



Michelle Thomas, of the Seafarers' International Research Centre, reports on a study of the health of

seafarers working on cruiseships and their use of shipboard medical services

The maintenance of good health and the avoidance of injury is a concern for all occupational groups and seafarers are no exception. However, unlike many other workers, when injured or ill, a visit to the family doctor or local hospital is not an option for seafarers during a tour of duty. Medical diagnosis and health advice for seafarers during a voyage is often limited to the ship's officer responsible for first aid and medical care, or, in more extreme cases, to advice from telemedicine services or from local doctors at the nearest port of call. The routine and compulsory medical examinations that seafarers

Improving access to health care

undergo prior to embarking on tours of duty go some way towards ensuring a healthy workforce. However, health is not a static condition and an individual's health status can potentially change dramatically over the course of a voyage.

Where seafarers have opportunities to go ashore, medical advice and treatments can be sought via local pharmacies and medical practices. In general, seafarers working aboard cruiseships may have more opportunities to go ashore than those working aboard cargo vessels as port stays of a reasonable duration are an inherent feature of a cruise schedule. However, factors such as long working hours, high work loads and decreased crew sizes may all serve to reduce opportunities for crew to go ashore, as have increased port security restrictions and regulations since the events of September 11.

In addition to increased opportunities to go ashore, seafarers working on cruise vessels differ from those on cargoships in that whereas cargo seafarers are extremely unlikely to be sailing with a qualified medical professional, those on cruise vessels typically sail with doctors and nursing staff on board. These medical staff are employed to serve the health requirements of passengers and are also available for consultations with a ship's crew.

In 2002 and 2003 SIRC conducted a study of the health of seafarers working on cruise vessels. This study explored the health concerns and experiences of cruiseship crews and their use of shipboard medical services. When we analysed this data, it was encouraging to see that all but one seafarer we interviewed reported that they had access to the ship's doctor, and the vast majority (96 per cent) reported

that the medical consultations were free of charge. Similarly high numbers (94 per cent) reported that medical treatments and prescriptions were given free of charge.

However, the waiving of any fees for doctors does not guarantee that seafarers will have the opportunity to make use of medical services as and when needed. Cruiseship crews, like their counterparts on cargo vessels, frequently report high workloads and long working hours. Ships' doctors typically have designated hours when they are available to see crew members. Our research showed that these hours could be quite limited: over three quarters of the crew members in our sample reported that the doctor was available to seafarers for three hours a day or less.

Our study found that, in many cases, access to medical help and advice was mediated

by the crew member's line manager or supervisor: over three quarters of the seafarers we interviewed said they had to ask their supervisor's permission before they could visit the ship's doctor, with 72 per cent reporting that they had to tell their supervisor the reason for their visit. The disclosure of health problems may be sensitive for a number of reasons. Some problems may be felt by the individual to be very personal in nature and be something they feel uncomfortable discussing, even with a medical professional. Other needs may be felt to be in some way socially stigmatising, for example concern about having contracted a sexually transmitted infection (STI) or a request for contraception for a pre- or extra-marital relationship. The requirement to reveal such medical and health concerns outside the

confines of a doctor's surgery may, for some, be sufficient to prevent them seeking professional medical help.

Once a seafarer has entered into a consultation with the ship's doctor, uncertainty about the confidentiality of this consultation remains significant. Respondents were asked about their beliefs about the confidentiality of medical consultations with the ship's doctor. Nearly half (40 per cent) of the seafarers we spoke to did not believe their visit would be confidential or were unsure whether the consultation would be confidential or not. Such uncertainty may prevent seafarers seeking consultations for sensitive conditions.

A further concern about seeking medical help can be related to employment security. Many seafarers who work on cruise vessels are economically vulnerable. They may have had

to go into debt in order to join a vessel and may have several family members dependent on their income from working aboard ship. In this context, it is understandable that concern about losing their job is a significant worry for many. Indeed, 64 per cent of our sample reported being worried about losing their job.

One reason for contracts being ended prematurely is when health problems are considered to impede the seafarer's ability to do his or her job. Thus a utility worker, in a physically demanding job, may, for example, be concerned about requesting a medical consultation for a back strain, or an entertainer may not wish to ask permission to see a doctor for a painful limb injury which makes it difficult for them to perform their dance routines. Our survey found that while nearly three quarters of seafarers in our

sample reported that they had visited the ship's doctor on their current trip, one quarter (25 per cent) reported that there had been a time when they felt like they needed to see the ship's doctor but did not go.

Many health problems experienced by seafarers on cruise vessels are easily diagnosed and treated. Conditions left untended may, however, worsen or, in the case of infectious diseases, spread to other crew members and passengers aboard the vessel. Prompt consultations can also go a long way to allaying the stresses and worry individuals may experience when suffering with undiagnosed complaints.

Where opportunities to go ashore are limited or non-existent, crew members are largely dependent on shipboard medical staff for professional health care. Small steps to improve access and to increase the confidentiality of the service on board may go a long way towards improving the health status of crews and avoiding unnecessary suffering.