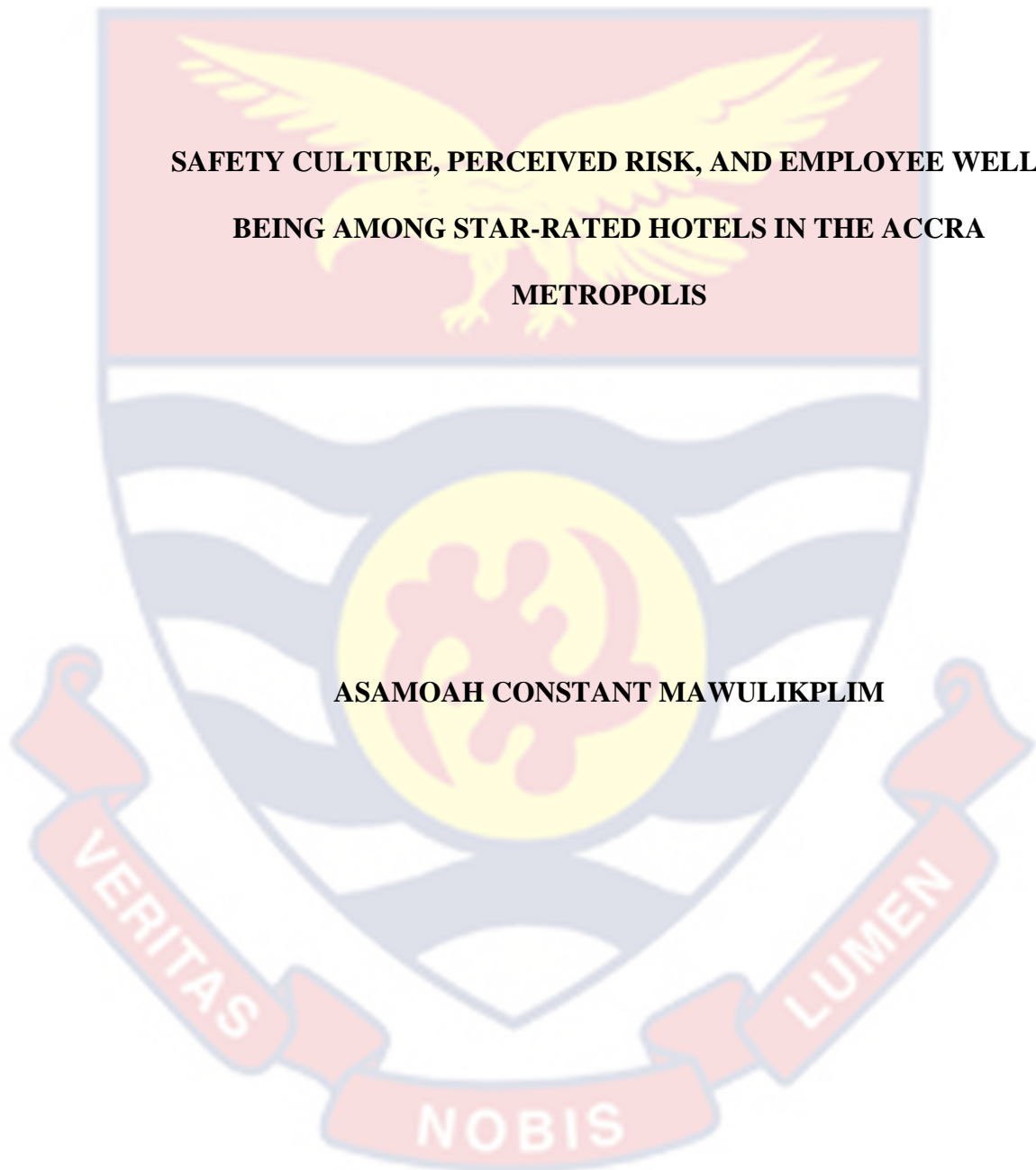


UNIVERSITY OF CAPE COAST



**SAFETY CULTURE, PERCEIVED RISK, AND EMPLOYEE WELL-  
BEING AMONG STAR-RATED HOTELS IN THE ACCRA  
METROPOLIS**

**ASAMOAH CONSTANT MAWULIKPLIM**

2024

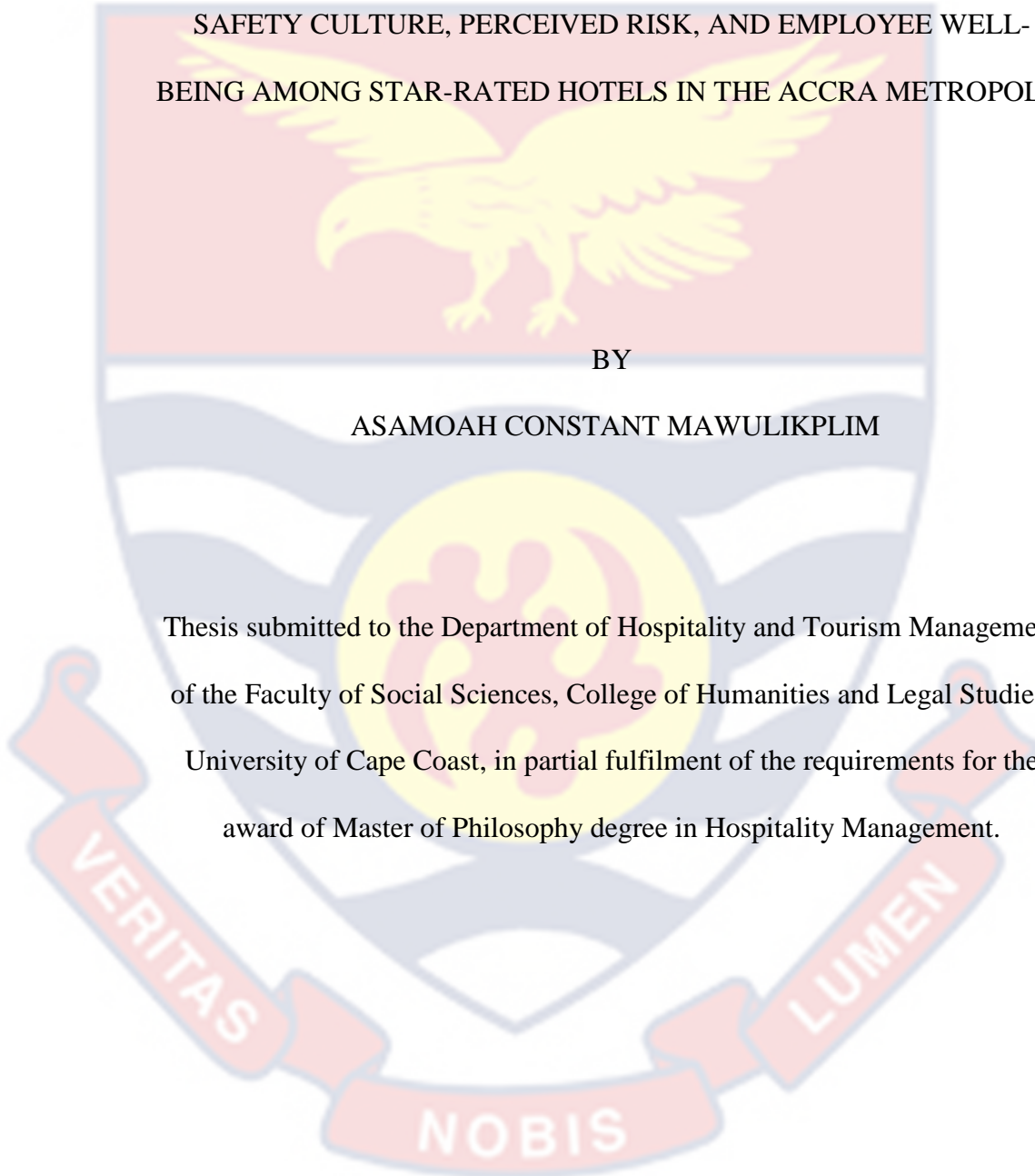
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SAFETY CULTURE, PERCEIVED RISK, AND EMPLOYEE WELL-  
BEING AMONG STAR-RATED HOTELS IN THE ACCRA METROPOLIS

BY

ASAMOAH CONSTANT MAWULIKPLIM

This thesis submitted to the Department of Hospitality and Tourism Management  
of the Faculty of Social Sciences, College of Humanities and Legal Studies,  
University of Cape Coast, in partial fulfilment of the requirements for the  
award of Master of Philosophy degree in Hospitality Management.



MARCH 2024

## DECLARATION

### Candidate's Declaration

I hereby declare that this thesis is the result of my own original research and that no part of it has been presented for another degree in this university or elsewhere.

Candidate's Signature ..... Date .....

Name: Asamoah Constant Mawulikplim

### Supervisors' Declaration

I hereby declare that the preparation and presentation of the thesis were supervised in accordance with the guidelines on supervision of thesis laid down by the University of Cape Coast.

Supervisor's Signature ..... Date .....

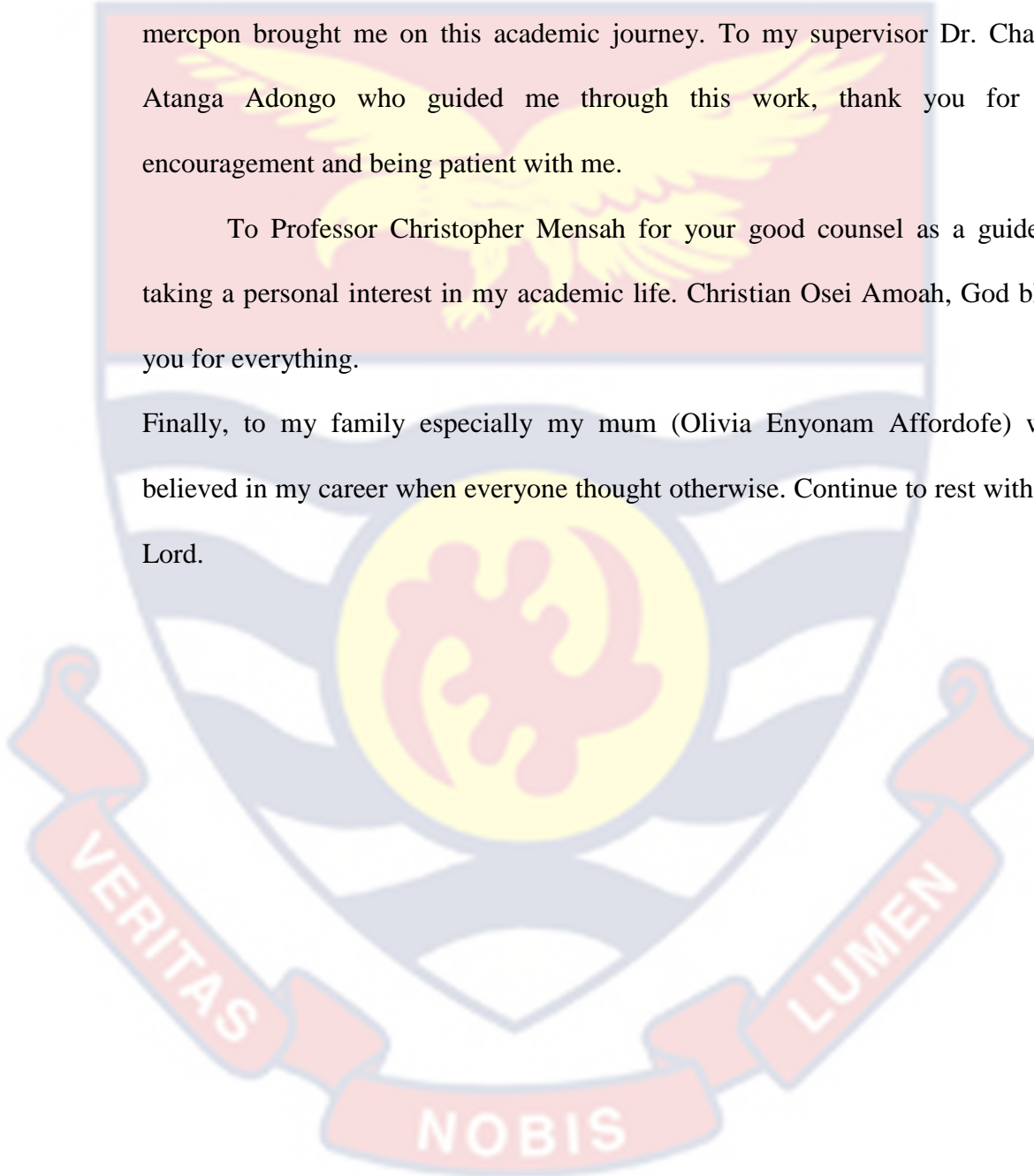
Name: Dr. Charles Atanga Adongo

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To Professor Christopher Mensah for your good counsel as a guide in taking a personal interest in my academic life. Christian Osei Amoah, God bless you for everything.

Finally, to my family especially my mum (Olivia Enyonam Affordofe) who believed in my career when everyone thought otherwise. Continue to rest with the Lord.



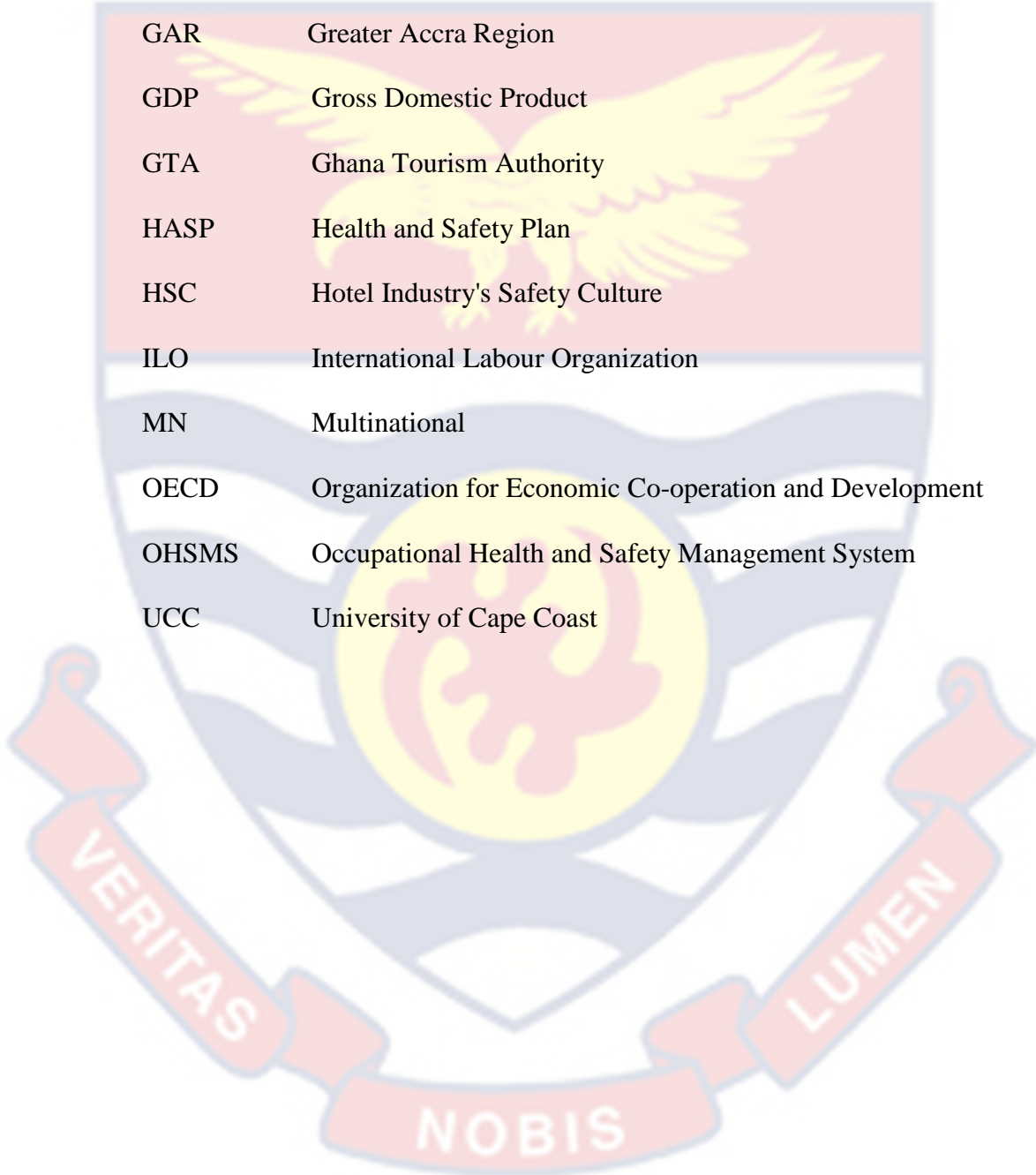
## DEDICATION

To the memory of my beloved mother, Olivia Enyonam Affordofe



**LIST OF ABBREVIATIONS**

AMA	Accra Metropolitan Assembly
EPA	Environmental Protection Agency
GAR	Greater Accra Region
GDP	Gross Domestic Product
GTA	Ghana Tourism Authority
HASP	Health and Safety Plan
HSC	Hotel Industry's Safety Culture
ILO	International Labour Organization
MN	Multinational
OECD	Organization for Economic Co-operation and Development
OHSMS	Occupational Health and Safety Management System
UCC	University of Cape Coast



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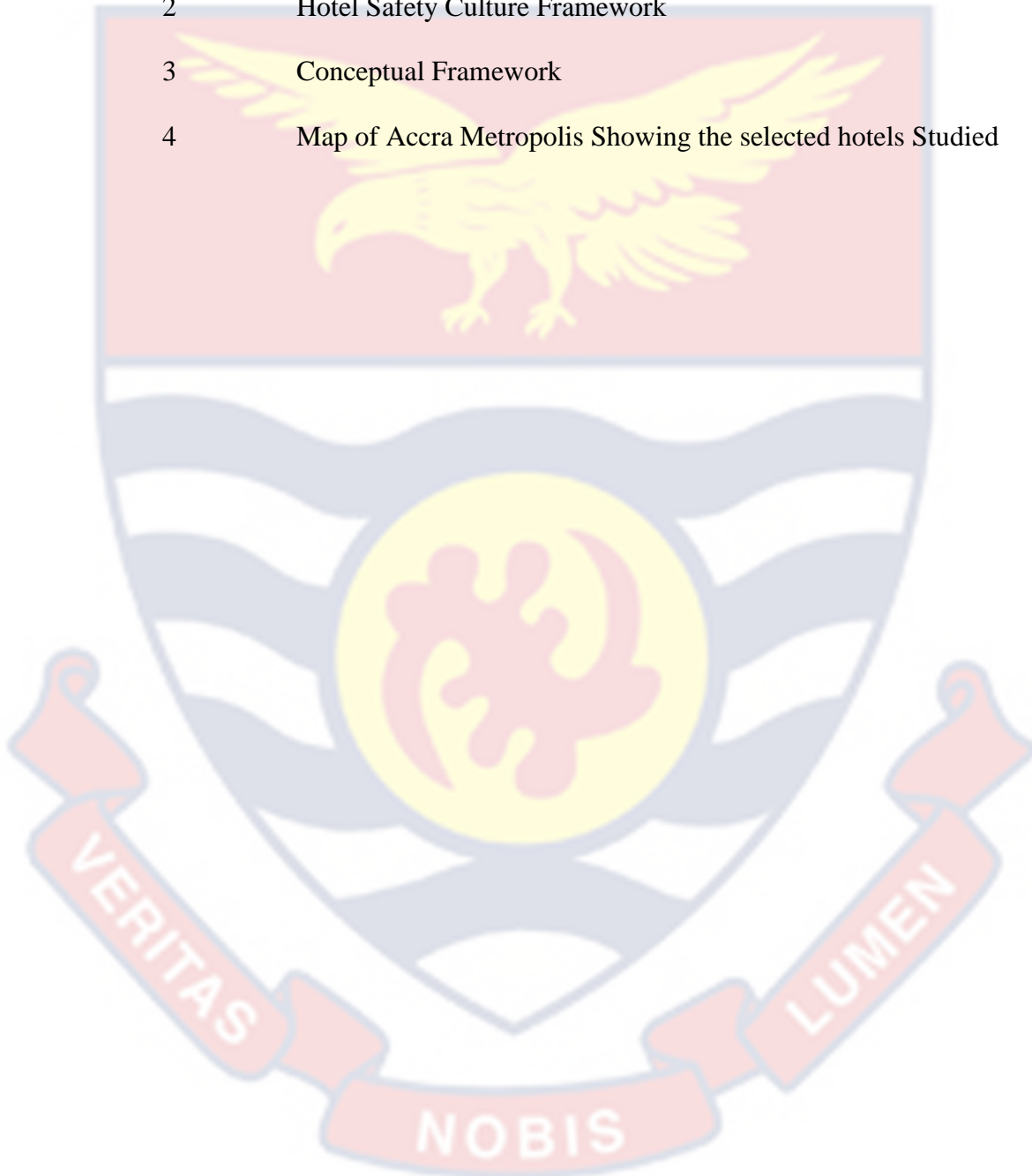


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## ABSTRACT

Hotel employees constitute the backbone of the industry, and their safety and well-being are crucial to maintaining high standards of performance and service excellence. It is also thought that workplace accidents have a significant detrimental effect on employee morale, job satisfaction, and engagement. This study looked at the safety culture, perceived risk, and well-being of employees in star-rated hotels located in the city of Accra. Conveniently, data from 338 hotel employees was gathered utilizing a cross-sectional study approach and a quantitative research design. The data was then analysed using both descriptive and inferential statistics using IBM SPSS version 25. Standard deviations, averages, and frequency tables were among the descriptive statistical presentations. To find out how much of the variance explained was a result of a few important components or dimensions, factor analysis was used. The study's conclusions showed that even so, staff members do have some safety knowledge. They are also worried about the risks associated with their employment, particularly when it comes to using equipment. In summary, it can be concluded that there is little to no relationship between employee well-being and the organization's overall safety culture. Supervision, on the other hand, demonstrated a statistically significant relationship with employee well-being as one of the characteristics of safety culture. Therefore, to improve the wellness of all employees, it was advised that hotel authorities establish an organizational safety culture, with a focus on safety awareness, and make sure that this culture permeates every employee.

## CHAPTER ONE

### INTRODUCTION

#### Background to the Study

The hospitality sector plays a vital role in the economic and social development of many countries, offering accommodation, food, and services to travelers and tourists (Zopiatis, Constanti & Theocharous, 2014). The sector offers employment opportunities and generates revenue, particularly during the summer months (peak periods). It also fosters innovation and the spirit of entrepreneurship, helps to foster competitiveness, and lays the groundwork for future firms (Ampofo, 2020). For instance, the industry has employed over 15 million people in the United States in various roles (U. S. Bureau of Labour).

The industry's contribution to the Gross Domestic Product (GDP) and the creation of jobs cannot be disregarded. An estimated \$3.1 billion was contributed to the GDP of Ghana by the tourism and hospitality sector in 2021, and an estimated \$4 billion is predicted to be contributed by 2025 (Ghana Tourism Authority, 2022). Within this sector, star-rated hotels represent a significant segment, providing services and memorable experiences to their guests (Tefera & Migiros, 2019). The success of hotels heavily relies on their ability to maintain high standards of service quality, guest satisfaction, and operational efficiency.

However, achieving these objectives goes beyond just meeting the needs of the guests. The safety and well-being of the hotel employees, who are the backbone of the industry, play a pivotal role in sustaining a high level of performance and service excellence (Singh, Shaffer & Selvarajan, 2018). It is

believed that an occurrence of workplace accidents has a considerable negative impact on employee morale, job satisfaction, and work engagement (Kaynak, Toklu, Elci, & Toklu, 2016).

Safety culture, a critical component of organizational culture, has gained increasing attention in recent years across various industries, particularly in hotels due to increasing incidents of hazards across different departments although not comparable to construction and manufacturing industries (Kuo, Cheng, Chang & Ying, 2020). Statistically, workplace accidents in the hotel sector cannot be compared to those of the manufacturing, construction and other industries; however, such incidents are on the rise in hotels. According to the Bureau of Labour report (2021), 245 hotel sector workers passed away from work-related injuries in 2018, a considerable rise from the 182 in 2017.

When referring to star-rated hotels, the term "safety culture" refers to the group's shared safety-related ideals, attitudes, beliefs, and practices. For both guests and staff, a safe and secure environment is created when there is a strong emphasis on safety at all levels of the hotel, from top management to front-line staff. Human error is commonly to blame for workplace mishaps (Fleming & Lardner, 1999), but many firms do not offer thorough safety training. Promoting a culture of safety at work or changing people's attitudes, which affect their behavior, can both reduce workplace accidents. According to Eckenfelder (2000), a person's values are significantly influenced by his or her beliefs. As a result, there may be a greater understanding of workplace safety. According to study by Hofmann, Burke, and Zohar (2017), comprehensive pre-employment and on-the-

job training in work safety, including instruction in safety awareness and first aid, is essential for preventing and/or mitigating workplace accidents. The hotel job is acknowledged as a high-risk occupation, involving various dangers that workers encounter while performing their duties (Xie et al., 2020). These risks stem from diverse sources, including human factors, equipment, management practices, and the environment, posing threats to personal, property, and psychological safety (Basha & Maiti, 2013). According to Ivanov and Stavrinoudis, (2018) risk factors can be externally driven; these externalities include natural disasters and refugee crises. All of these variables influence employees' perceptions of their workplace dangers. However, the hotel sector still lacks enough information and efficient management techniques to handle the perceived job risks of employees (Xie et al., 2020).

Risk perception refers to an individual's personal and subjective psychological feeling of danger associated with an event (Gstraunthaler & Day, 2014). This involves an estimated probability of adverse consequences following the occurrence of an anticipated event (Karatepe & Sokmen, 2006). In this context, perceived risk refers to the subjective assessment and psychological experience of potential hazards or dangers that an employee believes may encounter in their work environment (Basha & Maiti, 2013; Nordfjærn & Rundmo, 2010). This perception can be influenced by various factors, including the nature of job tasks, workplace conditions, interactions with guests, and organizational safety culture. Hotel employees interact closely with guests, each other, and various elements within the hotel setting. As a result, they are exposed



to a range of potential risks that may affect their well-being, health, and safety. These risks could include physical hazards, such as slip and fall incidents or lifting heavy objects, getting in contact with harmful chemicals as well as psychosocial risks, such as dealing with difficult customers or managing stressful situations. The perception of risk is highly subjective and can vary among individual employees based on their experiences, personal characteristics, and job roles. Some employees may feel more vulnerable to certain risks due to their specific tasks or responsibilities, while others may view their work environment as relatively safe.

Conversely, a weak or negative safety culture can have adverse effects on employee well-being. Employees may feel anxious, uncertain, or disengaged if they perceive that their safety concerns are not adequately addressed or if they are not equipped or trained to do their jobs in a safe manner. The physical aspect of safety culture also influences well-being, because there is a greater chance of accidents, injuries, and health problems in a dangerous work environment. On the other hand, a safe and well-organized workplace promotes physical health and reduces the likelihood of work-related injuries (Krekel et al, 2019; Zou, 2011). Levy, Herb, Frantz, and Carr (2012) define employee well-being as all aspects of one's working life, from the quality and security of the actual physical environment to how employees feel about their work, their workplace, the atmosphere at work, and work organization. This definition makes it difficult to explain the well-being of an employee.

In addition, two important, yet distinct perspectives have been utilized to define wellbeing. According to the hedonic approach, happiness defines wellbeing (Ryan & Deci, 2001). According to this perspective, the importance of three elements is highlighted: contentment with life, pleasure, and the lack of sadness (Diener, Sapyta, & Suh 1998). The pursuit of virtue is the surest path to happiness, claims the second perspective, often known as the eudaimonic perspective (Dewe and Cooper, 2012). According to this viewpoint, happiness is equated with self-actualization. According to the eudaimonic perspective, involvement in endeavors that advance humankind is essential to happiness (Ryff & Keyes, 1995). These activities include those that support individuality, development, acceptance of oneself, finding one's life's purpose, mastery, and positive relationships.

Given the strong link between the general health of an individual and wellbeing and their performance and productivity at work, an organization's safety culture and values should prioritize fostering and promoting employee welfare (Haddon, 2018). Despite many good corporate attitudes regarding employee wellbeing, firms historically have given less importance to enhancing employee wellbeing than to lowering employee stress (Hone, Schofield & Jarden 2015).

### **Problem Statement**

About 80% of all accidents that occurs at the workplace is a result of unsafe acts, not unsafe conditions (Shin, Lee, Park, Moon, & Han, 2014). This explains the reason why hotels must prioritise safety culture by investing in their employees on safety issues and ensuring employee well-being, which has direct

consequences on employees' performance. Scientific studies in safety culture, employee safety, and employee well-being are not new. Considering how frequently accidents occur in these sectors, the majority of this research have, to yet, mostly concentrated on manufacturing and construction (Misiurek & Misiurek, 2017; Zhou, Goh, & Li, 2015), neglecting sectors like the hotel.

A lot has been done on employee safety knowledge, however, most of these studies only advanced our understanding of understanding of food safety (notably, Baser, Ture, Abubakirova, Sanlier & Cil, 2017; Rebouças et. al., 2017; Tuncer & Akoğlu, 2020). Such studies have been clear on the link between attitude and knowledge about food safety (Baser et. al., 2017), the association between food safety knowledge, practices, and attitude of food handlers (Temeche, Neela & Dibaba, 2016) and have identified that food safety knowledge is higher among permanent workers than seasonal workers (Eren, Nebioğlu & Şık, 2017). Meanwhile, safety issues in the hotel industry go beyond food, therefore, it is imperative to look at employee safety knowledge, holistically, among star-rated hotels, which has hardly been explored by researchers.

Numerous hotels experience low productivity, high employee turnover rates, and unsatisfactory work environments due to the high number of risks that employees perceive to be present at work (Chen, Chang & Wang, 2018). This makes it difficult for the industry to discuss the issue of sustainability in development. It is therefore important for employees' perceived risk to be assessed. Despite the negative consequence of risk perception of hotel employees on productivity, very little is known about their perceived risks. In earlier

research, hotel employees' perceived risk was primarily examined in connection to particular groups (Sönmez, Apostolopoulos, Lemke, Hsieh & Karwowski, 2018), positions (Krause, Scherzer & Rugulies, 2005), risk factors (Bach & Pizam, 1996). The moderating effect of stressors that present challenges and perceived danger (Xie, Zhang, Chen & Morrison, 2023) and gender, racial, and kind of injury differences in occupational injury (Buchanan et al., 2010) have been examined. However, researchers have barely focused on perceived risk among star-rated employees.

Additionally, there is a link between employees' well-being and their productivity and performance at work. Thus, research on employee well-being has revealed several predictors and several moderators of antecedent-turnover relationships (e.g., Felps, Mitchell, Hekman, Lee, Holtom, & Harman, 2009; Griffeth, Hom, & Gaertner, 2015; Hom, Mitchell, Lee, & Griffeth, 2012). However, the organizational safety culture and employee well-being among star-rated hotels are less clear. In the context of Ghanaian hotels, a common industry problem that requires more attention is occupational stress among hotel employees (Dotsey, 2018). Research on how hotel safety culture affects professional outcomes like staff well-being is developing (Nien et al., 2020). Therefore, the purpose of this study is to investigate the safety culture, perceived risks, and staff well-being in Accra's star-rated hotels.

### Objectives of the Study

The general objective of the study is to assess the relationship between safety culture, perceived risk, and employee well-being among Star-Rated Hotels in the Accra Metropolis.

The specific objectives of the study were to;

1. Assess the safety knowledge of hotel employees.
2. Examine the safety culture of hotels.
3. Examine hotel employees' perceived risk.
4. Assess the relationship between safety culture of hotels and employee well-being.

### Research Questions

The study sought to answer the following questions:

1. What is the level of hotel employees' safety knowledge?
2. What are the safety cultures of hotels?
3. What is the perceived risk of hotel employees?

### Hypothesis

H<sub>0</sub>: There is no statistically significant relationship between safety culture of hotels and employees' well-being.

H<sub>1</sub>: There is a statistically significant relationship between safety culture of hotels and employee well-being.

### **Significance of the Study**

This study is justified as it has the potential to make significant contributions to practice, policy, strategy, and the existing body of knowledge.

The study advances insights in literature by offering insights into safety knowledge, safety culture in hotels, the perceived risk among hotel employees, and their well-being in star-rated hotels in Ghana, which is yet to receive empirical studies. For practice, it will offer recommendations to major stakeholders such as hotel managers and employees to guide safety at the workplace. The results of this study are anticipated to provide valuable insights that can inform practical interventions and policies to promote a positive safety culture and enhance employee well-being in star-rated hotels. Ultimately, such insights are vital for fostering a safer and more supportive work environment, reducing accidents and injuries, and boosting the Accra Metropolis's hospitality sector's overall efficacy.

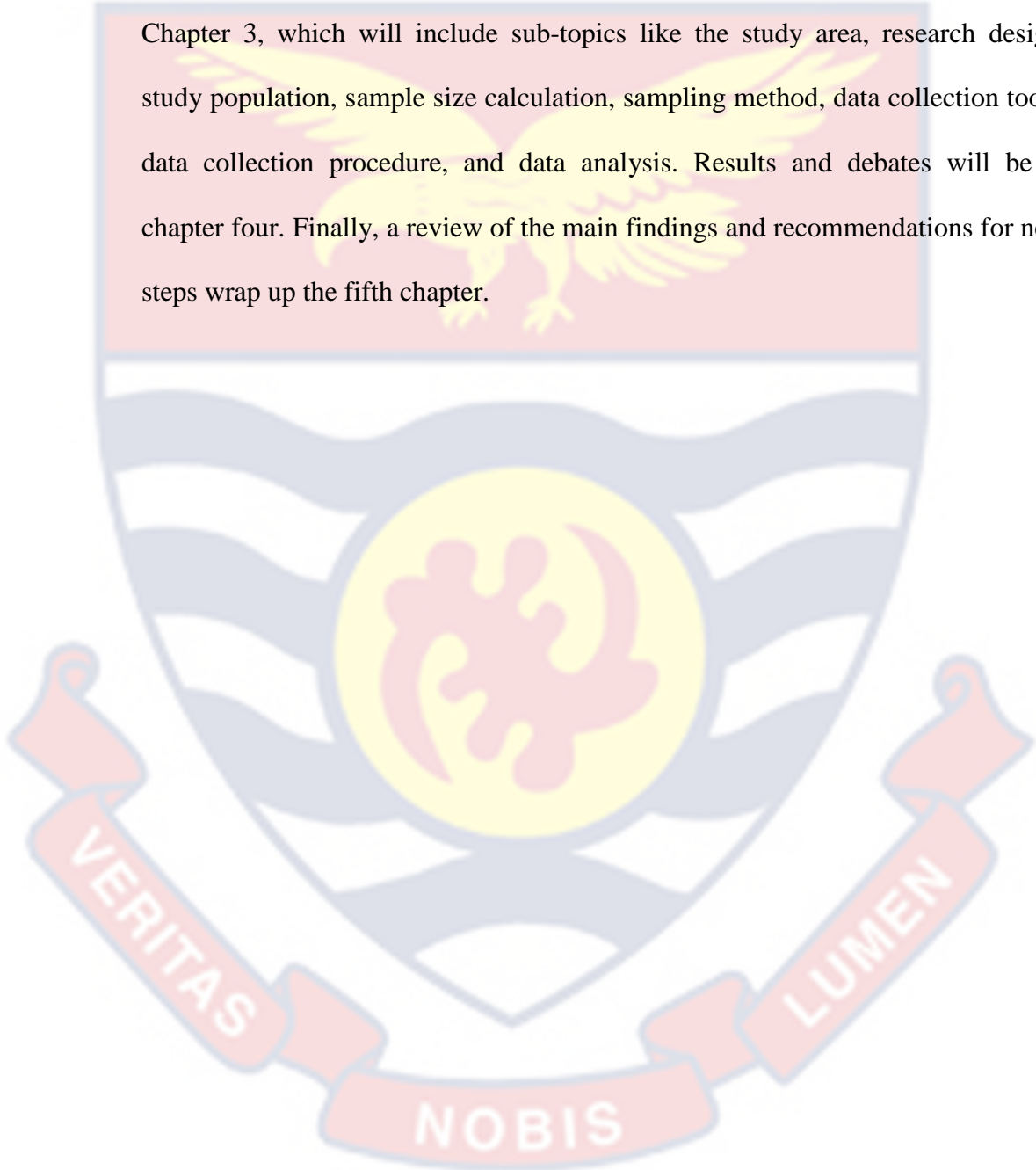
### **Scope of the Study**

This study examines the organizational safety culture and employee well-being in star-rated hotels, although it will only include hotel employees in the Greater Accra Metropolitan Area.

### **Organisation of the Study**

The study will be divided into five chapters. The introduction, which comprises the following, will be covered in the first chapter such as the study's history, a definition of the problem, its objectives, a set of research questions, its

importance, and how it was organized. The study's second chapter will analyze pertinent research and include a discussion of the key ideas of organizational safety culture and employee welfare. The methodology will be the main topic of Chapter 3, which will include sub-topics like the study area, research design, study population, sample size calculation, sampling method, data collection tools, data collection procedure, and data analysis. Results and debates will be in chapter four. Finally, a review of the main findings and recommendations for next steps wrap up the fifth chapter.



## CHAPTER TWO

### LITERATURE REVIEW

#### The Concept of Safety Culture

A 1987 report by the OECD Nuclear Agency on the Chernobyl tragedy introduced the idea of safety culture (Van Nunen, Li, Reniers & Ponnet, 2018). The concept of safety culture has evolved into a framework for interpretation and a crucial tool for comprehending the covert operation of a company's health, security, and safety management. Employee perceptions of their company's overall safety as well as its ongoing performance in terms of health and safety are thought to be influenced by the "safety culture," a subset of organizational culture. A subculture of corporate culture known as "safety corporate culture" describes the traits of people, jobs, and organizations that have an impact on and influence health and safety. Although there is no clear definition of a safety culture, Sujová and Cierna (2016) claimed that it is usually understood to be a dedication to safety that is given top priority in a business. A safety culture develops as a result of an acceptance of high-risk and a blame-free environment in which errors are reported without repercussions. Simultaneously, it is a result of the expectation of collaboration to find primary solutions to vulnerabilities and the willingness to direct resources toward safety concerns (Nordlöf, Wiitavaara, Winblad, Wijk & Westerling, 2015).

The desired safety culture is defined by behaviors that promote safe, high-quality, and marketable products. It is always a byproduct of management and employee collective action in the organization. Members repeatedly act and speak in a way that seems "natural," obvious, and undeniable, and this results in the



building of a certain version of risk, danger, and safety, which is then duplicated (Kuznetsova et al., 2018). All of the professional organization's members will be kept safe, and it will also help keep the local and wider community safe.

According to Petitta, Probst, and Barbaranelli (2017), safety performance is regarded to be significantly predicted by safety culture in particular. If internal safety values and norms are sufficiently strong, we can describe it as a process of "value internalization" that results in a sense of personal and collective safety and security. The necessity, practicability, and effectiveness of controls define the core belief of a strong safety culture. It can be defined as a collection of attitudes and risk perceptions that motivate people to believe in and trust safety measures and their company's competitive performance. Thus, the level of safety within an organization varies and is contingent upon the degree to which the culture and structure promote and facilitate it (Noort, Reader, Shorrock & Kirwan, 2016).

### **The Hotel Industry's Safety Culture (HSC)**

The main objectives of establishing a safety culture, according to Hofmann and Rüsçh (2017), are to lower occupational injuries and control risky conduct. Businesses that value safety, according to Morrow et al. (2014), work to develop plans that encourage employees to be aware of potential workplace dangers and improve their safety performance. Establishing a safety culture is a successful crisis management strategy because it enables businesses to significantly improve their safety performance (Manning, 2018). The idea of safety culture has been the topic of numerous research, which have gone into great detail. Researchers have also created a variety of frameworks and

methodologies for the safety culture hypothesis. The "Hotel Safety Culture" concept, put forth by Kuo et al. (2020), divides safety culture into five interdependent categories: organizational factors, environmental factors, psychological factors, and behavioral aspects. These divisions come together as a single category. Thus, these criteria must be upheld to ensure a safe workplace.

### **Training in Safety and Risk Assessment**

Procedures for safety training and risk assessment are among the safety culture functions that Kuo et al. (2020) said should be included. Approximately 90% of workplace accidents are the consequence of human error, according to Kalteh et al. (2019). Ignoring thorough safety training and risk assessment is one of the mistakes that firms make most frequently (Nouaimeh et al., 2018). Organizations should implement a safety culture targeted at lowering workplace accidents to raise employee knowledge of safety issues. The most crucial element is safety training, which entails creating courses that show employees how to behave in hazardous workplaces and improve their safety culture (Rakowska & Szubielska, 2013). Developing a culture of safety can also be an effective risk management strategy. Through the measurement, diagnosis, and development of the hotel's safety culture, risk assessment enables hotels to improve their safety performance (Kalteh et al., 2019). To create a safety culture, the hotel must also understand how risk perception is managed at work (Vierendeels et al., 2018).

## Safety Psychology

Because psychological factors are an unobservable condition distinct from information, rules, abilities, and individual perception, psychology surveys are required to evaluate a person's safety values. Three measures of safety psychological variables have been developed using the Kuo et al. (2020) paradigm. When assessing employee qualities like safety knowledge, adherence to safety laws, and attitudes toward safety, these psychological aspects are taken into consideration (Vierendeels et al., 2018).

The phrase "safety knowledge" describes a person's safety-related information, convictions, experiences, aptitudes, and recollections. Employees need to have a solid understanding of safety to be able to identify potential dangers at work and work safely to increase productivity. Employee education regarding the safety measures in place to regulate them is another purpose of safety knowledge (Senya, 2017). The performance of their assigned safety and health obligations in their daily operations should also demonstrate to employees that they are aware of the organization's specific safety standards (Manduku, 2015). These safety regulations include reporting events, illnesses, injuries, and concerns to others, creating a useful safety report, and participating in incident investigations.

Another aspect of psychological elements that may offer further details regarding the safety management system at all levels is employee views and attitudes toward safety (Tam & Fung, 2012). Numerous research on risk attitude and perception have shown that psychological factors have a big impact on how employees view hazards. Employees' perceptions of workplace safety and health may include risk categories and their seriousness, the standard

of working conditions, management commitment to and responsiveness to safety procedures, and mechanisms for managing safety issues, according to Beus, Dhanani, and McCord (2015).

### **Employee Safety Knowledge**

Profound understanding of employee knowledge within the workplace is a pivotal construct for organizational productivity and workforce continuity (Beazley, Boenisch, & Harden, 2002). Undeniably the intersection of safety practices, policy implementation and employee's hands-on exposure establishes the foundation for a proficient structuring of safety knowledge. Travis, Sriramarao, Cardona, Steer, Kennedy, Sreevatsan, & Murtaugh, 2014). Safety knowledge refers to employees understanding of safety processes and governing regulations within their organization while safety performance denotes the application of experiential knowledge in practice (Fernandez – Mniz, Montez-Peon & Vaquez-Ordas, 2012)

James et al., (2017) reiterates that a decrease in safety performance often results from limited knowledge or awareness of safety procedures. The importance of effective communication of safety protocol, standard practices and training is hence underscored not only for ensuring employee safety, but also for driving optimal productivity and organizational success.

The integration of relevant technical skills with safety knowledge has a significant impact on an employee's ability to successfully engage with and navigate, potentially hazardous situations. Such an approach fosters a healthy

culture of risk-awareness and act as a springboard for cultivating positive work ethics and behavior amongst employees (Amalberti, 2013). Kark & Carmeli (2009) employ an analytical approach, contending the necessity for business leaders to consider psychological factors contributing to safety performance. The nexus between safety knowledge, level of work-related stress, and the extent to which the latter influences is utilized cannot be overlooked.

Likewise, spotlighting the significance of adopting occupational health and safety management. In this way, organizations can ensure that employees are well- equipped to handle safety-related situations at work following knowledge assimilation regarding potential risks. Establishing that improving employee safety knowledge does also organizational integrity, the lasting impact of safety training methodology and tools such as Augmented Reality (AR) present organization with opportunities to facilitate more efficient ways to deliver and manage safety training. The dissemination of safety knowledge, thus, needs to be underpinned by practical innovation for maximum effectiveness.

Therefore, safety knowledge is an essential component of any organization that value its workforce and strategic success. While traditional means of disseminating safety information still holed considerable value, evolving with technological advancements and psychological understanding is fundamental. Establishing a systematic approach to safety knowledge integration can act as a strategic lever, advancing organizational progression while ensuring a safe motivated workforce. The assimilation of safety knowledge serves the dual

purpose of reforming organizations for the better and creating safer environments for employees.

### **Organizational Safety**

The organizational domain of safety, according to Kuo et al. (2020), pertains to perceptual components including safety monitoring, commitment, and reward and punishment inside an organization. To promote a safety culture of awareness, a trustworthy safety management system must be implemented, and supervisors must confirm that safety procedures are being followed appropriately (Srivastava, 2017). The procedure that guarantees the workplace's continued safety is safe employee supervision. Hotel managers and supervisors are essential in fostering a certain safety culture through the implementation of workplace injury prevention initiatives.

### **Protection of the Environment and Communication (Safety Management)**

Safety management is commonly defined as the application of a set of rules, procedures, regulations, or processes that safeguard personnel from the negative effects of harmful activities, practices, products, or services. There are no explicit safety management rules. These are always situational. Rules that apply in one scenario may not apply in another. For these reasons, it is critical to first understand the nature of risk and then take appropriate action. Sidorov, Beregovaya, and Khanzhina (2016) defined occupational safety management as "a task-oriented process for identifying, establishing, and maintaining a state of

work environment free of hazardous and damaging variables, or whose influence does not exceed set limitations."

The hotel's safety is critical to protect both personnel and visitors from unanticipated circumstances. A strong safety staff is essential to work to guarantee the hotel's guests are safe. Haas and Yorio (2016) define safety management as a structured and codified system for preventing risk and injury; this system includes policies, procedures, training, instructions, and resources. Hailu and Nigatu (2015) in their study cited the work by Sloan (2007) who recognized four stages in the process of safety management:

- (1) Identify dangers;
- (2) Develop a mechanism for hazard control
- (3) Implement the chosen approach; and
- (4) Monitor and adjust as necessary based on the outcomes.

According to Tak (2016), safety audits and workers can be used to assess safety management systems. A significant safety issue with the safety environment, safety management, and employee safety behavior is that these issues are frequently overlooked. Meanwhile, the hotel sector is a service-based industry, which emphasizes the critical relevance of behavior-based safety management. Lee, Back, and Chan (2015) added further that behavior-based safety management is a bottom-up strategy that should be viewed as a continuous process. Typically, in safety management, the primary focus is on the safety-related behaviors of frontline staff. When upper management becomes aware of any flaws in risky practices, they take preventative measures. Thus, the practice of

safety management begins at the ground level. Financing safety or any other decision requires an understanding of organizational structure.

Sloan (2007) however stated that safety management is not involved in financial decisions and requires top-level commitment. As such, he outlined four rules as guiding principles for the safety management process:

- (1) It requires line supervisor involvement,
- (2) It requires limited accounting involvement,
- (3) It requires top-management commitment, and
- (4) It requires monitoring feedback from first-line and middle-level management (Sloan, 2007).

According to some, creating a safety management system is necessary to guarantee a risk-free working environment. Due to dangerous and stressful working conditions, there are a lot of workplace fatalities and injuries (Sönmez et al., 2017). As a result, creating a safe workplace is regarded as the most important matter, especially in the hotel sector. The workplace in the hotel industry is characterized by long hours and significant workload stress. Additionally, some job responsibilities necessitate the use of chemicals and sharpening tools, which increases the risk of injury and danger for employees (Srivastava, 2017). Environmental elements in the Kuo et al. (2020) model include a safety environment and safe communication. Hotel managers are responsible for keeping their staff members informed of any potential risks they may face while performing their duties (Glendon et al., 2016).



Additionally, management should educate employees about safety culture by identifying risky situations, taking appropriate action, and providing them with clear guidelines for safe behavior. On the other hand, when it comes to safety communication, managers must pay close attention to the ideas and worries of their staff (Suhanyiova et al., 2016). To improve workplace safety and prevent accidents and diseases, employees should also exchange ideas and information. Hotel management can also set up programs like a safety and health committee and health suggestion money to encourage staff to voice concerns about potential workplace risks and to communicate openly. The safety program and topics relating to workplace safety will thus be thoroughly explained to employees (Kuo et al., 2020).

### **Employees' Safe-Working Practices**

Like any other industry, the hospitality industry should educate staff members about potential security threats and give them the tools they need to take charge of their safety (Tarlow, 2014). A variety of measures people take to protect themselves and maintain a safe workplace are referred to as safety-related behavior, according to Ambardar (2015). These steps include procedures to ensure that workers obey established safety regulations and continuing employee behaviors that raise the bar for workplace safety. Participating in volunteer safety committees is one of these activities, as is offering concepts and recommendations for instruments and solutions to assist the organization in enhancing its safety culture. A scale of safe-related behavior was conceptualized by Tang and Tsaur (2016), focusing on both the compliance and participation components of safety.

Between safety participation and safety compliance, there are important differences. According to Bandara et al. (2020), safety compliance behavior is the collection of fundamental principles that an organization requires of its workers to maintain a safe working environment. An example of this would be the operating instructions for a piece of kitchen equipment. However, safety participation behavior refers to a person's attitude toward safety, which indirectly aids in the creation of a secure workplace.

Overall, these recommendations for safety culture can assist managers with raising employee knowledge of safety issues and promoting a consistent safety message throughout the hotel, especially during this COVID-19 period. These ideas will aid in the development of a safer workplace, even if developing this culture will take time and demand that staff members take the time to understand and abide by the guidelines (Robina-Ramrez et al., 2021). As a result, research shows how important safety culture is for improving workers' safety performance.

### **Hotel and Hospitality Industry Safety Standards**

Designers, universities, research institutes, standardization bodies, labor and health inspectors, architects, manufacturers, suppliers, legislators, and parliamentarians all use occupational health and safety plans to ensure the health and safety of their workers, employers, employees, and their organizations (Kwahar & Iyortsuun, 2018). It is a framework that makes it possible for a business to regularly recognize and control health and safety hazards, lower the probability of mishaps, assist the business in complying with pertinent health and

safety legislation, and continuously improve its operations. An occupational health and safety strategy is therefore the foundation for all subsequent health and safety measures. It is a comprehensive approach to identifying risks, eliminating them before they result in illnesses or accidents, and managing emergencies (Ismail et al., 2019).

Each workplace benefits from having a well-designed health and safety program. Each employee and subcontractor connected with the services being provided at the site of operations is expected to maintain minimal levels of personal protection and follow safe operating procedures, according to an organization's Health and Safety Plan (HASP) (Abune, Merga & Mengiste, 2020).

The hospitality business, specifically hotels, is related to chemical, biological, psychological, ergonomic, mechanical, and electrical dangers, according to HASP. The International Labour Organization (ILO) developed several international labor standards to ensure employee safety and health in the hotel, catering, and tourism industries (ILO, 2014). These include the following:

- C155 - Occupational Safety and Health Convention, 1981 (No. 155)
- R164 - Occupational Safety and Health Recommendation, 1981 (No. 164)
- C187 - Promotional Framework for Occupational Safety and Health Convention, 2006 (No. 187)
- R197 - Promotional Framework for Occupational Safety and Health Recommendation, 2006 (No. 197)
- C161 - Occupational Health Services Convention, 1985 (No. 161)
- R171 - Occupational Health Services Recommendation, 1985 (No. 171)

These safety standards and conventions have been ratified and are being enforced by different countries. However, Ghana has yet to ratify and enforce these safety standards. At the national level, each country has its own Occupational Health and Safety Management System (OHSMS). For instance, Portugal has the following Certifications and OHS Standards:

- ISO 45001:2018 - Occupational Health and Safety Management Systems;
- ISO 26000:2010 - Social Responsibility (guidelines);
- SA8000:2014 - Social Responsibility Management;
- NP 4552:2016 - Reconciliation between work, family, and personal life;

The IS-15001:2000 INDIAN STANDARDS on Occupational Health and Safety Management Systems - Specifications and Use are also published in India and are followed there. Additionally, the nation conducts investigations, analyzes all incidents that happen despite safety management programs, and periodically assesses the efficiency of the safety management program (ILO, 2014).

According to Beach, Cowan, Mulder, and O'Brien (2020), Industry uses a method called the hierarchy of hazard control to lessen or completely eliminate risk exposure. It was first described by Work Safe Australia (1996). Many safety organizations support a widely used system. Industrial managers are taught this idea to promote it as a normal operating procedure at work. This system is illustrated using a variety of images, most typically a triangle. Elimination, substitution, engineering, administrative controls, and personal protective

equipment are all included in the hierarchy of hazard controls (Senya, 2017).



**Figure 1: Hierarchy of Hazard Controls**

Source: Senya (2017)

Employers are required to ensure that employees complete a basic course in occupational health and safety awareness as soon as it is practical under the occupational health and safety awareness and training rule (Dabso et al., 2020). To keep track of the training that employees and other supervisors have received and to be able to provide written proof of completion to employees or other supervisors upon request, it is required that supervisors complete a basic course in occupational health and safety awareness.

Workers in nations like Ghana, where the labor force is expanding quickly and the informal sector is growing faster than the formal sector, have historically

fought for job security while ignoring the need to promote work-life quality. This is even though having a safe and healthy workplace is a human right and investments in occupational health and safety lead to better working conditions.

Workers in nations like Ghana, where the labor force is expanding quickly and the informal sector is growing faster than the formal sector, have historically fought for job security while ignoring the need to promote work-life quality. This is even though having a safe and healthy workplace is a human right and investments in occupational health and safety lead to better working conditions. The primary objectives of the Act's provisions are to improve worker welfare, health, and safety to par with internationally accepted standards. To promote the efficient use of human talents and consequently increase production, encouraging employee wellbeing and a safe work environment are the definition of occupational health and safety activities given by the Act (Siaw & Siaw, 2021). In spite of Ghana's lack of a national policy for occupational health and safety, the country's Labour Act, 2003 (Act 651) does have provisions for these matters. Employees must follow the employer's instructions while using any safety equipment given by the employer to keep a secure and wholesome workplace. According to Adanse, Yamga, and Atinga (2017), it is generally acknowledged that developing nations like Ghana lack adequate policies to safeguard the health and safety of their workforces.

In general, the hospitality sector employs the most youthful and inexperienced workers (ILO, 2014). The hotel and entertainment sectors make up a considerable component of the GDP of any nation. Any nation's economy

benefits greatly from the employment generated by these sectors, which hire direct workers, part-timers, and contract workers. The hospitality business must keep up with the pace, which may be extremely quick and frequently necessitates personnel working long hours, to preserve customer happiness and a good degree of service. Therefore, human resource management in these businesses must create a safe and healthy work environment to increase employee productivity and morale and contribute to their overall well-being (Wong & Chan, 2020). The hospitality business employs a wide array of workers, and backend staff are frequently exposed to various health and safety risks because of the tasks they must perform in the kitchen or other specialized vocations. The health of employees is significantly endangered by chemicals, noise, and heat stress, and they run the risk of acquiring musculoskeletal problems. Fires, explosions, bursts, cuts, scalds, electrocution, falls, knocks, slides, and tripping are all possible. These risks, often known as occupational accidents and diseases, can cause employee absenteeism, suffering, illness, productivity loss, disability, or even death, according to Baur, Getz, and Sowerwine (2017).

However, if the business creates appropriate guidelines for its employees and gives them the necessary instruction on detecting workplace hazards and how to avoid them, all of the aforementioned accidents can be prevented. To prevent these mishaps and provide a secure and healthy workplace, employers must interact with their staff (Al Yousuf, Taylor & Taylor, 2015). Any establishment's capacity to operate safely is seriously threatened by its inability to comply with

those rules. The proper use of tools, equipment, and chemical substances is governed by safety rules that hotel owners and staff must be aware of.

### **Occupational Injuries in the Hospitality Sector**

The hospitality sector, according to Jeong (2015), includes a wide range of duties and positions that come with a variety of risks. It is challenging to provide an exhaustive picture of the situation due to the complexity of the sector. The scientific literature only sometimes discusses supporting operations like logistics, cleaning, and so forth. The personnel in this industry are subject to numerous risks, both psychological and physical. According to Martnez-Solanas et al. (2018), who studied sector profiles on working conditions based on the third Eurofound survey and trends over the preceding several years, employees in the hospitality and catering business had the poorest working circumstances in the economy. These circumstances have gotten worse, especially in terms of the psychosocial dangers associated with the job's autonomy, responsibilities, and ergonomics. According to Oakman et al. (2018), overexertion, burns, wounds, exposed machinery, slick flooring, sprains and strains, biohazards, chemical exposures, and falls are the most frequent risks in the hospitality business. The table that follows provides a list of hazards, risks, and work-related accidents in the hospitality industry.



**Table 1: Workplace Injuries, Hazards, and Risks in the Hospitality Industry**

Physical Work Environment		
Risk	Description	Health outcomes
Noise, hearing, and high sound Levels	<ul style="list-style-type: none"> <li>■ Kitchens</li> <li>■ Discotheques, cafés and nightclubs</li> <li>■ Due to diners conversing, employees yelling orders, clinking plates, glasses, and silverware, as well as various kitchen appliances, ventilation systems, and hoists, restaurants frequently have loud environments.</li> </ul>	Accidents can result from hearing loss, mental weariness, and lack of concentration.
Low light conditions	<ul style="list-style-type: none"> <li>■ Restaurants, bars, and casinos that are cozy and low-lit may be enjoyable for customers, but they run the danger of increasing accidents including falls, burns, and eye strain.</li> </ul>	Higher accident risk
Temperature and breathing problems	<ul style="list-style-type: none"> <li>■ High temperatures (hot steam)</li> <li>■ Draughts caused by air conditioning and open doors</li> <li>■ Warm and humid environments</li> <li>■ changing between hot and cold climates</li> <li>■ issues with the indoor atmosphere, such as poor air quality and offensive odors</li> <li>■ Airborne contaminants (dirt, grease, oil, vapour, smoke, and gases) that are irritating, hazardous, and toxic</li> <li>■ Another major issue is the use of artificial cold while storing food.</li> </ul>	Pain, heat, stress, difficulty focusing, cramping in the muscles, heat exhaustion, weakness, headaches, and heat stroke.
physically taxing employment	<ul style="list-style-type: none"> <li>■ Standing about a much in the kitchen</li> <li>■ repetitive tasks in the kitchen include cutting, dishwashing, and stirring</li> <li>■ As a server, I regularly have to walk and carry heavy goods while frequently ascending and descending stairs.</li> <li>■ carrying huge food items for the kitchen staff and mattresses and equipment for the room staff</li> </ul>	MSDs such as tendinitis and carpal tunnel syndrome.
Contact with dangerous substances	<ul style="list-style-type: none"> <li>■ Workers may be exposed to potentially harmful chemicals such as pesticides, floor cleaners, disinfectants, and cleaners for ovens and floors.</li> <li>■ Dermatitis brought on by prolonged damp work</li> <li>■ Skin allergies brought on by contact with food, too much water, cleaning products, and disinfectants</li> <li>■ The risk of allergies and biological illnesses is present for chambermaids.</li> </ul>	respiratory illnesses, allergies, skin, eye, and nose irritation, and eczema
Equipment and technology	<ul style="list-style-type: none"> <li>■ The hospitality and restaurant industries frequently benefit from new technology</li> </ul>	Stress

	and equipment. However, due to improper or clumsy use of equipment, reduction of tasks and work content, and repetitive movements, new issues may also develop.	
Slips, trips, and falls	<ul style="list-style-type: none"> <li>■ Food stains on surfaces such as walkways and items, slick mats and coatings, inadequately lit walkways, changes in floor levels, and absent signage</li> <li>■ The majority of slips and accidents that happen in the food service sector are directly caused by damp or otherwise hazardous floors, according to the US National Floor Safety Institute. Age and inexperience both have an impact on the likelihood of a slip-and-fall.</li> </ul>	Accidents can result in cuts and bruises from falling, broken bones, injuries to the neck and back, injuries from falling onto or into machinery, and injuries from falling into deep-fat fryers.
Safety conditions	<ul style="list-style-type: none"> <li>■ Working with hot materials and items is common among kitchen staff.</li> <li>■ The physical environment of businesses poses risks for waitstaff and kitchen staff, including variations in floor levels, stairs, and inadequate canopy roofing over loading bays and goods entries.</li> <li>■ Injuries are also common among chambermaids cleaning up broken glass etc.</li> <li>■ After work, those who must travel home late at night could run additional safety hazards.</li> </ul>	Electric shock, cuts, limbs caught in moving machinery, lacerations, and needle sticks
Smoking, alcohol consumption	<ul style="list-style-type: none"> <li>■ The hospitality service includes these items. These resources are easily accessible to everyone.</li> <li>■ Particularly problematic for those working in nightclubs, cafés, pubs, and discotheques is passive smoking.</li> </ul>	respiratory and irritable symptoms decreased life expectancy
<b>Work Organisation</b>		
<b>Risk</b>	<b>Description</b>	<b>Health outcomes</b>

Violence, harassment and discrimination	<ul style="list-style-type: none"> <li>■ In the hotel and restaurant industry, violence and harassment from coworkers and superiors are substantial risk factors. It might be challenging in these circumstances for employees who interact with clients to maintain a friendly and composed demeanor.</li> <li>■ Employees working at pubs, discotheques, nightclubs, and bars are particularly vulnerable to violence, aggressiveness, and prejudice due to their close contact with the public. In cases like this, it frequently includes intoxicated members of the public.</li> <li>■ Employees of food delivery services are likewise vulnerable to public harassment and violence.</li> <li>■ Violence or the possibility of violence are risk factors for doormen.</li> </ul>	Kicking, pushing, using hot materials or food to burn someone, and hurling objects are all examples of physical aggression. Inappropriate sexual attention
High workload and stress	<ul style="list-style-type: none"> <li>■ Continuous customer contact</li> <li>■ The difficulty of some tasks, which demand intense focus</li> <li>■ Peak hours see a surge in workload, which is influenced by client behavior.</li> <li>■ Inability to replace sick coworkers, which results in extra work for the remaining personnel</li> <li>■ Working longer hours and dealing with challenging clientele also cause complaints.</li> </ul>	Workers in the hospitality industry report experiencing greater headaches, stress, and fear than typical. Impaired work-life balance Depression, increased absenteeism
Organisation, management, and working climate	<ul style="list-style-type: none"> <li>■ Employees frequently have to complete multiple jobs, and depending on the time of day, tasks may change. However, carrying out several tasks may also subject workers to demanding work and increase their risk of damage since they lack specialized training and experience.</li> <li>■ Employees in the industry can feel confined by demanding clients and employers.</li> <li>■ Peak times, which subject workers to a certain amount of work pressure, are typical of how labor is organized in the sector.</li> </ul>	
Autonomy and control	<ul style="list-style-type: none"> <li>■ In the hotel and restaurant industry, issues with control at work, checks by superiors, lack of break time, ambiguity on when the work will be finished, and poor communication are all but inevitable.</li> <li>■ Employees report having little control</li> </ul>	

	over their work and experiencing little predictability in their jobs.	
Training and educational possibilities	<ul style="list-style-type: none"> <li>■ A lot of work is typically of an unskilled kind.</li> <li>■ Concern also surrounds training course incompleteness.</li> <li>■ Limited structured career development</li> </ul>	
<b>Working time and precarious work</b>		
<b>Risk</b>	<b>Description</b>	<b>Health outcomes</b>
Temporary, sporadic, and unstable employment	<ul style="list-style-type: none"> <li>■ In many nations, the industry has a sizable proportion of part-time, casual, and seasonal employment.</li> </ul>	Diminished Psychosocial and Physical Wellbeing, Lack of Control Over Working Hours, And Lack of a Work-Life Balance

Source: European Agency for Safety and Health at Work (2008).

### The Perceived Risk of Hotel Employees about Organizational Safety

Risks associated with working as a hotel employee include increasing the likelihood that personnel will experience negative occurrences such as threats, danger, injuries, and losses while performing their jobs. Hotel employment danger has been the subject of substantial research in the hospitality industry. Zhang et al. (2020), for example, stated that hotel employees experience a greater rate of occupational health problems and sustain more significant accidents than the majority of other service workers. Work-family disputes, workplace stress, customer misconduct, and emotional tiredness are all possible concerns associated with hotel jobs (Tompas et al., 2016). Prior research has introduced the concept of employee perceived job risk. Using the 4M-risk-induced framework, Xie et al. (2020) defined hotel employees' perceptions of job risk as a five-dimensional construct comprised of five dimensions: human, equipment, environment (internal and external), and management. These are as follows:

### **Perceived Human Risk**

The human component, as defined in the 4M-risk-induced framework, pertains to an individual's behaviour in a work setting (Damghanian et al., 2016).

This is evident in the behaviour of clients, colleagues, and staff in the context of hotel services. Negligence, improper behaviors, and emotional responses can lead to behavioral disputes between staff and clients, which can have detrimental effects on both sides (Qiu & Liu, 2016). Workplace issues may arise from discrimination against employees in different hotel departments on the grounds of their education, gender, race, or religion. According to Baseer et al. (2016), employee safety knowledge, attitudes, and skills all have a significant impact on injury and accident rates. Additional sources of perceived employment risk for hotel staff include high workloads and long workdays.

### **Perceived Equipment Risk**

Equipment risk is defined by Xie et al. (2020) as the possibility of threats, injuries, or other unfavorable consequences for hotel staff as a result of insufficient equipment, inferior equipment performance, equipment failure, or a mismatch between humans and machines. The products that are stuffed within hotel offices include cutting-edge security systems, information security systems, and expert firefighting apparatus, to name just a few. Workplace injuries might have a substantial safety equipment issue. Employee injuries could also be caused by equipment that has poor design or is challenging to use (Baser et al., 2016). To prevent dangerous situations and reduce equipment failures, hotel equipment needs to be regularly inspected, maintained, and updated.

### **Perceived Environmental Risk**

The potential of threats, injuries, or other undesirable outcomes resulting from environmental factors is referred to as environmental risk. The controlled interior environment and the uncontrolled exterior environment are two separate subenvironments that make up the hotel environment. Although their nature and origins differ, external and internal risk factors are likely to hurt hotel employees' work status (Pappas, 2018). The exterior environment of a hotel is the natural (physical) and social (physicochemical) surroundings. The risk factors themselves are more diverse. For instance, workers in hotels who are located in disaster-prone locations are typically more at risk than other workers (Japutra & Situmorang, 2021). Employees may also be exposed to illness and infection if there is poor cleanliness in the hotel or if there is an outbreak nearby. A social or refugee crisis in the region where a hotel is located could put employees at risk of losing their jobs and their income. Additionally, local organized crime with a focus on theft, fraud, and terrorist acts may put hotel employees at risk (Hua & Yang, 2017).

The working environment for hotel staff is referred to as the internal environment. It includes both the physicochemical environment and the physical environment, including organizational climate and teamwork environment (Zoghbi-Manrique-De-Lara & Ting-Ding, 2017). Examples of the physical environment include air quality and workplace conditions. The supply of customer service, information sharing, teamwork, and career advancement are critically dependent on internal environments. Employee performance is improved and job satisfaction is increased in a pleasant work environment. In opposed to this, a toxic workplace can cause role uncertainty, performance

pressure, team conflict, and other unfavorable behavioral effects (Dwesini & Wil, 2017). Because the external and internal environments of hotels have distinct risk sources and repercussions, they should be measured independently.

### **Perceived Management Risk**

Management risk, according to Chen et al. (2012), is the probability of threats, injuries, and other adverse consequences for hotel personnel as a result of organizational or managerial negligence or a lack of qualified risk management techniques. Hotel management risk is made up of institutional factors like the lack of a security risk management department, the loss of job security functions, the absence of contingency plans, and inadequate emergency response capabilities, in addition to managerial factors like a lack of warnings, disregard for safety, insufficient safety training, poor daily management, and inadequate accident handling. Normal management practices in unsafe environments or when equipment malfunctions are not included in the risk variables linked with management (Bacik et al., 2019). In essence, perceived management risk refers to organizational behaviors that are connected to hotel safety management, such as maintenance, emergency preparations, and employee expectations and confidence in the institution about safety.

### **Employee wellbeing**

According to Mittelmark et al., (2022). Employee well-being has grown to be a major focus of research in the study of companies because it is strategically important to both individuals and enterprises. Nowadays, a variety of social

groups and organizations are quite concerned about the welfare of their workforce. Because it impacts an individual's employment, personal life, and the welfare of society, the workplace has grown to play a vital role in people's lives (Taris, & Schaufeli, 2018). The typical adult works for a large portion of their life—probably two thirds of it (Banerjee & Duflo, 2007). Employers are highly concerned about the well-being of their workforces because they invest a significant amount of money in employing new staff, trying to provide high-quality goods and services, retaining existing clients, and optimizing profits (Harter, Schmidt, & Keyes, 2003).

However, majority of employees reveal that employees prefer to achieve greater meaning and personal development from their job which they see as satisfying, enjoyable and socially useful (Battilana & Lee, 2014). Employee wellbeing encompassing both physical and psychological wellness is a critical aspect of an organizational success in the hospitality industry particularly in hotels. Maintaining a healthy and motivated workforce is essential for delivering a high-quality service, enhancing guest satisfaction, and enhancing sustainable business performance (Kim et al., 2018).

### ***Psychological well-being***

Psychological well-being refers to an individual's overall mental state, including their emotions, attitudes, and satisfaction with life. In the context of hotel employees, psychological well-being plays a vital role in job satisfaction, motivation, and performance (Darvishmotevali & Ali, 2020). Baker et al. (2014) highlighted the importance of positive psychological resources, such as



engagement and resilience, in enhancing employee well-being and reducing burnout in the hospitality industry. Furthermore, studies by Kim and Lee (2016) emphasized the significance of social support, job autonomy, and work-life balance in promoting psychological well-being among hotel employee.

Moreover, the impact of job demands, such as workload and emotional labor, on psychological well-being cannot be overlooked. Brotheridge and Lee (2002) suggested that high levels of emotional labor, common in the hospitality sector, can lead to emotional exhaustion and decreased job satisfaction among hotel employees. Therefore, interventions aimed at managing job demands, providing support systems, and fostering a positive work environment are essential for enhancing the psychological well-being of hotel employees.

### *Physical Wellness*

Physical wellness refers to the state of an individual's physical health, encompassing aspects such as exercise, nutrition, sleep, and overall physical fitness. In the hotel industry, where employees often work long hours, irregular shifts, and are exposed to physical strain, promoting physical wellness is crucial for preventing occupational health issues and improving job performance. Additionally, Park et al. (2018) found a positive correlation between physical activities, nutrition education, and employee well-being in the hotel industry, emphasizing the importance of wellness programs in enhancing physical health among hotel employees. Furthermore, studies by Roberts and Roth (2010) highlighted the impact of workplace ergonomics, safety measures, and health promotion initiatives on reducing physical strain and injuries among

hotel employees. Implementing structured wellness programs, and promoting a health work environment are essential strategies for improving physical wellness and overall job satisfaction among hotel employees.

In conclusion, promoting employee well-being, encompassing both psychological and physical wellness, is essential for creating a positive work environment, enhancing job satisfaction, and improving organizational performance in the hotel industry. By focusing on factors such as social support, job autonomy, work-life balance, physical activity, nutrition, and workplace safety, hotel can foster a culture of well-being that benefits both employees and the organization as a whole.

### **The Relationship between Safety Culture and Hotel Employee Wellbeing**

Hospitality sectors are battling for survival and success in a highly competitive industry (Lee, Back & Chan, 2015). Hospitality firms must practice social responsibility and capitalize on their goodwill. Unlike employees at high-tech organizations, hotel and service professionals operate in continually changing work settings, according to studies. Employee well-being is critical to their job performance (He, Morrison & Zhang, 2019). Hospitality personnel serve a diverse range of customers from a variety of backgrounds and collaborate with colleagues and supervisors from many areas. Additionally, they may encounter unexpected challenges and must retain a cheerful attitude toward customers. The majority of positions in hotels require repetitive effort, uncomfortable posture, and prolonged standing (Teo, Bentley & Nguyen, 2020). For example, hotel front desk staff must

stand at the front desk and constantly glance down at computers throughout their eight-hour shifts. As a result, their physiological and psychological health may be compromised by illnesses such as disrupted sleep patterns, stomach discomfort, and stress (Imna & Hassan, 2015), all while they must give speedy, courteous, and accurate service to customers.

Due to these factors, businesses now understand how critical it is to put employee health first to increase productivity while also aiming to enhance the quality of life for each employee (Tandon & Barman, 2019). A satisfactory state of being characterized by health, happiness, and prosperity is referred to as well-being. Employee happiness has long been seen as a sign of a healthy company and has numerous benefits for businesses (Ilies et al., 2015), including a rise in worker productivity. Ilies et al. (2015) state that there has been a huge rise in academic interest in employee wellbeing recently, and it is now recognized as a crucial topic in positive-based management research. In a similar vein, Zheng, Zhu, Zhao, and Zhang (2015) argued that a company's ability to retain and grow its workforce is essential.

According to Erkutlu & Chafra (2016), a growing emphasis on employee well-being is strongly related to a general drop in workplace ill health caused by physical, psychological, and personal variables. While employment is a significant cause of ill health, some studies have demonstrated that high-quality jobs are beneficial to health. The majority of firms place a premium on employee physical health, attempting to alleviate physical disorders or conditions such as high blood pressure, diabetes, obesity, and smoking cessation (Purcell, 2018).

Kim et al. (2018) reiterated, the benefits of well-being programmes for hospitality firms as a component of workplace safety culture practices can be grouped into three categories: individual (workers and customers), corporate, and societal. Employees, as targeted participants in wellness programs, are the campaigns' direct beneficiaries. By implementing employee wellbeing programmes, businesses can increase employee health insurance coverage foster a culture of healthy living, and enhance employees' general health conditions (Ponting, 2020). As a result, employees receive several advantages aimed at enhancing their health and living situations. Additionally, individuals that benefit from such programmes demonstrate increased enthusiasm and passion for their employment, transforming them into engaged employees. Customers benefit from wellness programmes as well, because they have a greater likelihood of engaging with engaged, passionate employees who give superior service (Mansour & Tremblay, 2016). As a result, clients are likely to be happier when served by an engaged person who is enthusiastic about his or her profession. In turn, among the numerous factors influencing customers' positive word of mouth and patronage intentions, satisfied customers are likely to develop positive thoughts about the company, fostering a long-term relationship and customer loyalty (Ibrahim et al., 2020). Both client loyalty and favorable word of mouth assist businesses in growing their profitability and revenue, which is critical for corporate sustainability. In this regard, businesses benefit significantly from employee wellness programs.

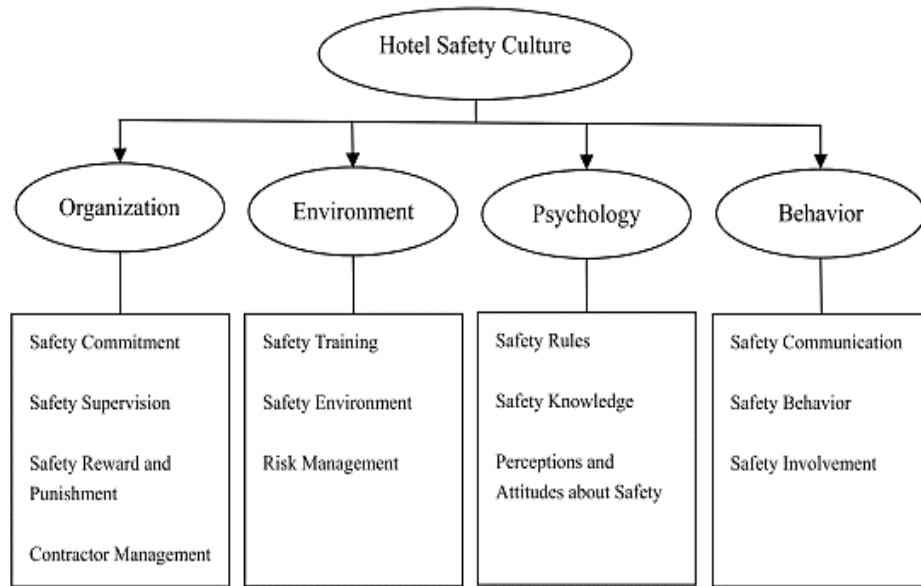
Moreover, prior research has revealed tangible benefits associated with employee wellness programmes, including enhanced productivity, employee trust, dedication, and citizenship behaviors, as well as decreased attrition and absenteeism (Siengthai & Pila-Ngarm, 2016). Thus, businesses recognize that sustaining their employees' health directly affects the success of their business. By Rosen's (1986) assertion as cited by Inuwa (2016) that "healthy people make healthy organizations," industry practitioners appear to concur that "healthy people and relationships are critical to corporate success". This is particularly true in the hospitality sector because of the hard working conditions there (e.g., night shifts, lengthy work hours, and job pressure). Up to 80% of hotel employees report having health difficulties as a result of their profession (Inuwa, 2016).

Thus, the importance of comprehending the function of health promotion programmes as components of safety culture are magnified in the hospitality industry, with practical consequences for practitioners and researchers. Employee wellness programs offered by diverse organizations can also have a positive effect on the broader society (Nzonzo, 2017). Employees, in whatever form they take, come from families, and healthy employees generally bring more happiness to their families, which has a ripple effect on the community and society at large. In this regard, effective employee wellness programs may contribute to increased societal satisfaction. Additionally, wellness programs that are successful in one organization can be replicated to benefit employees at other businesses and the entire community (Grobler & Grobler, 2019).

### Theoretical Framework

The study's theoretical basis is Kuo et al concepts for hotel safety culture (2020). The concept was developed using Geller's (1994) Total Safety Culture model, which categorizes safety culture into three dynamic and interacting categories: environmental factors, individual factors, and behavioral factors, as well as Cooper's (2000) Reciprocal Safety Culture model, which consists of three dimensions: people (subjective internal psychological factors), situations (objective situational features), and behaviors (observable, ongoing safety-related behaviors). The Total Safety Culture (Geller, 1994) and Reciprocal Safety Culture (Cooper, 2000) models have a high degree of overlap. The primary distinction between them is that Geller's model stresses the environmental component, which includes equipment, tools, machinery, heat, noise, and light in the workplace. Cooper's model lacks an environmental dimension; nonetheless, it incorporates features of an organization's safety management system, such as operating procedures, workflow systems, and communication flows, into the scenario dimension (Vierendeels, Reniers, Nunen, & Ponnet, 2018).

Kuo et al. (2020) established the hotel safety culture framework based on the overlaps between the two models. The framework examined four components of safety culture: organization, environment, psychology, and behavior. These aspects are explored as follows:



**Figure 2: Hotel Safety Culture Framework**

Source: Kuo et al. (2020)

### ***Organization***

The organizational dimension is concerned with the organization's safety management. A robust safety system is critical to establishing a safety culture. Only with an effective safety system and managers who follow safety rules can avoidable workplace accidents and injuries be effectively reduced. The effectiveness of the safety management system and reward system are evaluated using organizational factors.

### ***Environment***

The environmental dimension is concerned with ensuring that employees work in a safe atmosphere. Establishing a safe work environment needs the organization to determine the type of safety training required and to take steps to reduce risk perception in the workplace. Environmental factors are used to evaluate an

organization's capacity to create a safe work environment, devise training programs, and manage risk.

### ***Psychology***

The psychological dimension focuses on individual characteristics such as safety knowledge, beliefs, and attitudes among employees. Internal psychological elements such as organizational arrangements, management styles, and employees' attitudes and beliefs concerning safety are evaluated using psychological aspects.

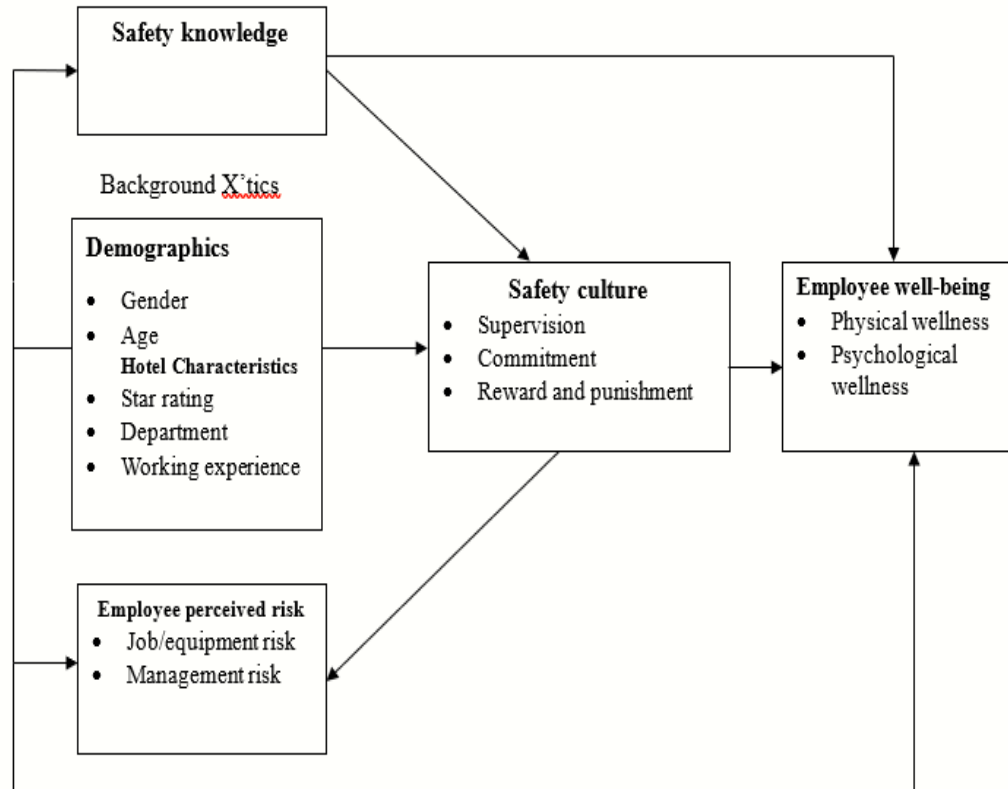
### ***Behavior***

The behavioral dimension assesses whether employees adhere to an organization's policies, completely utilize the organization's safety training, communicate with supervisors and coworkers, remind one another to be aware of safety issues, and actively report any risks to safety. Behavioral characteristics are used to evaluate reporting cultures (e.g., whether employees report unsafe conditions to supervisors) and employee communications (e.g., reminding colleagues to practice safe behaviors).

### **Conceptual Framework**

Drawing from the hotel safety concept framework developed by Kuo et al. (2020) and extant literature, the study develops its conceptual framework which is presented in Figure 3.





**Figure 3: Conceptual Framework**

Source: Researchers' Construct

Safety culture is operationalized within the conceptual framework by examining safety knowledge, organizational safety, and employee perceptions of risk. When personnel have adequate awareness of safety measures, they can work safely. For instance, an employee who possesses sufficient knowledge would put on suitable personal protective equipment (PPE) while performing his or her duties. Additionally, such an individual is capable of resolving concerns appropriately in the event of unexpected events such as accidents.

Organizational safety is concerned with the degree to which safety procedures are monitored to ensure employees adhere to safety standards, with

special attention paid to employees who work overtime, with regular inspections of the workplace to ensure it does not pose any risk to employees, and with regular inspections of equipment to ensure it is in good working condition.

Effective supervision would guarantee that personnel adhere to safety guidelines at all times, as they can be disciplined for not adhering to safety requirements. Working overtime raises employee stress, predisposing them to workplace injuries and accidents. As a result, paying special attention to them at these times can assist in reducing casualties.

Employees' perceptions of risk are influenced by how they are treated by clients, their workload, their working relationships (which can be favorable or negative), whether they were warned about job hazards, and their ability to operate professional equipment. When employees are constantly harassed or disrespected by customers or coworkers, they may view the work environment as dangerous. Having to work with rising workloads consistently poses another risk to employees, as they may lack enough rest time before their shifts beginning. Similarly, when personnel are unable to operate professional equipment (e.g. deep fryers, ovens, cutters, etc.), the likelihood of their getting cuts, burns, scalds, or strains is increased. When confronted with such dangers, some employees may choose to resign.

The factors mentioned previously (safety knowledge, organizational safety, and employee perception of risk) all impact organizational safety culture in the sense that, while hotel management may be committed to providing a safe workplace for employees, staff may be unable to take advantage of such

provisions if they lack adequate knowledge of how to implement or comply with safety standards. Similarly, management's lack of commitment to workplace safety, such as inadequate supervision, failure to provide workers with appropriate PPE, and failure to prioritize safety, would reflect negatively on the organization's safety culture, even if provisions were made in writing to promote safety practices in the workplace.

Additionally, when employees regularly encounter negative experiences in the workplace (harassment from clients and staff, inappropriate and unavailability of PPEs, little attention from management when they suffer any work-related injury, etc.), they would regard the safety culture of the organization to be ineffective since safety culture. All of these factors affect an employee's well-being. Thus, an effective organizational culture promotes employee well-being, whereas an ineffective organizational culture pays attention or nonexistent consideration for employee well-being and instead expects employees to be productive in performing their assigned duties and responsibilities.

## CHAPTER THREE

### RESEARCH METHODOLOGY

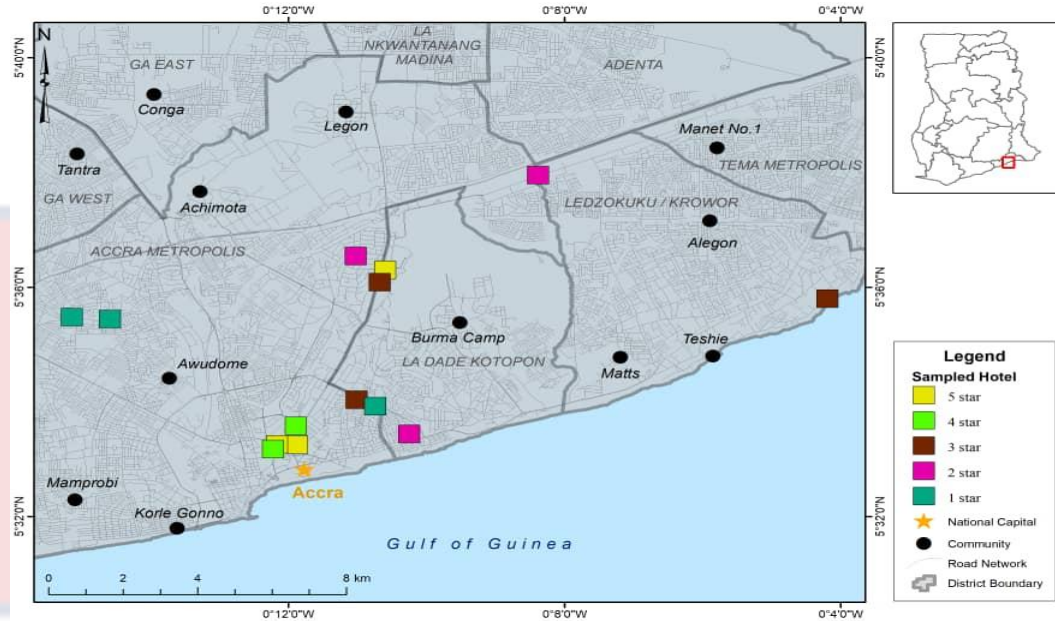
#### Introduction

This chapter discussed the methodology used for the study. Among the specific subjects covered are the study area's description and justification, the research philosophy, the research technique, and the data sources. There was discussion of the target population, sample size, sampling strategy, research instruments, pre-testing of research instruments, fieldwork, ethical issues, and methods for data processing and presentation.

#### Study Area

The study was conducted in the Accra Metropolitan Area (AMA) within the Greater Accra Region (GAR). With a total land area of 3,000 km<sup>2</sup>, the AMA is bordered to the north by the Ga East Municipality, to the west by the Ga West and Ga South Municipalities, to the east by the Ledzokuku Krowor Municipality, and to the south by the waterfront of the Gulf of Guinea (Cities Alliance, 2015).

The majority of the inhabitants of the metropolis are Gas and Adamgbes, and the city's primary economic activity includes fishing and trading. Since AMA is Ghana's largest city and the one with the most hotels, including 5 and 4-star hotels, it was selected as the study region. The country's administrative and economic center is AMA. Accra has transformed into a contemporary metropolis with contemporary skyscrapers, residences, and international and domestic hotels.



**Figure 4: Map of Accra Metropolis Showing the selected hotels Studied**

According to the World Bank (2016), AMA contributes 25% to Ghana's GDP and draws 83% of all foreign direct investments into the country. This is because Accra has experienced such tremendous economic growth and quick urbanization thanks to nearly three decades of political stability. The ties that AMA has to the global economy at both the corporate and individual levels, as well as its enhanced production and profitability in addition to remittances to relationships, are some of its additional strengths (Pescina, 2013).

Additionally situated in AMA is Ghana's only international airport, Kotoka International Airport. In addition, the city is home to the corporate offices of numerous companies and popular tourist destinations including the National Museum and Osu Castle. The majority of Ghana's upscale national and multinational (MN) hotels are situated in the AMA. Accra City Hotel, La Beach, and La Palm Beach Hotels are a few instances of such national lodgings. In all

guest categories, AMA has the highest concentration of different star-rated licensed accommodations (Table 2).

**Table 2: Summary of Licensed Accommodation in the AMA**

Accommodation types	Total number	Number of rooms
<i>Star rated hotels</i>		
Five	3	559
Four	8	1,208
Three	7	641
Two	75	3,012
One	118	2,016
<i>Total</i>	<i>813</i>	<i>14,360</i>

Source: Ghana Tourism Authority, (2020)

Again, AMA was chosen because it is a city that is characterized by excessive pressure because of many factors such as traffic, high consumer demand, and expectations which affect both physical and psychological well-being of employees, especially star-rated hotel employees (Mahama, Chireh & Dramani, 2022). Therefore, it was necessary to study hotels' safety culture, perceived risk, and employee well-being in such an environment to understand what the employees feel and what the hotels are doing to improve the well-being of their employees.

### **Research Philosophy**

The positivist philosophy served as the context for this investigation. The objectivity of knowledge is emphasized by this school of thought (Kaboub, 2008). That is positivism, which holds that the researcher should focus on the facts.

Studies with a positivist worldview are solely fact-based and take the outside world as an objective reality (Wilson, 2010). In other words, positivism as a philosophy upholds the idea that only factual knowledge obtained by observation (the senses), including measures that can be immediately felt and verified, is reliable (Park, Konge, & Artino, 2019). According to Kraus (2005), everything in the world may be quantified since phenomena follow the rules of cause and effect and can be identified if the scientific method is used. Furthermore, positivism also depends on structured, reliable observations that lead to statistical analysis. Collins (2010) describes positivism as an empiricist philosophy that maintains that all knowledge originates from human experience. When conducting positivist studies, the researcher's involvement is restricted to gathering data and interpreting it objectively; the research findings are then reported or explicated scientifically. Additionally, positivism disregards the intentions of individuals as well as the objectivity of the researcher (Wahyuni, 2011). Crowther and Lancaster (2008) claim that positivist investigations often employ the deductive method, whereby a theory for the subject is first proposed, followed by the development of a scientific hypothesis to test it.

For several reasons, this study utilized the positivist philosophy. Data that can be measured, quantified, and independently verified are the goal of the study. The positivist school of thought is therefore the best. As a result of the researcher's independence from the subject matter of their investigation from an epistemological point of view, positivist philosophy is favored over interpretivist philosophy (Aliyu, Bello, Kasim & Martin, 2014). The study also used the

positivist concept because it examined employees' perceived risks to organizational safety and their understanding of safety. Likewise, figuring out the connection between the well-being of hotel personnel and organizational safety culture. Additionally, this method is frequently used in modern organizational safety studies, particularly ones that involve employees.

The capacity to do pertinent statistical comparisons across several groups and dependable outcomes that can be statistically constrained are two of its advantages. Additionally, if the study results are replicated across a variety of demographics and subgroups, it helps researchers generate new findings. (Johnson & Onwuegbuzie, 2004). As a result, quantitative measurements and analyses of organizational safety culture, employee well-being, and a test for variations among the variables was carried out.

### **Research Design**

This study used an analytical cross-sectional survey methodology since information on the sample's well-being and organizational safety culture would only be obtained once and be current at the time the study was conducted. To analyze a phenomenon, cross-sectional surveys take a cross-section of it at once (Creswell, 2017). When attempting to prove the existence of a phenomenon within a certain community, cross-sectional designs are especially helpful (Sedgwick, 2014). Since it is assumed that a cross-section of the population is representative of the total population, conclusions about the population can be drawn from the sample. This kind of design, according to Creswell (2014), enables the researcher to examine existing activities, attitudes, and beliefs at a



certain period. A cross-sectional study's findings can quickly give an overview of the current issue (Sedgwick, 2014).

### **Data and Sources**

The study used both primary and secondary data. The primary data were obtained from hotel employees in AMA in a field survey. Secondary data were obtained from the Hotel Directory (Ghana Tourism Authority, 2020). Specifically, a list of licensed star-rated hotel restaurants was used as a sampling frame for selecting respondents for the study. Additionally, articles from journals relating to the topic were consulted extensively.

### **Target Population**

The study's target population was the staff of star-rated hotels in the Accra Metropolitan Assembly. Star-rated hotels were considered for this study because previous studies (notably Kou et al. 2020) had conducted similar research involving hotels and recommended further studies to focus on star-rated hotels. Respondents needed to have worked at the present hotel for more than six months to be eligible to participate in the study. This inclusion criterion was put in place as a quality control measure and to make sure that only those with sufficient knowledge, particularly regarding safety issues, were recruited into the study so they could make an impact on it.

### Sample Size

Using the formula created by Fisher, Laing, Stoeckel, and Townsend (1998), the sample size for this study was determined. This formula was required because there was no proper sample frame and no way to determine the size of the target population being studied. Most managers were hesitant to provide some of these details to the researcher because they felt that doing so would compromise their privacy. However, the researcher believed that there would be fewer than 10,000 employees across all of the chosen hotels, therefore by Fisher et al. (1998), the sample size ( $n$ ) for the study is determined by  $n = Z^2pq/d^2$ .

Where: Assumed sample size is  $n$ .

$Z = 95\%$  confidence level (standard value: 1.96)

$P =$  the percentage of the target population that shares the same traits.

$q = 1 - p$

$d =$  the margin of error of 5%

The target sample size was  $n = (1.96)^2 (0.50) (0.50) / 0.05^2$

$n = 384$ .

The study intended to involve a sample of 384 hotel employees, meanwhile, 338 people in total agreed to engage in the research for a range of external factors. In percentage terms, this represents 88% of the intended sample size. Despite this, the appropriate sample size debate has not been settled, according to Hair, Anderson, Tatham, and Black (1998). However, based on the large distribution hypothesis, they think that a sample of 100 to 150 respondents will produce accurate and reliable result estimations. As a result, the 338 respondents provided adequate data to draw valid conclusions from the study.

### Sampling Procedure

The multi-stage sampling technique was employed in the study. This is where two or more sampling techniques are used in the selection process of respondents. The sampling was done at three levels to select the hotels and the employees. First, the stratified sampling technique was used. Here, there was a categorisation of hotels into strata and this was done based on the star ratings of the hotels within the metropolis. Below are the number of hotels in the metropolis according to their star ratings.

**Table 3: Accommodation Types**

Star ratings	Number of hotels available	Number of hotels selected
5	3	3
4	8	4
3	7	3
2	75	8
1	118	12
Total	211	30

Source: Ghana Tourism Authority, (2020)

In all, 30 hotels across the different star-ratings were selected for this study, this is because 30 was considered to be ideal in making a meaningful and reliable conclusion on the hotels within the Accra Metropolitan Area. This selection was done across the star ratings with every star rating having a number representing that category. In this group of 30 hotels, there were three 5-star hotels (representing 100% of the hotels in that category), four 4-star hotels

(representing 50%), three 3-star hotels (43%), eight 2-star hotels, and twelve 1-star hotel, which, respectively, represented 11% and 10% (Table 3). Following the determination of the total number of hotels for each category, the basic strategy of random sampling (the lottery technique) was used to choose the individual hotels from each category depending on their number of representations. The technique involved creating a list of hotels to act as the sample frame, allocating numbers to these hotels, and using the lottery method to choose the hotels until the necessary sample size for each category was reached.

Again, determining the sample size for each hotel, the researcher needed accurate data on the employees to serve as a sample frame, however, getting the total number and the list of employees from most of the hotels was very difficult. Due to this, the researcher was forced to employ a non-probability sampling method, specifically convenient sampling method. Convenience sampling, according to Creswell (2014), is a non-probability sampling technique where the units chosen for the sample are the easiest for the researcher to get. This might be a result of geographical proximity, availability at a certain time, or willingness to participate in the study.

Convenient sampling is frequently associated with biases in selection (Mackey & Gass, 2005) and does not accurately reflect the population (Babbie, 2007). This is one of the limitations of the convenient sampling technique. In order to mitigate the selection biases inherent in this methodology and guarantee a certain level of representativeness. The researcher disproportionately selected respondents from all the 30 hotels to be a reflection of all the hotels.

### Data Collection Instrument

This section outlines the data gathering methods utilized for the study along with the rationale for each one. A questionnaire was used to obtain the data needed for the analysis. According to Creswell (2012), using a questionnaire is the best way to collect survey data since it protects respondents' privacy and confidentiality. This decision was made. In addition to the above-mentioned factors, deploying a self-administered questionnaire was quicker, less expensive, and gave respondents autonomy over their responses.

The questionnaire was designed according to the research questions formulated to guide the study. The questionnaire was divided into five sections (parts 1 through 5) containing both open-ended and closed-ended questions. Parts (1) employees' safety knowledge, (2) organizational safety culture, (3) employees' perceived risk, (4) employees' well-being, and the final module (5) examined the respondents' sociodemographic traits. The introduction portion covered the goals of the study, how long it should take to complete the questionnaire, and the ethical issues. The consent form was also located in this area, and it asked the respondent for permission to participate or not. With the hypothesis that most of the employees within AMA can read, write, and converse in English; the questions were recorded in that language (Amuquandoh, 2011).

Nominal variables were employed to assess the level of employees' safety knowledge, while Likert-scale was used to assess organisational safety culture, employees' perceived risk, and employees' well-being. Respondents were asked to rate from 1 (strongly disagree) to 4 (strongly agree). The Likert scale is one of

the most often used instruments for doing survey research. According to Bryman (2008), the Likert scale is used to assess how strongly one feels about a certain topic, theme, or idea. It assists researchers in overcoming the impact of misclassification on certain difficulties, gaining access to a wider range of definitional elements, and drawing considerably finer distinctions than single-indicator tests because it is a multiple-indicator or multiple-item measure (Bryman, 2008).

In part 1, ordinal variables were used to measure respondents' safety knowledge. The gauging scale for employee safety knowledge involved nine statements. The employees were to indicate the level (high and low) of their safety knowledge. In part 2, the respondents were to rate the organizational safety culture on a four-point Likert scale ranging from 1 (strongly disagree) to 4 (strongly agree). The scale for safety culture involved three main constructs comprising seventeen (17) statements drawn from Kuo et al., (2020). The first construct, supervision had six statements, safety commitment had five statements. The third construct, safety reward, and punishment also had six statements.

In part 3, the employees were asked to indicate their disagreement or agreement on perceived risk on a four-point Likert scale ranging from 1 (strongly disagree) to 4 (strongly agree). In all, thirteen (13) statements were used under three main dimensions (Xie et al., 2019, Kuo et al., 2020). Five statements on perceived job risk, three on perceived equipment risk, and five statements on perceived management risk. Again, Respondents were asked to indicate on a four-point Likert scale, from 1 (strongly disagree) to 4 (strongly agree) by stating their

well-being. This section consisted of two constructs, comprising eight (8) statements drawn from Kuo et al., (2020). Five statements on psychological, and three on physical wellness.

The sociodemographic traits of the respondents were covered in the final section (part 5). Respondents were asked six questions. The sex, age, department, position, hotel star rating, and work experience of the respondents were the main topics of these queries. Either by checking the relevant answers or by noting them in writing, respondents were asked to (choices).

### **Pre-testing**

Pre-tests are quick assessments of a research tool's usefulness, such as a questionnaire or an interview schedule (Sarantakos, 2005). For the pre-test, individuals with similar traits to those who will take part in the final survey must be chosen in comparable settings. Thirty (30) hotel employees from the Secondi-Takoradi metropolitan area in the Western Region were conveniently selected for the pre-test. To ensure that the survey instruments do not ignore important areas of employees' safety knowledge and other dimensions, these units of analysis were chosen in a relatively comparable environment to determine the content validity and the extent to which the questions were clear to the respondents (Smith, 2012). The pre-test was conducted from August 4 through August 14, 2021.

The majority of the employees who were required to reply to the survey first grumbled about the printed questionnaire's font size and number of statements for some of the dimensions since they had to strain their eyes to see

them. Without losing sight of the study's goals and main points, modifications like increasing the font size from 10 to 12 were done. Also, the pre-test was conducted to evaluate the suitability and reliability of the instrument. It allowed the researcher the opportunity to fix the questionnaire's errors so that it would be more accurate for the actual fieldwork. Issues such as wrong wording, repetition, and ambiguity of statements were rectified. Lastly, data was tested for reliability using the Cronbach Alpha method, and the results revealed that the scale had strong reliability, with an estimated value of 0.865.

### **Data Collection Procedure**

The fieldwork itself actually occurred between October 2021 to January 2022. Contacts were made with the HRMs and/or management of the chosen hotels before the data collection to obtain their consent and guarantee their cooperation in providing the study with the necessary data. They explained the study's focus so they could comprehend its goal. To avoid any misunderstandings, the HRMs and management of the chosen hotels introduced the researcher and field assistants to the front desk staff as a type of familiarization exercise. There were two field assistants working on the project. The assistants received a full day of instruction on the tool and data gathering process. The goal of the training was to help them comprehend the design and content of the research tool so they could explain it to staff members and respond to any inquiries.

When the research assistants arrived at the various hotels, they made a second introduction to the respondents who were willing to participate in the data collection, described the purpose of the study, and obtained their verbal



agreement before allowing them to self-administer the questionnaires. Some of the employees finished them right away and turned them in between 27 and 35 minutes. Other employees asked the field assistants to write their answers to the questions based on what they said because they were too weary or hesitant to write after a full day of work. In the most recent case, the majority of respondents asked the field assistants to review the responses to make sure that what they said was accurate. The other participants answered the surveys whenever it was convenient for them and turned them into the front desk staff, who put the answers in an envelope provided by the research assistants to be collected the following day. Most employees completed the questionnaire at their convenience due to the COVID-19 restriction because most hotels, particularly the upscale ones, did not provide a free or easy entrance. All respondents were thanked for agreeing to take part in the study both before and after the data collection.

### **Data Analysis**

According to Patton (2002), the systematic investigation of any type of data to ascertain its constituent pieces, their interrelationships, and their relationships to the whole is referred to as analysis. The primary goal of data analysis, according to Blanch and Durrheim (2001), is to transform data into a meaningful form to respond to the original research question(s). Both descriptive and inferential statistics were used in the analysis. The questionnaires were reviewed for consistency in editing, and the open-ended items were coded and analyzed. Subsequently, the Version 25 of SPSS (Statistical Product for Service Solutions) was used to enter data, for processing and analysis. The data was

examined for outliers in order to exclude any extreme values or outliers that might compromise the validity of the conclusions. However, these were almost absent because of the bounded nature of the Likert scales used for gauging their responses. Tables and charts were utilized to describe, show the results, and summarize the data as well as other aspects of the subject matter. Descriptive statistics such as frequencies, percentages, means, and standard deviations were produced for all the variables. These descriptive statistics were run to give a general overview of the sample properties and data distribution.

The exploratory factor analysis (EFA), more especially the Varimax rotation approach was used to assess how well the measurements fit the dataset in terms of the inferential statistics for the quantitative analysis. The EFA was also utilized to evaluate the measurement based on organizational safety culture and employee perceived risk's fundamental structure and factorability. The measured scale was also reduced using the EFA, and the total variance explained was established. Additionally, the link between employee assessments of corporate safety culture, perceived risk, and employee well-being across the socio-demographics, which functioned as independent variables, was investigated using the chi-square test of independence. These were tested at a 95% confidence level assuming an error margin of 5%.

### **Fieldwork and Related Challenges**

Several difficulties were faced when collecting the data. When contacted for data collection, felt reluctant to participate in the survey. They explained that it would take a lot of time for them to complete the questionnaire because they

were busy. This issue was resolved by the researcher by outlining the purpose and significance of the study to the participants, some of whom were able to comprehend and consent to take part. Furthermore, several of the questionnaires were misplaced by the staff. For instance, due to their busy schedule and the nature of their work, some of them asked that the questionnaires should be left behind for them to fill at a later day but could not find them when the field assistants went for it. Nevertheless, additional copies of the surveys were distributed to new participants in the research region.

The COVID-19 epidemic was the largest obstacle that was faced. The research has always been impacted by the pandemic, which has had a significant impact on practically everything in this planet. The pandemic had two effects on the way the data was gathered. It made it harder to obtain the desired sample size in the first place, and also extended the duration by two months. Nevertheless, in order to gather enough information to draw relevant conclusions, the researcher had to remain in the field later than expected.

Last but not least, because of the pandemic, it was initially challenging to obtain access to and approval from some managers to gather data from staff due to hotel procedures designed to protect both personnel and customers. The department's introductory letter describing the researcher as an M.Phil. The student was sent to numerous hotels, which made the data collection possible. However, the researcher made sure that copies of a departmental letter that was signed were sent to each field assistant. Make certain that all field assistants had enough nasal masks to wear while working in the field. Consequently, about 46

employees (12%) of the earmarked sample size refused to participate in the study yielding a response rate of 88%.

### **Ethical Issues**

Research ethics safeguard research participants' interests while advancing the validity of the findings (Israel & Hay, 2006). Confidentiality, anonymity, the right to free and informed consent, privacy, and other ethical considerations were taken into account during the data gathering. Additionally, an introductory letter from the department was taken to help with the data collection process. Before distributing the questionnaires, the respondents' permission was requested. When approached, the employees were asked if they would be open to doing the survey. Their roles and the aim of the study were described. Additionally, it was made clear to them that their involvement was optional.

Anonymity for respondents was properly protected. In light of this, respondents were urged not to provide any kind of identification, including their names and phone numbers. To gain their trust in answering the questionnaire—some of which required the disclosure of sensitive personal information—their identities were kept a secret. The confidentiality of the respondents was deemed a significant concern about the use, archiving, and distribution of data. As a result, the collected data was utilized exclusively for the intended (academic) purpose and was securely stored electronically for the study, future reference, and secondary data use by other researchers.

### Chapter Summary

This chapter provided a thorough explanation of the study's methodology as well as the setting and procedures for conducting the study. The Greater Accra Region's Accra Metropolitan Area was the subject of the investigation. The study was designed to collect data on several cases at a specific period in time in order to create a body of quantitative data that included multiple factors and might show patterns of association, as suggested by Bryman (2008). A survey instrument, or questionnaire, was used to gather data from around 338 hotel employees who were randomly selected within the study's catchment region. The data was primarily primary in nature. Prior to the actual data collection, the instrument was pretested among thirty hotel employees at the Sekondi-Takoradi Municipality. IBM SPSS version 25 was used to evaluate the data using both descriptive and inferential statistical methods. Consent, anonymity, and confidentiality were among the main social research ethics factors to be taken into account.

## CHAPTER FOUR

### RESULTS AND DISCUSSION

#### Introduction

This chapter presents and discusses the findings of the study. It begins by outlining the sociodemographic details of the study participants who were hotel employees. It describes the respondents' safety culture and knowledge. The chapter also addresses the relationship between company safety culture and employees' well-being and perceived risk.

#### Socio-Demographic Characteristics of Respondents

This section provides information on the sociodemographic traits of the study participants, who were employees. The socio-demographics covered included age, sex, department, position, start ratings, and work experience. More than half of the respondents were between the ages 25-35 (61.2%), and those who were less than 25 constituted 28.3 percent. Followed by those within 36-45 (10.4%) and 46-55 (11.0%). The results further indicate that slightly more females (59.2%) than males (40.8%) participated in the study.

With regards to the department of employees, the result shows that those who work with housekeeping are relatively more (36.4%) followed by those who work in the kitchen (24.6%). More cooks or chefs (34.9%) and room attendants (27.5%) participated in the study. The least were managers (7.1 %).

**Table 4: Employees' Background Characteristics**

Demographics	Frequency	Percentage
Age		
Less than 25	81	24.0
25-35	197	58.3
36-45	33	9.7
46 and above	27	8.0
Sex		
Male	138	40.8
Female	200	59.2
Department		
Kitchen	83	24.6
Housekeeping	123	36.4
Front Office	75	22.2
Food and beverage	31	9.2
Other	26	7.6
Position		
Cook/chef	118	34.9
Room Attendant	93	27.5
Manager	24	7.1
Waitress	44	13
Others	59	17.5
Star ratings		
5-star	16	4.7
4-star	69	20.4
3-star	25	7.4
2-star	203	60.1
1-star	25	7.4
Work experience		
Less than 1 year	65	19.2
1-5 years	225	75.4
6 years and above	18	5.4

\*N=338

Source: Fieldwork, Asamoah, 2022

The respondents were also requested to indicate the star-ratings of their hotels. The results showed that six in every ten respondents came from 2-star hotels (60.1). Only 7.4% respectively were gotten from 1-star and 2-star. As regards their years of experience working in the hotels the majority (75.4%) of the employees had worked between 1–5 years. 19.2% of the total responders who had responded after this worked less than a year in their hotels.

### **Safety Knowledge of Hotel Employees**

The objective of the study was to examine the safety knowledge of hotel employees. Senya (2017) defined safety knowledge as an individual's knowledge, beliefs, experiences, abilities, and memories related to safety. The level of safety knowledge among employees was assessed using nine separate statements, each of which asked respondents to rate their familiarity (high or low) with relevant organizational safety concerns. Table 5 displays the analysis findings.

Slightly over half (57.6%) of the participants in total reported having a high level of knowledge of the hotels' safety issues. Specifically, it was revealed that about half (52%) of them claim to understand and are familiar with hotel safety procedures. In addition, a majority indicated that they know the emergency routes in the hotel in case of a major accident like fire (62.1%) and are familiar with the hotel safety reporting system (64.8%). However, the proportion of respondents who reported not understanding the hotel safety procedures, how to handle issues in instances of accidents, and emergency procedures in the events of accidents, was equally high. Approximately four (4) out of every ten respondents had low knowledge of each of these issues (Table 5).



**Table 5: Employees' Safety Knowledge**

Statement	Low (%)	High (%)
I understand the hotel safety procedures	48.2	51.8
I know how to handle issues in instances of accidents	46.7	53.3
Employees are trained to operate safely	42.9	57.1
I know the structured safety procedures put in place by the hotel	43.2	56.8
I understand emergency procedures in the event of accidents	45.0	55.0
If an accident occurs in the hotel, I know how to handle it	47.9	52.1
As a hotel employee, I am aware of my operation scope of safety	34.9	65.1
In the event of a serious mishap like a fire, I am familiar with the hotel's emergency exits	37.9	62.1
Aware of the system for hotel safety reporting	35.2	64.8
Overall	42.4	57.6

Source: Fieldwork, Asamoah, 2022

These gaps in knowledge could pose increased safety risks for both guests and staff. Given the substantial proportion of employees unfamiliar with safety protocols and emergency procedures, it can lead to confusion, delays in response, and potential loss of lives and property in case of accidents or emergencies. The hotels could face legal challenges and liability issues if guests or employees are harmed due to the lack of knowledge about safety procedures. From the

regulatory point of view, the findings raise concerns about whether the hotel is meeting regulatory standards for safety and emergency preparedness. As such, the results indicate a need for better employee training in safety protocols and emergency response (Nouaimeh, et al., 2018).

### **Safety Knowledge of Hotel Employees by Background Characteristics**

This study is supported by a conceptual framework that connects the employees' socio-demographics to their safety knowledge. Thus, the purpose of this analysis's part was to determine whether safety knowledge is related to the various socio-demographic characteristics of the respondents. To determine the link, the chi-square test of independence was employed following meeting its critical assumptions of data dispersion such that at least five of the cells in the contingency table do not have counts less than five and all the variables involved are categorical (Pallant, 2005). The significance of the results was gauged at 0.05.

A statistically significant relationship ( $X^2(4, 334) = 34.48, 0.00$ ) was established between safety knowledge and employees' hotels' star ratings (Table 6). This explains that the star rating of the hotel is related with employees' safety knowledge. According to the findings, the majority of employees who work at three-star (80.0%) and five-star hotels (85.0%) reported having higher safety knowledge as opposed to those who worked at two-star (52.8%) and one-star (55.0%). This implies a correlation in safety knowledge with the hotel's star rating. Up-scale hotels prioritised their reputation; hence always make sure that customers and employees are protected from accidental injuries (Hofmann, et al.,

2017). If the self-reported safety knowledge of the employees in the high-graded hotels is anything to go, it suggests that guests and employees in those hotels are likely to experience a safer environment due to the better-prepared and knowledgeable staff.

**Table 6: Differences in Safety Knowledge across Employees' Background Characteristics**

Socio-demographics	Low	High	X <sup>2</sup> (p-value)
Star rating			34.48(0.00)
One-star	45.0	55.0	
Two-star	47.2	52.8	
Three-star	20.0	80.0	
Four-star	47.8	52.2	
Five-star	15.0	85.0	
Position			2.41(0.79)
Manager	29.2	70.8	
Cook	39.8	60.2	
Room Attendant	44.9	55.1	
Bar attendant	50.0	50.0	
Waiter(ess)	38.1	61.9	
Others	37.3	62.7	
Sex			0.69(0.71)
Male	39.4	60.4	
Female	40.3	59.7	
Department			2.34(0.80)
Kitchen	40.8	59.2	
Housekeeping	40.2	59.8	
Reception	36.5	63.5	
Food and Beverage	38.7	61.3	
Other	50.0	50.0	
Age			1.31(0.73)
Less than 25 years	39.1	60.9	
25-35 years	41.5	58.5	
36-45 years	31.4	68.6	
46-55 years	42.9	57.1	

Source: Fieldwork. Asamoah, 2022

Concerning employees' positions, the test indicates that the proportion of managers (70.8%) that have high knowledge of safety issues is more than the other positions, followed by the waiter(ess) (61.9%) and cook (60.2%). The findings suggest that managerial roles are associated with a higher level of safety knowledge, which is in line with expectations. Managers, as key decision-makers and leaders within an organization, are likely to be more familiar with safety protocols and emergency procedures. This demonstrates how crucial it is that workers receive specialized safety instruction in different positions to ensure a consistent level of preparedness across the workforce

In addition, it is observed that more males (60.4%) have high safety knowledge as compared to their female counterparts (59.7%). The proportion of males who know safety issues is more than females, however, does not establish a significant relationship between safety knowledge and employees' sex. Although the test indicates a slightly higher proportion of males with high safety knowledge compared to females, the lack of a significant relationship implies that the difference might be marginal. It is crucial to ensure that both male and female employees receive equal and thorough safety training to maintain a safe environment for all.

Finally, the results underscore the necessity of ongoing training programs for employees in various roles. While managers show higher safety knowledge, it is vital to regularly update and reinforce safety protocols for all staff members, regardless of their position or gender. This proactive approach can lead to a more consistently safe and prepared workforce.

In conclusion, the analysis reveals insights into the distribution of safety knowledge among employees based on their positions and genders. While managers tend to have a higher level of safety knowledge, and males slightly outnumber females in this regard, the focus should be on continuous training and the equitable dissemination of safety information throughout the organization.

### **Factors that Account for Hotel's Safety Culture**

The fundamental underlying components of what constitute hotel's organisational safety culture were assessed. An exploratory factor analysis (EFA) was necessary since this research was needed to determine how different organizational safety cultures interact to affect a hotel's safety issues. 'Data reduction' is what Pallant (2005) refers to as EFA. It uses a reduced number of parts or components to try and minimize or summarize a big amount of data.

Consequently, seventeen (17) variables were used to conduct the EFA, and Table 7 displays the results. Before using FA in this study, the sample adequacy and factorability of the data were checked to make sure that all of the EFA's presumptions were satisfied. Both the Kaiser-Meyer-Olkin (KMO) criterion of sample adequacy and Bartlett's test of sphericity indicated that the data was factorable. Tabachnick and Fidell (2001) state that even if the KMO index goes from 0 to 1, with 0.6 serving as the minimum value for a satisfactory EFA, Bartlett's test of sphericity must be significant ( $p=0.05$ ) for the FA to be deemed **adequate**. Bartlett's test of sphericity (1691.273) was found to be very significant ( $p=0.00$ ) in this analysis, and the data's eligibility for EFA was validated by the

KMO score of 0.808. Table 7 also lists the factor loadings and eigenvalues. Factors or components with an eigenvalue of 1.0 or higher are retained for more research, whereas a correlation matrix with a factor loading of 0.5 or higher is advised for examination (Pallant, 2005).

More significantly, the reliability of the scale and the degree to which the variables added to the factor's explanation were assessed using Cronbach's alpha. Pallant (2005) suggests using the Cronbach's alpha coefficient to assess how well each of the individual questions under the concept measures it. She states that a Cronbach's alpha value of more than 0.7 indicates suitability.

In order to facilitate understanding of the findings, the factors were additionally "rotated" so that components were represented by multiple highly loaded variables. Three (3) important underlying dimensions that explained seventeen (17) variables were left after Principal Component Analysis (PCA) for the organizational safety culture of a hotel using the varimax rotation. The three given by a solution and an uncorrelated component together 47.9% of the overall variances. This result indicates that put together the three dimensions did not sufficiently account for the variance in the measurement of the hotels' safety culture and thus about 52% of the variance is probably explained by other factors. The current factors, however, equally contributed differently to the total variance explanation, as follows (Table 7):

**Table 7: Factors that Account for Hotel's Safety Culture**

Factor and observed variables	FL	EV	VE (%)	Alpha
I Supervision		3.15	18.51	0.804
The hotel management regularly advocates	0.78			

safety precautions.

	The hotel's managers mandate that staff adhere to normal operating procedures	0.77		
	When operating performance conflicts with safety, hotel management puts safety first	0.68		
	The hotel management promotes the safety rules often and supervises and care about the employees at the workplace	0.65		
	The hotel conducts routine inspections of its firefighting tools, apparatus, and equipment	0.65		
	The hotel management periodically evaluates the safety attitude of the employees for improvement	0.61		
II	Safety Commitment	2.53	14.90	0.721
	The hotel places a strong emphasis on the need for us to complete our responsibilities safely	0.75		
	The hotel actively cares for staff members during accidents.	0.74		
	The hotel supports and takes on suggestions made by staff members regarding health and safety	0.67		
	The hotel sees employee safety as one of its guiding principles	0.60		
	The hotel places little emphasis on preventing workplace accidents or enhancing workplace safety	0.51		
III	Safety reward and punishment	2.47	14.55	0.711
	Regardless of the reason, anyone who violates work safety regulations faces consequences	0.71		
	Employees receive praise from the hotel for their great work safety performance	0.70		
	I don't fully comprehend the hotel's system of rewards and punishments for work safety	0.63		
	I believe the reward-and-punishment system is a useful tool for enhancing safety	0.60		
	The hotel establishes explicit reward and punishment systems for safety	0.55		
	The hotel's safety incentive programs are useful for fostering safety performance	0.50		
	Total		47.91	

Source: Fieldwork, Asamoah, (2022).

Bartlett's Test of Sphericity (Approx. Chi-square) = 1691.273, p-value=0.00.

Kaiser-Mayer-Olkin Measure of Sampling Adequacy = 0.808.

The issues with hotel management showing an interest in employees' work and frequently reminding them to take necessary safety precautions, requiring that employees adhere to standard operating procedures, and prioritizing safety when

operation performance conflicts with safety comprised factor one (1), which is referred to as supervision. Other items were management's frequent promotion of safety regulations, supervision of and concern for employees at work, the hotel's periodic inspection of firefighting tools, machinery, and instruments, and management's periodic assessment of employees' safety-related attitudes for improvement. This factor accounted for 3.15 (18.51%) of the overall variance.

Factor two (2) is labelled as safety commitment. Safety commitment formed part of the factors or dimensions that make hotels' organizational safety culture. It included issues like; the hotel actively cares for employees hurt at work, assists their family members while employees are incapacitated, and encourages and adopts employee suggestions for improving health and safety. It also emphasizes the importance of carrying out our tasks safely. The hotel also views employee safety as one of its basic values and places little emphasis on preventing workplace accidents or enhancing workplace safety. A total of 2.53 (14.90%) of the variations were explained by these.

The last factor, which was labelled as safety reward and punishment explained 2.47 (14.55) of the total variance. The factors included things like the hotel rewarding employees for excellent work safety performance, the hotel punishing employees for breaking work safety rules regardless of the cause, the employees' lack of understanding of the hotel's reward and punishment system for work safety, and the effectiveness of the system in increasing safety. One of the variables was the hotel's safety reward programs, which are effective in promoting safety performance and include clear reward and punishment policies.



## Organisational Safety Culture

Organisational safety culture is one of the important things any organisation must consider as it helps to ensuring employee's safety at the workplace (hotel). The organizational domain of safety refers to perceptual factors within an organisation such as safety supervision, safety commitment, and safety reward and punishment (Kuo et al., 2020). Consequently, this section of the study examined the safety culture of hotels by inquiring from the employees. Employees work within the hotel environment daily and have direct experience with its safety practices, protocols, and overall culture. Their insights are grounded in firsthand observations and interactions (Basha & Maiti, 2013).

The organizational safety culture was assessed across three distinct dimensions, as outlined in the extant literature (Kuo et al., 2020; Srivastava, 2017, Glendon et al., 2016). These dimensions comprised supervision, safety commitment, and safety reward and punishment. Respondents were prompted to indicate their level of agreement with statements corresponding to each dimension, using a four-point Likert scale: 1 (Strongly Agree), 2 (Disagree), 3 (Agree), and 4 (Strongly Agree). They selected the most fitting option from the scale for each statement. In order to make the data easier to understand and interpret, a four-point Likert scale was condensed into a two-point Likert scale, denoted as "Disagree" and "Agree." As part of this conversion, responses categorized as "Strongly Disagree" and "Disagree" were consolidated into the "Disagree" category. Similarly, responses classified as "Strongly Agree" and "Agree" were combined under the "Agree" category. This transformation was

deemed necessary to enhance the comprehensibility and render their interpretation more accessible. It is noteworthy that other researchers (Amuquandoh, 2010; Adam & Amuquandoh, 2013) have previously employed a similar approach by collapsing response categories within the Likert scale into a two-point Likert scale. Importantly, these researchers found that this re-categorization did not compromise the quality of the data, emphasizing its validity and utility.

The results presented in table 8 displays a description of the results for each individual indicator item as well as the dimension. The result shows that overall, the majority (64.1%) of hotel employees agreed to supervision of implementation of organizational safety protocols. However, they disagreed more to safety commitment (50.86%) and safety reward and punishment (51.83%). Under supervision, the proportion of respondents who agreed to each of the individual items is significantly higher than those who disagreed. For instance, 67% of the respondents agreed to routine assessment of safety protocols. Similarly, more than half of the respondents agreed to hotel periodic inspection of firefighting devices (65.4%), management taking interest in reminding employees of necessary safety precautions (62.3%) and management requiring employees to follow standard operating procedures (67.8%).

**Table 8: Organizational Safety Culture**

Statements	Disagree (%)	Agree (%)
Supervision	35.9	64.1
The hotel management regularly advocate safety precautions	33.0	67.0
The hotel conducts routine inspections of its	34.6	65.4

firefighting tools, apparatus, and equipment.		
The hotel management periodically evaluate the safety attitude of the employees for improvement	38.3	61.7
When operating performance conflicts with safety, hotel management put safety first	39.6	60.4
The hotel's managers mandate that staff adhere to standard operating procedures (SOPs)	32.2	67.8
The hotel management take interest in reminding employees often of necessary safety precautions	37.7	62.3
Safety commitment	50.86	49.14
The hotel places a strong emphasis on the need for us to complete our responsibilities safely	40.9	59.1
The hotel places little emphasis on preventing workplace accidents or enhancing workplace safety	60.4	39.6
The hotel supports and takes on suggestions made by staff members regarding health and safety	56.8	43.2
The hotel actively cares for staff members during accidents	53.3	46.7
The hotel sees employee safety as one of its guiding principles	42.9	57.1
Safety reward and punishment	51.83	48.17
The safety reward measures of the hotel are helpful to promote safety performance	45.3	54.7
The hotel establishes explicit reward and punishment systems for safety	57.4	42.6
I don't fully comprehend the hotel's system of rewards and punishments for work safety	56.4	43.6
Regardless of the reason, anyone who violates work safety regulations faces consequences	54.3	45.7
The hotel commends employees with excellent work safety performance	49.7	50.3
I believe the reward-and-punishment system is a useful tool for enhancing safety	47.9	52.1

Source: Fieldwork. Asamoah, 2022

The results suggest that the management's efforts to enhance awareness of safety issues among employees are bearing fruit. The findings underscore the

management's commitment to fostering a safety-conscious environment. However, it is noteworthy that a considerable portion of employees (38.3%) expressed disagreement with the existence of effective supervision from directors and/or management as part of the organizational safety culture.

Contrary to the results regarding supervision, the findings reveal a different trend concerning safety commitment and safety reward and punishment. In the case of safety commitment, over half of the respondents expressed disagreement (50.9%), and a similar proportion disagreed with safety reward and punishment (51.2%). More than half of the respondents only agreed on two statements: that the hotel emphasizes accomplishing tasks in a safe manner (59.1%) and regards employee safety as a core enterprise value (57.1%). It is evident that most employees are not aligned with the statements measuring safety commitment. This implies that organizations might not be genuinely dedicated to prioritizing employee safety. This could be ascribed to elements like scarce resources for raising awareness and implementing effective safety procedures or principles. Furthermore, it might result from inadequate supervision by regulatory bodies such as the Ghana Tourism Authority (GTA), the Environmental Protection Agency (EPA), and other relevant agencies.

Similar to safety commitment, the results indicate that hotel management has not successfully established or executed safety-oriented reward and punishment systems as part of the organizational safety culture. This finding corroborates Glendon et al.'s research in 2016, where they found a lack of employment of the reward and punishment approach within hotels. Their

recommendation for managers to institute a transparent safety incentive system to encourage long-term behavioral changes in employees aligns with this observation. This failure to implement reward and punishment methods can also be attributed to limited financial resources and a lack of genuine commitment to safety.

### **Organisational Safety Culture by Employees' Background Characteristics**

There was the need to further examine the connection between background traits of individuals and organizational safety culture. In view of that table 9 explains how organisational safety culture and its dimensions were potentially related with employee's background characteristics. Overall, there exist statistically significant relationship between organisational safety culture and star rating of employees' hotel ( $X^2(4, 334) = 10.31, 0.04$ ) and employees' age ( $X^2(4, 334) = 9.22, 0.03$ ). This indicates that employees' knowledge on their hotels' organisational safety culture are related by star ratings of the hotel as well as their age.

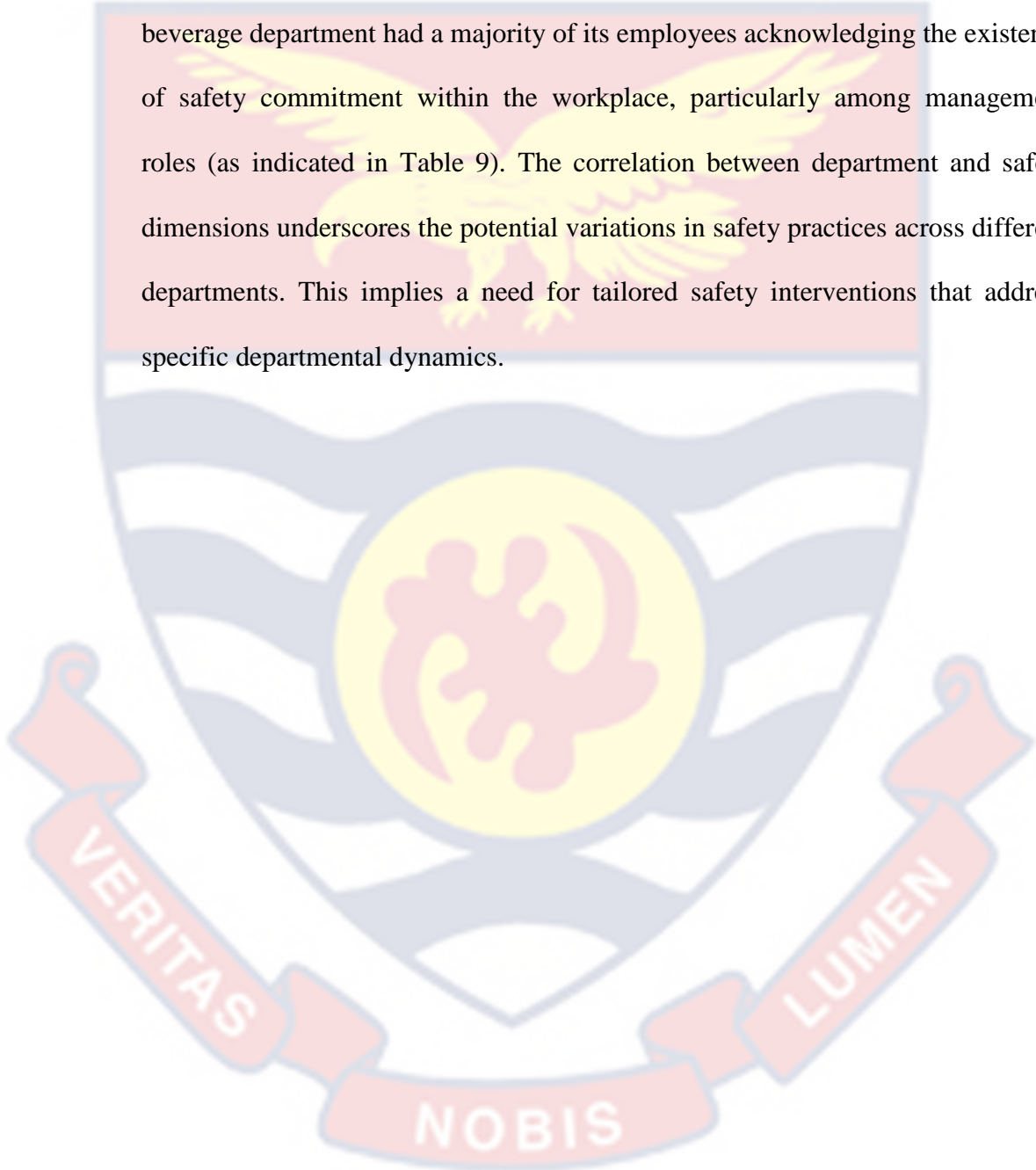
The results shows that the proportion of five-star hotel employees (87.5%) who believes that their hotels have and practice organisational safety culture are more than the workers compared to the other hotels with stars. In addition, the test revealed that whiles majority of all the age groupings are agreeing that their hotels have certain measures in place in a form of organisational safety culture to increase the employees' awareness on safety issues, employees between age 46 and 55 (71.4%) predominantly disagreed. Based on the generational cohort theory, people within such age bracket are less adventurous and are very mindful

of their health, perhaps, the reason why most of these people believe that their hotels are below the belt with respect to organizational safety culture.

There was no statistically significant relationship between organizational safety culture and the other socio-demographic characteristics. However an assessment of the findings shows that more males (56.9%) agreed that their hotels have organizational safety culture than females (54.5%). Similarly, the proportion of waiters/waitress (74.4%) who admitted that there is an organizational safety culture at their hotel were more than the proportion of the employees in other positions.

Expanding upon this, the analysis was further broken down according to the dimensions of organizational safety culture, namely supervision, safety commitment, and safety reward and punishment. Statistically significant relationships were established between supervision and employees' department ( $X^2(3, 334) = 14.00, p = 0.02$ ) as well as age ( $X^2(4, 334) = 10.20, p = 0.02$ ). This indicates that employees' perceptions of supervisory measures undertaken by their hotels to mitigate the impact of accidents, in cases where complete prevention is not possible, are influenced by both their department and age. For instance, employees aged 46 to 55 (57.1%) expressed that their respective hotels lack or have ineffective supervisory measures integrated as part of the organizational safety culture to enhance awareness about safety matters. Conversely, employees in all other age groups reported the presence of supervisory measures at their workplace (hotel).

Similarly, in relation to safety commitment, a significant correlation with employees' department was observed ( $X^2(4, 334) = 17.0, p = 0.00$ ), mirroring the findings in the supervision dimension. The data suggests that only the food and beverage department had a majority of its employees acknowledging the existence of safety commitment within the workplace, particularly among management roles (as indicated in Table 9). The correlation between department and safety dimensions underscores the potential variations in safety practices across different departments. This implies a need for tailored safety interventions that address specific departmental dynamics.



**Table 9: Relationship between Hotel Safety Culture and Background Characteristics**

Socio-demographics	Overall			Supervision			Safety Commitment			Safety Reward and Punishment		
	D (%)	A (%)	X <sup>2</sup> (sig)	D (%)	A (%)	X <sup>2</sup> (sig)	D (%)	A (%)	X <sup>2</sup> (sig)	D (%)	A (%)	X <sup>2</sup> (sig)
Star rating			10.31(0.04*)			4.77(0.31)			4.49(0.34)			12.81(0.01)
One-star	36.0	64.0		36.0	64.0		40.0	60.0		44.0	56.0	
Two-star	43.9	56.1		27.7	72.3		56.3	43.7		42.0	58.0	
Three-star	56.0	44.0		28.0	72.0		52.0	48.0		44.0	56.0	
Four-star	52.3	47.7		30.4	69.6		45.6	54.4		59.1	40.9	
Five-star	12.5	87.5		6.3	93.8		43.8	56.3		12.5	87.5	
Position			8.89(0.11)			6.28(0.28)			7.33(0.20)			15.94(0.01)
Manager	45.5	54.5		12.5	87.5		45.8	54.2		54.5	45.5	
Cook	48.7	51.3		28.0	72.0		59.1	40.9		38.1	61.9	
Room attendant	45.9	54.1		27.2	72.8		48.9	51.1		56.5	43.5	
Bar attendant	87.0	13.0		50.0	50.0		50.0	50.0		88.0	12.0	
Waiter(ess)	25.6	74.4		23.8	76.2		36.6	63.4		26.8	73.2	
Sex			0.98(0.61)			0.51(0.78)			2.42(0.30)			1.32(0.52)
Male	43.1	56.9		29.0	71.0		56.0	44.0		43.3	56.7	
Female	45.5	54.5		27.3	72.7		49.5	50.5		44.7	55.3	
Department			10.22(0.07)			14.00(0.02)			17.4(0.00*)			6.76(0.24)
Kitchen	46.1	53.9		24.4	75.6		56.6	43.4		38.5	61.5	
Housekeeping	47.4	52.6		23.6	76.4		52.5	47.5		49.6	50.4	
Front office	44.6	55.4		33.8	66.2		56.0	44.0		46.7	53.3	
F & B	21.7	78.3		22.6	77.4		24.1	75.9		41.4	58.6	
Age			9.22(0.03*)			10.20(0.02)			4.94(0.18)			1.53(0.68)
< 25 years	32.9	67.1		16.9	83.1		42.7	57.3		42.4	57.6	
25-35 years	49.5	50.5		32.0	68.0		55.0	45.0		45.9	54.1	
36-45 years	37.1	63.9		25.7	74.3		54.3	45.7		37.1	62.9	
46-55 years	71.4	28.6		57.1	42.9		71.4	28.6		57.1	42.9	

Source: Fieldwork, Asamoah, 2022. Sig<0.05. Note: D = Disagree; A = Agree



Furthermore, safety reward and punishment exhibited a noteworthy association with hotel star rating ( $X^2(4, 334) = 12.81, p = 0.01$ ) and employees' work positions ( $X^2(3, 334) = 15.94, p = 0.01$ ). The connection between safety reward and punishment and hotel star rating suggests that higher-rated hotels might prioritize safety incentives and penalties more effectively.

Overall, the relationship between knowledge on safety culture of employees and their demographics supports the proposition that organizational safety culture is influenced by employees' socio-demographic characteristics. It is noteworthy that all three-measurement dimensions (supervision, safety commitment, and safety reward and punishment) demonstrated statistically significant relationships with socio-demographics.

### **Employees Perceived Risk**

Risk perception is a personal assessment of a person. It integrates elements like sentiment, background information, and individual experience. To better understand how employees' perceptions of risk are formed in regard to workplace safety (hotel) concerns, risk perception among employees was evaluated.

Consequently, the employee perceived risks these three primary metrics were used to measure construct, that is, perceived job risk, perceived equipment and perceived management risk. Table 10 explains the scores of the individual indicator items as well as the structures. Hotel employees perceived risk were apprehended beneath the different structures on a Four-point Likert scale (1-strongly agree, 2-disagree, 3-agree, 4-strongly agree). Per each statement, respondents were asked to select an option on the scale to indicate whether or not

they agreed with it. However, the researcher collapsed the four-point Likert scale to two-point scale; this was done to deal with data skewness.

Based on the outcome, more than half (54.2%) of the hotel employees perceived their job to be risky. Specifically, the majority (54%) of the employees admitted that excessive workload could hurt them. In addition, about half (55%) agreed that injuries are bound to happen if rules are ben disobeyed and predominantly (59%) perceive that long-term hotel work may cause severe back pain. This established the fact that there a number of risks associated with the job at the hotel's workplace, thereby, needs to be critically addressed. This result could be due to the excessive workload in the hotel industry, which results to a number of stressors.

In addition, hotel employees majorly (56.8%) perceived the risk associated with equipment to be high. The majority of the employees said that ageing hotel facilities (59%), failure of hotel facilities (55%) and the lack of professional safety equipment (57%) might cause accidental injuries. It is explainable that the equipment and facilities used by employees at the workplace (hotel) are correlated with enormous risk. On the contrary, just 46 percent of the employees perceive management risk. This indicates that the majority of the hotel employees does not believe management activities are associated with risk, which can have an adverse effect on the safety of the employees at workplace. Looking at the results of the individual variables, it clearly shows that management have the necessary intervention in place to deal with emergencies.

**Table 10: Employees Perceived Risk**

Statement	Disagree	Agree
Perceived job risk	45.78	54.22
Customers that act inappropriately could harm me	50.6	49.4
A lot of work could be bad for my physique.	45.9	54.1
If I break the rules, I'll get hurt inadvertently.	44.7	55.3
Continual hotel work may result in excruciating back discomfort	41.1	58.9
I could get wounded by what my coworkers do.	46.6	53.4
Perceived equipment risk	43.23	56.77
Older hotel equipment could lead to accidents	41.0	59.0
Accidental accidents may result from inadequate hotel amenities	45.5	54.5
The absence of specialized safety equipment could result in accidents	43.2	56.8
Perceived management risk	52.98	46.48
The hotel places little value on emergency drills	50.9	46.4
Practical backup measures are lacking at the hotel	53.6	46.4
The hotel hardly ever issues job risk warnings.	58.9	41.1
Concerning the hotel's capacity for responding to emergencies	53.6	46.4
I am concerned about the hotel's capacity to prevent accidents at work	47.9	52.1

Source: Fieldwork. Asamoah, 2022

### Factors that account for Hotel Employees Perceived Risk

Following the evaluation of respondents' responses to certain criteria on perceived risk with means and standard deviation, afterwards, it was required to examine the fundamental elements of employees' perceived risk. This study was

necessary to determine the interrelationships among particular components, which is why EFA was necessary. It uses a reduced number of parts or components to try and minimize or summarize a big amount of data.

Thirteen (13) variables were included in the investigation, and Table 11 displays the results. Prior to implementing EFA in this study, the data's factorability and sample adequacy were checked to make sure all of the assumptions made by the EFA were met. Using the Kaiser-Meyer-Olkin (KMO) criterion of sample adequacy and Bartlett's test of sphericity, the data was factorable. The KMO index runs from 0 to 1, with 0.6 designated as the minimum number for a satisfactory EFA, but Tabachnick and Fidell (2001) state that the Bartlett's test of sphericity must be significant ( $p=0.05$ ) for the FA to be deemed adequate. The results of this analysis showed that the data was eligible for EFA based on the KMO score of 0.758 and the Bartlett's test of sphericity (1292.295), both of which were found to be highly significant ( $p=0.00$ ). Table 11 also lists the eigenvalues and factor loadings. It is advised to scrutinize a correlation matrix with a factor loading of at least 0.3, while factors or components with an eigenvalue of at least 1.0 are retained for additional study (Pallant, 200).

More significantly, the reliability of the scale and the degree to which the variables contributed to the factor's explanation were assessed using Cronbach's alpha. According to Pallant (2005), one should assess the extent to which each of the individual questions under the concept accurately measures it by looking at the Cronbach's alpha coefficient. She states that a Cronbach's alpha value of more than 0.7 indicates suitability.

**Table 11: Factors that account for Hotel Employees Perceived Risk**

Factor and observed variables	FL	EV	VE	Alpha
I Perceived Job/Equipment Risk		2.98	22.94	0.80
Long-term hotel work may cause severe back pain.	0.693			
I will be accidentally injured if I disobey the rules.	0.671			
A lot of work could be bad for my physique	0.649			
Failure of hotel facilities may cause accidental injuries.	0.635			
Older hotel equipment could lead to accidents	0.632			
The absence of specialized safety equipment could result in accidents	0.551			
My colleagues' improper behaviour may hurt.	0.486			
Customers that act inappropriately could harm me	0.462			
II Perceived Management Risk		2.95	22.65	0.79
The hotel lacks practical contingency plans.	0.807			
The hotel hardly ever issues job risk warnings	0.776			
I am worried about the hotels' emergency response capabilities.	0.727			
The hotel places little value on emergency drills	0.679			
I'm concerned about the hotel's capacity to prevent accidents at work	0.595			
Total			45.59	

Source: Fieldwork, Asamoah, (2022).

Bartlett's Test of Sphericity (Approx. Chi-square) = 1292.295, p-value=0.00.

Kaiser-Mayer-Olkin Measure of Sampling Adequacy = 0.758.

To further facilitate understanding of the findings, the factors were "rotated" so that several highly loaded variables represented the components. Using the varimax rotation, the thirteen (13) variables were reduced by the Principal Component Analysis (PCA) to two important underlying dimensions that explained the employees' perceived risk. 45.59% of the total variations were explained by the two uncorrelated factor-solutions combined. This result indicates that 54.41% of the variance may be explained by other factors. However, each of the components had a different contribution to the explanation of the total variance:

Factor one (1), referred to as perceived job/equipment risk, was made up of concerns about long-term hotel work may result in severe back pain; breaking the law may cause employees to be accidentally hurt; an excessive workload may be harmful to employees; old or malfunctioning hotel infrastructure may result in accidents; and a lack of professional safety equipment may result in accidents, colleagues' improper behavior may hurt, and custodial staff's improper behavior may hurt. This factor accounted for 2.98 (22.94%) of the overall variance explained. Second factor, or perceived management risk. Employees are concerned about the hotel's capacity to respond to emergencies, the hotel lacks workable contingency plans, the hotel rarely issues warnings about job risks, the hotel does not place a high priority on emergency drills, and employees are concerned about the hotel's capacity to prevent work-related injuries. The factors collectively accounted for 2.95 (22.65%) of the variations.

## Relationship between Employee Perceived Risk and Background Characteristics

This section examines the employees' perception on the risks associated with their work, based on their background characteristics. Here, the independent chi-square was deemed very useful in this exercise, that is, to test for the link between perceived risk and employees' background qualities. The results are presented in Table 12. Generally, there is a statistically significant relationship between employees' perceived risk and hotel star ratings ( $X^2(4, 334) = 15.6, 0.00$ ), implying that employees' perception on the risk on their work depends on the type of hotel (star rating) he or she is working with. This further explains that the star rating of employees' hotels may have the tendency to determine the risk level at the workplace. For instance, the proportion (93.8%) of five-star hotel employees who are risk-averse are more than other employees are. This could be because management of upscale hotels prioritise the safety of their employees and customers, hence, employees view every little thing as risk in order to prevent accidental injuries.

Not statistically significant relationship was observed between employee perceived risk and position, sex, department and age of the employees. This indicates that employees' perception on risk at the workplace were not based on these background characteristics. Their beliefs on risk are not moderated by any of the above-listed background characteristics. However, it was revealed that more waiters/waitress (61%) have higher risk perception as opposed to the other employees. For sex, more males (59.8%) perceived risk at the hotel higher than their female (52.6%) counterparts did. As regards employees' age, the test shows

that the proportion of employees within age 36 to 45 rate the risks at the workplace (hotel) higher than their colleagues who falls within other age groupings (Table 12).

A further cross tabulation analyses was conducted on the individual risks at the hotels' workplace against the background characteristics to understand how employees' perception on the two dimensions are shaped by their characteristics. For employee job and equipment risk, the test revealed a statistically significant relationship against star ratings ( $X^2(4, 334) = 12.41, 0.02$ ), indicating that employees' perception on job and equipment risks are shaped by the star ratings of their respective hotels. Meanwhile, there is no discernible link between sex and perceived job risk, however, it is established that more males (75%) perceived job and equipment risk more than female employees (64%) did. Similarly, there are no significant relationship between employee perceived job and equipment risk and employees' position, department and age. This is explainable that, employees' perception on job and equipment risk are not related in terms of positions, department and age.

Same as job and equipment risk, there is statistically significant relationship between perceived management risk and hotel star ratings ( $X^2(4, 334) = 12.41, 0.02$ ). No significant relationship was established between perceived management risk and employees' position, department and age. It seems that the only sociodemographic factor that significantly correlated with perceived risk overall and on both dimensions—perceived job risk and perceived management risk—was the respondents' star rating.



**Table 12: Relationship between Employee Perceived Risk and Background Characteristics**

Socio-demographics	Overall			Perceived Job/Equipment Risk			Perceived Management Risk		
	D (%)	A (%)	X <sup>2</sup> (sig)	D (%)	A (%)	X <sup>2</sup> (sig)	D (%)	A (%)	X <sup>2</sup> (sig)
Star rating			15.55(0.00*)			12.41(0.02)			22.88(0.00*)
One-star	24.0	76.0		16.0	84.0		76.0	24.0	
Two-star	44.4	55.6		37.7	62.3		54.2	45.8	
Three-star	52.0	48.0		28.0	72.0		32.0	68.0	
Four-star	49.2	50.8		38.8	61.2		53.8	46.2	
Five-star	6.3	93.8		5.0	85.0		86.1	13.9	
Position			9.59(0.09)			8.37(0.14)			1.54(0.91)
Manager	63.6	36.4		50.0	50.0		66.7	33.3	
Cook	40.0	60.0		25.0	75.0		54.7	45.3	
Room attendant	53.5	46.5		37.5	62.5		58.2	41.8	
Bar attendant	50.0	50.0		19.6	80.4		50.0	50.0	
Waiter(ess)	39.0	61.0		31.0	69.0		53.7	46.3	
Sex			2.01(11)			4.58(0.10)			1.54(0.46)
Male	40.2	59.8		20.0	80.0		53.3	46.77	
Female	47.4	52.6		35.8	64.2		58.2	41.8	
Department			1.66(0.89)			2.92(0.71)			5.50(0.36)
Kitchen	43.4	56.6		24.7	75.3		53.2	46.8	
Housekeeping	47.1	52.9		35.8	64.2		60.7	39.3	
Front Office	43.7	56.3		30.6	69.4		60.8	39.2	
F & B	46.4	53.6		45.0	55.0		40.0	60.0	
Age			4.75(0.19)			2.01(0.57)			0.79(0.85)
< 25 years	40.7	59.3		28.9	71.1		55.2	44.8	
25-3ars	48.3	51.7		33.8	66.2		57.8	42.2	
36-4s	29.4	70.6		22.9	77.1		50.0	50.0	
46-55 years	42.9	57.1		28.6	71.4		57.1	42.9	

Source: Fieldwork, Asamoah, 2022

### Employee Well-being

Well-being is a positive outcome that is meaningful for people and for many sectors of society (He, Morrison & Zhang, 2019). This was measured based on two dimensions, these are psychological wellness and physical wellness. Overall, a little above half (58.8%) of the employees said that they are psychologically fit. On the specific measures, about 64 percent of them admitted not feeling anxious when thinking about their work. In addition, 54 percent of the employees also claimed they are comfortable with the challenges associated with their work. Nearly 60 percent of them were looking forward to do their job with joy always (Table 13). These sums up that majority of hotels employees are psychologically upright.

**Table 13: Employee Well-being**

Statement	Disagree (%)	Agree (%)
Psychological wellness	41.18	58.83
I enjoy my work as an employee in this hotel	42.2	57.8
I do not feel anxious when thinking about my work	35.8	64.2
I am comfortable with the amount of challenge in my work	46.2	53.8
I look forward to doing my job with joy always	40.5	59.5
Physical wellness	42.63	57.37
My physical health condition is excellent	40.8	59.2
My body seems to resist illness effectively	46.7	53.3
Compared to others, my physical health has been excellent in the past	40.4	59.6

Source: Fieldwork, Asamoah, 2022

On physical wellness, more than half (57.4%) of the employees agreed to physical wellness, implying that they are physically strong for the job they do. Specifically, a majority (59.2%) reported that their physical health is excellent, similar to those who claimed that their body seem to resist illness effectively (53.3%). These can be associated to many reasons; one of these reasons could be the distribution of the respondents. About 80 percent of the employees are less than or equal to 35 years, and people within this age bracket are mostly physically strong and psychologically sound.

### **Relationship between Employee Well-being and Background Characteristics**

Given that the conceptual framework supporting the research established an indirect relationship between the respondents' background characteristics and well-being, it becomes necessary to find out if well-being is related with the employees' background characteristics. With this, the independent chi-square test was used again to test for the relationships between employee well-being and background characteristics. The results revealed there exist a statistically significant relationship between overall employee wellbeing and sex ( $X^2(4, 334) = 18.17, 0.00$ ) and age ( $X^2(3, 334) = 9.68, 0.02$ ). A probe of the results shows that the proportion of females (96%) who reported healthy are more than that of the males (91%). For age, the proportion of employees who are less than 25 years (98%) and 25-35 years (94%) were identified to be healthier than those between 36 and 45 (89%) and 46 and 55 years (71%).

**Table 14: Relationship between Employee Well-being and Background Characteristics**

Demographics	Overall			Psychological wellbeing			Physical wellbeing		
	D (%)	A (%)	X <sup>2</sup> (sig)	D (%)	A (%)	X <sup>2</sup> (sig)	D (%)	A (%)	X <sup>2</sup> (sig)
Star rating			6.03(0.20)			5.40(0.25)			5.36(0.25)
One-star	16.0	84.0		16.0	84.0		32.0	68.0	
Two-star	5.5	94.5		15.4	84.6		20.3	79.7	
Three-star	50.0	50.0		15.0	85.0		12.0	88.0	
Four-star	7.5	92.5		13.4	86.6		13.0	87.0	
Five-star	6.3	93.8		6.3	93.8		18.8	81.3	
Position			2.92(0.71)			2.20(0.82)			11.90(0.04)*
Manager	8.3	91.7		16.7	83.3		25.0	75.0	
Cook	5.9	94.1		11.9	88.1		22.9	77.1	
Room attendant	3.4	96.6		13.3	86.7		10.9	89.1	
Bar attendant	50.0	50.0		50.0	50.0		50.0	50.0	
Waiter(ess)	9.8	90.2		19.5	80.5		9.5	90.5	
Sex			18.17(0.00)*			7.51(0.02)*			7.47(0.02)*
Male	9.0	91.0		15.6	84.4		23.4	76.6	
Female	4.0	96.0		11.6	88.4		15.6	84.4	
Department			1.98(0.85)			1.35(0.93)			9.99(0.08)
Kitchen	6.7	93.3		15.8	84.2		24.7	75.3	
Housekeeping	4.9	95.1		13.9	86.1		13.0	87.0	
Front office	6.8	93.2		12.2	87.8		20.0	80.0	
F & B	6.5	93.5		12.9	87.1		16.1	83.9	
Age			9.68(0.02)*			1.54(0.64)			12.05(0.01)*
< 25 years	2.4	97.6		14.0	86.0		11.4	88.6	
25-35 years	6.3	93.7		13.1	86.9		19.3	80.7	
36-45 years	11.4	88.6		11.4	88.6		28.6	71.4	
46-55 years	28.6	71.4		28.6	71.4		57.1	42.9	

Source: Fieldwork, Asamoah, 2022

But no significant relationship was observed between employee wellbeing and star ratings, positions and department of hotel employees. This means that employees' psychological and physical wellbeing are not informed by these socio-demographic characteristics.

A statistically significant relationship was established between psychological wellbeing and sex ( $X^2(4, 334) = 12.41, 0.02$ ), same as physical wellbeing and sex ( $X^2(4, 334) = 7.47, 0.02$ ), position ( $X^2(4, 334) = 11.90, 0.04$ ) and age ( $X^2(4, 334) = 12.05, 0.01$ ). The implication of the outcome is that employees' psychological and physical wellbeing are both shaped by their sex of the individual. Separately physical wellbeing is also correlates with the individual's sex, position and age. For instance, the test shows that more females (88%) are psychologically stable than males (84%).

### **Relationship between Safety Culture and Employee Well-being**

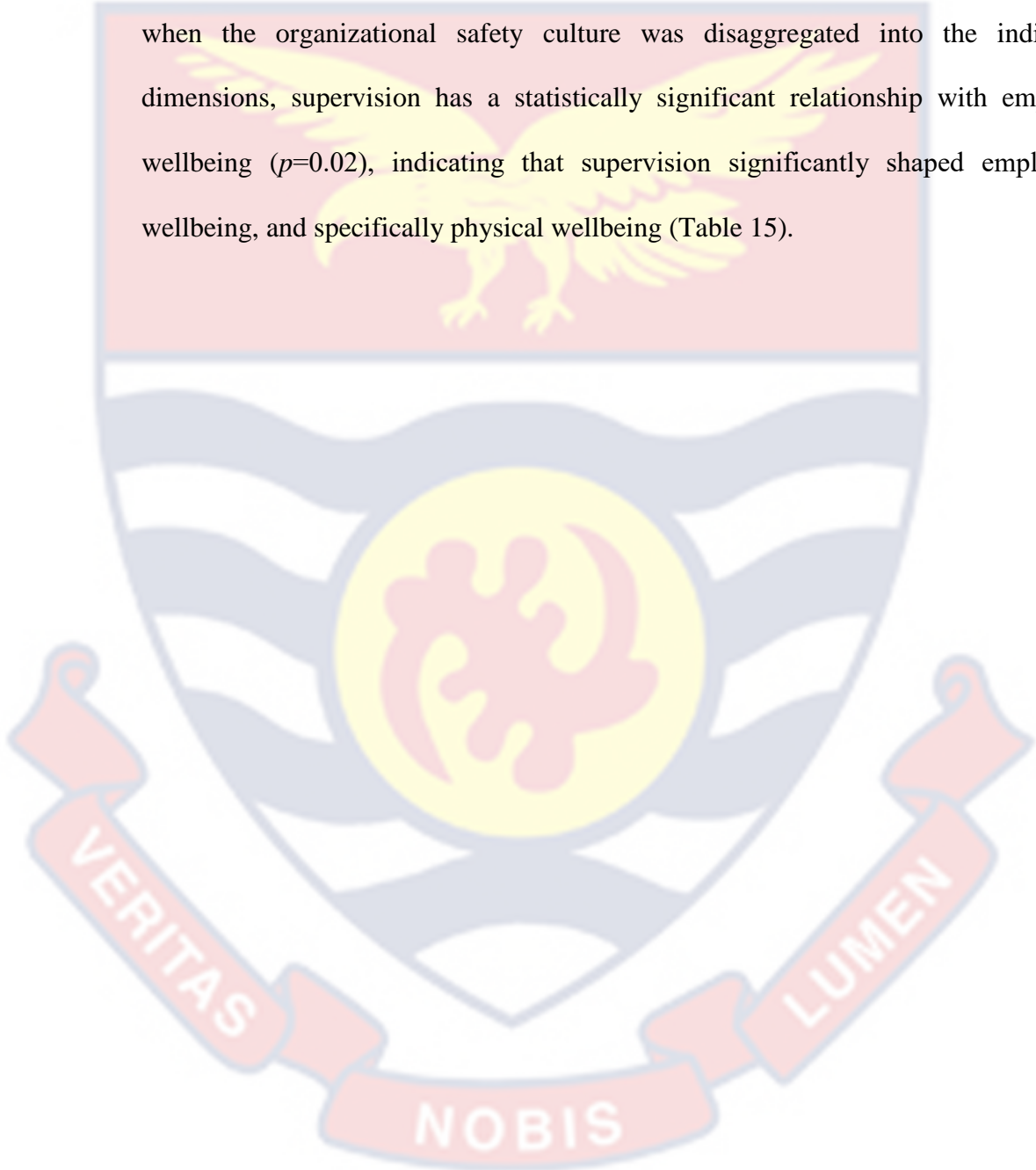
According to the literature, it is understood that the organization safety culture of the hotel could have an effect on the wellbeing of its employees. In addition, employee well-being has long been recognized as a characteristic of healthy firms and has far-reaching consequences for organizations (Ilies et al., 2015), including increased employee productivity. In view of that this part of the analysis explored the relationship between organization safety culture and employees' wellbeing using a chi-square test of independence (Table 15). The results indicate the wellness of employees and company safety culture do not statistically significantly correlate ( $p=0.41$ ).

**Table 15: Relationship between Organizational Safety Culture and Employee Well-being**

Organisational safety culture	Employee wellbeing			Psychological wellbeing			Physical wellbeing		
	D (%)	A (%)	X <sup>2</sup> (sig)	D (%)	A (%)	X <sup>2</sup> (sig)	D (%)	A (%)	X <sup>2</sup> (sig)
Organisation safety culture			0.68(0.41)			0.03(0.86)			1.36(0.24)
Disagree	8.0	92.0		13.8	86.2		22.1	77.9	
Agree	5.7	94.3		13.1	86.9		16.9	83.1	
Supervision			9.18(0.02)*			2.92(0.09)			7.92(0.01)*
Disagree	12.8	87.2		19.1	80.9		28.7	71.3	
Agree	3.8	96.2		11.3	88.7		15.3	84.7	
Safety commitment			0.97(0.33)			0.34(0.56)			1.82(0.19)
Disagree	7.7	92.3		14.2	85.8		22.2	77.8	
Agree	5.1	94.9		12.0	88.0		16.4	83.6	
Safety reward and punishment			0.68(0.41)			1.88(0.17)			0.78(0.38)
Disagree	7.7	92.3		16.7	83.3		20.5	79.5	
Agree	5.4	94.6		11.4	88.6		16.8	83.2	

Source: Fieldwork, Asamoah, 2022. Note: D = Disagree; A = Agree

In other words, organizational safety culture does not shape employees' wellbeing. This further explains that, how well employees are, both psychologically and physical cannot be associated with the organization safety culture. However, when the organizational safety culture was disaggregated into the individual dimensions, supervision has a statistically significant relationship with employee wellbeing ( $p=0.02$ ), indicating that supervision significantly shaped employees' wellbeing, and specifically physical wellbeing (Table 15).



## CHAPTER FIVE

### SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

#### Introduction

The conclusion for the study which provides a summary of the entire thesis, is presented in this chapter. The chapter summarizes the key discoveries and makes inferences from the data. Then, suggestions are given for enhancing employee wellbeing and organizational safety culture in the city of Accra's star hotels.

#### Summary

The general objective of the study is to assess the relationship between safety culture, perceive risk, and employee well-being among Star-Rated Hotels in the Accra Metropolis.

The specific objectives of the study were to;

1. Assess the safety knowledge of hotel employees.
2. Examine the safety culture of hotels.
3. Examine hotel employees' perceived risk.
4. Assess the relationship between safety culture of hotels and employee well-being.

A quantitative research design was used to conveniently collect data from 338 hotel employees using a using a cross-sectional research design. The data was then analysed using both descriptive and inferential statistics using IBM SPSS version 25. Among the descriptive statistical displays were bar and pie charts, frequency tables, means, and standard deviations. To determine the extent to which particular important



components or dimensions accounted for the variation explained, factor analysis was performed. Following that, the association between the important variables and the sociodemographic traits of the workforce was examined using the chi-square test of independence. Furthermore, in order to ascertain the connection between corporate safety culture and employee wellbeing.

### **Main Findings**

On knowledge, overall, it was established that a little more than half (58%) of the employees reported having higher knowledge in safety issues, which was largely informed by the hotels' star ratings ( $p=0.00$ ). Regarding organizational safety culture, supervision accounted for the highest agreement proportion (64%), followed by safety commitment (49%) and safety reward and punishment (48%). Using the varimax rotation, the Principal Component Analysis (PCA) kept the three (3) main underlying dimensions or factors although xx variables did not meet the required loading thresholds as such were dropped. When combined, these variables explained 47.91% of the total variance. With supervision (18.51%) accounting for the highest percentage followed by safety commitment (14.90%) and safety reward and punishment (14.55%).

There exists a statistically significant relationship between organizational safety cultures and socio-demographic characteristics. Supervision had a relationship with employees' age ( $p=0.03$ ) and department ( $p=0.02$ ) while safety commitment was related among employee's department ( $p=0.00$ ). Safety reward and punishment was also shaped by employees' hotels' star ratings ( $p=0.01$ ) and position ( $p=0.01$ ).

As regards employees' perceived risk, it was observed that majority of the employees' perceived equipment risk (57%) as the highest, followed by perceived job risk (54%). These dimensions based on the PCA accounted for 45.59% of the total variance explained, which suggests about 54% unexplained variation in perceived risk. To be more precise, 22.94% of the overall variance explained was attributed to perceived job/equipment risk and 22.65% to perceived management risk. Relationship was established between employee perceived risk and respondents' socio-demographic characteristics. Perceived job/equipment risk and perceived management risk were related to respondents' hotel star ratings ( $p=0.02$  and  $p=0.00$ , respectively).

Employee well-being was measured with two main dimensions and it was observed that the proportion (59%) of employees that are psychologically healthier are more than the proportion for physical wellness (57%). The association between the socio-demographic traits and the well-being of employees was statistically significant. Psychological wellness related among males and females ( $p=0.02$ ). In addition, physical wellness has a significant relationship with age ( $p=0.01$ ), position ( $p=0.04$ ) and sex ( $p=0.02$ ) of the respondents. Organizational safety culture and employee well-being were shown to have no statistically significant association ( $p=0.41$ ).

## Conclusions

Based on the objectives of the study and the ensuing findings presented, the following conclusions are drawn:

It can be concluded that hotel employees have relatively higher knowledge in safety issues, which is been influenced by the hotels' star

The Principal Component Analysis (PCA) identified three main dimensions (supervision, safety commitment, and safety reward and punishment) that together explained 47.91% of the total variance. It is concluded that supervision is adopted by most of the star-rated hotels in AMA as part of their safety strategies. It can also be concluded that safety culture (supervision, safety commitment, and safety reward and punishment) is shaped background characteristics of the employees

Also, star-rated hotel employees perceive that work to be associated with equipment/risk job risk. The employees' perceptions were related to employee's hotel star ratings. Again, it can be concluded that star-rated hotel employee is more concerned about their psychological wellness, which is related to gender and physical wellness, which are related to age, position, and gender of the respondents.

### **Recommendation**

Based on the main results and findings of the study, the following suggestions are offered:

It is recommended for hotel authorities to emphasize and implement organizational safety culture, particularly focusing on safety knowledge and supervision.

Hotel owners and managers should come out with a scheme and/or programme to reward employees with excellent safety-related work performances and punish those who violate safety rules, since it was revealed that safety reward and punishment, as an organization safety culture, is ineffective in many hotels. This can help protect the employees from job related injuries and accidents, in effect reducing the hotels' cost on hospitalization.

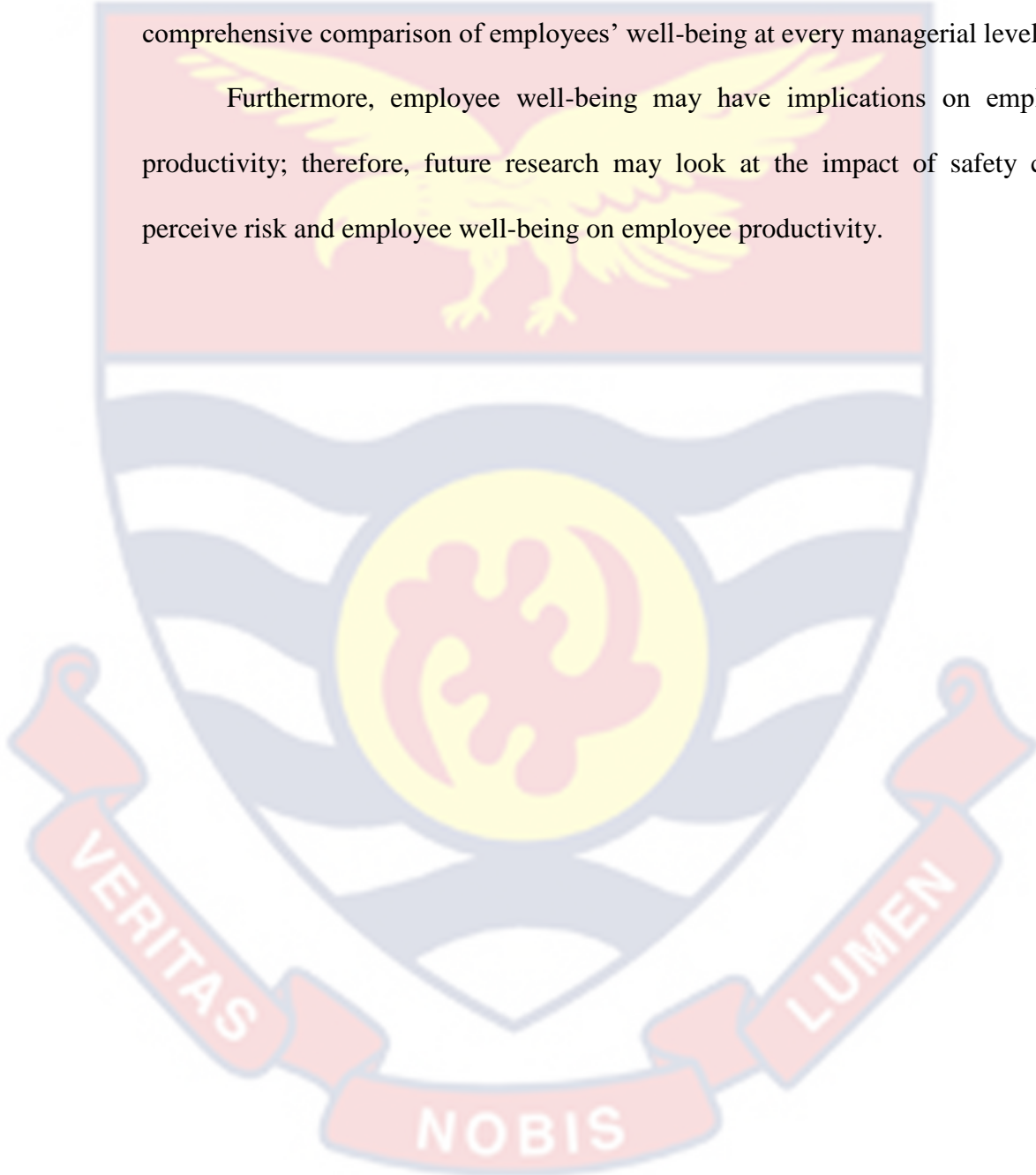
The Ghana Tourism Authority must ensure that every hotel has an emergency response team that have expertise to deal with accidents, in addition to this; they must ensure hotels have emergency control units at the facilities. Since it was revealed, by the employees, that there are lot of risks associated with their job and the equipment they use.

Further attention should be given to addressing specific perceived risks, such as equipment and job-related concerns, to enhance overall employee well-being. Lastly, having known that organizational safety culture has an impact on the well-being of the employees, it is therefore, recommended to hotel authorities to have an organizational safety culture and ensure that these cultures are imbibed across all employees, and lived by each and every one of the employees to enhance their productivity.

### Suggestions for further research

The study evaluated employee well-being, perceived risk, and safety culture in star-rated hotels in the Accra metropolitan area. A further study could focus on a comprehensive comparison of employees' well-being at every managerial level.

Furthermore, employee well-being may have implications on employees' productivity; therefore, future research may look at the impact of safety culture, perceive risk and employee well-being on employee productivity.



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## APPENDIX

UNIVERSITY OF CAPE COAST  
COLLEGE OF HUMANITIES AND LEGAL STUDIES  
FACULTY OF SOCIAL SCIENCES

## DEPARTMENT OF HOSPITALITY AND TOURISM MANAGEMENT

**QUESTIONNAIRE: ORGANIZATIONAL SAFETY CULTURE AND  
EMPLOYEE WELL-BEING AMONG STAR-RATED HOTELS IN THE  
ACCRA METROPOLIS**

I am currently undertaking a study aim at exploring organizational safety culture and employee well-being among employees in star-rated hotels in the Accra Metropolis in addressing the stated aim; I am conducting a survey to solicit information.

This study is solely for academic purposes and your responses will be treated as STRICTLY CONFIDENTIAL. Participating organizations will be provided with the findings of the study upon request.

I would like to thank you for accepting to assist and cooperate towards this study.

**SECTION A: DEMOGRAPHICS**

**\*Each question requires only one response**

1. Hotel star rating: .....
2. Position of respondent: .....
3. Age .....
4. Gender
  - Males
  - Females
5. How long have you been working with the hotel? .....
6. Please indicate your department? (E.g. Kitchen, housekeeping etc.)
7. What in your understanding is Organizational safety culture (Tick as many as applied)?

- Safety of workers
- Safety within the organization
- Welfare of workers and management
- Welfare of the workplace
- Safety of workers, management & third party

8. . What are some of the safety measures that are put in place in this hotel?

- Effective monitoring of safety standards and workers compliance
- Provision of protective clothing and equipment
- Regular safety training
- Other .....

**SECTION B: ORGANIZATIONAL SAFETY CULTURE AND EMPLOYEYEE WELLBEING ASSESSMENT INSTRUMENT.**

**Kindly indicate your extent of knowledge on the following issues using the the scale**

SN	VARIABLES	Low	High
A	<b>SAFETY KNOWLEDGE</b>		
1	I understand the hotel safety procedures		
2	I know how to handle issues in instances of accidents		
3	Employees are trained to operate safely		
4	I know the structured safety procedures put in place by the hotel		
5	I understand emergency procedures in the event of accidents		
6	If an accident occurs in the hotel, I know how to handle it		
7	As a hotel employee, I am aware of my operation scope of safety		
8	In the event of a serious mishap like a fire, I am familiar with the hotel's emergency exits		
9	Aware of the system for hotel safety reporting		

The alternatives are practices of hotel. Kindly rank the following variables according to how you experience it in your hotel, Using:

**1 = Strongly Disagree, 2 = Disagree, 3 = Agree and 4 = Strongly Agree**

SN	ORGANIZATIONAL SAFETY CULTURE	1	2	3	4
<b>Supervision</b>					
1	The hotel management regularly advocate safety precautions.				
2	The hotel conducts routine inspections of its firefighting tools, apparatus, and equipment.				
3	The hotel management periodically evaluate the safety attitude of the employees for improvement				
4	When operating performance conflicts with safety, hotel directors put safety first.				
5	The hotel's managers mandate that staff adhere to standard operating procedures (SOPs).				
6	The hotel managers are interested in reminding employees often of necessary safety precautions.				
7	The hotel places a strong emphasis on the need for us to complete our responsibilities safely.				
8	The hotel places little emphasis on preventing workplace accidents or enhancing workplace safety.				
9	The hotel supports and takes on suggestions made by staff members regarding health and safety.				
10	The hotel actively cares for staff members during accidents.				
11	The hotel sees employee safety as one of its guiding principles.				
<b>Safety reward and punishment</b>					
1	The safety reward measures of the hotel are helpful to promote safety performance				
2	The hotel establishes explicit reward and punishment systems for safety				
3	I don't fully comprehend the hotel's system of rewards and				

	punishments for work safety				
4	Regardless of the reason, anyone who violates work safety regulations faces consequences				
5	The hotel commends employees with excellent work safety performance				
6	I believe the reward-and-punishment system is a useful tool for enhancing safety				
<b>EMPLOYEES PERCIEVED RISK</b>					
<b>Perceived job risk</b>					
1	Customers that act inappropriately could harm me				
2	A lot of work could be bad for my physique.				
3	If I break the rules, I'll get hurt inadvertently.				
4	Continual hotel work may result in excruciating back discomfort				
5	I could get wounded by what my coworkers do.				
<b>Perceived equipment risk</b>					
1	Older hotel equipment could lead to accidents.				
2	Accidental accidents may result from inadequate hotel amenities.				
3	The absence of specialized safety equipment could result in accidents.				
<b>Perceived management risk</b>					
1	The hotel places little value on emergency drills.				
2	Practical backup measures are lacking at the hotel.				
3	The hotel hardly ever issues job risk warnings.				
4	Concerning the hotel's capacity for responding to emergencies				
5	I'm concerned about the hotel's capacity to prevent accidents at work.				
<b>EMPLOYEE WELLBEING</b>					

1	I enjoy my work as an employee in this hotel				
2	I do not feel anxious when thinking about my work				
3	I am comfortable with the amount of challenges in my work				
4	I look forward to doing my job with joy always				
8	My work is consistent with my goals.				
9	My physical condition is very excellent				
10	My body seems to resist illness effectively				
11	Compared to others, my physical health has been excellent				

Thank you

