



The European Network for Workplace Health Promotion

Richard Wynne, ENWHP Co-Chair

Presentation structure

- A little History
- Problems with the current set-up
- Towards a solution

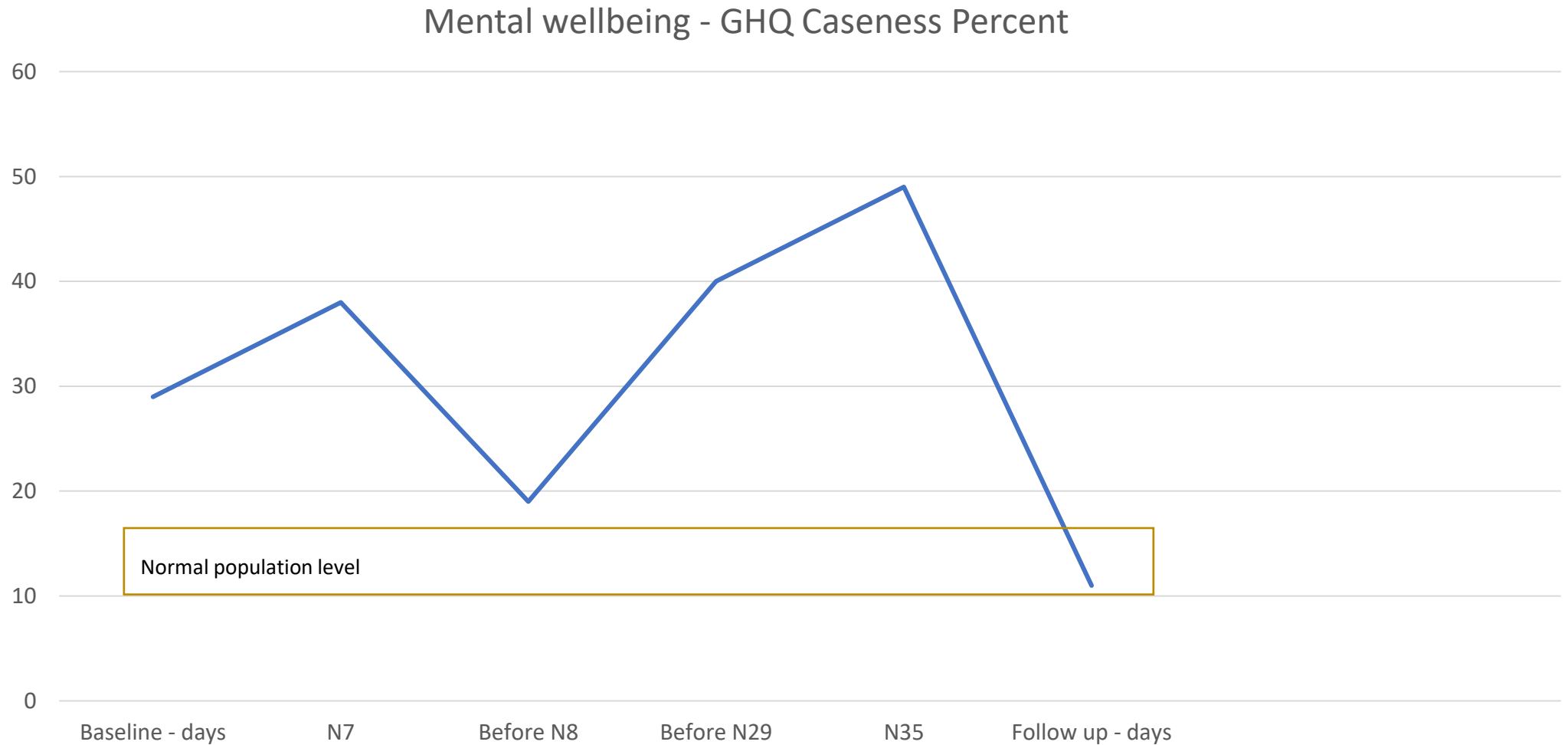
A little history

- Early studies of work stress in Teachers, Nurses, Airport workers, Industrial workers in the 1990's
- These demonstrated that psychosocial factors were real and that they operated to the detriment of the health and wellbeing of workers.
- Amongst the most important PSRs in these settings were:
 - Dealing with the public
 - Dealing with clients
 - Poor management style
 - Work overload
 - Shiftwork, especially nightwork
 - Work organisation
 - Non-specialist tasks
 - Violence/aggression/bullying

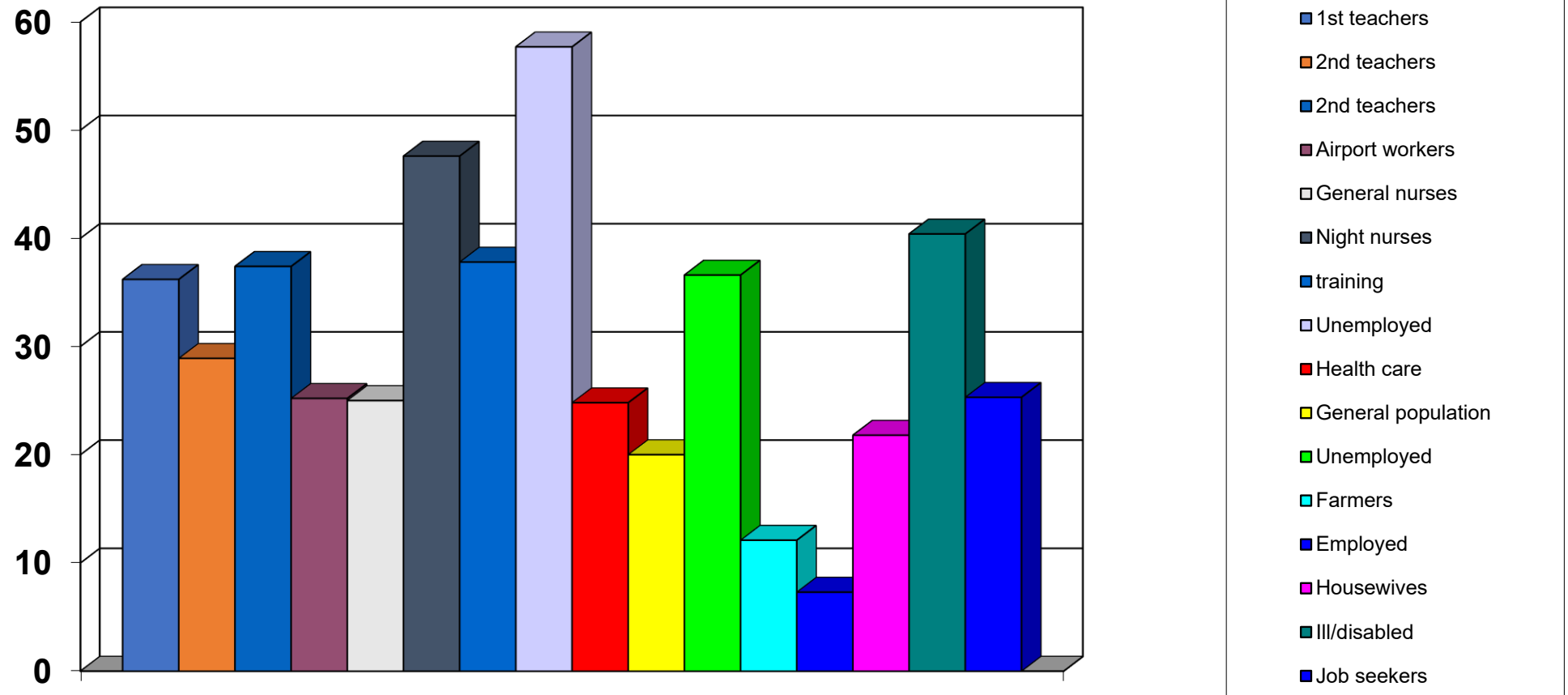
• Risks and Outcomes

- High levels of PSRs were producing stress responses in terms of health and wellbeing, absenteeism and performance at work
- Dose response relationship
- In some cases, more than 50% were reporting mental distress
- Modern examples exist also
 - UK report on nurses
 - Recent teacher survey in Ireland
- Costs and benefits
- Institutional response was missing
- Trade unions attempted to take these issues on with employers with limited success
- Light touch legislation
- HSA establishment

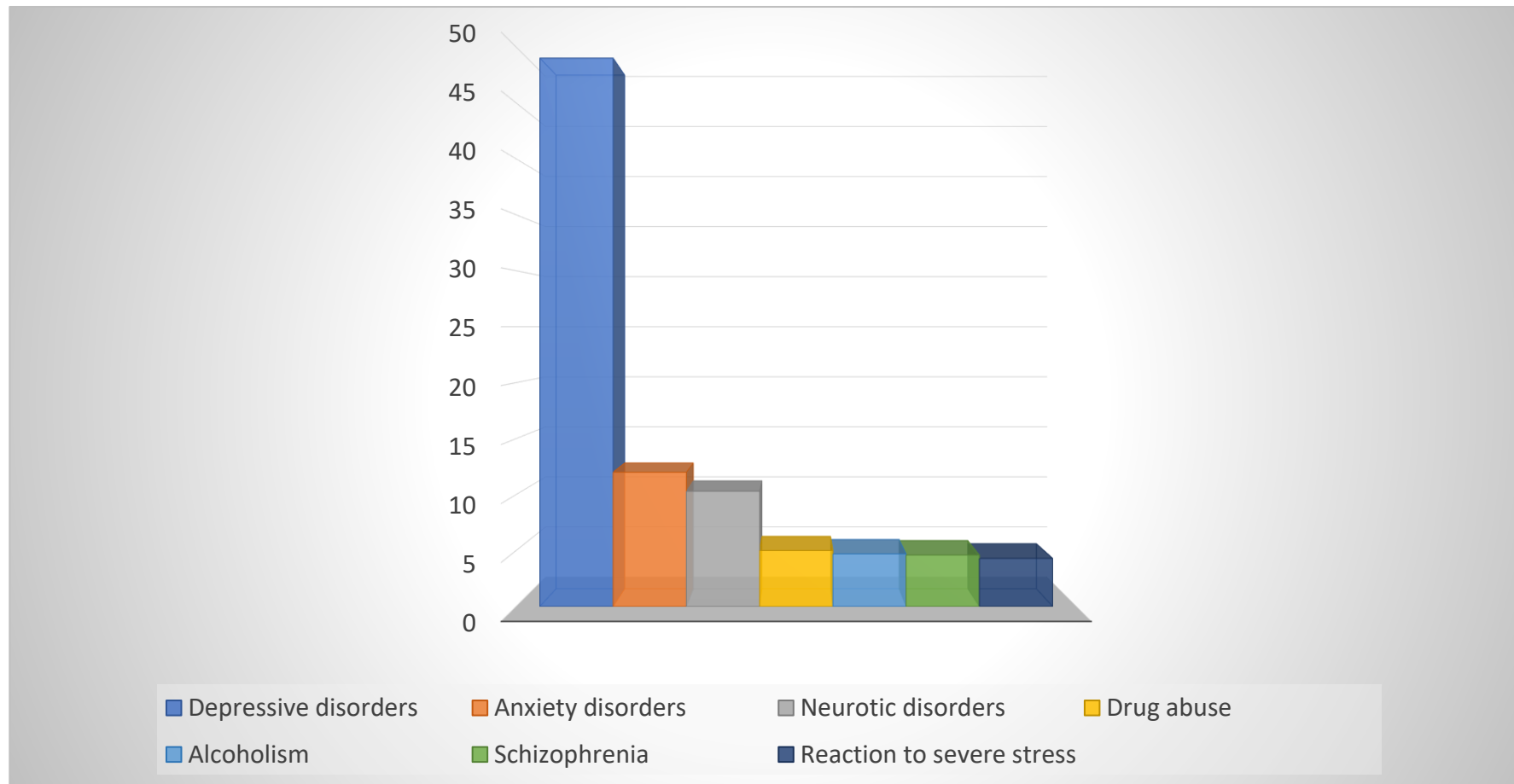
Mental health and night work



Poor Psychological wellbeing in Irish populations



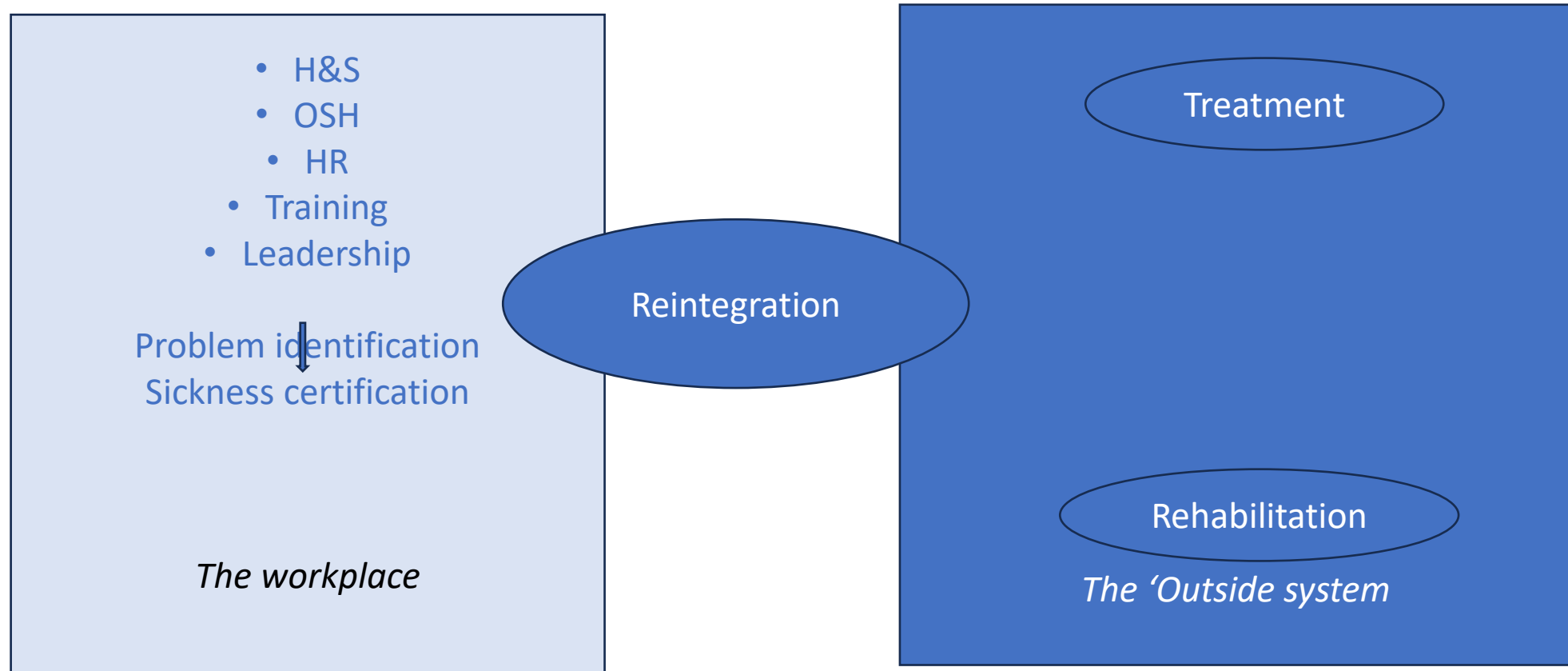
Impact of stress at work



Problems with the current set up

- Lack of awareness among major players and employers
- Lack of commitment in inspection
- Lack of trained assessors/intervenors
- The role of professional services
 - Do they exist?
 - Who provides these services?
- Qui Bono?
 - Distribution of costs and benefits
- Failure to fully apply legislation
- There is no coherent occupational health and safety management cycle
 - Prevention – problem ID, intervention
 - Monitoring and Reporting

The current 'system'



Towards a solution

- A sectoral approach is needed
 - Public sector
 - Private sector large employers
 - SMEs
- Research the extent of the problem annually, nationally and by sector
- Collaborative process
 - Involve other stakeholders
 - WHP officers in health boards
 - Public and private health services, Insurers, Social Welfare
 - OHS professionals
- System development
 - Design and develop tailored interventions
 - Test and refine through pilots
 - Develop tools and resources
 - Training and capacity building for all
 - Monitor and evaluate

Towards a solution

- Concentrate on all costs and benefits
- Generate a truly integrated model of management
- Examples of Integration
 - Australia Canada – Institutional collaboration
 - Finland – public health facilities
 - Germany/Austria – social and health insurance

Company level examples:

- **Confidential reporting & early intervention**
 - An Austrian biopharmaceutical company's FOKUS Psyche initiative lets workers flag stressful situations and receive timely support — with reports also used to trigger organisational change on workload and communication.
- **Clear anti-harassment procedures**
 - A hospitality-sector initiative combined evidence gathering with awareness raising and training, recognising that under-reporting is itself a major barrier to prevention.
- **Systematic psychosocial risk assessment**
 - Treating psychosocial risk as an occupational risk within routine assessment — examining workload, work organisation, relationships, autonomy and leadership before problems escalate.
- **Regular measurement, followed by action**
 - Swedbank's Sustainable Employee framework pairs regular wellbeing measurement with employee dialogue and manager-led action, so findings trigger interventions rather than sit in a report.

Towards a solution

- Workplace implementation
 - Integrate with organisational procedures – OSH, H&S, HR
 - Promote leadership
 - Worker participation
 - Risk assessment and monitoring
 - Training for all

Conclusion

- PSRFs and mental health outcomes are real
- Research is needed to detail the extent of the problem in Ireland
- System change and workplace change are possible
- Who owns the problems?
- Who shall lead?

And finally

- A 2024 peer review of legislative and enforcement approaches to address psychosocial risks at work concluded:
- *4 countries have specific legislation on psychosocial risk factors. Others have some references in legislation.*
- *'Finally, in Ireland' the legislation does not refer to psychosocial risks or specific work related health conditions. Instead, it relies on a soft law approach with non-binding guidance and best practices to address these risks'*