislation was infested with colonial vestiges, and archival contents that would not reflect modern day safety, health and welfare issues at workplaces. The 1987 Act repeals the 1956 Act. This Act provides the legal basis for ensuring workplace safety and health across various industrial sectors in the country. It outlines specific provisions related to hazard identification, risk assessment, and the provision of protective equipment for workers. Additionally, the Act mandates employers to maintain a safe working environment and take necessary measures to protect the health and safety of their employees. There are important features of the Factories Act that need to be highlighted. When juxtaposed with the repealed Factories Act of 1956, the Factories Act, 1987 would necessarily be commended for significantly modernising OHS standards, and expanding the spectrum and scope of workers who should benefit from the OHS standards provided for in the new law. However, the Factories Act, 1987 has been criticised for its limited coverage of categories of workers in Nigeria. Though the Act purports 'to provide for factory workers and wider spectrum of workers and other professionals exposed to occupational hazards, but for whom no adequate provisions had been formerly made', the class of workers to whom its provisions apply is rather limited. The provisions of the Act apply to factory workers, *mutatis mutandis*. Though the factory is not defined in the interpretation section of the Act, s. 87 defines a factory as follows:

> 87(1) Subject to the provisions of this section, the expression 'factory' means any premises in which or within which or within the close or curtilage or precincts of which one person is, or more persons are, employed in any processes for or incidental to any of the following purposes, namely:
>
> (a) the making of any article or of part of any article, or
>
> (b) the altering, repairing, ornamenting, finishing, cleaning or washing, or the breaking up or demolition of any article; or
>
> (c) the adapting for sale of any article,
>
> being premises in which, or within the close or curtilage or precincts of which, the work is carried on by way of trade or for purposes of gain and to or over which the employer of the person or persons employed therein has right of access or control.[5]

[3] HO Onyi-Ogelle, and P Green 'Revisiting the Legal Framework of Safety at Work and Compensation for Injuries in Nigeria' (2023) *NAUJILJ* 14, 2

[4] (1995) 5 NWLR (Part 397) at 541.

[5] S. 87 of the Factories Act, 1987.

The definition continued in the remaining paragraphs and subsections by enumerating workplaces and premises included in the definition of a factory. To qualify as a factory, some premises needs the employment of ten or more persons.[6] This definition of a factory already delimits the category of workers and professionals to whom the provisions of the Act will apply.

In another breadth, the Factories Act, 1987 enumerates specific diseases which it termed industrial diseases to which the Act applies. The International Labour Organisation (ILO) Recommendation 194[7] identifies a long list of diseases which it recognises as occupational diseases. The Factories Act's list of diseases contained in the schedule to the Act is a far cry from the diseases listed in the ILO Recommendation 194 of 2002 and revised in 2010. The danger in specifying the 18 diseases to the schedule of the Factories Act is that the legal principle of *expressio unius est exlusio alterius*, whereby the express mention of the industrial diseases therein will imply the outright exclusion of all others. Just as the Act gives the Minister of Labour and Productivity the liberty to, from time to time, make regulations for application in labour health areas, etc. the Act should have been crafted in a similar manner, to allow for periodic review of the list of industrial diseases. In the way it is now, it will only take the rigours of parliamentary review to add or subtract from the list of industrial diseases contained in the Act.

Another feature of the Factories Act worthy of mention is the penalties stipulated for perpetrators of violations of the provisions of the Act. It would be understandable to say that the penal provisions as per payment of fines, when put in the context of the year of enactment of the Act, were very stiff and harsh enough to deter potential violators. Those penal provisions today have fallen completely out of tune with present day prevailing socio- economic realities. S. 71 of the Act is ostensibly ridiculous in present day circumstances. More ridiculous is the fact that the victim of an occupational injury, or the dependent(s) of a deceased factory worker is treated with ignominy and levity by the Act, as s. 71 even allows his/her welfare to the discretion of the court. Some scholars have argued that the Factories Act aims at preventive rather than punitive measures in order to safeguard the worker.[8] Be that as it may, it is imperative that the Act should be amended to suit prevailing realities. Though the Factories Act, 1987 is heavily criticised by learned authors, many are of the view that most of the shortcomings of the Factories Act were ameliorated by the Employees' Compensation Act, 2010.

4. The Employees' Compensation Act 2010

In Nigeria, from colonial times, there have been efforts to address the issue of compensation to employees who suffer occupational mishaps. The first legislation in that respect in Nigeria was the Workmen Compensation Ordinance of 1941. This Ordinance was in *pari materia* with the British Workmen Compensation Act, 1879. The Workmen Compensation Ordinance was replaced with the Workmen Compensation Act, 1958. These two legislations that regulated compensation for injuries, diseases and/or death arising from an employee's nature of employment or in the course of his/her employment were colonial instruments that operated during pre-independence Nigeria. The Workmen Compensation Act, 1958 remained in operation for about 52 years until 2010 when the current Employee Compensation Act was enacted. Given the anachronistic status that the 1958 Workmen Compensation Act (WCA) had assumed, the Employee Compensation Act, 2010 came as a welcome and healthy development. So, while the name of the ECA may suggest that the primary purpose of the Act borders on issues of compensation, s. 1(f) makes it clear that the Act also provides for 'combine efforts and resources of relevant stakeholders for prevention of workplace disabilities, including the enforcement of occupational safety and health standards'.

Worthy of note in the ECA is the fact that the spectrum of workers/employees the Act covers has been significantly broadened. In this broad understanding, the Act defines the employee as 'a person employed by an employer under oral or written contract of employment whether on a continuous, part-time, temporary, apprenticeship or casual basis and includes a domestic servant who is not a member of the family of the employer including any person employed in the Federal, State and Local Government, and any of the government agencies and in the formal or informal sectors of the economy'.[9] This definition is obviously expansive, and it includes even domestic workers (though containing a somewhat controversial proviso whereby a domestic worker who is a member of the family of the employer is exempted from the benefits of the provisions of the ECA). This is an ostensive departure from the very restrictive definition of an employee in the WCA.

Another prominent feature of the ECA is the provision for mental stress being a mental health disorder as an occupational health condition that is compensable under the Act. Mental stress is defined in the Act as an acute reaction to a sudden and unexpected traumatic event arising out of, or in the course of, the employee's employment; or a diagnosis made by an accredited medical practitioner as a mental or physical condition amounting to mental stress arising out of the nature of work or the occurrence of any event in the course of the employee's employment. This is a significant characteristic of the ECA, and it is trailblazing in Nigeria, and probably Africa. In order to determine what may qualify as mental stress, the National Social Insurance Trust Fund Management Board may appoint a Medical Board of Inquiry to review the condition to know if the employee would qualify for compensation for mental stress.[10] Especially in Nigeria where mental health has not gained the attention it should deserve, it is quite commendable to see this provision in the ECA with a scientific

[6]S Erugo, *Introduction to Nigerian Labour Law, Contract of Employment and Labour Practice* (Prineston and Associate, 2019)151.
[7] List of Occupational Diseases Recommendation (adopted 20th June 2002) 194 UNTS (ILO LODR)
[8] HO Onyi-Ogelle and P Green (n 3)
[9] S. 73 ECA.
[10] S Erugo (n 6) 244.

definition of mental stress, and a scientific laid down procedure on how to ascertain that a condition amounts to mental stress. The Act even provides for a situation where mental stress could be caused by adjustment in the work schedule of an employee, and such mental stress is compensable. Given the social demographics of Nigeria, there is a natural predilection to mental health issues. These demographics include unemployment, poverty, excessive religiosity, superstition, bad leadership, corruption, illiteracy, hunger, insecurity, etc.

The ECA has stipulated specific conditions that must be met for an employee or his/her dependent(s) to benefit from the compensations spelt out therein. There are two classes of occupational diseases identified by the ECA: occupational disease arising from the nature of the employment of the employee, and occupational diseases listed in the First Schedule to the Act. Therefore, though a disease may not be listed in the First Schedule to the Act, it still qualifies as an occupational disease if it is such a disease that arises from the nature of the employee's employment. Learned author, Sam Erugu, has implied that for an occupational disease to ground liability, it must be listed in the First Schedule to the Act, AND it must be shown to flow from the nature of the employment of the employee. He writes that to benefit from compensation as contemplated in the ECA, 'All that an applicant needs to do is: prove identifiable occupational diseases (sic) in the First Schedule to the ECA, *and* (emphasis mine) that it flows from the nature of the employment'.[11] It is the considered view of this paper that the diseases listed in the First Schedule to the ECA, and the diseases that may arise from the nature of the employment of the employee should be read and considered disjunctively, not conjunctively.[12] Though s. 9(b)(c) of the ECA seems to extend the latitude of the diseases that may be termed as occupational diseases by way of disease shown to be due to the nature of the employee's employment, the specific listing of some diseases in the First Schedule to the ECA goes with the grave consequence being restrictive, and limiting statutory occupational diseases. As a matter of fact, the diseases listed therein are in a short fall from the diseases recommended by the ILO.

The non-pecuniary forms of compensation provided for by the ECA is a robust and hearty development. S. 16(1) of the ECA provides that 'The Board may, in getting an injured employee back to work or in assisting to lessen or remove a resulting disability, take any measure and make the expenditures from the Fund that it considers necessary or expedient, regardless of the date on which the employee first became entitled to the compensation.' Sub- section 2 of the section under reference continues: 'The Board may, where it considers it necessary, provide counselling services to the dependents.' This is indicative of the very comprehensive compensatory package encapsulated in the ECA. This may be said to necessarily follow from the provision on mental stress. This is so because issues of mental health can hardly be addressed by mere pecuniary compensation. Psychological, psychiatric, and emotional concerns may not be resolved by cash awards.

Nigeria has a social insurance fund properly known as the Nigeria Social Insurance Trust Fund. This is established by s. 1 of the Nigeria Social Insurance Trust Fund (NSITF) Act, 1993. The said Act also established the Nigeria Social Insurance Trust Fund Management Board[13] (NSITFMB) which is saddled with the responsibility of managing and administering the Fund. The Employee Compensation Act makes conspicuous reference to the NSITFMB in s. 2(2) when it also provides that the later shall be responsible for the implementation of the provisions of the ECA, and for the administration and management of the Employees' Compensation Fund (ECF) which was established by s. 56 of the ECA. So, the NSITFMB does not only administer and manage (and implement the provisions) of the NSITF, it also administers and manages the ECF, while it implements the provisions of the ECA. While the employer contributes to this Fund, the employee is prohibited from contributing to the Fund. The employer and employee cannot, by agreement, waive the employer's duty of contributing to the ECF. The establishment of the ECF and the assignment of a government agency to administer and manage it is commendable.

Another notable concept introduced by the ECA is the 'No-Fault-Principle'. This is a very critical principle in the ECA which places strict liability on the employer in the event of work-related injury or fatality. The no-fault-principle is of the position that when once a compensable injury or death occurs at work, or in the course of work, it does not matter whose fault it is, the employee (in the case of an injury) or employee's dependent(s) (in the case of death) will be entitled to compensation. The combined effect of ss. 4 and 7 of the ECA clearly suggests that a work-place or work-related injury or death places a strict liability for payment of compensation to either the employee, or his dependent(s). In fact, the phraseology and tenure of the language of the two sections cited above with use of such terms and phrases such as 'any', 'shall', 'every', 'any employee', etc. is portentous indication of strict liability for payment of compensation to the employee without any condition of whose fault it was.[14] This no-fault-principle of the ECA is in consonance with the ILO Recommendation 121, 1964 which requires that there should be compensation for *any* work-place or work-related injury, disability or death. In the United Kingdom, it is the Safety at Work Act, 1974 that is the basic source of OHS law.

5. The Safety at Work Act 1974

From simple agricultural and production practices, humanity transmogrified into sophisticated, complex and intricate industrial procedures with the use of dangerous machines, delicate chemicals, complicated appliances, byzantine tools, and convoluted production procedures. This was the industrial revolution. The industrial revolution meant different things to

[11] Ibid, p.245.
[12] S. 9 of the ECA is clear on this argument. The operative word in the said section is 'or', not 'and'.
[13] S. 2 of the Nigeria Social Insurance Trust Fund Act, 1993.
[14] HO Onyi-Ogelle and P Green (n 3)

different folks. To the scientists who invented mind-boggling equipment, it came with intellectual fulfilment; to the bourgeoisie industry owners, it meant an unbridled desire for profit maximisation; to the political and royal classes, it afforded an opportunity for the satisfaction of hedonistic cravings, but to the peasant worker and labourer, the industrial revolution marked the crescendo of human exploitation, capitalist barbarism, and work-place misery and brutality. Women were exploited, child labour was rampant, there was no sufficient training to professionally handle the new industrial inventions, and there was total debacle of occupational health, safety and welfare. Indeed, to avert catastrophic industrial and societal consequences, there was urgent need for government intervention.

In 1833, the British parliament enacted the first OHS legislation which was known as the Factories Act. The Factories Act, 1833 established the office of factory inspectors, who were to move into factories to ensure compliance with safety and health provisions in the Act. Industry owners, who had been enjoying some form of independence and autonomy, were to have, for the first time, external 'intrusion' from government agents, to ensure that factory and industry employee were not treated as chattels, and that employers conformed with OHS regulations. The UK could be said to be the trailblazer in terms of OHS development in the world. Between 1833 and now, there have been very robust discussions and engagements in the UK that have helped to nurture and nourish OHS details and procedures. Currently, the primary source of OHS legislation in the UK is the Health and Safety at Work Act, 1974. The Health and Safety at Work Act, 1974 makes provisions for the safety, health, and welfare of workers at work and in the course of work, whether casual, permanent or temporary worker. The Act requires that employers should provide adequate facilities and proper equipment for work, conduct risk assessment, carry out periodic training of workers so as to professionally and competently man machines, and appoint competent health and safety personnel to ensure compliance with OHS requirements.

The Health and Safety at Work Act (HASAWA) establishes the Health and Safety Executive (HSE) and the Health and Safety Commission (HSC). The HSE is the government body that is saddled with the responsibility of enforcing the provisions of the HASAWA.[25] Though the HASAWA is the primary instrument regulating OHS in the UK, there are other ancillary legislations and regulations that are dedicated to OHS in the UK. Some of those laws are: Personal Protective Equipment Regulations PPPE) 2018; Display Screen Equipment Regulations (DSE) 1992 (as amended); Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013; Management of Health and Safety at Work Regulations, 1999; Manual Handling Operations Regulations (MHOR) (as amended in 2002); etc.

6. The No-Fault-Principle Under the Employee Compensation Act

The Employee Compensation Act, 2010 has been hailed by many learned authors as a harbinger of good tidings for employees in Nigeria. We have already expounded the OHS standards and provisions contained in the ECA. The point has been made that the limited number of diseases specified by the ECA as occupational diseases is one of the setbacks of the Act. It is argued, however, that the provision that apart from the occupational diseases specified in the First Schedule to the Act, a disease, injury, disability, or death that is shown to arise from the nature of the employment of the employer is compensable under the ECA, is a remediation and redress of the setback aforementioned. In the ECA, the defences usually available to the employer under the Common Law and the Factories Act seem to have been whittled down. Ss. 4 and 7 of the ECA are clear on the fact that the mere occurrence of an injury, disability or death, or the contracting of a disease, by the employee, without more, makes the employer liable in compensation to the employee, or his/her dependants in the case of death. The employee does not have to show that the occurrence did not happen as a result of his/her fault or any other person's, nor does he/she have to prove that it was the fault of the employer that led to the occurrence.[15] The implication of this is that, with the coming into force of the ECA, the defences usually availing the employer under the Common Law, and statutory instruments prior to the ECA, have collapsed flat under the weight of the provisions of ss. 4 and 7 of the ECA. In the circumstance of the operation of the no-fault-principle, the employer only needs to mention the disease in the list of occupational diseases enumerated in the First Schedule to the Act, or show that a disease, injury, disability or death arose out of the nature of the employee's employment. The rigours of legal gymnastics required to be entitled to compensation has been significantly minimised with the coming into effect of the ECA.

7. The National Industrial Court of Nigeria

Nigeria has a specialised court known as the National Industrial Court of Nigeria which has the original jurisdiction to determine matters that are labour-related. Connected to this jurisdiction of the National Industrial Court is the enforcement of OHS standards in Nigeria. Accordingly, the ECA provides that any person who is dissatisfied with the decision of the NSITFMB as per claims for compensation, etc. can appeal the decision of the Board to the National Industrial Court. In discharging its responsibility of enforcing OHS standards, the court shall rely on all such OHS provisions and regulations in force in Nigeria, and all ratified international instruments, whether they are domesticated or not. By the provisions of s. 7(6) of the National Industrial Court Act, the Court is required to place reliance on international best practices to reach its decisions. Though s. 12 of the Constitution of the Federal Republic of Nigeria (as amended) 1999 makes Nigeria a dualist state in terms of implementation of international legal instruments, as regards the operations of the National Industrial Court, s. 254C(2) of the Constitution provides that 'Notwithstanding anything to the contrary in this Constitution, the National Industrial Court shall have the jurisdiction and power to deal with any matter connected with or pertaining to the application of any international convention, treaty or protocol of which Nigeria has ratified relating to labour, employment,

[15] S Erugo, (n 63.3) 235

workplace, industrial relations or matters connected therewith'.[16] Therefore, apart from relying on domestic laws, the National Industrial Court also depends on international labour and industrial laws and best practices in reaching its decisions. This development is a healthy and intelligent legislative manoeuvre by the draftsmen of the 1999 Constitution of Nigeria.

8. Challenges Facing Enforcement of OHS Standards in Nigeria

Enforcement of OHS regulations in Nigeria faces numerous challenges, including fragmented oversight, corruption, and resource constraints.[17] Responsibility for enforcing these regulations is dispersed among multiple government agencies, leading to coordination issues and gaps in regulatory oversight.[18] Corruption within regulatory bodies further undermines enforcement efforts, as bribery and nepotism compromise the integrity of inspections and regulatory actions.[19] Again, inadequate resources and capacity constraints hinder effective enforcement, allowing unsafe working conditions to persist.[20] The Inspectorate Department of the Federal Ministry of Labour and Productivity has been berated for being ineffective in the discharge of its regulatory and enforcement functions.[21] Most production, trading and business premisses which qualify for factories are not registered. Because they are not registered, their operations cannot be accounted for. Accidents, injuries and deaths arising from such places are not accounted for. Even for workplaces that are registered, the supervising agencies have not been alive to their responsibilities. However, there are opportunities for improvement through measures such as streamlining regulatory oversight, enhancing transparency and accountability, and increasing investment in enforcement capacity and training. To address the challenges facing OHS in Nigeria, concerted efforts are needed to strengthen regulatory enforcement, enhance capacity and resources, and raise awareness among stakeholder.[22] Streamlining regulatory oversight, combating corruption, and increasing investment in enforcement capacity are essential steps toward improving workplace safety and protecting the health and well-being of Nigerian workers.[23] Additionally, collaboration between government agencies, employers, trade unions, and civil society organizations is vital for promoting a culture of safety and compliance with OHS standards.[24]

In the United Kingdom, emerging risks associated with technological advancements and budget constraints pose challenges for OHS enforcement.[25] However, there are opportunities for innovation and collaboration to address these challenges and improve workplace safety standards by investing in research and development, leveraging technology, and fostering partnerships between government, industry, and academia, the UK can effectively mitigate emerging OHS risks and maintain its leadership in occupational health and safety standards.[26]

9. Conclusion and Recommendations

The importance of occupational health and safety has been highlighted in this work, while the history of the development of OHS standards was traced to the industrial revolution in the 18th century in the United Kingdom. OHS standards measures in Nigeria are encapsulated in the Labour Act, 1974, the Factories Act, 1987, the Employees' Compensation Act, 2010 with a corpus of other regulations and courts' pronouncements. Though the Labour Act made provisions on OHS, the major legislations that deal mainly with OHS standards and measures are the Factories Act, 1987 and the Employees' Compensation Act, 2010. The ECA has been greeted as a comprehensive legislative instrument, which has significantly addressed the shortcomings of the Factories Act. This work has emphasised the provisions of ss. 4 and 7 of the ECA as having far-reaching implications and revolutionising OHS jurisprudence in Nigeria. These provisions introduced the *no-fault-principle* which obliterates the egregious requirement of a tall order burden of proof placed on the shoulders of the employee under the Common Law and the Factories Act before he/she can get compensation/damages for industrial mishaps. The limitation of occupational diseases by the ECA has been criticised by this work, especially as the list falls short of occupational disease enumerated by the ILO. This criticism is against the backdrop of the fact that it will take rigours and pains of legislative amendment for the list to be improved upon. We further argued, however, that the provision that injuries, accidents, diseases and deaths that arise out of the nature of the employees' employment are compensable greatly ameliorate (if not defeat) the weakness of listing limited diseases in the First Schedule to the ECA.

This research has provided a comprehensive comparative analysis of occupational health and safety (OHS) paradigms in Nigeria and the United Kingdom. Through examination of legislative frameworks, enforcement mechanisms, and cultural attitudes, key similarities, differences, challenges, and opportunities have been identified. The findings of this study

[16] For the expounding of this position of the law, see Adebusola Adedayo Omole v. Mainstreet Microfinance Bank Ltd (Unrep.) Suit No. NICN/LA/341/2012 judgment delivered on April 3, 2014; and Aerocontractors Co. of Nigeria Ltd. v. The National Association of Aircrafts Pilots and Engineers, the Air Transport Senior Staff Association of Nigeria and the National Union of Air Transport Employees (Unrep.) Case No. AS-106-01-2014, October 2, 2014.

[17] PI Onyeonoru, 'Occupational health and safety regulations in Nigeria: Challenges and Prospects' (2017) *IOSR JBM* 19, 6

[18] PI Onyeonoru, ibid.

[19] OS Alubo, Occupational health and safety in Nigeria: Strategies for improved productivity, *Springer,* 2017.

[20] PI Onyeonoru (n 17).

[21] EE Idubor, and MD Oisamoje 'An Exploration of Health and Safety Management Issues in Nigeria's Effort to Industrialise' (2013) *ESJ*, 9, p. 12

[22] Onyeonoru (n 17).

[23] Alubo (n 19).

[24] N Awofeso, Occupational health and safety in Nigeria: Challenges and solutions, *Springer,* 2019.

[25] Health and Safety Executive, 2019.

[26] European Agency for Safety and Health at Work, 2018.

contribute to advancing understanding of OHS paradigms in diverse socio-economic contexts and provide valuable insights for policymakers, regulators, employers, and other stakeholders. By identifying best practices, lessons learned, and areas for improvement, this research offers practical recommendations for enhancing OHS standards and protecting workers' rights in both Nigeria and the UK. While this work has provided a comprehensive analysis of OHS paradigms in Nigeria and the United Kingdom, it is not without limitations. Future research could explore additional factors influencing workplace safety, such as organizational culture, leadership, and the role of technology. Moreover, comparative studies involving other countries and regions could provide further insights into global variations in OHS practices and policies.

To enhance OHS standards in Nigeria, policymakers and stakeholders must prioritize regulatory reform, capacity-building, and awareness-raising initiatives. Strengthening legislative frameworks, enhancing enforcement mechanisms, and investing in education and training are essential steps toward improving workplace safety and protecting the health and well-being of Nigerian workers. In addition, fostering collaboration between government, employers, workers, and civil society organizations can facilitate the implementation of effective OHS policies and programmes. There was a bill before the Nigerian National Assembly christened the Labour, Health, Safety and Welfare Bill (2012). This bill should be revived, as it will address some of the shortcomings in Nigeria's OHS space. The list of both industrial diseases listed in the Factories Act, 1987, and the ECA, 2010 should be removed and left within the flexible regulatory powers of the Minister of Health, and the Minister of Labour and Productivity. In the United Kingdom, policymakers should focus on addressing emerging OHS risks, promoting innovation, and enhancing collaboration to maintain high levels of workplace safety. Investing in research and development, leveraging technology, and fostering partnerships between government, industry, and academia can help address emerging challenges and drive continuous improvement in OHS practices.