
A Critical Analysis of Occupational Dimensions of Health and Safety Education

BY

Comfort Peter UDOBANG
Department of Physical and Health Education
Faculty of Education
University of Uyo, Uyo
Akwa Ibom State, Nigeria

ABSTRACT

The trend in occupational health and safety is the need to provide systematic, comprehensive measures to prevent industrial accidents at workplace. Globally, occupational health and safety trends advocate the health and safety managers to holistically assess the required workplace safety needs and select an integrated solution. The international Standard Organization (ISO) continues to develop safety standards for Personal Protection Equipment (PPE). Health and safety regulations are becoming increasingly stringent around the world. Industries and substances have unique needs that require more attention and may require specific and safety standards. The best way to protect workers is to purchase and wear PPE, in this case we mean, sustainable PPE. The workplace should be drug and alcohol free in accordance with national law and practices. Every person has the right to be treated with dignity and respect and to be free from all forms of violence, harassment, and bullying in the workplace. These policies should also specify where smoking may be permitted during agreed rest break without creating hazards for other workers or the risk of fire on the premises. The study concluded that Industries (Government and private, small and big scale, formal and informal) strive to implement OHS, to promote health and well-being of the people and create job and employment opportunities for occupational health and safety service providers. Considering the above conclusion, the study recommended that the development of ISO standards will continue to change the landscape and motivate countries all over the world to align with global health and safety standards as a best practice.

KEYWORDS: Occupational Dimensions, Health Education, Safety Education, International Standard Organization (ISO), and Personal Protection Equipment (PPE)

Introduction

Occupational health deals with issues which are at the heart of the economy and society all over the world. It is beginning to attract increasing attention of society. Old disciplinary barriers must be crossed, and communication so that healthy work is accepted as a mainstream concern. “Healthy Work”, with its medical associations, and “safety”, with the implied emphasis on regulation, has become a mainstream political and economic issue in both industrialized and developing countries, involving numerous different government departments. Knave and Ennals (2012) opined that, healthy work is now central to successful employment policies, as government and regional organizations seek to improve competitiveness and productivity and understand the economic and social cost of sickness absence and industrial injuries.

Occupational health education is needed, for in many cases research has run ahead of practice, or, as in rural Southern Africa, occupational health service have only recently become available (Rantanem, 2005). Emerging from this is an increased emphasis on communication, which is the focus of a further ICOH network. Occupational health specialists need to find a common language with politicians, decision-makers and practitioners. Occupational Health must enter the public arena, and become part of the debate in civil society, in which work plays a vital part, and healthy work is critical for sustainability (Ogundele, 2004).

Statement of the Problem

Healthy work is now central to successful employment policies, as government and regional organizations seeks to improve competitiveness and productivity and understand the economic and social cost of sickness absence and industrial injuries. Therefore, there is need to provide at systematic, comprehensive measures to prevent industrial accidents at workplace. Different cases of accidents and injuries are seen and heard at different work places in the country. Cases of inadequate number of technical equipment and transport facilities accelerate hazard rates. This study is as an exposé to assess occupational dimensions of health and safety education.

Conceptual Review

Occupational Health and Safety Trends

Globally, the need to improve systematic, comprehensive measures to prevent industrial accidents is the trend. Trend is a general direction in which something is developing or changing, a line of general direction or movement. Occupational health and safety trends advocate that health and safety managers holistically assess the required workplace safety needs and select an integrated solution. Companies need to invest in risk evaluations to identify on-site hazards and put the best processes and controls in place including appropriate Personal Protection Equipment (PPE) (Adeogun, & Okafor, 2013). Regarding occupational health and safety trend in Nigeria, records of occupational diseases are poor, primarily because industries do not report cases to the relevant government agencies. However, a survey of occupational diseases reported in the literature suggests that conjunctivitis, chronic bronchitis, dermatitis's, musculoskeletal disorders and injuries are common workplace health problems (WHO, 2001).

Nature of Occupational Health Provision in Nigeria

Occupational health practitioners are few and are mostly engaged in multinational and large national establishments and medical schools. There are a few independent consultant firms especially in Lagos and Port-Harcourt. They provide services to medium and large-scale industries. Workers in small-scale industries, particularly those in the informal sector have little or no access to occupational health services. For this category of workers, 60% of the total Nigerian workforce, government hospitals, private general practice clinics, chemist shops and dispensaries are the main sources of health care for their general health problems (Guthrie, 2001). With regard to occupational health service providers, Ogundele (2004) opined that there are less than 30 qualified occupational physicians in Nigeria. They provide mainly in multinational and large-scale government enterprises. Large and Medium scale enterprises engage general practitioners to provide curative services for their workers. Workplaces with on-site clinics employ full-time registered nurses usually with no

occupational health qualifications. They work with the on-site physician or refer cases to a designated general practitioner.

In answering how is occupational health represented? The society of Occupational Health Physicians of Nigeria has less than 90 members comprising occupational health specialists and general practitioners engaged in industry. Physicians specializing in occupational medicine are currently within the Faculties of Public Health and Community Health in the National Postgraduate Medical College of Nigeria and the West African College of Physicians, respectively. Other occupational health groups include the National Industrial Safety Council which includes safety professionals and the Occupational Health Nurses Association of Nigeria (Skiold, 2001).

Legislation that Impact the Provision of Occupational Health in Nigeria

The Factories decree 1987 was a landmark in legislation in occupational health in Nigeria. A substantial revision of the colonial legislation, Factories Act 1958, the 1987 decree, changed the definition of a factory from an enterprise with 10 or more workers to a premise with one or more workers thereby providing oversight for the numerous small-scale enterprises that engage the majority of the workforce in Nigeria. The current legislation is the Factories Act 1990 which essence the same as the 1987 legislation. Enforce of legislation is carried out by the factory Inspectorate of the Ministry of Labour. The Ministry produced a National Policy of Safety and Health in 2006 which details the responsibilities of employers, workers, manufacturers and government agencies in the maintenance of the health and safety of workers.

Occupational Health Law, Rules and Regulations

Regulations: Regulations are guidelines and norms in order to remove the imperfections for a particular event, activity, process or thing. Regulations are established by the government's executive branch to accomplish a purpose defined by the legislature. They set out the standards one needs to meet for specific hazards and risks, such as noise, machinery, and manual handling. They also set out the licenses one needs for specific activity, the records one needs to keep, and the reports he needs to make (Idoro, 2011).

Rules: The rules are set within a body for its proper functioning and may vary from one organization to the other, depending on their philosophy of life. Rules are working procedures within an organization to provide effective function of that organization. They are more flexible.

Laws: Laws are rigid and must be strictly adhered to. A change in law can be brought only through proper legislation and deliberation (for example change in house address when shifting for above analogy), and doesn't happen daily or frequently. Laws are put in place by the legislative branch of government (national, state and local). Violation of law can subject one to jail time or monetary penalties. Law is the stinger word, regulation is somewhat weaker, and rules are the weakest word. Laws are the legal version of rules. Laws are passed through due process in order to take effect. Laws start as bills and then become laws. They are flexible.

Act: The formally codified result of deliberation by a legislative body; a law, edict, decree, statute, etc. A statute or law made by a legislative body; as an act of congress is a law by the congress of the United States; an act of assembly is a law made by a legislative assembly. If

an act of assembly expires or is repealed while a proceeding under it is pending, the proceeding becomes abortive; as a prosecution for an offense.

Occupational Regulations

General Safety Regulations, 1986 (International)

The Minister of Manpower has, in term of section 35 of the Machinery and Occupational Safety Act, 1983 (Act 6 of 1983) made the regulations contained in the Schedule hereto. The health and safety regulations are inscribed in the factory Acts which are based on the recommendation of trade Unions Employees' Associations, Industries and Ministry of Health understood the need for the safety and health of the factory workers. This is why the inscription came into existence so that no worker will be treated badly by the employers.

Display of substituted notices and signs: If the provision of any regulation prescribe a particular notice or sign to be displayed by an employer or by a user at a workplace, the employer or user may, in lieu therefore, display a corresponding symbolic sign as contained in a safety standard incorporated for this purpose into these regulations.

Intoxication: Subject to the provision of sub regulation, an employer or a user, as the case may be, shall not permit any person who is or who appears to be under the influence of intoxicating liquor or drugs, to enter or remain at a workplace.

Personal Safety Equipment and Facilities: Taking into account the nature of the hazard that is to be countered, and without derogating from the general duties imposed on employers and users of machinery shall utilize suitable goggles, face shields, protective helmets, caps, gloves, aprons, jackets, capes, sleeves, protective footwear, protective overalls, or any similar safety equipment or facilities of a type that will effectively prevent bodily injury.

First Aid, Emergency Equipment and Procedures: An employer shall take all reasonable steps that are necessary under the circumstances, to ensure that persons at work receive prompt first aid treatment in case of injury or emergency.

Use and Storage of Flammable Liquids: No employer shall require or permit any person to work in a place where the vapour of any flammable liquid is generated to such an extent that it constitutes an actual or potential fire or exposure hazard or endangers the safety of any person, unless the provision of this regulation are complied with.

Other general regulations include: No Work in Confined Spaces; No Work in Elevated Position; Working in danger of engulfment, no Welding, flame cutting, soldering and similar operations, except with PPE; Supervision of building work; Register of factories; Appointment of factories; Appeal Board; Cleanliness; Overcrowding; Ventilation and lighting; Drainage of Floors; Sanitary conveniences; and Duty of inspector as to sanitary defects remediable by local authority.

Safety (General Provisions)

Transmission machinery: Every part of any transmission shall be securely fenced unless it is in such position or of such constructed as to be as safe to every person employed or working on the premises as it would be if securely fenced.

Training and supervision of inexperienced workers: No person shall be employed at any machine or in process, being a machine or process liable to cause bodily injury, unless he has been fully instructed as to the dangers likely to arise in connection therewith and the precautions to be observed.

Cranes and other lifting machines: All parts and working gear whether fixed or movable, including the anchorage and fixing appliances of every lifting machine, shall be of good construction, sound material, and adequate strength and free from patent defect, and shall be properly maintained.

Safe means of access and safe place of employment: All floors, steps, stairs, passages, gangways and other parts of a structure or building used as a factory shall be of sound construction and properly maintained and kept safe at all times.

Precautions in places where dangerous fumes are likely to be present: Where work has to be done inside any chamber, tank, vat, pit or other confined place, in which dangerous fumes are likely to be present, the Director of Factories shall be notified in writing, in the prescribed form, before the commencement of work. Other general provisions for safety include: Precaution in respect to explosives or other inflammable dust, gas, vapor or substance; Prevention of Fire; Power of inspector to issue improvement notice; and Appeal against notice.

Welfare (General Provisions)

Supply of drinking water: An adequate supply of drinking water shall be provided and maintained at suitable points conveniently accessible to all persons employed.

First aid: There shall be provided and maintained so as to be readily accessible a first-aid box or cupboard of the prescribed standard, and where more than one hundred and fifty persons are employed an additional box or cupboard for every additional one hundred and fifty persons.

Other general welfare provisions include: Protective clothing and appliances; Power to take samples; Notification and investigation of accidents and industrial diseases; Prohibition of Deductions from Wages; Offences; Penalty in Cases of Death or Injury and forgery of certificates, false entries and false declaration.

Occupational Health Laws in Nigeria

Occupational Safety and Health Act of 1970

In Nigeria the practice of occupational health is closely knit to the Factory Act of 1958. The Factory Act was first enacted in 1958 and 29 years in 1989 later the Act was revisited and in 1970. To ensure safe and healthy working conditions for working men and women; by authorizing enforcement of the standards developed under the Act; by assisting and encouraging the States in their efforts to assure safe and healthful working conditions; by providing for research, information, education, and training in the field of occupational safety

and health; and for other purposes. Be it enacted by the Senate and House of Representatives assembled, that this Act may be cited as the “Occupational Safety and Health Act of 1970”.

Nigeria Factories Act (No. 16 of 1987)

Part I – Registration of Factories: Register of factories. Registration of existing factories, Registration of new factories, Notification of change in particulars furnished, Appointment of Factories Appeal Board, Appeal to Board from decision of Director of Factories.

Part II – Health (General Provisions): Cleanliness, overcrowding, ventilation, lighting, drainage of floors, sanitary conveniences, Duty of inspector as to sanitary defects remediable by local authority.

Part III – Safety (General Provisions): Prime movers, transmission machinery, Powered machinery, Other Machinery, Provision as to unfenced machinery, construction and maintenance of fencing, construction and disposal of new machinery, vessels containing dangerous liquids. Self-acting machines, safe means of access and safe place of employment, precautions in places where dangerous fumes are likely to be present, precautions with respect to explosives or other inflammable dust, gas, vapour or substance, steam boilers, steam receivers and steam containers, air receivers, exception as to steam boilers, steam receivers and steam containers and air receivers, prevention of fire. Safety provisions in case of fire, power of inspector to issue improvement notice, power of inspector to issue prohibition notice as to dangerous factory, appeal against notice.

Part IV – Welfare (General Provisions): Supply of drinking water, washing facilities, accommodation for clothing, first-aid exemption if ambulance room is provided.

Part V – Health, Safety and Welfare (Special Provisions and Regulations): Removal of dust or fumes, meals in certain dangerous trades, protective clothing and appliances, protection of eyes in certain processes, Power to make regulations for certain health, safety and welfare, Power to take samples.

Part VI: Notification and Investigation of Accidents and Industrial Diseases: Notification of accidents, Power to extend dangerous occurrences provisions as notice of accidents, Notification of industrial disease.

Part VII – Special Applications, Extension and Miscellaneous Provisions: Premises where part of building is separate factory, docks, wharves and quays. Premises in which steam boilers are used, Power to extend application of provisions of Act.

Part VIII – General Registers: General registers, preservation of registers and records, posting of abstract of Act, regulations and notices, duties of persons employed, prohibition of deductions from wages.

Part IX – Administration: Report, Appointment of inspectors, Powers of inspectors, Power of inspectors to conduct proceedings before a Magistrate’s Court, Provisions as to regulations made under this publication in the gazette of certificates issued or revoked by the Director of Factories.

Part X – Offences, Penalties and Illegal Proceedings: Offences, penalty for offences for which no express penalty is provided, penalty in cases of death or injury, forgery of certificates, false entries and false declarations, penalty for persons actually committing offences for which occupier is liable, powers of occupier or owner exempt himself from

liability on the conviction of actual offender, proceedings against persons other than occupiers or owners, owner of machines liable in certain cases instead of occupier, prosecution of offences, special provision as to evidence, service and sending of documents, etc, power to modify agreements, power to apportion expenses.

Part XI – General: Savings, General application, Application to factories belonging to Government of the Federation or States, Power to exempt in cases of emergency, Repeals and savings, Meaning of factory, Interpretation, Short title.

Some Benefits of OHS Laws, Rules and Regulations

1. It is preventive and proactive in approach as it foresees, identifies and prevents hazards before they turn to bad occurrences with unexpected or unpredicted consequences.
2. Ensures workers “health is not adversely affected by their work and work is not affected in return by poor health (mutual benefit).
3. Foster Healthy workforce leading to increased productivity for the business owner and the economy at large (Workers well-being vs. Productivity). Healthy workers who are essential to the success of any organization and are the best assets in any industry.
4. It also reduced work-related sickness absence. This is an in-valuation cost-saving benefit to employers. Sickness absence is one of the main causes of economic loss to employers due to lost productivity/output/man-hour loss, and time and resources spent on sickness absence management.
5. It helps business to attain compliance with the relevant laws. It also helps businesses to save cost by reducing potential claims and litigations.
6. A business organization that is successful with the health and welfare of its workers enjoys goodwill (betters company image) which gives such business an edge. Some companies will only award contracts to contractors with health and safety provisions.
7. It is another way of caring (health protection) for the public’s health. Most of the health problems that people generally suffer from can be traced to work/job tasks (e.g. low back ache, respiratory problems, deafness, infertility, cancers etc (Idubor and Osiamoje, 2013)

The Stakeholders in OHS Laws and Regulations in Nigeria and Their Roles

Government – Legislature: to pass the bill and make the relevant laws Executives (Ministry of Health, Ministry of Labour, Ministry of Environment): to set relevant agencies, make policies and implement the OHS regulations.

Employers or business owners (Government and organized private sector): to comply with the OHS regulations and also give useful feedbacks.

Employees: to comply with OHS regulations and perform their responsibilities.

Academic institutions: to carry out continuous educational training and researches in OHS.

OHS professionals: to help the government and public with professional advice and enlighten and also carry out the actual implementation of the OHS functions/duties.

To operate OHS successfully in Nigeria:

1. There must be the relevant laws (separate OHS regulations/laws different from the Labour Laws or Compensation Act). Standard and Comprehensive OHS regulations/guides should be made.
2. Active and continuous and information campaign must be embarked upon in order to get all the stakeholders and public on board. This is so that they can have OHS consciousness and embrace it e.g. stakeholders' lecture/seminar, public lecture etc.
3. Proper implementation and strict enforcement: Appropriate agencies (government and non-government) must be set up and made to roll into action once the laws are made.
4. Training implementation and strict enforcement: Appropriate agencies (government and non-government) must be set up and made to roll into action once the laws are made.
5. Training of personnel in various OHS activities; both the government and private
6. Making the provision of OHS one of the criteria to be fulfilled before some businesses (especially the ones with OHS hazard risks and the medium/large scale industry) are registered by the Corporate Affairs Commission (CAC) or enlisted into and kept on the Nigerian Stock Exchange (SEC). Such measure will ensure compliance with OHS regulations by employers.

Health the Government can create More Jobs from OHS

Rantanen (2005) submitted that implementation of OHS will create new line of career and employment (self or government) for the professionals that will carry out the OHS functions/duties at various levels. These professionals include:

Occupational Health Nurses: To make OH diagnoses, give first aid treatment and advice/counseling and make referrals

Occupational Health Physician: to make OH diagnoses and prescribes and gives treatment

Occupational Health Advisors: To give OH consultancy and case management services

Industrial Hygienists: To recognize, evaluate, and control chemical, physical and biological hazards in the work place through sampling and monitoring.

Occupational Toxicologists: To assess the hazards and risks of health hazard by chemical present in the workplace.

Screening Technicians: To carry out various health screenings e.g. audiometry, visual tests, heart checks, anthropometric measurements etc.

Ergonomists: Are concerned with analyzing the interaction between people and machinery/equipment in order to ensure that there is a fit between machineries and users thereby preventing various musculoskeletal injuries.

Safety Officers/Safety Auditors: To establish, coordinate, direct, and evaluate the effectiveness of safety policies, plans, programs, and procedures.

Industrial Psychologists: To study psychology as it applies to the workplace: Attitude of employees and employers, workplace environment and organizational behavior.

Occupational Epidemiologists: To study and look out for workers exposed to a variety of chemical, biological or physical agents to determine if the exposures result in the risk of adverse health outcomes

Laboratory Scientists/Special Laboratories: To carry out special tests and investigations on various body and blood levels on some chemicals that cannot be tested in the normal medical laboratories.

Paramedics/First Aiders: Professionally trained to provide immediate emergency care in work places with high injury risks.

Vendors and Repairers: To supply, maintain and repair the equipment including personal protective equipment (PPE) with the above-named professionals carry out their work.

Risk Management Consultants (Risk Assessor and Managers): To help industries and organizations predicts, assess and manage health, safety and other risk inherent in various industries.

Business/Financier Planners: Will be engaged as man private OHS firms will spring up

University Lecturers: There will be need for more lecturers in the Universities to teach the various newly created courses of study in the OH field.

Lawyers and Insurance Companies: Will have more business related to OH laws, claims, compensations etc.

Key Issues to Enforcement of OHS Regulations in Nigeria

Lack of Personal Personnel: Lack of skilled personnel is a major determinant to effective enforcement of OSH program in Nigeria. Rantanen (2005) asserted that an insufficient number of competent occupational health services experts hinder the development of occupational health services globally.

Political Influence: Rantanen (2005) maintains that the global decline in the development of occupational health services is primarily political. This is because powerful people or persons in high or influential positions in the country own most of the Industries and Factories.

Security of Penalties: Prior to the passage of the Labour, Safety, Health and Welfare bill of 2012 (which awaits presidential assent). The penalties for violation of OHS laws can be said to be lenient. In particular, according to Iduhor and Osiamoje (2013), the penalty stipulated by the Workman's Compensation Act is as low as 2000 Naira.

The Judicial System: The long time spent by the judicial system of Nigeria on cases impedes OSH development (Idubor and Osiamoje 2013). As a result, people do not have faith in the judicial system; therefore, most OSH cases do not go to court.

Corruption and Bribery: The corruption level in Nigeria is high, enforcement officers are corrupt this may hinder effective enforcement in the country as the activities of authorities responsible for enforcing the laws are seen as questionable. As an illustration, Iduhor and Osimojo (2013) cited an instance where companies with poor OSH practices get pass marks after inspection because they bribed the enforcement officers. Consequently, organizations will not comply with OSH regulations, as they know the easy way out.

Inadequate Funding: Ezenwa (2001) argues that inadequate number of technical equipment and transport facilities hinder the enforcement of OSH regulations in Nigeria. The argument here is that if the ministry experiences insufficient funding, adequate enforcement will be fetched.

Inadequate Legislation: This is exemplified by the non-inclusive of the construction industry in the definition of premises in the Factories Act of 1999 (Diugwu, 2012; Idoro 2011). Consequently, construction firms adopt regulations from the UK (Idoro 2008) or US, and these regulations are not enforceable in Nigeria. As such, the enforcement authority do not have jurisdiction over such premises.

Lack of Governmental Commitment: This is exemplified by the long time being spent by the President to assent to the Labour, Safety, Health and Welfare bill 2012 and the Lack of OSH attention inter alia. These signify that the government is not committed to improving OSH.

Insecurity: High level of insecurity characterizes Nigeria e.g., bomb explosions, kidnapping. As a result, the security of enforcement officers is questionable; hence, Okojie (2010) notes that factory inspectors may be molested while carrying out their duties. However, the Labour, Safety, Health and Welfare Bill of 2012 make provision for the security of enforcement officers.

Technologies and Economic Growth: The literature reviewed suggest that the existing OSH laws are not up to date; they do not address some hazards posed by the new technologies; they are not recognized in some industries and workplaces that came into existence as result of the current economic growth.

Conclusion

In conclusion, the trend in occupational health and safety is the need to provide systematic, comprehensive measures to prevent industrial accidents at workplace. Occupational health and safety trends globally advocate health and safety; managers holistically assess the required workplace safety needs and select an integrated solution. Industries (Government and private, small and big scale, formal and informal) strive to implement OHS, to promote health and well-being of the people and create job and employment opportunities for occupational health and safety service providers.

Recommendations

1. The development of ISO standards will continue to change the landscape and motivate countries all over the world to align with global health and safety standards as a best practice.
2. Sustainable PPE should be sufficiently provided to all staff working in areas where safety is emphasized. This helps to reduce the incident of accidents in workplaces.
3. The Government should set relevant agencies, make policies and implement the OHS regulations, which should be strictly adhered to in workplaces.
4. Employers or business owners and Employees (staff) must strive to comply with the OHS regulations and also give useful feedbacks, as to improve the safety standard of workers in Nigeria.

REFERENCES

- Adeogun, B. K. & Okafor, C. C. (2013). Occupational Health, Safety and Environment (HSE) Trend in Nigeria. *International Journal of Environmental Science, Management and Engineering Research*, 2(1), pp 24 – 29.
- Diugwu, L. A., Babu, D. L. & Egila, A. E. (2012). Effective Regulation and Level of Awareness: An Expose of the Nigeria's Construction Industry. *Open Journal of Safety Science and Technology*, 2(1), pp. 140 – 146.
- Knave, K. & Ennals, R. (2001). *Work life 2000 years books: 1,2,3*. Spinger Verlag, London.
- Ezenwa, A. O. (2001). *A Study of Fatal Injuries in Nigerian Factories*. *Society of Occupational Medicine*, 51(8), pp. 485 – 489. Federal Republic of Nigeria. Labour, Safety Health and Welfare Bill.
- Idubor, E. E. and Oisamoje, M. D. (2013). An Exploration of Health and Safety Management Issues in Nigeria's Effort to industrialize. *European Scientific Journal*, 9(12), 154 – 169.
- Ogundele, B. O. (2004). *Problems of Health Education*. Ibadan: Codal Publisher.
- Rantanen, J. H. (2005). US Department of health and human services, Federal Occupation health. Basic occupational health care centre services. 40(2): 67 - 73. Available from <https://www.ncbi.nlm.nih.gov/pubmed/120645652002>,
- Skiold, L. (2001). *A look into modern working life*. Swedish National Institute for Working Life, Stockholm.
- Stokke, E. (2001). *The new business model*. Presentation at the Second Symposium on Business and Mental Energy at Work, Geneva. World Strategic Partners, p. 45.
- WHO (2001), *Occupational Health*. A manual for primary healthcare workers. Cairo WHO regional office for the Eastern Mediterranean.