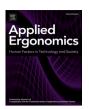
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Work activity in food service: The significance of customer relations, tipping practices and gender for preventing musculoskeletal disorders



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ABSTRACT

Some evidence shows that food servers are exposed to an elevated risk of musculoskeletal disorders and injuries, and that their work activity varies by gender. Interviews of servers and observations of food service in Québec, Canada, were carried out in three restaurants and a questionnaire was administered to 64 workers from 44 other restaurants. The relationship with the customer has specific effects on work activity and transforms the physical, emotional and cognitive work. Strategies intended to speed service or otherwise related to the customer relationship can involve health risks. Women reported more direct food service (p < 0.01), a tendency to do more "housekeeping" tasks (p < 0.07) and fewer hours of work per week (p < 0.01). Women workers reported experiencing more sites of pain (p < 0.003). This exploratory study suggests that managing the server-customer relationship could be important in preventing musculoskeletal disorders in this population and that women are at particular risk.

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1. Introduction

Restaurant workers are at risk for musculoskeletal problems as well as work accidents such as slips and falls in Canada (Stock et al., 2011; Cloutier et al., 2011a) and elsewhere (Sedler et al., 2015; Balanay et al., 2014). However, work activity of food servers has been little studied, in part because of difficulties reaching this employment sector (Compagnat, 1985) and in gaining access to restaurant work sites (Laperrière, 2014). The restaurant industry has a high turnover rate as well as a large proportion of young people (Conseil québécois des ressources humaines en tourisme [CQRHT] and Emploi-Québec, 2010). This sector also has many precarious or "atypical" workers, with the highest proportion of part-time work and of work outside standard working hours and the second-highest proportion of temporary workers in the province of Québec (Canada). It also has the highest proportion of workers in the lowest income quintile, with annual revenue averaging \$18,000-20,000US (CQRHT and Emploi-Québec, 2010). Workers in this sector are more likely than others to lack access to various social benefits such as paid rest breaks, paid vacation, and

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paid holidays (Cloutier et al., 2011b). Such "precarious work" is associated with various health problems (Quinlan et al., 2001; Benach et al., 2014) as well as difficulty of access by the public health and occupational health authorities (Compagnat, 1985; Quinlan and Sokas, 2009).

There is a growing interest in the health and safety of restaurant workers. Food service is a very common job of university students in the United States (Balanay et al., 2014) and Canada (Laberge et al., 2012), and young people in this sector have a high rate of work-related health problems (Balanay et al., 2014; Laberge et al., 2012). In addition, in the United States, immigrants hold a high proportion of jobs in this sector, where job discrimination may lead to increased vulnerability (Kim et al., 2013). Finally, food servers in Canada are primarily (76%) women (Uppal and Rochelle, 2014); it is the 6th most common profession among women with no university degree.

1.1. Physical challenges

Work in food service can involve heavy lifting, repetitive movements, prolonged standing and other physical challenges (Wills et al., 2013). Although lower limb disorders have been reported among food servers for a long time (Winkel, 1982) and lower limb discomfort has been associated with a prolonged standing

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posture among food servers (Laperrière et al., 2006), few researchers have looked globally at musculoskeletal health in this group. Dempsey and Filiaggi (2006) studied 100 restaurant food servers in the United States and found that 42% reported musculoskeletal problems, primarily in the back and shoulders; Kim et al. (2013) found that 84% of restaurant workers reported musculoskeletal problems, with no significant distinction among job assignments within restaurants. Several studies (Dempsey and Filiaggi, 2006; Verma et al., 2011) found an elevated probability of slips and falls in the restaurant industry (specific profession undetailed).

Some evidence suggests that women food servers are more likely than their male colleagues to experience musculoskeletal problems. Women in all sectors of the restaurant industry in Québec are significantly more likely than men to receive compensation for an occupational disease, and the average expense and duration of absence due to an occupational accident or disease is higher among women (Stock et al., 2011). Gender differences in musculoskeletal problems have been related to differences in working postures and work activity (Messing et al., 2015).

1.2. Cognitive and emotional challenges

Service work has been a subject of interest in ergonomic analysis for several years (Caroly, 2002, 2010; Caroly and Weill-Fassina, 2004). Cognitive challenges in this work include demands on memory and on the capacity to coordinate one's actions with those of other service providers, Cahour and Pentimalli (2005) have described a high degree of collaboration in food service, made possible through what they describe as "peripheral awareness" of what their colleagues are doing. This type of work poses a challenge in that the status of the customer must be considered, not only as the "object" of the work but also as a potential partner or collaborator in a situation of cooperative work (Falzon and Lapeyrière, 1998). Caroly and Weill-Fassina (2004) describe the management of critical situations in service work as a search for balance among four poles of service activity: 1 - "System" (objectives, available tools, rules and procedures); 2 - "Others" (relations with colleagues, superiors and personal social environment); 3 -"Customer" (needs, behaviours), and 4 - "Self" (preservation of health and well-being).

Sociologists have been interested in service work and its requirements for managing emotions (Soares, 2003; Hochschild, 1983; Jeantet, 2003; Diefendorff et al., 2005). A number of authors have described the emotion "management" involved in food service (Compagnat, 1985; Hall, 1993; Tibbals, 2007; Fellay, 2010) and the challenges involved when tipping at the customer's discretion is an important part of food servers' revenue, as it is in North America (Lynn and McCall, 2000; Hubbard et al., 2003; Laperrière et al., 2010). This is true despite empirical data showing that tip amounts in Canada are relatively independent of service quality, and could be predicted to some extent from social characteristics of customers (Maynard and Mupandawana, 2009).

1.3. Gender differences in food service

In Canada, food service is ranked sixth among occupations held by women without university degrees (and 20th among women with university degrees) but is absent from lists of men's top 25 occupations (Uppal and Rochelle, 2014). Food service may be typical of traditionally female jobs where the physical constraints are less visible than in traditionally male occupations (Messing, 1998).

We have previously studied work activity of food servers and found that the women spent significantly more time walking and less time standing than the men. Women were also observed to walk faster (81% more steps per sec) and to take 80% more steps at a time (Laperrière et al., 2006).

1.4. Study objectives

The present study is part of a broader exploration of work requirements, skills and health of male and female food servers (Laperrière, 2014). We present here results concerning the physical, cognitive and emotional components of this job and its associated health symptoms. Gender differences in task demands and symptoms are examined, as well as gender differences in the strategies used to deal with the physical demands of this job. We will profit from the availability of a contemporaneous population-based study of the Québec work force to compare the study results to the larger sample. In view of the difficulty of reaching this population, the success of various recruitment procedures will also be presented. We ask: 1) How does the customer/food server relationship determine the exposure of food servers to musculoskeletal disorders? and 2) How does the gender of food servers affect this interaction?

2. Methods

The study was approved by the relevant ethics committees of the Université du Québec à Montréal.

2.1. Framework

The analytical framework is that of work activity analysis (St-Vincent et al., 2011; Montreuil et al., 2013). This approach seeks to situate the actions and words of workers in relation to their situation, in order to identify elements of the global work situation that can be acted upon so as to improve health while maintaining production (Major and Vézina, 2015). These elements can include not only immediate workplace determinants such as the physical work environment, co-worker relations, availability of equipment and customer demands but also distal factors such as managerial decisions, social stereotypes and cultural practices (Messing et al., 2005). Solutions generally tend toward enlarging the operational leeway (marge de manoeuvre) of workers so as to extend the range of strategies they can deploy to protect their health (Coutarel et al., 2015).

Methods employed are generally qualitative, involving extensive observations validated and extended through interviews. However, documenting quantitative aspects of the work plays a key role in confirming the importance of determinants (Messing et al., 2005).

2.2. Observations

The aims of the observational study were to familiarise the researchers with all poles of the work activity, to identify physical, cognitive (reasoning) and emotional challenges in the work, to open dialogue with the food servers on their strategies for health preservation and the various determinants of those strategies, and to observe the gender segregation of tasks and strategies that may be relevant when seeking solutions. "Work activity" in this case includes all observable actions and verbalisations of the worker during paid work time, whether or not the observer can initially link them to task requirements (Daniellou, 2005).

Two employers agreed to participate in the study. The first, "Restaurant A", accepted an exploratory study requested by its union; this was a full-service, fine dining (North American Industry Classification System (NAICS) Canada, 2012) restaurant staffed

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