



**Joint statement by the *European Society of Aerospace Medicine (ESAM)*, the  
*European Association for Aviation Psychology (EAAP)* and the  
*European Cockpit Association (ECA)*  
on the  
**Aerospace Medical Association (AsMA) Pilot Mental Health: Expert Working  
Group Recommendations – Revised 2015****

The three organisations have individually, and jointly, reviewed the latest AsMA pilot mental health recommendations of Sept. 2015 and wish to endorse them as a valuable guidance for assessing pilot health, and – more generally – for raising awareness of mental health issues.

This endorsement includes the following observations:

#### GENERAL

- Guidelines like the ones from AsMA are relevant to any safety critical occupation, and pilots should not be seen to have a greater risk of mental health issue than comparable professionals.
- Safe pilot performance during a long, healthy and fulfilling career should be the joint aim of professional pilots, aeromedical- and psychological specialists, airline managers, and authorities. For the pilot, in addition to adequate lifestyle, active support from the company, peers, family and friends are known to positively contribute to these aims. Further developing and maintaining career relevant knowledge and flying competence, and timely raising of any possibly performance- or safety-relevant health issue or circumstance are among the responsibilities of the individual pilot. Health and mental fitness issues may arise during the professional career. When happening, recognition and acceptance are the first step in solving them. Any raising of such issues or request for assistance in this regard by the pilot should be taken seriously and be positively appreciated and reacted upon by the pilot's environment, e.g. airline management, company's occupational health service, peers, regulators, and aeromedical examiners (AME).

#### PILOT HEALTH ASSESSMENT

- A professional relationship, based on openness and mutual trust, between pilot and AME is the cornerstone of any robust health assessment. This is also reflected in the joint ESAM-EAAP-ECA paper on the Pilot-AME relationship (see Appendix 1).
- Mental health should be seen as an integral part of the overall health and wellbeing of any professional.

- A comprehensive psychological/psychiatric mental health evaluation as part of the routine aeromedical assessment is neither productive nor cost effective and is therefore not warranted. However, addressing and discussing mental health and psychosocial stress factors during the routine aero-medical assessments to gain insight into the circumstances of the pilot is an important element of a medical examination. It is recommended that the AME should use the support of a clinical psychologist or psychiatrist with expertise in aviation any time this discussion raises concerns about flight safety.

#### CONFIDENTIALITY OF PILOT HEALTH ASSESSMENT

- It needs to be understood that in Europe the application of a universal principle that the risk to public safety may override the duty of confidentiality is problematic, given the different national legal systems and cultural approaches. However, maintaining confidentiality of medical information is an important basis for an open and trusted relationship between pilot and AME.
- In this context, it is important to stress that any discussion and information disclosed to AMEs, that does not directly impact on fitness to fly, shall remain confidential between pilots and AMEs in any event.

#### SAFETY MANAGEMENT

- ESAM, EAAP and ECA give strong support to the acknowledgement of the value of pilot Peer Support Programmes. Such programmes have proven successful in enhancing safety and addressing health-related issues, while minimising career jeopardy and the possible stigma of seeking assistance. Many European examples of such programmes exist and can serve as best practice (examples see appendix 2).
- In this context, it is important to stress that the stigmatisation of mental health issues should be avoided, which in turn would facilitate disclosure by the individuals concerned.
- An initial psychological evaluation of pilots at pre-employment stage in accordance with internationally accepted standards is appropriate.
- Aviation industry management processes and procedures have an important role in fostering an open safety and reporting culture, based on 'Just Culture' principles (see below link to the European Just Culture Declaration). In particular, some types of 'atypical' aircrew employment can be an impediment to such a culture, and discourage individuals to seek support.

Final, November 2015

Appendix 1: Joint EAAP-ECA-ESAM paper on Pilot-AME Relationship

Appendix 2: Peer Support Programmes in Europe.

Links: - Aerospace Medical Association (AsMA) Pilot Mental Health: [Expert Working Group Recommendations](#), p. 8-12 (September 2015)  
- [European Just Culture Declaration](#) (October 2015).

Appendix 1: Joint EAAP-ECA-ESAM paper on Pilot-AME Relationship

## The Pilot – AME Relationship

### Introduction

Professionalism, honesty and trust are the building blocks of a good working relationship between an aeromedical examiner (AME) and a pilot. This does not happen overnight. It requires work from both parties.

Your AME shares the same aim as you: to keep you healthy, and flying safely. An ongoing relationship between you, the pilot, and your AME provides a firm basis for building up trust, enabling health promotion and facilitating better communication both during, and between, examinations. Most medical problems arise between medicals. The medical itself helps to identify, and thus prevent such problems.

AMEs and pilots together should foster a culture where disclosure by the pilot of potentially career threatening medical problems is likely. When it exists, the pilot can expect a supportive response to his problems and then both can work together towards a shared goal of a long and safe career in aviation.

### What you can expect from your Aviation Medical Examiner (AME)

Your AME is a doctor and should possess a higher qualification in Aerospace Medicine, be up to date with medical requirements, and have access to specialist support where this is required.

Your AME needs to understand both your life and social circumstances and nature of your employment as a pilot, so expect questions about your personal and family life, as well as your job. An understanding of your work pattern/rosters and employment contractual situation can be very important.

If you identify any areas that you would like further support with as a result of such discussion, your AME can recommend various ways to address them outside of the medical, in order to prevent them becoming an issue that could impact your fitness to fly in the future. This might include Peer Support Programmes, specialised counseling, or support from a professional association. Anything that does not directly impact your fitness to fly will remain confidential between you and your AME.

#### Your AME

- should give adequate time for your appointment and practice from appropriate, and properly equipped, premises.
- should treat you with respect, and maintains the confidentiality of your medical information.
- should obtain written consent for your examination.
- will expect you to answer both written and verbal questions, honestly and fully, and not omit any information.
- should respond to any concerns or questions you may have concerning your medical history, or the various clinical tests during your medical.

#### During the medical

- you should feel free to ask about any examination or test being performed. For example 'What is the reason for this part of the examination?'
- your AME will explain the medical certificate, and any limitations applied, and your obligation to notify any changes to your health status between medical examinations.
- your AME may recommend further health promotion actions, such as losing weight, giving up smoking, or other lifestyle changes that promote good psychosocial wellbeing.

If you are refused a medical certificate, a clear explanation of the reasons should be given to you, and what further actions are needed to re-gain certification. Your rights of appeal against the decision and access to a secondary review must be made clear.

### **What an AME should know about the pilot**

**It is important for you to know that flight safety and a long, healthy and fulfilling career are the number one and two top priorities for a professional pilot.**

Commercial Aviation covers a wide spectrum of activities, from single pilot rotary operations such as an Air Ambulance, through to large, multi-crew commercial airliners carrying hundreds of passengers. It is very important to enquire about the detail of the pilot's role and be aware of the different stresses and other health risks that might arise.

Up to date knowledge of the current issues in aviation, for example (but not only) different employment contract forms, fatigue and flight time limitations, are likely to enhance your understanding of the pilot's work environment.

It is important to know the pilot's nature of employment, particularly 'no fly, no pay' (zero-hours contracts) or other types of so-called 'atypical' contracts (self-employment, temporary agency work, pay-to-fly schemes, etc.).

You should understand the social context of the pilot's job. For example, family commitments, life stresses, distance from base and frequency of base changes, career status/level of seniority. Anything that does not directly impact the pilot's fitness to fly shall remain confidential between you and the pilot.

Be attentive to these matters and encourage the pilot to be open about them, particularly as it can easily be perceived by the pilot as 'not being a relevant part of the medical'.

Before starting the medical check,

- you should know: is the pilot at ease about the medical examination?
- you have made a positive identification of the pilot from photographic ID (e.g. passport), you know the pilot's State of Licence issue (SOLI), and have seen the pilot's licence and last medical certificate.
- you know whether the pilot is attending by choice (e.g. after recommendation) or not (e.g. company medical service).
- it should be clear to you what type of medical the pilot needs, and what tests are required.
- is there any risk of conflict of interest (e.g. airline medical doctor, a friend, or a relative)?

A copy of a pilot's roster can be valuable in the understanding of the day to day challenges of the pilot's job.

Don't assume that the pilot understands the reason behind all the questions, examination or tests being performed. Be open about giving explanations.

Does the pilot have faith in your expertise, and trust in your judgment? If so, how do you know? If not, why not? And how can you help to build such faith and trust?

Who is the pilot's employer and how would they respond to a request for Peer Support for the pilot. Does a Peer Support Programme exist in the company or in your country?

How will the pilot's employer respond to a period of 'temporarily unfit'?

Nov. 2015

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## Appendix 2: Peer Support Programmes in Europe – selected examples

Note: the following examples are only a small selection of PSP that are currently run in many airlines across Europe, in partnership between airlines, pilot associations and the national regulator. The list below is therefore not exhaustive, and is instead intended to provide a general idea about the type of programmes that exist in Europe and how they are organised.

Stiftung Mayday / Mayday Foundation: Support and help for pilots, crew members and their families. Initial contact is done by a 24/7 hotline and then through specially trained peers and psychological / medical experts. Programme is carried financially by the majority of German airlines as well as VC, the German pilots association. Stiftung Mayday is extensively connected worldwide with other support programmes. Patronage is through Mr Tom Enders, CEO Airbus Group.

VC SupportLine (Germany): Run by Stiftung Mayday, paid for by Vereinigung Cockpit (VC), is available for all VC members, supports pilots in training deficiencies and training issues, family issues etc. through the clinical experts of Stiftung Mayday. Initial contact is through 24/7 hotline via a call center.

Anti-Skid Groep, ASG: (Netherlands). Helps pilots with substance use issues (alcohol, medicine, drug). It is hosted by the Dutch pilot association VNV and supported by KLM. Currently open to KLM pilots and it is to expand to other Dutch operators. It can be reached via its website, email or phone. ASG team members are pilots, while further down support is given by a substance abuse help organisation and independent doctor(s). Cooperation is in place with another PSP group who can relay cases to the ASG. The ASG is supported by the Dutch government through an advisory council.

Anti Skid, Rehabilitation programme: (Germany) within the Lufthansa Group. Initial contact through phone number that is published & known throughout the LH pilots group. It deals with problems caused by the use or abuse of psychotropic substances (alcohol & drugs). Initial contact is done through peers that are especially trained for the job, and is supervised by an external and independent alcohol specialist. The treatment is a combination of peer group care and professional therapy. Run in co-responsibility by LH group, and supported by Vereinigung Cockpit. The programme is accepted by the German aviation authority.

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