

CHAPTER ONE

INTRODUCTION

1.1 Background to the study

Throughout the world, the construction industry stands out among all other industries as the main contributor to severe and fatal-work related accidents. In the United Kingdom, for example the industry accounts for one third of all work-related fatalities and, five construction workers are killed every two weeks. Emerging economies and less developed countries are no exception to high fatality rates. Construction workers are five times more likely to suffer a permanent disability than those in other industries (Chinda and Mohammed, 2008).

Health and Safety Executive (2002) asserts that, over the years a great deal of effort has gone in to reducing the number of people who were killed or injured as a result of construction work.

Initiatives from all sides of the industry have produced a long term reduction in the number of injuries and fatalities, but recently their effects have diminished and the number of deaths has increased (HSE, 2002).

The situation in developing countries like Nigeria is worst than what prevails in developed countries because of lack of statutory regulations on health and safety.

According to Grant (2002), safety legislation alone cannot change this situation. What is needed is a change in the inbred attitudes of all involved with construction operation, manual workers, management, designers and client. This change can be helped by implementing legislation but it also requires higher levels of awareness of safety problems and how they can be reduced.

Although several health and safety standards exist, the extent to which construction firms adhere to this standards differs. It is important to understand the extent to which they comply with the standards.

According to Lepe et al (2008), accidents in the construction industry represent a substantial ongoing cost to the employers, workers and society. The costs of accidents incurred by contractors on account of accident are divided in to three (3) sections:

- i. The cost of construction health and safety measures, that is expenses invested directly by contractors in safety measures to prevent accident.
- ii. Direct costs: this define as those actual costs that can be directly attributable to injuries and fatalities. Is a cost caused by accidents arising from occurrence of accidents despite the fact that safety measure were in place. It refers to expenditure on insurance, damage to building and equipment or vehicles, cost of health or

expenditure on medical care, cost of investigation, legal cost, death, permanent associated with accidents.

iii. Indirect costs: it refers to costs that may not be covered by insurance and are the less tangible costs that result from an accident. They are classified by HSE as those costs incurred by the diversion of time to deal with the consequences of an accident, which also can affect productivity and these include, cleaning up, hiring consulting experts, time lost, sick pay, overtime working and temporary labour.

1.2 Need for the study

Over the years, a high number of people were killed or injured as a result of construction work (HSE, 2002). It is therefore necessary to investigate the degree to which construction industry adheres to health and safety regulations on construction sites in Nigeria.

1.3 Statement of research problem

Due to the fact that a high rate of accidents do occur on construction sites.

Alfred et al (2008), in an attempt to evaluate health and safety performance of Nigerian construction sites, found that the tool problem, health problem, workmanship and material standard factor, contingencies and corporate code of health and safety management are the major factors causing occupational hazards.

Bako (2008), highlight the possible provision of health and safety facilities on construction site and ways of improving safety measures. He found that the commonest accidents on construction site are, people stuck by falling object, people falling/slipping from walkways, scaffold and stepping on dangerous object. He also found that lack of provision of safety facilities has resulted to accident and loss of life to workmen and to the economy and also to the employer.

With all effort of researchers to tackle the problems of health and safety, it is observed that accidents still happen on construction site. It is also observed that no one has made an effort to undertake research on the extent to which health and safety regulations are adhered to on construction site. Thus it is highly desirable to find out whether health and safety regulations are being adhered to on construction sites.

1.4 Aim and Objectives

1.4.1 Aim

The aim of this research is to evaluate the extent to which construction firms adhere to health and safety regulations on construction sites in Nigeria.

1.4.2 Objectives

1. To identify the health and safety regulations.

2. To examine the extent to which construction firms in Nigeria, adhere to health and safety regulations.

1.5 Scope and Limitation

This research covers construction sites in Abuja (FCT) and Niger State only.

Due to time constraints, there was difficulty in collecting sufficient data from the survey and also the research is limited to Abuja (FCT) and Niger State of Nigeria. Also some respondents may be biased in their answers.

Adherence to health and safety regulations on construction sites

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