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Consultation of the social partners on stress and its effects on health and safety at work

1. INTRODUCTION

The purpose of this document is to elicit the opinion of the social partners on the protection of the health and safety at work of workers from occupational stress.

Stress is a major cause of concern not only because of the health effects on individual workers, but also because of the economic impact on businesses, and the social costs to European countries. 1999 figures estimate that work-related stress costs Member States at least € 20 billion annually¹.

28% of European workers, 41million workers, were affected by stress at work in the year 2000. Female workers have overtaken males as regards occupational stress, reported by 29% of women and 28% of men in the year 2000. Variations in stress can also be seen between occupations: a decrease for managers since 1995 (from 37% down to 32%); increases for technicians (from 29% to 35%) and clerks (from 22% up to 25%)².

European workers are increasingly being exposed to occupational stress and there is a need for a Community initiative in this regard.

2. THE GENERAL CONTEXT

In its communication "Adapting to change in work and society: a new Community strategy on health and safety at work 2002-2006³", the Commission announced its intention to open consultations with the social partners on stress and its effects on health and safety at work. The Commission pointed out that the various elements of the social dialogue structure might usefully address stress at work, whose multifarious nature – bearing in mind the wide range of complaints which can be related to it- fully justifies involving the social partners.

Preparatory work at Community level on stress at work prevention had begun well before the entry into force of the Amsterdam Treaty. Thus, already in 1993 a European Conference "Stress at work- A call for action" was organised, in the framework of the objectives of the Belgian Presidency, by the Dublin Foundation in

¹ European Commission: Guidance on work-related stress. Spice of life or kiss of death? Luxembourg: Office for Official Publications of the European Communities, 2000.

² European Foundation for the Improvement of Living and Working Conditions: Third European Working Conditions Survey (2000): <http://www.eurofound.eu.int/working/healtheffects.htm>

³ COM(2002) 118 final

collaboration with the Commission⁴. A further development was the Commission's Guidance on "Risk Assessment at Work"⁵ that pointed out the need to review "psychological, social and physical factors which might contribute to stress at work, how they interact together and with other factors in the work organisation and environment".

In this context, the Advisory Committee on Safety, Hygiene and Health Protection at Work (CCSHS) set up an ad-hoc group on "Work-Related Stress", whose task was "to investigate national and Community work and measures on work related stress and report on its findings to the Commission with a view to considering further action".

The Advisory Committee adopted the report of this ad-hoc group in 1996⁶. This report includes recommendations on research, guidance on national guidelines, information exchange, education and training (see annex 1).

The Commission as a follow-up to the recommendations of the Advisory Committee produced a Guidance on work-related stress⁷. This Guidance provides general information on the causes, manifestations and consequences of work-related stress, both for workers and work organisations. It also offers general advice on how work-related stress problems and their causes can be identified, and proposes a practical and flexible framework for action that can be adapted to suit national and individual company situations. The focus is on primary prevention of work-related stress, rather than on treatment. The Guidance is of a non-binding nature and is addressed to Member States and their social partners (see annex 2).

The Dublin Foundation, in line with the recommendations of the Advisory Committee, prepared cost-benefit studies at national⁸ and company⁹ level, educational¹⁰ and information materials¹¹.

The European Agency for Safety and Health at Work, in line as well with the recommendations of the Advisory Committee, has been offering integrated and updated information on work related stress in its website. This includes publications and information on risk assessment, case studies, prevention, training, treatment and

⁴ European Foundation for the Improvement of Living and Working Conditions: European Conference on Stress at Work – A Call for Action. Proceedings. Luxembourg: Office for Official Publications of the European Communities, 1994.

⁵ European Commission: Guidance on risk assessment at work. Brussels: European Commission, 1996.

⁶ European Commission: Report on work-related stress. The Advisory Committee for Safety, Hygiene and Health Protection at Work. Brussels: European Commission, 1997.

⁷ *Ibid.* 2

⁸ European Foundation for the Improvement of Living and Working Conditions: A model for assessing the costs of stressors at national level. Socio-economic costs of work stress in two EU Member States. Luxembourg: Office for Official Publications of the European Communities, 1996.

⁹ European Foundation for the Improvement of Living and Working Conditions: Stress Prevention in the workplace: Assessing the costs and benefits to organisations. Luxembourg: Office for Official Publications of the European Communities, 1996.

¹⁰ European Foundation for the Improvement of Living and Working Conditions: Stress at work: causes, effects and prevention. Guide for the small and medium size companies. Luxembourg: Office for Official Publications of the European Communities, 1995.

¹¹ European Foundation for the Improvement of Living and Working Conditions: Stress at work: does it concern you? Luxembourg: Office for Official Publications of the European Communities, 1994.

policy¹². The Bilbao Agency has produced as well a review of the scientific evidence of work stress assessment and management¹³.

"Working on stress" is the main topic of the 2002 European Week for Safety and Health at Work. The Bilbao Agency, which is in charge of the co-ordination of the Week, has set up a website¹⁴, organised a good practice award scheme and disseminated information and education materials. A wide range of activities is foreseen involving different types of organisations, companies and individuals in the Member States.

A majority of the recommendations included in the Advisory Committee report on "Work-related stress" have been implemented, nevertheless the number of European workers complaining of being exposed to stress at work has not diminished.

The Nice European Council approved the European Social Agenda¹⁵, which identifies as a priority for action to respond to new risks such as work-related stress, by initiatives on standards and exchanges of good practice.

In the context of Article 138(2) of the Treaty, the Commission thus proposes to consult the social partners on this subject. In that respect, it notes with interest the intention expressed by the social partners in their working programme 2003-2005, adopted on 28 November 2002, to organise a seminar with a view to negotiating a voluntary agreement on stress at work.

3. PROTECTION OF THE HEALTH AND SAFETY OF WORKERS FROM WORK STRESS AT NATIONAL LEVEL

The following conclusions can be drawn from the report to the European Commission on design and delivery of effective guidance on work-related stress¹⁶ concerning the protection of the health and safety of workers against work-related stress in the Member States:

- There is a marked difference in the design and provision of guidance between the countries of the north and north west of the EU and those of the south.
- Denmark, Finland, Sweden, Austria, Germany, Ireland, the Netherlands and the UK appear to provide the most governmental and organisational guidance on work-related stress, covering more issues and focusing on a greater number of targeted groups, and often more effectively, than other Member States.
- Denmark, Finland and Sweden guidance mainly targets blue-collar workers whereas Austria, Germany, Ireland, the Netherlands and the UK tend to target the entire cross-section of the workforce.

¹² http://europe.osha.eu.int/good_practice/risks/stress/

¹³ European Agency for Safety and Health at Work: Research on work-related stress. Luxembourg: Office for Official Publications of the European Communities, 2000.

¹⁴ <http://osha.eu.int/ew2002/>

¹⁵ <http://ue.eu.int/en/Info/eurocouncil/index.htm>

¹⁶ T Cox, A Griffiths, M Barker: The Design and Delivery of Effective Guidance on Work-related Stress. Report to the European Commission, 1996.

Regarding national legislation and its enforcement, it would seem that even if Member States have implemented the directives referred below, in point IV, there are important differences among Member States. For instances, the Swedish Work Environment Act is very explicit where psychosocial questions are concerned. In addition, some labour inspectorates are more pro-active than others in the area of negative stress and psychosocial problems at work¹⁷.

4. PROTECTION OF HEALTH AND SAFETY OF WORKERS FROM WORK STRESS AT COMMUNITY LEVEL

Community action in this area is possible under Article 137 of the EC Treaty.

At present, there are no legal provisions specifically aiming at work-related stress. However, several European directives apply to work-related stress and its prevention.

Council Directive 89/391/EEC on the introduction of measures to encourage improvements in the safety and health of workers at work¹⁸ provides that employers have a "duty to ensure the safety and health of workers in every aspect related to work", on the basis of several general principles such as:

- avoiding risks;
- evaluating the risks which cannot be avoided;
- combating the risks at source;
- adapting the work to the individual, especially as regards the design of work places, the choice of work equipment and the choice of working and production methods, with a view, in particular, to alleviate monotonous work and work at a pre-determined work-rate and to reducing this effect on health;
- developing a coherent overall prevention policy which covers technology, organization of work, working conditions, social relationships and the influence of factors related to the working environment;

The above provisions include work-related stress and its causes. In addition, two other European directives make specific reference to the need to consider mental stress when assessing risks.

Council directive 90/270/EEC, on the minimum safety and health requirements for work with display screen equipment¹⁹, points out that "employers shall be obliged to perform an analysis of workstations in order to evaluate the safety and health conditions to which they give rise for their workers, particularly as regards possible risks to... problems of mental stress".

¹⁷ European Commission: Thematic day. The role of competent authorities in the area of negative stress and psychosocial problems at work. Reports. 40th meeting of the Senior Labour Inspectors' Committee, Solna, Sweden, 21-23 May 2001.

¹⁸ OJ L 183, 29.06.1989, p. 1.

¹⁹ OJ L 156, 21.6.1990, p. 14.

Council directive 92/85/EEC, on the introduction of measures to encourage improvements in the safety and health at work of pregnant workers and workers who have recently given birth or are breastfeeding²⁰, provides that the guidelines on risk assessment shall cover mental fatigue and other types of mental stress²¹.

5. THE IMPORTANCE OF COMMUNITY ACTION AND A POSSIBLE APPROACH AT COMMUNITY LEVEL

Thus although Community legislation on the protection of the health and safety of workers applies to some extent to work-related stress, there is high a percentage of European workers that report stress-related problems. Moreover, the available data does not indicate a trend towards improvement²².

Stress at work has enormous costs for companies and the whole society. Between 50% and 60% of all lost working days are related to stress²³ and it cost to Member States at least € 20 billion in 1999²⁴.

As the CCSHS points out in its report²⁵, there are recognisable differences both between countries and also within countries, between sectors, in relation to work-related stress and the practical action taken to address it.

The fact that the large majority of Member States do not regulate the protection from work-related stress and its effects on the health and safety of workers has resulted in a great variety of protection levels within the European Union.

In the light of the subsidiarity principle, the gaps in Community law and national legislation in this area show that action at Community level is necessary with a view to ensuring a minimum level of protection of workers against work-related stress. The Commission would first urge Member States to take the necessary measures to this end the Commission has announced that it will examine the appropriateness of proposing the integration of the problem of stress-related complaints and illnesses into the employment guidelines for 2003²⁶.

Certain Member States have already adopted rules to protect workers from work-related stress. Member States which have not yet taken measures in this field could benefit from the very positive results of the implementation of such measures in other countries. Moreover, some Member States have recently stated their intention to develop the legislative framework to cover the psychosocial aspects of working²⁷. Hence, an initiative in this field would be proportionate and respect the principle of subsidiarity.

²⁰ OJ L 348, 28.11.1992, p. 1.

²¹ COM(200)466 final

²² See footnote 1.

²³ See footnote 13.

²⁴ See footnote 2.

²⁵ See footnote 6.

²⁶ See footnote 3.

²⁷ JC Aparicio: Workplace stress – a growing problem. In Working on stress. Magazine of the European Agency for Safety and Health at Work. Issue number 5: 14-16. Luxembourg: Office for Official Publications of the European Communities, 2002

6. TOPICS FOR CONSULTATION

In the light of the above, the social partners are invited to answer the following questions:

- (1) Do you consider it advisable to take an initiative in this area? In particular, do you think that the absence of measures in this area has an adverse impact on the protection of the safety and health of workers?
- (2) If so, should this initiative be taken at Community level?
- (3) If so, do you share the Commission's view as to how the Community should approach the problem, namely by initially encouraging Member States to take the necessary measures on a voluntary basis, or do you consider that a binding instrument is called for from the outset? Do you consider that a joint initiative of the European social partners, under Article 139 of the TEU, would be appropriate?

ANNEX 1

REPORT ON WORK-RELATED STRESS

ANNEX 2

GUIDANCE ON WORK-RELATED S T R E S S

“Spice of Life - or Kiss of Death?”

EXECUTIVE SUMMARY

The background

- Work-related stress, its causes and consequences are all very common in the 15 European Union Member States. More than half of the 147 million workers report working at a very high speed, and to tight deadlines. More than one third have no influence on task order, and more than one fourth cannot influence their work rhythm.
- 45 per cent report having monotonous tasks; 44 per cent no task rotation; 50 per cent short, repetitive tasks. Such work-related “stressors” are likely to have contributed to the present spectrum of ill health: 13 per cent of the workforce complain of headache, 17 per cent of muscular pains, 20 per cent of fatigue, 28 per cent of “stress”, and 30 per cent of backache, and many other, even potentially life-threatening diseases.
- Stress consists of a pattern of “stone-age” reactions preparing the human organism for fight or flight, i.e. for physical activity. Stress was adequate when stone-age man was facing a wolf pack, but not so when today’s worker is struggling to adjust to rotating shifts, highly monotonous and fragmented tasks or threatening or overdemanding customers. It is often maladaptive and disease-provoking.
- A conservative estimate of the costs caused by work-related stress amounts to some *twenty billion euro annually*. Even more staggering is the resulting human suffering in many millions of European workers.

The challenge

- According to the EU Framework Directive, employers have a “duty to ensure the safety and health of workers in every aspect related to the work”. The Directive’s principles of prevention include “avoiding risks”, “combating the risks at source”, and “adapting the work to the individual”. In addition, the Directive states that it is the employers’ duty to develop “a coherent overall prevention policy”. This Guidance intends to provide a basis for such endeavours.

The actions

- Based on surveillance at individual workplaces and monitoring at national and regional levels, work-related stress should be prevented or counteracted by job redesign (e.g. by empowering the employees, and avoiding both over- and underload), by improving social support, and by providing reasonable reward for the effort invested by workers, as integral parts of the overall management system, also for SMEs. And, of course, by adjusting occupational physical settings to the workers’ abilities, needs and reasonable expectations - all in line with the requirements of the

EU Framework Directive and Article 152 of the Treaty of Amsterdam. Supporting actions include not only research but also adjustments of curricula in business schools, in schools of technology, medicine and behavioural and social sciences, and in the training and retraining of labour inspectors, occupational health officers, managers and supervisors, in line with such goals.

Why Guidance?

Work-related stress is conditioned by, and contributes to, major environmental, economic and health problems. It affects at least 40 million workers in the 15 EU Member States and costs at least 20 billion euro annually. It contributes to a host of human suffering, disease and death. It also causes very considerable disturbances in terms of productivity and competitiveness. And much of all this is highly likely to be preventable.

This is why the European Commission's tripartite Advisory Committee for Safety, Hygiene and Health Protection at Work recommended that the Commission should prepare a *Guidance on Work-Related Stress*. The present document includes an Executive Summary of the Guidance prepared in response to this recommendation. This Executive Summary is also made available as a separate leaflet, for wider distribution.

Is there a problem?

Two EU-wide surveys have shown that a substantial proportion of the 147 million workers on the EU labour market are exposed to a variety of work-related demands or exposures (stressors), known, or highly suspected, to be stress- and disease-inducing.

Stress is caused by a poor match between us and our work, by conflicts between our roles at work and outside it, and by not having a reasonable degree of control over our own work and our own life. Stress at work can be caused by a multitude of stressors. Some common ones include:

- Over- and underload.
- Inadequate time to complete our job to our own and others' satisfaction.
- Lack of a clear job description, or chain of command.
- No recognition, or reward, for good job performance.
- No opportunity to voice complaints.
- Many responsibilities, but little authority or decision-making capacity.
- Uncooperative or unsupportive superiors, co-workers, or subordinates.
- No control, or pride, over the finished product of your work.
- Job insecurity, no permanence of position.
- Exposure to prejudice regarding age, gender, race, ethnicity, or religion.
- Exposure to violence, threats, or bullying.

- Unpleasant or hazardous physical work conditions.
- No opportunity to utilise personal talents or abilities effectively.
- Chances of a small error or momentary lapse of attention having serious or even disastrous consequences.
- Any combination of the above.

Some examples of work-related stress

Fred works at an assembly line on piecework. He can neither influence the pace of his line nor the monotonous and highly repetitive tasks he has to perform, being a small cogwheel in the dynamics of a large and complex mass-production industrial enterprise.

Mary is employed in an office. Her task is to prepare form letters on a word processor. Being a divorced mother of two small children, she needs to leave her job not later than at 5.00 p.m. to be able to pick them up at a day care nursery before it closes. But her workload is steadily increasing, and her supervisor considers it important that all letters are mailed before she leaves her job and insists on her completing the task.

John works as a system designer for a multinational information technology company. He is well-paid, his tasks are stimulating and he has great freedom to plan his work the way he likes. But his company's sales department has signed an agreement on the timely delivery of a new, complex, software system - yet to be designed by him and his understaffed project group.

Peter has been laid off by his employer, a big car manufacturer, because a series of tasks formerly performed manually have been automated. Being 57 years old and with only a primary school education, he is facing long-term unemployment, probably until retirement.

These four situations are very different in many respects. Still, they have something in common, namely that they can act as powerful and chronic stressors, and activate, in exposed workers, a stone-age reaction pattern referred to as "stress" (see below).

As will be shown below, something else they have in common is their accessibility to preventive action. Such action is now increasingly seen as a priority for all stakeholders on the labour market.

What is stress?

Stress is a pattern of "stone-age" reactions that occurs in response to stressor exposures such as those mentioned above, and prepares the human organism for fight or flight, i.e. for physical activity. It is a kind of "revving up", or "stepping on the gas". This was adequate when stone-age man was facing a pack of wolves, but not so today when workers are struggling to adjust to rotating shifts, highly monotonous and fragmented tasks, or threatening or overdemanding customers.

Work-related stress can be *defined* as a pattern of emotional, cognitive, behavioural and physiological reactions to adverse and noxious aspects of work content, work organisation and work environment. It is a state characterised by high levels of arousal and distress and often by feelings of not coping.

Is stress dangerous?

The answer is - yes, and no.

Stress is potentially disease-provoking when occupational demands are high *and* the worker's influence over his or her conditions of work is low, when there is insufficient social support from management or fellow workers, and when the reward offered to the worker in terms of remuneration, esteem or status control does not match the effort he or she has invested. And generally when such conditions are intensive, chronic, and/or often repeated. Common end results include a wide range of physical and mental morbidity and even death (see below).

The answer is more likely to be No if the worker - within reasonable limits - is allowed, or encouraged, to take control over his or her conditions of work, if he or she is offered adequate social support and if reasonable rewards are offered for efforts invested.

When we feel in control, stress becomes “the spice of life”, a challenge instead of a threat. When we *lack* this crucial sense of control, stress can spell crisis - bad news for us, our health and our enterprise. If we feel this to be part of our everyday work, it affects the rate at which processes of wear and tear in our body take place. The more ‘gas’ given, the higher the revolutions per minute’ (RPMs) at which our body’s engine is driven, the more rapidly our ‘engine’ wears out - “the kiss of death”.

Can work stress influence health?

Health and wellbeing can be influenced by work, both positively and negatively. Work can provide a goal and meaning in life. It can give structure and content to our day, week, year, and life. It may offer us identity, self-respect, social support, and material rewards. This is likely to happen when work demands are optimal (and not maximal), when workers are allowed to exercise a reasonable degree of autonomy, and when the “climate” of the work organisation is friendly and supportive. If this is so, work can be one of the most important health-promoting (salutogenic) factors in life (see above).

If, however, work conditions are characterised by the opposite attributes, they are - at least in the long run - likely to cause ill health, accelerate its course or trigger its symptoms.

When we are exposed to these or related stressors, most of us experience *emotional* reactions such as anxiety, depression, uneasiness, restlessness, or fatigue.

Stress at work can also influence our *behaviours*, making some of us start smoking more, or overeating, seeking comfort in alcohol or taking unnecessary risks at work or in traffic. Many of these behaviours can lead to disease and premature death. Suicide is one of many examples.

We also react *physiologically*, with our internal organs. When we feel unjustly criticised by our supervisor, our blood pressure may increase; we may experience increased or irregular heart rate, or muscular tension with subsequent pain in the neck, head, and shoulders, or dryness of our throat and mouth, or heartburn because of overproduction of acid gastric juice.

All of these stress reactions can make us suffer, become ill, and even die - through diseases of the heart and blood vessels, or cancer (from smoking too much, or eating too much fat food and too little nutritional fibre).

In this way, virtually every aspect of work-related health and disease can be influenced. This can also be mediated through emotional, and/or cognitive *misinterpretation* of conditions of work as threatening, even when they are not, and/or trivial symptoms and signs occurring in one's own body as manifestations of serious disease.

All this can lead to a wide variety of disorders, diseases, loss of wellbeing, and loss of productivity. Examples discussed in some detail in the Guidance include ischemic heart disease, stroke, cancer, musculo-skeletal and gastrointestinal diseases, anxiety and depressive disorders, accidents, and suicides.

Who is at risk?

In fact, every one of us. Every person has his or her breaking point. In addition, the nature and conditions of work are changing at whirlwind speed. This adds to the risk we run, or may run, but to a varying degree. Some groups are more at risk than others. Some determinants of this increased risk are “Type A” (hostile) behaviour; an inadequate coping repertoire; living and working under underprivileged socio-economic conditions, and lacking social support. Other determinants are age (adolescent and elderly workers), gender combined with overload (e.g. single mothers), and being disabled. Often, those who are particularly at risk are also more exposed to noxious conditions of life and work. High vulnerability and high exposure thus tend to coincide.

Can work-related stress be prevented?

Work-related stress can be approached on four levels - those of the individual worker, the work organisation, the nation, and the European Union. Whatever the target(s), conditions are man-made and open to interventions by all relevant stakeholders.

In all cases, there is a need to identify work-related stressors, stress reactions, and stress-related ill health. As already emphasised, there are several reasons for doing this: stress is a problem both for the worker and his or her work organisation, and for society; work stress problems are on the increase; it is a legal obligation under the EU Framework Directive on Health and Safety; and many of the stressors and consequences are avoidable and can be adjusted by all three parties on the labour market if they act together in their own and mutual interests.

Thus, work-related stress may be prevented or counteracted by job redesign (e.g. by empowering the employees, and avoiding both over- and underload), by improving social support, and by promoting reasonable reward for the effort invested. And of course by adjusting occupational physical settings to the workers' abilities, needs and reasonable expectations.

Approaches to be considered include participative management, flexible work schedules, and career development - all in line with the requirements of the EU Framework Directive and of Article 152 of the Treaty of Amsterdam.

Tools to prevent stress?

To identify work-related stress, its causes and consequences, we need to monitor our *job content, working conditions, terms of employment, social relations at work, health, wellbeing and productivity*. This Guidance provides many references to simple checklists and questionnaires to enable all stakeholders to do this.

Once the parties on the labour market know ‘where the shoe pinches’, action can be taken to ‘adjust the shoe’ to fit the ‘foot’, i.e. to improve stress-inducing conditions in the workplaces. Much of this can be accomplished through rather simple organisational changes by:

- Allowing adequate time for the worker to perform his or her work satisfactorily.
- Providing the worker with a clear job description.
- Rewarding the worker for good job performance.
- Providing ways for the worker to voice complaints and have them considered seriously and swiftly.
- Harmonising the worker’s responsibility and authority.
- Clarifying the work organisation’s goals and values and adapting them to the worker’s own goals and values, whenever possible.
- Promoting the worker’s control, and pride, over the end product of his or her work.
- Promoting tolerance, security and justice at the workplace.
- Eliminating harmful physical exposures.
- Identifying failures, successes, and their causes and consequences in previous and future health action at workplace; learning how to avoid the failures and how to promote the successes, for a step-by-step improvement of occupational environment and health (Internal control, see below).

On a company or national level, all three parties on the labour market may wish to *consider* organisational improvements to prevent work-related stress and ill health, with regard to:

- *Work schedule.* Design work schedules to avoid conflict with demands and responsibilities unrelated to the job. Schedules for rotating shifts should be stable and predictable, with rotation in a forward (morning-afternoon-night) direction.
- *Participation/control.* Allow workers to take part in decisions or actions affecting their jobs.
- *Workload.* Ensure assignments are compatible with the capabilities and resources of the worker, and allow for recovery from especially demanding physical or mental tasks.
- *Content.* Design tasks to provide meaning, stimulation, a sense of completeness, and an opportunity to use skills.
- *Roles.* Define work roles and responsibilities clearly.
- *Social environment.* Provide opportunities for social interaction, including emotional and social support and help between fellow workers.
- *Future.* Avoid ambiguity in matters of job security and career development; promote life-long learning and employability.

Person-oriented measures

By following the principles mentioned above, workers and employers can adjust the ‘shoe’ to fit the ‘foot’. However, this may take time or even turn out not to be feasible in the short-term. Here, the social partners may need to resort to the complementary strategy of adjusting the ‘foot’ to fit the ‘shoe’, by offering physical exercise and/or relaxation techniques, medication, counselling, and stress management.

Internal control

Actions to reduce noxious work-related stress need not be complicated, time consuming, or prohibitively expensive. One of the most common-sense, down-to-earth and low-cost approaches is known as *Internal Control*.

It is a self-regulatory process, carried out in close collaboration between stakeholders. It can be coordinated by e.g. an in-house occupational health service or a labour inspector, or by an occupational or public health nurse, a social worker, a physio-therapist, or a personnel administrator.

Its first step is to identify the incidence, prevalence, severity and trends of work-related stressor exposures and their causes and health consequences, e.g. by making use of some of the many survey instruments listed in this Guidance.

In a second step, the characteristics of such exposures as reflected in the content, organisation and conditions of work are analysed in relation to the outcomes found. Are they likely to be *necessary*, or *sufficient*, or *contributory* in causing work-stress, and ill health related to it? Are they accessible to change? Are such changes acceptable to relevant stakeholders?

In a third step, the stakeholders design an integrated *package of interventions*, and implement it in order to prevent work-related stress and to promote both wellbeing and productivity, preferably by combining top-down and bottom-up approaches.

The short- and long-term *outcomes* of such interventions need then to be *evaluated*, in terms of (a) stressor exposures, (b) stress reactions, (c) incidence and prevalence of ill health, (d) indicators of wellbeing, and (e) productivity with regard to the quality and quantity of goods or services. Also to be considered are (f) the costs and benefits in economic terms.

If the interventions show no effects, or negative ones, in one or more respects, stakeholders may wish to reconsider what should be done, how, when, by whom and for whom. If, on the other hand, outcomes are generally positive, they may wish to continue or expand their endeavours along similar lines. It simply means systematic *learning from experience*. If they do so over a longer perspective, the workplace becomes an example of *organisational learning*.

Experiences with such interventions are generally very positive, not only for the employees and in terms of stress, health and wellbeing, but also for the function and success of work organisations, and for the community. If conducted as proposed, it is likely to create a *win-win-win* situation for all concerned.

There is an urgent need for increased cooperation between all relevant stakeholders at all societal levels (EU, nation, workplace) with regard to

- *Implementation* of the very considerable body of current information on prevention measures to reduce stress-related illness and injury in the workplace and promote the health and wellbeing of workers, and *research* to address gaps in such knowledge.
- *Surveillance* at individual workplaces and *monitoring* at national and regional levels, in order to identify the extent of work-related stress and health problems and to provide baselines against which to evaluate efforts at amelioration.
- *Education and training* of occupational health and other key professional groups to facilitate their participation in researching and developing programmes to reduce the impact of work-related stress and to evaluate the outcome of such approaches.
- *Methodological developments* for the continued production and improvement of valid and reliable methodology kits for intersectoral and interdisciplinary monitoring, analysis and action by all concerned.
- Creation of a *Clearing House* for all relevant information using state-of-the-art technology, video, curricula, leaflets, hotline, etc. This would include use of the WWW to collect, review, integrate and disseminate information concerning such data and activities.
- Address the stress-related consequences of both over- and unemployment on the individuals concerned and their families and the communities in which they live. This will mean minimising unemployment and underemployment, minimising overemployment, promoting “the healthy job” concept, and humanising organisational restructuring.

Start now

Does all this sound complicated or even utopian? It is not. It has been done in many enterprises, and with considerable success. The principles mentioned above are incorporated in the EU Framework Directive and in the Work Environment Acts of a number of European countries. True, it may take time and effort, but it can be done. And it is likely to be highly cost-effective.

Your first step? Read the accompanying Guidance, and take concrete steps to apply what you have read in your own country, or at your own workplace. The ‘right time’ is now. It can mean improving both working conditions and health, as well as your own, your company’s and your country’s output and productivity.