THE STATE OF SOUTH AFRICAN CONSTRUCTION HEALTH AND SAFETY

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Previous research, media reports, and statistics indicate that the South African construction industry is experiencing major challenges in terms of health and safety (H&S). A quantitative study was conducted among a range of construction industry stakeholders' courtesy of an online survey to determine, inter alia, their rating of the South African construction industry, and the top ten challenges, and the top ten interventions in terms of improving construction H&S performance. Findings include: the construction industry is rated above average relative to 34 and below average relative to 216 / 250 aspects / parameters related to H&S and is not H&S compliant. Conclusions include: the construction industry in general is not committed to H&S, which is attributable to a poor H&S culture. Recommendations include strong H&S leadership and management commitment, optimum H&S culture, H&S compliance and regulatory enforcement, optimum H&S education, training, and competency, adequate budgeting for H&S, optimum risk management and planning for H&S, consistent application of H&S standards, enhanced H&S statistics, and addressing of socio-economic pressures.

Keywords: challenges; construction; health and safety; performance

INTRODUCTION

The South African construction industry generates a high level of injuries relative to construction industries globally. Based upon a total of 298 069 workers insured by The Federated Employers Mutual Assurance Company (RF) (Pty) Ltd (FEM) (2025) for the year 2024, the fatality rate (FR) was 20.1 / 100 000 workers, the accident rate (AR) was 2.19 / 100 workers, and the disabling injury incidence rate (DIIR) was 0.29 or 0.29 / 100 workers. The FR does not compare favourably with the FRs of the Australian and United Kingdom (UK) construction industries, namely 2.1 for 2021 (Safe Work Australia, 2023), and 2.1 in 2022 / 2023 (Health and Safety Executive, 2024), respectively.

The most recent construction H&S 'status report' is 'Construction Health and Safety in South Africa Status and Recommendations' published on 11 June 2009 by the Construction Industry Development Board (cidb) (2009). Furthermore, given the paucity of literature relative to overall H&S performance in South African construction, media reporting of multiple fatality 'accidents', and anecdotal evidence with respect to H&S in South African construction, a study was conducted. The aim of the study was to determine the state of South African construction H&S, which

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effectively constitutes the knowledge gap. The objectives, relative to this paper, include, inter alia, to determine:

- the performance of the South African construction industry relative to 250 construction health and safety aspects / parameters
- South African construction's current H&S status in terms of Anglo American's H&S journey model, and
- the top ten challenges in terms of improving the H&S performance of the South African construction industry.

LITERATURE REVIEW

The Current State of Construction Health and Safety in South Africa

To date, South Africa has produced basically one report that focuses on the state of H&S in the construction industry, namely 'Construction Health and Safety in South Africa Status and Recommendations' (cidb, 2009), which was commissioned in response to major challenges in the South African construction industry. The report affirmed that improving H&S remains a key priority for the industry and for the cidb. It also highlighted significant concerns, such as inadequate enforcement of the Construction Regulations and an Occupational Health and Safety (OHS) Inspectorate that is both understaffed and lacking in construction-specific expertise. The same is also the case with the construction workforce. A study conducted by Raliile *et al. (*2021) reported minimal correlation between management's knowledge of H&S legislation and their commitment to its implementation, revealing no statistically significant relationship between the two. Furthermore, management's application of the Construction Regulations was found to be insufficient, indicating an ongoing need to strengthen both awareness of legal requirements and management's role in promoting construction worker wellbeing.

In addition to legislative enforcement challenges, the sector suffers from outdated and incomplete construction H&S statistics, the most recent data from the Compensation Commissioner dates to 1999, and the Compensation Fund is widely perceived as ineffective to date (cidb, 2009; Smallwood, 2024). At the organisational and site levels, poor H&S performance is often linked to inadequate management commitment, poor supervision, and insufficient training. Further contributing factors include limited worker involvement, low personal risk awareness, and pressures associated with tight project timelines. According to the cidb report, several areas for improvement were identified: using public procurement as a tool to drive H&S performance; improving data collection and reporting; introducing minimum competency standards for client-appointed H&S agents; establishing a national H&S agency for awareness and research; building capacity within trade unions; integrating H&S into tertiary built environment education, and supporting small and emerging contractors through targeted development initiatives. However, 15 years later, most of these issues remain a concern (Smallwood, 2024).

H&S Media Reports

According to the Department of Employment and Labour (DEL) (2024), approximately eight workers die each month in the South African construction industry due to H&S shortcomings. Contributing factors include inadequate training, poor enforcement of H&S protocols, and a prevailing culture of non-compliance. It was highlighted in the DEL's media release post-George building collapse, which claimed 34 lives in May 2024, that the nation does not possess a culture of

compliance. Not only is the cost of accidents dire in South Africa, but behind every number, there is a family affected, and children left without a parent. Since 2019, the Compensation Fund has paid over R20 billion in claims in the construction sector alone. The claims were related to severe injuries, loss of limbs, and fatalities. Decent work deficits in the sector are exacerbated by inadequate H&S measures, limited training, pressure to meet deadlines, and a lack of accountability where H&S breaches occur, which often go unpunished.

These concerns point to a broader systemic issue within the South African construction industry. As Smallwood (2024) asserts, construction H&S is a multi-stakeholder issue requiring an integrated effort coordinated by a single-point responsible party, someone well-versed in both H&S and quality management. Smallwood criticises the prevailing 'H&S culture' within the industry, which is plagued by 'safetyitis' at the expense of occupational health, primary health promotion, mental health, and wellbeing, the prioritisation of cost and time over H&S, and the belief that H&S is an expense rather than a core value. Other cultural flaws include the dehumanisation of workers, over-reliance on reactive (trailing) indicators rather than proactive (leading) measures, and an acceptance of incidents as 'accidents' rather than as a 'failure of management'. These insights underscore the need for a cultural and structural overhaul to reduce preventable fatalities and create healthier, safer, more dignified work environments in the sector.

Smallwood (2024) further attests that the prerequisite for achieving optimal H&S outcomes in construction is the establishment of a foundation built on respect for people, people-centred values, a strong H&S culture, both surface and core competencies, and emotional intelligence. This also necessitates comprehensive construction skills training and tertiary built environment education that integrates construction H&S and quality management as core components. However, the prevailing structure of the industry, characterised by a fragmented environment, absence of barriers to entry, pseudo-registration of contractors, and the exclusion of H&S and quality management as registration or appointment criteria, undermines progress in these areas. A paradigm shift is essential in terms of how H&S is perceived, promoted, and implemented. While legislation provides a foundational framework, it reflects minimum standards rather than better practices. As such, a commitment to continuous improvement must guide the sector, underpinned by the belief that 'people are our most important resource' and 'H&S is a profit centre', both of which should serve as unifying calls to action across the built environment.

The South African Construction H&S legislative and regulatory frameworks obligate all stakeholders involved in the construction process, especially the client, designer and contractors, to possess appropriate qualifications in construction H&S (Haupt, 2024). Furthermore, H&S considerations ought to be integrated throughout every phase of a construction project, from initial conceptualisation through to the eventual deconstruction of the facility at the end of its life cycle. Despite this, many higher education institutions and professional accrediting bodies in South Africa have not addressed the limited inclusion of construction H&S in academic programmes that prepare built environment professionals for practice. It is worth considering the extent to which registered professionals working on projects are exposed to construction H&S content during their tertiary studies. Furthermore, training institutions must be evaluated and accredited with specific regard to the inclusion of construction H&S in their curricula.

METHOD

Research Method and Sample Strata

Phase 1 of the study adopted the quantitative method due to the predominating nature of the data required. The online questionnaire included Section A in the form of the respondents' demographic data and Section B, the study-related data. Section A included nine questions, and Section B five questions, two of which were five-point Likert Scale-type questions, the first of which included 250 aspects / parameters (variables). These were derived from, inter alia, cidb (2009) and Smallwood (2018; 2024). The remaining question was open-ended, namely the 'top ten challenges in terms of improving the H&S performance of the South African construction industry.

The pilot stage of Phase 1 of the study included a 168 construction multi-stakeholder convenience sample, and 412 members / contacts of the Association of Construction Health and Safety Management (ACHASM). The cover letter, including, inter alia, the rationale for the study and the URL for the online survey, was circulated on 20 March, and the data was downloaded on the evening of 28 March, at which time 64 responses were received. Of the 412 e-mails sent to ACHASM members / contacts, two e-mail addresses 'bounced', 29 were duplicates, and 23 were suppressed as they were invalid, resulting in a net sample stratum of 358, which added to 168, results in a net total of 526, and a response rate of 1.2% (64 / 526). The data was exported in MS Excel and analysed using SPSS to compute primarily frequencies and a measure of central tendency in the form of a mean score (MS) to rank variables.

FINDINGS

In terms of the demographics of respondents, 15.6% were female, and 84.4% were male. The mean age was 48.4 years, the youngest being 26 years and the oldest 70 years. The mean years of construction experience was 20.8, the lowest 4 years and the highest 50 years. Respondents cited 29 occupations - Directors (15.0%), Construction H&S Managers (15.0%), SHEQ / SHERQ / HSEQ (10.0%), Construction H&S Agents (8.3%), and Project Managers (6.7%) predominated. The respondents identified 109 qualifications relative to 9 disciplines. The predominating levels of education (identified by > 10 respondents) were Certificate (22.0%), HND / Adv Dip / BTech (19.3%), M / MSc (15.6%), N Dip. (11.0%), B / BSc (Hon) (11.0%), and PhD (10.1%). The predominating disciplines (identified by ≥ 17 respondents) were H&S (26.6%), Construction Management (21.1%), Civil Engineering (15.6%), and Safety Management (15.6%). Given these demographics, the respondents can in general be deemed experienced and educated.

Respondents were required to rate the South African construction industry relative to 250 construction H&S aspects / parameters in terms of a five-point Likert type scale where 1 = very poor, 2 = poor, 3 = average, 4 = good and 5 = very good. An 'unsure' option was presented as there was a likelihood that not all respondents would have an intimate understanding of all 250 aspects / parameters, which were consolidated from previous studies conducted by the lead author. Table 1 presents the ratings of 34 aspects / parameters in terms of percentage responses and mean scores (MSs) between 1.00 and 5.00, based upon a weighting of the percentage responses.

Due to the 250 aspects / parameters, and page limitations, the discussion is limited, and summarised as follows:

- 5 / 250 (2.0%) aspects / parameters were rated > 3.40 ≤ 4.20: between average to good / good.
- 162 / 250 (64.8%) aspects / parameters were rated > 2.60 ≤ 3.40: between poor to average / average, and
- 84 / 250 (33.6%) aspects / parameters were rated > 1.80 ≤ 2.60: between very poor to poor / poor.

The reason for presenting the 34 aspects is that their MSs are > 3.00, which indicates that in general their rating is above average, as opposed to below average. Notably, no MSs are > 4.20 ≤ 5.00, which would indicate between good to very good / very good. Furthermore, only the top 5 / 250 (2.0%) MSs are > 3.40 ≤ 4.20, which indicates the aspects / parameters are rated between average to good / good - ACHASM, South African Institute of Occupational Safety and Health (SAIOSH), Construction H&S Officers (CHSOs), and Construction H&S Managers (CHSMs) (Contribution to CH&S), and Federated Employers Mutual Assurance (FEM) (Processing and payment). ACHASM and Saiosh are professional associations, construction and generic, respectively. However, Saiosh contributes to construction H&S courtesy of, inter alia, informing her members and accrediting construction H&S continuing professional development (CPD). FEM is the licenced mutual workers' compensation insurance provider for construction.

The next 29 aspects / parameters include the Federated Employers Mutual Assurance (FEM), and Master Builders South Africa (MBSA), and Master Builders Associations (MBAs) (Contribution to CH&S) ranked 6th to 8th, followed by the Construction Regulations (Legislation), tower cranes, H&S representative training, equipment manufacturers e.g., scaffolding (Contribution to CH&S), mobile cranes, H&S induction training, South African Council for the Project and Construction Management Professions (SACPCMP) (Contribution to CH&S), Occupational Health and Safety Act (OHSA) (Legislation), Compensation for Occupational Injuries and Diseases Act (COIDA) (Legislation), first aider training, South African National Roads Agency Limited (SANRAL) (Contribution to CH&S), and plant manufacturers (Contribution to CH&S) ranked 9th to 20th. FEM, the MBSA, and MBAs were recognised for their contribution to construction H&S in the cibd (2009) report. It is notable that the primary legislation applicable to construction, namely the Construction Regulations, the OHSA, and COIDA are rated above average. Then, the inclusion of tower cranes, equipment manufacturers e.g., scaffolding (Contribution to CH&S), and mobile cranes is notable as they represent an important resource, namely plant and equipment. H&S representative training, and H&S induction training represent training, and the latter is critical as it 'sets the scene' on projects. The SACPCMP registers, inter alia, Construction H&S Agents (CHSAs), CHSMs, and CHSOs and has a major responsibility in terms of assuring the competence of such registered persons. SANRAL is responsible for the development and maintenance of road infrastructure and has the potential to influence construction H&S as a major public sector client.

Construction management commitment (Top level), Construction Managers (Top level), Engineering Council of South Africa (ECSA), and CHSAs (Contribution to CH&S), toolbox talks (In general), and South African National Standards (SANS) (Sufficient H&S related standards) are ranked 21st to 26th. Given the role of management commitment to H&S, the inclusion of Construction Managers (Top level) is notable. ECSA registers, inter alia, a range of engineers involved in construction, and in given situations clients are required to appoint CHSAs to fulfil

their H&S responsibilities on projects. SANS standards include SANS 10085 and thus play a major role in H&S.

Client satisfaction, H&S management systems (H&SMSs), administration, personnel hoists, daily H&S task instructions (DH&STIs), Construction Managers (Operational level) (Contribution to CH&S), HIRA, and H&S Representatives (Contribution to CH&S) are ranked 27th to 34th. Client satisfaction (relative to H&S) is notable, however, the MS of 3.05 is barely above 3.00. H&SMSs are critical as administration, and DH&STIs. Construction Managers (Operational level) are responsible for the management of the physical construction process and therefore, directly influence H&S, and H&S Representatives, although a part-time function, is a legal requirement in terms of the OHSA.

Table 1: Rating of the South African construction industry relative to 34 construction H&S aspects / parameters

Aspect / Parameter	Response (%)							
	Unsure	Very poor	Poor	Average	Good	Very good	MS	Rank
Association of Construction Health and Safety Management (Contribution to CH&S)	18.0	0.0	11.5	24.6	29.5	16.4	3.62	1
Federated Employers Mutual Assurance (FEM) (Processing and payment)	27.9	1.6	3.3	24.6	34.4	8.2	3.61	2
South African Institute of Occupational Safety and Health (SAIOSH) (Contribution to CH&S)	18.0	1.6	14.8	18.0	32.8	14.8	3.54	3
Construction H&S Officers (Contribution to CH&S)	8.1	1.6	16.1	22.6	41.9	9.7	3.46	4
Construction H&S Managers (Contribution to CH&S)	6.5	3.2	11.3	30.6	37.1	11.3	3.45	5
Federated Employers Mutual Assurance (FEM) (Contribution to CH&S)	24.2	1.6	9.7	32.3	24.2	8.1	3.36	6
Master Builders South Africa (MBSA) (Contribution to CH&S)	18.0	3.3	8.2	32.8	32.8	4.9	3.34	7
Master Builders Associations (MBAs) (Contribution to CH&S)	20.0	1.7	13.3	26.7	33.3	5.0	3.33	8
Construction Regulations (Legislation)	6.3	7.9	15.9	22.2	36.5	11.1	3.29	9
Tower cranes	17.5	4.8	6.3	38.1	28.6	4.8	3.27	10
H&S representative training	12.9	3.2	16.1	30.6	30.6	6.5	3.24	11
Equipment manufacturers e.g., scaffolding (Contribution to CH&S)	17.2	4.7	9.4	37.5	25.0	6.3	3.23	12
Mobile cranes	14.3	3.2	12.7	34.9	31.7	3.2	3.22	13
H&S induction training	6.5	4.8	21.0	24.2	37.1	6.5	3.21	14
South African Council for the Project and Construction Management Professions (SACPCMP) (Contribution to CH&S)	14.1	6.3	17.2	28.1	21.9	12.5	3.20	15
Occupational Health & Safety Act (Legislation)	6.2	9.2	15.4	27.7	30.8	10.8	3.20	16
Compensation for Occupational Injuries & Diseases Act (Legislation)	10.9	6.3	17.2	29.7	28.1	7.8	3.16	17
First aider training	6.5	4.8	16.1	38.7	29.0	4.8	3.14	18
South African National Roads Agency Limited (Contribution to CH&S)	27.9	8.2	8.2	26.2	26.2	3.3	3.11	19
Plant manufacturers (Contribution to CH&S)	15.6	4.7	14.1	40.6	18.8	6.3	3.09	20
Construction management commitment (Top level)	7.9	6.3	20.6	31.7	25.4	7.9	3.09	21
Construction Managers (Top level) (Contribution to CH&S)	6.3	7.9	15.9	34.9	30.2	4.8	3.08	22
Engineering Council of South Africa (ECSA) (Contribution to CH&S)	19.4	4.8	21.0	21.0	30.6	3.2	3.08	23
Toolbox talks (In general)	6.5	6.5	17.7	38.7	24.2	6.5	3.07	24
Construction H&S Agents (Contribution to CH&S)	7.7	9.2	12.3	36.9	30.8	3.1	3.07	25
South African National Standards (SANS) (Sufficient H&S related standards)	20.0	5.0	15.0	31.7	26.7	1.7	3.06	26
Client satisfaction	6.3	4.8	17.5	41.3	28.6	1.6	3.05	27
H&S management systems	12.7	3.2	19.0	39.7	22.2	3.2	3.04	28
Administration	4.8	3.2	20.6	44.4	23.8	3.2	3.03	29
Personnel hoists	21.3	4.9	11.5	42.6	16.4	3.3	3.02	30
Daily H&S Task Instructions	7.9	3.2	23.8	34.9	28.6	1.6	3.02	31
Construction Managers (Operational level) (Contribution to CH&S)	6.5	6.5	21.0	33.9	29.0	3.2	3.02	32
Hazard identification and risk	6.5	8.1	17.7	35.5	29.0	3.2	3.02	33
H&S Representatives (Contribution to CH&S)	8.1	9.7	16.1	37.1	21.0	8.1	3.02	34

Figure 1 presents the current H&S status of South African construction using Anglo American plc's H&S journey model (Foster and Hoult, 2013). The H&S journey model was adapted for the study as a benchmark tool based on the 'safety maturity model', developed by Anglo America plc to assess the level of compliance and effectiveness with the standards-based safety management system. The model is unique in that it is directly linked to an organisation's H&S management standards and any cultural elements. It has been successfully used by teams of managers, supervisors, and workers to assess the maturity of H&S management systems.

The percentage responses presented above the five stages in the journey are notable, especially relative to 'Basic' (56.4%) and 'Reactive (30.9%). The resultant MS of 1.65 between 1.00 and 5.00, which is ≥ 1.00 < 1.80, indicates the status is between 'Basic' and 'Reactive', and that South African construction is non-compliant. This finding presents an alarming 'perception' relative to the finding that 52.5% of contractors were determined to be H&S non-compliant during visits to 1 415 construction sites by the Department of Labour (DOL) inspectors during a 'construction blitz' (cidb, 2009).

Figure 1: Current H&S status of South African construction

56.4%		30.9%		5.5%		5.5%		1.8%
Basic	→	Reactive	→	Compliant	→	Proactive	→	Resilient
Little interest in H&S – doing the minimum to get by. Exposed to significant H&S issues.		Aware that H&S is an issue but usually responding to issues. Systems are forming, but immature.		H&S is a core part of doing business. Focus is on compliance with systems and processes.		Starting to get ahead of the game – anticipating and preventing H&S issues.		World class H&S performance – creating a process of continuous improvement / innovation.

Table 2 presents the top ten challenges in terms of improving the H&S performance of the South African construction industry in terms of themes and the patterns identified, which are discussed in more detail below. The most frequently identified challenges to improving H&S were lack of leadership and management commitment. Respondents revealed that management often perceives H&S as a financial burden as opposed to an investment. Most of the responses expressed negative sentiments attributed to the absence of managerial accountability and lack of visible leadership in promoting a healthy and safe working environment. Respondents also commented on the ego of the managerial team and referred to Section 8 of the OHSA, which highlights the duties of the employer not being considered.

Respondents reported weak legislative and regulatory compliance, and inadequate enforcement emerged prominently. Respondents expressed frustration over insufficient monitoring and lenient penalties, notably referenced as "R200 penalties as a joke", which respondents considered ineffective. This regulatory gap allows widespread disregard for H&S standards, significantly impeding progress.

Inadequate and ineffective training was frequently emphasized as a critical challenge. Respondents noted the absence of robust training programmes and the lack of ongoing professional development, resulting in a lack of competent and adequately skilled H&S professionals.

Poor H&S culture such as attitudes for prioritising productivity over H&S, was consistently identified. Workers frequently accept unsafe practices due to socio-

economic pressures - job security, while supervisors often ignore H&S protocols, prioritising speed, and convenience over compliance.

Most respondents highlighted that limited funding, and financial constraints impact the implementation of effective H&S measures. Smaller firms and contractors particularly struggle to allocate adequate resources, causing compromised H&S practices.

The inadequacy of proactive risk management strategies was repeatedly cited. Respondents revealed that the nature of HIRAs is superficial and often considered mere administrative tasks for the sake of compliance, rather than critical H&S tools.

Communication gaps arising from language and cultural diversity in South Africa with 11 spoken official languages were emphasized as a serious challenge to H&S compliance. Misunderstandings due to poor communication and the low education status of workers contribute to incidents and non-compliance issues.

Frequent reliance on subcontractors and informal labour arrangements was noted as sources of inconsistent H&S standards and oversight. The nature of the industry is fragmented and hinders uniform implementation of effective H&S practices.

Poor data collection, incident reporting, and monitoring systems emerged as substantial issues. Underreporting and incomplete reporting were frequently highlighted, and this prevent accurate assessments of industry health and safety performance and obstructing targeted improvements.

High unemployment and poverty contribute to unsafe workplace practices as workers often feel compelled to accept working in hazardous conditions due to fear of job loss. This fear also reduces the likelihood of incident reporting, perpetuating unsafe working environments, and limiting opportunities for corrective actions.

Table 2: The top ten challenges in terms of improving the H&S performance of the South African construction industry

Theme	Patterns identified
Leadership and Management Commitment	• Perception of H&S as a cost, not an investment • Lack of accountability and visible leadership • Ego
Compliance and Regulatory Enforcement	• Weak regulatory monitoring and enforcement • Insufficient penalties e.g., ineffective low fines
Education, Training, and Competency	• Absence of robust training programmes • Lack of CPD
H&S Culture and Worker Behaviour	• Prioritising productivity over H&S • Acceptance of unsafe practices due to socio-economic pressures
Financial and Resource Allocation	• Insufficient funding for H&S measures • Financial strain in smaller firms
Risk Management and Planning	• Superficial or administrative approach to risk assessments • Inadequate proactive H&S planning
Communication, Language, and Cultural Barriers	• Miscommunication due to diverse language groups • Cultural differences impacting compliance
Industry Fragmentation and Subcontractor Management	• Reliance on subcontractors resulting in inconsistent H&S standards. • Lack of oversight
Data, Reporting, and Monitoring Issues	• Poor incident reporting and monitoring • Underreporting leading to inaccurate H&S assessments
Socio-economic Factors	• High unemployment and poverty driving acceptance of unsafe work • Fear of job loss reducing incident reporting

DISCUSSION

Given that the South African construction industry was rated below average relative to 34 of 250 (13.6%) construction H&S aspects / parameters, the construction industry can be deemed to have a major challenge in terms of performance. This is underscored by the current H&S status of South African construction, which is between 'basic' and 'reactive' based upon a MS of 1.65, and therefore South African construction can be deemed non-compliant. This finding aligns with the 2009 cidb report, which revealed that less than 50% of the contractors were compliant with the H&S requirements. The reactive approach is no surprise given the 6 May 2024 George building collapse, resulting in 34 fatalities. This was followed by a series of 'blitz' inspections in the region. Furthermore, South African construction industry H&S statistics, inter alia, the fatality rate are the ultimate 'outcome' measure of performance. Clearly, interventions are required.

Although the interventions to improve H&S in the South African construction industry were not presented due to space constraints, they in essence respond to the top ten challenges in terms of improving the H&S performance of the South African construction industry in terms of themes and the patterns identified as presented in Table 2. Improvements are inferred relative to 'leadership and management commitment', strong visible H&S leadership, and management accountability and involvement are advocated. With respect to 'compliance and regulatory enforcement' stricter monitoring and enforcement and effective penalties and legal action are advocated. Accessible and affordable training programmes, and CPD are advocated relative to 'training, education, and competency'. In terms of 'H&S culture and behaviour', promoting H&S-first culture, and encouraging positive behavioural change are advocated. Adequate budgeting for H&S measures, and financial support for small medium enterprises (SMEs) are advocated relative to 'financial and resource allocation'. With respect to 'risk management and planning' thorough risk assessments and proactive planning are advocated. Multilingual training materials, and inclusive communication strategies are advocated relative to 'communication, language, and inclusivity'. In terms of 'Industry and subcontractor management' formalisation of subcontractor practices, and consistent application of H&S standards are advocated. Accurate incident reporting and data analysis systems, and adoption of modern H&S technologies are advocated relative to 'data, reporting, and technology adoption'. With respect to 'socio-economic and labour practices' addressing socio-economic pressures and ensuring fair and safe labour practices are advocated.

CONCLUSIONS

Given the rating of the construction industry relative to 250 aspects / parameters, it can be concluded that the construction industry in general is not committed to H&S. Furthermore, given the current H&S status of South African construction, the construction industry can be deemed non-compliant in terms of H&S. Given that the construction industry in general is not committed to H&S and can be deemed to be non-compliant in terms of H&S, it can be deemed to have a poor H&S culture, which manifests itself in inadequate commitment to H&S. The building collapse in George, South Africa, 6 May 2024, which claimed 34 lives, was the ultimate proof that there is a major problem in South African construction in terms of H&S. Recommended interventions were included in the 'Discussion' section.

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