

ABSTRACT

A descriptive cross sectional study was carried out to determine the factors associated with the use of important Health Legislation (HL) by Public Health Inspectors (PHI) in the Western Province.

All field PHI (Range PHI) attached to Provincial Ministry and Central Government were selected for this study. The study population consisted of 226 PHI who fulfilled the eligibility criteria.

A Key Informant Survey was carried out to identify the most important HL in relation to the duties of PHI. A self-administered questionnaire was used to collect basic socio-demographic and service information, determine "self competency", identify constraints and to identify "methods of empowering" PHI on implementation of HL. To determine the degree to which HL have been implemented, a data extraction schedule was used among a 10% sub sample of the study population.

Among the different types of HL used by PHI, Food Act was selected as the most important legislation. Public Health Inspectors were relatively more self-competent in Food Act than the other legislation with regard to use of these legislation.

Non authorization of power to the PHI was identified as the leading constraint experienced by PHI in carrying out their duties with regard to Health

Legislation. When the degree of "Put into practice" of HL was considered, Food Act received the highest performance compared to other legislation.

Making all Health Legislation with amendments freely available to them and the provision of systematic in-service training on Health Legislation was regarded as important methods of empowering PHII in improving the level of implementation of Health Legislation.