CONSTRUCTION SAFETY AND HEALTH IMPLEMENTATION FOR FOREIGN WORKERS IN MALAYSIA

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ABSTRACT

Purpose – The Malaysian major construction industry is frequently susceptible to risky circumstances that could cause accidents and hence compromise the project's safety outcomes. Due to the nature of construction work, which involves complex activities, procedures, machinery, materials, and hazards, there is a high and considerable potential that an accident may occur. Every construction project must adhere to occupational safety and health (OSH) laws and regulations. The purpose of this study is to identify the construction safety and health implementation and the challenges that are faced by foreign workers in the Malaysian construction industry.

Design/methodology/approach – To achieve this objective, a desktop study was conducted to identify the awareness and challenges in safety and health implementation among foreign workers in Malaysia. **Findings** – The awareness of safety and health implementation for foreign workers is still lacking despite the legislative framework and regulations that have been regulated in Malaysia's construction industry due to the many challenges in implementing them. The challenges include a lack of understanding and incorrect perception, poor understanding and attitude, the lack of competent labour in the OSH enforcement organisations, a lack of comprehensive OSH rules, standards, and policies, a lack of necessary tools and technology, inadequate and out-of-date equipment, a lack of funding, low commitment to health and safety, the treatment of foreign employees in an uneven, unsafe, and unpleasant manner, unsafe behaviours or actions and the lack of awareness.

Research limitations/ implications – Being the preliminary part of an ongoing research, this study is limited to a desktop study. Further research could employ a qualitative approach to identify the awareness and challenges of safety and health performance among foreign workers in Malaysia.

Keywords: Accidents and Fatality, Foreign Workers, Malaysian Construction Industry, Occupational Safety and Health, Safety Performance.

INTRODUCTION

The construction industry is crucial to the growth of many nations throughout the world because it helps the economy to expand, which in turn increases the demand for building activities. Thus, it has the potential to significantly impact the economy of our nation and raise our level of productivity and competitiveness. However, because of the 3D concerns (dangerous, dirty, and difficult), the industry is consistently recognised as one of the high-risk industries (Abdul Rahman, H., Wang, C., Wood, L. C., & Fung, S, 2012).

The utmost requisite to manage is safety and health, particularly in dangerous workplaces such as at the site of construction projects. This raises the potential risks and hazards for workers due to the variety of construction operations, a hazardous workplace, property damage, and dealing with plants equipment and machines (Chin, Lok & Abdul, 2015). The construction sector has been plagued by a high estimated incidence that results in fatalities, which has been a source of ongoing frustration. Accidents drive up the cost of construction in two ways, i.e., directly through extra insurance and compensation, and indirectly through lower productivity, subpar quality, and timetable delays. As such, the features of the sector and the health and safety difficulties that are posed are well acknowledged; as it has had far higher and inexplicable injury rates than other industries, it is frequently categorised as a high-risk sector. Despite the fact that there are many incidents at the construction sites, the majority of people are unaware of them since they are either not recorded or they are reported with inaccurate information (Annan, Joe, Emmanuel, Addai, & Samuel, 2015).

Based on the data from the Department of Occupational Safety and Health, construction workers had been involved in 88 mortality instances in 2015, where 106 incidences of fatalities were reported in

2016 (Official Website, Department of Occupational Safety and Health). The Social Security Organisation (SOCSO) has encountered a similar trend as well. It has been documented that there has been a 69.47% increase in the accident rate throughout a span of five years, from 2011 to 2016, from 4,330 to 7,338 incidences, respectively. These are not isolated instances, though. Many incidents also go unreported to DOSH, according to the Chairman of the National Institute of Occupational Safety and Health (NST, 2018). After reviewing the accident instances in Malaysia and the most recent statistics, it is necessary to investigate the root causes of these ongoing problems.

LITERATURE REVIEW

Background of Safety and Health

Safety means the condition of being protected from or the unlikelihood to cause danger, risk, or injury. It is also the state of being relatively free from harm, danger, injury or damage. While, health means the state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity (World Health Organisation). Based on the *Cambridge Dictionary*, safety and health mean the laws, rules, and principles that are intended to keep people safe from injury or disease at work and in public places. According to the *Standard Dictionary* definition, Health and Safety are regulations and procedures that are intended to prevent an accident or injury in workplaces or public environments. Occupational health and safety are becoming increasingly important as modern society experiences a surge in occupational health concerns due to the rapid expansion of both the manufacturing and service sectors. Workplace safety and health dangers are now recognised as a driving factor in the manufacturing industry's search for solutions, to avert employee unfavourable repercussions. Many countries' quality, health, knowledge, and safety criteria have been stricter in recent years than in the past. According to certain research findings, community pressures have resulted in the development of various safety regulations and safety standards in different countries and areas for various industries. (Kassu & Daniel, 2016).

When most people refer to health and safety efforts in the workplace, they primarily target at eliminating workplace hazards to keep people safe from harm. However, the World Health Organisation directly states that "Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity." This means that hazard safety can be thoroughly enforced by employers and outside government organisations all day long, however, without paying any consideration to the employees' overall health, employees can still suffer physically, socially, or mentally. There may be a few extra unhealthy conditions that employees may encounter now that the WHO has added 'health' to the criteria of establishing a safe and healthy workplace for all employees.

The Worldwide Occupational Safety and Health

The Occupational Safety and Health Administration (OSHA) is a regulatory agency of the US Department of Labour, which has been established in 1971. In addition to assisting businesses in safeguarding their employees and lowering the incidence of workplace fatalities, illnesses, and injuries, OSHA oversees national occupational health and safety compliance activities (Safeopedia, 2021). Most employers in the public and private sectors as well as their employees across a variety of industries are covered by OSHA. OSHA operates in all 50 US states as well as US territories and jurisdictions such as the District of Columbia, Puerto Rico, the US Virgin Islands, American Samoa, Guam, and the Northern Mariana Islands (Safeopedia, 2021).

The OSH Act applies to the majority of private-sector companies and their employees as well as a small number of public-sector employers and employees in each of the 50 states as well as a few federally recognised territories and jurisdictions. The Northern Mariana Islands, Wake Island, Johnston Island, the District of Columbia, Puerto Rico, the Virgin Islands, American Samoa, Guam, and the Outer Continental Shelf Lands as defined by the Outer Continental Shelf Lands Act are among these jurisdictions (U.S. Department of Labour Occupational Safety and Health Administration, 2020).

The five ASEAN nations- Singapore, Thailand, Indonesia, Malaysia, and the Philippines, all have significant legal and regulatory frameworks governing workplace safety and health. Each country's occupational safety and health laws include provisions for monitoring the workplace environment, monitoring the workers' health, providing guidance on how to prevent and control occupational health hazards, training both employers and employees, using data systems, and conducting research. To

date, an ASEAN Occupational Safety and Health Network (ASEAN OSHNET) is being built as a network for all ASEAN nations to exchange best practices for occupational safety and health (ASEAN Occupational Safety and Health Network, 2014).

Occupational Safety and Health Act 1994

According to Daphne and Loni (2020), the three primary statutes are the Petroleum (Safety Measures) Act of 1984, the Factories and Machinery Act of 1967, and the Occupational Safety and Health Act of 1994 (together, "OSHA 1994"). On the other hand, the Constitution of Malaysia governs the Occupational Safety and Health Act 1994 which is an Act that provides the legislative framework to secure the safety, health and welfare of all Malaysian workforce and to protect others against risks to safety or health in connection with the activities of persons at work.

This Act was gazetted on 24th February 1994 and may be cited as the Occupational Safety and Health Act 1994. This Act is a practical tool superimposed on existing safety and health legislation. The aim is to promote safety and health awareness and establish an effective and safe organisation as well as performance through self-regulation schemes that are designed to suit the particular industry or organisation. The long-term goal of the Act is to create a healthy and safe working culture for all Malaysian employees and employers.

The Occupational Safety and Health Act 1994 or Act 514 is an Act to make further provisions for securing the safety, health and welfare of persons at work, for protecting others against risks to safety or health in connection with the activities of persons at work, to establish the National Council for Occupational Safety and Health, and for matters connected therewith (Laws of Malaysia Act 514, 1994). It also provides the legislative framework for the safety, health and welfare of all Malaysian workforces.

OSHA 1994 defines the general duties of employers, employees, the self-employed, designers, manufacturers, importers and suppliers of plants or substances. Although these duties are of a general character, they carry a wide-ranging set of responsibilities. The Act provides a comprehensive and integrated system of law to deal with the safety and health of virtually all people at work and the protection of the public where they may be affected by the activities of people at work.

The act contains 67 sections, and is divided into 15 parts and appended with 3 schedules. The first three parts state that the objects of the Art provide the infrastructure for the appointment of officers and the National Council. Part IV to VI provides the general duties for those who create the risks. For example, the employer, self-employed person, designer, manufacturer, supplier, etcetera, and those who work with the risks such as the employees.

Awareness of Safety and Health Implementation

A ministry known as the Ministry of Human Resources (MOHR) is in charge of social security, trade unions, occupational safety and health, and the development of skills. It is also in charge of labour relations, the industrial court, information on the labour market, and trade union relations. Ten (10) Departments, four (4) Statutory Bodies and Companies, and three (3) Advisory Councils are currently under the control of MOHR. The Department of Occupational Safety and Health (DOSH) is a division of the Ministry of Human Resources in Malaysia. In addition to safeguarding others from safety and health risks that are brought on by their work activities, this department is in charge of assuring the safety, health, and welfare of workers while they are at work (DOSH, 2022).

Through enforcement and promotion, The Department of Occupational Safety and Health (DOSH) will make sure that employers, independent contractors, manufacturers, designers, importers, suppliers, and employees always promote a safe and healthy work environment and always abide by applicable laws, rules, and codes of conduct. As a foundation for guaranteeing safety and health at work, DOSH will also develop and evaluate legislation, policies, guidelines, and codes of practice that are related to occupational safety, health, and welfare. Additionally, DOSH serves as the secretariat for the National Council for Occupational Safety and Health Act of 1994. The National Council for Occupational Safety and Health Act of 1994. The National Council for Occupational Safety and Health Act of 1994. The National Council for Occupational Safety and Health Act of 1994. The National Council for Occupational Safety and Health Act of 1994. The National Council for Occupational Safety and Health Act of 1994. The National Council for Occupational Safety and Health Act of 1994. The National Council for Occupational Safety and Health Act of 1994. The National Council for Occupational Safety and Health Act of 1994. The National Council for Occupational Safety and Health shall have the authority to take any action that is expedient, reasonably required, incidental to, or related to the carrying out of the purposes of this Act. The growth of OSH practices within large

organisations were evident, with many of them deliberately deploying different kinds of OSH management systems (Baba, 2012).

The Ministry of Human Resources National Council for Occupational Safety and Health (NCOSH) is the top body in charge of deciding the direction and policy of the State with regard to occupational safety and health in Malaysia. It was set up in 1995 under Section 8 of Act 514, the Occupational Health and Safety Act of 1994. The major goal of the NCOSH creation is a constant government effort to safeguard the safety, health, and welfare of employees in the workplace. Because of this, NCOSH has matured and is constantly working to raise the bar for occupational health and safety by ingraining safe and healthy work practices into Malaysian society. Based on a tripartite method, this endeavour aims to promote a cultural practice.

According to Abdul-Hamid et al. (2003), despite the remarkable specificity of the safety regulations that OSHA has provided in 1994, awareness and application of them during the preceding five years have generally lagged below expectations. Therefore, the use of an "effective" can result in safer construction management systems and a decrease in the occurrence of illnesses and injuries that are related to the workplace (Davies & Tomasin, 1996). Eventually, it will be required to ensure that safe working procedures are followed in order to lower the accident or incident level and cut losses (Ahmad, 2000). Additionally, Malaysia's occupational safety and health laws are rated as adequate, but there is still a dearth of legislative enforcement. To change this, the practical approach should be used to educate construction firms about the value of OH & S and the adoption of occupational safety and health management systems in the Malaysian construction industry (Omran et al., 2008). In Malaysia, the Constitution is in charge of Malaysia's OSH legislative framework. The key OSH laws are the Occupational Safety and Health Act of 1994, the Factories and Machinery Act of 1967, and the Petroleum Act (safety measures) of 1984. The Employment Act of 1955 and the Labour Ordinance Acts of 2005 are two more statutes that place a strong emphasis on workplace safety and health. The legal foundation for OSH in Malaysia is also completed by regulations (particularly those under the three main OSH statutes), orders, and Director General Circulars. Other regulations under the Occupational Safety and Health are:

- 1. OSH (Employers' Safety and Health General Policy Statements) (Exception) Regulations 1995
- 2. OSH (Control of Industrial Major Accident Hazards) Regulations 1996 CIMAH
- 3. OSH (Safety and Health Committee) Regulations 1996-SHC
- 4. OSH (Classification, Packaging and Labelling of Hazardous Chemicals) Regulations 1997 CPL
- 5. OSH (Safety and Health Officer) Regulations 1997 SHO
- 6. OSH (Use and Standards of Exposure of Chemicals Hazardous to Health) Regulations 2000 USECHH
- 7. OSH (Notification of Accident, Dangerous Occurrence, Occupational Poisoning and Occupational Disease) Regulations 2004 NADOOPOD
- 8. Occupational Safety and Health (Classification, Labelling and Safety Data Sheet of Hazardous Chemicals) Regulations 2013
- 9. Occupational Safety and Health (Noise Exposure) Regulations 2019

New trends in safety and health regulation have arisen in order to suit the needs of both employees and employers. More emphasis is being placed on covering all jobs, especially those in the informal economy. National policies are being formulated with clarity. A definite tendency towards creating thorough safety and health laws that apply to all professions can be seen in Asia. In 1994, Malaysia became the first nation in Asia to pass a Safety and Health Act that applied to all professions. ILO supports nations in putting these regulations into effect. For instance, in Malaysia, training materials and checklists for labour inspectors are being created, which encompass both the self-employed and the industries of agriculture, forestry, fisheries, services, and transportation (Kawakami, 2001). The International OSH labour standards have been developed by ILO member countries. The most significant is the ILO Occupational Safety and Health Convention (No.155, 1981), which mandates governments to establish precise national policies and legislation as well as efficient labour inspection services. To ensure safe and healthy working conditions, employers must implement safety and health programmes. According to Kawakami (2001), in addition to having the right to take part in safety and health initiatives, employees must comply with their employer's safety and health programmes.

OSH awareness is crucial in reducing the risk of occupational diseases and injuries among workers. Awareness campaigns can be used to strengthen healthy self-preventive attitudes and improve selfcare procedures at work. Despite the economy's rapid growth, employees across a wide range of industries have relatively low levels of general occupational safety and health awareness. Manufacturers typically have limited awareness of how long-term safety practices should be adopted (Biggs et al., 2015). Due to the need to minimise costs, safety concerns typically receive the lowest priority in most organisations. According to the study by Lugah et al. (2010), researchers discovered that healthcare practitioners' awareness and expertise in ergonomics were lacking. This problem is concerning because healthcare employees face a variety of health risks at work. They are susceptible to high-risk occupational illnesses and injuries, which may have unfavourable effects.

Safety Performance of the Construction Industry

Malaysia has moved quickly to keep up with the trends, as the country strives for strong economic growth and to become a developed nation by 2020 (Asan & Akasah, 2015). Construction is one of the most crucial industries for nations to thrive. It can make a significant contribution to a country's economy and thus increases the people's competitiveness (Salim, Zakaria, Aminuddin, Hamid, Abdullah & Khan, 2018). However, in keeping with the economy's strong expansion, the construction sector contributes to the high accident rate. Accidents raise the cost of construction, both directly through greater compensation and insurance and indirectly through decreased productivity, nonconformance with quality standards, and schedule overruns. The industry's characteristics and the hazards they pose to safety and health are well recognised. Construction is sometimes characterised as a high-risk business due to its historical and substantially higher and unacceptable accident rates when compared to other industries. When compared to the whole industry, the fatality rate from construction accidents is among the highest among foreign employees. Due to unexpected incidents, the construction site is constantly exposed to risk.

In 2017, around 1.33 million individuals, or 9.1% of the entire workforce, were employed in the construction business, making it one of Malaysia's most significant industries. According to the Social Security Organisation (SOCSO), 7,338 accidents were reported in the construction industry in 2016, i.e., up from 4,330 instances in 2011, thus, a 69.47% rise. According to the Department of Occupational Safety and Health (DOSH), 106 deaths occurred in the construction industry in 2016, as compared to 88 occurrences in 2015. These figures, particularly those involving fatalities among foreign employees, are concerning because they only include cases handled by DOSH. If unreported cases are included, the figure rises. According to Anton (1989), accidents are unplanned and unintended incidents that cause harm or loss to the employees, property, production, or nearly anything with an intrinsic value, such as targets. The construction sector has been regarded as one of the most hazardous industries in many regions of the world, with falls from heights being a primary cause of fatalities in construction operations (Sorock, Smith & Goldoft, 1993). Also, falls from ladders and through weak surfaces or unstable structures, such as poorly erected scaffolds and soft concrete mixtures, are among the most prevalent.

According to data, the construction industry is among the top in terms of injuries incidences and fatalities. From 4,207 occurrences in 1993 to 6,552 cases in 2014, the number of construction accidents has climbed by 55.7%. Furthermore, the fatality rate has risen by 74%, from 51 cases in 1993 to 89 cases in 2014. Between 2004 and 2013, 460,022 workers were injured on the job, and 810 workers had died at the construction sites. These rates were comparable to the number of cases in the manufacturing business, despite the fact that the manufacturing sector produced more work and had a higher number of occupational accidents. In comparison to other industrialised countries, the present number of events, injuries, and fatalities is still high and is unacceptable. This is owing to the existing construction industry practices, which frequently take place outside under unfavourable health and safety conditions.

The leading cause of accidents in the construction industry is falling from a height, such as roof falls, scaffolding collapses, and structure collapses, followed by being struck, which includes being struck by falling objects, being run over by heavy equipment, or being struck by a crane, boom, or cargo. Despite efforts to reduce accidents, the number of fatal incidents on Malaysian construction sites has steadily climbed. The study conducted by Hamid et al (2018) shows that the statistics for construction accidents rate in the Malaysia's construction industry remains high. These figures show that while the construction industry in our country is one of the most critical industries, there is much room for improvement in

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terms of construction site safety. As a result, there is a need to do a study on this topic to demonstrate the existing state of deadly construction accidents, which could eventually raise awareness among stakeholders and lead to a better long-term solution.

The increased reliance on foreign employees has caused a slew of issues in the construction industry. Contractors complain about poor levels of productivity by foreign workers, the outflow of local currency, the transfer of skill and knowledge to their country by foreign workers, local unemployment, and societal evils (Hamid, Singh, Yusof & Abdullah, 2011). Malaysia recognises that its reliance on foreign labour may jeopardise the government's goal of becoming a high-income country by 2020 (CIDB, 2017). This will worsen in the future as the sector is unable to upgrade or enhance its workforce, putting the manufacturing quality and the construction itself at risk (Yaro, Awumbila & Teye, 2015). Productivity and quality control is diminished since the majority of immigrant construction workers are untrained (Abdul-Rahman, Wang, & Low, 2012). According to Marhani et al. (2012), if foreign workers lack the necessary skills for the positions, the productivity of the work will suffer. As a result, productivity has been identified as one of the essential success elements for CIMP (CIDB, 2015).

The construction industry has been plaqued by a poor safety record due to a confluence of factors. These include a transient labour force, project discontinuities, and the need to complete work on schedule. The poor safety record can also be attributed to the numerous small and medium-sized independent production firms that are working as subcontractors that operate in the informal sphere of the national economy, and are thus unfettered by the societal legal systems (Edgren, 1990). Construction worker deaths and major injuries were prominent subjects in local newspapers during the construction boom of 1988-1997. Interviews with DOSH officers in Kuala Lumpur for the IRPA study revealed that the construction industry was hesitant to enhance safety standards two years after the Occupational Safety and Health Act went into effect in 1994. Several parties have now agreed with IRPA's observation. A recent study by Abdul-Hamid, Singh, and Hussin (2001) on 620 workers at 169 construction sites have discovered that site operators have limited awareness of safety procedures and legislation; both site operatives and main contractors are apathetic about safety and safety enforcement is lax. DOSH stated in its submission to the Construction Industry Dialogue 2000 that the industry was still plagued by inadequate compliance with safety rules. DOSH officials had already admitted in 1996 that such a dramatic adjustment in mentality would take time. While progress is being made, it is not as quickly as some had hoped.

According to the New Economic Model (NEM) document, the supply of local Malaysian labour is not only low in comparison to international labour, but it is quickly declining due to Malaysians' outmigration to nations that provide greater possibilities and returns (Narayan & Lai, 2014). According to Carpio et al. (2015), only 106 out of 823 significant construction enterprises did not hire foreign labour in 2007. This is clear from the difficulty in finding local labour, which has led firms to hire foreign workers in the construction industry (Kanapathy, 2001). Moreover, it is difficult to generate knowledgeable and worldclass human resources to meet the needs of Malaysia's construction industry (Hanapi & Nordin, 2014). Furthermore, the construction industry is well-known for its low wages, poor working conditions, and restricted opportunities for advancement (Carpio et al., 2015). The level of interest among local employees is exacerbated when the construction sector is labelled with the 3-D syndrome, which is demanding, unclean, and dangerous, hence, negatively impacting the construction industry's urgent need for local labour (Hanafi et al., 2015). However, the most important factor influencing labour productivity in the construction industry is the labourer incentive scheme (Sigh, 2010; El-Gohary & Aziz, 2014). According to Hamid, Singh, Yusof, and Mustafa (2011), the delayed process of mechanisation and the reluctance of the locals to join the construction industry exacerbated the issue of the shortage of local labour supply. As a result, the purpose of this research is to examine the factors influencing local labour involvement in the Malaysian construction sector.

Table 1: The Performance of Sa	afety and Health In t	he Construction Industry
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Title	Source	Numbers of Accidents/Fatalities
Development of Occupational Safety and Health Requirement Management System (OSHREMS) Software Using	Department of Safety and Health	Percentage of Fatalities: 2013 – 37.3% 2014 – 38% 2015 – 41.1 % 2016 – 40.7%

Universiti Kebangsaan Malaysia

Adobe Dreamweaver CS5 for Building Construction Project		
Fatal Occupational Injuries in the Malaysian Construction Sector–Causes and Accidental Agents	IOP Conference Series: Earth and Environmental Science	Number of Fatalities: 2013 – 69 2014 – 72 2015 – 88 2016 – 99
Plaza Damas: Another Accident & death	Blogspot	Number of Fatalities: 2007 – 1
Building Boom Leading to More Workplace Injuries	Twc2.org.sg	Number of Fatalities: 2014 – 19
Construction Related Deaths and Injuries Alarming	New Straits Times	Number of Fatalities: 2018 – 169 Number of Accidents: 2018 – 3,911

One of the causes of the increased number of accidents on construction sites is due to the lack of awareness of many parties, particularly employers in providing provisions to ensure the safety, health and welfare of the workers. Therefore, it is the responsibility of all parties who are involved in the construction industry to take preventive action to reduce accidents on the construction site by providing the necessary safety and health needs for the workers at the construction site. This study suggests that one of the ways to avoid accidents at the construction site is through effective occupational safety and health (OSH) management planning tools. Effective safety can only be achieved when there is proper management of the interaction between technological systems and people. According to K. Dorjil and Hadikusumo (2006), even though several construction companies have prioritised OSH requirements for their construction projects, it is believed that the awareness of the contractors (being the management of the project) on OSH management is still lacking. Moreover, it is also believed that many construction companies are not aware of their responsibilities to comply with the OSH legislations to effectively manage their construction project.

Challenges of Safety and Health Implementation

Implementing strategy has always been a challenge for organisations across the industry. The success or failure of a company's strategy is determined by its ability to be implemented. Through a variety of tactical and competitive measures, the implementation makes a company's strategic main objective visible in order to accomplish the desired results, which could otherwise remain unattainable goals. There are other elements that might close the gap between excellent strategies and successful execution, in addition to integrating strategy execution into planning and refining strategy through followup and corrections. Although strategic planning may be the purview of higher levels of management, implementation trickles down to front-level managers who are in charge of conducting operations profitably, affecting the customer experience, or implementing long-term improvements (Godiwalla et al., 1997). In an organisation, tactics should be put into place that sustains the culture that has been identified with it (David, 2003). The culture supporting the proposed approach should be preserved, emphasised, and improved by the suggested strategy (David, 2003). Conflict resolution is a crucial component of the implementation process. According to David (2003), managers and employees of the organisation are both involved in the human element of strategic implementation, which is crucial to successful implementation. Decisions about how to implement them and communication about them should be made with direct input from both sides (David, 2003).

OSH measurement must take into account the many types of occupations and their working settings, as one OSH regulation may not apply to all sectors. Depending on the nature of their workplace, employees may experience a variety of health and safety hazards. Different industries (such as those in agriculture, forestry, mining, and construction) exhibit varying degrees of safety practices. Comparing various industries, it was discovered that the construction and manufacturing sectors had the greatest rates of occupational injuries and fatalities. On the job, safety awareness is crucial to prevent both your

own harm and, more significantly, the harm or death of others. The working environment, safety and health conditions, communication, care, and service are some of the aspects that influence awareness levels. These were the motivating aspects for every company's employees.

According to Hu et al. (1998) the lack of understanding and incorrect perception of the significance of occupational safety and health at work are the main causes of the failure to prevent occupational injuries. Issues similar to these were also reported in studies that looked at OSH awareness among personnel from European nations (Brolin et al., 2021; Dodoo & Al-Samarraie, 2021; Moller et al., 2021). Therefore, it is crucial to emphasise that fostering worker and management understanding and cooperation is the key to raising OSH knowledge in the workplace (Latip, 2011). According to Chong et al. (2018), both employees and employers must be totally committed and consistent in order to develop a safe and healthy culture at work.

Understanding safety plays a vital role in reducing and preventing work-related injuries and diseases. According to Sorensen et al. (2007), poor practices of safety performance are the result of poor understanding and attitudes towards safety regulations. Therefore, enhancing safety awareness through various activities and programmes will encourage positive safety behaviour among employees. An understanding of safety is not required from employees alone, but also from those at the top managerial level. However, Lugah et al. (2010) claimed that the top management and professionals' understanding of safety is always low and this will keep the OSH management from receiving less attention and priority from the organisation.

One of the main factors affecting the implementation of OSH regulations at the workplaces in Ghana is a lack of competent labour in the OSH enforcement organisations. Accordingly, Eyiah, Kheni, and Quartey (2019) provide an example of this perspective in a study of the OSH regulatory system within the Ghanaian construction industry. Their research showed that the OSH enforcement institutions struggled to retain highly skilled and experienced inspectors, in part because of the unappealing working circumstances for those who work there. As employees of the government, the inspectors employed by the Departments of Factories Inspectorates and Labour are subject to the employment terms and conditions that apply to employees of the federal, state, and local governments. These terms include relatively low pay and retirement benefits. As a result, staff members with experience in workplace inspections, other enforcement tactics, and processes who have received on-the-job training leave these organisations for more lucrative opportunities elsewhere.

A significant obstacle to managing OHS in Ghana is the lack of comprehensive OHS rules, standards, and policies (Amponsah-Tawiah & Dartey-Baah, 2012; Eyiah, Kheni, & Quartey, 2019). Additionally, Ghana's current OHS legislation is fragmented, general, insufficient, and has a narrow focus (Annan, Addai & Tulashie, 2015; Kheni & Braimah, 2014; Clarke, 2005). According to an ILO review from 2015, Ghana's OHS regulations do not address specific hazards or risks, do not address national OHS research institutes or programmes with clear mandates and funding, and do not make provisions for essential OHS management systems. As a result, OHS inspectors are required to use laws and standards from other countries in carrying out their enforcement responsibilities. However, these established laws and standards cannot be strictly implemented in Ghana because they are not based on any OHS Act in the country. This is a problem because it has been established that cultural context has an impact on OHS (Loosemore, et al., 2019).

OHS enforcement institutions experience ongoing budget cuts, much like many other government departments and agencies, which makes it challenging to carry out their plans. To ensure the delivery of acceptable services, these organisations require funding to hire more inspectors, educate them, and buy the necessary instruments and office supplies. For instance, Kheni (2008) has discovered that the OHS enforcement agencies in Ghana do not receive the annual agreed budget in whole and on schedule. Additionally, the OHS institutions lacked the necessary tools and technology for surveys and inspections, and even the equipment they did have was inadequate and out-of-date to allow them to efficiently conduct a range of evaluations in regard to OHS requirements (Eyiah, Kheni & Quartey, 2019).

Civil servants should be aware of any potential hazard and threat that can be caused by many reasons, such as workplace conditions, tools and equipment that they use or how they perform their tasks. These factors could be unconsciously risky and dangerous to workers (Australian Commission for Occupational Safety and Health, 2007). Therefore, paying attention to the organisational capacity to

recognise threats and hazards will enhance protection efforts and reduce risks in the workplace (DS Risk Lexicon, 2008).

According to Peter (2020), the worksite construction industry decided that this would need to be handled by someone other than their operational supervisors because the OSHA standards were extensive, and dealt with the wide range of potentially hazardous conditions that the workers could be exposed to in the workplace, and required a significant number of training sessions to be provided to the workers in order to familiarise them with the standards. The production effort was planned, organised, directed, staffed, and controlled by these individuals, who were also in charge of managing the risks that were connected to fulfilling contract obligations. Therefore, they should not have to shoulder this extra safety obligation.

Middle Eastern countries are categorised as developing countries and share many of the same conditions as other developing nations because of their shared geography and cultural heritage. As a result, they have comparable issues when putting safety systems into place. According to Halander (1991), there is a wealth of research focusing on challenges to the implementation of safety programmes in developing nations. A significant hurdle that could harm safety efforts is a lack of funding. Therefore, it is the management's job to provide enough resources, including qualified individuals, time, money, information, safety work procedures, facilities, tools, and machinery, in order to conduct a safety programme (Health and Safety Executive, 2006).

Another frequent obstacle to the adoption of safety initiatives is constrained project schedules. Working under pressure and under stress increases pressure and stress, which frequently results in health and safety issues and lowers productivity (K. Dorji and Hadikusumo, 2006). Low commitment to health and safety is another significant factor in the high incidence and accident rates in the construction industry in developing nations (M. J. Baker, W. D. Crano, & M. B. Brewer, 2002). The level of commitment to safety is influenced by an awareness of safety, which in turn influences their priorities. A weak safety culture results from the low importance that is given to safety. Additionally, it is believed that only safety personnel are accountable for maintaining security. This perception implies that safety is exclusive and there is a lack of teamwork and collaboration in safety implementation.

In Malaysia, local employers and the law have treated foreign employees in an uneven, unsafe, and unpleasant manner. Jobs in the construction sector need the use of foreign labourers on the weekends and during holidays, which also involve irregularly long hours, hazardous working conditions, and low compensation. These overseas employees continue to arrive in Malaysia despite all the difficult circumstances that they would have to deal with in order to fill the void that has been created by the locals' distaste for labour-intensive industries such as those in the construction sector (Wei & Yazdanifard, 2015).

The Social Security Organisation (SOCSO) has released figures showing that among Malaysia's 10 classified industries, the construction sector has one of the highest rates of mortality instances (SOCSO, 2005). In Malaysia, the rate of mortality cases in the construction sector was more than three times higher than that in other industries. Construction had a rate of 3.3 per cent compared to 1.1 per cent for other industries including manufacturing, mining, and quarrying (SOCSO, 2000). According to the data gathered for CIDB's report (2010), nearly 140 people died in crane accidents in 2004. In general, hazardous conduct is one that deviates from a recognised safe practice and increases the risk of an accident. In any construction project around the world, unsafe behaviours or actions are frequently found. Common risky behaviours include operating without authority, utilising subpar equipment, loading, placing, mixing, mending, combining, and other unsafe actions (Bashir, 2008). All personnel on a building site need a comfortable working environment in order to prevent health and safety hazards.

Wei and Yazdanifard (2015) assert that few of the prescribed safety procedures are observed by the majority of Malaysia's construction sites, which they describe as being dirty, difficult, and dangerous. Wei and Yazdanifard (2015) also pointed out that despite the uncomfortable and dangerous working conditions, Malaysian migrant workers are not troubled by this shortcoming and are willing to perform these risky professions that the locals do not want to do in order to make a living. There is no assurance that construction firms will consistently receive jobs due to the nature of business. Employers have therefore made an effort to save costs by building houses for immigrants. 284 workers reside on-site in 'kongsi' or shared temporary housing (Abdul-Aziz, 2001). The general state of 'kongsi' is bad, and there are no suitable amenities. In addition to the absence of new jobs, the short-term nature of the business's projects is another problem. This implies that after a project is completed, construction workers can

disembark to start another. This affects their temporary employment situations, which has an impact on other aspects of their lives (Mustapa & Pasquire, 2008).

According to Abdullah and Wern (2016), the construction industry has the greatest death rate, despite the fact that the sector is known to have a solid safety culture when compared to other sectors. The principal accident categories in the construction industry are receiving more attention in the literature. The occurrences were reported as possibly being brought on by objects falling, people slipping, or people getting buried in sand or soil. Due to the usage of tools and equipment including scaffolds, ladders, and excavation equipment, workers are prone to physical hazards and injuries (Hamid et al., 2003).

Noor and Izyan (2019) claim that the difficulty that is faced by the workers is a lack of awareness. The foreign workers acknowledge that while they are aware of the safety requirement and its effects, not all foreign workers in Malaysia are aware of it, particularly those who are still adjusting to the workplace and the milieu of a construction site. The foreign workers engage in dangerous activities because they are unable to comprehend the safety notices; the construction site management concurs with this as well. They argue that in order to make sure the workers comprehend the instructions they occasionally utilise hand signals.

Challenges	Authors
Lack of understanding and incorrect perception	Nur Hairani Abd Rahman & Nurul Liyana Mohd Kamil (2022)
Poor understanding and attitude	Nur Hairani Abd Rahman & Nurul Liyana Mohd Kamil (2022)
Lack of competent labour in the OSH enforcement organisations	Elijah Frimpong Boadu, Cynthia Changxin Wang & Riza Yosia Sunindijo (2021)
Lack of comprehensive OSH rules, standards, and policies	Elijah Frimpong Boadu, Cynthia Changxin Wang & Riza Yosia Sunindijo (2021)
Lack in necessary tools and technology	Elijah Frimpong Boadu, Cynthia Changxin Wang & Riza Yosia Sunindijo (2021)
Inadequate and out-of-date equipment	Elijah Frimpong Boadu, Cynthia Changxin Wang & Riza Yosia Sunindijo (2021)
Lack of funding	Mohanad K. Buniya, Idris Othman, Riza Yosia Sunindijo, Ahmed Farouk Kineber, Eveline Mussi & Hayroman Ahmad (2021)
Low commitment to health and safety	N H Abas, N Yusuf, N A Suhaini, N Kariya, H Mohammad & M F Hasmori
Treated foreign employees in an uneven, unsafe, and unpleasant manner	Wong Mei Wei & Rashad Yazdanifard (2015)
Unsafe behaviours or actions	Mohd Arif Marhani, Hamimah Adnan & Faridah Ismail (2013)
Lack of awareness	Noor Hikmal Noor Eing & Izyan Yahaya (2019)

Table 2: Challenges of Safety and Health Implementation on Foreign Workers

All the difficulties that have been mentioned indicate that numerous authors have drawn attention to the difficulties in implementing safety and health for foreign employees in the construction industry. The greatest difficulty is the general lack of knowledge about occupational safety and health. The authors claimed that employers haven't shown any interest in finding out more about OSHA, and they have not

been insightfully introduced to OSH. For their part, the organisations do not have enough money to pay for the foreign employees' training before they begin working. Moreover, Malaysian construction companies are not subject to government-imposed OSH regulations, norms, or guidelines. They believe that foreign workers may receive unfair compensation and treatment compared to Malaysian employees. Because of this, Malaysians don't really take workplace safety and health seriously; the issues of implementing safety and health should be brought up and taken seriously. This is because many foreign workers come to Malaysia to work yet they are not exposed to OSHA. The construction companies should have policies, rules and regulations in order to avoid fatalities and injuries from happening. The government should be firm in the safety and health regulations because it involves the lives of many people. According to recent studies, safety and health knowledge and performance are poor in emerging countries. This is also due to the lack of government commitment, which is exemplified by regulation, policy, and legal constraints that limit the operational efficiency of government departments that are responsible for safety and health management, thus, hindering the development of good safety and health practice.

According to Geofrey et al. (2018), the challenges affecting implementation are related to the gaps in the legal framework, low public awareness about OSH, poor planning, and limited human capacity, transparency, and accountability. It can be concluded from this study that most of the contractors who are involved in building construction have only met the general execution of safety and health and have not organised any course to ensure the safety of the workers. Accordingly, from the interviews, the interviewees did not mention that their company had given the employees a course about safety. It was also found that the contractors had no proper guidelines for executing safety and health in a construction site and had not comprehensively implemented OSH requirements as stipulated in the legislation. In conclusion, organisations should prioritise workplace safety and health in order to ensure employees' well-being. It is vital to make an investment in the welfare of employees by offering a safer and healthier workplace. A safe workplace will boost an organisation's productivity and profits (Oxenburgh et al., 2004). A key factor in determining an organisation's capacity to successfully implement a health and safety policy is its top-level management involvement (Chong et al., 2018; Mohammadi et al., 2018; Liu et al., 2015; Haadir & Panuwatwanich, 2011). In addition to the efforts of the employers, it is the duty of the employees to follow the safety measures to maintain a safe workplace free from dangers. Positive safety understanding, attitudes, and practices will result from full commitment and participation from both the employees and employers (Bronkhorst, 2015).

CONCLUSIONS

Malaysia aspires to be a developed country since 2020, and the construction industry has traditionally been a sturdy economic pillar in that endeavour. However, the number of industrial accidents in Malaysia is still alarming. Due to Malaysia's ongoing desire for new construction projects, this business has recently been forced to hire more people to the point where it is entirely dependent on foreign labour. Albeit the frequent terrible working conditions, many international workers continue to work in Malaysia. Additionally, the excessive reliance on foreign labour has led to issues that include low productivity, a lack of construction experience, and the potential for misunderstandings, all of which will reduce the volume of completed projects in the Malaysian construction sector.

By putting safety programmes into place, the construction sector may minimise safety risks, lower injury and fatality rates, cut expenses that are related to subpar safety performance, and safeguard its reputation. Correspondingly, this research has identified the awareness that needs to be tackled to strengthen the implementation of safety and health in the Malaysian construction industry. The challenges of safety and health implementation that have been identified in the literature include the lack of understanding and incorrect perception, poor understanding and attitude, the lack of competent labour in the OSH enforcement organisations, a lack of comprehensive OSH rules, standards, and policies, a lack in necessary tools and technology, inadequate and out-of-date equipment, the lack of funding, low commitment to health and safety, the treatment of foreign employees in an uneven, unsafe, and unpleasant manner, unsafe behaviours or actions and the lack of awareness.

Therefore, future research could adopt a qualitative in-depth interview to investigate the safety and health implementation of foreign workers, which can help to prevent accidents. The output from this research will inform the state of health and safety practices for foreign workers in Malaysia.

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