M.Chitra/J. Pharm. Sci. & Res. Vol. 7(5), 2015, 256-259

ISSN:0975-1459
Journal of Pharmaceutical Sciences and Research
www.jpsr.pharmainfo.in

Occupational Disease among Women Employees in Beauty Service Business in Chennai

Dr.M.Chitra,
Assistant Professor,
Faculty of Management,
SRM University, Kattankulathur, Chennai

Abstract
Growth of beauty industry had increased dramatically in moder era. Appreciation to beauty is rapidly increasing with modern life style. Occupational health issues among the beauty parlor service providers is also increasing rapidly. Employees engaged in beauty parlors were exposed to various types of occupational health problems like respiratory infections, musculoskeletal disorder, back pain, dermatitis, allergic, joint pain, skin infections. The study aims to identify the occupational health issues among women employees in beauty parlors and to analyse the impact of health issues in work environment in beauty parlors. Data is collected from 350 beauty service providers from Chennai city by questionnaire methods and by using factor analysis as statistical tools.

INTRODUCTION :

Growth of beauty industry had increased dramatically in moder era. Appreciation to beauty is rapidly increasing with modern life style. Occupational health issues among the beauty parlor service providers is also increasing rapidly. Employees engaged in beauty parlors were exposed to various types of occupational health problems like respiratory infections, musculoskeletal disorder, back pain, dermatitis, allergic, joint pain, skin infections etc (Mandiracioglu et.al., 2009). According to World Health Organizations (WHO, 1994) health and work places are important issues which strongly relate to the health and well-being of the workers. The health problems can be controlled and avoided by improving the working practices and conditions. Effective control measures can by applied to take appropriate control measures.

Objectives of the study:

1. To identify the occupational health issues among women employees in beauty parlors
2. To analyse the impact of health issues in work environment in beauty parlors.

METHODOLOGY

Period of study

The data and information is collected from the respondents pertains to October 2013 to December 2013.

Sources of data

Reviews from the various literatures, helped the researcher to identify different variables and they are complied in the form the questionnaire. By using questionnaire as a tool for data collection primary data was collected from the employees of beauty salons and secondary data from journals, research papers, research reports, conference proceedings, magazines, newspapers and websites.

Selection of the study area

In the world of fashion, beauty and career counseling many are women with their own labels. As per the demographic profile of India (2012) women are in age group between 25- 54 is about 235,042,251. The population of Chennai is 5,00,8763 as per July 2012 statistical data consisting of 2,544,380 females. Chennai being a metropolitan city the number of working women is high when compared with other places in Tamilnadu. Further, the number of women in higher education institutions is going up, which resulted in increased demand for such personalized services. Considering the volume of business for beauty salons Chennai city has been purposively selected for the present study.

Sampling procedure and sample size determinations

It is estimated that nearly 4500 beauty parlors are operated in Chennai city and by adapting random sampling technique the data is collected from women employees of beauty salon business. A structured questionnaire was distributed to 500 women employees of beauty salon and out that 350 filled in questionnaire were found to be valid.
The sample size for the present study is determined by using the following formula:

$$S = X^2NP(1-P) \div d^2 (N-1) + X^2P(1-P)$$

S = Required sample size.
X2 = The table value of chi-square for 1 degree of freedom at the desired confidence level (3.841).
N = The population size (N=4500)
P = The population proportion (assumed to be .50 since this would provide the maximum sample size).
d = The degree of accuracy expressed as a proportion (0.05).
Hence, the sample size for the present study is 350 women employees of beauty salons in Chennai.

Instrument for Data collection

The pilot study was carried out with 35 respondents and reliability was checked using Cronbach alpha for different statements. Statements which seemed to be not useful for study and then found overlapping and variables that were not significantly contributing to the improvement of the cronbrach alpha too were removed.

Table : 1Reliability statistics

Cronbach's Alpha	No. of Items
.776	16

Table 2 KMO and Bartlett's Test

Kaiser-Meyer-Olkin	Measure of Sampling Adequacy.	.552
Bartlett's Test of Sphericity	Approx. Chi-Square	3072.430
	Df	120
	Sig.	.000

Table : 3 To**tal Variance Explained**

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	4.766	29.787	29.787	4.766	29.787	29.787	4.438	27.737	27.737
2	2.766	17.286	47.073	2.766	17.286	47.073	2.104	13.150	40.886
3	1.918	11.986	59.058	1.918	11.986	59.058	1.910	11.940	52.826
4	1.135	7.096	66.155	1.135	7.096	66.155	1.728	10.801	63.627
5	1.063	6.646	72.800	1.063	6.646	72.800	1.468	9.173	72.800
6	.890	5.563	78.363						
7	.834	5.210	83.574						
8	.615	3.844	87.417						
9	.500	3.128	90.545						
10	.461	2.879	93.424						
11	.369	2.306	95.730						
12	.239	1.496	97.226						
13	.168	1.052	98.278						
14	.133	.831	99.109						
15	.098	.611	99.721						
16	.045	.279	100.000						

RESULTS AND DISCUSSION :

In order to identify the occupational health problems among the employees in beauty parlors factor analysis was performed. The results are presented below. Table 2 contains the results regarding the sample adequacy and sphericity of the sample. The KMO test indicates that the sampling adequacy is 55% implying that the sample was adequate. As regards the nature of the sample the statistically significant chi-square value [3072.430] indicates that the sample conforms to normality.

In order to identify the major health problems among the women employees in beauty parlors 16 factors were selected from the questionnaire and used in the factors analysis. The results revealed that the first five components alone explain more that 72% of the variance. This implies the five components consists of a number of factors which have to be concentrated. Varimax rotation component matrix was studied for distributing the variables under five factors.

From the table 3 it is clear the first component has totally 8 factors are heavily loaded, viz., dermitis on the parts of the body, chest pain, respiratory function, skin contact, RSI, viral infection, bacterial infection and fungal infection. This means that women employees in the beauty parlors have experienced the above said occupational diseases. The management of the beauty parlors must understand the problems of the employees and try to do the remedial actions in case if they are affected with the above said occupational diseases. The occupational diseases like dermitis, chest pain, problem in respiration while using any chemicals and sprays and direct contact of chemicals with the skin which causes irritation, burning and allergy to the employees who are very sensitive are identified. Services offered in beauty parlors have to be handled with steady and stipulated timings with full concentration with different posters as needed based on the type of service. Services like acne and pimples treatment have to be made with utmost care by the employees by using sterilized equipments. If by accident the service provider happens to touch the affected parts without gloves the chances of getting infected to the service provider is also high. Treatments like dandruff, acen, pimple, scare and trots removal have to be made with full protection and care for both the customer and also to the employees.

The second components have 3 more factors which are heavily loaded viz., back pain, RSI and chemical problems. It is clearly noted that the 3 factors are related to operational aspects of the beauty parlors. Based on the different types of services to be offered to the customer different posture have to adopted. For example treatment

like facial and bleaching the service provider have to stand and for massage they have to adjust to the level of the chair. Co-ordination between hands, thread, mouth and the posture to bend their head to make the service convenient to complete with perfection and also with satisfaction of the customer is important.

The third component has 3 factors namely hand dermitis, skin contact, and problems due to waxing. These factors shows the problems encountered by the employees while attending their customers. So to prevent these occupational problems proper precautions like wearing gloves and aprons, usage of irritating chemical related products can be advised to the employees and also to the customers.

The fourth component has 2 factors namely inhalation issues and occupational stress. Occupational stress can be reduced to a greater extent if the employee executes her work with interest and with dedication and also to the satisfaction of the customer. If an employee offer a service to a customer with stress in her mind the expected output will not be noticed. If output is not to the satisfaction customer retention will be affected.

The last component is loaded with a factor namely skin absorption. Beauty parlor service is done mostly with personal contact by touching the skin of the affected parts. By doing so there is more possibility for the chemicals used for the service to be absorbed by the skin of the service providers. So due care has to be taking to take measure to avoid direct contact with the skin.

Table : 4 Rotated Component Matrix[a]

	Component				
	1	2	3	4	5
hand dermitis			.663		
dermitis on part of the body	.698				
chest pain	.737				
back pain		.693			
respiratory function	.579				-.537
inhalation issues				.713	
skin contact	.716		.503		
skin absorption					.866
RSI	.680	.510			
muscular and skeleton disorders			-.552		
viral infection	.527				
bacterial infection	.874				
funfal infection	.802				
Waxing			.754		
chemical problems		.771			
occupational stress				-.838	

Extraction Method: Principal Component Analysis.
Rotation Method: Varimax with Kaiser Normalization.
a. Rotation converged in 7 iterations.

DISCUSSION AND SUGGESTIONS

Psychological issues prevailing among parlor workers are time pressure, lack of control in organizing the work and taking breaks, lack of support by colleagues or superiors, lack of appreciation or rewards, conflicts, lack of career development possibilities, imbalance between work and private life, sexual harassment, aggression and violence and teasing at work are the important factors leads the occupational stress.

Identification of the hazards and risk which causes harm to the employees who are involved in that course of work. By prioritizing and evaluating the risk in the order of importance among the employees and framing proper preventive action to control the occupational hazards. A vital role has to be played by the beauty parlor management to monitor and review the process by regular assessment. A proper knowledge about chemical hazards on the products, preventive measure about the exposure to chemicals during hair bleaching products, usage of break area for free from chemicals, alert signal for sensitive employees regarding skin protection plan, usage of gloves and protective creams during services, maintenance of health and hygienic non-slippery floor by proper removal of hair, water and used cotton wipes by dropping in dustbins. A proper maintenance of the electrical instruments without short circuits, experience in handling electrical instruments for service, periodic checking of all the instruments is more important. Psychological issues and work organization also play a vital role in occupational health issues among the employees of the beauty parlor. Employers must schedule a proper work schedule with regular breaks, training to react in the case of emergency by

first aid. Rules and regulations must be strictly followed by the Government to have a comfortable working environment, proper equipments, emergency exit during fire accidents. Monitoring of beauty parlors by insisting on proper disposal of waste management is also important. Prolonged standing, longer working hours, exposure to noise and high temperature causes health issues among beauty parlor workers (Muss and Gouveia, 2008). As stated by Lind., et.al., (2005) dermitis is a most common health problem among the hairdressers in beauty parlors which causes irritating and unslightly condition of the skin. So proper care must be insisted on dermitis problems.

According to Ameille et.al., (2003) products used regularly in hairdressing salons such as shampoos, creams, hair dyes, sprays and hair conditioners contains chemical linked to asthma, cancer, skin irritation and allergy, problems in reproduction. Skin penetration through processes such as cutting, manicure, pedicure and skin care if not managed properly will lead to the possibility of transmitting fungal, bacterial and viral infections including HIV, Hepatitis B and Hepatitis C, (Baakrim et.al., 2002) . Proper ventilation and adequate space to the customer and provide the service effectively without any stress is also important. The study results also shows the same as stated by Mounier-Geyssant et.al., (2.006). The good working environment was also studied by several scholars which stated that temperature, humidity, lighting and ventilation and noise in the parlors also counts for occupational issues among the employees (Ronda et.al.,2008, Evci et.al., 2007)

REFERENCE :

[1] Mandiracioglu, A., Kose, S., Gozaydin, A.Turken, m., Kuzucu, L.(2009). “Occupational health risk of barbers & coiffeurs in Izmir” Indian Journal of Occupational and Environmental Medicine. Vol 13, (2).

[2] Mussi, G., Gouveia, N., (2008). Prevalance of work-relatd musculoskeletal disorder in Brazilian hairdressers. “occup MedI (London); 52: 645-51

[3] Lind, ML., Boman, A., Sollenberg, J., Johnsson, S., Hagelthorn, G., Meding, B. (2005). Occupational dermal exposure to permanent hair dyes among hairdressers. Ann Occup Hyg, 49:473–80.

[4] Ameille, J et al. (2003). ‘‘Reported Incidence of Occupational Asthma in France, the ONAP Programme’’ Occup Environ Med, 60, p. 136-41.

[5] BaakrimMZ., Laraqui, S., Laraqui, O., El KaboussY., Verger, C., Caubet, et.al (2002). Infectious risk associated with blood exposure for traditional barbers and their customers in Morocco.Sante; 14:211-6

[6] Mounier-Geyssant, Estelle, Véronique Oury, Lory Mouchot, Christophe Paris, and Denis Zmirou-Navier. "Exposure of hairdressing apprentices to airborne hazardous substances." Environmental Health 5, no. 1 (2006): 23.

[7] Ronda, Elena, Bjorg Eli Hollund, and Bente E. Moen. "Airborne exposure to chemical substances in hairdresser salons." Environmenta/8l monitoring and assessment 153, no. 1-4 (2009): 83-93.