

MALAWI COUNTRY PROFILE ON OCCUPATIONAL SAFETY AND HEALTH 2009







CONSULTANT: BERNARD MBEWE, MD, MSPH

ABBREVIATIONS

ECAM	Employers Consultative Association of Malawi			
ILO	International Labour Organisation			
MCTU	Malawi Congress of Trade Unions			
NGO	on Governmental Organisation			
OSH	Occupational Safety and Health			
OHSW Act	Occupational Health Safety and Welfare Act			
TWA	Total weighted average			
WCC	Workers Compensation Commissioner			

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1.0 NATIONAL REGULATORY FRAMEWORK:

1.1 Enforceable instruments making up the national regulatory framework

This Section should identify and describe concisely in the first part, the different enforceable instruments making up the national regulatory framework and in the second part, voluntary technical standards and guidelines that are recognized as reliable references at the national level.

1.1.1. Inclusions of reference(s) to OSH requirements in the constitution of the country, if any

The constitution of the republic of Malawi¹ provides for the safety of workers in the following areas

SECTION	WHAT IT SAYS	RELATION TO OSH		
Chapter III Section 13 C	Provide adequate health care, commensurate with the health needs of Malawian society and international standards of health care.	This is a general clause applying to health in general		
Chapter III Section 13 d	To manage the environment responsibly in order to – i. Prevent the degradation of the environment; ii. Provide a healthy living and working environment for the people of Malawi	The first point alludes to the environment in general which may apply to work environment as well The second point is more applicable to Occupational Health and Safety (OSH)		
Chapter III Section 13 (/)	Peaceful Settlement of Disputes To strive to adopt mechanisms by which differences are settled through negotiation, good offices, mediation, conciliation and arbitration.	Tripartism in OSH has its backing from this section of the constitution of Malawi		
Section 27	27.3 No person shall be subject to forced labour. 27.4 No person shall be subject to tied labour that amounts to servitude.	Forced labour issues are covered here.		
31.1.	Every person shall have the right to fair and safe labour practices and to fair remuneration	The issue of safe labour practices is specified in this section of the constitution		
31.2.	All persons shall have the right to form and join trade unions or not to form or join trade unions.	This section deals with the freedom to or not to form and join trade unions		
31.3.	Every person shall be entitled to fair wages and equal remuneration for work of equal value without distinction or discrimination of any kind, in particular on basis of gender, disability or race.	Discrimination in the workplace is addressed in this section		

Table 1: The constitution of Malawi and OSH

In Chapter III, section 13 of the Constitution of Malawi, the State is charged with the responsibility to provide health care to the people of Malawi. The constitution goes on to being more specific as it refers to a healthy living and working environment for the people of Malawi.

The constitution provides for a safe environment, fair wages, freedom to form and join unions, freedom to associate, protection from forced labour and protection from discrimination all of which are issues related to OSH (table 1)

1.1.2. Laws, acts or regulations, as well as collective bargaining agreements.

i. Occupational Safety, Health and Welfare Act, 1997²:

General: The authority of the OSHW Act of 1997 originates from Section 13(d) of the constitution of Malawi which provides for a healthy living and working environment for the people of Malawi. The OSHW Act of 1997 provides for the a) regulations of employee safety, health and welfare in the workplace b) Inspection of plants and machinery c) prevention and regulation of accidents in the workplace.

Workplace definition: The OSHW Act 1997 defines workplace as any premises where one or more persons are employed. It also covers government owned workplaces.

Activities covered: While the OSHW Act provides a general definition of work; as stated above; it provides a long list of specific and covered activities which form the definition of workplace. The listed activities are thus eligible for inspection by the Directorate for Occupational Safety and Health (OSH). Those activities not listed in the definition of workplace are thus not eligible by OSH inspectorate.

Gaps: The Act appears to miss out services providers like banking, teaching and health care providers. Exempted from the OSHW Act are Military and police activities

Relationship to international conventions: The Act is a result of ILO Convention No.155 of 1981 on Occupational Safety and Health, ILO Convention No. 170 concerning Safety in the Use of Chemicals at Workplaces and ILO Convention No.161 on Occupational Safety and Health Services and ILO Convention 174 on Dangerous Installation. While the Act is based on the above named conventions, Malawi has not ratified the listed conventions,

ii. Employment Act 1999³:

The Employment Act gets its authority from the Constitution of the Republic of Malawi (Sections 27 and 31 on issues of forced labour, antidiscrimination, fair pay and equal pay for equal work and child labour etc.)

The Employment Act was established in order to reinforce and regulate minimum standards of employment. It applies to both the private sector and the Government, including any public authority or enterprise. The Employment Act 1999 sets up administration structures that would enforce labour as well Occupational Safety and Health regulations. The Employment Act provides for the Establishment of the Labour Commissioner (Section 8(1). It also provides for the powers of the labour inspectors on OSH issues (section 9(1).

ISSUES	SECTION	COMMENT	
Administration of OSH	8 and 9	Establishment of Commissioner for labour, labour inspector. The act also establishes the powers of labour inspectors	
Forced labour	4 (1)	ine for violation is 10,000 Malawi Kwacha (Approx. US\$ 80) or 2 years nprisonment.	
Workplace discrimination		Discrimination based on age, sex, disability is prohibited. Violation exacts a fine of 10,000 Malawi Kwacha.	
Child labour:		Prohibits employment of children that are below 14 years of age. It does not apply to teaching/training institutions or work done in homes.	
Working hours	36(1) and (2)	A work week should not be more than 48 hours excluding overtime. Guards may work for more than 48 hours	
Sick leave,	46	Entitled to 4 weeks sick leave	
maternity leave	47	Women entitled to eight weeks maternity leave	

Table 2: Summary of issues dealt with in the Employment Act of 1999

Table 2 gives a summary of occupational health safety and welfare issues related covered by the Employment Act. Sections 8 and 9 provide for the administrative structures of OSH as well as the powers of labour inspectors. On welfare issues fines of 10,000 MK for violation of the sections of the act appear to be too low to act as a deterrent.

iii. The Labor relations Act 1996⁴

The Labour Relations Act provides for the promotion of sound labour relations through the protection and promotion of freedom of association, the encouragement of effective collective bargaining and the promotion of orderly and expeditious dispute settlement.

Based on the Labour Relations Act, workers in Malawi have the freedom and legal right to form and join trade unions as well as to strike. The freedom to associate is enshrined in the constitution of the republic of Malawi section 32.1 and 32.2

The act also sets up mechanisms for dispute settlement via the tripartite labour advisory council and the structures of the industrial court

iv. Workers Compensation Act 1999⁵

Eligibility: Section 4 (1) If an injury, other than the contraction of a scheduled disease, arising out of and in the course of his employment is caused to a worker, his employer shall, subject to this Act, be liable to pay compensation in accordance with this Act.

The following have been removed from the definition of "worker" and thus are not eligible for workers compensation in Malawi: casual worker, an outworker, a tributer, a member of the employer's family living in the employer's house, a member of the armed forces of Malawi and any class of persons whom the Minister may, by notice published in the Gazette, declare not to be workers for the purposes of this Act.

Though the Act mentions a fund to which employers contribute, the fund has not been set up. Employers pay to the commissioner's office after an injury has occurred. The Commissioner's office, in turn, pays the injured employees their money.

1.1.3. Laws and regulations covering aspects related to OSH but issued under other Ministries (Health, Agriculture, Environment, Industry, Transport, etc.).

MINISTRY	HOW THEY RELATE TO LABOUR LAWS
Ministry of Health	MOH have its OSH Policy as part of National Infection Prevention Standard. It is mostly associated with infectious disease prevention in the workplace.
Department of Mines	Have Mines Act that provides for inspections of mining and quarrying activities. It also provides for inspection of OSH as well as explosives.
Department of Environmental affairs	The Environmental Act provided for environmental health inspectors.

Table 3: OSH regulations in other ministries

Ministry of Health: Infection Prevention and Control Policy

The Ministry of Health has included occupational health and safety in its National Infection Prevention Guidelines⁶. Issues covered include having a written program, orientation of staff on Infection Prevention Control (IPC), spread of infection, isolation, personal protective equipment, immunisation, periodic screening for tuberculosis for health care workers in high risk areas, periodic screening for acute diarrhoea in food handlers, periodic screening in food handlers and health care workers with draining abscesses and impetigo.

The IPC guidelines also deal with treatment for needle-stick injuries and post exposure prophylaxis. Record keeping is required for needle stick injuries, immunisation, exposure, prophylaxis or drugs given. Use of personal protective equipment is recommended.

Ministry of Health-The Environmental Department

The Department of Environmental Health under the Director for Preventive Services; in the Ministry of Health; are involved in OSH issues. The powers for providing OSH services are stated in the National Environmental Health Policy⁷. At the Enterprise level the department of environmental health is expected to: 1- Formulate sector environmental health policy and procedures. 2-Ensure compliance with all statutory regulations and standards on environmental health. 3- Establish training and information programmes for workers and surrounding communities. 4- Carry out surveillance of workers' health and working environmental.

Department of Mines

The mines act provides for occupational health services in the mining sector. It is a small inspectorate with two inspectors. It has one OSH inspector and one explosives inspector.

The Mines Act is currently being reviewed. The department is working on harmonising the Act with current policies. The Department of Mines uses British standards inspecting work places.

Authority to run OSH activities in the mentioned ministries is described in the Mines Act (table 3).

In general the legal instruments on OSH have been established from the constitution to different Acts. These legal instruments have led to the establishment of OSH structures in different ministries. The issue of concern is that there is minimal collaboration between Directorate for OSH (which is the main OSH authority) and other inspectorates.

1.1.4. List ILO OSH conventions that have been ratified by your country, are in the process of being ratified or have been selected for future ratification.

CONVENTION	RATIFICATION DATE	R
C11 Right of Association(Agriculture) Convention, 1921	22:03:1965	R
C12 Workmen's Compensation (Agriculture) Convention, 1921	22:03:1965	R
C19 Equality of Treatment (Accident Compensation) Convention, 1925	22:03:1965	R
C26 Minimum Wage-Fixing Machinery Convention, 1928	22:03:1965	R
C29 Forced Labour Convention, 1930	19:11:1999	R
C45 Underground Work (Women) Convention, 1935	22:03:1965	R
C50 Recruiting of Indigenous Workers Convention, 1936	07:06:1966	R
C64 Contracts of Employment (Indigenous Workers) Convention, 1939	07:06:1966	R
C65 Penal Sanctions(Indigenous Workers)Convention 1939	22:03:1965	R
C81 Labour Inspection Convention, 1947	22:03:1965	R
C86 Contracts of Employment (Indigenous Workers) Convention, 1947	22:03:1965	R
C87 Freedom of Association and Protection of the Right to Organise Convention, 1948	19:11:1999	R
C89 Night Work (Women) Convention (Revised), 1948	22:03:1965	R
C97 Migration for Employment Convention (RVSD), 1949	22:03:1965	R
C98 Right to Organise and Collective Bargaining Convention, 1949	22:03:1965	R
C99 Minimum Wage Fixing Machinery (Agriculture) Convention, 1951	22:03:1965	R
C100 Equal Remuneration Convention, 1951	22:03:1965	R
C104 Abolition of Penal Sanctions (Indigenous Workers) Convention, 1955	22:03:1965	R
C105 Abolition of Forced Labour Convention, 1957	19:11:1999	R
C107 Indigenous and Tribal Populations Convention 1957	22:03:1965	R
C111 Discrimination (Employment and Occupation) Convention, 1958	22:03:1965	R
C129 Labour Inspection (Agriculture) Convention, 1969	20:07:1971	R
C138 Minimum Age Convention, 1973	19:11:1999	R
C144 Tripartite Consultation (International Labour Standards) Convention, 1976	01:10:1986	R
C149 Nursing Personnel Convention, 1977	01:10:1986	R

Table 4: ILO conventions that have been ratified by Malawi

C150 Labour Administration Convention, 1978	19:11:1999	R
C158 Termination of Employment Convention, 1982	01:10:1986	R
C159 Vocational Rehabilitation and Employment (Disabled Persons) Convention, 1983	01:10:1986	R
C182 Worst Forms of Child Labour Convention, 1999	19:11:1999	R

R = Ratified, Source ⁸

On issues of ratification of ILO Conventions, Malawi has not ratified the major ILO Occupational Safety and Health Conversions such as C155 and C161. Conventions C45, C81 and C129 are the only ILO OSH related conventions ratified by Malawi⁹. Other ILO conventions that have been ratified by Malawi are shown in table 4.

1.2. OSH technical standards, guidelines

DOCUMENTS	AVAILABILITY	COMMENT	CURRENT ACT
Technical standards	Not available	Not available	Not available
Guidelines	Electricity 1969	Factories Act	Draft based on OSHW Act
	First Aid	Factories Act	
	Wood working and Machinery	Factories Act	Draft based on OSHW Act
	Building Regulations	Factories Act	Draft based on OSHW Act
Management systems	Use local management system.	ILO management system not yet adopted	

Table 5: Availability of technical standards, guidelines and management systems at Directorate for OSH

Technical standards: Directorate for OSH has not developed any technical standards based on the different OSH Act. Were the directorate to adopt technical standards it would adopt British Standards for obvious historical reasons.

Guidelines: Five guidelines that are currently used by the Directorate for OSH are based on the factories act which was replaced by OSHW Act (table 5). Drafts of these guidelines have been updated to be in harmony with the current OSHW Act. The drafts are waiting to be reviewed by the Ministry of Justice before submission to parliament for approval.

Management system: Directorate for OSH has not adopted ILO management system. While there may be a national OSH policy, it may not have taken ILO suggestions on board. There are no national guidelines or tailored guidelines.

OSH management at organisation level: Organisations take their cue from Directorate for OSH inspectorate. Thus most companies are less likely to follow ILO management system if Directorate for OSH has not adopted the ILO management system. Multi-national organisation may be following ILO management system based on recommendations from their headquarters.

DOCUMENTS	TYPE AVAILABLE	COMMENT
Technical standards	British Standards	Foreign international standard are used as there are no local standards
Guidelines	SADC guidelines	Foreign international standard are used as there are no local standards
	Regulations are part of the Act	The regulations being used are based on old Factories Act.
		There are plans to harmonise guidelines and current Mines Act in the near future
management systems	Local management system.	No interaction with ILO

Table 6: Technical standards, guidelines and management systems in the Department of Mines

The Department of Mines adopted international standards and guidelines (table 6). Though Mines has adopted international standards, it lacks equipment for measuring workplace exposure. The Department of mines has also not adopted ILO management system citing lack of interaction with ILO as reason of not being aware of ILO management systems.

1.2.1. Provide information on the implementation of OSH Management systems at the enterprise level and any national regulatory or promotional action to apply these systems, including incentives.

Implementation at national level: The Directorate for OSH has not yet implemented the ILO OSH Management system thus it has not taken any promotional activities towards the management system at enterprise level

Implementation at Enterprise level: The OSH directorate supervises enterprise level via the inspectorate activities. Had the Directorate for OSH adopted and implemented the ILO management system, its recommendations would have trickled down to enterprise level. Since the Directorate for OSH has not implemented the OSH management systems, one would not expect local enterprises to implement ILO management systems. One would not rule out multinational enterprises using ILO OSH management systems in their operations based on recommendations from their headquarters.

Indicate if the ILO Guidelines on OSH Managements are or have been used as basis for action in this area.

ILO guidelines on OSH management have not been used by Directorate for OSH at this time.

Indicate if any OSHMS certification schemes have been established, and if so, describe in some details the mechanism and relation if any to regulatory systems.

ILO guidelines on OSH management are not being used by Directorate for OSH at this time thus the certification issue does not apply.

1.2.2. Provide information on technical standards used or applied either under existing regulations or on a voluntary basis. Indicate the type and source of the standard (national specialized institution, industry, etc.). Provide examples and relation if any to regulatory systems.

The only Industrial hygiene equipment owned by Department of OSH is a noise meter. Section 63 of OSHW Act 1997 sets noise exposure limit value as 85 dB twa for continuous exposure and 150 dB in case of impulse noise². The Directorate for OSH reports that ILO or British guidelines could be used. Lack of industrial hygiene equipment has made it impossible to adopt and apply any international technical standard as it would be impossible to assess if the standard was or was not being met. Other than the noise levels, there are no local technical standards.

1.2.3. Provide information on the use of ILO Codes of practice by national competent authorities, business and Trade Unions.

AUTHORITIES	USE ILO CODES?	COMMENT
Directorate for OSH	Yes	All ILO codes are used
MCTU (union)	Yes	Mainly use code on HIV training. It has been translated to Chichewa (a local language)
ECAM (business)	No	ECAM receives periodicals (African Newsletter) from ILO that are then sent to members

Table 7: ILO codes- used by different stakeholders

The directorate for OSH appears to be the main user of ILO codes of practice. The Department of Mines and Employer organisation do not use the codes

2.0 NATIONAL COMPETENT AUTHORITIES:

Provide information on the designated authority or body or the authorities or bodies responsible for occupational safety and health. Where possible, include also human and economic resource data (number of staff, budget levels, etc.) for each system, agency, competent authority or bodies.

Authority responsible for OSH

The Commissioner for Labour is given authority responsible for OSH issues in Malawi.

According to Employment Act 1999³

"8.--(1) There shall be appointed in the public service an officer to be designated as the Labor Commissioner in this Act otherwise referred to as the "Commissioner"), and other public officers subordinate to him, who shall be responsible for the effective administration and application of this Act.

Section 8 (2) states that the Commissioner shall be responsible for-- (a) Inspecting places of work as often and as thoroughly as is necessary "

The authority provides for the formation of the Directorate for Occupational Safety Health and Environment under the Commissioner for Labour. The Directorate is responsible for running day to day OSH issues such as inspections and advisory services

Directorate for Occupational Safety Health and Environment: The Directorate has two regional offices, one for the south and another for the northern regions. The headquarters in Lilongwe oversees inspections for central region.

Location and man power: Currently the Directorate for Occupational Health and Safety has eleven inspectors against an establishment of 16 inspectors for the whole country. The directorate head office in Lilongwe has six inspectors that provide services for the central region of the country. Four inspectors are based in Blantyre and cover the whole Southern region. The northern region has one inspector who is located in Mzuzu. A recent functional review recommended that there be no speciality designations for inspectors. Each inspector should be able to do all aspects of OSH. The current inspectorate is divided as follows.

INSPECTOR Designation	RESPONSIBILITIES	ENTRY QUALIFICATIONS	TRAINING IN OSH
Labour Inspector	Labour disputes, workers compensation	MSCE (equivalent to (GCE)	None
Industrial Hygiene	Measure exposures at worksites	First degree in science mostly Chemistry.	On the job training and short courses in OSH
OSH Inspector	Inspection of worksites	First degree in science	On the job, short courses

Table 8: Inspector designation under The Ministry of Labour

Training and experience required of inspectors: A first degree in any science subject or engineering is required before employment as an inspector. Industrial hygienists are expected to have a degree in chemistry at the time of employment (table 8). The Directorate for Occupational Health and Safety provides on-the-job- training. Short courses provide further training in different aspects of OSH. None of the inspectors has an advanced degree in areas of occupational health and safety.

Funding for OSH services

The Government of Malawi funds Occupational health and safety services that are run by the Ministry of Labour, Ministry of Health and Department of mines. Previous research has reported that The Directorate of Occupational Safety and Health is accorded a low status within the Ministry of Labour. This is reflected by a very small budget which was gradually declining¹⁰ (fig 1). Declining allocation to the whole Ministry of Labour not only OSH could have been to hard economic times affecting the country at the time. Obviously limited budget allocation affected OSH services.



Fig 1: Funding to Labour and OSH 1991 to 1998¹⁰.

Recent data on OSH funding

OSH services are funded as part of Ministry of labour. Ministry of Labour is composed of Labour Services and Workers Compensation which have a staff of 94 labour inspectors and OSH that has a staff of 11.

Year	Amount funding to Ministry of Labour	Amount allocated to OSH by Ministry of labour	OSH funding as % of Ministry of labour allocation	Number of registered work places	Number of OSH inspections	Number of OSH pressure vessel examination	Number of OSH accidents
2005- 2006	375,316,128.00	11,244,946.00	3.00	284	327	784	26
2006- 2007	405,470,056.00	9,525,942.00	2.35	278	401	741	38
2007- 2008	125,000,000.00	10,409,828.00	8.33	296	280	644	24
2008- 2009	133,750,000.00	9,676,000.00	7.23	238	191	745	6

Table 9: Amount of funds to Labour and OSH in the past five years

Source: Department of Labour 2008.

Allocation to OSH services has ranged from 2.3% to 8.3% of the Ministry of Labour budget (table 9). It would be difficult to assess the importance of the placed OSH activities based on the above figures alone. In terms of manpower Directorate for OSH forms a small section of the Ministry of Labour. However its needs for laboratory services and well trained staff are not being met by the allocated budget.

The Chief engineer for mines reported that mining OSH services were allocated 16 million kwacha for the year 2008. Most of the funds were earmarked for setting up a laboratory.

Overall, the Commissioner for Labour is mandated to run OSH activities. The Directorate for OSH is responsible for day to day operations of OSH activities. There appears to be limited training opportunities in the inspectorate. Funding provided to OSH may not be enough for day to day operations, training and laboratory needs

3.0 INSPECTION AND ENFORCEMENT SYSTEMS LIST AND DESCRIBE ANY INSPECTORATE OR INSPECTION SYSTEM HAVING A SIGNIFICANT ROLE IN THE APPLICATION OF NATIONAL OSH LAWS AND REGULATIONS SUCH AS OCCUPATIONAL SAFETY AND HEALTH

Several Inspectorates were found during discussion with several ministries. These play a minor role as far as inspection and advisory services.

The Directorate for Occupational Safety and Health: This is the main inspection system of the workplace. It is mandated by Employment Act 1999 and OSHW Act 1997 to inspect most workplaces (private and government) in Malawi. Military operations are exempted from inspections. The definition of work in the OSHW Act was specific in mentioning covered activities. Provision of medical care was not included in the definition of work, thus it was excluded from inspection by Directorate for OSH.

Enforcement of the regulation by inspectors is provided in the OSHW Act 1997 as well as in the employment Act of 1999.

Ministry of Health

i) The Department of Environment in the ministry of health also inspects workplaces in areas of Occupational safety and health. It derives its authority from the Malawi National Environmental Policy⁷

Almost every government district hospital has an environmental health officer. Thus this inspectorate has a wider distribution than the directorate for OSH. We are not aware of the extent of the inspections conducted as there are no records reported to OSH. We are also not aware on the extent of training in OSH issues or what guidelines are used.

ii) The Nursing Services in the Ministry of Health provides OSH services to clinicians (doctors, nurses, clinical officers etc.) in government facilities¹¹. Most of the OSH services provided are related to infectious disease control (vaccinations, screening for TB and hepatitis). This service is limited to health care facilities as they are not covered under OSHW Act 1997.

Department of Mines

The mining inspection system is a small mining inspection system as it is limited to mines and quarries as specified in the Mines Act. The inspectorate has one explosives inspector and one OSH inspector.

Departments/inspectorates and other related service providers. For each service provider/inspection system, the following information elements if available should be provided: Scope of sectoral coverage (health, chemicals, transport, construction, mines, technical plant and equipment, etc.);

Table 10: Other inspectorates

INSPECTORATE	INSPECTORS	WHERE INSPECTS (COVERAGE)		
Directorate for OSH	OSH inspectors, All sectors except health, mine Industrial hygiene military activities			
Ministry of Health	Infection Control Nurses	Government health facilities		
	Environmental health inspectors	Workplaces		
Department of Mines	OSH inspectors	Mine OSH only		
	Explosive inspector	Explosive safety		
Department of Environmental Affairs	Environmental inspectors	Environmental contamination – not only OSH		

According to table 10, both the Directorate for OSH and Department for Environmental Health (Ministry of Health) inspect workplaces other than hospital facilities. The two departments do not coordinate their activities. Records for injuries and investigations done by Directorate for OSH are kept in the Ministry of Labour. Directorate for OSH does not receive inspection reports from Ministry of Health (MOH).

Scope of enforcement powers and their relation to an existing law or regulation if any;

Section 9 of the Employment Act of 1999 gives a labour officer in the Directorate for OSH some latitude when carrying out his/her duties.

Entry into a workplace: The inspector may enter any workplace at any time (day or night). No prior notice is required before inspecting a workplace. If the workplace is a private home a warrant from a magistrate is require before entry.

Who can be interrogated, tested or examined: The inspector is given powers to interrogate or test anybody (Employer or employee) in a workplace.

Examination of records: The inspector may require production and examination of records, books, documents to make sure laws were being followed. He may inspect any record of accidents or occupational disease kept by the employer pursuant to the provisions of the Occupational Safety, Health and Welfare Act or any other law. He may make copies or extracts of documents when needed.

Collection of samples for analysis: The inspector may take or remove samples of materials and substances used or handled for analysis, after informing employer.

Correction of problems: The inspector may take steps to remedy defects observed in plant layout. He may stop operations if there are serious threats to the health or safety of employees. He may enforce the posting of any notices required by this Act or any other law relating to the employment of persons

Related ministry or responsible body or administration

The Ministry of Labour is mandated to run OSH issues in Malawi. The Directorate for OSH under the Ministry of Labour is responsible for day to day running of the inspectorate and advisory services in the area of OSH.

Structure and geographic distribution if applicable Level of human resources (number of inspectors) and distribution of skills (general conditions of work, OSH, training, awareness raising, investigation or auditing approved persons by specialty etc.);

Directorate for OSH is headed by a Director for OSH who is stationed at the headquarters in Lilongwe. The headquarters has 6 inspectors the southern regional office has four while the northern regional office has 1 inspector

Total number of enterprises and undertakings covered by each inspection system;

Any other pertinent information, if available on the inspection workload (number and types of inspections carried out per year, number of prosecutions, etc.)

Year	Number of registered work places	registered work places / inspector / year	Number of inspections	Number of inspections / inspector/ year	Number of pressure vessel examinations	pressure vessels examined/ inspector / year	Number of accidents
2005	284	25.82	327	29.73	784	71.27	26
2006	278	25.27	401	36.45	741	67.36	38
2007	296	26.91	280	25.45	644	58.55	24
2008	238	21.64	191	17.36	745	67.73	6

Table 11: Undertakings of Directorate for OSH 2005 to 2008

Source: Department of Labour

On average each inspector registers about 24 workplaces, inspects 27 workplaces and examines 66 pressure vessels in a year (table 11).

Training and advisory services

Directorate for OSH Inspectors provide training to enterprises as part of their regular activities. Section 15 of the Employment Act empowers the labour inspectors to undertake training activities of employees

and employers

The Department of Mines inspectorate is a small inspectorate with two inspectors that cover the all mining and quarrying activities in Malawi. The northern region has 9 coal mines, 1 uranium mine and 4 quarries. The Central region has 6 quarries while the southern region has 8 quarries, 2 lime operators. Two inspectors are able to visit each of the 30 facilities 4 times per year. The inspectorate also provides training and advisory services to mines and quarries.

Provide information on all existing mechanisms established to ensure coordination, cooperation and collaboration among all the social partners with responsibilities in the implementation and management of OSH systems at the national and enterprise levels such as National tripartite advisory bodies, inter-agency/ministry National Boards or Committees, Mechanisms for Employers' and Workers' organizations collaboration and participation.

4.1. At the national level: for each mechanism include information on scope, membership and powers (advisory, etc.) lines of communication (to which minister or ministry), any special attention being given to the level of participation of employer and worker organizations in these mechanisms. Describe any existing structures related to provincial or other territorial jurisdictions.

Below are several mechanisms that may play some role in participation of social partners at resolving labour and OSH issues. However these mechanisms are not specific for OSH issues.

A) SOCIAL DIALOGUE:_Directorate for OSH, MCTU and ECAM cited Social Dialogue as the mechanism for coordination and collaboration among the social partners on OSH issues. The Social Dialogue mechanism was established via convention 144. The main body responsible for consultation, coordination and collaboration under the social dialogue mechanism is the Tripartite Labour Advisory Council. The view of ECAM is that The Principal Secretary for Labour coordinates tripartite issues under the spirit of social dialogue. An Industrial relations person form ECAM handles OSH issues.

B) TRIPARTITE LABOUR ADVISORY COUNCIL: According to the Labour Relations Act 1999, section 55(1) the Minister shall appoint a Tripartite Labour Advisory Council (in this Part otherwise referred to as the "Council") consisting of -

- a. Four persons appointed by the Minister;
- b. Four persons nominated by the most representative trade union or trade union and appointed by the Minister;
- c. Four persons nominated by the most representative organization or organizations of employers and appointed by the Minister.

Duties of the council according to Labour Relations Act section 58

- 1. The Council shall advise the Minister on all issues relating to labour and employment, including the promotion of collective bargaining, the labour market, human resources development and the review of the operation and enforcement of the Act and any other Act relating to employment.
- 2. The Council shall also advise the Minister with respect to matters concerning the activities of the

International Labour Organization, including the following-

- a. (a) Government replies to questionnaires concerning items on the agenda of the International Labour Conference and Government comments on proposed texts to be discussed by the Conference;
- b. Proposals to be made to the competent authorities in connection with submission of Conventions and Recommendations pursuant to with submission of Conventions and Recommendations pursuant to Article: 9 of the Constitution of the International Labour Organization;
- c. Re-examination at regular intervals of ungratified Conventions and of Recommendations to which effect has not yet been given by Malawi, and consideration of what measures might be taken to promote their implementation or ratification;
- d. Questions arising out of reports to be made to the International Labour Office pursuant to Article 22 of the Constitution of the International Labour Organization;
- e. Proposals for the denunciation of ratified labour conventions.

Section 58(1) refers to the implementation of the Labour Relations act and any other Acts. Thus the Tripartite Labour Advisory Council may apply to OSH related issues. Section 58(2) seems to be specific to ILO issues that may include occupational safety and health.

C) INDUSTRIAL RELATIONS COURT

Section 66 (1) of the Labour Relations Act provides for the composition of the Industrial Relations Court. The court will be composed of

- The Chairperson: appointed by the Chief Justice, on the recommendation of the Judicial Service Commission;
- The Deputy Chairperson: appointed by the Chief Justice, on the recommendation of the Judicial Service Commission;
- Five persons nominated by employees representatives (the "employees' panel"), and appointed by the Minister;
- Five persons nominated by employers representative organisation (the "employers' panel"), and appointed by the Minister.

According to section 64 the Industrial Relations Court shall have original jurisdiction to hear and determine all labour disputes and disputes assigned to it under the Labour Relations Act or any other written law.

The Industrial Relations Court also includes membership from all social partners and is charged with resolving all labour related disputes that may include OSH issues. OSH issues are resolved in a spirit of tripartism

4.2. At the enterprise level: Provide information on any OSH requirements included in collective bargaining agreements with particular reference to the establishment and function of joint safety or safety and health committees. Indicate whether this inclusion is regulated or only part of the collective bargaining process.

DIRECTORATE FOR 0SH: OSHW Act 1997 section 21 states that every employer; with more than fifty employees; has to establish a safety committee. The Directorate for OSH may recommend safety committees based on the enterprise having more than 50 employees or other factors. OSH inspectorate generally plays an advisory role in the safety committees

INDUSTRIAL COUNCIL: The Industrial Council is set up under the authority of the Labour Relations Act. Based on the act employees or employer organizations may ask the Minister of Labour to set up a council if their written request for collective bargaining has been denied or has not been responded to within sixty days of the request. Thus the Act sets conditions for resolving disputes related to collective bargaining.

The functions of the industrial council may include any matters agreed by the parties, including negotiating wages and conditions of employment; establishment of dispute resolution machinery and development of an industrial policy for the industry concerned.

Though the law seems to mention working conditions and development of industrial policy, Directorate for OSH has not used this facility before.

DEPARTMENT OF MINES: There is no unionisation in mines yet. Thus the tripartite system does not apply. It would appear that the employer has sole responsibility for OSH issues such as safety committees.

Overall the mechanisms for coordination and collaboration among the social partners are set up in the laws of Malawi.

5.0 NATIONAL REVIEW MECHANISMS:

Include information on any existing national OSH Councils, Commissions, Boards, Committees or other bodies with the responsibility of reviewing periodically national legislation, policies and actions in the area of OSH. Indicate the extent to which national Employer and Worker organizations are involved or consulted in the functions of these bodies.

The Malawi Law Commission (in the Ministry of Justice) is responsible for reviewing all legislation in Malawi, including OSH issues.

Currently there are no national councils, boards or committees with the responsibility of reviewing legislation, policies and actions specifically related to OSH.

The Director for OSH and his staff review current OSH related issues. The Directorate then sends its review and recommendations to the Law Commission (in the Ministry of Justice) which is responsible for reviewing all legislation in Malawi. After the Law Commission review, the recommendations are sent to Parliament.

The mechanisms for the coordination and collaboration of social partners (such as the Tripartite Labour Advisory Council) described in section 4 of this report could be used as mechanism to review legislation and policies in the area of OSH.

The Directorate for OSH has sent several suggestions for changes to the OSHW Act for review by the Law Commission. The process is slow as the Law commission is understaffed.

The view of the Directorate is that national councils, committees and boards for reviewing OSH legislation are not in place because the Directorate for OSH has not adopted ILO management systems.

6.1. Provide information on designated OSH training and educational institutions, services or bodies and mechanisms.

There are no designated OSH training institutions in the country at the present time. None of the colleges of the University of Malawi offers certification in occupational health and safety.

College of Medicine: offers an introductory course in occupational health and safety to medical students in their third year of training. The Malawi College of Medicine has potential for running an MPH program in occupational health as it has a modular MPH program in management.

The Polytechnic: offers a Bachelor of Science degree in environmental health which covers some aspects of occupational health.

Kamuzu College of Nursing: offers a course in occupational health to nursing students at the fourth year of training.

6.2. List national information centres or other similar bodies or mechanisms devoted to the production and/or dissemination of OSH information such as newsletters, data sheets, brochures, pamphlets, databases, etc.

Currently there is no information centre dedicated to OSH issues in Malawi. The Directorate for OSH used to operate an Information Centre that was being sponsored by a project several years ago. After the project phased out, the directorate could not sustain the operations of the information centre. A recent functional review of the Ministry of Labour removed the information centre as it was dormant. There is no knowledge of how well the stakeholders used or benefited from the information centre.

The Directorate for OSH produces a quarterly news letter that is sent workplaces within the country. The Directorate is not aware of any other OSH Information Centres within Malawi

Indicate linkage if any (national or collaborating centre) to ILO International OSH Information Centre (CIS) network.

The Directorate for OSH is the only ILO Collaborating Centre in Malawi.

Provide data on level of technical capacities such as capacity to disseminate information via the Internet, publication levels etc.

Directorate for OSH has limited capacity since it has no website on the internet. The Directorate for OSH would have preferred a website that is updated regularly as well as having computers that could be used by stakeholders

6.3. List all designated OSH advisory services and mechanisms, such as OSH inspection services, OSH centres or dedicated agencies or bodies.

The Directorate for Occupational Safety Health and Environment is legally mandated to and provides inspection and advisory services as part of its inspection exercises. The Directorate is not aware of other designated organisation that offers OSH advisory services.

Overall Malawi does not have training institutions dedicated to OSH. She has no information centres dedicated to OSH. While Directorate for OSH in the CIS network, it lacks computers and website facilities with which to disseminate OSH information.

Include any designated national system, agency or body having regulatory responsibility for, or involved in Occupational health services: regulatory responsibility

National system and regulatory responsibility

The Directorate for OSH is charged with responsibility for prevention, recording, investigating and reporting occupational health injuries and diseases. The Directorate may require certain occupational health services (e.g. periodic medical examination) but it is not mandated to run or regulate occupational health services.

Clinical services (which include occupational health services) responsibility is with the Medical Council of Malawi. Medical Council of Malawi is the body that registers and has regulatory responsibility for clinicians and clinical facilities in Malawi. Work related Injuries and illness may be treated at public facilities; where health care is free of charge; or at private facilities where the employer pays for the service.

There are no designated occupational health clinics or laboratories in Malawi. Thus occupational health services are lumped in with all other primary health care services in public or private facilities.

Environment / exposure monitoring

The Directorate for Occupational Safety Health has regulatory responsibility for environment / exposure monitoring in the workplace. However it lacks trained personnel, sample collection equipment as well as laboratory equipment for analysis.

The Department of Mines also has responsibility for environmental monitoring in the mining sector. It also lacks equipment with which to carry out its responsibilities. There are plans to set up a laboratory funded by Paladin (A company that is involved in the mining of Uranium in Karonga District.

The Department for Environmental Affairs monitors environmental pollution in general. Its activities may include occupational health. It also lack equipment with which to carry out its activities

Medical examination and surveillance of worker health

According to section 34 OSHW Act the Director for OSH may request medical examination at employment or at intervals the director feels the job exposures require such examination. The employer pays for the services.

Employees requiring medical examination are referred to primary care providers. There are no facilities that are dedicated to examination and surveillance of workers in Malawi. While the director has authority to request periodic screening,

Advisory services

The Directorate for Occupational Safety Health is mandated to provide advisory services as part of its inspection exercise.

Worker organizations use local and may engage foreign resource persons to provide advisory services.

Indicate any existing integration or linkages of such services with national primary health care systems and general environmental concerns.

In Malawi government-run primary health care services tend to be free. Thus injured employees may be treated for free in primary health care facilities. Employers may pay for care in private health care facilities.

The major concern is that most primary care providers (in both public and private facilities) have no training in occupational safety and health. Thus occupational and environmentally related problems are not recognised and recorded as such.

Overall the emphasis is towards treatment for injuries/diseases without preventive interventions.

Include key national or designated bodies responsible for carrying out analytical or assessment work related to the determination of worker exposure to various occupational hazards (analysis of air samples, biological samples, audiometric testing, etc.). Provide information on level of technical capabilities if possible.

Designated Laboratories:

Currently there are no designated laboratories for the analysis of work related exposures. The Directorate for OSH, Department of Environmental affairs and Department of Mines do not have laboratory facilities dedicated to analysis of samples collected from exposed workers and the environment.

Potential laboratories that could be used for analysis of chemicals in work or environmental exposures

Malawi Bureau of Standards (MBS)

The Department of Environmental Affairs reported that they have used the services of Malawi Bureau of Standards when analysing toxic exposures or environmental pollution. Thus the Malawi Bureau of Standards has some equipment that has been used in determining chemical levels in the environment.

Capability and Capacity: On discussion, Malawi Bureau of Standards (MBS) could not answer if they have enough capability and capacity to carry out analysis for workplace chemical exposures. MBS suggested that Directorate for OSH and other stakeholders should submit a list of chemicals that need to be analysed to MBS. Based on the list MBS can asses its capacities and capabilities.

OSH exposure standards: While MBS could do the laboratory analysis, Directorate for OSH will have to come up with or adopt exposure limits values.

Who pays for the service? Malawi Bureau of Standards is a parastatal organisation. It has to generate funds for its operations on its own. Thus a mechanism for paying for the bureau's services will have to be developed.

Department of Water

The Department of Environmental Affairs reports using the services of the Department of Water for the analysing water pollution.

Department of Chemistry at Chancellor College, University of Malawi

The Chemistry Department at Chancellor College has an analytical chemistry section that could handle some of the chemical exposures of the workplace. The extent of their capabilities needs to be evaluated.

Overall there are no laboratory services dedicated to OSH and environmental issues. Directorate for OSH, Department of Mines and Department for Environmental Affairs are likely to need the same kind of equipment for collecting samples as well as laboratory analysis thus there is need to collaborate in

- Approaching a potential laboratory (e.g. MBS or Chancellor College) for analysis of environmental or workplace samples.
- Approaching Ministry of Health for analysis of biological monitoring samples
- Developing a dedicated laboratory facility for analysis of environmental and workplace exposures.

Describe any existing compensation, social security or insurance schemes covering occupational injuries and diseases. Include extent of coverage and the agencies or bodies responsible for the administration of such schemes. Indicate linkages to or involvement in the collection and treatment of statistics of occupational accidents and diseases.

EXISTING COMPENSATION SYSTEM: The Workers Compensation system provides compensation to workers injured while in the course of work.

REGULATION: The Workers Compensation Act 1999 provides for the workers compensation scheme for injured employees in Malawi.

Extent of coverage

- Worker : According to the Workers Compensation Act, "worker" means any person who has, whether before or after the commencement of the Act, entered into, or worked under, a contract of service or apprenticeship with an employer in any employment, whether the contract was expressed orally or in writing or was implied:
- The following not "workers" as defined by the act- A person whose employment is of a casual nature, an outworker, a tributer, a member of the employer's family living in the employer's house and a member of the armed forces of Malawi;
- The Workers Compensation Act uses a broader definition of worker compared to OSHW Act. OSHW Act defines workers by listing activities. Thus activities that are not listed are not considered work (e.g. care of patients is not listed- thus excludes health care professionals involved in patient care from definition of workers).
- Employer: "Employer" includes the Government (except the armed forces of Malawi), a local authority, any body or association of persons, corporate or unincorporated. This appears to cover employers regardless of having insurance that would pay if an employee got injured.
- Eligibility According to section 4 (1) of the Workers Compensation Act an injury arising out of and in the course of his employment caused to a worker entitles an employee to compensation towards the injury or illness.
- Ineligibility An employer shall not be liable to pay compensation if
 - An injury incapacitates the worker for a period of less than seven days and prevents him/ her from earning full wages or salary.
 - o An incapacity or death resulting from deliberate self-injury
 - It is proved that the injury to the worker is attributable to the serious and willful misconduct of that worker,

Responsible Body

The current situation is that the Office of Commissioner for Workers Compensation distributes funds from employers (or employer's insurance company) to injured employees or their representatives or dependents.

Though the Workers Compensation Act refers to a Fund to which payments are made by employers and from which they are paid out to employees, neither the fund nor the Board of Directors which was supposed to run the Fund has been created. The Workers Compensation Act is under review to clarify issues related to the Board and the Fund.

Collection of Statistics

The Department for Workers Compensation collects statistics for injuries that require compensation. WCC keeps a record of circumstances of the injury. The limitation is that the data is not computerised.

Indicate if the compensation bodies provide resources for the implementation of prevention programmes including any financial support.

Currently the Department of Workers Compensation has not implemented any prevention programmes. It would be fair to say that the Directorate for OSH would be the one expected to implement prevention programmes.

Overall Malawi has a workers Compensation system as provided for in the Workers Compensation Act of 1999. According to the Act any employer is eligible to pay workers compensation regardless of the type of contractual agreement. There are no ratings of employers based on previous experience.

10.1 Enlist University and College courses related to OSH.

Indicate existence, type such as degree in public health, OSH or occupational medicine; OSH technician diplomas and number of graduates per year in each category;

None of the University institutions offers a degree or diploma course in OSH

- College of Medicine (University of Malawi): offers an introductory course in occupational health and safety to medical students in their third year of training. The Malawi College of Medicine has potential for running an MPH program in occupational health as it has a modular MPH program in management.
- The Polytechnic (University of Malawi): offers a Bachelor of Science degree in environmental health which covers some aspects of occupational health.
- Kamuzu College of Nursing (University of Malawi): offers a course in occupational health to nursing students at the fourth year of training.

10.2 Training structures run by Employers' or Workers' organizations (identity and training capacities in persons per year);

Training Structures run by Worker Organisations

Malawi Congress of Trade Unions (MCTU): Malawi Congress of Trade Unions, created in 1995, is the umbrella union with 22 affiliates and a membership of 200,000. Internationally it is affiliated with AITU, OWATU and SATTUCU. The union has a Director for training that coordinates all training activities as agreed by the union leadership.

A needs analysis and strategic plan carried out by the union leadership designated education and training as priorities of MCTU. Current training priority areas are HIV, gender and OSH issues. Training is offered to everybody; from union leadership all the way to local employees. Since 2004 MCTU reports that they have trained 5000 people.

MCTU has training expertise within the union, but does use external trainers when capacity is lacking. Through its trainer of trainers courses, MCTU has developed capacity for specific training of OSH programs at ground level.

The main funding for training is union subscription. Part of the funding has come from L-Norway.

Training Structures by Employer Organisations

ECAM: does not run any training on OSH issues at this time due to several factors. One of the major factors is that OSH issues come third on ECAM's priorities list behind issues of employment and salaries

10.3 Institutions conducting legally required training for OSH specialists such as Safety Officers, Safety Committee Members, or for the delivery of certification in specific skills such as Scaffold building, operating special equipment such as cranes or earth moving equipment, or mechanisms established for that etc.

None of the OSH legal instruments list specific training requirements for OSH specialists. Thus no institutions provide legally required training for OSH specialists. If a body e.g. Directorate for OSH, Ministry of Health, and Ministry of Education came out with a list of training requirements for OSH specialists; institutions would be in a position to offer legally required training.

At National level the Directory for OSH provides rudimentary training on safety issues and does not provide certification in specific skills.

At Worker organisation, one union (Building Construction, Civil Engineering and Allied Workers Union.) indicated having a scaffold expert. Employers are responsible for paying for training in scaffold safety. Unions generally use external expertise whenever they need training.

At Employer organisation level, ECAM does not conduct any training to employees.

TEVETA (A parastatal organisation to which employers pay funds for the training of skilled labour force at technical colleges): has conducted several OSH seminars for employees of paying organisations. Subjects (in basic OSH issues) covered at such seminars were proposed by employers. The seminars were run by Directorate for OSH.

Other: Some individual organisations have previously advertised OSH training however the training was not sanctioned by Directorate for OSH.

Provide, if available, a list of the skills requiring certification training and information on the institutions providing this type of training (number of persons trained per year, etc.)

Directorate for OSH has not provided any certification for the courses it has conducted. It does not provide any skills training at this time. MCTU has provided certificates of attendance to some of courses at the request of participants. The certificates that were given out were not for attainment of particular skills. No skills training is offered by ECAM.

10.4 National Safety Councils and Associations.

There are no national councils or associations involved solely on OSH issues in Malawi that are involved in OSH training. The National Road Safety Council while involved in road safety issues in general covers road safety for those employed in the transport sector.
Overall there are no institutions that provide training certification in specialised OSH areas. The general progression of training would be to go from basic training to specialised training. Since the country lacks basic OSH training it thus is unlikely to have specialised training.

Legal instruments have not required specialised training in aspects of OSH. Directorate for OSH and stakeholders need to come up with a list of skills for which they need training for. Training institutions would be in a position to source for individuals with the needed skills to provide training.

11.0 SPECIALIZED TECHNICAL, MEDICAL AND SCIENTIFIC INSTITUTIONS

11.1 List existing Poison control centres and indicate any participation in the INTOX Programme of the International Programme on Chemical Safety (IPCS) (see Internet address in Annex 2); links with occupational health services if any and level of human and financial resources devoted to poison control Centres

We are not aware of the existence of any poison control centres in Malawi.

11.2 Standardizing bodies, i.e. bodies that produce technical standards, or provide the expertise necessary to certify the conformity of machines, processes and other mechanisms with regulatory requirements concerning safety. Examples include certification of Pressure vessels, Electrical tools and machines, machine guarding equipment, etc.

There are no bodies that produce technical standards in OSH issues and equipment.

Malawi Bureau of Standards: evaluates products for consumer safety. When the Bureau visits worksites on issues of product safety it may comment on machine safety. However it does not have exposure limits or machine safety standards which can be enforced.

The Directorate for OSH has some expertise at evaluation and commissioning of pressure vessels.

11.3 Institutions and laboratories specialized in occupational hazard and risk assessment related to chemical safety, toxicology, epidemiology, product safety, etc. List designated and private bodies separately

Malawi does not have institutions and laboratories that specialise in occupational hazard assessment related to chemical safety, toxicology, epidemiology, product safety, etc.

SPECIALISED Activity	INSTITUTION AVAILABILITY	INSTITUTION	DETAILS
Chemical Safety	Potential Resource	Malawi Bureau of Standards	If the chemical is the end product MBS may monitor it to safeguard the consumer.
Toxicology	Potential resource	Malawi College of Medicine	Department of Pharmacy (Has potential to assess for Medical toxicology)
Epidemiology	Potential resource	Malawi College of Medicine	Dept of Community Health has several individuals with PhDs in Epidemiology
Product Safety	Y	Malawi Bureau of Standards	Product safety. The main concern is to safeguard the user

Table 12: Potential Institutions and laboratories that could help in occupational hazard and risk assessment related to

The institutions listed in table 12 may have potential in the handling some the listed specialised areas. Exploratory discussions need to be held with the suggested institutions.

11.4 Emergency preparedness, warning and response services, such as Civil Defence, Fire brigades, chemical spill responders training to deal with major emergencies, etc.

We are not aware of emergency preparedness services other than the local fire brigades located at major cities of Blantyre, Lilongwe and Mzuzu. Major Airports also have fire brigades for airline emergencies. The fire brigades are generally mobilised in case on community emergencies like fire.

Chemical responder training: We are not aware of such training in Malawi

11.5 Non-Governmental bodies involved in OSH related activities, such as Professional associations with activities directly linked to aspects of OSH such as OSH specialists, occupational physicians, chemists, safety engineers, etc.

The Directorate for OSH are not aware of other organisations and associations whose activities are directly linked to OSH activities.

OVERALL

- There are no poison control centres in Malawi.
- There are no bodies that produce technical standards in OSH. MBS produces standards of product safety for the protection of consumers.
- We could not locate associations NGOs involved in OSH activities

- While there are no institutions that can perform complete risk assessment of OSH related problems, a list of potential institutions has been listed.
- We could not locate emergency preparedness training on chemical spill. Fire brigades offer emergency preparedness in case of fire.

12.1 If these data have been included partially in the sections above, summarize them in tabular form under this section. To the extent possible include information on legal and educational requirements to qualify for each profession.

Table 13: Human resources active in the area of OSH

	PROFESSION	NO.	EDUCATIONAL REQUIREMENTS	COMMENT
12.2	Number of Occupational physicians	1	Medical degree with Post graduate training in occupational medicine/ occupational health and safety	
12.3	Number of Occupational Health Nurses	Not known	A nursing degree. Occupational health is covered during training. No specialised training is offered in Malawi	Number not known
12.4	Number of Occupational Hygienists	3	Basic degree in chemistry, physics, engineering with on the job training and short courses.	3 listed are from OSH. Private sector may have industrial hygienists.
	Safety engineers and technicians	1	Degree in engineering plus post graduate training Directorate for OSH has 1 safety engineer.	Private sector may have some safety engineers
12.5	Labour inspectors	94	MSCE (Similar to GCE) with on the job training and short courses	Mainly involved in labour issues like pay, resolving dispute
	OSH inspectors	7	Basic degree in chemistry, physics, engineering with on the job training and short courses	Listed inspectors are from OSH. Private sector may have some OSH inspectors
	Machine safety inspectors	Not known		No organisation of safety inspectors could be located
1.6 .	Environmental protection specialists	4	Environmental Science and Technology. – Bachelor degree in Environmental Management	Environmental monitoring
	Mining inspectors	1	BSc Environmental Technology, Diploma in mining	Concerned with OSH in mines
	Explosives Inspectors	1		Concerned with explosive safety in mines

Information on man power involved in OSH could not be located for those in private industry (table 13). No organisations register OSH specialists within Malawi.

Overall it was difficult to establish national data on human resources involved in OSH. The main problem being that there are no organisations or associations to which OSH individuals belong.

13.0 STATISTICS OF OCCUPATIONAL ACCIDENTS AND DISEASES

13.1 List existing mechanisms, if any for the recording and notification of occupational accidents and diseases. Indicate conformity with the ILO Code of practice on the recording and notification of occupational accidents and diseases.

Employers are expected to record all work related injuries and illnesses in the General Labour Register as required in the OSHW Act. Some employers record injuries in their own books. Directorate for OSH feels this is acceptable compared to not recording at all.

ILO code of practice on records is adhered to as records are not open to the public. Thus the privacy of employees is protected.

13.2 Indicate the presence of a national list of occupational diseases and the mechanisms available for its periodic review and updating.

The second schedule of the OSHW Act lists reportable occupational diseases. The diseases listed on the schedule are: Lead, phosphorus, manganese, arsenic, aniline, carbon bisulphide, benzene, chrome, silica, anthrax, compressed air, asbestos, radiation, cotton sugar cane fungi and tobacco induced diseases (OSHW Act 1997 section 67 and 67s).

Though the OSHW Act requires reporting of occupational diseases, few cases have been reported. The Directorate for OSH reports that they have received a case of alleged occupationally related diseases but do not have proof of causation. The Commissioner for Workers Compensation could not recall his office compensating any occupationally related disease.

We are not aware of any national review and updating mechanism for the list of reportable occupational diseases in Malawi.

Provide the number of occupational injuries per year for the last five years (total and per sector of economic activity). Provide also, if possible, an estimation of under-reporting as % range, with a description of the calculation methodology used

ILO reports estimates that, in Malawi, the number of accidents causing 3 or more days of absence from work was between 510,000 and 969,740¹². In Malawi an employee is eligible for Workers Compensation payment if the injury incapacitates him/her for 7 or more days.

Directorate for OSH reports totals of 24 to 36 accidents per year in Malawi for the past 4 years (table 11). These numbers are far below ILO estimates. This may point to serious underreporting of work related accidents in Malawi.

Fatal accidents

SECTOR	NUMBER EMPLOYED IN THE SECTOR	NUMBER OF FATAL Accidents in the Sector	FATAL ACCIDENTS PER 10,000 Employees in the sector
Agriculture	4,182,000	815	1.95
Industry	153,000	21	1.37
Service	766,000	183	2.39

Table16: fatal accidents in different sectors of employment in Malawi reported to ILO in 2001

Source 12

ILO estimated that 940 fatal accidents happened in Malawi. While the agriculture sector produced most of the fatal accidents, the highest risk of fatal accidents was in the service sector followed by agriculture and industry (table 16)

Occupationally related diseases

ILO estimates that work related diseases caused 3702 deaths in Malawi in 2001. At the same time 1007 deaths occurred because of dangerous substances¹². Directorate for OSH and Workers Compensation Office report two cases of work related illnesses which they are working on. This may be due to underreporting since most primary care clinicians are less likely to collect an occupational history when employees present with medical problems.

Overall the number of reported occupationally related injuries and diseases are much lower than ILO estimates. There is likelihood of serious underreporting of work injuries and diseases.

14.1 Policies and programmes of Employers' Organizations

Table 16: Policies and Programmes of Employers' organisation

ELEMENT	EXIST YES/NO	DESCRIPTION
14.1.1 OSH Policy Statement	No	ECAM has a code of conduct encouraging employers to have OSH policy
14.1.2 Structure of policy implementation (OSH Unit/ committee)	No	
14.1.3 Programmes e.g. Training, information members	No	
14.1.4 OSH elements in collective bargaining	Yes	ECAM participates in collective bargaining where OSH issues are generally part of the discussion. I
14.1.5 Participation in the national tripartite dialogue	Yes	Executive Director its member organisations participate in tripartite dialogue

14.2 Policies and programmes of Workers' Organizations

Table 17: Malawi Congress of Trade Unions

ELEMENT	EXISTS YES/NO	DESCRIPTION
14.2.1 OSH Policy Statement	Yes	MCTU OSH policy statement applies to its affiliates.
14.2.2 OSH Unit	Yes	Affiliate has an OSH coordinator that communicates with MCTU on OSH issues
14.2.2 OSH Committee	Yes	OSH committees are available at the enterprise level
14.2.3 Training for members	Yes	MCTU has coordinator for Training. Training provided to union management, trainer of trainers, and members
14.2.3 Information for members	Yes	Most of the information is sourced from ILO, Directorate for OSH
14.2.4 OSH elements in collective bargaining	Yes	The MCTU national executive board handles issues on collective bargaining that relate to affiliates
14.2.5 Participation in tripartite dialogue	Yes	MCTU selects individuals to participate in tripartite dialogue

Among worker organisations, the affiliates have local responsibilities and some responsibilities are handled by the mother body like MCTU. It appears the worker organisations have all the listed components (table 17).

OVERALL

- MCTU affiliates have their policy on OSH at MCTU which is the mother body for all unions in Malawi.
- MCTU provides training and information at both affiliate and MCTU levels
- Collective bargaining is handled by both affiliates. MCTU selects individuals that participate in the tripartite dialogue.
- The employer organisation does not have an OSH policy but expects members to develop OSH policies.
- Both employer and employee organisations participate in collective bargaining and tripartite dialogue.

15.0 REGULAR AND ONGOING ACTIVITIES RELATED TO OSH

15.1 List regular activities at the national level designed to improve level of prevention and protection.

ACTIVITY	WHEN	OUTCOMES MEASUREMENT AND COMMENTS
Routine Inspections	Regular activity	 Outcomes: Reduction of injuries, Directory for OSH has not analysed data relating inspections to reduction in accidents or injuries
Accident investigation	Occur when an accident has been reported	 Outcomes: Recurrence of accident. Directory for OSH has not analysed data relating accident investigation to recurrence of accidents or injuries
Pressure vessel examination	Each pressure vessel is examined twice a year	 Outcomes: Number of pressure vessel explosions. Directory for OSH has not analysed data relating pressure vessel examination to vessel explosions

Table 18: Activities at national level designed to improve level of prevention and protection

Impact assessment

- While the directorate for OSH collects and records data on different work related injuries and illnesses it has not analysed the data to evaluate the impact of its services. Some outcome measures are suggested (table 18).
- Directorate for OSH needs continuous data analysis the results of which can be used continual improvement cycle



Fig 3: ILO management system (copied from Guidelines on occupational safety and health Management systems ¹² (ILO-OSH 2001))

The continual improvement cycle shows need for analysing data (Evaluation) that is then used to determine what action will be done in order to improve the situation in a workplace.

Overall improvement in prevention and protection because of directorate activities can be determined if the cycle of continual improvement is completed. Thus the directorate may need to establish a monitoring and evaluation component.

15.1.1 National initiatives such as awareness raising campaigns, Safety Days(Week), media campaigns, etc. (indicate only if these means are used and their periodicity)

Table 19: National Initiatives on OSH issues

ACTIVITY	EXISTS YES/NO	DETAILS
Media coverage before World Day for Safety	Y	 There is media interest on OSH issues several days before World Day for Safety and Health. The Directorate for OSH takes advantage of the raise in media interest.
World Day for Safety and Health	Y	28 April
Media Day (Press Releases)	Y	Directorate for OSH conducts media days twice a year.

Each year a different theme on OSH is emphasised locally. A different location for World Day of Safety is chosen each year.

All stakeholders, government, employers and employee organisations participate. Activities may include issuing press releases, setting up stands, display poster and providing education opportunities to the public on labour and OSH issues.

Industry initiatives such as responsible care programmes or product stewardship, implementation of OSH management system approaches, ISO 9000 and 14000, certification schemes, etc).

Directorate for OSH does not provide any certification other than a certificate of registration. ISO certifications are international not local. Industries take initiatives to get the international certifications on their own or at the urging of their headquarters, for multinational companies.

Malawi Bureau of Standards provides certification for product safety in order to safeguard the consumer. Local companies display a safety product emblem from MBS.

15.2 Trade Union OSH activities and initiatives:

Table 20 Trade union initiative					
ACTIVITY	WHEN HAPPENS	DETAILS			
World Day for Safety and Health	28 April	Main activity is sensitisation of workers on unions and their activities			
Media / Radio	Weekly	Weekly radio program on union issues. The program's aim is to sensitise the general population about unions			
Newspapers	6 times per year.	Sensitisation campaigns			

Table 20 Trade union initiative

With 5 million people formally employed (ILO 2001), an MCTU membership of 200,000 means that only a small percentage of the workforce is unionised. Thus the Malawi Congress of Trade Unions is involved in sensitisation of the media and the general public about union participation. OSH issues may be covered in the media campaigns.

Employer representative organisation: ECAM takes part in organising activities of the day as well as taking part in the press conference together with other social partners. As the representative body ECAM invites member organisations to take part in the day's activities.

Overall for regular OSH activities

While Directorate for OSH collects information, the information is not analysed in such a way as to be used for continual program improvement. Adoption of OSH management

- Initiatives to sensitise the media and the general population on OSH issues occurs on World Day for Safety and Health, Media Day, and when press releases from Directorate for Labour and Unions are published.
- MBS provides certification for product safety. ISO certification is not provided locally.

16.0 INTERNATIONAL COOPERATION

List international capacity building, technical cooperation or other internationally based or motivated activities directly related to OSH in areas such as environment, chemical safety management, public health, introduction of cleaner/safer technologies.

Indicate the international governmental organization involved such as ILO, WHO, UNEP, FAO, UNIDO, UNITAR, OECD, UNDP, etc.

Indicate also activities supported by international non-governmental organizations. The level of information provided should be concise such as name of organization, programme or project name, purpose, and level of resources. If data is not readily available, include an address, Internet site or contact information where detailed data may be obtained readily.

Table 21: International Cooperation

DEPARTMENT	INTERNATIONAL Organisation Associated With	ACTIVITIES	RESOURCE Contributed (US \$)	SOURCE OF INFORMATION
Directorate for OSH	ILO	Improvement in OSH activities		
Department of Environmental Affairs	UNEP	Capacity Building: training of environmental inspectors		
Department of Mines	IAEA	Radiation Exposure measurements.		

ILO, UNEP and IAEA are the international organisations collaborating with Malawi in different areas of OSH. None of the informants could recall the total amount of money involved in the project. None of the departments are currently working with non governmental organisations in the area of OSH or environmental exposures

OVERALL

• There is limited collaboration between Malawi and International organisations on OSH issues. The recipient organisations are not sure of the total amount of money involved.

PROGRAMME	DIRECTORATE FOR OSH	DEPT OF MINES	ECAM	DEPT OF ENVIRONMENTAL AFFAIRS
Elimination of hazardous child labour	Y	N	у	
Elimination of silicosis and asbestosis diseases	N	N		
Elimination of violence and sexual harassment at work	N	N		
Elimination of Persistent Organic Pollutants (POPs)	N	N		Program was phased out more than 1 year ago
Elimination of drug abuse:	N	N	N	
Promotion of work-related welfare facilities:	N	N		
Promotion of well-being programmes including healthy lifestyles and stress prevention	N	N	N	
Application of programmes to combat HIV/AIDS at the workplace and the application of ILO Code of Practice on HIV/AIDS	Y	Y	N	
Promotion of programmes on gender equality and maternity protection	N	Y	N	
Programme for application of Globally Harmonised System (GHS) for classification and labelling of chemicals and Chemical Safety Data Sheet (CSDS)	N (in pipeline)		N	

Table 22: Promotion and elimination programmes in different inspectorates

Directorate for OSH and are involved in the elimination of Child Labour and promotion of HIV/AIDS programme in the workplace.

Department of Mines were involved the promotion of HIV/AIDS in the workplace as well as promotion of gender equality and maternal protection,

Department of Environmental Affairs was involved in the elimination of persistent organic pollutants a year ago. The program has since phased out.

ECAM are involved in an ILO sponsored programme in child labour issues

Support mechanisms for a progressive improvement of occupational safety and health conditions especially for hazardous sectors or agents such as:-

Agricultural sector, Construction sector, Chemicals, SMEs, The informal sector, Mining

Directorate for OSH is not aware of any support mechanisms for improvement of OSH conditions in most of the listed sectors

The Mining sector is getting funding from IAEA and Paladin Uranium Company towards the establishment of a laboratory for assessing environmental exposure in and around the uranium mine. Such a facility would provide objective data that could be used to determine exposure levels around mines and quarries. Such measurements would pick out exposures that need to be controlled

Overall only a few promotional and elimination programmes are being run by the three inspectorates.

18.0 GENERAL COUNTRY DATA



Fig 2: Map of Malawi

Historical information

Malawi is a land locked country in the south-eastern part of Africa. She is surrounded by Mozambique in the south-eastern and south-western borders, Tanzania in the north and Zambia on the west (fig 2). Malawi is 118,485 square kilometres in size with Lake Malawi taking up 25% of the area¹³.

Current Political climate: Malawi is a new democracy. Its current head of state is Dr. Bingu wa Mutharika who was elected in 2004. Previous presidents were Dr. Bakili Muluzi (1994-2004) and Dr. Kamuzu Banda (1966-1994). Multiparty democracy has brought with it a free market system which affects implementation of OSH and labour issues.

18.1 Demographic data

18.1.1 Total population

The main people of Malawi are the Nyanja, Chewa, Ngoni, Lomwe Tumbuka and Yao. The population of Malawi is estimated to be around 13 million people. Young people make up close to 50% of the population. About 15% of the population live in urban areas while 85% live in rural areas¹³. The majority of the population is involved in subsistence farming.

Demographic / Vital statistics: The density of Malawi is 97 persons per sq km (251 persons per sq mi) (1991). 11.0% to 15% of the population is located in urban areas thus 89.0% to 85% remains rural (1987).

The population of Malawi has more women than men since 48.6% of the population is male and 51.4% is female (1987). Life Expectancy at Birth was 46.3 years for male and 47.7 years for females (1990). Malawi is generally a younger nation with 48% of the population being under 15 years old, 26% was between 15 to 29 years old, 14% was between 30 and 44 years old, 8% was 45 and 59 years old, 3% was 60 and 74 and 1% was 75 and over (1987).

Malawi's birth rate in 1990 56.3 per 1,000 while the death rate; 20.6 per 1,000. Thus there was an increase rate of 35.7 per 1,000 (1990).

CHARACTERISTIC	1990 **	2000	2004	2005	2006	2007
Population, total (millions)		11.62		13.23	13.57	13.92
Population growth (annual %)	3.6	2.9		2.5	2.6	2.5
Life expectancy at birth, total (years)	47	46		47	48	
Fertility rate, total (births per woman)		6.2	6*	5.8	5.7	
Mortality rate, under-5 (per 1,000)		155	133*	125	120	
Infant mortality rate (infant deaths per 1000 births)	150		76*			
Maternal mortality ratio (maternal deaths per 100,000 live births)		1120*				

Table 23: Demographic data on Malawi

Sources:13, 14, 15

Malawi's population continues to increase annually. However the rate of increase has slowed down. The current annual rate of increase is 2.5%. Life expectancy that had gone down because of HIV/AIDS has gone up to 48 years (table 23).

18.1.2 Total economically active population (employed persons in all sectors). Provide percentages per sector of economic activity if available.

SECTOR	LABOUR STRUCTURE (NUMBERS)	LABOUR STRUCTURE (PERCENT)
Agriculture	4,182,000	82
Industry	153,000	3
Service	785,000	15
Total	5,120,000	100

Table 24: Employment by sector in Malawi:

Source: 9

According to ILO 5,120,000 people were employed in Malawi in 2001. Agriculture was the main employer in Malawi, providing employment to at least 80% of the population. This is followed by the service industry that employed 15% of the population (table 24).

18.1.2.1 Men workers (in millions or % of number in 18.1.2)

Table 25: Distribution of men by Employment status (DHS 2004)

BACK GROUND CHARACTERISTICS	EMPLOYED IN THE 12 M	ONTHS BEFORE STUDY	% NOT EMPLOYED In the 12months	MISSING DNK	NUMBER OF MEN
AGE	% CURRENTLY Employed	% NOT CURRENTLY Employed	PRECEDING STUDY		
15-19	19.6	15.7	64.3	0.5	650
20-24	52.4	18.5	28.7	0.3	587
25-29	63.3	28.1	8.6	0	634
30-34	72.4	21.5	6	0	485
35-39	71.0	22.6	6.4	0	294
40-44	71.4	22.5	6.1	0	282
45-49	63.3	27.8	8.9	0	182
50-54	69.1	24.1	6.8	0	148

Source: 15

A higher percentage of young men tended to be unemployed compared to older men (25 years old and over).

18.1.2.2 Young men workers (14 to 18 year old)

The National Statistical office survey showed that of the 650 young men (15-19 years old) interviewed, 35.3% had been employed in the 12 months before the study took place (table 25).

18.1.2.3 Women workers (in millions or % of number in 18.1.2)

	EMPLOYED IN Preceding St	THE 12 MONTHS I'UDY				
AGE	CURRENTLY Employed	NOT Currently Employed	NOT EMPLOYED IN The 12 Months Preceding Study	MISSING / Don't Know	TOTAL (%)	TOTAL (NUMBER)
15-19	37.1	3	59.9	0	100	2,392
20-24	53.3	3.8	42.9	0	100	2,870
25-29	57.6	2.9	39.5	0	100	2,157
30-34	63.6	2.9	33.5	0	100	1,478
35-39	64.3	2.1	33.6	0	100	1,117
40-44	67.5	4.2	28.3	0	100	935
45-49	67.8	2.8	29.3	0.1	100	749

Table 26: Distribution of women by Employment status (DHS 2004)

Older women (20 or more years old) tended to be employed compared to younger women (15-19 years old). From 25 years old more males tended to be employed compared to women. More women tended to be unemployed in the 12 months before the study compared to men (table 26)

18.1.2.4 Young women workers (14 to 18 year old)

Among young women 37% were currently employed compared to young men of which only 19.6% were currently employed (tables 25 and 26). The majority of young people were involved in agricultural activities.

18.1.3 Provide if possible a % estimate of men, women and young workers employed in each sector of economic activity.

Table 25: Percentage distribution of currently employed persons aged 15 years and over by type of employment (Malawi 2005)

	ECONOMIC ACTIVITY							
BACKGROUND Characteristics	FARMER (%)	EMPLOYEE (%)	FAMILY BUSINESS (%)	SELF EMPLOYED (%)	EMPLOYER (%)	TOTAL		
MALAWI	75.4	12.7	5.1	6.5	0.2	100		
PLACE OF RESIDENCE								
Urban	15.3	53.4	6.4	24.9	0.1	100		
Rural	81.4	8.7	5	4.6	0.2	100		
SEX								
Male	64.9	20	5.9	8.9	0.3	100		
Female	86.6	5.1	4.4	3.9	0.1	100		
AGE								
15-24	81.7	8.7	5	4.6	0.1	100		
25-34	67	17	6.7	9	0.2	100		
35-49	70.3	17	5.2	7.2	0.3	100		
50-64	81.4	9.3	3.9	5.3	0.1	100		
65+	90.8	3.9	1.9	3.1	0.2	100		
EDUCATION								
None	78.4	8.8	5.8	6.9	0.2	100		
Primary	68	15.8	6.1	9.9	0.2	100		
Secondary & above	35	49.3	6	9.3	0.5	100		

Source: 16

According to the Integrated Household Survey 75% of the economically active population reported that they work as farmers, 13% reported that they were employed while 6.5% reported being self employed (table 25). Farmers tended to be rural (81%), female (87%) with no education (78%).

Table 26: Percentage distribution of persons aged 15 years and over in wage employment bytype of industry according to background characteristics, Malawi 2005

Background characteristics	Agriculture	Mining and quarrying	Manufacturing	Electricity water and utilities	Construction	Wholesale and Retail	Transport and Communi- caion	Business and finance	Social, Community and Service
Malawi	21.9	0.1	17.3	1.5	11.6	7.7	3.5	1.7	34.7
Place of residence									
Urban	3	0	15.9	2.4	3.9	12.8	8	4.2	49.8
Rural	28.6	0.2	17.8	1.2	14.3	5.9	1.9	0.9	29.3
Sex									
Male	23	0.2	20.1	1.7	9.9	8	3.8	1.6	31.7
Female	18	0	7.4	0.6	17.5	6.8	2.5	2.1	45.1

Source: 16

Among those that labeled themselves as employed (earning a wage) the majority of the participants 34.7% reported being employed in the social community and services industry while the agriculture industry employed 22% of the participants (table 26). 45.1% of women were employed in the social community and service sector compared to 31.7% of the men¹⁶.

18.1.4 Indicate also percentage of the labour force considered to be active in the informal economy and therefore not or marginally covered by any OSH, social protection measures or schemes (social security, accident insurance, workmen's compensation, etc.).

They are informal sector generally are unregistered, officially unrecorded and thus not controlled by government structures on such issues as labour inspectorates on OSH. We could not find exact number of those participating in the informal sector. According to TEVETA for every 200,000 young people that enter the labour market every year only 35,000 are employed by the formal sector¹⁷. Thus the formal labour market is able to take in 18%, leaving 82% to survive on their own; most likely; in the informal sector

A blogger estimates the formal sector to represent \$7.4 billion US. And he estimates that the informal sector represents another \$33.3 billion annually in Malawi¹⁸. This also means that the formal sector contributes 18% to the economy while the informal sector contributed 82%. Tevet estimates that the informal sector's share of urban labour force is above 60% ¹⁷. Based on the stated figures it appears that the informal sector is much bigger than the formal sector.

Thus the majority of the labour force's health is not protected by OSH regulations.

18.2 Literacy levels

18.2.1 Percentage of whole population with at least elementary school level of ability to read and write in national language.

The DHS 2004 defined adult literacy rate as the percentage of people ages 15 and over who could; with understanding; read and write a short, simple statement about their everyday life.

There are reports of an increase in the literacy rate over time mainly among women. Literacy rates for women age 15-49 increased from 49% to 62% between 2000 and 2004. Among men literacy rate increased from 72 % to 79% during the same time period ¹⁵.

AGE	NO EI	(%) Ducation		(%) IMARY 1-4	PRI	(%) PRIMARY 5-8 (%) SECONDARY OR HIGHER		NDARY	(%) TOTAL FOR EACH SEX *		MBER APLED
	Men	Women	Men	Women	Men	Women	Men	Women		Men	Women
20-24	7.7	14	21.1	26.2	35.5	36	35.5	23.6	100	2,408	3,036
25-29	11.1	25.2	18.8	27.3	34	31	35.9	16.4	100	2,271	2,247
30-34	16.4	36.4	19	26.8	36.4	27.9	28.1	8.9	100	1,651	1,516
35-39	18.8	38.6	19.8	22.3	39.8	32	21.2	6.9	100	1,101	1,122
40-44	15.9	41	20.6	24	41.8	30.1	21.3	4.7	100	939	970
45-49	20.4	51.4	18.8	22.5	41.8	21.5	18.6	4.6	100	656	743
50-54	21.4	49.6	25.8	27.7	37	15.8	15	5.5	100	649	998
55-59	26.1	61.7	26.4	27.2	32.8	7.5	12.1	3	100	712	734
60-64	32.9	67.6	34.6	25.8	25.8	5.5	5.6	0.5	100	528	536
65+	43.7	73.3	36.4	23.1	15.6	2.9	3	0.5	100	996	1,189

Table 27: Education levels attained among women and men in Malawi (DHS 2004)

*Calculate total % for each sex separately. The % may not add up to 100% as the missing percentages have been left out of the table. Source DHS 2004

The percentage of adult women without formal education tended to be higher than that of males. Attainment of lower primary school tended to be higher among females. Attainment of higher primary and secondary tended to be higher among males (table 27). This could be explained by the high number of girls dropping out of school. 18.2.2 Percentage of labour force with at least elementary school level and ability to read and write in national language.

	EDUCATION LEVEL	PROFESSIONAL TECHNICAL / MANAGERIAL	CLERICAL	SALES/ SERVICES	SKILLED MANUAL	UNSKILLED MANUAL	DOMESTIC SERVICE	AGRICULTURE	TOTAL	N
Women	no education	0.2	0	13	2.1	1.4	0.5	82.8	100	1,808
	primary 1-4	0.5	0	17.3	2.1	1.3	1.3	77.5	100	1,855
	primary 5-8	1.1	0.3	25.2	2.2	1.3	2.2	67.6	100	2,310
	secondary or higher	17.4	8.9	30.2	3.6	1.4	2.7	35.7	100	849
Men	no education	0.3	0.2	10.5	8.8	4.8	1.7	73.8	100	351
	Primary 1-4	0.8	0.1	10.6	12.2	4.5	2.6	69.1	100	666
	Primary 5-8	1.4	1.4	18.2	15.2	3.6	2.1	58.1	100	935
	secondary or higher	18.3	5.1	25.3	15.3	3.2	1.6	31.1	100	571

Table 28: Occupation among men and women in Malawi in 2004

Source: 16

Comparison of men with women of similar education level shows that a higher percentage of women were employed in agriculture and sales service than men. Men and women with at least secondary education were equally likely to be employed in professional, managerial and technical sector. Men with higher education levels were more likely to end up in skilled manual jobs 15.3% compared to 3.6% for women (table 28).

18.3 Economic data

Table 29 economic indicators for Malawi

	INDEX	2000	2003	2005	2006	2007	2008
18.3.1	GNI per capita, Atlas method (current US\$)	150	184	220	230	250	
18.3.2	GNI per capita, PPP (current international \$)	610	605	640	690	750	
18.3.3	Amount in \$ devoted to OSH					74,355	69,114

Source: ¹⁴. Amount devoted to OSH: from Directorate for OSH: conversion rate MK140 to 1 US\$

In 2003 Malawi was rated as one of the poorest countries in the world with a GDP of \$605 and an annual per capita income of \$184 (World Bank 3). Since then the GDP has increased to \$750 and the annual per capita income has increased to \$250¹⁴.

The major sectors contributing to the GDP were the Service Sector that contributed 45% of the GDP followed by the agriculture sector that contributed about 34% of GDP¹⁴.

Table 30: Contributions of different sectors to the GDP

	2000	2005	2006	2007
Agriculture, value added (% of GDP)	40	33	34	34
Industry, value added (% of GDP)	18	21	20	20
Services, etc., value added (% of GDP)	43	47	46	45

Source: 14

There is a trend of agriculture contributions to the GDP going down while that of the service sector seems to be on the increase (table 30).

19.0 OTHER RELEVANT INFORMATION

The expert should provide the ILO with any national or other reports relevant to OSH issues such as annual reports produced by national institutions responsible for the implementation of the various aspects of OSH. Copies of the texts of the main OSH laws and regulations should also be provided if possible.

Attached regulations Copy of OSH laws Act

Copy of Labour Relations Act

Copy of Workers compensation Act

Copy of Employment Act

Copy of Annual Report

20.0 OTHER RELATED ISSUES SUCH AS:-

Other policies that may impact on OSH development and delivery systems

We are not aware of other OSH policies that impact on OSH development and delivery systems.

OSH issues relating to international trade that may impact on the country

Export trade zones are inspected

Malawi does not have areas designated for export companies only. Companies are granted export zone processing status on application to Ministry of Industry. Companies in the export zone processing status have to follow OSH laws and are similarly inspected by Directorate for OSH. The advantage of export zone status is in the reduction of taxes

Other details and initiatives relevant to OSH in the light of OSH integration and harmonisation including recommendations of any appointed national bodies under tripartite arrangements.

We are not aware of any initiatives on OSH integration and harmonisation going on at national level.

21.1 Legislation

Table 31: Analysis of legal instruments

LAWS	STRENGTHS	WEAKNESSES	COMMENTS
OSHW Act	Provides for safety of workers	Limited definition of worker	
	Provides for the development of industry specific regulations	Limited industry specific regulations have been established	Weakest part in OSH is that there are few industry specific regulations developed from the Act
Labour Relations	Freedom of Association		
Act	Procedures for union organisations		
	Collective bargaining		
	Dispute resolutions e.g. Industrial councils and Industrial courts		
Employment Act	Administration of Labour issues and powers of labour inspectors		
	Employment of young persons and child labour		
	Issues of discrimination		
	Work hours and wages		
Workers Compensation	Wider definition of worker than provided for in OSHW Act.		
Act	Provides for compensation due to work related injuries		
	Commissioner running the program	Board of Directors for WC is not in place	Act under review to set up the board in future
		Fund to which employer were supposed to pay has not yet been established	Act under review to set up the board in future

Strengths of legal instruments: Legal instruments for the protection of workers' health and compensation when injured are available and are backed by the constitution. These instruments are being enforced. This could be the strongest point in OSH issues in Malawi.

Weaknesses: There are no up-to-date industry specific guidelines or regulations that have been developed

from the current Acts. The few guidelines that are currently available are based on the Factories Act (which was replaced by the OSHW Act).

21.2 Structures:

Based on the laws, Malawi has been able to establish some structures that deal with OSH issues as discussed in the table

Table 32: OSH structures in Malawi

STRUCTURES	STRENGTHS	WEAKNESSES	COMMENTS
Ministry of Labour	Labour issues are recognised at high political levels	OSH tend to be viewed as not as important as salaries or strikes	
Commissioner for Labour	Legally requirement is stated in the law	Commissioner for Labour leads other entities that have more staff (Labour and Workers Compensation).	OSH in Labour Commissioner's office is the smallest, thus may not get attention it deserves
Directorate for OSH with a director and inspectors are present	The basic inspectorate structure is available. The directorate tries to function the best way it can	Funding for OSH activities is limited. Inspectors sometimes have no transport/fuel needed to travel to inspection sites Lack of equipment for exposure measurements	Lack of adequate funding is affecting day to day performance of OSH, training needs for inspectors and ability to acquire equipment
Other inspectorates	Cover workers that are not protected by the OSHW Act like clinicians and miners	There is no coordination between Directorate for OSH and other inspectorates.	Each inspectorate working on its own. Thus they may find it difficult to accomplish some activities or acquire equipment
Unions and Tripartite structure cooperation	The tripartite structure helps in meeting OSH goals of prevention as unions participate in safety committees.	Unions do not appear to have enough individuals trained in safety issues.	Training in safety issues and prevention need to be addressed
Structures to manage problems	Industrial Councils	These are not specific for OSH issues	
or disagreements on labour related issues in general	Industrial Relations Court	Not specific for OSH issues	
Workers Compensation Commissioner	Office is functional. Employers pay compensation to WCC who pays recipients	Fund and Board of Directors as required by legislation not established Data is not computerised	Availability of fund and Board would make it possible to rate companies on the amount they need to pay per year based on previous experience

Strengths: Most of the administrative structures in government and unions as required by law are in place (table 32). This is another strong point on OSH related issues in Malawi.

Weaknesses: The structures may not be functioning as well as may be expected due to

- Lack of equipment: equipment for monitoring exposures is needed if the inspectorate is to enforce the OSH laws and implement preventive measures.
- Lack of appropriate training: adequately trained (Masters Degree or Advanced Diploma in OSH related field) staff is needed.

Without equipment to monitor exposure levels, trained manpower and appropriate standards the impact of Directorate for OSH will remain minimal.

21.3 Systems

SYSTEM	COMPONENTS	STRENGTH	WEAKNESS
System Approach to OSH	Policy	Policy is in place and has legal backing.	
	Organising	Organisational structure is available. Assignment of responsibilities is mostly based on legal instruments	 Competence in some areas of OSH may be lacking due to limited training Industrial hygiene Laboratory equipment Development of industry specific regulation Health education/ Prevention strategies
	Planning	Data collected in previous years could help set baseline analysis	No objective data for exposure levels Directorate does not have objectives that need to be achieved due to lack of equipment and standards. Some hazard prevention limited by lack of facilities
	Implementation	Staff has been in service for a long time, thus may easily understand changes required with new system	Some may find it too hard to change
	Evaluation	Annual review by management is done but needs to be data based	Analysis to assess impact of Directorate for OSH interventions not done Exposure measurement data not available Outcomes measures based on objectives need to be developed (this is affected by lack of enforceable standards and lack of equipment)
	Action for improvement		Interventions are done with assumption that they are working. (comes down to lack of standards and equipment)
			Improvement is assumed not measured-
Basic Occupational Health Service system	National policy		
---	---	--	--
	Surveillance of work environment		Not done- no laboratory or other monitoring equipment
	Surveillance of worker's health	Legislation gives director for OSH powers for periodic monitoring of exposed workers	No specific guidelines as to which hazards need periodic monitoring
	Assessment of health and safety risks		Inspectors not trained in risk assessment.
			Lack of equipment adds to inability to conduct assessments
	Prevention of accidents	Yes in general terms via routine inspections and accident investigations	No specific / written industry specific programs
	Curative services	Primary care providers most likely to provide occupational services	Primary care providers lack OSH training as well as lack of time to implement prevention programs
	Psychosocial risks		There is limited capacity for of mental health services. Thus psychosocial factors tend to be ignored
	First Aid	Required in legislation and enforced by inspectors	
	Health education and promotion		Not available
	Record keeping	Legislative requirement.	Due to limited inspection, record keeping may be poorly done. Serious injuries more likely to be reported for workers compensation purposes
	Evaluation BOHS activities		Not carried out. Thus the BOHS cycle is not completed

The management system could be the weakest part of running OSH activities in Malawi. Components of the "systems approach" to management that includes policy, organizing, planning and implementation, evaluation and action for improvement are lacking.

Another weakness in failure to run basic occupational health services effectively. This could be due to lack of a comprehensive management system.

The larger issue is that OSH services lack equipment and enforceable standards both of which are important for "action for improvement.

While lack of enough funds does impact program implementation, lack of clear management systems does make it impossible to implement even basic issues that have nothing to do with money

21.4 Skills and capacities

Table 34: Analysis of skills and capacities

SKILLS/CAPACITIES	STRENGTHS	WEAKNESSES	COMMENTS
Inspections	10 inspectors have been employed	Establishment requires 17 inspectors	
	On the job training provides real life experience	Trainers may have limited experience that is passed on to new employees	There is strong need for formal training in OSH inspection
Local capacity for training of OSH inspectors		No designated teaching institutions in OSH.	College of Medicine MPH program has potential to provide OSH training locally.
		The Ministry of Labour has not shown interest to use regional institutions for training its inspectors	
Laboratory Capacity / Equipment		No laboratories dedicated to OSH activities are available	MBS may have laboratory capacity and capability to support OSH
			IAEA has pledged funds to Department of mines for an OSH laboratory (limited to radiation only?)
		Directorate for OSH lacks equipment for measuring exposure to workplace hazards	The only equipment that Directorate for OSH has is a noise meter.
Laboratory Technical skills	University of Malawi has training for Chemists (Chancellor College), Medical technology (College of Medicine, Polytechnic)	Training may not be geared towards OSH/ environmental health	Stakeholders could discuss with institutions on their needs
Standardisation		No OSH standardisation body.	Use of international standards is recommended

There is limited manpower capacity as the people on the ground do not meet the establishment numbers. However it would be difficult to determine if addition of bodies would improve the current situation. The main manpower limitation is on availability of appropriate training. On the job training is limited by the trainer's own lack of formal training.

There are no local institutions providing OSH training. Training in OSH outside Malawi does not seem to

be in the plans of Department of Labour. Potential institutions such as College of Medicine could be approached to develop local OSH training (in collaboration with other institutions).

Lack of environmental and laboratory equipment as well as lack of standards affects OSH management at the organisational level. Thus though the legal and administrative structures are in place employer confidence and improvement in workers health are likely to occur if there are clear standards and an objective way of assessing adherence to such standards.

SWOT ANALYSIS

Strengths: The main strengths of OSH in Malawi are:

- The availability of legislation that is backed by the country's constitution
- The development of administrative structures that are required by law.
- The protections of individual workers' rights and health
- The freedoms to create and join unions.

Weaknesses: The main weaknesses in OSH in Malawi are

- 1. There are no adequate up-to-date industry-specific guidelines.
- 2. Administrative and inspection structures (especially the directorate for OSH) though established as required by law, are not functioning effectively. This could be due to several factors such as
 - Lack of equipment for monitoring exposure levels. Without such equipment the inspectorate may not be able to adequately enforce OSH laws or regulations nor implement preventive measures.
 - Lack of adequate formal training in OSH: On the job training may not provide adequate competency for running multiple tasks in OSH.
- 3. The OSH management system that is currently in place is not as effective as it could be since it is not set up to evaluate the impact of its limited interventions. Such evaluations could then be used to further improve the interventions.
- 4. The current situation in OSH is that the system is not able to run basic occupational health services due to several factors such as
 - Lack of equipment that may affect ability to implement environmental surveillance and, risk assessments
 - Inadequately trained personnel (Health care providers and inspectors) affects system's ability to run OSH related curative and preventive services.
- 5. One of the major weaknesses in Malawi is limited capacities and capabilities.
 - Environmental monitoring equipment and laboratory equipment dedicated to OSH is not available.
 - Lack of OSH training institutions and limited availability of formally trained OSH inspectors and industrial hygienists adds to the weaknesses in capabilities to run OSH in Malawi.
- 6. Lack of standards and failure to formally adopt one of the international standards affects the ability of OSH authority to enforce most of the laws and regulations. Both the inspectors and employers lack confidence and direction on effectiveness of their interventions.

Opportunities and suggested solutions to above weaknesses

1. There is need to develop industry specific regulations or guidelines that are consistent with current legislation.

Implementation/ feasibility: Current OSH staff may not have the capabilities to develop industry specific guidelines or regulations. Adaptation of international regulations or guidelines to Malawi laws may be an easier option. This could be carried out in collaboration with social partners or contracted out to institutions with such capabilities.

- 2. Failure of the inspection system to function effectively has been attributed to lack of funds for training and purchase of equipment.
 - Collaboration with Department of Mines that may get some funds for a laboratory may help solve this important problem.
 - Discussions with Malawi Bureau of Standards or Chancellor College may be a cheaper solution if existing equipment is found to be adequate enough to run the required tests.
 - Discussion with Malawi College of Medicine to offer free standing courses on OSH or add an MPH track to the MPH program help resolve the issue of adequate training for OSH inspectorates.

Implementation / feasibility:

Collaboration among all stakeholders (Labour, Mines, Environmental health and Ministry of Health) should help mobilize funds for OSH dedicated laboratory equipment. Obviously new equipment is expensive.

Exploring available equipment within the country (MBS, Chancellor College Department of Water) could provide a cheaper option to buying new equipment in the short term.

3. Effective management could be resolved by adopting ILO management system or adding a monitoring and evaluation component to the directorate. Thus the directorate will be able evaluate the impact of its interventions. Obviously there is need for training in monitoring and evaluation before the management for improvement system becomes fully functional.

Implementation / feasibility: This may be an administrative decision that may not be very difficult to implement since monitoring and evaluation is getting to be the buzz word in administrative circles and is being pushed by most financial donors.

4. Ability to run basic occupational health services involves environmental surveillance, health monitoring and risk assessment all of which need some equipment. Thus collaborations with Departments of Mines as well as Environmental affairs may help in mobilizing resources that could be used in purchasing equipment or services from Malawi Bureau of Standards, Chancellor College or College of Medicine.

Implementation feasibility

5. Limited capacities and capabilities for OSH manpower could be resolved by holding discussions with College of Medicine or other university institutions so that they develop and provide the required training as discussed earlier.

Implementation / feasibility: College of Medicine already runs a modular MPH programme. It would not be difficult to fit in an OSH stream. The current tuition cost for 2 years training for an MPH is at MK 1, 100,000. Partners have to decide as to who pays for those already employed in OSH.

Limited capacities and capabilities for OSH equipment could be resolved as discussed earlier.

6. Adoption of ILO or other international standards would provide inspectors and employers with confidence that their interventions were effective. Obviously knowing that they have met the standards depends on availability of equipment.

Implementation / feasibility: Adoption of standards should be an easy intervention as it is mostly an administrative. It will require training of social partners on the limits.

Threats: The main internal threats to OSH tend to be

- 1. Lack of management for success: The Directorate is not aware of the impact of its activities. Thus can not improve.
- 2. Fragmentation of OSH activities to different departments.
 - Resources for OSH activities are thus divided.
 - There was no information as to where records for injuries are kept by other inspectorates.
 Work related injuries and diseases are not reported to Directorate for OSH
- 3. Perception within the Department of Labour as well as employer organisation that OSH issues are not as important as labour issues (such as salary, strikes etc), may present a negative view to implementing OSH programs by enterprises.

Conclusions: While Malawi has done well in the area of OSH, a lot of work still needs to be done. The profile has shown areas where Malawi has done well also those areas that need to be improved.

References

- 1 Constitution of the Republic of Malawi 1997
- 2 Occupational Safety Health and Welfare Act 1997
- 3 Employment Act 1999
- 4 The Labor relations Act 1996
- 5 Workers Compensation Act 1999
- 6 National Infection Prevention Standards
- 7 Malawi National Environmental Policy
- 8 www.ilo.org/public/english/protection/safework/wdcongrs17/intrep.pdf
- 9 Introductory Report: Decent Work Safe Work, Geneva, International Labour Office, 2005
- **10** Mkandawire M C Challenges to and opportunities for occupational health and safety in Malawi, *African Newsletter2000-03*
- 11 Infection Prevention Policy, Ministry of Health
- 12 Guidelines on Occupational Safety and Health Management Systems

(ILO-OSH 2001) SafeWork, ILO Geneva

- 13 http://www.Atlapedia.com
- 14 http://ddp- ext.worldbank.org/ext/ddpreports/
- 15 Demographic and Health Survey 2004, Malawi National Statistical Office
- 16 Integrated Household Survey 2004-2005, National Statistical Office
- 17 Tevet Times
- 18 http://economicthinkingmalawi.blogspot.com/

Acknowledgements

The following selflessly contributed to this report by answering questions and providing some of the data that was used in this report.

- 1. Mr. K. H. Nyangulu, Director for OSH, Ministry of Labour
- 2. Mr. Mwase, Deputy Director for OSH, Ministry of Labour
- 3. Mr. Mawango: Commissioner for Workers Compensation, Ministry of Labour,
- 4. Mrs Jessie Ching'oma- Director for Education, Malawi Congress of Trade Unions
- 5. Mr. B. M. Kayuni: Executive Director of ECAM
- 6. Mr. P. M. Nyirenda, Inspector: Department Environmental Affairs 09639350
- 7. Mr P.M C. Chilumanga. Chief Mining Engineer, Department of Mines
- 8. Mrs Bamusi: Coordinator for Assurance, Ministry of Health
- 9. Mr John Obongo Mwafulirwa, General Secretary of the UNION, Building Construction, Civil Engineering and Allied Workers Union.
- 10. Dr. S. Kabuluzi: Director for Preventive Health Services, Ministry of Health

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International Labour Organization Plot 4635, Lubwa Road, Rhodes Park, Lusaka

P.O. Box 32181, Lusaka 10101, Zambia.

Tel: +260 (21) 252743/252665/252779 (switchboard) Tel: +260 (21) 252642/252823 (Director's assistant) Fax: +260 (21) 257354 Email: lusaka@ilo.org