

**EUROPEAN CONFERENCE ON THE PROMOTION OF MENTAL HEALTH
AND WELL-BEING IN WORKPLACES**

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Plenary session : “case for action: examples of policy initiatives on preventive action on mental health at work”

Considering the aim of this plenary session, I will deliberately speak about prevention of psychosocial risk in workplaces and I will point out three main ideas:

① When we speak about health and wellbeing, our initial focal point is of course the person but not only the physical person also the subjectivity of the person .

Thereafter you develop a comprehensive approach, taking into consideration the various points of view of doctors, psychologists, psychiatrists and varying types of specialists who can help to improve and strengthen mental health factors by means of relaxation, good alimentation (and) physical actives... Your aim is to advise the person, the employee, how to live a healthy lifestyle and thus how to become a better performer.

We believe that this however is not the core of the problem: the center of our attention should be to take care of the “work” itself.

People’s mental health can be affected, and in some cases it can be severely affected because the work they are involved in, the work that gives them a sense of importance, the work itself is affected for different reasons.

Our policy initiatives must show the changes that have happened in the work place and how it affects the work that people do; the work that they are willing to do as well as possible. Because the will to do the work as well as possible has not changed !

The work conditions should be analyzed : work pressure and stress , control of your schedule and work load: over and under load, monetary and non-monetary recognition, autonomy, relationships between colleagues and also conditions regarding the work environment as open space....

We must focus not only on the consequences but first of all on causes

An efficient risk analysis and psychosocial prevention plan is not only the responsibility of doctors, even though their participation is essential. The upper management levels are first concerned.

How can we make managers conscious of the fact that the health of the employees takes fully part to the performance? It is a challenge !

A national report to the Prim Minister propose that part of the salary of the top management should be connected to the health situation of employees in the company and not only to the financial results.

② While following this approach, one realizes that nothing serious can be achieved without listening to and understanding the opinion of the employees and their representatives.

Only they can observe and communicate the positives and negatives related to their work place and in turn give advices and ideas on the possible improvements that can be made.

Recently, a regretful succession of suicides in the main French telecommunication company made the headlines. The French ministry of labor, facing this crisis has taken the following action:

Large companies employing more than 1000 employees were asked to set up agreements pertaining to stress at work: this “emergency plan against stress” presented in October 2009 resulted in signatures of 234 collective agreements covering about 1 million employees.

France chose to privilege the social dialogue following the direction that has been given by the social partners at the European level in 2004 and 2007, and then transcript in France by two collective national agreements in 2008 (stress at work) and 2010 (violence and harassment at work)

This policy is interesting however only the large companies but what about all the other companies that accumulated employ 80% of the work force?

This will be the challenge for this year : try to set up a methodological approach easy to understand easy to implement for a small enterprise with less than 10 employees.

③ All of the preventive organizations must co-operate on this difficult question of the promotion and prevention of mental health in the work place.

Which are they?

-Ministry of Labour who draft labour laws, organize and operate labour inspectorate systems of control

- Occupational health service : it provides clinical and individual supervision of employees; authorized to enter the work places in order to give advice to employers, employees and their representatives.
- Social health insurance system: connected to the Ministry of Health which is attached to the Ministry of Labour: insure against accidents and work related illness; provide help and control on risk assessment for health and safety at work.
- The National Agency in charge of improving working conditions: also attached to the Ministry of Labour; they develop a program in relation to the national and regional policy.

How is the cooperation organized ?

It is organized at a national level in the 2nd National Health Plan covering 2010-2014 and at the regional level in the 22 French administrative regions : close to the field in connection with the needs and taking in account the social partners.

What other projects are run in cooperation?

- Share the same approach of PSR: a better understanding of the theoretic approach is still necessary but must also take in consideration the need of an operational approach based on the same comprehensive methodology.

We are all involved with the enterprises following similar goals : some are mainly regarding control, some only give recommendations and others take the opinion of their employers on board.

- We have established a list of specifications as well as a proposal for an agreement between a consultant and a company in cases where the competency of an expert is required. The aim of this work is to make the requirements of the legislation understandable when assessing psychosocial risk at work and also to help companies choose good experts in this new and very profitable market which is also the result of the urgency plan against stress.
- We have started a working group proposing guidelines for small enterprises employing less than 50 workers on the website of the ministry of labor.
- We intend to start working on the consequences that are caused by restructuration on health. We know that this program requires a special co-operation between medical resources at a local level and therefore there will be a good opportunity to work together.

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