

Is Safety and Health, Harassment an Issue for Cabin Crew? - Analysis

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Abstract

The study focuses on health issues and harassment faced by cabin crews of various airlines. Some of the problems faced by cabin crews of various airlines are mostly of health related issues and harassment or misbehaviour of passengers. Health related issues for cabin crew include cancer, exposure to radiation, injuries in musculoskeletal, reproductive disorders etc. Harassment and misbehaviour of passengers has included sexual assault, inappropriate touching and horrifying comments. The descriptive research design was used in this study. Sample has been collected from cabin crews of various airlines. The sampling method used in this study was Convenience sampling. Sample size is 100. Statistical analysis was done using SPSS software. This study helps in identifying the main reason that is creating health and harassment problems faced by cabin crews and also provide suggestions to reduce the problems faced by cabin crews in their work place.

Key-words: Cabin Crew, Health Issues, Passengers, Harassment, Problems, Work Place, Airlines.

1. Introduction

Flight attendants/cabin crews are being employed by the airlines board of commercial flights, in order to ensure the safety and comfort of passengers. Flight attendants are being developed in commercial flights and they are also present on some private business jets and government or military aircraft. The role of a cabin crew has been derived from that of similar positions on passenger ships or passenger trains but the important challenge is that, it has more direct involvement with passengers because of the confined quarters on aircraft.

Cabin Crew Milestones Female Flight Attendants

- Ellen church, a registered nurse, 25 year old was the first female flight attendant.
- Various other airlines followed the suit, they also hiring nurses to serve as flight attendants, who were then called as "stewardesses" or "air hostesses", on most of their flights.
- They rapidly replaced male ones, and by 1936, everyone has taken their role.

Requirements of Cabin Crew

A New York Times article described the requirements:

- The girls who qualify for hostesses must be diminutive;
- The Weight of the cabin crew must be between 45 to 53 kg.
- Height must be between 152 cm to 164 cm.
- Age must above 20 years and below 26 year
- They must undergo rigid physical examination for four times in a year. It is done in order to ensure good health conditions.

Issues of Cabin Crew

Cabin crew is being emerged as one of the important professions in the world. They are trained to perform safety operations on aircraft and also to serve the passenger. The characteristics needed to become cabin crew are self-confident, gracious, quick thinking, pleasing, and being calm. Most of the passengers and common people opinion about cabin crew's job is to put-on the uniform, be polite with the passengers, serve food and drinks on-board, having a lot of leisure time, will enjoy in seeing new places, having friends all around the world. But to be practical, for a 2 minutes of fascination there are more hours of hard work, which might also affect health.

Research Problem

The flight attendants are the only persons in the aircraft who is being engaged in intense physical activities at reduced oxygen levels. So it is envisioned that health hazards of cabin crew may differ significantly from those of pilots and also passengers. The harassment is the other major

problem faced by cabin crews. They are also regularly endured sexual harassment and assault by unmannerly passengers. It is found that 65% of cabin crews have faced sexual harassments based on the survey conducted by Australian airlines. Also one in five crews have reported more than 10 incidents of sexual harassment in their careers so far, reported by “The Transport Workers' Union” (TWU). Another survey of 419 cabin crew has found that 65% of cabin crew had been harassed by either a fellow worker or a passenger. These results are really shocking and worrying. This shows that airlines are not taking the problem seriously and are not supporting workers when they are faced with what are daily assaults on them. It is clear that a culture exists at airlines to ignore the problem of cabin crew and at worst they are protecting the wrongdoers. As cabin crews they are trained to deal with befuddled or dissatisfied passengers and emergencies that included a fire accident, an evacuation, a hijack and a medical emergency. To safeguard the women workers from harassments in 2013, the Sexual Harassment of Women at Workplace Act was passed in India, forcing all the airlines to implement a sexual harassment policy and constitute internal complaints committees to investigate reported incidents. But then the recent research says there have been no changes or improvement in such situation or problems even after implementation of several policies, laws, and rules by the government as well as the DGCA (director general of civil aviation).

2. Literature Review

According to Blettner. M. et.al (2002) in his study is exposed to several potential occupational hazards, including cosmic radiation. It is also known about the mortality pattern and cancer risk of the cabin crews. A historical cohort study has been conducted among cabin attendants, employed by two German airlines in 1953 and later. They also computed the standardized mortality ratios (SMRs) for specific causes of death using German population rates. It was evaluated with Poisson regression.

Bottollier-Depois. J.F et all (2003) in their study about the assessment of exposure to cosmic radiation on board aircraft have found that, the cosmic radiation particle flux increases with altitude and latitude and depends on the solar activity. The exposure of cosmic radiation has been estimated on several airlines using all routes on board subsonic and supersonic aircrafts. Measurements have been made with a tissue equivalent proportional counter using the microdosimetric technique to exemplify the effect of these parameters.

Ballard. T.J et all (2006), in their study have studied about the Self perceived health and mental health among women flight attendants. This was the first study to characterize workplace

abuse and harassment and its relation to health among female customer-facing workforce. There were strong associations with health outcomes creates importance to the study saying how the workplace policies can be changed to alleviate predominant exploitations. The medical practitioners could also consider about how to handle people and jobs with high emotional labor demands may influence people to adverse health outcomes. They also should educate patients concerning their emotional/corporal responses. They also should be taught about the managing strategies, and how to be aware of signs of anguish in patients working in such jobs in order to direct them to the fitting treatments and healings.

According to Lauria. L et all (2006), in their study about “**Reproductive disorders among female flight attendants**” have found that the Work-related exposures among female aircrew creates adverse pregnancy outcomes and menstrual disorders. The study has been conducted through a cross-sectional health survey among an occupational regiment of current and former flight attendants using a postal questionnaire method. They also included items on pregnancy outcome, menstrual physiognomies, unproductiveness etc. in their questionnaire.

3. Objectives of the Study

Primary Objectives

- To study about the health issues and harassment problems faced by the cabin crew from various airline in the current generation and also compare the improvements made after reporting such problems.
- To provide suggestion to reduce and also to avoid the health related issues and harassment problems faced by cabin crew to provide a positive work place to them.

Secondary Objectives

- To analyze various safety measures that can be taken to reduce the health issues and harassment problems faced by cabin crews to provide a safe work place.
- To know the cabin crews opinion on how to provide a safer and healthier work place for them to work in by taking various effective actions and following standardized rules and regulations.

4. Research Methodology

In this study we have used Google forms to collect answers from the passengers through online and a total of 100 sample data's have been collected.

Hypothesis of the Study

Health Assurance

H0 -- There is no significant relationship between Cabin Crew safety and Health Assurance.

H1 -- There is a significant relationship between Cabin Crew safety and Health Assurance.

Safety Measures

H0 – There is no significant relationship between Safety measures and Minor burns.

H1 -- There is a significant relationship between Safety measures and Minor burns.

5. Analysis and Discussion

Demographic data of the respondents pertaining to the research study has been studied in terms of age, educational background, Qualification, Nature of occupation, etc.,

Table 1- Demographic Data of the Respondents

S. No	Demographic Variables	Frequency (n)	Percent (%)
1.	Age group		
	Less than 25	140	70
	26 – 35	50	25
	36-45	05	5
	46 and above	05	5
2.	Academic qualification		
	Secondary School level	150	75
	College level	50	25
3.	Marital Status		
	Married	30	15
	Single	170	85
4.	Nature of Occupation		
	Government Airline	20	10
	Private Airline	180	90
5.	Gender		
	Male	30	30
	Female	170	70

Construct Reliability Analysis

Table 2- Construct Reliability Analysis (n=250)

Variables	No. of Items	Cronbach's Alpha	AVE	CR
Health Assurance	15	0.942	0.72	0.93
Safety Measure	10	0.919	0.54	0.88

The above table represents the results of the reliability analysis along for each variable. Overall, the study reported strong reliability with coefficient alphas ranging from 0.919 to 0.942 which demonstrated that scale demonstrates good reliability.

Table 3- KMO and Bartlett's Test

Kaiser-Meyer-Olkin Measure of Sampling Adequacy.	0.904	
Bartlett's Test of Sphericity	Approx. Chi-Square	32432.942
	Df	1365
	Sig.	.000

Table 4- Descriptive Statistics for Study Variables

Variables			Statistic	SE
Health Assurance	Mean		3.4977	.03093
	95% Confidence Interval for Mean	Lower Bound	3.4370	
		Upper Bound	3.5584	
	5% Trimmed Mean		3.5692	
	Median		4.0000	
	Variance		.686	
	Std. Deviation		.82815	
	Minimum		1.00	
	Maximum		5.00	
	Range		4.00	
	Interquartile Range		.83	
	Skewness		-1.416	.091
	Kurtosis		1.500	.182
Safety Measure	Mean		3.6946	.02857
	95% Confidence Interval for Mean	Lower Bound	3.6385	
		Upper Bound	3.7506	
	5% Trimmed Mean		3.7649	
	Median		4.0000	
	Variance		.585	
	Std. Deviation		.76490	
	Minimum		1.00	
	Maximum		5.00	
	Range		4.00	
	Interquartile Range		.40	
	Skewness		-1.831	.091
	Kurtosis		2.987	.182
Range		4.00		

Table 4- Descriptive Statistics (n=250) (Consolidated Table of Table 4)

Variables	Mean	SD	Maximum	Minimum
Credit size	3.50	0.83	5.00	1.00
Collateral Security	3.69	0.76	5.00	1.00

Hypotheses

H0 There is no significant relationship between Cabin Crew safety and Health Assurance

H1 -- There is a significant relationship between Cabin Crew safety and Health Assurance.

Table 5- Impact of Cabin Crew and Health Assurance

Independent Variables	Unstandardized Coefficients		R-Square	t-value	p-value
	Beta	SE			
(Constant)	3.430	0.106	0.007	32.284	0.000
Health Assurance	0.066	0.030		2.234	0.026*

Dependent Variable: Cabin Crew, *p<0.05

The Impact of Health Assurance and Cabin Crew is presented in the table 5. In the regression model, Health Assurance is considered as independent variable while Cabin Crew is considered as a dependent variable. The significance value (p-value<0.05) clearly unveils that Health Assurance ($\beta=0.066$, $t=2.234$, $p=0.026<0.05$) is positively impact.

Hence there is a positive relationship between Cabin crew and Health Assurance. Therefore, we conclude that the hypothesis,

Safety Measures

H0 – There is no significant relationship between Safety measures and Minor burns.

H1 -- There is a significant relationship between Safety measures and Minor burns.

Table 6- Impact of Safety Measures and Minor Burns

Independent Variables	Unstandardized Coefficients		R-Square	t-value	p-value
	Beta	SE			
(Constant)	1.484	0.088	0.471	16.835	0.000
Safety measure	0.589	0.023		25.233	0.000**

Dependent Variable: Minor burn, **p<0.01.

The impact of Safety measures and Minor burns is presented in the table 6. In the regression model, Safety measure is considered as independent variable while Minor burns is considered as a dependent variable. The significance value (p -value <0.01 clearly unveils that Safety measure ($\beta=0.589$, $t=25.233$, $p=0.000<0.001$) is positively significant impact. Hence there is an association between Safety measure and minor burns.

6. Conclusion

Many countries do not treat pilots and flight attendants as radiation workers, and do not collect data on radiation exposure in flight and health outcomes. Cabin air quality has improved significantly with the prohibition of smoking on board aircraft and the introduction of HEPA filters. The role of governments in managing the occupational health and safety of flight attendants is also complex. On the other hand we also need to concentrate on the rate of harassment issues that are being reported to the higher authorities of the concerned airlines. It is evident that most of the cabin crews are reporting it to their higher authorities regarding the harassment issue and also it is evident that most of their higher authorities take immediate action against the harasser which is really appreciated. Now the only important thing is the airline rules and policies need to be changed in such a way that the harassment rate is reduced or even stopped effectively in the future

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