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# KENYA COUNTRY REPORT

**COUNTRY REPORT FOR KENYA PREPARED BY**

**Dr. Wilfred Kimani**

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**Ministry of Labour,**

**Directorate of Occupational Safety &  
Health Services (DOSHS)**

# 1.1 BACKGROUND INFORMATION ON DR. WILFRED KIMANI

## ■ Occupation

- Occupational/Industrial Medical Doctor

## ■ Organization

- Directorate of Occupational Safety & Health Services (DOSHS) , Ministry of Labour.

## ■ Position

- Senior Medical Specialist

## ■ Work experience

- 18 years
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## 1.2 Country Profile

- The country is situated on the equator on Africa's East Coast. It occupies about 580,367 square kilometres.
  - It has an estimated population of about 52.2 M people as at 2018
  - Its capital and largest city is Nairobi
  - National Language : Swahili
  - Official Language: English, Swahili
  - The country is the economic, financial & transport hub for East & Central Africa.
  - GDP average 5%, Per Capita Income of US\$1,836
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# Profile ctd.

- It's a lower middle income country
  - Under/unemployment about 40%
  - Backbone of the Economy is Agriculture with tea, coffee, horticulture/ floriculture making significant contribution
  - Tourism also holds a significant place in the Economy and has great tourism attraction sites
  - Recent findings of oil and gas hold a lot of potential for growth
  - Second largest Geo-thermal power producer in the world.
  - Mining including Titanium, gemstones, artisanal gold, fluorspar, sodium bicarbonate among others
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- Generally a safe country with fantastic weather
  - Only Country with a National Park in the capital city
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## 2.1 Occurrence status of occupational accidents

- Financial year 2021/2022 (1<sup>st</sup> July 2021 – 30<sup>th</sup> June 2022)
    - Q1 1,355 cases. 47 fatal.
    - Q2 1,045 cases. 61 fatal.
    - Q3 958 cases. 34 fatal.
    - Q4 1,213 cases. 35 fatal.
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## 2.1 Occurrence status of occupational diseases

- Financial year 2021/2022
  - Total of 741 cases.



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## 2.2 Data collection method

- Use of statutory DOSH/WIBA 1 Form
  - All employers required by law to report all workplace accidents/ occupational diseases to the regulatory authority (DOSHS)
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## 2.3 Safety & Health related laws and regulations

- Occupational safety & health act (OSHA) 2007.
  - Work injury benefits act (WIBA) 2007.
  - Legal Notices
    - Woodworking Machinery Rules (L.N.431/1959)
    - Examination of Plant order (G.N.958/1951)
    - First Aid Rules (L.N.140/1977)
    - Cellulose Solutions Rule (L.N. 87/1964)
    - Docks Rules (L.N. 306/1962)
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## 2.3 Safety & Health related laws and regulations

- ❑ Extension of Application Order (L.N.405/1957)
  - ❑ General Register Order (G.N. 973/1951)
  - ❑ Safety & Health Committees Rules (L.N. 31/2004)
  - ❑ Medical Examination Rules (L.N.24/2005)
  - ❑ Noise Prevention & Control Rules (L.N.25/2005)
  - ❑ Fire Risk Reduction Rules (L.N. 59/2007)
  - ❑ Hazardous Substances Rules (L.N.60/2007)
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## 2.4 Labour Inspection System

- Ministry of Labour is the focal point
  - Departments in the Ministry include
    - ❖ *Directorate of Occupational Safety & Health Services (DOSHS)*
    - ❖ *National Social Security Fund (NSSF)*
    - ❖ *Labour department*
    - ❖ *National Industrial Training Authority (NITA)*
    - ❖ *National Employment Authority (NEA)*
    - ❖ *National Productivity & competitive center*
    - ❖ *National Human Resources Development and Planning (NHRPD)*
    - ❖ *Registrar of Trade Unions (RTU)*
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## 2.4 Labour Inspection System ctd...

- DOSHS
    - Enforces the Occupational Safety & Health Act 2007 and Work Injury Benefits Act 2007.
  - Headed by Secretary OSH.
    - Compliance inspections.
    - Medical surveillance.
    - Accident investigations.
  - Occupational safety & Health officers
    - Located in all administrative regions of Kenya
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## 2.5 Medical Care System

- Ministry of Health is primarily responsible for medical and rehabilitation care
    - Public National Hospitals
    - Regional (county) hospitals
    - Private Hospitals
  - No differentiation between occupational and non-occupational injuries and are treated similarly
  - It is the responsibility of the employer to pay treatment, rehabilitation and compensation for the occupational diseases and injuries.
  - Ministry of Labour (DOSHS) is responsible for ensuring that employers comply with this
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## 2.5 Workers Accident Compensation Insurance

- This is managed by the Directorate of Occupational Safety & Health Services (DOSHS) through an act of parliament the Work Injury Benefits Act 2007
  - The act provide compensation to employees for work related injuries and diseases contracted in the course of employment and for connected purposes.
  - Employer is primarily responsible for the occupational injury of his workers.
  - Employer may either pay for the costs and disabilities incurred directly or
  - Employer may also have an insurance policy to cover the costs.
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## 2.5 Workers Accident Compensation Insurance ctd..

- Employer to defray expenses reasonably incurred by his employees as a result of an occupational accident or disease
  - Medical expenses include:
    - ❑ dental, medical, surgical or hospital treatment
    - ❑ skilled nursing services,
    - ❑ supply of medicine, supply of surgical dressing,
    - ❑ traveling and
    - ❑ supply, maintenance, repair and replacement of artificial limbs, crutches and other appliances and apparatus used by physically disabled persons
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## 2.5 Workers Accident Compensation Insurance ctd.

- **Temporary total disablement**; due to an accident for three or more days.
  - a periodical payment equivalent to his/her earnings subject to minimum and maximum to be fixed by Minister for a period not exceeding 12 months.
  - Periodical payment is not payable if employee is receiving full pay.
  - Payment to be reduced if employee is receiving part of remuneration.
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## 2.5 Workers Accident Compensation Insurance ctd.

- Compensation for permanent disablement calculated on the basis of ninety six months earnings



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## 2.5 Rehabilitation of Injured Workers

- There is NO specific scheme that targets injured workers
  - All injured and ill persons are treated in the normally established medical facilities
  - Return to work data therefore difficult to compute
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# Temporary incapacity

Salary x Days off Duty

26

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# Permanent Incapacity

- Salary+ regular allowances x 96 x percentage incapacity
- i.e for a fatal accidents

$$\frac{20,000\text{Ksh} \times 96 \times 100}{100}$$

$$100$$

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# Return to work rates;

- No clear data on return to work data
  - Full pay of salary for a maximum of 12 months on temporary disability
  - Medical aid till fully recovered
  - Redeployment
  - Light duties
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## 2.6 Safety Equipment & facilities

- Have National Disaster Operations Center (NDOC) which coordinates National Disasters.
  - Rely on equipment from the Military, National Government, County Governments or Private sector organizations.
  - Large private sector organisations have their own safety equipment.
  - MSME largely do not have safety equipment.
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## 2.7 Training/Education programs

- Statutory worker training
    - First Aid in the Workplace
    - Safety & Health committee induction
    - Fire Marshall
  
  - Awareness raising on OSH matters
  
  - University trainings
    - Post graduate Diploma in OSH
    - Masters degree programme in OSH
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## 2.8 OSH Activities of osh organizations other than government

- Safety and health Auditor
    - Undertakes statutory annual workplace safety & health audit.
    - Advises workplaces on safety & health issues
    - May undertake workplace risk assessments on the request of employers
  - Approved training institutions:
    - First Aid in workplace training
    - OSH committee training
    - Fire Safety training
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- Designated health practitioners
    - Undertake statutory occupational medical exams
    - Advise workplaces on occupational health matters.
  - Approved plant examiners
    - Undertake statutory examination of different types of plants.
  - Air quality examiners
    - Undertake statutory air quality assessments
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- Industrial hygienists

- Carry out industrial hygiene measurements in the workplace

- Fire safety auditor

- Undertake statutory fire safety audits
  - Advise on fire safety in the workplaces.
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## 2.9 OSHMS and Risk Assessment

- Statutory requirement under Section 6 (2) for OSHMS.
  - Statutory requirement under Section 6 (3) (4) for Risk assessment. The risk assessment report should be shared with the area occupational safety & health officer.
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## 2.10 Health Promotion & mental health measures/activities

- Very few activities undertaken in health promotion. This activities mainly done by the Ministry of Health.
  - Mental health measures also undertaken mainly by the Ministry of Health using the Mental health Act 2022 preceded by the Mental health Act Cap 248(Act No. 10 of 1989)
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## 2.10 Health Promotion & mental health measures/activities ctd...

- Few activities done by DOSHS .
    - Includes awareness raising during the Annual celebrations of the World day of Safety & Health on April 28<sup>th</sup>.
    - Awareness raised during the training of Safety & Health committees.
    - Issued covid 19 in the workplace guidelines after confirmation of covid 19 in Kenya in March 2020.
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## 2.11 Campaign/Event/National Convention

- Carry out annual occupational safety & health week activities culminating on April 28<sup>th</sup> .
    - OSH Awards in different sectors.
  - Occasionally meet with our pool of approved OSH providers for conferences.
  - Occasionally hold OSH scientific conferences.
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## 2.12 Reference

- [www.kenyalawreview.org](http://www.kenyalawreview.org) for Law.
  - DOSHS internal reports for data.
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## 2.13 Government major strategies

- Increase sectoral OSH Awards during the Annual World Safety Day commemoration.
  - Establishing a social workers injury/occupational disease compensation scheme.
  - Increase technical staffing levels within the regulatory organization (DOSHS)
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## 3.1 Major Issues in OSH

- Delays/ Non payment of worker injury/occupational disease compensation.
  - Workplace accidents
  - Poor compliance with OSH Laws & Regulations.
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## 3.2 Suggested counter measures

- Implement the Social worker injury/occupational disease compensation scheme.
  - Improve workplace OSH Standards by getting employer buy-in.
  - Increase compliance with OSH Laws & Regulations using the carrot and stick strategy.
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## 3.3 Expectation

- Share experience from Japan and the other Participating countries on best practices.
  - Learn new things in OSH.
  - Interact with fellow OSH practitioners.
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## 3.3 b Facility improvement

- Share knowledge and skills learned with my colleagues in Kenya.
  - Improve compliance with OSH Laws and regulations especially within the Kenyan Private Sector.
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- THE END
- THANK YOU
- ANY QUESTIONS?

