

# 11

## Welfare, health and safety

### Chapter objectives

This chapter considers the range of issues concerned with the development of welfare policies in tourism and hospitality. Recognizing the ethical, legal and business aspects of welfare this chapter aims to:

- Appreciate the differing rationales for developing welfare policy.
- Consider the balance between the public and private life of organizational members.
- Recognize the increasing business emphasis in the development of welfare policies.
- Assess the extent to which welfare issues are particularly resonant within the tourism and hospitality industry.



## Introduction

Every year thousands of people suffer serious injury or even death in the workplace. Many more suffer from work-related illnesses or are absent from work due to work-related stress. In order to alleviate dangers in the workplace and ensure that employees are working in a healthy or happy environment it is essential that tourism and hospitality organizations consider the development of appropriate welfare policies. Goss (1994: 122) recognizes how, 'Welfare provision generally refers to those policies which are directed at some aspect of employee well being, both in a physical and emotional sense.' Torrington et al. (2005) suggest that the physical aspects of a broader welfare policy stem from measures to improve health and safety in the workplace, as well as issues such as the provision of paid holidays and reduced working hours. From an emotional/psychological perspective organizations are likely to be concerned with the mental well being of their employees, or more broadly anything involving the 'human relations' needs of people at work. Of course, in reality there is a degree of interconnectedness between physical and mental aspects of welfare, though it is also important to consider the potential distinctions that may be made between them.

From the above discussion we might ask ourselves why should organizations have a welfare policy and indeed whether the subject of the more sensitive aspects of welfare-related issues should remain personal and private. To answer these questions we should recognize various reasons for the existence of welfare policies. Goss (1994) suggests that organizations have usually developed welfare provision within the paradigm of three common 'welfare rationales', these being: legal-reactive, corporate conscience and company paternalism and these are now briefly discussed.

- *Legalistic-reactive*: In this approach an organization's approach to welfare policy is primarily driven by legislative requirements, for example responding to health and safety legislation. With such an approach the organization does not see developing welfare policy as an important part of its core objectives but rather something that has to be complied with.
- *Corporate conscience*: Here, Goss notes how historically the role of personnel had a strong welfare orientation and, arguably, how over time this welfarist approach became increasingly seen as 'soft' and 'indulgent', especially within a more competitive business environment.



- *Company paternalism*: This approach is concerned with the ‘fatherly’ manner in which organizations would seek to look after all aspects of their employees lives. By taking an ‘encompassing’ approach, company’s that practiced company paternalism would be concerned not only with the immediate work environment, but the manner in which employees lived their lives outside of work. Underpinning company paternalism is a strong sense of religious and moral commitment and employees would be expected to lead a live which fitted with this ethos (see also Nickson (1997) for a description of company paternalism in the Marriott, Hilton, Holiday Inn and Forte organizations).

In many respects the above description of differing welfare rationales has a clear overlap with some of the discussion in Chapter 6 on equal opportunities. In the earlier chapter on equal opportunities the question was considered as to whether organizations should develop policies due to legal, ethical or business aspects and the same arguments can be made with regard to the welfare of employees. Clearly within this discussion the legal dimension is one that cannot be ignored and this aspect will be a concern throughout the chapter. To an extent the notion of corporate conscience and company paternalism would seem to rest more on an ethical view of welfare. Increasingly though it is argued that the main argument for developing welfare policies is from the point of view of the HRM business case/efficiency argument. Much of this discussion about adopting a more efficient approach to welfare is generally seen through the lenses of savings costs by reducing absence and improving the performance of employees in the workplace by addressing any problems or concerns that they might have. Clearly then welfare is an important topic, which may conceivably cover a variety of different issues. In this sense we can think of a welfare ‘alphabet’, encompassing a range of issues, such as: absence management, AIDS/HIV, alcohol/drug misuse, smoking, stress, working time and workplace violence. These aspects are now considered.

## Absence management

Increasingly organizations are attempting to take a more proactive approach to the management of absence, recognizing both its direct and indirect costs. With regard to direct costs IDS (2005a) note how absence can be a significant drain for organizations in terms of the cost of occupational sick pay, lost production or the need to

## HRM in practice 11.1 The UK: The sick man of Europe?

IRS (2004a) reports recent research by the European Union (EU) which suggests that the UK has a particularly poor health record with more than one in four working age adults having a long-term health problem. This figure was second only to Finland (32.2 per cent) and higher than direct competitors such as Germany (11.2 per cent), France (24.6 per cent) and Holland (25.4 per cent). The lowest figures in the survey were Romania (5.8 per cent) and Italy (6.6 per cent). For those actually in employment, the UK again has one of the highest rates of employees suffering long-term health problems at 20.4 per cent (surpassing only Finland and France), compared to the EU average of 12.7 per cent.

bring in replacement staff. CIPD (2005a) note that 9 out of 10 organizations report that absence is a 'significant' or 'very significant' cost to the business. Overall, the cost of absence to the UK economy is £11 billion (Simms, 2005), and more specifically CIPD (2005a) notes how the cost per employee is £601 (see HRM in practice 11.1).

More indirectly, and less easy to quantify, absences may place burdens on other organizational members, leading to poor morale, lower productivity, reduced customer retention and profitability (IRS, 2001; IDS, 2005a). In the CIPD (2005a) annual survey of rates of sickness absence hotels, restaurants and leisure had an absence rate of 3.2 per cent and on average employees took 7.3 days off sick. In comparing these figures to other sectors, hospitality and tourism has higher absence rates than private services generally (3.0 per cent and 6.8 days), yet compares favourably with the economy as a whole (3.7 per cent and 8.4 days). There is also the vexed issue of whether sickness absence is 'genuine'. The absence survey by the CIPD (2005a) suggested that 14 per cent of absence across the economy as a whole is not genuine. Indeed, a previous survey conducted in 2004 by the Confederation of British Industry found a similar figure (15 per cent), whilst also noting that retail and distribution, hotels and restaurants were amongst the sectors with the highest levels of non-genuine absence (respectively, 21 per cent and 19 per cent) which arguably points to underlying employment and HRM-related problems (IRS, 2004b).

CIPD (2006a) notes that in broad terms there are two types of absence, short term and long term – defined as 10 days or more (Simms, 2005). Short-term sickness absence will usually be uncertificated, self-certificated or covered by a doctor's note. For longer-term absence there may be a need to involve occupational health professionals or utilize rehabilitation programmes in order to get the employee

back to work (CIPD, 2006a), though this may be more likely in larger organizations (IRS, 2004b). There are a number of causes of absence, though the most prevalent is usually minor illness, such as colds or flu. Other reasons for absence include aspects such as back pain, musculo-skeletal injuries, stress, mental ill health and recurring medical conditions (CIPD, 2005a).

Regardless though of the nature of the absence and whether it is short or long term increasingly it is suggested that there is a need for organizations to adopt a more proactive approach, especially if the costs described previously and so-called non-genuine illness are taken into account. For example, it is suggested that organizations are making progress in measuring absence and taking specific steps to address the most obvious causes. Though it is also important that such an approach is seen as part of a broader integrated approach to create a healthy, high-quality workplace, where the link between employer performance and employee satisfaction is clearly understood. At the least though the organization should have a basic sickness absence policy, which should aim to (CIPD, 2006a: 3):

- Provide details of contractual sick pay terms and its relationship with statutory sick pay.
- Outline the process employees must follow if taking time off sick – covering when and whom employees should notify if they are not able to attend work.
- Include when (after how many days) employees need a self-certificate form.
- Contain when they require a medical certificate (sick-note) from their doctor to certify their absence.
- Mention that the organization reserves the right to require employees to attend an examination by a company doctor and (with the employee's consent) to request a report from the employee's doctor.
- Include the provision for return-to-work interviews as these have been identified as the most effective intervention to manage short-term absence.

HRM in practice 11.2 notes an attempt by British Airways to take a more proactive approach to managing absence, which amongst other things demonstrates the importance of training line managers to become involved in the process of managing absence.

In an even more proactive vein some companies are also moving towards using a new trend imported from the US, that of 'wellness' or health management at work, which may be particularly apposite in those leisure-oriented sub-sectors of the tourism and hospitality and is considered in HRM in practice 11.3.

## HRM in practice 11.2 Tackling absence at British Airways

British Airways had previously had real problems with levels of absence in the company. In 2002, the company acknowledged the scale of the problem by choosing to go 'loud, proud and wide' on the issue. By October 2004, the average absence per employee was 16.7 days per year, well above the sectoral average. Around 90 per cent of this absence was short term and the overall cost to the company was put at £70 million. It was at this time that British Airways introduced a new absence management policy, which developed a single set of clear absence policies and procedures for all staff. The aim of the new approach was to reduce absence by March 2006 to an average of ten days per employee, thus saving the company an estimated £30 million annually. As Peter Holloway, British Airways head of people and organizational development, recognizes, 'absence management is not fun, sexy or exciting; it is about day to day following through of simple management practices'. Recognizing this point, amongst other things the new policy sought to encourage regular attendance at work, promote early intervention from line managers and HR managers and provide support for those with legitimate reasons for absence with the intent of assisting their return to work at the earliest opportunity. Resultant policy interventions included employees having to have a conversation with their line manager as soon as possible regarding the nature of their absence and a standard informal return-to-work discussion after every occasion of absence. There was also a tightening of absence recording mechanisms, which are now done electronically. Line managers were also tasked with taking a more active role in absence management and 'triggering' an 'absence review interview', a more formal version of the return-to-work interview. The absence review interviews are triggered if an employee is absent more than twice in 3 months or takes more than 10 consecutive days off. When conducting the absence review interviews managers have a degree of discretion in considering the personal circumstances of the employee and aspects such as the Disability Discrimination Act. Although there were some teething problems with the new policy, especially in terms of the manner in which line managers applied discretion and some inconsistency in interpretation of the new rules, the policy appears to have been very successful with the company suggesting that employee absences are now around 8 days per employee.

Derived from IDS (2005a); Simms (2005).



## HRM in practice 11.3 Prevention is better than cure

Manocha (2004) recognises how wellness management seeks to adopt a proactive approach in creating a healthy organization. It aims to help employees to look and feel better and to be physically healthy or fit. The emphasis is less on managing employees when they get sick, but instead seeks to manage healthy employees so they do not get sick. Such initiatives are likely to be part of a broader package of HRM policies which aim to create a great place to work. Wellness is likely to be facilitated by aspects such as a gym on site in the workplace and the provision of expert advice in areas such as nutrition. Employers adopting a wellness programme are also likely to measure the results of such an approach by monitoring aspects such as employees' heart rate, blood pressure, cholesterol and body weight.

In sum, organizations are increasingly seeking to adopt more proactive approaches to absenteeism. In part, this approach can be achieved by integrated absence management approaches which look to address short- and long-term absences and importantly also recognizes the potential for underlying causes for absence that may be explicable by broader HRM failings.

## AIDS/HIV

AIDS, which stands for Acquired Immune Deficiency Syndrome, was first diagnosed in 1981. It is caused by the human immunodeficiency virus (HIV) which attacks the body's natural defence system and leaves it open to various infections and cancers. Worldwide there are now nearly 40 million people with HIV, many of them in sub-Saharan Africa (MacAskill, 2006). Within North America, Western and Central Europe the figure stands at 3.5 million (MacAskill, 2006). Currently, approximately 10 per cent of known HIV-positive individuals have developed AIDS (ACAS, 2006). Importantly, many people who are HIV positive are well most of the time, but develop some minor symptoms such as swollen lymph glands. In this sense HIV infection alone does not affect people's ability to do their job, at least until employees develop illnesses that may make them unfit for work. Till that point there is no reason why someone who is HIV positive cannot continue to

work normally as long as they are fit to do so. Moreover a person who is HIV positive is no real danger to others at work in that transmission during normal working activities is virtually impossible.

It is difficult to be definitive in terms of identifying the number of people who may be HIV positive or have AIDS within the workplace. Ladki (1994) notes that 96 per cent of those diagnosed with AIDS in the United States were in their prime employment years (20–64 years). Similarly, Breuer (1995), again writing in the US context, suggests that 1 in 300 employees may be HIV positive or have AIDS; and that 90 per cent of HIV infected Americans are in the workplace. Clearly then AIDS/HIV is something that organizations have to respond to as a major environmental feature, for example with regard to aspects such as employee education and understanding the legal implications of how best to respond to employees who are HIV positive. AIDS then presents a major managerial challenge encompassing moral, social and medical issues resulting from health, safety, legal and humanitarian problems (Arkin, 2005). Consequently, as Bratton and Gold (2003: 172) note, 'a textbook on human resource management for the next millennium would be incomplete if no reference were made to society's most recent menace.'

Indeed, it may well be that these sentiments have a particular resonance within the tourism and hospitality industry for a number of reasons including (Adam-Smith and Goss, 1993):

- *Age composition and accommodation arrangements:* Many organizations within the sector rely to a great extent on young workers. This is the group in society perceived to be at the most risk of infection through high-risk behaviour, whether that be drug abuse or unprotected sex. For example, most of those infected with HIV are in the age groups that have the highest level of economic activity, thus half of all new infections are in those between the ages of 15–24 years (Goss, 1997). It is also possible that there is a greater concentration of high-risk behaviour when many young workers are living together in shared accommodation, or working in a potentially sexually charged environment (see HRM in practice 11.4).
- *Perceived high concentration of homosexual males working in the industry:* Despite research suggesting that this group has now changed their sexual practices there may be a number who were affected before the risks became apparent.
- *The nature of the work in certain sub-sectors, such as working in kitchens and restaurants:* Here, there may be a very slightly greater risk of infection than in other workplaces. For example, blood being transmitted through accidents in the



## HRM in practice 11.4 Sexual activity in the tourism industry

Guerrier and Adib (2004) in their study of tour reps in Mallorca found that male reps in particular were much more likely to instigate sexual relations with customers. Often these approaches and liaisons would take place after organized night outs where male reps were also more than likely than female reps to drink with customers. Guerrier and Adib recognize that for the male tour reps engaging in this type of behaviour was an attempt to reinforce their masculine identity, which they suggest is especially important in feminized environments when it may be in doubt.

## HRM in practice 11.5 Responding to sensitive issues

Read the following scenarios:

A member of staff in your travel agency comes to you and informs you that they are HIV positive. How do you react?

A male cook who works in your restaurant kitchen is quite open about the fact that he lives in a homosexual relationship. Most of the other people in the kitchen are aware of this. One day a rumour is started that he is HIV positive. Despite this rumour being *untrue* very quickly a number of his colleagues have been to see you to ask for him to be dismissed. How do you handle this situation?

*Review and reflect:* How, as a manager, would you respond to these scenarios?

kitchen or hypodermic needles being found in hotel bedrooms or clubs/discos and the risk of blood contact through violent encounters.

- *Sensitivity to public fears:* Despite medical advice to the contrary the public may feel that there is a significant risk of HIV being transmitted through food and in the 1990s employers in the American restaurant industry saw AIDS as the number one long-term issue facing the industry (Ladki, 1994).

Much of the above discussion points to the need for a considered managerial response. Before we move on to discuss this point further first of all consider the issues outlined in HRM in practice 11.5.



## HRM in practice 11.6 Public misperceptions about AIDS

Barrows et al. (1996) report how a well-known Californian restaurant, Bon Appetit, found that its business was seriously affected when news emerged that a former employee had died of AIDS. Customer counts declined significantly when the media released a story that an executive chef who had previously worked in the restaurant had died of AIDS. The owner of the restaurant, Ralph Granthem, chose to take a proactive response to the situation by holding a press conference, where he recognized the overwhelming medical evidence that suggests that AIDS is not transmitted by food handling. Greater clarity was also offered by a well-publicised visit from the Director of the California Department of Health Services. Along with his wife the Director ate in the restaurant and also produced a statement recognizing that people do not get AIDS from restaurants. By taking a proactive approach the restaurant was able to reverse the decline in business, but the case illustrates the possibility for uninformed public responses to AIDS.

Having considered your response to these scenarios now consider HRM in practice 11.6 which outlines how one organization dealt with a very similar problem.

HRM in practice 11.6 illustrate the need for a clear and sensible approach to managing AIDS/HIV, though some of the difficulties in developing such an approach are nicely encapsulated by the view of one manager quoted in Bratton and Gold (2003: 172) who recognizes that, 'I was not trained to manage fear, discrimination, and dying in the workplace.' Much of the discussion above stems from potential misinformation about the nature of AIDS/HIV and in particular the notion of perceived risk of infection. Adam-Smith and Goss (1993) identify three potential responses to the perceived risk of infection in the workplace.

- *Rational response*: In this response individuals fully understand the probability of risk and on this basis make an informed choice about the acceptability of working with somebody who is HIV positive. As we have already noted the risk of transmission in a normal workplace situation is minimal and as long as employees are aware of this point then their rational response is such that they would have little or no fear of contracting the disease or working with somebody who is HIV positive.
- *Bounded rationality response*: In this response individuals are likely to view the issue on the basis of factually incomplete or incorrect information, often leading



to a misunderstanding of the degree of risk. Consequently, employees may overemphasize the perceived hazard of AIDS/HIV and for example refuse to work with a fellow employee who is HIV positive because of an inflated sense of risk.

- *Subjective response:* This response is largely driven by moral or subjective beliefs that determine the level of acceptability of working with somebody who is HIV positive. For example, somebody who is homophobic may see AIDS/HIV as being a disease that is 'self-inflicted' and refuse to work with a homosexual colleague who is HIV positive.

Adam-Smith and Goss recognize that in reality, 'individuals are likely to use a complex mix of these decision-making processes in their assessment of risk' (p. 28). Furthermore the organizational context will also be important in determining employees' assessment of risk, a point we touched on earlier.

### **Policy responses to AIDS/HIV**

To a large extent the discussion above also points to the manner in which organizations can develop a response to the issue of AIDS/HIV, which can take one of several forms:

- Total denial that AIDS/HIV is a workplace issue.
- Wait and see approach.
- Deliberate no-policy decision and reliance on existing arrangements.
- AIDS/HIV to be treated as any other life-threatening disease.
- Introduce specific policy.

Given much of the discussion above a more proactive response seems appropriate. In this way the reasons for having a policy include things like countering misunderstanding, lack of knowledge, fear and prejudice. Although ostensibly there is no statutory obligation for such a policy, the designation of HIV under the Disability Discrimination Act, wherein someone with HIV is deemed to have a disability, means that organizations should be proactive, particularly with regard to the notion of making 'reasonable adjustments' to address progressively disabling



conditions. In developing a policy there are a number of aspects organizations can consider as being integral to a successful policy, including (e.g. see IRS, 1997; ACAS, 2006):

- A general statement of the company's commitment to non-discrimination.
- Affirmation of usual hiring procedures so there is no discrimination in recruitment against applicants on the grounds that they are HIV positive or have AIDS.
- Assurance of continued employment.
- Employees who are HIV positive will be redeployed to alternative employment at their own request and will not be prevented from continuing work, except where they are deemed 'medically unfit' through the standard procedures.
- Equitable benefits.
- Guarantee of medical confidentiality.
- Access to employee assistance programmes (EAPs), for example counselling services.
- A statement that individuals who refuse to work normally with people with AIDS or who are HIV positive will be interviewed to find out the circumstances of their refusal and if appropriate dealt with under the organization's disciplinary procedure.
- Arrangements for staff who travel overseas.

A policy such as that suggested above may also be developed in conjunction with an education programme to ensure that all employees are fully aware of AIDS/HIV and particularly the lack of any real risk in normal workplace situations.

## Alcohol/drug misuse

Drink- and drug-related problems are one of the commonest causes of sickness absence in the workplace. Figures suggest that in the UK one in three men and one in five women drink over the recommended limits (IDS, 2005b) with 1 in 13 Britons said to be dependent on alcohol (BBC, 2003). The result is that for those drinking over the recommended number of units (21–28 for men; 14–21 for women) are



twice as likely to take sick leave (IDS, 2005b). It is estimated that alcohol-related sickness or illness costs UK employers around £6.4 billion, with up to 17.4 million working days lost in 2003 (Roberts, 2003). Moreover research from Alcohol Concern suggests that one in four accidents at work are due to alcohol misuse (TUC, 2003). Across the EU it is estimated that the cost of lost productivity through absenteeism, unemployment and lost working years through premature deaths resulting from alcohol abuse is €59 billion a year (Institute of Alcohol Studies, 2006). Similarly, research in the US has suggested that workplace alcohol use and impairment affects approximately 15 per cent of the workforce (Alcohol Concern, 2006). Problem drinkers are also absent from work in the US, on average, 22 days per year and are twice as likely as non-alcohol drinkers to have accidents at work (Corsun and Young, 1998). Whilst problem drinking is a significant workplace concern the same is also true for drug misuse. In 2004, a third of British workers under the age of 25 years took illegal drugs in the previous year, with the figure being 1 in 10 for all workers (IDS, 2005b). Drug abuse costs British industry around £800 million a year (Hilpern, 2001). In the US one in four workers either has used or knows someone who uses illegal drugs and it is suggested that drug abuse costs US business \$60 billion annually (Eade, 1993).

Therefore the direct and indirect of alcohol and drug abuse can be seen in a number of ways, such as costs of accidents, lower productivity, poor quality work, bad decisions, damage to the organization's reputation, absenteeism and unreliability, managers losing time in dealing with problems and increased labour turnover. Many argue that alcohol and drug misuse has a particular resonance in the tourism and hospitality. For example, the industry is often suggested as being fast paced and having a 'work hard, play hard' culture where employees may unwind with alcohol or drugs. In addition, other factors that create an environment which arguably encourages alcohol and drug abuse include:

- Long working hours.
- Sociability of the workplace.
- Availability of alcohol in the workplace, and often the expectation that employees will drink as part of their employment.
- Stress, for example employees having to sustain emotional labour so that even during stress-inducing encounters with customers, employees are expected to be positive, friendly, cheerful and helpful.



Reflecting the above discussion it is unsurprising to find that hospitality and tourism workers have been identified as particularly at risk with regard to alcohol and drug abuse. For example, a recent survey of 1000 hospitality professionals found that 40 per cent of respondents had seen colleagues take illegal drugs while at work, with 59 per cent noting how they had seen colleagues drinking to excess on duty (Bignold, 2003). Similarly, publicans top the list of liver cirrhosis mortality with other hospitality occupations, such as cooks and kitchen porter and caterers not far behind (Mullen, 2001).

### **Developing policy on alcohol and drugs**

On the question of a policy it is worthwhile initially considering the extent to which employers can seek to intervene in something that may be taking place outside the workplace. As we noted earlier, in developing welfare policies there may be times when employers are intervening in an employee's private life outside the organization. Proponents of the business case for welfare would argue that if an employee attends work whilst still impaired through the use of alcohol or drugs then it is likely to significantly affect their performance. Consequently they would dismiss concerns as to the appropriateness of an employer taking an active interest in an employee's life outside of work.

Of course, within the workplace the issue is less ambiguous and employers have a legitimate right to develop policies for alcohol and drug misuse. A further issue which impacts on the development of such a policy is the difference between alcohol and drugs in that rules on drugs at work are inevitably more stringent because many drugs are illegal (IDS, 2004a). In terms of developing policy it is useful to acknowledge the view of IDS (2004a: 10) who recognize that, 'there is an increasing trend towards treating long-term alcoholism and, to a lesser extent, dependence on illegal drugs as serious illnesses'. When viewing alcohol and drug misuse in this light the organization is likely to be supportive rather than punitive and will encourage an employee who has a drink or drug problem to seek voluntary help, although this may be facilitated by establishing links with outside organizations, such as those providing EAPs, who can provide expert advice and support. That said, even supportive policies will also usually contain provision for a more punitive approach if there is no improvement in the employee, for example an employee may face disciplinary action and ultimately dismissal on the grounds



of capability. Furthermore, IDS (2004a) also note that there may be circumstances where an employee recklessly or even deliberately disregards company rules or acceptable standards of conduct on alcohol and drugs where dismissal on the grounds of misconduct may be acceptable. Within this context then an organization's alcohol and drug policy may contain the following (IDS, 2004a):

- A general statement covering the background to the policy, including any legal obligations.
- A clear outline of the aims and purposes of the policy, including the balance between the discipline and support for employees.
- Details of the responsibilities of different staff and the training and guidance available.
- Who is covered by the policy and if there are tighter restrictions for any particular groups.
- Rules and procedures around drug use, including definitions of what constitutes alcohol and drug misuse and rules regarding prescription medicine.
- The disciplinary action that will be invoked following a policy breach, and what the company's stance is regards to misconduct relating to alcohol or drugs, but not dependency.
- Information for employees on safe drinking limits, classes of drugs, the effects of alcohol and drugs, and where to receive help.
- Details of how an employee can refer themselves for treatment, the support the company will offer and what action the company will take if treatment is declined, not completed or the employee relapses.
- Overview of any testing process, including an explanation of why tests are carried out and when, who administers the tests and what happens if a test proves positive or an employee admits to a dependency during the testing process (see HRM in practice 11.7).

## Review and reflect

To what extent do you agree that 'peer pressure' is likely to have more impact on changing behaviour with regards to alcohol or drugs than organizationally directed interventions?



## HRM in practice 11.7 Drug and alcohol testing: An ethical or legal issue?

There are debates about the usefulness of drug and alcohol testing in the workplace, with concerns being expressed about the moral, ethical and legal aspects of testing; and particularly whether testing is the best way to address the problem of misuse. For example, within the European context some argue that under the Human Rights Act 1998 random testing impinges on an individual's right to privacy. Where testing does take place there are significant differences on who is likely to be tested, depending on aspects such as the country and sectoral context. In the US it is suggested that around 70 per cent of companies across all industries screen employees for illegal substances. More specifically, research conducted in the 1990s in the hotel sector found that nearly 50 per cent of a sample of 110 hotels conducted drug testing both for applicants for jobs and existing employees. In the UK, the figure is much lower with some estimates suggesting it is as low as 4 per cent. As well as the national differences there may also be differences in terms of occupations. For example, jobs in industries which are considered 'safety critical' are much more likely to have testing on the job, this would include some parts of the tourism industry, such as the airline industry. The British Airline Pilots Association (BALPA), a trade union representing around 8000 pilots and cabin crew, have voiced concerns about random testing of pilots, suggesting that this approach merely drives the problem underground. Instead, their solution to alcohol and drug misuse is support via 'peer pressure'. In this approach flight crew are encouraged to confront a colleague with a problem and urge them to seek help. Evidence seems to suggest that this approach is more successful in detecting the problem and helping individuals deal with it and has recently been endorsed by the International Federation of Airline Pilots Association, which represents pilots worldwide. The ferry and cruise ship industries also tends to operate a strict 'no-alcohol at work' policy for both sea- and shore-based employees, and will often randomly test on-board employees for alcohol or drugs.

Derived from Casado (1997); IRS (2002); Shanahan (2005).

## Sexual harassment

Whilst definitions of sexual harassment are generally similar there may still be different perceptions as to what constitutes sexual harassment (see, for example, ILO (1999) for a review of practices across a number of companies and countries).



## HRM in practice 11.8 What constitutes sexual harassment?

Consider the following list/scenarios and place a tick by what you would consider sexual harassment:

Patting, hugging or touching a co-worker.

Comments about the way a woman looks.

Lewd remarks or glances directed towards a male employee from a female employee.

Questions about an employee's sex life.

Requests for sexual favours.

Allowing suggestive posters of either sex in the workplace.

Intimate physical contact within the workplace.

A manager begins a sexual relationship with one of his/her subordinates.

Before we move on to consider the substance of this statement first of all consider HRM in practice 11.8.

In 2002, the Council of Ministers and European Parliament agreed the text on a new directive on the equal treatment of women and men, which included a new definition of sexual harassment. As of 1st October 2005 this new European wide definition was introduced into law and suggests that sexual harassment is 'any form of unwanted verbal, non-verbal or physical conduct of a sexual nature (which) occurs with the purpose of violating the dignity of a person, in particular when creating an intimidating, hostile, degrading, humiliating or offensive environment' (cited in LRD, 2005a: 21). Sexual harassment therefore is unwanted behaviour which a person finds intimidating, upsetting, embarrassing, humiliating or offensive and in that sense is unique to the individual. The individual nature of sexual harassment means that, at certain times, it may be rather subjective and behaviour that one person may consider as acceptable could be seen as harassment by another. For example, you may have indicated all of the aspects in HRM in practice 11.8 as denoting sexual harassment, yet the next person might have indicated something different. There is also the added complication that increasingly many of us now meet our partners in the workplace, which means that romantic conduct or romantic liaisons are increasingly evident in the workplace. For example, according to IRS (2000), whilst the majority of UK employees

disapproved of overt sexual activity in the workplace, the majority of survey respondents were comfortable with flirting and almost 40 per cent were or had been involved in workplace romantic or sexual relationships. This estimate is cautious given that such relationships are often deliberately covert but is also confirmed by Kakabadse and Kakabadse's (2004) recent international study of romance in the workplace. With the workplace 'becoming a common meeting ground for romantic liaisons' (Kakabadse and Kakabadse, 2004: 42) there is a need to recognize the line between legitimate and accepted behaviour and that considered sexually harassing.

Where behaviour does err on the side of unacceptable it is usually women who are worst affected by sexual harassment, although men can suffer as well. Equally, there may be occasional cases of same sex harassment (Sherwyn et al., 2000). Generally, though it is women who experience sexual harassment. For example, the Industrial Society (now Work Foundation) produced a report in the mid-1990s which suggested that 93 per cent of sufferers of sexual harassment were women (Coupe and Johnson, 1999). Often it is a male superior who is the harasser. Gilbert et al. (1998) note how two-thirds of sexual harassment complaints in the largest companies in the US were made against immediate supervisors and upper management. Moreover the extent to which sexual harassment is experienced is widespread. IRS (1996), for example, reporting their own and other survey data suggests that well over 50 per cent of women had suffered harassment at work. More specifically, Worsfold and McCann (2000) reporting on the experience of 274 students on supervised work experience in the hospitality industry found that 156 (57 per cent) had experienced instances of sexual harassment.

Despite the fact that it is often viewed as a 'joke', 'just a bit of fun' or 'a bit of harmless flirting', sexual harassment is, in reality, usually about the misuse of power as well as being humiliating and degrading for the recipient and therefore likely to effect confidence and job performance. It can also have a serious impact on physical and mental health and lead to absenteeism. Clearly, then there are several reasons why employers should take action to prevent sexual harassment. Some of these may be pragmatic, such as protecting the company image and avoiding litigation as the courts increasingly view the prevention of harassment as the responsibility of the employer; some may be concerned with business aspects such as reducing absenteeism. Arguably though the strongest argument lies in our earlier identification of the ethical dimension of broader welfare policies. No employee should have to suffer sexual harassment and the workplace should be



## HRM in practice 11.9 If you can't stand the heat...

The kitchen is often felt to be a very masculine environment with a very macho culture, which may lead to sexist attitudes being prevalent. It is suggested that to fit in employees may have to swear, ogle pornography and generally act like men. Such an environment can create attitudes where sexually harassing behaviour could be construed as just a 'bit of a laugh'. One female chef reporting on her experiences working in a kitchen notes several incidences of sexual harassment, including a colleague having her trousers pulled down in front of an all-male kitchen. She also notes the experiences of female chefs in the US where sexism seems equally prevalent, for example one noting how she was routinely groped.

Derived from Packer (1998); Roche (2004).

a place where every employee has the right to be treated with dignity and not suffer from harassing behaviour (ILO, 1999).

### Tourism and hospitality: a breeding ground for sexual harassment?

It is important to realize that sexual harassment may be particularly prevalent in the tourism and hospitality industry. For example, Coupe and Johnson (1999: 37) note that, 'Female employees within traditional service spheres of employment, such as operative employees in the hospitality industry, will be extremely vulnerable to sexual harassment'. Why is this the case? First, within the hospitality sub-sector in particular there is the notion of many departments often being dominated by a single gender, for example men in the kitchen (see HRM in practice 11.9).

A further issue is the extent to which tourism and hospitality organizations may either tacitly or even deliberately exploit women's sexuality. As Gilbert et al. (1998: 49) note 'the inherent characteristics of service organizations create a prime breeding ground for sexual harassment'. Within tourism and hospitality many accounts (e.g. Hall, 1993; Adkins, 1995; Tyler and Abbott, 1998) recognize the manner in which some organizations may sanction sexuality as part of the performative aspects of their front-line employees. In this way tourism and hospitality workplaces may be in Mano and Gabriel's (2006) view 'hot' climates. Workplaces which are considered 'hot' climates often have a high degree of aestheticization of the

workplace which emphasizes the importance of appearance, style and sensuousness, which in turn creates what Mano and Gabriel term a 'sexual simmer'. Workplaces which have this sexual simmer are also likely to encourage flirtation, sexualized language, innuendo and an emphasis on appearance and image. This notion of certain service workplaces being inherently sexualized is supported by Guerrier and Adib (2000). In their study of sexual harassment of hotel workers they suggest a contributing factor is that hotels often suggest the promise of sexual activity:

The space of the hotel is laden with sexuality. In particular, the hotel's function is sexualized. Hotel bedrooms provide a space for guests to engage in sexual activity. The sexualization of the hotel space is reflected in the sexualization of hotel workers. In many of the incidents of harassment in this study, assumptions were made about the hotel workers and their roles as service providers within a sexualized setting (p. 720).

Beyond the hotel sub-sector, Guerrier and Adib (2000, 2004) also note how other tourism- and hospitality-related settings such as restaurants, airlines and working in a resort as a tour rep are also inherently sexualized environments (see HRM in practice 11.10).

As can be seen from the above discussion it is women who are more likely to face sexualization and potentially sexual harassment. Adkins (1995) is one of several authors who recognize how female employees have greater pressure from tourism and hospitality organizations to sustain an 'attractive' or alluring appearance. She reports how managers in the leisure organization she studied would enforce uniform requirements which required that women would have their dresses pulled down off the shoulder. Indeed, she even notes how male managers would often physically pull down employees' dresses into that position. In this way potentially neutral dress and appearance standards are sexualized by managerial action. Organizations may also encourage a degree of flirting in the interaction with customers and crucially alcohol consumption, indeed often excessive consumption, is an integral part of many tourism and hospitality workplaces, frequently loosening the tongues and morals of customers in particular. For example, Hall (1993) notes the importance of 'job flirt' to the waiting staff she studied. Taking part in such activities could potentially be gender neutral in that both men and women might conceivably engage in this type of behaviour in the work setting. Guerrier and Adib (2000) note how the restaurant chain TGI Fridays encourages both



## HRM in practice 11.10 Skilled professional or 'trolley dolly'?

Historically the process of sexualization of airline cabin crew has been one which has changed over time. At the outset of the airline industry flying was an all-male preserve, including the job of air steward. Though there was a limited experimentation with the recruitment of female air stewards in the 1930s it was not until the mid-1940s that the job was really feminized. In the 1950s and 1960s airlines began to sexualize their stewardesses, mainly through their advertising and marketing by portraying the 'sexy' image of female cabin crew. Sexually suggestive advertising slogans used in the past have included Delta's 'Ready when you are', National's 'I'm Anne, fly me' and Continental's 'We really move our tail for you'. This portrayal of what have often been described as 'trolley dollies' was one which seemingly became increasingly anachronistic as airlines were accused of sex discrimination and sexism, especially by the trade unions representing stewardesses. By the mid-to-late 1970s the selling of overt sexuality seemed to wane. However, a recent review of aesthetic labour in the airline industry offers evidence as to how some airlines still seem to mobilize their employees' physical disposition to move beyond an aesthetic appeal to one where the appeal seems to be to the sexual desires of customers. The examples cited are Virgin Blue and Air Asia, two new airlines operating in the low-cost carrier market. An examination of the advertising and marketing of these two airlines points to the manner in which female employees are sexualized, particularly in Virgin Blue, which was described in one newspaper as the world's sexiest airline. For example, one advert produced by the company featured smiling, attractive and youthful flight attendants and was captioned 'Plane Fares, Beautiful Service'.

Derived from Mills (1996); Spiess and Waring (2005).

male and female waiters to flirt with customers to increase customer spend and their own tips. Nevertheless, Hall (1993: 465) notes how, 'although playing the flirting game is an accepted part of interacting with customers, waitresses are more likely than waiters to be the subject of sexual approaches' (see HRM in practice 11.11).

What the above discussion points to is that within tourism and hospitality there is not only the potential for sexual harassment in terms of the superior/subordinate relationship, but also via potentially pernicious customer interactions. The latter aspect in particular is one where some tourism and hospitality organizations may allow for a certain amount of ambiguity to creep in. For example, in Loe's (1996)



## HRM in practice 11.11 Hooters: An acceptable form of sexualization?

Although selling itself as 'a family restaurant' (though 70 per cent of customers are men aged 25–54 years) the Hooters company uniform of short shorts, and a choice of either a tight tank top, crop or tight T-shirt suggests that the intent of the company is to project an image of sexy, eager waitresses. Golding (1998: 7) notes how the company 'unashamedly uses nubile young waitresses dressed in skimpy tops to attract customers' – the so-called 'Hooters Girls'. The success of the company is such that they now have over 400 restaurants in the US as well as a presence in 19 other countries. Additionally, until recently the company also had an airline, Hooters Air, which in addition to the airline crew also featured two Hooters Girls on each flight. A recent case study of Hooters in *Fortune* recognizes the extent to which Hooters is considered a mainstream business success (Helyar, 2003). Indeed, the company's marketing and branding strategy has survived a challenge in the American courts on the basis that the company brand is 'female sex appeal' (Prewitt, 2003). It is also interesting to note the reaction of the then editor of *Caterer and Hotelkeeper* to the arrival of the first Hooters restaurant in the UK. In an opinion piece the editor saw little to worry about in the emergence of Hooters. In answer to his own question of whether 'the moralists and protectors of womens' rights [are] being distracted by a bit of harmless fun?', he goes on to suggest that: 'Blatant titillation has become widely accepted in the selling of countless commodities, from fast cars to chocolate bars, from drinks to holidays ... If we are not offended by this, then we shouldn't get upset about Hooters, because the principle is much the same' (Mutch, 1998: 23).

*Review and reflect:* To what extent do you agree with the sentiment of Mutch?

thinly disguised ethnographic study of 'Bazooms', she notes how new employees had to sign the official Bazooms sexual harassment policy, which states that 'In a work atmosphere based upon sex appeal, joking and innuendo are commonplace' (p. 400). Of course, there is potentially a thin line between innuendo and what may be thought of as harassing behaviour. Such an issue seemed less of a concern for the company and the Bazooms employee handbook described sexual harassment in the following manner:

Sexual harassment does not refer to occasional compliments of a socially acceptable nature. It does not refer to mutually acceptable joking or teasing. It refers to behaviour which is unwelcome, that is personally offensive, that

debilitates morale, and that, therefore, interferes with work effectiveness (quoted in Loe, 1996: 412).

Whilst ultimately the manner in which some tourism and hospitality organizations portray a certain 'style' may be one which is debated in terms of the extent to which it encourages customers to engage in unacceptable behaviour, the key point remains that sexually harassing behaviour can have a significantly harmful impact on employees. Consequently, it is important that the organization develops a suitable policy response.

### **Developing policy for sexual harassment**

Therefore as a way of preventing sexual harassment organizations should implement an effective policy, which should aim to (CIPD, 2006b):

- Set out what is considered to be inappropriate behaviour, as well as defining positive and supporting behaviours.
- Explain the damaging effects and why it will not be tolerated.
- Affirm that sexual harassment will be treated as a disciplinary offence with appropriate penalties attached.
- Explain complaints procedure, including how to get help and make a complaint, formally and informally.
- Affirm that the complaint will be treated seriously, speedily and confidentially and that there will be no victimization for making a complaint.
- Make it a duty for supervisors/managers to implement policy and ensure it is understood.

By offering a clear policy employees who are being sexually harassed can feel confident that the issue will be taken seriously. This point is important as in bringing forward a complaint of sexual harassment the employee should not have to fear reprisals or continued harassment or equally be worried about things like risking future promotion opportunities. Once a complaint is made the investigation should begin as soon as possible and provide (CIPD, 2006b):

- A prompt, thorough and impartial response.
- Independent, skilled and objective investigators.
- Representation for both parties.



- Complaint details, the right to respond and adequate time to respond.
- A time scale for resolving the problem.
- Confidentiality for all parties.

Investigations of sexual harassment may either be by formal or informal means, though often the preference will be for an informal resolution (IDS, 2003). If though there is a more formal investigation, depending on the outcome of any investigation there may be a range of potential decisions. For example, if the harassment is sufficiently serious it could lead to the dismissal of the perpetrator. Alternatively, there may be disciplinary action short of dismissal, counselling for the person whose behaviour is unacceptable and often the perpetrator may be transferred. There may be occasions where individuals are unclear how their behaviour may be seen as harassing and ensuring that they are aware of acceptable and unacceptable behaviour at work will prevent ambiguity and stop harassment reoccurring.

## Smoking

In a recent review of smoking in the restaurant industry, Nickson (2000) noted that much of the work in this area could be distilled into two broad themes:

- The responsibility of the employer to maintain a safe environment for employees and customers.
- The necessity of satisfying the needs of all consumers (i.e. smokers and non-smokers) to remain profitable.

From a health and welfare perspective most of the concerns about smoking in the workplace are linked to the phenomenon of environmental tobacco smoke, or as it is rather more popularly known, passive smoking. In the past many tourism and hospitality workplaces, such as restaurants and pubs, would be considered as being a relatively smoky atmosphere, and consequently possibly more damaging to employee health. The issue of passive smoking has been at the centre of an intense debate between pro- and anti-smoking groups, with each side contesting the validity of each other's statistics. Increasingly though it appears that those against passive smoking are winning the argument as a number of countries have now moved to banning smoking in public places, including pubs, hotels and restaurants (see HRM in practice 11.12).



## HRM in practice 11.12 A global curb on smoking

*Australia:* Smoking is banned in all airports, government offices, health clinics and workplaces in Australia. Restaurants in most states and territories are also smoke free zones.

*France:* Attempted to cut smoking levels by raising the price of cigarettes by 20 per cent in October 2003. Despite this price hike it was reported that there was no noticeable difference in Paris' traditionally smoke-filled cafes and bars.

*Italy:* Imposed a ban on smoking in all enclosed public places including bars and restaurants in 2005. The ban has not been welcomed by all, with some bar owners and smokers saying they will ignore the ban on the grounds that cigarettes and smoking are an integral part of Italian bar and cafe culture. The new rules allow smoking in special sealed-off areas fitted with smoke extractors; however many bar owners say fitting the automatic doors and forced ventilation systems required by law is too expensive.

*The Netherlands:* A tough crackdown on smoking from 1 January 2004 saw cigarettes banned from many public places including railway stations, trains, toilets and offices. Hotels, bars and restaurants are likely to face a ban from 2009. Some 30 per cent of the Netherlands' 16 million population are smokers – a higher rate than all other EU countries except Spain, Greece and Germany.

*Norway:* A national ban was imposed on smoking in restaurants, bars and cafes from June 2004. The government says the ban is to protect staff working in these establishments from passive smoking and to 'de-normalize' smoking as a social pastime.

*Spain:* Smoking was banned in offices, shops, schools, hospitals, cultural centres and on public transport from 1 January 2006. The government says the ban is necessary because smoking is the biggest killer in Spain, with 50 000 smoking-related deaths annually.

*Sweden:* Smoking was prohibited in all bars and restaurants from May 2005. Establishments wanting to allow smoking are required to have a closed-off section with specially designed ventilation, where no food or drink can be served. Most venues were not expected to be able to afford such renovations. The ban followed lobbying by the country's licensing sector which said bar and restaurant staff were more likely to suffer lung cancer than in any other profession.

*United States:* Many cities and states enforce bans on smoking. California has some of the toughest and most extensive anti-smoking legislation anywhere in the world. Smoking is also banned in restaurants, bars and enclosed workplaces – and on beaches – throughout the state. In New York, smoking has been banned in bars, clubs and restaurants since March 2003.

Derived from BBC (2005).



At the time of writing within the UK the picture is currently mixed. Within Scotland the introduction of the Smoking, Health and Social Care (Scotland) Act 2005 led in 2006 to the banning of smoking in public places, including restaurants, bars and pubs. In a similar vein legislation will lead to a smoking ban in England from summer 2007. It is suggested that creating healthier workplaces lies at the heart of the legislation and ultimately the development of smoking bans marks a significant intervention by government to improve occupational health.

## Stress

Stress has increasingly become a major issue in the workplace with a seemingly ever larger part of the workforce suffering from work-related stress. Indeed, CIPD (2005b) note how the Health and Safety Executive (HSE) have indicated that stress is likely become the most dangerous risk to businesses in the twenty-first century. In simple terms stress is the adverse reaction people have to excessive demands or pressure when trying to cope with tasks and responsibilities in the workplace (LRD, 2006a). At one level, stress is a normal part of everyday life and within the workplace many writers talk about so-called 'good' stress, or 'eustress'. This optimum level of stress is felt to be important to sustain high performance and will of course vary with individuals. Once an employee feels unable to cope or control the pressure then they will experience stress as 'distress', which will lead to declining performance. The most recent research conducted by the HSE indicates that over half a million workers in the UK were suffering from work-related stress, depression or anxiety caused or made worse by their current or past work. As a consequence it is estimated that there were 12.8 million lost working days due to work-related stress in 2004–2005 (LRD, 2006a). European-wide research has suggested that over 40 million EU workers are affected with work-related stress, with the European Commission suggesting that the 'conservative' estimate of the cost of this stress being €20 billion (£16 billion) (LRD, 2002).

### Review and reflect

Think about what makes you stressed at work and how you can address this. To what extent is your stress at work alleviated by the organization and its work processes and to what extent by your own initiative? Where should the responsibility lie, with the organization or the individual?



Individual	Organizational
Anxiety	Impaired job performance
Alcohol abuse	Increased absenteeism
Drug abuse	Decreased commitment and motivation
Job dissatisfaction	Higher turnover rates
Depression	Higher accident rates
Panic attacks	Lower productivity
Irritability	Lower morale
Low self-esteem	Damaged reputation
Disturbed sleeping patterns	Recruitment problems
Poor concentration	
Frequent headaches	
Gastric and intestinal problems	
High blood pressure	
Heart disease	

Adapted from IDS (2004a)

**Figure 11.1** Some negative effects of stress for the individual and organization.

As with a number of other aspects discussed in this chapter organizational responses to stress are likely to reflect both legal and business arguments. From a legal point of view employers have a general duty of care under section 2 of the Health and Safety at Work Act (HASWA) 1974 to ensure the health, safety and welfare at work of all of their employees and this includes their mental health. In addition, there is also European-inspired regulation and Regulation 3 of the Management of Health and Safety at Work Regulations 1999 requires employers to undertake risk assessment in order to minimize the hazards facing staff, including ensuring that employees health is not placed at risk by excessive and sustained levels of stress. Failure to comply with the duties contained in the HASWA and the Management of Health and Safety at Work Regulations may result in significant compensation being paid by employers. For example, a number of recent court and out of court settlements in the UK have seen figures of up to £300 000 paid by employers (LRD, 2002). From a business point of view Figure 11.1 outlines a number of possible negative effects of stress, which will have a deleterious impact physiologically and psychologically on individuals, which in turn is likely to significantly hamper organizational performance.

As we noted above there is a need for organizations to be proactive in recognizing and responding to potential stressors in the workplace. The HSE has sought to develop a management standard which classifies some of the key areas which, if mismanaged, can become workplace stressors, these are (HSE, 2005):

*Demands* – including issues like workload, work patterns and the work environment. The standard expects that employees are able to cope with the demands of their jobs. To achieve the standard the organization should provide employees with adequate and achievable demands in relation to the agreed hours of work; ensure that people's skills and abilities are matched to the job demands; that jobs are designed to be within the capabilities of employees; and that any employee concerns about their work environment are addressed.

*Control* – is primarily concerned with how much say the person has in the way they do their work. The standard suggests that employees are able to have a say about the way they do their work. To achieve the standard the organization should aim where possible to ensure that employees have control over their pace of work; that employees are encouraged to use their skills and initiative to do their work; that employees are encouraged to develop new skills to help them undertake new and challenging pieces of work; the organization encourages employees to develop their skills; employees have a say over when breaks can be taken and employees are consulted over their work patterns.

*Support* – includes the encouragement, sponsorship and resources provided by the organization, line management and colleagues. The standard suggests that employees should receive adequate information and support from their colleagues and superiors. To achieve the standard, the organization should have policies and procedures to adequately support employees; that systems are in place to enable and encourage managers to support their staff; that systems are in place to enable and encourage employees to support their colleagues; that employees know what support is available and how and when to access it; employees know how to access the required resources to do their job and employees receive regular and constructive feedback.

*Relationships* – includes promoting positive working to avoid conflict and dealing with unacceptable behaviour. The standard expects that employees should not be subjected to unacceptable behaviours (e.g. bullying and harassment) at work. To achieve the standard, the organization should promote positive behaviours at work to avoid conflict and ensure fairness; employees share information relevant to their work; the organization has agreed policies and procedures



to prevent or resolve unacceptable behaviour; that systems are in place to enable and encourage managers to deal with unacceptable behaviour and that systems are in place to enable and encourage employees to report unacceptable behaviour.

*Role* – includes whether people understand their role within the organization and whether the organization ensures that the person does not have conflicting roles. The standard expects that employees understand their role and responsibilities. To achieve the standard, the organization should ensure that, as far as possible, the different requirements it places upon employees are compatible; the organization provides information to enable employees to understand their role and responsibilities; the organization ensures that, as far as possible, the requirements it places upon employees are clear and systems are in place to enable employees to raise concerns about any uncertainties or conflicts they have in their role and responsibilities.

*Change* – includes how organizational change (large or small) is managed and communicated in the organization. The standard expects that the organization will frequently engage with employees when undergoing an organizational change. To achieve the standard the organization should provide employees with timely information to enable them to understand the reasons for proposed changes; the organization ensures adequate employee consultation on changes and provides opportunities for employees to influence proposals; employees are aware of the probable impact of any changes to their jobs. If necessary, employees are given training to support any changes in their jobs; employees are aware of timetables for changes; employees have access to relevant support during changes.

A number of the above aspects can be seen in research examining stress in the tourism sector. Ineson et al. (2001) conducted in-depth interviews with 10 UK tour managers and identified 117 critical incidents that induced stress. These aspects were grouped into four categories relating to colleagues, clients, nature of the job and poor management. For example, with regard to the nature of the job the particular work environment of tour managers means that they may face situations such as medical emergencies or logistical problems such as breakdowns and getting stuck in traffic jams. Similarly, a number of the tour managers recalled instances where clients had questioned and contradicted their commentaries, which had undermined their professional authority as they appeared to be incompetent. Interestingly though the most common source of stress was employer/management-induced stress. Examples of such stress included lack of training from the employer and a lack of management communication and support. Similar results

were also apparent in Law et al.'s (1995) study of 102 front line staff from 14 Australian tourist attractions. Again, poor management was the reason mentioned most often by respondents as a source of stress. A number of the other stressors tended to revolve around the interactions with customers, such as difficulties in controlling crowds. While it might seem self-evident that difficult customers are an occupational hazard for tourism and hospitality employees there is a need to ensure that they are properly trained to deal with such situations. This and other aspects are clearly reliant on proactive management and in considering workplace stressors it is clear that there is significant responsibility on employers and managers to address these issues in a proactive manner, including developing a stress policy.

### Developing policy

IDS (2004b) recognize the importance of having a stress policy in bringing the subject out into the open, ensuring that stress is not seen as a taboo subject and employees do not feel stigmatized for feeling 'stressed'. They also recognize that a standard stress policy is likely to have the following aspects:

- A definition of stress.
- A description of the symptoms of stress and stress-related illnesses.
- An outline of the organization's responsibilities for managing stress.
- An outline of managers' and employees' responsibilities for managing stress.
- A list of both internal and external sources of help for stress-related issues (see HRM in practice 11.13).

### Working time

Excessive working time has often been linked to stress (LRD, 2006a) and clearly is deleterious to a healthy work-life balance. Estimates suggest that around 11 per cent of UK employees currently work more than 48 hours a week, this figure is the highest in the EU, creating concerns about 'burn out' (LRD, 2006b). Additionally, the UK tops the European hours league with a usual working week of 42.7 hours, compared to an EU average of 41 hours (LRD, 2006b). Interestingly



## HRM in practice 11.13 EAPs: Helping employees in the workplace

EAPs are external help services provided by employers which aim to assist in the identification and resolution of employee concerns that affect performance. EAPs originated in the US and remain popular there, with over 85 per cent of the largest *Fortune* 500 companies using their services. Outside the US the uptake is rather patchier. In Europe EAPs are rarely used, though there is evidence that more UK employers are using their services, which now cover around 15 per cent of employees. EAPs typically provide a 24-hour, 365 days-a-year telephone counselling service for employees on issues such as stress, bullying, violence, and drug and alcohol misuse. A recent decision in the Court of Appeal on work-related stress has given EAPs a significant boost. The ruling from the Court of Appeal suggested that the provision of EAP provision to address stress pointed to a proactive employer response and consequently employers who use such services are less likely to be found to be in breach of the duty of care expected in health and safety legislation.

Source: LRD (2003a).

though compared to non-EU countries, the UK has shorter working hours than Australia, Japan and the US (CIPD, 2006c). Many would argue that debates about long working hours are particularly pertinent to tourism and hospitality. The long hours culture in the industry means that many employees work excessive hours, which is likely to have a harmful impact on their health. A recent survey of nearly 700 hotel, restaurant and bar employees reported in *Caterer and Hotelkeeper* (9th June 2005, 'Long working hours the norm') found that 93 per cent worked more than 40 hours, with nearly a fifth (17 per cent) working more than 60 hours a week. The same is also very much true for managers and operators of small business, with a survey of 1400 small hospitality businesses finding that 46 per cent of publicans, 43 per cent of hoteliers and 13 per cent of restaurateurs worked more than 70 hours a week (Cushing, 2004).

The continuing prevalence of excessive working time for many tourism and hospitality employees may seem surprising given the introduction of the Working Time Regulations (WTR) in 1998. The introduction of the WTR in the UK was not without controversy. The WTR were initially introduced as a health and safety measure. Despite this, the government of John Major sought to challenge the legality of the measure via the European Court of Justice (ECJ), but eventually lost the

case in November 1996, as the ECJ ruled that working hours were a health and safety issue as opposed to a more general social issue. As a result the UK government eventually introduced the WTR into law in October 1998 and the main provisions are (CIPD, 2006c):

- A maximum working week of not more than 48 hours a week, including overtime, normally calculated over a rolling 17-week period.
- Employees are entitled to a daily rest period of 11 hours.
- Night workers are limited to an average of 8 hours work in 24 hours.
- Employees are entitled to 4 weeks paid holiday.
- Where the working day is longer than 6 hours, workers will be entitled to a rest break of 20 minutes.
- In each 7-day period, workers will be entitled to 1 day's rest, in addition to the above 11-hour period set out above.
- Free health assessments must be made available to night workers.

When they were first introduced it was felt that the WTR would have a significant impact on UK organizations. In particular, the extension of paid annual leave to the UK, the only EU country not to previously have a legal right to paid holidays, affected around 2.5 million workers, mostly part-timers and women. Moreover just over four million workers had less than 3 weeks leave and six million less than 4 weeks leave (Milne, 1998). In reality though the impact of the WTR has proved to be less than thought, in part because of a series of derogations which the UK government negotiated (Hurrell, 2005). Chief among these is the ability of companies to offer an 'opt-out' where employees sign away their right to a 48-hour limit on their working week. This measure is one which has been adopted by a large number of tourism and hospitality employers. Although the European Commission has recently sought to restrict the UK's right to offer an opt-out clause, at the time of writing the UK government seems determined to retain the opt-out (LRD, 2006b). Finally, even the provision of paid leave is far from straightforward. Due to the WTR never specifying whether public and bank holidays would be included in the 20-day calculation some employers have taken advantage of this loophole and have used bank holidays in calculating their employees' holiday entitlement. Resultantly, around 3.4 million employees have not been getting 20 days minimum paid leave a year, with around one million of these employees being in the leisure and retail industries (LRD, 2005b). More recently it appears that this loophole



is now likely to be closed with the Government announcing plans to rectify this anomaly (LRD, 2006c).

## Workplace violence

Tourism and hospitality establishments rank high on the list of workplaces with high incidences of violence. LRD (2003b) reports evidence from the British Crime Survey on the number of workers reporting assaults or threats which occurred while the victim was working and were perpetrated by a member of the public. Across all occupations the percentage of workers who faced violence was just 1.2 per cent. However, for leisure service providers the figure rises to 3.7 per cent and for publicans and bar staff it rises significantly to 11.5 per cent. Boyd (2002) in a survey of nearly 1200 employees in the airline and railway industries also found that 70 per cent of her respondents reported an increase in the number of abusive passengers over the previous year. Such abuse was both verbal with 74 per cent of respondents experiencing verbal abuse from passengers at least once a month. More worryingly still, nearly 40 per cent of her respondents had experienced at least two types of physical abuse and 26 per cent had experienced at least three types of physical abuse. Instances of such abuse included being pushed, punched, kicked, slapped, struck with an object and spat at.

These relatively high figures reflect the fact that many employees in the tourism and hospitality sector have to deal with members of the public, exchange or collect money, work at night and work alone, or in small numbers. Added to these aspects many workplaces in tourism and hospitality involve the consumption of alcohol, often to excess. Certainly, alcohol seems to have a catalytic effect in many instances of workplace violence in tourism and hospitality. Morgan and Nickson (2001) in a review of 'air rage' in the airline industry found that excessive alcohol consumption was by far the most commonly cited contributory factor to passenger violence or aggression. Other reasons included being deprived of nicotine and the inherently stressful nature of flying.

Workplace violence is undoubtedly a complex issue, though again there is a need for organizations to be proactive. Certainly an argument could be made that the Management of Health and Safety at Work Regulations would encourage organizations to assess and act upon any potential risks of violence. Amongst other things organizations could consider issues such as the underlying cause of

## HRM in practice 11.14 A proactive response to 'air rage'

IDS (2000) report on how Virgin Atlantic have sought to address violence at work, and specifically air rage, by improving their HR approaches. Within the recruitment and selection process for instance Virgin look for key skills in relation to communication skills, assertiveness and customer service orientation, and although not a primary consideration in the selection process there is an assessment of how potential employees may respond to difficult scenarios involving aggressive customers. Employees also receive training in observation skills to help them identify potentially disruptive passengers at an early stage. Staff are taught how to recognize potential precursors of an air rage incident, such as the tapping of fingers or the reddening of a passengers face, and in response to these use calming techniques, such as using friendly gentle tones and body language, to defuse the situation. As a result of these approaches the need to have recourse to actual physical restraint has significantly decreased in Virgin Atlantic. If a major incident does occur though the company also looks to provide a supportive response. There is an automatic debriefing to the whole flight crew, even those employees not directly affected by the incident. Attendance at such debriefings is mandatory and this recognizes that they may be a delayed response from employees to what is a potentially very stressful experience. Further to that Virgin also provide follow-up counselling, if necessary, through their occupation health department. Finally, the company also offers legal and financial support to employees who wish to pursue legal action against assailants.

the violence, working practices, and the provision of suitable training and support needs (see HRM in practice 11.14).

## Conclusion

Welfare, health and safety issues have become increasingly important to tourism and hospitality organizations as the business case for proactive responses has become recognized. In considering the 'alphabet' of welfare issues a number of these issues seems to have a particular resonance within the tourism and hospitality sector. The presence of demanding customers, the blurring of work and leisure and often catalytic effect of alcohol create particular circumstances where the duty



of care of employers seems particularly pronounced. That said, it was also recognized that in seeking to intervene in often sensitive issues that the balance between an organizational members public and private life is far from clear cut. Undoubtedly managers in modern organizations require an awareness of these issues and how best to intervene for the benefit of both the organization and individual; a task that is far from easy in dealing with potentially sensitive issues.

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## Websites

- <http://www.managingabsence.org.uk/> provides employers with comprehensive information on cost-effective approaches to managing short-term sickness absenteeism.
- Two charitable organizations that campaign on issues related to AIDS/HIV are the Terence Higgins Trust and the National Aids Trust, <http://www.tht.org.uk/> and <http://www.nat.org.uk/>
- The Ark Foundation is a service offered by Hospitality Action, set up for the purpose of educating hospitality industry students, employees and management as to the dangers of alcohol dependency and other drug misuse, <http://www.thearkfoundation.co.uk/>
- DrugScope offers some interesting views on policy issues surrounding drugs and can be found at <http://www.drugscope.org.uk/>
- Women Against Sexual Harassment is a global organization that campaigns against sexual harassment, <http://www.washrag.org/>
- The Health and Safety Executive's stress at work page can be found at [http:// www.hse.gov.uk/stress/index.htm](http://www.hse.gov.uk/stress/index.htm)
- The Health and Safety Executive's violence at work page can be found at [http:// www.hse.gov.uk/violence/index.htm](http://www.hse.gov.uk/violence/index.htm)
- The Department of Trade and Industry has details of the Working Time Regulations and other case studies on how reduce long hours <http://www.dti.gov.uk/employment/employment-legislation/working-time-regs/index.html>