

Editorial

Occupational safety and health challenges in small-scale enterprises

Several governmental policies and research articles state that small-scale enterprises (SSEs) with fewer than 50 employees play a major role in national and regional economic development in most countries. They account for a large portion of the overall employment^{1, 2)} and it is argued that SSEs and self-employed people can promote productivity and employment, contribute to ending poverty and social inequity, further women's businesses and implement business solutions to environmental challenges³⁾. The majority of these enterprises are micro-enterprises with fewer than 10 employees. In developing economies, the proportion of workers employed in SSEs and micro-enterprises is much higher than in larger enterprises⁴⁾. Given that research shows that there is a connection between working conditions, employee health and productivity^{5, 6)} it is important to develop occupational safety and health (OSH) in this group of enterprises. However, consideration must be given to the fact that OSH needs can differ depending on factors such as sector, company size and employment relations. In today's working life, many employees have informal employment circumstances with less social protection⁷⁾ and the number of 'hybrid entrepreneurs' that combine their own business with formal employment is increasing⁸⁾.

Taking SSEs as a group, extensive research indicates that the risk of suffering an occupational accident is higher, and safety and health performance is poorer, compared with larger enterprises^{9, 10)}. Common reasons for these conditions include a lack of financial resources, the manager's limited interest in OSH issues, an absence of employee representation, insufficient OSH inspections and limited support from occupational health services and other human resource consultants^{9–11)}. Another obstacle for OSH investments in SSEs can be that the manager, who is often the owner, has great work demands, many work tasks, long and irregular working hours, and difficulties in balancing their work and private life^{12, 13)}. The complex work situation of SSE managers can result in insufficient knowledge about OSH regulations and about how to implement structured OSH management systems^{9, 14, 15)}. On

the other hand, SSEs have some advantages when it comes to working with OSH improvements; there are fewer hierarchical levels and closer relations between managers and employees, they often have a familiar and supportive climate and there is more opportunity for employees to participate in improvement processes^{13, 14)}. Furthermore, qualitative interviews with SSE managers show that many of them want the best for their employees, want to provide a healthy workplace and are willing to conduct leadership so as to promote health^{14–16)}. However, the managers experience that OSH regulations are too bureaucratic and that they have limited knowledge about tools for systematic OSH improvements¹⁶⁾.

When implementing OSH improvements in SSEs it is important to take the differences between the enterprises into account. For example, studies of European self-employed people (with and without employees) show that most self-employed individuals have good working conditions, a high level of job quality and choose to continue to run their own business. However, around 20% of self-employed people report that they have no other alternative for work, lower levels of job quality and a worse level of well-being than the former group¹⁷⁾. These results are supported by a study of European self-employed people showing six distinct profiles within this group with significant differences in well-being, health and work-related variables¹⁸⁾. It is also interesting to note that the majority of research indicates that there is high level of well-being in self-employed people, although there are differences depending on gender, age and country of birth^{18, 19)}. Hopefully, this fact can provide motivation to managers to implement OSH measures to also improve the well-being of their employees.

Although research about OSH interventions in SSEs has significantly increased, there is still a need for more research into models and tools that are suitable for different SSEs based on factors such as type of business, company size and environmental context factors^{20–22)}. According to Masi and Cagno²³⁾, barriers to OSH interventions are connected to regulation, resources and information issues,

and these are more pronounced in micro-enterprises. A systematic review of the effects of OSH interventions²¹⁾ concluded that OSH legislation and inspections can reduce injuries and fatalities, although their effect on psychological disorders was not as clear. However, studies show that OSH inspectors find it difficult when inspecting SSEs, especially micro-enterprises, because they have to strike a balance in their role between issuing penalties and giving advice concerning work environment issues. The inspectors also highlight that inspection models are more developed for larger enterprises and are inadequate for smaller companies²⁴⁾. Researchers also point out that psychosocial working conditions are not given as much focus during inspections and that these conditions can be linked to the risk of occupational accidents and injuries²⁵⁾.

There are several openings for projects into future challenges of OSH research and practice. There is a need to develop OSH models and tools that are suitable for different types of SSEs and to bridge the gap between policy instruments and practice^{20, 26)}. There is still a need for more longitudinal quantitative and qualitative studies into the long-term effects of different OSH interventions in SSEs on health, the working environment and productivity. There is also potentially a need for more comprehensive approaches in which physical OSH issues are addressed together with psychosocial working conditions and workplace health promotion issues. It is noteworthy that work remains remarkably absent from research into public health and examinations of health inequities²⁷⁾. Another important area for both research and practice is looking at how resources such as safety inspectors, occupational health services, business networks and company boards can be supportive for SSEs and their managers. Studies show that SSE managers can find that it is productive to participate in networks with other enterprises concerning working environment and health, and that it is beneficial to get support from occupational health services on how to lead so as to promote good health^{14–16)}. Since external OSH resources are limited, there is also a need for more studies into participatory work processes in SSEs in which employees and managers work together with improvements^{28, 29)}. Another research approach would be to study SSEs that have been successful in systematic OSH, so as to implement their strategies in other SSEs.

Improvements in the physical and psychosocial conditions and the well-being of managers and employees in SSEs are crucial for the development of these businesses, and for societies as a whole, as many individuals work in SSEs. Working conditions in these enterprises are affected

by forces such as globalization, new technologies and more flexible employment relations. Therefore, researchers and practitioners dealing with SSEs need to fulfil the demand for new knowledge and effective OSH interventions in different types of enterprises.

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