

[Hsieh, Y.](#), [Apostolopoulos, Y.](#) & [Sonmez, S.](#) (May 2013): World at work: Hotel cleaners, *Occupational and Environmental Medicine*, 70(5), 360-364.

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World at work: Hotel cleaners

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Word Count: 2184

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With tourism and hospitality representing the largest economic sector in the world¹ and over 4.8 million rooms in accommodation establishments in the U.S. alone², hotel cleaners comprise a significant occupational segment. Regardless of geographic variation, hotel cleaners are predominantly women, immigrants, and minorities working under adverse conditions such as long hours, ergonomic strain, chemical exposure, poor pay, low job control, job insecurity, and a wide array of other physical and mental health risks.³⁻⁵ Such exposure has produced disproportionately high health disparities among service occupations, including repetitive strain injury, musculoskeletal disorders, allergies, and psychological distress; hotel cleaners are both highly underserved and understudied as an occupational segment.⁶⁻⁸ In this paper, we will provide an overview of the plethora of work hazards encountered by hotel cleaners and propose effective measures to reduce these hazards in order to improve hotel cleaners' occupational safety and health.

TASKS OF THE JOB

Hotel cleaners perform cleaning tasks in lodging facilities, such as hotels, motels, and resorts. Various interchangeable terms have been used to identify these laborers, including "maids," "housekeepers," and "room attendants."⁹ By cleaning guests' rooms, hotel cleaners make an important contribution to the core value of a hotel. Unlike cleaners in other private or commercial establishments, hotel cleaners are required to clean guest rooms to meet the quality standards of the individual hotel. They are also expected to exercise customer service skills when encountering hotel guests and to contribute to customers' overall satisfaction.¹⁰

The responsibilities of a hotel cleaner vary and generally include cleaning the guest rooms, hallways, and other public areas in the hotel. The specific tasks involved include changing sheets and towels; making beds; emptying wastebaskets; dusting and polishing furniture and equipment; scrubbing sinks, taps, toilets, and bathtubs; washing and mopping

bathroom floors; vacuuming floors; replenishing supplies; pushing heavy supply carts; and responding to requests from guests and front desk employees.

The majority of hotel cleaners are women and immigrants with minimal education.^{3,11,12.} The typical, full-time cleaner works one 8-hour shift per day, five days a week. Such a worker is usually expected to clean 12 to 16 rooms per shift, which allows for less than 30 minutes to clean each room.³ A number of circumstances, including guests who request a late check-out or extremely dirty rooms that require deep cleaning, often delay the work process, forcing the cleaner to work longer hours or overtime. It is common practice among hotels to hire cleaners based on the fluctuations in room occupancy rates, resulting in part-time hours, variable hours, or seasonal work hours.¹² Hotel cleaners under these circumstances often work for more than one hotel or hold a second job in addition to their hotel cleaner position in order to make ends meet.¹³ Even though the work of a hotel cleaner is important, hotel cleaners are considered to be among the lowest remunerated workers, and their pay cannot compare reasonably to that of other hotel positions.^{11,12,14} In general, their pay is slightly higher than minimum wage. In the UK, the average hourly pay for a hotel cleaner was between £5.05 and £6.20¹⁴, and in the US, the median pay for hotel cleaners was \$9.32 per hour in 2011 (slightly above the federal minimum wage as set in 2009 at \$7.25), or approximately \$19,390 per year.¹⁵

HAZARDS OF THE JOB

In addition to long work hours and low pay, hotel cleaners are exposed to serious occupational hazards in the course of performing their everyday cleaning tasks. In fact, according to a study of hotel records covering thousands of employee injuries, this position represents the highest overall injury rate among all categories of hotel employees, with an injury rate of 10.4%, almost double the injury rate for non-housekeepers (5.6%).⁶ Occupational hazards hotel cleaners are exposed to can include physical, chemical, biological, and psychosocial. Table 1 summarizes the work hazards faced by hotel cleaners.

Physical hazards

Hotel housekeeping is physically demanding work, involving a series of repetitive movements (e.g., lifting, lowering, pushing, and rotating mattresses; pulling pillowcases off/onto pillows; carrying, folding, and tucking linen; stretching and bending; and pushing equipment and supply trolleys). A report from the Canadian Center for Occupational Safety and Health revealed that a hotel housekeeper changes his or her body position every three seconds while cleaning a room.⁵ If the average time spent cleaning each room is less than 25 minutes, a housekeeper would assume 8,000 different body postures during every eight-hour shift.⁵ High aerobic strain, heavy static muscular loads, awkward postures, overexertion, and the fast-paced work required to meet their daily room quotas are all factors that put hotel cleaners at high risk for physical injury. They are also more likely than other workers to suffer repetitive motion injuries (RMI).⁵ The physical hazards faced by hotel cleaners are intensified by the poor ergonomic design of cleaning equipment (e.g., heavy trolleys, vacuum cleaners). In the course of a cleaning shift, hotel cleaners must push fully-loaded cleaning carts between rooms and often between floors. The introduction of luxury rooms featuring oversized mattresses, opulent linens, and an increase in upgraded amenities has exacerbated such physical hazards.⁷ Not surprisingly, this occupational group has the highest rate of musculoskeletal disorders among all hotel employees, with 3.2 cases per 100 workers.⁶ Studies of hotel housekeepers have indicated that the majority of the reports of pain made by the cleaners are in regard to their shoulders, hands, and upper and lower back.^{7 8} In addition, cleaning tasks are frequently performed under intense time pressure, making cleaners more prone to trauma hazards, such as slipping on wet floors, falling in tubs, and tripping over cords, linens, and other obstructions. Therefore, over time, working as a hotel cleaner can result in debilitating injuries, chronic pain, and a host of disabilities.

Chemical hazards

Hotel cleaners are regularly exposed to hazardous chemicals in the cleaning products used to clean sinks, bath-tubs, toilets, and mirrors, including ammonia and solvents that irritate the skin, eyes, nose, and throat and cause dermatitis. Exposure to the volatile organic compounds contained in cleaning products can cause respiratory diseases and increase possible carcinogenic risks.¹⁶ Certain solvent-based products can damage the kidneys and reproductive organs.¹⁶ In addition, some hotel cleaners suffer allergic reactions upon exposure to the latex gloves used during cleaning.

Biological hazards

Biological hazards are defined by the Occupational Safety and Health Administration (OSHA) as infectious agents presenting an increased risk of illness, injury, or even death to employees.¹⁷ While cleaning guest rooms, hotel cleaners can potentially come in contact with broken glassware, used hypodermic needles and other medical waste left by guests, contaminated waste, human excreta, and mold and microbial contaminants. These biological hazards put hotel cleaners at risk for contracting infectious diseases such as HIV and hepatitis, among many others.^{4 18}

Psychosocial hazards

Psychosocial hazards such as stress, violence, and bullying can potentially affect hotel cleaners' health and well-being adversely¹². Work-related stress occurs when job demands exceed the worker's ability. Hotel cleaners usually perform their tasks under adverse psychosocial work conditions, including monotonous and strenuous work, heavy workloads, time constraints causing them to race through tasks to meet their daily room quotas, and demanding guests.^{18 19} These workers also suffer from a lack of control over work organization, lack of support from supervisors or co-workers, lack of respect and recognition from managers, fear of job loss, and

lack of promotional prospects.^{4 18 19} Due to the lower level of entry to the job, this profession also attracts immigrants and migrants, who are more vulnerable to discrimination than native-born or local workers.²⁰ A study of immigrant workers in Spain found that immigrants' experiences of discrimination are associated with poor self-health, a higher prevalence of chronic diseases, and mental health problems.²¹ Continued exposure to these adverse work conditions and ongoing psychosocial stress can lead to mental and physical health problems. For example, research has shown that stress is associated with a variety of physical disorders, ranging from headaches and depression to symptoms mimicking those of a heart attack.²² While performing their jobs, cleaners move between public and private spaces of hotel guests and at times are subjected to violence and bullying (e.g., sexual harassment, verbal abuse, physical assault by guests and/or co-workers), thus jeopardizing their safety, health, well-being, and work performance.¹⁸

Table 1 Work Hazards of Hotel Cleaning

Type of Hazards	Examples of Hazards
Physical hazards	<ul style="list-style-type: none"> • Repetitive movement • Lack of ergonomic equipment • Luxury guestrooms (oversized mattresses, opulent linens)
Chemical hazards	<ul style="list-style-type: none"> • Cleaning products • Latex gloves
Biological hazards	<ul style="list-style-type: none"> • Broken glassware • Used hypodermic needles • Contaminated waste • Human excreta • Mold/microbial contaminants
Psychosocial hazards	<ul style="list-style-type: none"> • Work stress • Low control of work • Lack of supervisor or co-worker support • Lack of respect • Lack of recognition • Lack of promotion prospects • Harassment /violence/bullying • Discrimination

MEASURES TO PROTECT HOTEL CLEANERS

Preventive actions to protect hotel cleaners are needed at several levels to counteract the multiple hazards that cleaners face on the job. At the *legislative level*, enforcement of occupational safety standards are needed to address the unique hazards that lead to high injury rates among hotel cleaners. These regulations and standards must be enforced to eliminate known and suspected safety and health hazards. It is also important to emphasize the role of labor unions in representing hotel cleaners in negotiations with employers regarding wages, work hours, workloads, and work conditions to safeguard their rights and welfare. At the *organizational level*, employers must conduct risk assessments to identify and control reasonable and foreseeable health and safety risks and adopt interventions to prevent work-related injuries and illnesses. Information, instructions, and training regarding workplace hazards should be provided to employees to ensure a safe work environment. Work safety procedures displayed through posters and graphics with clear language that employees can comprehend should be available to employees. Written procedures regarding work-related accidents should be developed and made available to employees to follow in the event of accidents.¹⁸ Hotels can partner with academia, OSHA, National Institute of Occupational Safety and Health (NIOSH), and other organizations to enable better understanding of disparities in injury rates among hotel cleaners, to design effective systems to track occupational injuries and illnesses in the hotel sector, to improve work environments, and to develop effective remedies.⁴ More specific preventive measures include the following:

(1) To prevent *physical hazards*, safety training programs to instruct cleaners on safe work practices, including bed-making, bathroom and guest room cleaning practices, and proper handling of linen carts should be available. Training in ergonomics can help cleaners develop ergonomic working techniques, improve work posture, and reduce their physical burden.²³ For example, instead of spreading bed sheets by using a fluffing or throwing motion involving shoulders and arms, hotel cleaners should be instructed to lay sheets on the bed and unfold

them. Ergonomic cleaning tools, such as motorized linen carts that are highly maneuverable and can eliminate the exertion involved in pushing linen carts over carpeted areas, should replace old-fashioned, manually propelled and poorly-designed carts.⁴ Studies have found that the poor design and arrangement of furniture fixtures forces cleaners to stretch or overexert their bodies, resulting in increased musculoskeletal loads.^{24 25} Thus, guestrooms should be designed to be easy to clean, and furniture can be rearranged to minimize lifting, stretching, and bending. Additionally, instead of using flat sheets, hotels can use fitted bottom sheets to minimize mattress lifts, thereby reducing awkward postures associated with lifting heavy mattresses. This would also eliminate the unnecessary manipulation of bed linens required to make “hospital corners.” The fast pace of work contributes to housekeeping injuries and accidents; tasks performed under intense time pressure are more likely to cause harm than those performed at a more moderate pace.⁵ A slower tempo should be upheld to minimize accidents and injuries resulting from a faster pace of work. Although on the surface, this may appear to increase the cost of labor, in reality, minimizing injuries will save hotels money in workman’s compensation and absenteeism costs. In addition to incorporating factors that can affect workload, employers should solicit input from housekeeping employees and determine the optimal pace and amount of work required while limiting exposure to hazards. Furthermore, employers must ensure that workers take regular breaks, a practice that has been proven effective in promoting safety.^{18 26}

(2) To prevent *chemical hazards*, employers should inform, train, and supervise employees in the use and handling of cleaning chemicals. Employees should be instructed not to mix different chemicals. All containers and spray bottles should be clearly and bilingually labeled, and protective equipment (e.g., rubber gloves, eye shields, and face masks) must be provided to reduce chemical risks.^{16 27}

(3) To minimize *biological hazards*, employers should eliminate any work practice that may lead to biological exposure and establish standard procedures for hotel cleaners to follow

in handling dangerous waste and avoiding infections. First-aid staff should be trained in infection control procedures to handle potential exposures and hotel cleaners should wear appropriate personal protective equipment, use proper strength solutions, and practice good personal hygiene.^{4 17}

(4) To address *psychosocial hazards*, prevention and intervention strategies must be developed and implemented to reduce hotel cleaners' work stress and protect them from workplace violence and bullying. Administrative controls, such as job rotation, job redesign, work flow improvement, teamwork, and stress management should be used to minimize psychosocial hazards.¹⁸ Supervisor and coworker support can also alleviate stress and enhance wellness.¹⁹ A no-tolerance policy regarding violence, bullying, and discrimination should be established and enforced. Anyone who violates this policy needs to be held accountable for his or her actions; disciplinary consequences should be included in the policy. Reporting systems that do not penalize the worker filing complaints and proper procedures and training should be provided to minimize or eliminate occupational violence and bullying. Individual assistance for dealing with workplace incidents must be made readily available to workers.²⁸

According to the National Occupational Research Agenda (NORA), the incidence and severity of work-related injuries and illnesses among hotel cleaners need to be lowered by 20%, and the accommodation subsector needs to eliminate health disparities for priority population workers (i.e., Latino hotel cleaners).⁴ The NORA Services Council intends to ensure progress and track accomplishments of the accommodation subsector through 2016. For these priorities of strategic importance to be materialized, multilevel stakeholder partnerships are needed.

CONCLUSIONS

As a highly underserved occupational segment, hotel cleaners are exposed to a multitude of disproportionately high work-induced hazards resulting in adverse physical, ergonomic, chemical, biological, and psychosocial afflictions and conditions. Multilevel, multisectoral, and

multistakeholder preventive interventions are needed in order to prevent and alleviate the work-related hazards and strains faced by hotel cleaners.

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