A European Framework to Address Psychosocial Hazards

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Abstract: A European Framework to Address Psychosocial Hazards: Stavroula LEKA, et al. Institute of Work, Health and Organisations, University of Nottingham, UK—Over the past decades, emphasis has been placed on the changing nature of work and new forms of risk that could negatively affect employee health and safety. These are mainly associated with new types of occupational hazards that have been termed psychosocial. Issues such as work-related stress, bullying and harassment are now receiving attention on a global basis and efforts have been made to address them at the workplace level. However, it has been acknowledged that despite developments of policy in this area, there still appear to be a broad science-policy gap and an even broader one between policy and practice. The WHO Network of Collaborating Centers in Occupational Health has, since the late 1990s, been supporting a dedicated program of work on psychosocial factors and work-related stress. Part of the Network’s work is currently focusing on the translation of existing knowledge into practice in the area of psychosocial risk management. This program has identified that the optimum way forward lies in the development of a European framework for psychosocial risk management. This framework will serve as the basis for coordination of research activities and preventive action with an emphasis on evidence based interventions and best practice on an international basis.

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In the Constitution of the WHO, health is defined as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”. There is no doubt whatsoever that working life and its conditions are powerful determinants of health, for better or for worse.

Over the past decades, emphasis has been placed on the changing nature of work and new forms of risk that could negatively affect employee health and safety. These risks have been termed psychosocial. Issues such as work-related stress, bullying and harassment are now receiving attention on a global basis and efforts have been made to address them at the workplace level. According to the WHO, “mental health problems and stress-related disorders are the biggest overall cause of early death in Europe” and are among the major health concerns with great economic cost on society.

European data from a variety of national and transnational surveys of those in work, or who have recently worked, have identified stress-related problems as among the most commonly reported sources of work-related ill-health. The costs to society are related to medical costs and possible hospitalization, benefits and welfare costs in connection with premature retirement as well as potential loss of productive workers. On the basis of figures from a number of countries, in total, stress and violence at work may account for 1–3.5% of GDP. The available data indicate that work-related stress costs the EU at least 20 billion euros per year in lost time and health bills. Over 50% of absenteeism in the EU has its roots in work-related stress. The most recent reports across Europe indicate that psychosocial hazards and work-related stress represent priorities to be addressed in the coming years due to their increased prevalence and link with other problems of a more physical nature (e.g. musculoskeletal disorders).
The Risk Management Framework

A significant development towards the prevention of work-related stress and the management of psychosocial risks was achieved in Europe with the introduction of the 1989 European Commission Council Framework Directive on the Introduction of Measures to Encourage Improvements in the Safety and Health of Workers at Work, 89/391/EEC. The Directive is based on principles of prevention and risk management and concerns all types of risks to worker health, including those related to psychosocial hazards at work. On the basis of this EC legislation, a new EU psychosocial risk prevention culture has since been established, combining legislation, social dialogue, best practices, corporate social responsibility, and building partnerships. Important documents in this context include:

- the European Commission’s Guidance on Work-Related Stress;
- the European Commission’s Green Paper on Promoting a European Framework for Corporate Social Responsibility; and last but certainly not least
- the European Framework Agreement on Work-Related Stress which was agreed upon by the European Social Partners within the auspices of social dialogue.

However, it has been acknowledged that despite developments of different types of policy in relation to psychosocial hazards and issues such as work-related stress and mental health at work, there still appear to be a broad science-policy gap and an even broader one between policy and practice.

Addressing Gaps between Knowledge and Practice

The WHO Network of Collaborating Centers in Occupational Health has, since the late 1990s, been supporting a dedicated program of work on psychosocial factors and work-related stress. This program currently involves about twenty collaborating centers on a global basis. A number of guidance and policy documents have been published in this area.

Part of the Network’s work is currently focusing on the review of the issues discussed above and their relevance to the translation of existing knowledge into practice in the area of psychosocial risk management. This program, the findings of which will be published by the end of 2008, has identified that the optimum way forward lies in the development of a European framework for psychosocial risk management. This framework, that is currently being developed, will serve as the basis for coordination of research activities and preventive action with an emphasis on evidence based interventions and best practice. It will also eventually be used as a basis for expansion globally.

This program of work will extend over the next five years and will aim to establish clarity and guiding principles in this area. Further, the developed framework will enable the translation of existing knowledge in the area into practice through the provision of tools for use at the enterprise level. These tools will focus on the assessment of company performance in relation to psychosocial risk management and the implementation of evidence-based best practice interventions at different levels. The tools will be particularly relevant to SMEs and will address gender issues and high risk groups and sectors. In addition, guidelines and recommendations for best practice will be provided for different stakeholders (occupational health experts, employees, employers, policy makers, workers and employers union representatives). Lastly and very importantly, standards of social dialogue, monitoring and best practice in psychosocial risk management will be developed within the framework of health and safety legislation and corporate social responsibility.

Concluding Comments

There is an accumulation of evidence in Europe and elsewhere that work and employment play an important role in relation to mental health. However, although important progress has been made to advance the knowledge base in relation to these issues, there are identified gaps in the translation of this knowledge into effective practice at the enterprise level. The WHO Network of Collaborating Centers in Occupational Health aims at addressing these issues over the coming years through the development of a psychosocial risk management framework. The promotion of a collective approach at European and international levels is necessary to improve the quality of the work environment and the health of the workforce.

References


