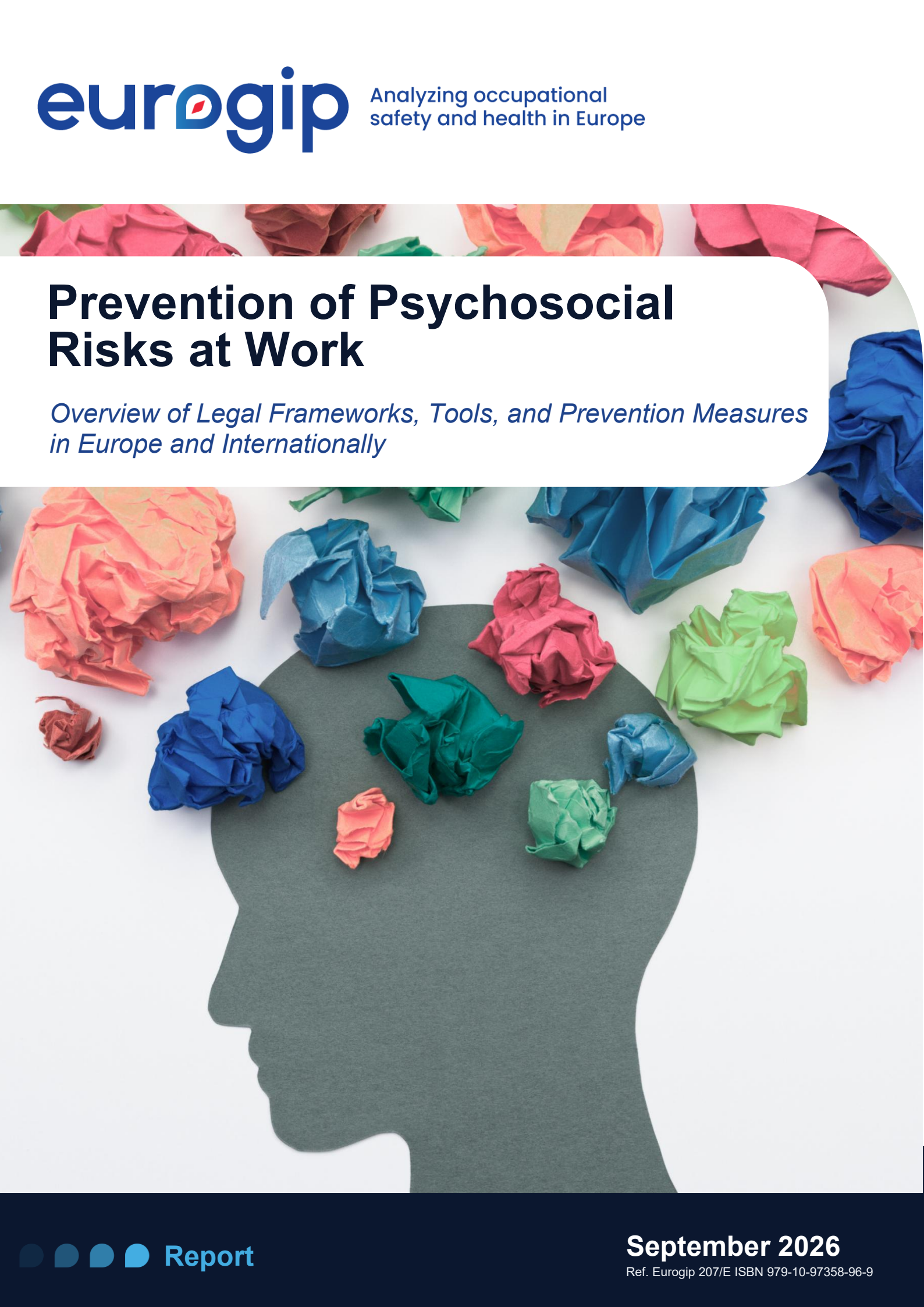


The background of the entire page is a photograph of numerous crumpled pieces of paper in various colors (red, orange, blue, green) scattered on a white surface. In the center, there is a dark grey silhouette of a human head in profile, facing left. Several of the crumpled paper balls are placed inside the head silhouette, suggesting thoughts or mental clutter.

Prevention of Psychosocial Risks at Work

*Overview of Legal Frameworks, Tools, and Prevention Measures
in Europe and Internationally*

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Preamble

In January 2010, EUROGIP published a thematic brief¹ titled “Psychosocial Risks at Work: A European Issue.” Prepared as part of the work of the French Working Conditions Advisory Committee (*Conseil d'orientation des conditions de travail*, COCT)², the text aimed to provide a non-exhaustive overview of policies and actions taken to prevent psychosocial risks at both the European Union (EU) and EU Member State levels.

Sixteen years later, the issue of psychosocial risk prevention remains highly relevant, particularly in the wake of the COVID-19 pandemic, which has disrupted and reshaped work habits and working conditions.

In this report, EUROGIP updates the data and information collected in 2010, taking into account the numerous developments - including legislative changes - that have occurred since then.

At the European level, seven countries were selected (**Belgium, Denmark, France, Germany, Italy, Spain, and Sweden**), in line with those included in a recent EUROGIP analysis³ published in May 2023, entitled “Recognition and Compensation of Work-related Mental Disorders in Europe.”

In the 2023 report, EUROGIP examined the compensation and insurance aspects of work-related mental disorders, in particular their potential recognition as accidents at work or occupational diseases across Europe.

The present report instead focuses on prevention efforts, relevant policies and initiatives that have been implemented, and the obligations of employers and workers in this area.

The two EUROGIP reports can thus be read as complementary, addressing the subject from either a preventive or a compensatory perspective.

Finally, it was deemed appropriate to also include non-European countries (**Australia, Canada, Japan, South Korea, and the United States**) in order to broaden the scope of this benchmark.

¹ [EUROGIP. *Risques psychosociaux au travail : une problématique européenne*. Note thématique. 2010.](#)

² [Ministère du Travail et des Solidarités. *Le Conseil d'orientation des conditions de travail \(COCT\)*.](#)

³ [EUROGIP. *Recognition and compensation of work-related mental disorders in Europe*. 2023.](#)

Introduction

Psychosocial Risks: Definitions and Consequences

Mental health is defined by the [World Health Organization \(WHO\)](#)⁴ as “a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn and work well, and contribute to their community.” It is the result of a complex interaction of **individual, biological** (such as genetics), **social, economic, and structural** (such as poverty, violence, and inequality, among others) **determinants and vulnerabilities**.

While some risk factors that can harm mental health may be entirely unrelated to the world of work, others are directly linked to it. Work plays a significant role in everyone’s life and can be either a positive or a negative influence on mental well-being.

For example, a decent and satisfying job, coupled with good working conditions, can provide not only an income but also economic stability, meaningful relationships with colleagues, a sense of contributing to society, and personal and professional fulfillment.

On the other hand, factors such as an excessive workload, a lack of a proper work-life balance, monotonous jobs, or frequent conflicts at work can negatively impact an individual’s mental health. Workplace bullying, precarious employment conditions, significant financial losses, and unemployment can also significantly disrupt mental health⁵.

In the field of [occupational safety and health \(OSH\)](#), the term “**work-related psychosocial risks**” is used more specifically, often abbreviated as **PSRs**. There is no single definition of the concept, particularly from a legal standpoint, as evidenced by the different national legislative frameworks (see Chapter 3).

The [International Labour Organization \(ILO\)](#)⁶ has defined psychosocial risks as the “interactions between and among work environment, job content, organizational conditions and workers’ capacities, needs, culture, personal extra-job considerations that may, through perceptions and experience, influence health, work performance and job satisfaction.”

The [European Agency for Safety and Health at Work \(EU-OSHA\)](#)⁷ defines PSRs as risks that “arise from **poor work design, organization and management**, as well as from **poor social context of work**, and they may result in negative psychological, physical and social outcomes.”

⁴ [WHO. Mental health. 8 October 2025.](#)

⁵ [WHO, ILO. Mental health at work: Policy brief. 2022.](#)

⁶ [ILO. Psychosocial factors at work: Recognition and control. 1986.](#)

⁷ [EU-OSHA. Psychosocial risks and mental health at work.](#)

The 2011 [French report](#), titled “Measuring Psychosocial Risk Factors at Work to Manage Them”⁸ (also known as the Gollac report⁹), serves as the primary scientific reference for the analysis, assessment, and prevention of PSRs in France. It defines them as **“risks to mental, physical, and social health arising from employment conditions and organizational and relational factors that may interact with mental functioning.”**

Despite semantic nuances, **the concept of PSRs encompasses health risks** (primarily mental but also physical) **arising from a range of work-related situations and conditions** (the “**psychosocial risk factors**”). These primarily include employment conditions, the design and organization of the work itself, and interpersonal relationships at work (with colleagues, supervisors, clients, patients, etc.).

Just as with PSRs, there is no single way of classifying psychosocial risk factors. Several methodologies exist in the scientific literature, although there is broad consensus regarding their general nature, typically related to job design, work organization, autonomy, workplace relationships, career prospects and job security, recognition/support from colleagues and supervisors, etc.

The aforementioned Gollac report identifies [six major dimensions](#) of psychosocial risk factors, each illustrated below by practical examples taken from a publication¹⁰ by the French National Research and Safety Institute for the Prevention of Occupational Accidents and Diseases (*Institut national de recherche et de sécurité pour la prévention des accidents du travail et des maladies professionnelles*, INRS):

1. [Work intensity and working time](#): Work overload, unrealistic or unclear goals, long working hours, conflicting instructions, atypical working hours, unpredictable schedules...
2. [Emotional demands](#): Difficult interactions with the public, exposure to human suffering or distress, the pressure to hide one’s emotions...
3. [Lack of autonomy](#): Limited autonomy in performing one’s work, imposed work pace, inability to participate in decision-making...
4. [Social relations and recognition at work](#): Conflictual relationships with colleagues or management, no career prospects, lack of recognition...
5. [Conflicts of values](#): Lack of pride in one’s work, difficulty in producing quality work...
6. [Job insecurity](#): Fear of losing one’s job, unstable income, precarious contracts, restructuring, uncertainty about the future of one’s profession...

⁸ Report of the Expert Panel on the Monitoring of Psychosocial Risks at Work, prepared in response to a request from the Minister of Labor, Employment and Health. [Rapport du Collège d’expertise sur le suivi des risques psychosociaux au travail, faisant suite à la demande du ministre du Travail, de l’Emploi et de la Santé. Mesurer les facteurs psychosociaux de risque au travail pour les maîtriser. 2011.](#)

⁹ After Michel Gollac, who chaired the Expert Panel.

¹⁰ [INRS. Facteurs de risque. Six catégories de facteurs de risque.](#)

EU-OSHA, for its part, identifies **10 categories of psychosocial risk factors**¹¹, based on the work of Professor Thomas Cox¹². The table below, which summarizes these factors, is taken from a publication by the SLIC (the Senior Labour Inspectors Committee, a European network bringing together representatives of the labor inspectorates of the EU Member States):

Table 1: Key Psychosocial Risk Factors

Job Content	Lack of variety or short work cycles, fragmented or meaningless work, underuse of skills, high uncertainty, continuous exposure to difficult clients, patients, pupils, etc.
Workload and Work Pace	Work overload or too little work, machine pacing, high levels of time pressure, and continual deadline pressure
Working Time	Shift work, night shifts, inflexible work schedules, unpredictable hours, and long or unsociable hours
Control	Low participation in decision-making, lack of control over workload, pacing, shift working, etc.
Environment and Equipment	Inadequate equipment availability, suitability, or maintenance; poor environmental conditions, such as lack of space, poor lighting, and excessive noise
Organizational Culture and Function	Poor communication, low levels of support for problem solving and personal development, poor managerial support; lack of definition of, or agreement on, organizational objectives
Interpersonal Relationships at Work	Social or physical isolation, poor relationships with superiors, interpersonal conflict, lack of social support, harassment, bullying, poor leadership style, and third-party violence
Role in Organization	Role ambiguity, role conflict, and responsibility for people
Career Development	Career stagnation and uncertainty, under-promotion or over-promotion, poor pay, job insecurity, and low social value of work
Home–Work Interface	Conflicting demands of work and home, low support at home, and problems relating to both partners being in the labor force (dual careers)

Source: Senior Labour Inspectors Committee (SLIC). [Guide for assessing the quality of risk assessments and risk management measures with regard to prevention of psychosocial risks. 2018.](#)

In the various classifications of PSR factors, situations involving **harassment** (psychological or sexual) and **violence** at work (physical, sexual, psychological, or verbal, perpetrated by colleagues, managers, or third parties such as clients, patients, or students) would fall under the category of “interpersonal relationships at work,” thereby constituting a specific form of psychosocial risk.

¹¹ EU-OSHA. [European Survey of Enterprises on New and Emerging Risks. Managing safety and health at work \(ESENER 1\). 2010.](#)

¹² Cox, T. *Stress Research and Stress Management: Putting Theory to Work*. HSE Books. Sudbury. 1993.

The physical work environment can also affect mental health: for example, inadequate lighting in the workplace or prolonged exposure to noise can contribute to the **onset of stress, anxiety, irritability...**

As a result, **PSRs represent health risks arising from exposure** (primarily, though not exclusively, prolonged exposure) **to one or more psychosocial risk factors**, which may combine and coexist (e.g., excessive workload and long working hours, poor work-life balance, a lack of recognition and/or support from colleagues or superiors, etc.). They can **have significant consequences both for individuals and companies**, and even for society at large.

Consequences of PSRs at the Individual Level

At the individual level, PSRs can cause “**psychosocial disorders**,” that is, a range of health conditions that are primarily psychological in nature, sometimes accompanied by physical symptoms, as the two spheres are closely linked.

Psychologically, they can lead to recurring forms of stress or a state of chronic stress, burnout syndrome, varying degrees of psychological distress, anxiety, nervousness, sleep disorders, depression, and may ultimately result in suicidal thoughts or suicide attempts.

Physically, PSRs can result in headaches, weight loss or gain, chronic fatigue, the onset of cardiovascular diseases, a weakened immune system and endocrine and musculoskeletal disorders (such as muscle pain or tension), among other things. This is often the case for workers experiencing chronic stress.

The ILO¹³ defines **stress** as “the harmful physical and emotional response caused by an imbalance between the perceived demands and the perceived resources and abilities of individuals to cope with those demands.” Work-related stress would then be “experienced when the demands of the work environment exceed the workers’ ability to cope with or control them,” according to the definition adopted by EU-OSHA¹⁴.

For this European agency, stress is not in itself a disease and, in small doses, can be helpful in responding to life’s challenges. Conversely, the state of constant or frequent stress in which a worker may find themselves, due to difficulties encountered at work, triggers **serious consequences for their physical and mental health**.

Regarding **burnout**, it is described by the WHO¹⁵ as the syndrome “resulting from chronic workplace stress that has not been successfully managed” and is “characterized by three dimensions: feelings of energy depletion or exhaustion, feelings of negativism or cynicism related to one’s job, and reduced professional efficacy.”

PSRs are thus the cause of psychosocial disorders (the consequence). In other words, exposure (whether prolonged or unmanaged) to psychosocial risk factors (excessive workload, lack of work-life balance, conflicts and difficult relationships with colleagues, job insecurity, constant fear of losing one’s job, etc.) generates risks to mental and/or physical health (PSRs) that can lead to psychosocial disorders (psychological and/or physical) in workers.

¹³ [ILO. Workplace Stress: A collective challenge. 2016.](#)

¹⁴ [EU-OSHA. Factsheet 22: Stress au travail. 2002.](#)

¹⁵ [WHO. Burn-out an "occupational phenomenon" : International Classification of Diseases. 28 May 2019.](#)

Finally, it is also important to note the potential **individual “social” consequences** associated with psychosocial risks. Situations involving violence, chronic stress, or other significant difficulties experienced at work can contribute to the development of addictive behaviors among workers (alcohol, tobacco, drugs, etc.), as well as social isolation, among other issues.

Consequences of PSRs at the Organizational and Societal Levels

In addition to their individual effects on workers' health, **PSRs can, according to the ILO¹⁶, lead to so-called “organizational” consequences** – not only for the company but also for society at large. The ILO cites higher absenteeism rates and prolonged sick leave, increased demand for early retirement, increased resignation rates, staff turnover and frequent team changes, as well as workplace conflicts leading to tensions among colleagues.

Due to the difficulties experienced by the worker(s), psychosocial risks can also lead to a loss of motivation and/or concentration at work, resulting in errors, failure to perform tasks correctly, or reduced attention to occupational safety and health measures, which may lead to **an increase in the number of work-related accidents**.

Certain psychosocial disorders (such as burnout, depression, etc.), in addition to leading to sick leave, **may be recognized as accidents at work or occupational diseases** depending on the specific conditions of each country's occupational accident and disease insurance systems¹⁷.

All of these factors can **affect the company's performance and productivity**, as well as society at the macroeconomic level.

¹⁶ [ILO. ILO Curriculum on Building Modern and Effective Labour Inspection Systems. Module 14. Ensuring compliance with legislation on psychosocial risks. 2022.](#)

¹⁷ For a European overview, see the report: [EUROGIP. Recognition and compensation of work-related mental disorders in Europe. 2023.](#)

Mental Health and its Costs in European and International Surveys

In recent years, **psychosocial risks have received increasing attention**, alongside a rise in the number of workers affected, as reflected in national, European, and international statistics.

The COVID-19 pandemic, with its lockdowns and challenges (ranging from social isolation to the sudden and often poorly organized shift to remote work during the emergency), has undoubtedly contributed to **a greater collective awareness of the importance of mental health** in all aspects of life, including at work.

As a result, workers are more likely to recognize the symptoms and consequences of PSRs and not overlook them. Thus, rather than a genuine increase in the number of workers suffering from mental health issues and stress at work, **these statistics and data may instead reflect growing awareness of the potential impact of work on mental health.**

In 2023, the number of **mental health conditions recognized as being of occupational origin in France** rose sharply (+25%) compared to 2022¹⁸. Between 2020 and 2024, two-thirds of claims for recognition involved women, more than half of whom were over 50 years old. The Occupational Injuries Branch of the French Social Security system (*Assurance Maladie – Risques professionnels*) also reports that nearly half of employees suffering from a mental condition recognized as an occupational disease work in intellectual, managerial, or senior executive roles. Regarding **workplace accidents (WA)**, those in which a mental health condition and/or a context of psychosocial risks was identified increased by 14% in 2024 compared to the previous year. Approximately 29,000 WAs recognized in 2024 fell into this category (accounting for just over 5% of all WAs in that year)¹⁹.

Regarding workers' experiences, according to the latest survey jointly conducted by Qualisocial and Ipsos²⁰ on mental health and QVCT²¹, **1 in 4 employees reports being in a “deteriorated mental health situation,”** which directly impacts their engagement, productivity, and well-being at work. Certain sectors are more affected than others, notably residential health and social care and social work activities (34%), accommodation and food services (30%), public administration (30%), and retail (29%).

At the EU level, Eurostat (the Statistical Office of the European Union), particularly in its 2020²² EU Labor Force Survey (EU-LFS), found that on average (with variations across EU countries) **44.6% of working-age respondents (15–64 years) reported being exposed to at least one factor** likely to “adversely affect [their] mental well-being.” This figure contrasts sharply with those previously recorded (29% in 2013, and 25% in 2007).

¹⁸ [Assurance Maladie - Risques professionnels. Rapport annuel 2023 de l'Assurance Maladie - Risques professionnels. Éléments statistiques et financiers. 2024.](#) English summary available [here](#).

¹⁹ [Assurance Maladie - Risques professionnels. Rapport annuel 2024 de l'Assurance Maladie - Risques professionnels. Éléments statistiques et financiers. 2025.](#) English summary available [here](#).

²⁰ [Qualisocial. Baromètre Santé mentale et QVCT - Qualisocial x Ipsos 2025.](#)

²¹ QVCT: the French acronym for *Qualité de vie et des conditions de travail* meaning “quality of life at work and working conditions” (see Chapter 3).

²² [Eurostat \(EU-LFS\). HSW EXP1: Persons reporting exposure to risk factors that can adversely affect mental well-being by educational attainment level. 2020.](#)

Among the psychosocial risk factors most frequently cited²³ by respondents, **“timeline pressure or overload of work”** ranked first at 19.5%, followed by “dealing with difficult customers, patients, pupils, etc.” (10.3%) and then “lack of communication or cooperation within the organization” (3.9%). The 2020 pandemic undoubtedly contributed to the increase in these figures.

The 2022 European Working Conditions Survey²⁴ (EWCS), conducted by telephone by Eurofound (the European Foundation for the Improvement of Living and Working Conditions) among 70,000 workers in 36 countries, indicates that, on average across the 27 EU countries:

- **27% of workers reported being “always” or “often” worried** about their work when they were not working;
- **30% of workers reported suffering from anxiety, and 13% from some form of physical and emotional exhaustion** caused by work (often a precursor to burnout).

EU-OSHA, for its part, conducted a telephone survey²⁵ in 2022 on the state of safety and health at work in a “post-COVID-19” world. After surveying 27,000 workers from the EU, Norway, and Iceland, **stress, depression, and anxiety** ranked as the fourth most commonly cited health issue (caused or made worse by work) among respondents (27%), with “overall fatigue” ranking first (37%).

In 2025²⁶, a similar EU-OSHA survey (involving approximately 28,000 respondents, including Switzerland alongside the countries covered in the previous survey) shows that stress, depression, and anxiety rose to third place, with a slight increase (from 27% to 29%). Furthermore, regarding exposure to psychosocial risk factors, the 2025 survey indicates that **44% of workers surveyed report being exposed to severe time pressure or overload of work**; 34% report a lack of rewards (e.g., in terms of pay, career opportunities, recognition) for the effort they put into their work, and 29% say they are exposed to poor communication or cooperation within their organization. Nearly one in ten workers (8%) report experiencing harassment or bullying at work.

Beyond the strictly professional sphere, surveys reveal a high number of people suffering from mental health issues in the general population, which inevitably includes workers.

Before the pandemic, according to the [Organization for Economic Co-operation and Development \(OECD\)](#), **one in six people in the EU suffered from a mental health issue** in 2016, or about 84 million people²⁷.

According to a “Eurobarometer” survey published by the [European Commission](#) and conducted in June 2023²⁸, **46% (or nearly one in two) of the approximately 27,000 people surveyed in the EU reported having experienced an emotional or psychosocial problem** (such as feeling depressed or feeling anxious) in the previous 12 months. Whether the cause is closely linked to work or not, depressive symptoms will inevitably persist or manifest themselves in the workplace in many cases.

²³ [Eurostat \(EU-LFS\). HSW EXP3: Persons reporting exposure to risk factors that can adversely affect mental well-being by type of factor. 2020.](#)

²⁴ [Eurofound. Working conditions in the time of COVID-19: Implications for the future. European Working Conditions Telephone Survey 2021 series. 2022.](#)

²⁵ [EU-OSHA. OSH Pulse - Occupational safety and health in post-pandemic workplaces. Flash Eurobarometer Report. 2022.](#)

²⁶ [EU-OSHA. OSH Pulse 2025: Occupational safety and health in the era of climate and digital change. Flash Eurobarometer - Summary. 2025.](#)

²⁷ [OECD. Health at a Glance: Europe 2018. State of Health in the EU Cycle. Factsheet on Promoting Mental Health. 22 November 2018.](#)

²⁸ [European Commission. Flash Eurobarometer 530. Mental health - Report. 2023.](#)

Internationally, the [WHO](#) reports that, even before COVID-19, one billion people worldwide were living with a mental disorder, and **nearly 15% of the world's working population is estimated to experience a mental disorder at any given time**²⁹. In 2020, during the first year of the pandemic, the WHO reported that cases of anxiety and depression increased by 25% worldwide³⁰.

In economic terms, according to [the WHO and the ILO](#)³¹, an estimated **12 billion working days are lost** each year due to depression or anxiety. This represents an annual cost to the global economy of USD 1 trillion (approximately EUR 862.2 billion), primarily due to lost productivity.

As for the EU, the [OECD](#)³² estimated the total **cost of mental ill-health at over 4% of GDP in 2015, or more than EUR 600 billion**, of which EUR 240 billion consisted of indirect costs due to lower employment and productivity at work.

²⁹ [WHO. World Mental Health Report: Transforming mental health for all. 2022.](#)

³⁰ [WHO. COVID-19 pandemic triggers 25% increase in prevalence of anxiety and depression worldwide. 2 March 2022.](#)

³¹ [WHO, ILO. Mental health at work: Policy brief. 2022.](#)

³² [OECD. Health at a Glance: Europe 2018. State of Health in the EU Cycle. Factsheet on Promoting Mental Health. 22 November 2018.](#)

Increased Focus on Mental Health at Work: ISO, OECD, WHO, ILO, EU

International Organization for Standardization (ISO)

In 2021, the International Organization for Standardization published a standard (**ISO 45003**³³) on mental health at work and the prevention and management of psychosocial risks. **This is the first international standard on this subject.**

Titled “Occupational health and safety management – Psychological health and safety at work – Guidelines for managing psychosocial risks,” this document is not legally binding. It is a **guide intended for all workplaces**, regardless of the type and size of the company or organization.

It complements another recent standard from 2018 (**ISO 45001**³⁴) on “Occupational health and safety management systems – Requirements with guidance for use.” The two documents can therefore be used together to integrate the prevention and management of psychosocial risks into an occupational health and safety management system, as defined and described in the 2018 standard.

It should be noted that **organizations cannot be awarded a certification based on the standard for PSRs** (ISO 45003), since it is a guidance document containing advice and recommendations, and not a “requirements” standard as is the case with ISO 45001³⁵.

ISO 45003 covers a wide range of aspects. Starting with a specific definition of PSRs, it describes the **main risk factors**, distinguishing in particular **three broad categories**:

- **Factors related to work organization** (roles and expectations, job control or autonomy, job demands, organizational change management, remote and isolated work, workload and work pace, working hours and schedule, job security and precarious work).
- **Social factors at work** (interpersonal relationships, leadership, organizational/workgroup culture, recognition and reward, career development, support, supervision, civility and respect, work-life balance, violence, harassment, and bullying at work).
- **Factors related to the work environment, equipment, and hazardous tasks** (inadequate availability, suitability, reliability, maintenance, or repair of equipment; poor workplace conditions; lack of the tools, equipment, or other resources needed to perform tasks; working in extreme conditions or unstable environments).

In addition to PSRs and their contributing factors, the standard also defines “**well-being at work**” as a sense of overall job satisfaction that can contribute to an improved quality of life.

It provides guidance on **how to assess PSRs and plan prevention**, including by identifying appropriate measures to implement. It also includes guidance on consulting workers and their representatives, conducting performance evaluations of the measures taken, training staff

³³ [ISO 45003:2021. Occupational health and safety management — Psychological health and safety at work — Guidelines for managing psychosocial risks. 2021.](#)

³⁴ [ISO 45001:2018. Occupational health and safety management systems — Requirements with guidance for use. 2018.](#)

³⁵ [EU-OSHA. Policy, law and guidance for psychosocial issues in the workplace: an EU perspective. 27 March 2012. Updated 29 September 2022.](#)

(particularly managers) in the prevention of PSRs and the recognition of early signs, and implementing initiatives to improve communication within the organization.

It should be noted, however, that while some³⁶ have supported the standard and expressed satisfaction with such initiatives, not all have shown the same enthusiasm. **Some countries have decided not to include ISO 45003 in their national standards collection**; this is the case in France³⁷ and Germany³⁸.

These countries, along with several social partners (including the ETUC, the European Trade Union Confederation), argue that standardization is not the appropriate tool for addressing issues such as psychosocial risks, unlike legislation, regulation, and social dialogue. For example, according to the ETUC³⁹, there is “no guarantee that ISO standards comply with EU values and rights, nor does it provide for any role for trade unions and societal stakeholders to take part in standardization, as is the case at the European level.”

Organization for Economic Co-operation and Development (OECD)

Several OECD studies have focused on mental health and its links to the world of work, such as the 2012 report “Sick on the Job? Myths and Realities about Mental Health and Work”⁴⁰ and the 2015 report “Fit Mind, Fit Job. From Evidence to Practice in Mental Health and Work”⁴¹. The latter estimated that “in all OECD countries, **people diagnosed with a mental disorder account for 30%-40% of disability benefit caseloads**,” while the total costs of mental illness in the EU amounted to approximately 3.5% of GDP in 2010.

Following the first-ever **OECD High-Level Policy Forum on Mental Health and Work** in March 2015, member countries called on the OECD to develop principles for action on mental health and employment.

The first “**OECD Recommendation on Integrated Mental Health, Skills, and Work Policy**”⁴² was thus adopted in December 2015. Although it is not a legally binding document, the recommendation represents a political commitment for OECD member and non-member countries that adhere to it.

This document identifies **four main areas of action**: mental health care systems; youth and education systems; **workplaces**; welfare and social protection systems. With regard to the workplace, **the Recommendation calls on States to**:

- Promote and enforce the assessment and prevention of psychosocial risks in the workplace;
- Develop a strategy for addressing the stigma surrounding workers with mental health conditions;

³⁶ For example, the [British Standards Institution \(BSI\)](#).

³⁷ [Previsoft. Santé mentale au travail : la norme ISO 45003 a été pensée comme un guide pour mieux appréhender les risques psychosociaux. 5 October 2021.](#)

³⁸ [DIN-Normenausschuss Organisationsprozesse \(NAOrg\). ISO 45003 – “Occupational health and safety management – Psychological health and safety at work – Guidelines for managing psychosocial risks”. Stellungnahme des Arbeitsausschusses NA 175-00-02 AA “Management für Sicherheit und Gesundheit bei der Arbeit” des DIN-Normenausschusses Organisationsprozesse \(NAOrg\) zur Veröffentlichung von ISO 45003:2021. 24 November 2022.](#)

³⁹ [ETUI. A new ISO standard for managing psychosocial risks. 25 August 2021.](#)

⁴⁰ [OECD. Sick on the Job? Myths and Realities about Mental Health and Work. 2012.](#)

⁴¹ [OECD. Fit Mind, Fit Job. From Evidence to Practice in Mental Health and Work. 2015.](#)

⁴² [OECD. Recommendation of the Council on Integrated Mental Health, Skills and Work Policy. OECD/LEGAL/0420. 14 December 2015.](#)

- **Raise awareness of potential losses in labor productivity** caused by mental health conditions;
- **Foster the design of structured return-to-work policies and processes** for workers on sick leave and their employers, particularly by encouraging a flexible and gradual return to work.

In 2021, the Recommendation underwent an evaluation⁴³ of its dissemination, implementation, and relevance. The OECD noted that **few countries have fully integrated the dimensions of employment and social protection into their national mental health plans and strategies.**

While some progress has been made in preventing PSRs in the workplace, fewer measures have been taken to support people on sick leave whose mental health has deteriorated, regardless of the cause. According to the OECD, this may be attributed **to a lack of clarity regarding the division of roles and responsibilities** among employers, employment services, and the social protection system in ensuring and managing the return to work of those affected.

A new analytical report on the Recommendation is expected in **2026**, which will provide a more detailed assessment of the actions implemented by countries in the post-COVID-19 era.

World Health Organization (WHO)

In 2021, the WHO adopted the **Comprehensive Mental Health Action Plan 2013–2030**⁴⁴ (which extended and updated the previous 2013–2020 Action Plan⁴⁵). This new plan sets out goals to be achieved by 2030, such as integrating mental health and the rights of people with mental health conditions into all sectoral policies, legislation and strategies (such as education and employment).

With regard to labor and employment, the WHO emphasizes the importance of implementing measures to:

- **Address discrimination** in the workplace,
- **Promote safe, supportive, and decent working conditions for all**, with a particular focus on improving workplace organization and training managers to promote employees' mental well-being.

However, it was not until 2022 that the WHO published **“Guidelines on Mental Health at Work”**⁴⁶, **considered to be the first-ever global guidelines** on the topic.

The purpose of this document is to provide “evidence-based global public health guidance on **organizational interventions, manager and worker training**, and **individual interventions** for the promotion of positive mental health [...], as well as recommendations on **returning to work** following absence associated with mental health conditions and **gaining employment** for people living with mental health conditions.”

⁴³ [OECD. Report on the Implementation of the OECD Recommendation on Integrated Mental Health, Skills and Work Policy. C/MIN\(2021\)19. Meeting of the Council at Ministerial Level. 5-6 October 2021.](#)

⁴⁴ [WHO. Comprehensive Mental Health Action Plan 2013-2030. 2021.](#)

⁴⁵ [WHO. Comprehensive Mental Health Action Plan 2013-2020. 2013.](#)

⁴⁶ [WHO. WHO guidelines on mental health at work. 2022.](#)

These guidelines provide a general framework applicable to all workplaces. However, sectors particularly at risk of deteriorating mental health are also identified (health, humanitarian and emergency workers), for which more specific recommendations are outlined.

In order to develop and implement effective national strategies and policies based on these guidelines, **the WHO emphasizes that national legislative and regulatory measures are also necessary.**

Despite increased attention to the issue, action at the national level remains limited. The 2020⁴⁷ edition of the WHO Atlas of Mental Health⁴⁸ shows that only 35% of countries reported having implemented programs for work-related mental health prevention and promotion.

International Labour Organization (ILO)

On psychosocial risks and mental health at work

In recent years, the ILO has published several documents, including a report titled “**Workplace Stress: A Collective Challenge**”⁴⁹, released on the occasion of the 2016 World Day for Safety and Health at Work. It offers a comprehensive analysis of stress prevention and management at work (statistics and definitions) as well as an overview of existing measures, policies, laws, standards, tools, and initiatives at the international and national levels aimed at reducing and eliminating work-related stress⁵⁰.

It is also worth noting that, in 2012, the ILO developed a specific tool on the prevention of work-related stress (**Stress Prevention at Work Checkpoints**⁵¹). This publication identifies 50 checkpoints (in the form of recommendations and guidelines) to help employers recognize, address, and eliminate stressors in their work environment.

The checkpoints are divided into **10 categories**, covering the main psychosocial risk factors (listed in the following order: leadership and justice at work; job demands; job control; social support; physical environment; work-life balance and working time; recognition at work; protection from offensive behavior; job security; information and communication).

For each *checkpoint*, the document explains the importance of assessing it, the solutions and measures that could be implemented, and the expected outcomes. This publication is not intended to serve as a risk assessment tool *per se*, but rather as a practical resource for employers, workers, and OSH representatives.

Beyond work-related stress, a **Joint ILO/WHO Policy Brief** (2022) addresses psychosocial risks and mental health at work more broadly. This document (titled “Mental health at work: Policy brief”⁵²) proposes practical strategies to help stakeholders (particularly governments, employers, workers, and their representative organizations, in both the public and private sectors) implement the recommendations set out in the aforementioned **WHO “Guidelines on Mental Health at Work.”**

⁴⁷ [WHO. Mental Health Atlas 2020. 2021.](#)

⁴⁸ A triennial WHO publication compiling Member States’ data on progress made in mental health policies, legislation, funding, and actions.

⁴⁹ [ILO. Workplace Stress: A collective challenge. 2016.](#)

⁵⁰ Annex 1 of the ILO report contains two important sections: the first presents the main questionnaires available for assessing psychosocial risks, stress, and burnout; the second provides details on numerous tools and guidelines designed to support the prevention, assessment, and management of psychosocial risks and stress. These questionnaires and tools originate from a variety of sources (academic researchers and universities, OSH institutes, national research institutes, national governmental bodies such as ministries, international organizations, among others).

⁵¹ [ILO. Stress Prevention at Work Checkpoints: Practical improvements for stress prevention in the workplace. 2012.](#)

⁵² [WHO, ILO. Mental health at work: Policy brief. 2022.](#)

On violence and harassment at work

In June 2019, **ILO Convention No. 190 concerning the elimination of violence and harassment in the world of work (C190)**⁵³ was adopted. This is the first ILO convention - and, more broadly, the **first international treaty** - to specifically address this issue and recognize the right of everyone to a world of work free from **violence** and **harassment**, including gender-based violence and harassment. C190, which entered into force in June 2021, provides, for the first time at the international level, a detailed definition for each of these two terms (Article 1 of C190):

- **Violence and harassment in the world of work:** “a range of unacceptable behaviors and practices, or threats thereof, whether a single occurrence or repeated, that aim at, result in, or are likely to result in physical, psychological, sexual or economic harm, and includes gender-based violence and harassment”;
- **Gender-based violence and harassment:** “violence and harassment directed at persons because of their sex or gender, or affecting persons of a particular sex or gender disproportionately, and includes sexual harassment.”

All States that ratify the Convention must **respect, promote and realize** the right to work in an environment free from these forms of violence, as well as **adopt legislation that incorporates these definitions** and prohibits violence and harassment in the world of work.

In addition, States must develop **laws, regulations and policies aimed at preventing and addressing** violence and harassment at work, as well as guaranteeing “the right to equality and non-discrimination in employment and occupation.”

C190 applies to all sectors, both public and private. It also covers any form of violence or harassment that occurs in the course of, is linked with, or arises out of work. To date, 54 countries worldwide have ratified⁵⁴ C190, including 14 EU Member States: Austria, Belgium, Cyprus, Denmark, Estonia, Finland, France, Germany, Greece, Ireland, Italy, Portugal, Romania, and Spain.

The European Commission

The new EU Strategic Framework on Health and Safety at Work 2021–2027

In 2021, the European Commission published its latest **Strategic Framework on Health and Safety at Work for the period 2021–2027**⁵⁵. Although not legally binding, this document sets out the goals that Member States and the EU as a whole should achieve by 2027 in the field of OSH.

With regard to mental health and PSRs, these issues are addressed much more explicitly than in previous OSH strategic frameworks. One of the goals of the latest Strategic Framework is to anticipate and manage “change in the new world of work brought about by the green, digital and demographic transitions.”

⁵³ [ILO. C190 - Violence and Harassment Convention, 2019 \(No. 190\). 2019.](#)

⁵⁴ [ILO. Ratifications of C190 - Violence and Harassment Convention, 2019 \(No. 190\). \(Last accessed on 29 January 2026\).](#)

⁵⁵ [European Commission. Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions. EU Strategic Framework on Health and Safety at Work 2021-2027. Occupational Safety and Health in a Changing World of Work. COM\(2021\) 323 final. 28 June 2021.](#)

While PSRs are not exactly new risks, they **can be exacerbated by today's emerging challenges**, such as digitalization in the workplace. In this regard, the Commission commits to:

- **Modernizing the OSH legislative framework related to digitalization** by reviewing the Workplaces Directive⁵⁶ and the Display Screen Equipment Directive⁵⁷;
- **Preparing**, in cooperation with Member States and social partners, a **“non-legislative EU-level initiative** related to mental health at work” and propose guidance for action;
- **Developing the analytical basis**, e-tools, and guidance for assessing risks associated with green and digital jobs and processes, including in particular **psychosocial and ergonomic risks**.

States, for their part, are invited to “update their national legal frameworks, in consultation with social partners, to address OSH risks and opportunities related to the green and digital transitions [...]; **to host peer reviews addressing occupational psychosocial and ergonomic issues**; and to **strengthen monitoring and data collection on the situation of mental and psychosocial risks** across sectors.”

A new Communication on a Comprehensive Approach to Mental Health

In June 2023, the Commission published its **“Communication on a Comprehensive Approach to Mental Health”**⁵⁸. It sets out policy orientations for integrating mental health into all policy areas, including employment.

Part of the document specifically addresses mental health in the workplace and the importance of tackling PSRs. In particular, the Commission emphasizes “the need to reflect on the way forward as regards the **right to disconnect**, as an integral part of reducing work-related stress and promoting a better work-life balance, **the right to return to work after mental illness** as well as a **psychologically safe work environment**.”

The Commission states that it will conduct **“a peer review on legislative and enforcement approaches to address psychosocial risks at work in the Member States, with a view [...] to present an EU-level initiative on psychosocial risks.”**

It should be noted that this initiative is not explicitly described as a “legislative” one. Based on its analysis, the Commission may opt for non-binding instruments, as already anticipated in the 2021–2027 EU Strategic Framework on OSH.

According to the Commission, this Communication marks the beginning of a new strategic approach aimed at putting mental health on an equal footing with physical health, adding “another pillar to the architecture of the European Health Union.”

⁵⁶ [Council Directive 89/654/EEC of 30 November 1989 concerning the minimum safety and health requirements for the workplace.](#)

⁵⁷ [Council Directive 90/270/EEC of 29 May 1990 on the minimum safety and health requirements for work with display screen equipment.](#)

⁵⁸ [European Commission. Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions on a Comprehensive Approach to Mental Health. COM\(2023\) 298 final. 7 June 2023.](#)

The European Parliament

With regard to mental health at work, the European Parliament has called for legislative action in three areas: the right to disconnect, telework, and PSRs.

A call for an EU directive on the right to disconnect and the development of an appropriate legislative framework for telework

Less than a year after the outbreak of the COVID-19 pandemic, in January 2021, the European Parliament adopted a “**Resolution containing recommendations to the Commission on the right to disconnect**”⁵⁹. This document highlights the exponential increase in the use of remote work across many sectors.

Remote work offers numerous benefits for workers (greater flexibility and autonomy, reduced commuting time, etc.) but also disadvantages, such as the intensification of work and longer working hours, which blur the boundaries between work and private life.

With the widespread use of modern means of communication, the increase in workload is considered to result from the emergence of a “**constantly on-call culture, which can have detrimental effect on workers’ fundamental rights and fair working conditions**, including fair remuneration, the limitation of working time and work-life balance, physical and mental health and safety at work.”

The consequences for OSH are numerous: reduced concentration, cognitive and emotional overload, as well as increased dependence on technology, sleep disturbances, burnout, and anxiety, among others. In light of these considerations:

- Given that there is currently no EU legislation on the **right to disconnect**, the **Parliament calls on the European Commission to present a proposal** for an EU directive on this matter.
- The Parliament **also calls on the Commission “to present a legislative framework** with a view to **establishing minimum requirements for remote work** across the Union, ensuring that teleworking does not affect the employment conditions of teleworkers.” The Parliament believes it is crucial to better regulate this form of work organization at the European level, as this is not yet the case⁶⁰.

A call for an EU directive on psychosocial risks at work

This call was first made by the European Parliament in its “**Resolution on a new EU strategic framework on health and safety at work post 2020**”⁶¹, adopted in March 2022.

Noting that mental health issues are affecting an increasing number of workers, **the Parliament highlighted the lack of EU legislation on PSRs**, as well as the wide variety of national approaches and legislation on the matter across Member States.

⁵⁹ [European Parliament. European Parliament Resolution of 21 January 2021 with recommendations to the Commission on the right to disconnect \(2019/2181\(INL\)\). P9_TA\(2021\)0021.](#)

⁶⁰ For further information on the implementation of telework in seven European countries, as well as the related differences and challenges in OSH and occupational accident and disease insurance, see the report: [EUROGIP. Teleworking and accidents at work in seven European countries. 2023.](#)

⁶¹ [European Parliament. European Parliament Resolution of 10 March 2022 on a new EU strategic framework on health and safety at work post 2020 \(including better protection of workers from exposure to harmful substances, stress at work and repetitive motion injuries\) \(2021/2165\(INI\)\). P9_TA\(2022\)0068.](#)

While the [European Framework Directive on OSH](#)⁶² does exist, it “may not prove effective enough for the world of work in the 21st century and the latest developments in labor markets.” For this reason, **the Parliament calls on the Commission “to propose, in consultation with the social partners, a directive on psychosocial risks and well-being at work.”**

This call was reiterated in [two subsequent European Parliament resolutions](#): the “Resolution on mental health in the digital world of work”⁶³ (July 2022) and the “Resolution on mental health”⁶⁴ (December 2023).

The European Economic and Social Committee (EESC)

At the request of the Spanish government in preparation for its Presidency of the Council of the EU (July-December 2023), the EESC issued **an opinion on the topic of “Precarious Work and Mental Health”**⁶⁵.

Recognizing that “there is robust evidence that precarious work increases the chances of experiencing poor mental health,” the EESC emphasizes the importance of “ensuring the implementation of the existing EU and national legislation establishing quality employment and working conditions.”

However, the EESC considers that current European OSH legislation is insufficient with regard to the prevention and management of PSRs.

Although these fall within the scope of the European Framework Directive on OSH (see Chapter 2), the **EESC “proposes adopting specific legislation on preventing psychosocial risks at EU level**, developing and modernizing the Directive on Occupational Safety and Health (89/391/EEC), implementing prevention of occupational psychosocial risks at the source, and changing the way work is designed, managed and organized.”

More specifically, such legislative action should address aspects such as the **quality requirements for the methods used to assess PSRs** and the implementation of **appropriate measures** to prevent and manage these risks, for example through changes to working conditions and effective monitoring of work schedules.

Similar (though less detailed) calls for EU legislation on PSRs have also been made by the EESC:

- In a [2022 opinion](#)⁶⁶ on “social dialogue as a tool to promote health and safety at work,” the EESC also states that **“an effective preventive approach requires action to be taken with regard to the working environment** rather than focusing solely on the mental health of the individual.”

⁶² [Council Directive 89/391/EEC of 12 June 1989 on the introduction of measures to encourage improvements in the safety and health of workers at work.](#)

⁶³ [European Parliament. European Parliament Resolution of 5 July 2022 on mental health in the digital world of work \(2021/2098\(INI\)\). P9_TA\(2022\)0279.](#)

⁶⁴ [European Parliament. European Parliament Resolution of 12 December 2023 on mental health \(2023/2074\(INI\)\). P9_TA\(2023\)0457.](#)

⁶⁵ [EESC. Opinion of the European Economic and Social Committee on Precarious work and mental health \(exploratory opinion requested by the Spanish Presidency\) \(2023/C 228/05\).](#)

⁶⁶ [EESC. Opinion of the European Economic and Social Committee on Social dialogue as a tool to promote health and safety at work \(exploratory opinion requested by the French presidency\) \(2022/C 194/09\).](#)

- In another 2025 opinion⁶⁷ on the challenges and consequences of new technologies (including artificial intelligence) for OSH, including workers' mental health, the EESC reiterates its proposal that the European Commission launch legislative initiatives on the prevention of psychosocial risks, emphasizing "the need to broaden the concept of OSH in order to **adequately encompass well-being and psychosocial risk management.**"

The Council of the European Union

Finally, the Council of the EU recently adopted three Conclusions⁶⁸ on issues relating to work and mental health:

- **Conclusions of 24 October 2019 on the economy of well-being**⁶⁹: in this document, the Council calls on the Member States and the European Commission to "include an Economy of Well-being perspective horizontally into national and Union policies and put people and their well-being at the center of policy design."
- **Conclusions of 9 October 2023 on mental health and precarious work**⁷⁰: this document examines the links between mental health and the quality and conditions of work, particularly where employment is precarious, as well as the measures that can be implemented by the various stakeholders involved.
- **Conclusions of 30 November 2023 on mental health**⁷¹: following the publication in June of the same year of the Commission's "Communication on a Comprehensive Approach to Mental Health," the Council addresses the issue of mental health in Europe, with a particular attention to the world of work. It therefore invites the Member States, the Commission, and the social partners to develop strategies and action plans, beginning with effective information-sharing among stakeholders and ensuring that the prevention and management of PSRs are addressed in the workplace.

At both the international and European levels, there has been **a growing number of documents and publications on mental health at work and the prevention of psychosocial risks**, particularly in recent years.

Indeed, the COVID-19 pandemic has profoundly disrupted the world of work, with several changes persisting over time, such as the expansion of remote work across many sectors, increased hyperconnectivity, reduced opportunities for social interaction at work, and heavier workloads.

These developments can lead to stress, anxiety, burnout, and other mental health problems among workers, highlighting the need to **better integrate the prevention and management** of psychosocial risks into occupational safety and health policies.

⁶⁷ [EESC. Opinion of the European Economic and Social Committee. Health and safety at work – current and future challenges in light of traditional and new technologies, with a focus on AI \(exploratory opinion requested by the Polish Presidency of the Council of the EU\) \(C/2025/2958\).](#)

⁶⁸ Documents in which the Council of the EU expresses a political position or commitment on a given topic, but which are not legally binding, [see "Conclusions and resolutions of the Council"](#).

⁶⁹ [Council of the European Union. The Economy of Wellbeing. Council Conclusions \(24 October 2019\). 13432/19. 24 October 2019.](#)

⁷⁰ [Council of the European Union. Council Conclusions on Mental Health and Precarious Work. 13937/23. 9 October 2023.](#)

⁷¹ [Council of the European Union. Council Conclusions on Mental Health. 15971/23. 30 November 2023.](#)

Regulation and Prevention of Psychosocial Risks at the European Union Level

European Union Legislation

At the European level, there are numerous provisions regarding OSH (some of which address factors that may influence mental health and stress, such as legislation on working hours), but **no EU legislative act specifically addresses the prevention and management of PSRs at work.**

The 1989 European Framework Directive⁷² makes **employers responsible for the OSH of their workers**, requiring them to take all necessary measures to protect them.

Article 6 requires employers to “**adapt 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 **alleviating monotonous work** and **work at a predetermined work-rate** and to reducing their effect on health.” Employers must also “develop 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.”

While the terms *psychosocial risks*, *stress*, or *mental health* do not appear explicitly in the directive, the European Commission notes, in a specific [report on the application of the OSH Framework Directive in the context of mental health at work](#)⁷³, that the prevention principles and obligations contained in the Framework Directive “also apply to the prevention of risks in relation to mental health in the workplace.” It thus clarifies that **employers are required to “conduct risk assessments in relation to mental health of workers**, placing particular attention to any groups of workers particularly facing risks to their mental health.”

That said, the Framework Directive contains neither detailed guidance on how to assess PSRs in practice nor more specific obligations regarding the management of PSRs.

In a [2017 report on the implementation of European OSH directives](#)⁷⁴, the European Commission, while noting that PSRs are indeed covered by the Framework Directive, acknowledges that managing them represents a major challenge in the field of OSH.

It considers that “psychosocial risks are related to a **complex interaction** between occupational and non-occupational factors,” and that “clarification is needed on what this means and the corresponding obligations for Member States and employers.” It concludes by noting that the **complex nature of PSRs “does not easily lend itself to a legislative response at the EU level.”** However, “further guidance and other accompanying tools developed at the EU level could provide useful support” to Member States.

For this reason, despite recent calls from the European Parliament and the European Economic and Social Committee (see Chapter 1), **a potential EU directive on psychosocial risks does not currently appear to be on the agenda.**

⁷² [Council Directive 89/391/EEC of 12 June 1989 on the introduction of measures to encourage improvements in the safety and health of workers at work.](#)

⁷³ [European Commission. Interpretative Document of the Implementation of Council Directive 89/391/EEC in relation to Mental Health in the Workplace. 2014.](#)

⁷⁴ [European Commission. Commission Staff Working Document. Ex-post evaluation of the European Union occupational safety and health Directives \(REFIT evaluation\). SWD\(2017\) 10 final. 10 January 2017.](#)

Similarly, neither the EU Strategic Framework on Health and Safety at Work 2021–2027 nor the Commission’s 2023 Communication “on a comprehensive approach to mental health” (see Chapter 1) contains clear indications in this direction, but rather an intention to act through non-binding instruments.

In her [political guidelines](#)⁷⁵ for her candidacy, the President of the Commission reaffirmed her commitment to mental health, notably by expressing her intention to:

- Continue work on “preventive health, in particular for mental health, including at work,” without specifying whether legislative measures are planned;
- Develop a new “Action Plan on the Implementation of the European Pillar of Social Rights”⁷⁶, including “initiatives” that will analyze the impact of new technologies and digitalization (artificial intelligence, algorithmic management, remote work, etc.) on the world of work and mental health. In particular, the President intends “to introduce a right to disconnect.”

Pending any future EU action, whether legislative or otherwise, it is worth **recalling the main EU directives** (in addition to the Framework Directive) that indirectly affect aspects of mental health at work.

⁷⁵ [Ursula von der Leyen, Candidate for the European Commission President. *Europe’s Choice. Political Guidelines for the Next European Commission 2024–2029.* 2024.](#)

⁷⁶ The “[European Pillar of Social Rights](#)” is a reference framework that sets out 20 key principles and rights aimed at improving living and working conditions in the European Union. It is structured around three main themes: (1) equal opportunities and access to the labor market; (2) fair working conditions; and (3) social protection and inclusion.

Table 2: Key EU Directives concerning aspects related to workers' mental health
(in addition to Framework Directive 89/391/EEC)⁷⁷

<u>Directive 90/270/EEC</u>	On the minimum safety and health requirements for work with display screen equipment In particular, Article 3: <i>“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 eyesight, physical problems and problems of mental stress.”</i>
<u>Directive 2000/43/EC</u>	Implementing the principle of equal treatment between persons irrespective of racial or ethnic origin
<u>Directive 2000/78/EC</u>	Establishing a general framework for equal treatment in employment and occupation
<u>Directive 2003/88/EC</u>	Concerning certain aspects of the organization of working time
<u>Directive 2006/54/EC</u>	On the implementation of the principle of equal opportunities and equal treatment of men and women in matters of employment and occupation (recast)
<u>Directive (EU) 2019/1152</u>	On transparent and predictable working conditions in the European Union
<u>Directive (EU) 2019/1158</u>	On work-life balance for parents and carers

In addition to the aforementioned directives, it is also worth mentioning **the recent EU Directive on Platform Work**⁷⁸, published in November 2024. It concerns workers on “digital labor platforms,” which use digital tools (websites or mobile apps) to connect customers with numerous workers providing various services (food delivery, ride-hailing, etc.).

Two main features characterize these platforms: 1) the matching of service supply and demand is not carried out by a human being, but by algorithms; 2) these algorithms do not merely facilitate this supply-demand match, but actually organize the work, by allocating customer requests among the available workers. This is why the term “algorithmic management” is more specifically used in relation to platform work⁷⁹.

This new 2024 directive provides that platforms, where they have “employees,” must conduct an adequate occupational risk assessment that also takes into account **the impact of the algorithms used on psychosocial risks**. Furthermore, platform employers are required not to use algorithms

⁷⁷ Further information can be found in Annex 1 of the European Commission document [“Promoting mental health in the workplace. Guidance to implementing a comprehensive approach” \(2014\)](#), or, more recently, in the European Parliament study [“Minimum health and safety requirements for the protection of mental health in the workplace \(2019\)”](#).

⁷⁸ [Directive \(EU\) 2024/2831 on improving working conditions in platform work](#).

⁷⁹ For more details on this new EU Directive and for an analysis of platform work, see: [EUROGIP. Travailleurs des plateformes : quel statut pour quelle protection sociale ? Caractéristiques - Initiatives européennes - Situation dans 6 pays européens. 2022.](#) and [EUROGIP. Focus - Travail de plateforme : comprendre la nouvelle Directive européenne. 2024.](#)

that coordinate and organize workers' tasks in a manner that puts **undue pressure** on them or endangers their physical and **mental health** and safety.

Finally, regarding **the right to disconnect and the establishment of fair telework in the EU**, the European Commission recently launched two rounds of consultation with the European social partners (one from April to June 2024⁸⁰ and the other from July to October 2025⁸¹) on potential EU action concerning these two issues. Legislative action in these areas could take place in the coming years.

This Commission initiative follows the call made by the European Parliament in its 2021 Resolution (see Chapter 1), which urged legislative action on the right to disconnect and fair telework. It also forms part of the European Commission President's aforementioned political guidelines for 2024-2029.

European Framework Agreements

Since the publication of a previous EUROGIP thematic brief⁸² on the prevention of PSRs (2010), **no new European framework agreement on aspects explicitly related to mental health at work has been developed or adopted**, at least not by the European cross-industry social partners⁸³.

The following cross-industry framework agreements remain applicable in Europe:

- **Framework Agreement on Work-related Stress**⁸⁴ (2004)
- **Framework Agreement on Harassment and Violence at Work**⁸⁵ (2007).

Subsequently, the "**Multi-sectoral Guidelines to Tackle Third-party Violence and Harassment Related to Work**"⁸⁶ were adopted in 2010 by a wide range of organizations representing employers and workers from various sectors to supplement the 2007 Framework Agreement. Recently, in March 2024, negotiations⁸⁷ officially began to update these guidelines, with the support of the European Commission.

This resulted in the publication of a **new version**⁸⁸ of the guidelines in May 2025, which also incorporates the fight against cyberviolence and the principles of the aforementioned ILO Convention C190 (see Chapter 1).

These guidelines were **signed by social partners from sectors particularly exposed to incidents of violence and harassment by third parties**, such as central government administrations, local and regional authorities, healthcare, education, and HORECA (hotels, restaurants, and cafeterias).

⁸⁰ [European Commission. Commission launches first-stage consultation of social partners on fair telework and the right to disconnect. 30 April 2024.](#)

⁸¹ [European Commission. Commission starts second-stage talks with social partners on right to disconnect and fair telework. 25 July 2025.](#)

⁸² [EUROGIP. Risques psychosociaux au travail : une problématique européenne. 2010.](#)

⁸³ Currently: on the workers' side, the European Trade Union Confederation (ETUC); on the employers' side, BusinessEurope, SMEunited (representing small and medium-sized enterprises, formerly UEAPME), and SGI Europe (representing public-sector employers, formerly CEEP).

⁸⁴ [Framework Agreement on Work-related Stress. 2004.](#)

⁸⁵ [Framework Agreement on Harassment and Violence at Work. 2007.](#)

⁸⁶ [European social dialogue. Multi-sectoral guidelines to tackle third-party violence and harassment related to work. 2010.](#)

⁸⁷ [EPSU. Social partners take action against third-party violence and harassment at work. 19 March 2024.](#)

⁸⁸ [European Multi-sectoral Social Partners. Guidelines to prevent and tackle third-party violence and harassment related to work UPDATED. 2025.](#)

It should be noted that [framework agreements](#) negotiated by the European social partners are not legally binding, unlike European legislative acts such as directives or regulations. They commit the affiliated national organizations to implementing them in accordance with the procedures and practices specific to each Member State.

Some countries may choose to implement them through legislation, while others may opt for collective agreements or voluntary measures, such as guidelines or codes of good practice. Consequently, the outcome and effectiveness of their implementation vary significantly across Member States (see Chapter 3).

In 2020, a new [Framework Agreement on Digitalization](#)⁸⁹ was signed. Among its objectives are raising awareness and improving the understanding of employers, workers, and their representatives regarding the opportunities and challenges that digital transformation brings to the world of work, as well as supporting the development of a **human-centered approach** to the integration of digital technologies into the workplace.

Although this Framework Agreement does not explicitly focus on mental health at work, it acknowledges that, in the current professional context, it is increasingly important to **ensure disconnection from work** and to promote a workplace culture that fosters a **healthy work-life balance**. Several measures are mentioned to achieve these outcomes, such as training, awareness-raising activities, and appropriate compensation for any overtime worked... However, the text does not formally introduce a right to disconnect.

Consequently, new negotiations among European cross-industry social partners began in October 2022. The aim was to address in greater detail the right to disconnect and fair telework. Indeed, while the [Framework Agreement on Telework](#)⁹⁰ (2002) already exists, it addresses neither the right to disconnect nor other important aspects of telework, such as equal pay and the right to privacy and protection from invasive surveillance, particularly digital surveillance. The widespread use of telework during and after the COVID-19 pandemic highlighted the need for further regulation of this form of work organization.

At the start of the negotiations, [the social partners](#) had committed not only to updating the 20-year-old Framework Agreement but also to reaching a legally binding agreement to be implemented through a European directive⁹¹.

Differences of opinion among the social partners **prevented an agreement from being reached**, leading to the official end of negotiations in November 2023⁹². The matter has since been handed over to the European Commission, which has launched two rounds of consultation with the social partners in order to gather their views on the possible direction of EU action on the subject, including legislative action if considered necessary.

⁸⁹ [Framework Agreement on Digitalisation. 2020.](#)

⁹⁰ [Framework Agreement on Telework. 2002.](#)

⁹¹ In accordance with Article 155 of the [Treaty on the Functioning of the European Union \(TFEU\)](#).

⁹² [EUROGIP. Teleworking and the right to disconnect: European negotiations end without agreement. 29 November 2023.](#)

European Agency for Safety and Health at Work (EU-OSHA)

In terms of prevention tools, the European Agency for Safety and Health at Work (EU-OSHA) provides EU Member States with a wide range of information materials, guides, and resources, helping EU countries and all stakeholders (particularly employers) **comply with EU legislation** in this area.

Since its primary role is to develop skills and knowledge in occupational risk prevention and, more broadly, OSH (for example, by promoting awareness-raising activities and sharing best practices), **the Agency does not develop legally binding instruments but rather guidance and practical resources** for Member States and stakeholders.

Regarding PSRs, a dedicated webpage⁹³ provides a wide range of information materials, publications, and tools, including:

- **Studies and reports**⁹⁴ (often presenting comparative analyses across European countries) such as “Mental Health at Work After the COVID-19 Pandemic”⁹⁵, “Psychosocial Risks in the Health and Social Care Sector”⁹⁶, among others;
- **An electronic guide**⁹⁷ (“e-guide”) on the management of psychosocial risks, focusing primarily on **work-related stress**, with the aim of helping employers understand and recognize it and implement measures to address it;
- **Targeted communication campaigns**, including the 2014–2015 campaign⁹⁸ specifically dedicated to stress and psychosocial risks. It should be noted that, **in 2026, mental health at work and the prevention of PSRs are once again the focus of an EU-OSHA campaign**⁹⁹. These campaigns primarily aim to raise awareness among stakeholders, engage them in disseminating information, and promote the exchange of best practices.

⁹³ [EU-OSHA. Psychosocial risks and mental health at work.](#)

⁹⁴ EU-OSHA studies and reports on PSRs can be accessed via [this webpage](#).

⁹⁵ [EU-OSHA. Mental health at work after the COVID-19 pandemic – What European figures reveal. 2024.](#)

⁹⁶ [EU-OSHA. Psychosocial risks in the health and social care sector. 2023.](#)

⁹⁷ [EU-OSHA. Managing stress and psychosocial risks. E-guide.](#)

⁹⁸ [EU-OSHA. Healthy Workplaces Campaigns. 2014 - 2015: Healthy Workplaces Manage Stress.](#)

⁹⁹ For more information, see [this webpage](#).

European Projects, Initiatives, and Funding

Numerous **projects and tools funded by the European Union** focus on the prevention and management of PSRs:

PRIMA-EF (Research Project)

The **“PRIMA-EF” project** (*Psychosocial Risk Management Excellence Framework*), launched in 2007 and funded by European funds, brought together several national occupational safety and health research institutes.

These institutes developed a knowledge base on PSRs in the workplace, comprising a wide range of documents, information materials, and best practices available online¹⁰⁰, including a **guide**¹⁰¹ for employers and worker representatives. This guide **provides, among other things, practical instructions and advice** for both the risk **assessment phase** and the **implementation of preventive measures**.

Regarding the indicators to be analyzed for psychosocial risk management, the guide distinguishes between:

- **“Organizational factors”** such as **company policies and facilities** (facilities for optimizing work-life balance, occupational safety and health policies, business strategy, etc.), **organizational culture** (open/trust-based relationship between management and workers, feedback/information from management, communication, organizational justice), and **industrial relations** (existence of a works council/employee representatives, trade union membership, collective agreements, etc.).
- **“Work-related factors”** such as **employment conditions** (contract, pay, etc.), **organizational design** (job rotation, team work, multi-skilling), and **quality of work** (job demands, autonomy/decision latitude, social support, conflicts, violence, harassment, discrimination, working time, telework, etc.).

The Joint Action on Mental Health and Well-being (European initiative)

In 2013, a **Joint Action for Mental Health and Well-being**¹⁰² (JA MH-WB) was launched by the EU with the aim of **establishing a framework for action on mental health policy** at the European level.

Funded by the EU’s Consumers, Health, Agriculture and Food Executive Agency (CHAFEA), it involved more than 50 partners (including EUROGIP) representing Member States, with the goals of building a database cataloging good practices and useful resources, strengthening collaboration among countries, and developing recommendations for action at both the European and national levels.

The Joint Action addressed five key areas, including **the promotion of mental health in the workplace**. On this topic, **a framework for action was developed to help companies** adopt appropriate policies and practices.

¹⁰⁰ [Psychosocial Risk Management Excellence Framework. Welcome to PRIMA-EF.](#)

¹⁰¹ [Psychosocial Risk Management Excellence Framework. Guidance on the European Framework for Psychosocial Risk Management. A Resource for Employers and Worker Representatives. 2008.](#)

¹⁰² [JA MH-WB. The Joint Action. Why investing in Mental Health in Europe?](#)

In particular, a [report](#)¹⁰³ presents an analysis of mental health in the workplace across a number of European countries, the good practices and challenges identified in this area, as well as **a set of recommendations to prevent and better manage PSRs** in the workplace, addressed to various stakeholders: policymakers, social partners, companies, prevention professionals, among others.

A [final report](#) on the Joint Action (completed in 2016) covering all five thematic areas is also available¹⁰⁴.

EU-COMPASS for Action on Mental Health and Well-being (online platform)

From 2015 to 2018, the online platform called “**EU-Compass for Action on Mental Health and Well-being**” facilitated the collection, exchange, and analysis of information on the activities, policies, initiatives, and progress of stakeholders and Member States in the field of mental health, in light of the recommendations of the aforementioned Joint Action.

Seven priority areas were identified, one of which was **mental health at work**. Several publications, annual reports, and other resources and initiatives (including the regular organization of an EU Mental Health Compass Forum between 2015 and 2018) are available on the [EU Compass website](#)¹⁰⁵.

For example, a 2017 publication¹⁰⁶ lists **European good practices** (such as awareness-raising and communication campaigns, training initiatives, and digital tools) relating to mental health and the **prevention of depression and suicide, including at work**.

EU4Health (European funding) and EU Best Practice Portal (online portal)

The “**EU4Health**” [program](#) was adopted in response to the COVID-19 pandemic to better prepare the EU for future crises.

With a total budget of EUR 4.4 billion for the 2021–2027 period, approximately **EUR 46 million** was allocated between 2022 and 2024 to support **actions and projects promoting good mental health**.

In parallel, **examples of best practices** in the field of public health can also be shared online through the [EU Best Practice Portal on Public Health](#)¹⁰⁷.

This is an interactive website where any governmental or non-governmental organization (national, regional, or local) from an EU Member State eligible to participate in the EU4Health program can submit proposals for best practices¹⁰⁸.

In the field of mental health, the Commission launched a call in 2023 inviting Member States and stakeholders to **contribute to this portal** by submitting best practices on prevention, detection, and early intervention, including in **the workplace**.

H-WORK (research project)

Among the projects listed on the EU Best Practice Portal on Public Health is the “**H-WORK**” [project](#)¹⁰⁹, carried out by a *consortium* led by the University of Bologna, which focused on the **prevention and assessment of PSRs in the public sector and in small and medium-sized enterprises (SMEs)**. The project notably enabled the development of:

¹⁰³ [JA MH-WB. MENTAL HEALTH AT THE WORKPLACE - Situation analysis and recommendations for action.](#)

¹⁰⁴ [JA MH-WB. European Framework for Action on Mental Health and Wellbeing. Final Conference - Brussels, 21 - 22 January 2016.](#)

¹⁰⁵ [European Commission. EU-Compass for Action on Mental Health and Well-being.](#)

¹⁰⁶ [European Commission. Good practices in mental health and well-being. Mental Health at Work, in Schools, Prevention of depression and suicide.](#)

¹⁰⁷ [European Commission. EU Best Practice Portal on Public Health.](#)

¹⁰⁸ [European Commission. Best practices.](#)

¹⁰⁹ [H-WORK. The project.](#)

- A **protocol for assessing psychosocial risk factors at work** (“H-WORK Assessment Toolkit – HAT”), which includes a **semi-structured interview** protocol for needs analysis and a **digital questionnaire** for collecting subjective quantitative data on PSRs, mental health, and well-being of employees.
- A **protocol** (“H-WORK Evaluation Toolkit – HET”) **capable of monitoring and evaluating the effectiveness and cost-effectiveness of the measures** adopted.
- An **innovative platform** to promote mental health in the workplace, providing stakeholders (particularly employers) with numerous documents, guidance notes, roadmaps, and other resources.

Specific Guides on Psychosocial Risks

A European guide on PSRs for employers

In 2014, the European Commission published the document “**Promoting Mental Health in the Workplace – Guidance to Implementing a Comprehensive Approach**”¹¹⁰, intended primarily for **employers** (but also for all OSH prevention stakeholders, public authorities, and relevant institutional bodies), covering:

- **The need to prevent and manage** mental health in the workplace effectively;
- **The applicable European legislation** as well as relevant European initiatives and policies;
- **Risk assessment**, including how to assess PSRs and work-related stress, **recommended methodologies and existing tools** to assist employers and workers in this process (for example, the methodology developed by the aforementioned PRIMA-EF project);
- **Good practices on mental health at work in certain EU Member States**, ranging from specific national laws to softer measures such as awareness-raising campaigns and recommendations.

A European Guide on PSRs for National Labor Inspectors

At the European level, the Senior Labour Inspectors Committee (SLIC)¹¹¹, a network that has been active since 1982, is composed of **representatives of the labor inspection services** of the Member States.

Its main objectives include defining **common principles for labor inspection** in the field of occupational safety and health; promoting better **mutual knowledge and understanding** of the different national labor inspection systems; and facilitating and strengthening the **effective exchange of information** and cooperation among labor inspection services.

¹¹⁰ [European Commission. Promoting mental health in the workplace. Guidance to implementing a comprehensive approach. 2014.](#)

¹¹¹ [European Commission. Senior Labour Inspectors Committee.](#)

In 2018, SLIC published **a guide**¹¹² to help national labor inspectorates establish effective inspection procedures for PSRs. This document provides a wealth of information, including:

- **A summary of relevant European obligations**, particularly for employers, while noting that differences may exist at national level (see Chapter 3), with some EU countries having more developed legislative frameworks on PSRs than others;
- **Definitions**, based on the existing scientific literature, of PSRs, stress, violence, and harassment at work;
- **The consequences of PSRs in the workplace**, for companies and workers;
- **Instructions on how to carry out an appropriate assessment of PSRs** in the workplace;
- **An overview of the main methods for assessing PSRs** and other guidance materials on the subject (PRIMA-EF tools, the ILO's list of stress checkpoints, the EU-OSHA e-guide on stress, etc.);
- **Examples of appropriate preventive measures** that employers can implement to reduce and eliminate risks, depending on the risk factor involved (excessive workload and work pace, violence, harassment, etc.);
- **Finally, guidance on how to conduct effective labor inspections** in the area of PSR prevention, including an appendix containing a non-exhaustive **list of questions** that inspectors may ask during a labor inspection.

¹¹² [Senior Labour Inspectors Committee. Guide for assessing the quality of risk assessments and risk management measures with regard to prevention of psychosocial risks. 2018.](#)

National Legislation on Psychosocial Risks

This chapter examines national legislation on PSRs in seven European countries (**Belgium, Denmark, France, Germany, Italy, Spain, and Sweden**) and five non-European countries (**Australia, Canada, Japan, South Korea, and the United States**).

National Legislation and the Inclusion of PSRs in Risk Assessments



Key Points

With regard to the prevention of PSRs and, in particular, their inclusion in risk assessments, **a significant number of legislative and regulatory developments** have taken place over the past ten to fifteen years, **notably since the onset of the pandemic** (as in Denmark and Australia), which has further highlighted the importance of mental health.

This trend reflects **the legislators' intent** to foster greater awareness of and attention to mental health in the workplace among all stakeholders involved in prevention, starting with employers.

These national developments vary significantly from one country to another in terms of scope, stakeholders involved, and level of detail: ranging from a simple reference to the prevention or protection of “mental health” at work to highly detailed regulations setting out specific procedures and measures for assessing, preventing, and managing PSRs.

They introduce a range of elements (sometimes in combination), such as:

- **The explicit mention of the employer's responsibility** to protect not only workers' physical health but also their mental health (**Canada, France, Germany**);
- **The explicit obligation to include PSRs** (or their equivalents, depending on national terminology, see below) **in the risk assessment** (**Australia, Belgium, Denmark, Germany, Italy, Sweden**). It should be noted that **Australia, Belgium, Denmark, and Sweden** have introduced a detailed legal definition of “psychosocial risks” and/or the equivalent terms used;
- **The specific obligation to assess PSRs** in certain “high-stress” occupations (**South Korea**) or in remote work settings (**Spain**);
- **Provisions on how this PSR assessment must be carried out** (**Italy**), **or a detailed list of PSR factors to be analyzed** (**Australia, Belgium, Denmark, Sweden**);
- **Specific preventive measures** to be implemented (**Belgium, Denmark, Italy, Japan, South Korea, Sweden**). These generally include organizational, technical, communication, or training interventions. In most cases, they are not prescribed in detail but presented as “possible measures” to be selected according to the results of the risk assessment.

Sometimes, to determine the appropriate measures, **a list of matters to consider is specified** in the law, as in [Australia](#) (duration, frequency, and severity of exposure; interaction and combination of various PSR factors; workplace design, layout, and environmental conditions; interpersonal relationships at work, etc.).

The order of preventive measures may also be specified (as in [the Australian state of Victoria](#), where training and information initiatives cannot constitute the predominant form of PSR control measures). In other cases, the measures described are **differentiated by psychosocial risk factor** (this is particularly the case in [Sweden](#) and, to a lesser extent, in [Denmark](#));

- **The explicit obligation for the employer to train management** on PSRs ([Sweden](#)), highlighting the importance of the role played by this category of workers in ensuring a healthy psychosocial work environment;
- **A specific approach to assessing “psychological burden” at work**, as is the case in [Japan](#), which requires companies to have this assessment conducted not directly by the employer, but by a healthcare professional (such as an occupational physician). The assessment must be carried out individually for each employee. The physician in question will assist the employer in implementing workplace adjustments if high levels of stress are detected. However, each employee has the right to refuse this periodic assessment;
- **Procedures for intervention and support within the company to be followed in the event of a psychosocial issue affecting a worker**, as is the case in [Belgium](#) (“formal or informal request for psychosocial intervention”). **Mandatory actors in PSR prevention in the workplace** (including the “confidential counsellor” and the “prevention advisor for psychosocial aspects”) play a central role in addressing and resolving requests for psychosocial intervention submitted by employees.

[Spain](#) and the [United States](#) **do not officially include references to psychosocial risks** (particularly in the risk assessment phase) in their core OSH legislation.

In [Spain](#), a 2021 law on remote work requires the assessment of PSR factors for this category of workers. For other forms of work, this assessment is implicitly included in the general obligation to prevent *all* risks (note that consultations are underway to amend the legislation to better address the prevention of emerging risks, including PSRs).

Finally, very often, in the field of prevention, **legislative texts are supplemented by prevention measures detailed in various instruments such as codes of practice**. Although these are not binding, following them ensures compliance with employers' legal obligations. If the employer chooses to implement alternative measures, these must provide an equivalent level of protection; otherwise, the employer may be held liable in the event of a breach, negligence, or accident.

With regard to PSRs, this approach is particularly evident in [Australia](#) and [Denmark](#), where their codes of practice (developed respectively by Safe Work Australia and the Danish Working Environment Authority) provide numerous concrete examples of preventive measures and practical guidelines for workplaces, categorized by psychosocial risk factor (workload, working hours, high emotional demands, etc.).

Focus on the terminology used in legislation

It should be noted that the terminology used in national OSH legislation varies significantly from one country to another. This is also the case among EU countries, given the absence of a common legal definition of “psychosocial risks.”



“Mental health” appears in the French Labor Code, in the context of the employer’s obligation to protect workers’ physical and mental health.



The Canada Labor Code (applicable to federally regulated workplaces) refers to the concept of worker well-being, encompassing both physical and psychosocial aspects. The employer must “prevent accidents, occurrences of harassment and violence and **physical or psychological injuries and illnesses** arising out of, linked with or occurring in the course of employment.” The addition of the terms “harassment,” “violence,” and “physical and psychological” dates back to 2018. At the provincial level in Canada, other terms may be used, such as in Manitoba’s Workplace Safety and Health Act, which defines the “**psychologically safe workplace**” that must be guaranteed to employees.



The use of the terms “psychosocial risks” and/or “psychosocial hazards” appears systematically in Australian and Belgian legislation, accompanied by specific legal definitions. The Spanish law on remote work mentions “psychosocial factors.”



The term “stress” is sometimes used, as in Italy, where the key OSH law lists the risk “linked to work-related stress” among the risks that employers must identify and assess, explicitly citing the European Framework Agreement on Work-related Stress (see Chapter 2). **South Korea and Japan also refer to “stress” or “mental stress” related to work.**



“Psychological demands at work” appears in German legislation on occupational safety and health.



“Psychosocial working environment” is the term widely used in Denmark in an Executive Order of the same name that imposes specific obligations on workplaces regarding PSRs.



Finally, **“organizational and social work environment” has been the term used in Sweden since 2015**. By deliberate choice, Sweden makes no reference to the words “psychosocial risks” in its legislation, considering this expression too individualistic. By using the adjectives “organizational” and “social,” this country aims to adopt **a more collective approach to PSRs** and emphasize that it is precisely the work organization and interpersonal relationships at work that exert a significant psychosocial influence on workers.

In European Union Countries

It should be recalled that Member States may go beyond the provisions contained in EU legislation and establish additional OSH requirements, including regarding PSRs and mental health at work. Based on the principle that PSRs are among the occupational risks to be assessed in accordance with the OSH Framework Directive, some European countries have introduced more specific provisions in this area.

Among the countries studied, **only Spain, to date, does not explicitly mention mental health in its OSH legislation.** Article 15 of [Law 31/1995 on Occupational Risk Prevention](#)¹¹³ incorporates Article 6 of the OSH Framework Directive, which states that when planning prevention measures, consideration must be given, among other things, to the organization and conditions of work, social relationships, and the influence of factors related to the working environment.

The fact that there is no explicit reference to PSRs in OSH legislation does not mean that the employer is not obligated to assess them, but rather that this obligation is included in the employer's general duty to assess all occupational risks¹¹⁴.

However, there is an explicit reference to PSRs in [a 2021 law on remote work](#)¹¹⁵, which states more explicitly that employers must take **psychosocial factors** into account when assessing risks for remote workers.

Furthermore, [a 2022 law](#)¹¹⁶ introduced the obligation for employers to include “sexual violence” among the occupational risks to be assessed in relation to the various job positions held by female workers.

However, this legal framework may soon change. In February 2024¹¹⁷, the Spanish government launched [a roundtable with social partners](#) to discuss possible amendments to Law 31/1995 on occupational risks.

The aim would be to adapt the legislation to the challenges of today's world of work (e.g., the use of new technologies, climate change...), but also to **fill the legal gap regarding PSRs** by providing employers with more guidance on how to better prevent and manage them. There are also **plans to incorporate a gender perspective into occupational risk prevention**. Subsequently, in January 2026, the Ministry of Labor launched a [public consultation](#)¹¹⁸ to modernize the national OSH legislation.



As for other European countries, some require employers to assess PSRs without, however, specifying in law the procedures or content of such an assessment, as is the case in **France** and **Germany**.

¹¹³ [Ley 31/1995, de 8 de noviembre, de Prevención de Riesgos Laborales](#).

¹¹⁴ As specified by the INSST (*Instituto Nacional de Seguridad y Salud en el Trabajo*), the National Institute for Safety and Health at Work, the obligations set out in Chapter III of Law 31/1995 on occupational risks are “directly applicable to psychosocial risks.” ([source](#))

¹¹⁵ [Ley 10/2021, de 9 de julio, de trabajo a distancia](#).

¹¹⁶ [Ley Orgánica 10/2022, de 6 de septiembre, de garantía integral de la libertad sexual](#).

¹¹⁷ [Nota de prensa - Ministerio de Trabajo y Economía Social. Trabajo aborda con los agentes sociales la actualización de la Ley de prevención de riesgos laborales](#). 12 February 2024.

¹¹⁸ [Ministerio de Trabajo y Economía Social. Consulta pública previa a la elaboración de un anteproyecto de ley de modificación de la ley 31/1995, de 8 de noviembre, de prevención de riesgos laborales y del reglamento de los servicios de prevención, aprobado por el real decreto 39/1997, de 17 de enero](#). January 2026.

France has included a **reference to mental health in its labor law** since 2002. Today, Article L4121-1 of the Labor Code¹¹⁹ provides that “the employer shall take the necessary measures to ensure the safety and protect the physical **and mental** health of workers.” As with any occupational risk, the employer must therefore conduct an adequate PSR assessment, implement preventive measures, provide information and training, and ensure “appropriate organization and resources.” Regarding the assessment of occupational risks, Article L4121-3 specifies that this assessment covers, in particular, risks arising from:

- *the selection* of manufacturing processes, work equipment, chemical substances or preparations,
- *the design or redesign* of workplaces or facilities,
- *the job design*,
- and, since 2021¹²⁰, “**the organization of work**,” in order to better capture psychosocial risks as well as the recent rise in remote work following the onset of the pandemic.

The assessment must also take into account “the gender-specific impact of exposure to risk.”

The factors that can help identify workplace stress, as well as the corrective measures that can be implemented, are detailed in the **National Interprofessional Agreement (*accord national interprofessionnel, ANI*) of 2 July 2008, on work-related stress**¹²¹. Based on the 2004 European Framework Agreement (see Chapter 2), this ANI was **made mandatory in 2009**¹²² **for all companies and workers in the private sector**. France thus stands out from other European countries, which have not extended this Framework Agreement to the entire private sector (see below under “Focus on the Implementation of the European Framework Agreement on Work-related Stress”).

Regarding “**prevention planning**,” Article L4121-2 of the Labor Code adds to the provisions of the European Framework Directive on OSH an explicit reference to harassment. The employer must “plan prevention by integrating, into a coherent whole, technology, organization of work, working conditions, social relationships, and the influence of factors related to the working environment, including in particular risks related to “**moral harassment**” [psychological harassment] and **sexual harassment**, [...], as well as those related to **sexist behavior**.”

Additional obligations apply to companies regarding **social dialogue** on **issues related to PSRs** and/or mental health at work. According to Article L2242-1 of the Labor Code, **companies where one or more trade union sections** of representative organizations have been established are **required to engage in negotiations** (at least once every four years) on various aspects, including:

- Negotiations on “remuneration, including actual wages, **working time**, and the sharing of added value within the company.”
- Negotiations “on **professional equality** between women and men, focusing in particular on measures aimed at eliminating pay gaps, as well as on **quality of life at work and working conditions**” (QVCT, from the French *qualité de vie et des conditions de travail*).

¹¹⁹ [Code du travail](#).

¹²⁰ [Loi n° 2021-1018 du 2 août 2021 pour renforcer la prévention en santé au travail](#).

¹²¹ [Accord national interprofessionnel du 2 juillet 2008 relatif au stress au travail](#).

¹²² [Arrêté du 23 avril 2009 portant extension d'un accord national interprofessionnel sur le stress au travail](#).

The concept of quality of life at work (QVT, *qualité de vie au travail*), renamed QVCT in 2022, is described in the National Interprofessional Agreement of 19 June 2013¹²³ as “a sense of well-being at work perceived both collectively and individually, encompassing the working atmosphere, the company culture, the interest in the work itself, the working conditions, a sense of involvement, the degree of autonomy and empowerment, equality, the right to make mistakes, and the recognition and appreciation of the work performed.” The **name change** in 2022 reflects the aim of focusing company negotiations on improving the work itself and the **conditions** under which it is performed¹²⁴.

Article L2242-17 of the Labor Code defines the minimum content of QVCT negotiations: they must cover, among other things, the balance between personal and professional life as well as the terms and conditions enabling employees to fully exercise their right to disconnect (see below under “National Legislation on the Right to Disconnect”).

To support these negotiations, the National Agency for the Improvement of Working Conditions (*Agence nationale pour l'amélioration des conditions de travail*, Anact) has developed a range of tools and identified **six key areas of QVCT**¹²⁵: i) organization, content and execution of work, ii) company strategy and management, iii) equality at work, iv) social dialogue, v) skills and career paths, vi) occupational health and prevention.

Although distinct from the specific prevention of psychosocial risks, **QVCT negotiations** complement it by addressing factors such as work organization, working conditions, and career development. This collective approach aims to improve the overall work environment and can indirectly reduce exposure to certain PSR factors, such as work-life imbalance.

While **QVCT and PSR prevention remain distinct mechanisms, they can be considered complementary** in a comprehensive effort to prevent risks and promote well-being at work.



In **Germany**, the **Occupational Safety and Health Act (ArbSchG)**¹²⁶ was amended in 2013 to better incorporate mental health aspects:

- Article 4 states that “work must be organized in such a way as to avoid, as far as possible, any risk to life and to physical and **mental health**.”
- Article 5, concerning occupational risks, states that “**psychological demands at work**” (*Psychische Belastungen*) must also be analyzed and taken into account in risk assessments.

In addition, the **Workplace Ordinance (ArbStättV)**¹²⁷ is a binding regulation designed to ensure the safety and health of workers **in relation to the design, layout and operation of workplaces**. This Ordinance specifies that the employer, as part of the comprehensive risk assessment required by the ArbSchG, must determine whether employees are exposed to hazards in relation to these areas, taking into account “physical and psychological demands” as well.

¹²³ [Accord national interprofessionnel du 19 juin 2013 relatif à une politique d'amélioration de la qualité de vie au travail et de l'égalité professionnelle.](#)

¹²⁴ [More information on the name change.](#)

¹²⁵ [Anact. Qualité de vie et des conditions de travail \(QVCT\).](#)

¹²⁶ [Gesetz über die Durchführung von Maßnahmen des Arbeitsschutzes zur Verbesserung der Sicherheit und des Gesundheitsschutzes der Beschäftigten bei der Arbeit.](#)

¹²⁷ [Verordnung über Arbeitsstätten.](#)

ASR V3 Technical Rules¹²⁸ (*Technische Regeln für Arbeitsstätten*) specify the requirements of this Ordinance. Although these Rules are not legally binding, compliance with them gives rise to a “presumption of conformity.” If the employer opts for alternative solutions, they must ensure an equivalent level of safety.

ASR V3 defines the “psychological hazards arising from workplace design” as: noise, unsuitable climatic conditions (drafts, frequent temperature fluctuations...), vibrations, poor visibility, insufficient lighting, certain workplace layouts (open-plan offices, call centers, etc.), work organization and design, non-ergonomic software, and the use of premises unsuitable for work processes.

This text primarily covers risks related to unsuitable work environment, processes, or equipment, without encompassing all psychosocial risk factors.

Beyond these general provisions, German law does not specify in detail how to conduct the assessment of psychological demands at work¹²⁹.



Italy, Belgium, Sweden and Denmark, for their part, have a **more specific legislative framework** regarding **how to conduct the assessment** of PSRs and/or the **elements to be analyzed**.

In **Italy**, since 2010, **Article 28 of Legislative Decree no. 81/2008**¹³⁰ (Italy’s principal piece of OSH legislation) explicitly mandates the inclusion of risks linked to work-related stress (*stress lavoro-correlato*) in occupational risk assessments, with reference to the 2004 European Framework Agreement (see Chapter 2).

In this country, the **assessment of work-related stress must necessarily be carried out in accordance with the instructions developed by the “Permanent Advisory Committee for Health and Safety at Work”** (as set out in Article 28 of Legislative Decree no. 81/2008). This Committee (*Commissione consultiva permanente per la salute e sicurezza sul lavoro*) is a body established within the Ministry of Labor and Social Policies. In 2010, it published **a document**¹³¹ **clarifying the rules for the assessment**:

- The obligation to assess work-related stress applies to all employers in both the public and private sectors;
- This assessment must form an integral part of the overall occupational risk assessment;
- A methodological framework is provided, divided into a preliminary (mandatory) phase and an in-depth (optional) phase. Homogeneous groups of workers must be identified in order to determine each group’s exposure to risk;
- In the **preliminary and mandatory phase**, the employer must consider at least three categories of factors:

¹²⁸ [ASR V3 Gefährdungsbeurteilung. Technische Regel für Arbeitsstätten.](#)

¹²⁹ [Schuller, K., Schulz-Dadaczynski, A., Beck, D. „Methodische Vorgehensweisen bei der Ermittlung und Beurteilung psychischer Belastung in der betrieblichen Praxis“. Zeitschrift für Arbeits- und Organisationspsychologie A&O. Volume 62, Nr. 3. 2018.](#)

¹³⁰ [DECRETO LEGISLATIVO 9 aprile 2008, n. 81. Attuazione dell'articolo 1 della legge 3 agosto 2007, n. 123, in materia di tutela della salute e della sicurezza nei luoghi di lavoro.](#)

¹³¹ [Indicazioni della Commissione consultiva per la valutazione dello stress lavoro-correlato \(articoli 6, comma 8, lettera m-quater, e 28, comma 1-bis, d.lgs. n.81/2008 e successive modificazioni\).](#)

1. **Sentinel events**, such as accident rates, absenteeism, staff turnover, resignations, the number of reports or complaints filed by workers (episodes of stress, harassment ...), etc.;
 2. **Factors related to the content of work**, such as the work environment, equipment, workloads and work pace, working time, and the alignment between workers' skills and job requirements;
 3. **Factors related to context of work**, such as the worker's role within the organization, decision-making autonomy and job control, the existence of interpersonal conflicts at work, career progression and development, and potential communication issues (regarding performance expectations, etc.).
- For factors related to the content and context of work, it is necessary to **consult the workers themselves and/or the workers' safety representative**¹³². Large companies may consult only a sample of workers. For this initial assessment phase, it is possible to use "**checklists**" that cover the three categories of elements to be assessed;
 - If the initial assessment identifies a risk of work-related stress, the employer must implement **corrective actions** (such as organizational, technical, procedural, communication or training interventions, etc.);
 - If these interventions are insufficient to resolve the identified issues, it will be necessary to move to a phase of **in-depth assessment**. This involves evaluating workers' subjective perceptions through various tools such as questionnaires, focus groups, and semi-structured interviews, covering factors related to the content and context of work.

Although these texts focus on the issue of "stress," their application requires the assessment in Italy of **a wide range of psychosocial risk factors** commonly identified in the scientific literature, such as the 10 main PSR factors listed by EU-OSHA and presented in the introduction (see Chapter 1).



In **Belgium**, the first legislative actions on PSRs date back to 2002, followed by two reforms in 2007 and 2014. A new Chapter (V bis) was introduced into the **Act of 4 August 1996 on well-being of workers in the performance of their work**¹³³, adding specific provisions on the prevention of psychosocial risks at work, including "**stress, violence, and psychological or sexual harassment at work.**" In particular, this Chapter:

- **Establishes the applicable definitions**, notably those of "violence at work," "moral harassment at work" (psychological harassment), "sexual harassment at work," and, more broadly, "**psychosocial risks.**" The latter are defined (Article 32/1) as "the probability that one or more workers will experience psychological harm, which may be accompanied by physical harm, as a result of **exposure to elements** of the work organization, work content, working conditions, living conditions at work, and interpersonal relationships at work, **on which the employer has an impact** and which **objectively pose a danger.**"

¹³² The *rappresentante dei lavoratori per la sicurezza* (RLS) is a person elected by the workers within a company to represent their interests in matters relating to OSH and to monitor and encourage the employer's compliance with the applicable OSH requirements.

¹³³ [*Loi du 4 août 1996 relative au bien-être des travailleurs lors de l'exécution de leur travail.*](#)

- **Specifies the obligation to assess PSRs**, to be included in the overall occupational risk assessment. In accordance with the legal definition of PSRs, the assessment must cover five specific factors: work organization, work content, working conditions, “living conditions at work” (i.e. environmental factors such as noise, physical demands, etc.) and interpersonal relationships at work.
- **Specifies the minimum preventive measures** to be implemented (Article 32/2 and Article 32quater). These include material, organizational, protective, training, and information measures, as well as procedures for rapid intervention when incidents are reported.
- **Clarifies the hierarchy, main responsibilities, and roles** of the actors involved in the prevention and management of PSRs at company/organization level. In particular, the following roles have been more clearly defined:
 - **The prevention advisor for psychosocial aspects (*conseiller en prévention aspects psychosociaux*, CPAP)**¹³⁴, who assists the employer in managing PSRs, particularly during the PSR assessment phase and the implementation of preventive measures, is now **mandatory** for all companies and organizations. This advisor may be part of either the internal service or the external service for prevention and protection at work (*service interne ou externe de prévention et de protection au travail* [SIPP/SEPP](#)) to which the employer is affiliated. However, for organizations with fewer than 50 employees, the advisor must come from an external service (SEPP), as it is considered difficult for them to have sufficient in-house expertise on PSRs.
 - **The confidential counsellor (*personne de confiance*)**¹³⁵, whose role is to assist the employer in fulfilling their duties regarding PSRs in cooperation with the CPAP and to advise workers on finding solutions to the difficulties they encounter, particularly in the context of a request for intervention (see below). Introduced in 2014, this role became **mandatory** for organizations with 50 or more employees following a law adopted in November 2023¹³⁶, which clarified the rules governing its appointment, duties, and training requirements. For organizations with fewer than 50 employees, the appointment of a confidential counsellor remains optional. Furthermore, in organizations with 50 or more employees, at least one of the designated confidential counsellors must be a member of the organization’s workforce.
 - **The Committee for Prevention and Protection at Work (*Comité pour la prévention et la protection au travail*, CPPT)**, a joint consultative body established within private-sector companies with at least 50 employees¹³⁷. An equivalent structure also exists in the public sector. Since 2014, the CPPT has taken on a more active role regarding PSRs by participating in their assessment. It must also be consulted: 1) on the implementation of preventive measures resulting from risk assessment, including PSRs; 2) on the designation of the CPAP and the confidential counsellor(s); 3) on the development of internal procedures allowing workers to request a formal or informal psychosocial intervention (see below).

¹³⁴ [More information on the CPAP.](#)

¹³⁵ [More information on the confidential counsellor.](#)

¹³⁶ [SPF Emploi Travail et Concertation Sociale. Désignation obligatoire d'une personne de confiance interne dans les entreprises de 50 travailleurs ou plus.](#)

¹³⁷ In addition, the mission of the CPPT is “to examine and propose all appropriate measures, as well as to actively contribute to all initiatives undertaken to promote workers’ well-being in the performance of their work,” by issuing opinions and making proposals relating to the policy concerning workers’ well-being. ([source](#))

- **Specifies the internal procedures** for workers who have suffered harm to their mental health at work. Such workers may now make “a formal or informal request for psychosocial intervention”¹³⁸.
- **In the case of informal intervention** (for example, in the event of conflicts between colleagues, excessive workloads assigned to the employee by a manager, etc.), the request is submitted by the employee to the **confidential counsellor or the CPAP**. It aims to seek a solution informally through **discussions, interventions** with another person in the company, or attempts at **reconciliation**. The employer will be informed of the issue only if the employee expressly requests it or if the employer's intervention is necessary to identify and implement solutions. Generally, at this stage, mediation may take place without the employer's knowledge.
- **In the case of formal intervention**, the request is submitted exclusively to the **CPAP** and involves directly asking the employer to take **collective or individual corrective measures** to address the psychosocial issue encountered. It may be made following the ineffectiveness of an informal intervention, or if the severity of the situation requires it, such as in cases of violence, psychological harassment, or sexual harassment at work.

With regard to risk assessment, the **Code on Well-being at Work** (which includes the implementing decrees of the Act of 4 August 1996) states¹³⁹ that it must take into account situations that “may lead to **stress or burnout** caused by work, or to harm to health resulting from work-related conflicts or from **violence or psychological or sexual harassment** at work” (Art. I.3-1). Furthermore, the employer has an **obligation** to take into account “the hazards associated with the components of work organization, work content, working conditions, living conditions at work, and interpersonal relationships at work” (commonly referred to in Belgium as the “**5T**”).

Finally, regarding the existing legislative framework, in 2023 the Federal Public Service “Employment, Labor, and Social Dialogue” (FPS Employment) launched a **research project**¹⁴⁰ to **evaluate the national legislation on the prevention of PSRs**, in consultation with social partners and prevention experts. To this end, the government launched a survey¹⁴¹ among various workplace stakeholders in the field (CPAPs, employers, confidential counsellors, trade union representatives, etc.).

Published in December 2024, **the final report**¹⁴² acknowledges that the **Belgian legislative framework on PSRs is one of the most advanced in Europe**, but suggests that further efforts be made to ensure its better implementation across the country. Indeed, despite an increase in PSR assessments in organizations, such assessments remain insufficient in SMEs. The report contains a series of recommendations for improvement (particularly with regard to awareness-raising and implementation within organizations) as well as support and administrative simplification (especially for SMEs).



¹³⁸ [More information on these internal procedures.](#)

¹³⁹ Notably in *Titre 3 « Prévention des risques psychosociaux » du Livre 1^{er} du Code du bien-être au travail*.

¹⁴⁰ [SPF Emploi Travail et Concertation Sociale. 2023 - Projet de recherche ayant pour objet l'évaluation de la législation relative à la prévention des risques psychosociaux au travail.](#)

¹⁴¹ [SPF Emploi Travail et Concertation Sociale. Evaluation de la législation sur les risques psychosociaux au travail : participez à l'enquête !](#)

¹⁴² [SPF Emploi Travail et Concertation Sociale. Evaluation de la dimension collective de la législation relative aux risques psychosociaux liés au travail. Résumé du rapport. December 2024.](#)

With regard to PSRs, **Sweden** has the oldest legislative framework among the countries covered. As early as 1977, the **Work Environment Act (AMR)**¹⁴³ and its subsequent amendments established the following principles:

- The work environment “must be **satisfactory** in light of the nature of the work and the social and technical developments in society.”
- Working conditions “must be adapted to the varying physical and **psychological** capacities of individuals.”
- Technology, work organization, and work content “must be designed so that workers are not exposed to **physical or mental strain** likely to cause health problems or accidents.”

In 2015, a new “**Regulation on the Organizational and Social Work Environment**” (AFS 2015:4)¹⁴⁴, binding on all employers, introduced further obligations regarding the prevention and management of PSRs, while marking a shift from an individual-based approach to a more collective approach to prevention in this area.

This text deliberately avoids using the term “psychosocial risks.” **The concept of PSRs, perceived as too individualized, was abandoned**¹⁴⁵. Instead, the Regulation addresses the “organizational and social work environment,” where:

- **The organizational environment** refers to how work is organized, controlled, communicated, and how decisions are made.
- **The social work environment** refers to how workers and managers interact with one another, and how workers are influenced by those around them, particularly the employer and/or members of the hierarchy.

The Regulation then describes the obligations and measures that the employer must take, including:

- i. **Ensuring that managers and supervisors have adequate knowledge** of the organizational and social work environment (particularly to prevent excessive workload and working hours and “offensive conduct”¹⁴⁶), for example by organizing training for such staff.
- ii. **Setting goals within the company/organization** to achieve a satisfactory organizational and social work environment, notably by having “a clear strategy” and ensuring worker participation. These goals may aim to strengthen and improve communication, learning, leadership, cooperation, influence, participation, etc.
- iii. **Preventing and taking action against:**
 - Excessive workload;
 - Excessive working hours;
 - Any offensive or humiliating behavior at work.

¹⁴³ [Arbetsmiljölagen \(1977:1160\)](#).

¹⁴⁴ [Organisatorisk och social arbetsmiljö \(AFS 2015:4\)](#).

¹⁴⁵ As explained in this document: [European Commission. Peer Review on “Legislation and practical management of psychosocial risks at work”. Host Country Discussion Paper – Sweden. How new legislation can change the approach to psychosocial risks at work. Stockholm \(Sweden\). 3-4 October 2019. 2019.](#)

¹⁴⁶ In the Regulation AFS 2015:4, offensive conduct (*Kränkande särbehandling*) is described as “abusive and humiliating behaviors directed at one or more employees, which may lead to ill health or to their exclusion from the workplace community.”

In 2023, following a reorganization¹⁴⁷ of the 67 OSH Regulations AFS¹⁴⁸, the provisions of AFS 2015:4 were incorporated into a **new Regulation AFS 2023:2**. As in the previous version, the new Regulation AFS 2023:2 systematically combines two elements: a binding section (mandatory rules that the employer must comply with) and general guidance in the form of practical recommendations to help the employer apply these rules.

Among the key provisions and practical recommendations of the **Regulation AFS 2023:2**¹⁴⁹, the following deserve particular mention:

- **Excessive workload:**

- (Chapter 2 - Art. 6): “The employer must ensure that the tasks and responsibilities assigned to employees **do not lead to excessive workloads**. This means that resources must be adapted to the demands of the work.” To achieve this, it is recommended to reduce the workload, review priorities, vary tasks, adopt different working methods, hire additional staff, or provide further training. Regular dialogue is crucial for identifying signs of exhaustion.

- (Chapter 2 - Art. 8): “The employer must take the necessary measures to ensure that tasks and work situations that are highly psychologically stressful **do not lead to ill health** among workers.”

This provision is particularly relevant to occupations involving contact with the public or those involving ethical dilemmas and conflict resolution. Among the recommended measures, the employer may provide support (through a supervisor or colleagues), access to an expert in the employees’ field of activity, training, and clear procedures for managing and dealing with difficult situations.

- **Working hours** (Chapter 2 - Art. 9): “The employer must take the necessary measures to ensure that the organization of working hours **does not lead to ill health** among workers.”

Therefore, from the planning stage onward, the employer should take into account the impact of working time arrangements on employees’ health and the risk of accidents. This is particularly true for shift work, night work, split shifts, frequent use of overtime... The employer should therefore provide these employees with sufficient recovery time (breaks, rest periods, etc.).

- **Offensive conduct** (Chapter 2 - Art. 10): “The employer must make it clear that offensive conduct **is not tolerated** within the organization. The employer must take measures to prevent conditions in the work environment that may give rise to such conduct.” It is advisable to adopt a written policy and to exercise increased vigilance regarding workplace conflicts as well as organizational changes that may create tensions (new task allocations and priorities, formation of new teams, changes in the ways workers cooperate with one another...);

- **Procedures in the event of offensive conduct** (Chapter 2 - Art. 11): “The employer must ensure that procedures are in place for **handling cases of offensive conduct**.” These procedures must specify whom workers should contact in the event of offensive conduct, what that person must do with this information and how it will be handled, and, finally, how and where victims can obtain assistance. The employer must make these procedures accessible to all employees.

¹⁴⁷ [Arbetsmiljöverket. Se var nuvarande 67 föreskriftshäften finns i den nya strukturen.](#)

¹⁴⁸ The Regulations AFS (*Arbetsmiljöföreskrifter*) are rules issued by the Swedish Work Environment Authority (*Arbetsmiljöverket*) that govern OSH. These regulations are binding and apply to both the public and private sectors.

¹⁴⁹ [Arbetsmiljöverkets föreskrifter och allmänna råd \(AFS 2023:2\) om planering och organisering av arbetsmiljöarbete.](#)

It is recommended that the employer intervene promptly to prevent the situation from escalating and to ensure that victims receive the necessary assistance, which may be provided by the occupational health service or another expert.



Finally, in **Denmark**, legislative action on PSRs was initiated in 2013¹⁵⁰, but has been significantly expanded recently. While the **Working Environment Act**¹⁵¹, which sets out general OSH obligations, explicitly requires the creation of **“a safe and healthy physical and psychosocial working environment** which is at all times in accordance with the technical and social development of society,” it was not until 2020 that more specific obligations regarding PSRs were introduced.

In the context of the COVID-19 pandemic, which had a profound impact on the psychological well-being of citizens, particularly workers, an **“Executive Order on Psychosocial Working Environment”** was published in September 2020¹⁵².

This binding text¹⁵³ clarifies the obligations of employers, managers, and workers to reduce, and if possible, eliminate, PSRs by addressing numerous aspects related to the **organization**, the **conditions**, and the **social environment** of work. The text is essentially divided into two parts:

1. The **“general provisions”** (Articles 5 to 12) concerning PSRs, providing that “at all stages, the work must be planned, organized and carried out in a responsible way to ensure that its impact on the **psychosocial working environment is safe and healthy, individually and collectively**, in both the short and long term.”

This section also includes **a definition of disturbances to the “psychosocial working environment,”** namely the “psychosocial effects” arising in connection with: 1) the way work is planned and organized; 2) the organizational conditions of importance to the work carried out by the employees; 3) the content of the work, including the requirements of the work; 4) the way the work is performed; 5) the social relations in the workplace.”

Furthermore, it is stated that the employer must provide all workers with adequate training so that they can perform their work with due regard to health and safety, particularly in relation to a number of specified situations (such as changes in work tasks, the introduction or modification of work equipment, etc.). **Training must be adapted to developments at work “including the emergence of new risks in terms of the psychosocial health and safety of workers.”**

Finally, it is specified that if the employer does not have the necessary expertise, they must seek **assistance from external experts** to ensure that the employees’ psychosocial working environment is safe and healthy.

¹⁵⁰ [LOV nr 356 af 09/04/2013](#).

¹⁵¹ [Arbejdsmiljøloven](#). English version: [Working Environment Act](#).

¹⁵² [Bekendtgørelse om psykisk arbejdsmiljø](#). English version: [Executive order on psychosocial working environment](#).

2026 Update: the 2020 Executive Order was repealed and replaced, with effect from 1 July 2026, by a new Executive Order under the same title ([Bekendtgørelse om psykisk arbejdsmiljø](#), [BEK nr 605 af 29/06/2026](#)), which largely retains the substantive requirements and key provisions of the previous text. The Danish requirements and preventive measures described in this chapter therefore remain unchanged.

¹⁵³ [Arbejdstilsynet. Working environment regulations](#).

2. The “special provisions concerning individual effects on the psychosocial working environment,” listing the rules and measures to be taken in the following five types of high-risk situations:

- **Heavy workload and time pressure** (Articles 13-15).
- **Unclear and conflicting demands at work** (Articles 16-18).
- **High emotional demands when working with people** (Articles 19-21).
- **Offensive behavior, including bullying and sexual harassment** (Articles 22-24).
- **Work-related violence** (Article 25), **during work** (Articles 26-30) **and outside working hours** (Articles 31-34).

For each of the factors listed above, the Executive Order provides **the applicable definitions** and requires the employer to take them into account in their risk assessment, detailing what must be analyzed specifically (notably the relationship between the extent, duration, and nature of each of these factors). The employer is responsible for ensuring that work is planned, organized and carried out responsibly at all stages, “with due regard to health and safety in both the short and long term,” in relation to each of these risk factors.

Preventive measures must be implemented where necessary. In this regard, the Executive Order is accompanied by **an annex¹⁵⁴ that lists examples of preventive measures** that can help ensure that the impact on workers’ psychosocial environment is fully managed with due regard for health and safety. These measures include, among others, effective supervision during work, responsible design and organization of work, and adequate and appropriate training and instruction.

Finally, mention should be made of the “**Guidelines**” (*At-vejledninger*) issued by the Danish Working Environment Authority.

Although not legally binding, **these documents clarify the official interpretation** of working environment regulations. In terms of legal certainty, employers who follow these recommendations are **presumed to be in compliance with their legal obligations**. They remain free to opt for alternative methods, provided that the Authority considers them to be equally satisfactory and compliant with the applicable regulations¹⁵⁵.

Regarding PSR factors, the Danish Authority has published **five Guidelines**, which supplement the aforementioned Executive Order on Psychosocial Working Environment:

- Guideline AT 4.1.1-2 on **heavy workload and time pressure**.
- Guideline AT 4.11.1 on **unclear and conflicting demands** at work.
- Guideline AT 4.2.1 on **high emotional demands** when working with people.
- AT Guidelines 4.3.1-1 on **offensive behavior**, including bullying and sexual harassment.
- AT Guidelines D.4.3-5 on work-related **violence**.

¹⁵⁴ [Bilag 1 til Arbejdstilsynets bekendtgørelse nr. 1406 af 26. september 2020 om psykisk arbejdsmiljø med senere ændringer](#). English version: [Preventive measures and general prevention principles. Annex 1 to The Danish Working Environment Authority's Executive Order no. 1406 of 26 September 2020 on psychosocial working environment](#). Following the adoption of the new Executive Order under the same title in 2026 (see footnote 152), its Annex can be consulted here: [BEK nr 605 af 29/06/2026](#).

¹⁵⁵ [Arbejdstilsynet. Working environment regulations](#).

These documents help employers gain a thorough understanding of each risk factor, assess them, and implement effective preventive measures. Originally published as separate documents, their content has been consolidated into **a single reference text**¹⁵⁶ since the end of 2025.

¹⁵⁶ [VEJ nr 10217 af 09/12/2025. AT-vejledning om psykisk arbejdsmiljø.](#)

Focus on the Implementation of the European Framework Agreement on Work-related Stress (2004)

The Framework Agreement on Work-related Stress was signed by the European cross-industry social partners in 2004. This document defines stress as “a state, which is accompanied by physical, psychological or social complaints or dysfunctions and which results from individuals feeling unable to bridge a gap with the requirements or expectations placed on them.”

It addresses the implications of stress for workers and the work environment and sets **the objective of increasing awareness and understanding of work-related stress among employers, workers, and their representatives, as well as drawing their attention to the signs and symptoms of work-related stress**. This document does not explicitly mention “psychosocial risks,” focusing strictly on stress.

Following an introductory section, the text addresses three main points:

1. **The identification of work-related stress problems, by providing a non-exhaustive list of potential indicators** (high rates of absenteeism or staff turnover, frequent interpersonal conflicts or complaints by workers...) as well as a **list of factors that can be analyzed to detect these issues**: work organization and processes (working time arrangements, autonomy, workload...), working conditions and environment (exposure to abusive behavior, noise, heat, dangerous substances...), communication (uncertainty regarding work expectations, career prospects, upcoming changes...), and subjective factors (emotional and social pressures, feeling unable to cope, lack of support...).
2. **The responsibilities of employers and workers**: for employers, it is reiterated that the general legal obligation to protect workers' health and safety, stemming from the 1989 European Framework Directive on OSH, also covers “problems of work-related stress in so far as they entail a risk to health and safety.” As for workers, it is their responsibility to comply with the protective measures determined by the employer.

Without requiring a specific stress risk assessment, the Framework Agreement specifies that work-related stress may be addressed “**within an overall process of risk assessment, through a separate stress policy and/or by specific measures** targeted at identified stress factors.” However, when a work-related stress issue is identified, the employer must take action to prevent, eliminate, or reduce it.

3. **The prevention, elimination and reduction of work-related stress problems**, in particular through collective and/or individual measures addressing various aspects of work, such as management, communication, training of managers and workers, and information and consultation with workers and/or their representatives.

Although this Framework Agreement is not legally binding, it commits the national organizations affiliated with the signatory European social partners to implement it in accordance with the procedures and practices specific to each Member State (through a range of legal and non-legal instruments). In 2011, the **European Commission published a report** (*Report on the implementation of the European social partners' Framework Agreement on Work-related Stress*. SEC (2011) 241 final. February 2011) detailing the implementation of this Agreement across EU countries:

 In France, a **National Interprofessional Agreement (accord national interprofessionnel, ANI) on work-related stress** was signed in 2008 by the social partners, incorporating (and supplementing) the 2004 European Framework Agreement. The 2008 ANI was subsequently extended by **ministerial decree of 23 April 2009**, making it binding on all employers and employees in the private sector, regardless of the company's size or industry.

The ANI expands the list of stress factors to be monitored by including numerous elements not mentioned in the Framework Agreement, such as systematic overtime, constant pressure, and difficulties in balancing work and personal life. Finally, the ANI reaffirms the “pivotal” role of the occupational physician, who, bound by medical confidentiality, contributes to addressing work-related stress situations within a multidisciplinary setting.

 In Italy, **an inter-confederal agreement dated 9 June 2008** for the implementation of the Framework Agreement was signed by the national social partners in the private sector. Subsequently, in 2010, Article 28 of Legislative Decree no. 81/2008 on **occupational risk assessment** was significantly amended. The amended provision cites the Framework Agreement and formally incorporates the analysis of the risk of work-related stress into the employer's risk assessment obligations.

 In Belgium, even before the European Framework Agreement, **a cross-industry collective labor agreement signed in 1999** by the social partners within the National Labor Council addressed the management of “prevention of stress caused by work.” This agreement was made binding on the entire private sector that same year. According to the European Commission, its provisions were aligned with and compatible with those of the subsequent European Framework Agreement.

Thereafter, **a 2007 Royal Decree** provided a clearer framework for the prevention of PSRs in both the public and private sectors. Focusing on “psychosocial load,” this text went beyond stress, extending its scope to also include the prevention of violence, sexual harassment and psychological harassment at work. Furthermore, in 2014, a **major legal reform on the prevention of PSRs expanded and refined the obligations** established in 2007.

 In Spain, the national social partners incorporated the principles of the Framework Agreement into two “inter-confederal agreements on collective bargaining” (*Acuerdos Interconfederales para la Negociación Colectiva, AINC*) signed in 2005 and 2007, respectively. These agreements - which address key aspects of labor relations, OSH, and wage issues - are not legally binding but contain recommendations and priorities for the signatories' member organizations when they engage in collective bargaining. Nevertheless, these recommendations may, where appropriate, be adapted and integrated into binding collective agreements at sectoral, regional, or company level.

 **In Germany, there has been no specific national transposition of the European Framework Agreement.** Social partners (particularly at the sectoral level) have developed guidelines, recommendations, and practical tools for companies, but these are not legally binding. In its analysis, the European Commission also mentions a few company-level agreements that have introduced measures to facilitate the assessment and management of stress factors. Subsequently, a **legislative amendment was adopted in 2013**, requiring all employers to include the assessment of “psychological demands at work” in their occupational risk assessments.

 **In Denmark, the content of the European Framework Agreement was incorporated into a collective agreement applicable to municipalities and regions, as well as into a collective agreement covering the state sector** (including central administration, defense, the police, and universities). These two **legally binding** texts, concluded in 2005, led to the implementation of policies and practical tools for the prevention of work-related stress. Regarding the **private sector, no specific agreement** on work-related stress was subsequently signed, given that several sectoral agreements in Denmark already contained measures relating to the management and prevention of PSRs and work-related stress, unlike in the public sector.

However, the legislative and regulatory framework concerning OSH was recently amended by an **Executive Order on Psychosocial Working Environment**, published in September 2020, **establishing new obligations** in this area for all employers.

 **In Sweden, a joint agreement** was signed in 2005 by the national social partners to implement the European Framework Agreement in the **private sector**. This is not a binding instrument but serves as a **guideline** for identifying, preventing, and managing work-related stress issues. Its effective implementation can take various forms: the possibility to conclude collective agreements at branch level, internal policy documents, action plans, guidelines, and training. A similar non-binding initiative was also undertaken in the **public sector**, with the signing of an agreement in 2006.

Subsequently, **more specific legal obligations** regarding PSRs were introduced in 2015 through a new Regulation (AFS 2015:4) on the organizational and social work environment, **applicable to both the public and private sectors**.

In non-European Countries

The **United States** is the **only country among those analyzed whose OSH legislation does not specifically refer to mental health and/or psychosocial risks**. The general provision requiring employers to provide “employment and a place of employment which are free from recognized hazards that are causing or are likely to cause death or serious physical harm to his employees,” as set out in the **OSH Act of 1970**¹⁵⁷, does not specifically address mental health.

Similarly, the **Fair Labor Standards Act (FLSA)**¹⁵⁸, which establishes standards on factors and aspects indirectly related to well-being at work (such as working hours, overtime, minimum wage, etc., hence the reference to “fair labor” in the Act's title), does not specifically address stress or psychosocial risks.



Safe Work Australia (the **Australian** government statutory agency responsible for improving work health and safety) **develops and updates model occupational safety and health laws** (“Model Work Health and Safety – WHS – Laws”¹⁵⁹) to be implemented across Australia. To become legally binding, the Commonwealth, states and territories must separately implement them as their own laws.

There are two main types of model instruments:

- The Model WHS Act, which forms the basis of WHS requirements.
- The Model WHS Regulations, which set out more specific and detailed requirements to comply with the broader obligations established by the Model WHS Act.

In 2022, significant amendments were made, particularly to the “**Model WHS Regulations**”¹⁶⁰, to include specific obligations regarding PSRs. Two new Articles (55A and 55B) define them by distinguishing between the “**psychosocial hazard**” (or psychosocial risk factors) and the “**psychosocial risk**,” the latter resulting from exposure to the former.

According to Article 55A: “a **psychosocial hazard**” may arise from a range of sources: the design or management of work, the work environment, “plant” at the workplace (including, for example, equipment, machinery, and appliances), and workplace interactions or behaviors. This hazard may cause psychological harm, possibly accompanied by physical harm.

According to Article 55B: “**psychosocial risk**” is defined as “a risk to the health or safety of a worker or other person arising from a psychosocial hazard.”

Pursuant to the new Article 55C: PSRs must be treated like any other occupational risk (requiring an assessment, preventive measures, monitoring, etc.) in accordance with existing legislation on the matter.

Pursuant to the new Article 55D: employers are now required to eliminate (or, if this is not “reasonably practicable,” to minimize) PSRs by implementing “**control measures**.”

¹⁵⁷ [Occupational Safety and Health Act.](#)

¹⁵⁸ [Wages and the Fair Labor Standards Act.](#)

¹⁵⁹ [Safe Work Australia. Model WHS laws.](#)

¹⁶⁰ [Safe Work Australia. Model Work Health and Safety Regulations as at 5 December 2025.](#)

To do so, they must take into account “all relevant matters” (listed in the same Article), such as the duration, frequency, and severity of workers’ exposure to “psychosocial hazards”; how these risk factors may interact or combine; the design of the work (including job demands and tasks); how the work is managed, organized, and supported; the layout and environmental conditions of the workplace; and interpersonal relationships at work (interactions, behaviors, etc.), among others.

To assist employers, Safe Work Australia also developed a **Code of Practice, “Managing psychosocial hazards at work”**¹⁶¹, published in July 2022. This document is not legally binding in itself, but if an employer follows the measures outlined in an approved code of practice in the Australian state or territory where they operate, they are deemed to comply with the relevant legislation. Indeed, in legal proceedings, **“courts may regard an approved code of practice as evidence of what is known** about a hazard, risk or control and may rely on the relevant code to determine what is reasonably practicable in the circumstances”¹⁶².

The aforementioned amendments by Safe Work Australia to the Model WHS Regulations, as well as its Code of Practice regarding PSRs, have been **adopted by the Commonwealth** and, at the time of writing this report, by **nearly all Australian states and territories**¹⁶³.

Unlike other Australian jurisdictions, **the State of Victoria** has not adopted Safe Work Australia's model laws¹⁶⁴ and retains its own occupational health and safety legislation (OHS Act 2004)¹⁶⁵.

A new Regulation¹⁶⁶ supplementing this legislation, which took effect in **December 2025**, specifically addresses **“psychological health”** in the workplace. It details employers’ new responsibilities in this area (including the obligation to assess PSRs and prevent exposure to them), lists the main PSR factors to consider, specifies possible control measures, and clarifies the roles of the various workplace stakeholders involved... A Compliance code¹⁶⁷ accompanies the Regulation, helping employers understand and apply the new provisions.

There is a key technical difference between Safe Work Australia’s model laws and the Victorian Regulation. While the former allows employers to choose freely among various preventive measures (including training), the Victorian Regulation imposes a **mandatory order of priority with regard to control measures** to address PSRs:

- **Level 1 (Priority) - Organizational Measures:** The employer must take action in relation to the management of work, equipment, systems of work, work design, or the workplace environment (e.g., working hours, workload, etc.).
- **Level 2 (subsidiary) - Information and training:** These measures may be used as the sole means of prevention only if none of the Level 1 actions are “reasonably practicable.” When the employer adopts an approach combining both levels, information and training initiatives must not constitute the “predominant control measure used.”

¹⁶¹ [Safe Work Australia. *Managing psychosocial hazards at work. Code of Practice. 2022.*](#)

¹⁶² [Safe Work Australia. *Codes of Practice.*](#)

¹⁶³ [Milionis, N. “Update: Current status of WHS Regulations addressing psychosocial risks”. *Global Workplace Insider.* 31 August 2023.](#)

¹⁶⁴ [Safe Work Australia. *Model WHS laws.*](#)

¹⁶⁵ [Occupational Health and Safety Act 2004. No. 107 of 2004. Authorised Version incorporating amendments as at 6 August 2025.](#)

¹⁶⁶ [Occupational Health and Safety \(Psychological Health\) Regulations 2025. S.R. No. 103/2025.](#)

¹⁶⁷ [WorkSafe Victoria. *Compliance code. Psychological health. Edition 1 September 2025. 2025.*](#)

As a result, where PSRs have been identified at work, the employer cannot rely solely on informing and training employees without first attempting to address work organization.

Although the substantive obligations are similar, the conceptual approaches differ:

- Safe Work Australia targets the management of “psychosocial hazards,” while Victoria focuses on protecting “psychological health” at work.
- Regarding the definition of a psychosocial hazard, Safe Work Australia defines it as a risk factor that may cause psychological (and sometimes physical) harm. By contrast, Victoria adopts a more clinical definition centered on the employee’s reaction. A “psychosocial hazard” is indeed defined as any factor, arising from work and the work environment, that “may cause an employee to experience one or more negative psychological responses,” including “cognitive, emotional and behavioral responses and the physiological processes associated with them.”



In **Canada**, the **Labour Code**¹⁶⁸ was amended in 2018 to include protection for workers’ **mental well-being**. Its Part II, which deals with OSH, now aims (Article 122.1) to prevent “**accidents, occurrences of harassment and violence and physical or psychological injuries and illnesses**” related to employment.

It should be noted, however, that the Canada Labour Code does not apply to all workers, but primarily to the federal public service, most federal Crown corporations (such as Canada Post Corporation), and the “federally regulated private sector,” including private-sector companies operating across provincial borders (such as airlines, banks, and road transportation companies, among others¹⁶⁹).

At the same time, each Canadian province and territory has its own OSH legislation that applies to workplaces in the respective region. It is within these laws that more specific references and requirements regarding PSRs can sometimes be identified.

For example, in the **Province of Manitoba**, the **Workplace Safety and Health Act**¹⁷⁰ requires “the promotion and maintenance of the highest degree of physical, **mental and social well-being** of workers” as well as “the placing and maintenance of workers in an occupational environment adapted to their physiological and **psychological condition**.”

One of the objects and purposes of this Act is to ensure a “**psychologically safe workplace**.” This is defined as a workplace “in which the psychological well-being of workers is promoted and active measures are undertaken to prevent harm, whether negligent, reckless or intentional, to the psychological well-being of workers.”

In the **Province of Quebec**, the **Act Respecting Occupational Health and Safety**¹⁷¹ was amended in 2021 to strengthen the prevention of psychosocial risks at work: henceforth, “every employer must take the necessary measures to protect the health and ensure the safety and physical and **mental well-being** of his worker” (Article 51, whereas in the previous version, only physical well-being was expressly mentioned).

¹⁶⁸ [Canada Labour Code](#).

¹⁶⁹ [List of federally regulated industries and workplaces](#).

¹⁷⁰ [Manitoba. The Workplace Safety and Health Act, C.C.S.M. c. W210. As of 22 July 2025](#).

¹⁷¹ [Act Respecting Occupational Health and Safety. As of 27 May 2025](#).

To do so, the employer must assess PSRs¹⁷² and implement appropriate preventive measures, including those necessary “to ensure the protection of a worker exposed to **physical or psychological violence**, [...], in the workplace.”



In **South Korea**, the **OSH Act**¹⁷³ provides (Article 5) that employers, as part of their obligation to ensure and promote the safety and health of employees, must also create “**a pleasant working environment**” and **improve working conditions** in order to “decrease physical fatigue, mental stress, etc. of employees.”

The same Act (Chapter VIII) further requires employers to provide “rest facilities that employees [...] can use during **break time** to relieve their physical fatigue and **mental stress**.”

In 2011, the “**Regulations on Occupational Safety and Health Standards**”¹⁷⁴ were amended to include (Article 669) measures aimed at **preventing** health problems caused by occupational stress, particularly when **the work requires “high levels of physical fatigue and mental stress.”** This includes occupations involving long working hours, shift or night work, full-time vehicle driving, and the use of precision equipment and machinery.

In these situations, the employer must:

1. **Assess work-related stress factors** such as the work environment, job content, and working hours, and **implement improvement measures** such as reducing working hours and introducing short- and long-term job rotation;
2. **Take into account the views of the affected workers** when establishing work plans, particularly regarding workload and schedules;
3. **Improve working conditions** related to working hours, including an **appropriate balance between work and rest**;
4. Make every effort to provide **welfare support** for workers’ activities **outside working hours**;
5. **Assign workers appropriately and provide them with sufficient information** regarding **job-stress factors**, potential health risks, and preventive measures;
6. **Assess the risk of cerebrovascular and cardiovascular diseases** and implement health promotion programs such as smoking cessation and hypertension management.

Point 4 suggests that, for certain occupations, the employer should also introduce welfare measures aimed at supporting workers’ well-being and quality of life outside working hours. This support may take the form of cultural and sports activities, family-friendly measures (e.g., childcare facilities, flexible schedules), initiatives to foster social relationships among colleagues (particularly in cases of isolated work), as well as psychological and emotional support. However, the content and scope of such support depend on the sector concerned, the characteristics of the workforce, and the size of the company.



¹⁷² [Institut national de santé publique du Québec. Risques psychosociaux du travail : des risques à la santé mesurables et modifiables. 2022.](#)

¹⁷³ [Occupational Safety and Health Act](#). English version.

¹⁷⁴ [산업안전보건기준에 관한 규칙.](#)

In **Japan**, the **Industrial Safety and Health Act of 1972**¹⁷⁵ (the principal law governing OSH) was amended in 2014 to introduce specific measures regarding **mental health at work**.

An annual assessment of “psychological burden” has been added to the list of regular medical examinations that employers are required to provide to workers (Article 66-10 of the Act). This assessment, known as the **Stress Check Test**, took effect in 2015 and was originally **mandatory** only for workplaces with 50 or more employees. Following a legislative amendment adopted in 2025, this requirement will be extended to workplaces with fewer than 50 employees starting from April 2028.

Its purpose is to detect cases of burnout or excessive stress in order to take effective measures to prevent prolonged absences from work. The obligation applies solely to employers, who are required to offer the test, while the **employee may refuse to undergo this psychological assessment**¹⁷⁶. Furthermore, the results of the assessment (conducted by a qualified healthcare professional, such as an occupational physician) must not be disclosed to the employer without the employee’s consent.

If the assessment detects excessive stress levels, the worker may request **individual face-to-face guidance** from the physician, and the employer must ensure that the worker is not subjected to disadvantageous treatment as a result of such request.

The employer must keep records of the results of the physician’s guidance and follow the physician’s advice regarding the measures necessary to protect the worker’s health. These measures must **provide solutions** to support the worker (modification of job duties, reduction of working hours or the frequency of night work, etc.).

The Ministry of Health, Labor, and Social Affairs has issued **Guidelines**¹⁷⁷ (revised in 2018) on the implementation of these examinations to assess the degree of psychological burden, the measures to be taken based on the results, as well as other aspects relating to this Stress Check Test. This document **recommends aggregating the test results by “group”** (for example, at the team or department level, etc.), in order to better understand exposure to stress factors within each work unit and **facilitate the identification of corrective measures** that also address the **collective dimension**, if necessary.

¹⁷⁵ [Industrial Safety and Health Act \(Act No. 57 of 1972\)](#). English version.

¹⁷⁶ [P-tips. ストレスチェックの受検を従業員に拒否されたら？受検率を高めるポイントを解説.](#)

¹⁷⁷ [Ministry of Health, Labour and Welfare \(MHLW\). 心理的な負担の程度を把握するための検査及び面接指導の実施並びに面接指導結果に基づき事業者が講ずべき措置に関する指針. 2018.](#)

Dying from “overwork”

The phenomena of Gwarosa in South Korea and Karoshi in Japan, and government responses

These two terms refer to the same phenomenon in **South Korea** and **Japan**. Both **Gwarosa** and **Karoshi** refer to **sudden deaths** (for example from cardiac arrest or stroke) caused by overwork, excessive working hours, mental distress, stress, or chronic fatigue arising from work. In some cases, excessive stress, burnout, and other conditions caused by overwork can lead to suicide. In this case, in **Japan**, the term *karō-jisatsu*, or “suicide from overwork,” is used more specifically.

Although **difficult to quantify** precisely, this is a very real phenomenon in both countries.

One of the main factors contributing to these situations of distress is the high number of hours worked. According to the [White Paper on Measures to Prevent Karoshi](#) (2023) published by the **Japan’s Ministry** of Health, Labor, and Welfare, in 2019, approximately **11% of workers exceeded 60 working hours per week** (among employees regularly working at least 40 hours per week). In recent years, this proportion has declined slightly (to about 9% in 2022); however, the figures vary significantly depending on the sector analyzed.

To address these issues, governments have introduced measures **to limit weekly working hours**.

In **South Korea**, for example, [a 2018 law](#) **reduced the maximum weekly working hours** from 68 to 52 hours. The measure was implemented in phases, depending on the size of the company.

In **Japan**, a law known as the [Work Style Reform Law](#)* (*Ministry of Health, Labor and Welfare (MHLW). Outline of the Act on the Arrangement of Related Acts to Promote Work Style Reform” (Act No. 71 of 2018)*), adopted in 2018, also **capped the number of overtime hours**: employees cannot be required to work more than 45 hours of overtime per month and 360 hours per year. The law also introduced **criminal penalties** for companies that violate these limits, with the aim of further strengthening the protection of workers against excessive working hours.

Other earlier legislative efforts, such as the 2014/2015 amendments introducing mandatory **Stress Check Tests** in **Japan** or the 2011 provisions in **South Korea** providing further guidance on **the assessment of job-stress factors** for certain occupations, aimed to address the issues of burnout and overwork.

*[Further information on this reform](#).

National Legislation on the Right to Disconnect



Key points

Although, strictly speaking, the **right to disconnect** does not in itself fall within the scope of psychosocial risks, it seemed appropriate to include national **legislative developments** in this field in this analysis.

The European Parliament has defined¹⁷⁸ it as the “workers’ right not to engage in work-related activities or communications outside working time, by means of digital tools, such as phone calls, emails, or other messages.” The right to disconnect thus refers to the **right of workers not to respond to work-related calls or other requests outside of working hours**, in order to safeguard their right to free time and to a healthy work-life balance.

Indeed, excessive use of communication tools, as well as the constant expectation that employees (whether working remotely or not) will respond at any time of the day, can have **negative consequences for their physical and mental well-being**. The inability to disconnect from work blurs the boundaries between professional and private life, leads to excessive working hours, increases workload... In other words, **the inability to disconnect affects and influences psychosocial risk factors**, exposure to which can generate psychosocial risks, with all the consequences that this may entail for workers’ health.

The right to disconnect encompasses two aspects: the ability to effectively exercise this right and the assurance that one will not face adverse professional consequences for doing so. At present, **there is no European directive on the right to disconnect**, although progress appears to be underway in this direction (see Chapter 2). Among the countries analyzed, four European countries (**Belgium, France, Italy, Spain**) and two non-European countries (**Australia** and **Canada**) have seen recent legislative developments regarding the right to disconnect, particularly since France paved the way in this area in 2016. These new legislative provisions may:

- Apply only to the private sector, or also cover the public sector (**Spain**); sometimes through separate instruments (**Belgium, France**);
- Generally apply to all workers, or at least to employees, except in **Italy** where this right applies only to employees working remotely;
- Leave the implementation of this right to negotiation, whether collective (**Belgium, France, Spain**) or individual (**Italy**);
- Establish this right as such for the employee (**Australia**) unless the refusal to respond to requests is considered “unreasonable” (the law specifies when and under what conditions a refusal may be considered unreasonable);
- Introduce, instead of an explicit “right to disconnect,” an obligation for the employer to develop a “disconnection policy” (**Canada**) or to “ensure the worker’s disconnection” (**Italy**);
- Establish obligations regarding the right to disconnect based on company size, notably for companies with 20 or more employees (**Belgium**), 25 or more employees (the Canadian province of **Ontario**), or 50 or more employees (**France**).

¹⁷⁸ In the “European Parliament Resolution of 21 January 2021 with recommendations to the Commission on the right to disconnect,” cited in the introduction (see Chapter 1).

In European Union Countries

Four countries have legislation on this subject, requiring negotiation on the matter, either collective in most cases ([Belgium](#), [France](#), [Spain](#)), or individual ([Italy](#)).

France was the first European country to enact legislation on the right to disconnect, in 2016¹⁷⁹. This right forms part of the mandatory collective negotiations (Article L2242-1 of the Labor Code) “on professional equality between women and men and quality of life at work and working conditions (*qualité de vie et des conditions de travail*, QVCT)” to be conducted in all companies where one or more trade union sections of representative organizations have been established (generally companies with at least 50 employees).

Article L2242-17 of the Labor Code details the minimum content of these negotiations. In addition to requiring that “the **balance between employees’ personal and professional lives**” be addressed, it has provided since 2016 that **negotiations must also cover “the terms for employees to fully exercise their right to disconnect** and the company’s implementation of measures to regulate the use of digital tools, with a view to ensuring respect for rest periods and leave as well as for personal and family life.”

In the absence of an agreement between the parties, the employer must draw up a charter, following consultation with the Social and Economic Committee (*comité social et économique*, CSE)¹⁸⁰, which “defines the terms for exercising the right to disconnect and also provides for the implementation, for employees and supervisory and managerial staff, of training and awareness-raising initiatives on the reasonable use of digital tools.”

As for the public sector, the right to disconnect is not set out in the Labor Code, but in a collective “Agreement on the implementation of telework”¹⁸¹ signed in 2021. Under its Article 5.2, all public employees, whether working on-site or remotely, have the right not to be connected to a work-related digital tool outside of their working hours, in order to ensure a better work-life balance. However, “the terms for exercising the right to disconnect must be negotiated within the framework of local social dialogue.”



In Spain, the right to disconnect was introduced by a 2018 law¹⁸².

This law establishes that private-sector workers and public servants have the right to digital disconnection in order to ensure, outside statutory or collectively agreed working hours, “respect for their rest periods, leave, and holidays, as well as for their private and family life.” The terms for exercising this right are subject to the provisions of collective bargaining or, failing that, to an agreement between the employer and workers’ representatives.

Furthermore, the employer, following consultation with workers’ representatives, must develop “**an internal policy for employees**, including managers, defining the terms for exercising the right to disconnect and training and awareness-raising measures for staff on the reasonable use of technological tools to avoid the risk of **digital overload**.”

¹⁷⁹ [Loi n° 2016-1088 du 8 août 2016 relative au travail, à la modernisation du dialogue social et à la sécurisation des parcours professionnels.](#)

¹⁸⁰ The Social and Economic Committee (*comité social et économique*, CSE) is mandatory in companies with at least 11 employees. The CSE includes the employer and a staff delegation whose number of members is determined by decree of the Council of State, according to the size of the workforce ([source](#)).

¹⁸¹ [Accord relatif à la mise en œuvre du télétravail dans la fonction publique.](#)

¹⁸² [Ley Orgánica 3/2018, de 5 de diciembre, de Protección de Datos Personales y garantía de los derechos digitales.](#)

Special attention has been given to remote workers. The 2018 law specifies that “the right to digital disconnection must be preserved in cases of full or partial remote work.” A new 2021 law regulating remote work¹⁸³ reaffirmed this principle (Article 18).



In Belgium, the first provisions regarding the right to disconnect date back to a 2018 law¹⁸⁴, subsequently amended by the “Act of 3 October 2022 on various labor provisions”¹⁸⁵.

For employers with at least 20 employees, the “terms for exercising the workers’ right to disconnect and the company’s implementation of measures to regulate the use of digital tools, with a view to ensuring respect for rest periods and work-life balance, must be the subject of **a collective labor agreement concluded at company level**, [...] and, in the absence of such an agreement [...], these [elements] must be included in the internal work regulations”¹⁸⁶.

Regarding the public sector, a 2021 Royal Decree¹⁸⁷ introduced the right to disconnect for federal employees. More specifically, the text provides that civil servants cannot be contacted during periods of leave or rest “**except for exceptional and unforeseen reasons that cannot wait until the next working period**.” Furthermore, “a civil servant must not suffer **any adverse consequences** if they do not answer the phone or read work-related messages outside their normal working hours.”

Finally, in order to ensure respect for federal employees’ rest periods, annual leave, and other forms of leave, and to preserve their work-life balance, **the head of the federal administration concerned must organize, at least once a year, a consultation on disconnecting from work** and the use of digital communication tools within the relevant consultation committee.



In Italy, digital disconnection is mentioned in a 2017 law¹⁸⁸. However, the provision applies only to employees performing their work under a “smart working” arrangement, a form of “agile”¹⁸⁹ work organization defined by that same law. To engage in this specific form of remote work, the employer and the employee must conclude a smart working agreement (under the conditions laid down in Article 19 of the aforementioned law) and identify “**the employee’s rest periods as well as the technical and organizational measures necessary to ensure the employee’s disconnection from work-related technology**.”

¹⁸³ [Ley 10/2021, de 9 de julio, de trabajo a distancia.](#)

¹⁸⁴ [Loi du 26 mars 2018 relative au renforcement de la croissance économique et de la cohésion sociale.](#)

¹⁸⁵ [Loi du 3 octobre 2022 portant des dispositions diverses relatives au travail.](#)

¹⁸⁶ In Belgium, internal work regulations ([règlement de travail](#)) lay down general working conditions and/or provide workers with information on the functioning and organization of work within the company or institution employing them. Their content, scope, and the procedures for their establishment and amendment are defined by the Act of 8 April 1965 on work regulations.

¹⁸⁷ [Arrêté royal modifiant l'arrêté royal du 2 octobre 1937 portant le statut des agents de l'État concernant le droit à la déconnexion.](#)

¹⁸⁸ [LEGGE 22 maggio 2017, n. 81 Misure per la tutela del lavoro autonomo non imprenditoriale e misure volte a favorire l'articolazione flessibile nei tempi e nei luoghi del lavoro subordinato.](#)

¹⁸⁹ Unlike telework, agile work or mobile work can be performed remotely from multiple locations (outside the employer’s premises) without any specific limitation – although this depends on national definitions and company-level agreements. In telework, the employee is required to work from fixed locations, generally their home. For more details on telework and mobile work in Europe, see: [EUROGIP. Teleworking and accidents at work in seven European countries. 2023.](#)

The arrangements for exercising the right to disconnect are therefore subject to individual negotiation. Currently, a **draft law**¹⁹⁰ under discussion in the country aims to better define and regulate the right to disconnect and extend it to other categories of workers.



In the other three European countries studied, the right to disconnect is not explicitly mentioned in legislation, nor is it subject to mandatory negotiation.

However, in practice, it is sometimes addressed through sectoral or company-level collective agreements (as in **Germany**¹⁹¹ for example), which may provide for measures such as blocking access to communication servers during certain hours.

In non-European Countries

Among the five non-EU countries analyzed, only Australia and Canada have recently introduced significant provisions regarding the right to disconnect.

In February 2024, Australia passed a law amending the Fair Work Act¹⁹² of 2009, introducing the right to disconnect. The new Article 333M provides that **an employee may refuse to read or respond to contact**, or attempted contact, from an employer or a third party, outside of their working hours, **unless such refusal is “unreasonable.”**

The law does not completely prohibit employers (or third parties, such as clients) from contacting employees outside of working hours, but it protects those who wish to exercise their right not to respond and prohibits employers from taking adverse action if this right is exercised.

To determine whether an employee’s refusal is unreasonable, the Article specifies, without being exhaustive, the factors that must, at a minimum, be taken into account:

- (a) The reason for the contact.
- (b) how the contact is made and the level of disruption the contact causes the employee.
- (c) The extent to which the employee is compensated:
 - i. To remain available to perform work during the period in which the contact occurs, or
 - ii. To work additional hours outside of their ordinary hours of work.
- (d) The nature of the employee’s role and their level of responsibility.
- (e) The employee’s personal circumstances (including family or caring responsibilities).

Refusal to respond is also considered unreasonable if “the contact or attempted contact is required under a law of the Commonwealth, a State, or a Territory [of Australia].”

The right to disconnect has applied to private-sector companies and the Commonwealth public sector since August 2024, with the exception of small private-sector companies (fewer than 15 employees), which were given an additional year to comply.

¹⁹⁰ [Disegno di legge n. 1290. Disposizioni in materia di diritto alla disconnessione nei rapporti di lavoro. 6 November 2024.](#)

¹⁹¹ For example, in companies in the automotive sector and in the metal and steel industries. Further information can be found in this report: [Final Report of the Right to Disconnect Advisory Committee. February 2022.](#)

¹⁹² [Fair Work Act 2009. Latest version C2025C00644 C69. 07 November 2025. Volume 2.](#)

The law also clarifies the procedure to follow (Article 333N) **in the event of disputes** regarding the exercise of the right to disconnect, particularly concerning the interpretation of whether an employee's refusal to respond to an attempted contact is "reasonable" or "unreasonable":

- In the first instance, the parties must attempt to resolve the dispute at the workplace level.
- If discussions at the workplace level fail to resolve the dispute, either party may refer the matter to the **Fair Work Commission (FWC)**, Australia's independent national workplace relations tribunal established by the Fair Work Act of 2009. The FWC may:
 - a) Make an order directing an employee to stop refusing contact or an employer to stop taking adverse action against an employee; or
 - b) Otherwise deal with the dispute.

In addition, both the employer and the employee may appoint a person or industrial association to assist or represent them in these disputes, including in proceedings before the FWC.



In **Canada**, initially, only the **Province of Ontario** had made legislative changes, notably to its Employment Standards Act¹⁹³ (ESA), regarding disconnecting from work.

Since 2023, any employer with 25 or more employees as of January 1 of each year must have in place a written policy on disconnecting from work and provide it to their employees. Although this does not constitute an individual right granted to employees (the words "right to disconnect" do not appear in the law in question), the issue of disconnecting from work must be addressed by the employer, who must establish clear rules for its implementation and ensure that rest periods and time off are respected.

The ESA also provides a **definition of "disconnecting from work"** (not of the right to disconnect): "not engaging in work-related communications, including emails, telephone calls, video calls or the sending or reviewing of other messages, so as to be free from the performance of work."

At the federal level, in 2022, a report¹⁹⁴ by an Advisory Committee on the right to disconnect, commissioned by the Canadian government, explored various approaches to implementing this right. In this context, **a 2024 law¹⁹⁵ amending the Canada Labour Code** introduced measures to ensure disconnection from work for employees in federally regulated workplaces.

Like Ontario, these new provisions do not grant an individual right to disconnect (as in Australia, for example), but **instead require employers to establish a policy on disconnecting from work**. This document must define the employer's rules and expectations regarding communications outside of working hours, specify the arrangements for disconnecting, and justify any potential exceptions.

The employer will also be required to consult employees when developing and updating this policy, which must be reviewed every three years. In addition, the employer must keep a record of

¹⁹³ [Employment Standards Act, 2000, S.O. 2000, c. 41.](#)

¹⁹⁴ [Final Report of the Right to Disconnect Advisory Committee. February 2022.](#)

¹⁹⁵ [Budget Implementation Act, 2024, No. 1 \(S.C. 2024, c. 17\).](#)

information related to these consultations, post the policy in the workplace, and provide it to employees. These measures are expected to take effect between 2025 and 2026¹⁹⁶.



In other countries (**Japan**, **South Korea**, and **United-States**), there is no explicit right to disconnect, despite certain initiatives:

In **Japan**, the Ministry of Health, Labor and Welfare published “Guidelines to Promote the Appropriate Introduction and Implementation of Telework”¹⁹⁷ in March 2021, revising a similar document from 2018.

While not mentioning the right to disconnect, these non-binding guidelines nevertheless emphasize that it is inappropriate to negatively evaluate an employee simply for not responding to emails or calls outside of working hours.

In **South Korea**, after several unsuccessful attempts to introduce a right to disconnect, the Ministry of Employment and Labor announced in 2023¹⁹⁸ the formation of an expert working group tasked with examining potential measures to be taken in this area. Work of this kind was still ongoing in 2025¹⁹⁹.

¹⁹⁶ [Government of Canada. *Legislative changes to support federally regulated employees*.](#)

¹⁹⁷ [Ministry of Health, Labour and Welfare \(MHLW\). *テレワークの適切な導入及び実施の推進のためのガイドライン*](#)

¹⁹⁸ [KO SUK-HYUN. “Right to disconnect: reexamination of after-hours work”. *Korea JoongAng Daily*. 15 May 2023.](#)

¹⁹⁹ [퇴근 후 카톡 금지" 추진하는 정부...해외 사례 살펴보니. *The Korea Economic Daily*. 21 June 2025.](#)

National Legislation on Violence and Harassment at Work



Key points

On this subject, at the international level, the ILO²⁰⁰ states that:

- Some countries address violence and harassment at work exclusively under their criminal law, with the role of inspectors being subordinated to the decisions of public prosecutors;
- Others have included these aspects in their OSH legislation, with specific preventive and reactive actions coordinated with other public agencies;
- In another group of countries, preventive measures are included in OSH legislation, while reactive activities fall under criminal law and labor law.

Different approaches can therefore be observed across countries around the world. These provisions are sometimes incorporated into laws governing the prevention of psychosocial risks (PSRs), where such laws exist. In other cases, they fall under separate laws specifically dedicated to workplace violence or harassment. These frameworks may also overlap: even where a law on PSRs already includes measures against violence and harassment, other legislative texts may supplement and strengthen the employer's obligations. Without aiming to be exhaustive, an analysis of the relevant legislation in the 12 countries examined reveals the following findings:

- **The topics covered** generally include: i) violence and threats (including physical and verbal forms of violence, for example in jobs involving contact with the public), ii) sexual violence and harassment, and iii) psychological harassment, workplace intimidation by colleagues or superiors, "mobbing," or "bullying."
- The legislative approach to **prevention varies**. Some countries adopt an integrated framework in which the various forms of violence and harassment at work are grouped under a single concept (as in **Canada**). Many countries have historically separated these dimensions into distinct instruments or provisions, sometimes consolidating them at a later stage as in **Sweden** (with the reorganization of the regulations of the Swedish Work Environment Authority).
- While, historically, sexual harassment was one of the first areas where legislation began to develop, there is an increasing tendency to legislate on **psychological harassment (bullying) at work** as well. While **Sweden** was one of the pioneering countries in this regard (as early as the 1990s), **France** and **Belgium** followed suit in the early 2000s, and more recently, other countries such as **Spain** (amendment to the Criminal Code in 2010), **Australia** (definition of bullying in the workplace in 2013), **Japan** (2019) and **South Korea** (2019). Among the 12 countries analyzed, the **United States**, **Italy** and **Germany** are the only ones without legal definitions or specific regulations on workplace bullying (beyond harassment based on protected grounds such as religion or ethnic origin, etc.), although case law has developed in this area.

²⁰⁰ [ILO. ILO Curriculum on Building Modern and Effective Labour Inspection Systems. Module 14. Ensuring compliance with legislation on psychosocial risks. 2022.](#)

With regard to workplace bullying in **Japan** and **South Korea**, recent legislative developments have focused primarily on a specific form of bullying, namely **workplace intimidation** (“**power harassment**”), particularly when a supervisor abuses their authority to subject an employee to unfavorable, degrading, or humiliating treatment. In 2019, **Japan** also strengthened measures to prevent and combat **workplace harassment related to pregnancy and maternity**, that is, any behavior, primarily by supervisors, intended to treat the women concerned unfavorably or to pressure them into leaving their jobs.

- Regarding **risk assessment**, some countries already have specific requirements concerning psychosocial risks, which include violence and harassment (such as in **Belgium** and **Australia**). However, some have introduced measures specifically addressing the assessment of the risk of violence and harassment. In 2022, **Spain** mandated that occupational risk assessments must include an analysis of the “**risk of sexual violence**” for positions held by female workers. Since 2020, **Canada** has required (for federally regulated workplaces) an assessment of all “**risk factors, internal and external** to the workplace, that contribute to harassment and violence” at work. To this end, a tailored assessment tool for employers has recently been developed by the Government of Canada (see Chapter 4).
- In terms of prevention, **informing workers** appears in virtually all relevant legislative texts. Some countries, however, have gone a step further by making it mandatory for employers to:
 - Develop and adopt **specific written policies and protocols for the prevention of violence and/or harassment** (of any type or, in some cases, solely of a sexual nature), as in certain **U.S. states** (e.g., **California**) and certain **Canadian provinces** (such as **Ontario** and **Manitoba**), in **Sweden**, in **Spain**, in **Japan**, and, since 2020, in **Canada** (for federally regulated workplaces).
 - Include provisions on the prevention and prohibition of violence and harassment in **internal work regulations** (for companies of a certain size), as is the case in **France** and, since 2019, in **South Korea**.
- Regarding **training**, while it is often presented as a highly recommended preventive measure, it has been made **mandatory** in certain countries, either for certain staff members, such as managers and supervisors (training on the prevention of “offensive conduct” in **Sweden**), or for all employees. This has been the case in **South Korea** since 2017 (with regard to sexual harassment), in **Japan** since 2019 (with regard to all forms of harassment prohibited by law) and in **Canada** since 2020 (training on preventing all forms of violence and harassment, in federally regulated workplaces).
- Beyond the duty to investigate reports of violence and harassment, countries such as Belgium and Japan have introduced **legal frameworks and specific support mechanisms for employees who are victims of such behavior**. In **Belgium**, employees may request “formal or informal psychosocial intervention,” including for incidents of violence and harassment. In **Japan**, employers are required to establish effective support systems (for example by designating a responsible person or team, or by outsourcing the service to an external organization) that allow affected workers to seek advice, safely report incidents or attempted incidents, and identify appropriate solutions.

Information on the procedures to follow is generally found in companies’ **internal work regulations** or **written policies** on the prevention of violence and/or harassment that employers are **required** to adopt in the countries mentioned above.

- **Recent legislative developments have focused on workers in public-facing roles.** In 2020, **Denmark** introduced obligations that explicitly include the prevention and management of high emotional demands in occupations involving contact with the public (see above under “National Legislation and the Inclusion of PSRs in Risk Assessments”).

In 2020, an **Italian** law tightened administrative and criminal penalties for those who commit physical or verbal assaults against professionals in the health and social care sectors.

In 2021, **South Korea** imposed new obligations on employers to prevent harm to employees’ health resulting from abusive language and aggressive behavior by customers in occupations involving the sale of goods or the provision of services.

In 2024, the **State of New York** introduced additional obligations for employers in the retail sector to specifically prevent workplace violence perpetrated by third parties.

Starting in 2026, in **Japan**, employers will be required to implement a range of adequate preventive and protective measures against “customer harassment,” namely harassment perpetrated by customers and other third parties.

- Finally, in some cases, national regulations require employers to implement additional prevention and intervention measures in the event of incidents of **violence occurring outside working hours but related to work**, as in **Denmark**.
- An explicit reference to **domestic violence (“family violence”)**, which may also give rise to harassment and violence in the workplace, is found in recent legislation in **Canada**.

Furthermore, it should be noted that the **ILO Convention No. 190** of 2019 (C190, see Chapter 1) requires ratifying States to adopt legislation prohibiting violence and harassment in the world of work and providing for appropriate prevention and intervention measures.

To date, **eight of the countries analyzed have ratified this Convention** (**Australia, Belgium, Canada, Denmark, France, Germany, Italy, Spain**). Consequently, further developments in this area may be expected in the coming years. In **Italy**, four bills²⁰¹ on violence and harassment at work are under consideration. **Canada** adopted regulations in 2020 on the prevention of harassment and violence in the workplace, explicitly referencing C190 in its impact analysis²⁰².

²⁰¹ [*Disegno di legge n. 89. 13 October 2022.*](#)

[*Disegno di legge n.257. 26 October 2022.*](#)

[*Disegno di legge n.671. 18 April 2023.*](#)

[*Disegno di legge n.813. 20 July 2023.*](#)

²⁰² [*Canada Gazette, Part II, volume 154, No. 13, 24 June 2020.*](#)

In European Union Countries

In the context of employment and occupation, the European Directive 2006/54/EC²⁰³ defines:

- **“Harassment”**: “where unwanted conduct related to the sex of a person occurs with the purpose or effect of violating the dignity of a person, and of creating an intimidating, hostile, degrading, humiliating or offensive environment”;
- **“Sexual harassment”**: “where any form of unwanted verbal, non-verbal or physical conduct of a sexual nature occurs, with the purpose or effect of violating the dignity of a person, in particular when creating an intimidating, hostile, degrading, humiliating or offensive environment.”

According to the directive, **these two elements constitute discrimination on grounds of sex and, as such, are contrary to the principle of equal treatment between men and women.** They must therefore be prohibited and subject to effective, proportionate, and dissuasive sanctions. While the text does not specify the preventive measures to be taken in the workplace, it states that Member States must encourage, in accordance with national law, collective agreements or practice, employers and those responsible for access to vocational training to take effective measures to prevent all forms of discrimination on grounds of sex.



Among the European countries studied, **France, Belgium, Sweden** and **Spain** have relatively well-developed legal provisions regarding violence and harassment at work.

Sweden was the first European country to adopt a legally binding instrument addressing psychological harassment. A 1993 Regulation²⁰⁴ introduced measures against “offensive conduct” (*kränkande särbehandling*), defined as “recurrent reprehensible or distinctly negative actions directed at one or more employees in an offensive manner and capable of leading to their exclusion from the workplace community.”

The provisions of this text were subsequently incorporated into Regulation AFS 2015:4 on **the organizational and social work environment** (now part of Regulation AFS 2023:2²⁰⁵). Among the obligations and preventive measures incumbent upon the employer are:

1. Ensuring that managers and supervisors have sufficient knowledge regarding the prevention and management of offensive conduct, particularly through appropriate training;
2. Establishing clear procedures for managing offensive conduct, including reporting, support for victims, etc. (see above under “National Legislation and the Inclusion of PSRs in Risk Assessments”).

²⁰³ [Directive 2006/54/EC of the European Parliament and of the Council of 5 July 2006 on the implementation of the principle of equal opportunities and equal treatment of men and women in matters of employment and occupation \(recast\).](#)

²⁰⁴ AFS 1993:17. *Kränkande särbehandling i arbetslivet*.

²⁰⁵ In Chapter 2 of: [AFS 2023:2. Arbetsmiljöverkets föreskrifter och allmänna råd om planering och organisering av arbetsmiljöarbete.](#)

Another [Regulation AFS 1993:2](#)²⁰⁶ (also now incorporated into [Regulation AFS 2023:2](#)²⁰⁷), addressing “**violence and threats** in the working environment,” provides that the employer must:

- **Organize work** (as well as design and equip the workplace) in a manner that prevents risks or threats of violence as much as possible;
- **Have specific safety procedures** for work situations that may involve a risk or threat of violence and communicate them appropriately to the workers concerned;
- **Ensure that employees receive appropriate support and guidance** when working in such situations;
- **Ensure that employees are able to obtain assistance quickly** in the event of a risk situation, particularly through the provision of an alarm system.

Furthermore, regarding **harassment based on specific protected grounds** (sex, gender identity or expression, ethnic origin, religion, disability, sexual orientation, or age) and **sexual harassment**, such conduct may constitute “**discrimination**”²⁰⁸ under the [Discrimination Act](#)²⁰⁹. This law requires employers to:

- **Investigate** if they become aware that an employee believes they have been the victim of harassment or sexual harassment in connection with their work, and, where appropriate, to take the necessary measures to prevent harassment in the future (Chapter 2 – Article 3);
- **Introduce clear guidelines** and operational procedures aimed at preventing harassment and sexual harassment (Chapter 3 – Article 6);
- **Prohibit any form of retaliation** (Chapter 2 – Article 18).



In [France](#), the prohibition of **psychological harassment at work** (*harcèlement moral*) has been enshrined in the Labor Code since 2002. According to [Article L1152-1](#), “no employee shall be subjected to repeated acts of psychological harassment which have the purpose or effect of degrading working conditions in a manner likely to infringe their rights and dignity, impair their physical or mental health, or jeopardize their professional future.” Furthermore, psychological harassment in the workplace is **also punishable under the Criminal Code** in Article 222-33-2.

Beyond the statutory provisions, case law has also developed on this subject, and in the [France Télécom case](#)²¹⁰, “**institutional**” **psychological harassment** (*harcèlement moral institutionnel*) was recognized for the first time by the Court of Cassation²¹¹ in 2025, marking a major legal turning point. Henceforth, the concept of psychological harassment is no longer limited to the behavior of one or more individuals (colleagues or managers) toward another employee (or a limited group of targets/victims), but may also result from a “harassing company policy” implemented by executives or managers and directed at part or all of the workforce.

²⁰⁶ [AFS 1993:2. Våld och hot i arbetsmiljön.](#)

²⁰⁷ In Chapter 5 of [AFS 2023:2. Arbetsmiljöverkets föreskrifter och allmänna råd om planering och organisering av arbetsmiljöarbete.](#)

²⁰⁸ [Diskrimineringsombudsmannen \(DO\). Arbeta mot sexuella trakasserier med hjälp av två lagar.](#)

²⁰⁹ [Diskrimineringslag \(2008:567\).](#)

²¹⁰ The *France Télécom* case refers to a major media and judicial affair that followed a wave of suicides and psychological suffering among this company’s employees, resulting from particularly aggressive and harassing management practices and restructuring policies implemented by the company’s management.

²¹¹ [Cour de cassation, Chambre criminelle, 21 janvier 2025, Pourvoi n° 22-87.145.](#)

With regard to **sexual harassment at work**, [Article L1153-1 of the Labor Code](#) defines it as repeated remarks or conduct of a sexual or sexist nature that either violate the employee's dignity due to their degrading or humiliating character, or create an intimidating, hostile, or offensive environment for the employee.

A 2021 law²¹² clarified that **sexual harassment** also occurs:

- “When the same employee is subjected to such remarks or conduct by several people, acting in concert or at the instigation of one of them, even if each of these individuals has not acted repeatedly;
- When the same employee is subjected, successively, to such remarks or conduct by several people who, even in the absence of concerted action, are aware that such remarks or conduct constitute a pattern of repetition.”

[Article L1153-1](#) also provides that conduct equivalent to sexual harassment includes “any form of serious pressure, even if not repeated, exerted with the actual or apparent aim of obtaining an act of a sexual nature, whether sought for the benefit of the perpetrator or for the benefit of a third party.” Furthermore, sexual harassment is punishable, regardless of the circumstances, under Article 222-33 of the Criminal Code.

It should be noted that the [Labor Code](#) also protects victims of **psychological or sexual harassment against retaliation by the employer** (protection against any sanction, dismissal, or other discriminatory measure for having suffered or refused to suffer acts of harassment or for having reported or testified about them, Articles L1152-2 and L1153-2).

Regarding **workplace prevention**, the employer must:

- Consider, when planning prevention measures, “**risks related to psychological harassment and sexual harassment, [...], as well as those related to sexist behavior**” (Article L4121-2 of the Labor Code);
- **Take all necessary measures to prevent acts of sexual and psychological harassment**, to put an end to them, and to sanction them (Articles L1153-5 and L1152-4 of the Labor Code). In addition, the employer is required to inform employees by any means of the content of the relevant articles of the Criminal Code. With regard specifically to sexual harassment, the employer must also provide the contact details of the competent authorities and services, as well as information on “civil and criminal legal actions available in cases of sexual harassment.”

In addition:

- **In companies with at least 11 employees**, the Social and Economic Committee (*comité social et économique*, CSE)²¹³ must appoint, from among its members, a representative for matters relating to the prevention of sexual harassment and sexist behavior (Article L2314-1 of the Labor Code).
- **In companies with 50 or more employees**, internal work regulations are required. These must include (Article L1321-2) a reminder of the “provisions relating to psychological and sexual harassment and sexist behavior” as set forth in the Labor Code.

²¹² [Loi n° 2021-1018 du 2 août 2021 pour renforcer la prévention en santé au travail](#).

²¹³ The CSE is mandatory in companies with at least 11 employees. The CSE includes the employer and a staff delegation whose number of members is determined by decree of the Council of State, according to the size of the workforce ([source](#)).

- **In companies with at least 250 employees**, a designated representative “responsible for guiding, informing, and supporting employees in the fight against sexual harassment and sexist behavior” is mandatory (Article L1153-5-1 of the Labor Code).

It is also important to note the existence of the [2010 French National Interprofessional Agreement \(*accord national interprofessionnel*, ANI\) on harassment and violence at work²¹⁴](#), **made mandatory for the private sector** by ministerial decree²¹⁵ (see below under “Focus on the Implementation of the European Framework Agreement on Harassment and Violence at Work”). This ANI recommends, among other measures, the drafting of a “**reference charter**” setting out the procedures to be followed in cases of violence and harassment and detailing the measures to combat such conduct (this charter is to be annexed to the company’s internal work regulations).

Finally, with regard to **mediation and remedies available to workers** who are victims of harassment and violence:

- **In cases of psychological harassment**: Article L1152-6 of the Labor Code provides for the **possibility of mediation at the request of any person within the company who considers themselves to be a victim of psychological harassment, or of the person accused of such conduct**. The choice of mediator must be agreed upon by the parties: once informed of the state of relations between the parties, the mediator attempts to reconcile them and submit proposals, which are recorded in writing, with the aim of ending the harassment. If conciliation fails, the mediator informs the parties of any potential sanctions and the procedural safeguards available to the victim.
- **In cases involving an infringement of a worker’s rights, health or freedoms**: the Labor Code establishes (Article L2312-59) **a procedure to be followed when a member of the staff delegation to the Social and Economic Committee (CSE) becomes aware** (for example, through the intermediary of an employee) of an infringement of personal rights, physical or mental health, or individual freedoms within the company that is neither justified by the nature of the task to be performed nor proportionate to the aim pursued. Such an infringement may also result from acts of sexual or psychological harassment. In these situations, the elected member of the CSE must refer the matter to the employer, who must immediately conduct an investigation and take the necessary measures to remedy the situation. If the employer fails to act, the victim (or the elected member with the victim’s consent) may bring the matter before the Labor Court.



In **Belgium**, [Article 119 of the Social Criminal Code](#) punishes “any person who comes into contact with workers while they are performing their work and who [...] commits an **act of violence or psychological or sexual harassment at work**.”

At the same time, [specific preventive measures have been introduced into OSH legislation](#), notably in 2007 and 2014, as part of the aforementioned reforms on PSRs. On these occasions, violence and psychological and sexual harassment at work were better defined, and the specific procedures for addressing violent and harassing behavior at work was improved (“formal or informal request for psychosocial intervention,” see above under “National Legislation and the Inclusion of PSRs in Risk Assessments”).

²¹⁴ [Accord national interprofessionnel du 26 mars 2010 relatif au harcèlement et à la violence au travail.](#)

²¹⁵ [Arrêté du 23 juillet 2010 portant extension d'un accord national interprofessionnel sur le harcèlement et la violence au travail.](#)

Subsequently, [a law and a royal decree of 2023](#) **strengthened the existing protection system²¹⁶ against retaliation by the employer toward victims and witnesses** of acts of violence, psychological harassment (including cases related to a protected ground of discrimination), or sexual harassment at work.

Among the new provisions, protection no longer begins only upon receipt of a formal request for psychosocial intervention or a complaint, but as soon as the employer becomes aware of the action taken by the worker.



In **Spain**, the fight against harassment (psychological and sexual) at work is based on several legislative texts. The Criminal Code defines **psychological harassment** (including at work, Article 173.1) and **sexual harassment** at work (Article 184). For the latter, aggravating circumstances may apply, particularly when it is committed “by taking advantage of a position of professional, educational, or hierarchical superiority.”

Furthermore, [Organic Law 3/2007 for effective equality between women and men²¹⁷](#) aims to eliminate all forms of workplace discrimination based on sex, **to prevent and take action against sexual harassment and harassment on grounds of sex**. It requires, in both the public and private sectors, the implementation of preventive measures in this area and the establishment of specific procedures for handling complaints:

- **In the private sector**, measures (such as the development and dissemination of codes of good practice, the implementation of information campaigns, or training initiatives) must be negotiated with workers’ representatives (Article 48).
- **In the public sector**, Article 62 provides for the formalization of an “**action protocol** against sexual harassment and harassment on grounds of sex,” which public administrations must **negotiate** with workers’ representatives.

Since 2020²¹⁸, **such a protocol has also been mandatory for private-sector companies with more than 50 employees** and must be included in their Workplace Equality Plan. In addition, [a 2022 law²¹⁹](#) strengthened this framework:

- By expanding the **scope** of workplace prevention measures and **the protocol** to cover, beyond sexual harassment and harassment on grounds of sex, “any behavior contrary to sexual freedom and **moral integrity**,”
- By requiring employers to include **an analysis of the risk of “sexual violence”** in the occupational risk assessments for jobs held by female workers;
- By granting **new rights to victims** of sexual violence and harassment (even when unrelated to work), such as the option to reduce or reorganize their working hours, to request geographical mobility, to have their workstation adapted, to receive the necessary support for their reintegration into work, and to suspend their employment contract while retaining their position.

²¹⁶ [SPF Emploi, Travail et Concertation sociale. Violence, harcèlement moral et harcèlement sexuel au travail : modifications de la protection du travailleur contre les représailles. 15 May 2023.](#)

²¹⁷ [Ley Orgánica 3/2007, de 22 de marzo, para la igualdad efectiva de mujeres y hombres.](#)

²¹⁸ [Real Decreto 901/2020, de 13 de octubre, por el que se regulan los planes de igualdad y su registro y se modifica el Real Decreto 713/2010, de 28 de mayo, sobre registro y depósito de convenios y acuerdos colectivos de trabajo.](#)

²¹⁹ [Ley Orgánica 10/2022, de 6 de septiembre, de garantía integral de la libertad sexual.](#)

To facilitate the implementation of the 2022 law, the government has published a **model protocol**, available online²²⁰.



In **Denmark**, a **2023 law**²²¹ aims to better prevent and combat **sexual harassment in the workplace**, amending, among other things, the Working Environment Act (*Arbejdsmiljøloven*) and the Act on Equal Treatment between Men and Women (*Ligebehandlingsloven*, which already prohibited sexual harassment at work, defined as a form of discrimination).

It emphasizes the **employer's obligations** in this regard (notably those “to provide a working environment free from sexual harassment [...] and to address cases of sexual harassment”). Furthermore, it gives victims of sexual harassment the option to **seek compensation for the harm suffered from the employee who committed** such acts.

In terms of prevention, the aforementioned **2020 Executive Order** on psychosocial working environment²²² (see above under “National Legislation and the Inclusion of PSRs in Risk Assessments”) includes provisions against offensive behavior (psychological and sexual harassment) and work-related violence, whether occurring at the workplace or outside working hours. Regarding this last aspect:

- **Work-related violence during work:** the workplace must be designed in such a way that there is sufficient opportunity for employees to find safety in the event of a violent incident. If the physical interior design cannot reasonably be modified, other safety measures must be taken. Furthermore, access to high-risk areas must be restricted to trained personnel only. Finally, work performed in isolation that presents a specific risk of violence must be organized to mitigate this risk; if this is impossible, working in isolation is prohibited;
- **Work-related violence outside working hours:** the employer must establish guidelines and provide employees with appropriate guidance on how to handle these external incidents. The employer must also ensure that any employee who is a victim of a work-related assault occurring outside of working hours is offered assistance, particularly in reporting the incident to the police.



In **Germany**, protection against **sexual harassment at work** is governed by the **General Equal Treatment Act of 2006**²²³. **This Act requires employers to take the necessary measures to ensure a work environment free from any form of discrimination** (including sexual harassment, which is defined by the Act as a form of discrimination). In particular, the employer must, in an appropriate manner, notably through initial and continuing vocational training, provide information on the inadmissibility of such discrimination and take appropriate steps to ensure its prevention.

²²⁰ [Subdirección General para el Emprendimiento, la Igualdad en la Empresa y la Negociación Colectiva de Mujeres. PROTOCOLO para la prevención y actuación frente al ACOSO SEXUAL, el ACOSO POR RAZÓN DE SEXO y otras CONDUCTAS CONTRARIAS a la LIBERTAD SEXUAL y la INTEGRIDAD MORAL en el ámbito laboral. 2023.](#)

²²¹ [LOV nr 324 af 28/03/2023.](#)

²²² [Bekendtgørelse om psykisk arbejdsmiljø.](#) English version: [Executive order on psychosocial working environment.](#)

2026 Update: the 2020 Executive Order was repealed and replaced, with effect from 1 July 2026, by a new Executive Order under the same title (*Bekendtgørelse om psykisk arbejdsmiljø*, [BEK nr 605 af 29/06/2026](#)), which largely retains the substantive requirements and key provisions of the previous text. The Danish requirements and preventive measures described in this chapter therefore remain unchanged.

²²³ [Allgemeines Gleichbehandlungsgesetz \(AGG\).](#)

By contrast, **at present, no law defines or specifically addresses²²⁴ psychological harassment at work**, even though workers may in some cases be protected under the General Equal Treatment Act (particularly when the harassment is based on grounds such as race or ethnic origin, gender, religion or belief, disability, age, and sexual orientation). However, **case law has developed²²⁵ in this area**, notably that of the Federal Labor Court (*Bundesarbeitsgericht*), which has defined psychological harassment as “the systematic manifestation of hostility, harassment, or discrimination among employees or by supervisors.”



Finally, in **Italy**, a 2006 legislative decree²²⁶, establishing the “**Code of Equal Opportunities between Women and Men**,” considers (Article 26) **sexual harassment and harassment on grounds of sex** as forms of **discrimination**. This text:

- Reiterates (Article 26) the employer’s obligation to ensure working conditions that guarantee the integrity and dignity of workers (in accordance with Article 2087 of the Civil Code), including by agreeing with workers’ trade union organizations on **the most appropriate information and training initiatives to prevent sexual harassment** in the workplace;
- Provides (Article 50 bis) that **collective bargaining agreements** “may provide for specific measures, including codes of conduct, guidelines, and good practices, to prevent all forms of sex discrimination and, in particular, harassment [on grounds of sex] and sexual harassment in the workplace, in working conditions, as well as in training and career development.”

More recently, **a 2017 law²²⁷ introduced specific protection against any sanction or adverse treatment**, including dismissal, for individuals who file **a legal action** for having suffered harassment on grounds of sex and/or sexual harassment at work.

Finally, with the aim of reducing **incidents of violence and aggression committed against healthcare and socio-healthcare professionals**, **a 2020 law²²⁸ introduced provisions to enhance the safety of these workers in the performance of their duties**. It notably introduced harsher administrative and criminal penalties for those who commit assaults against these professionals.

²²⁴ Schlun & Elseven Rechtsanwälte. *Sexual Harassment & Bullying in the Workplace*.

²²⁵ Epp Rechtsanwälte Avocats. *Employeurs en Allemagne : la notion de harcèlement moral*. 9 December 2021.

²²⁶ *DECRETO LEGISLATIVO 11 aprile 2006, n. 198. Codice delle pari opportunità tra uomo e donna, a norma dell'articolo 6 della legge 28 novembre 2005, n. 246.*

²²⁷ *LEGGE 27 dicembre 2017, n. 205. Bilancio di previsione dello Stato per l'anno finanziario 2018 e bilancio pluriennale per il triennio 2018-2020.*

²²⁸ *LEGGE 14 agosto 2020, n. 113 Disposizioni in materia di sicurezza per gli esercenti le professioni sanitarie e socio-sanitarie nell'esercizio delle loro funzioni.*

Focus on the Implementation of the European Framework Agreement on **Harassment** and **Violence** at Work (2007)

The Framework Agreement on Harassment and Violence at Work, signed by the European cross-industry social partners in 2007, emphasizes that violence and harassment are unacceptable in the workplace and that they can have serious consequences not only for individuals but also for society and the economy. These phenomena can affect any workplace and any sector, although certain occupations may be more exposed than others.

In general, **violence and harassment can take various forms in the workplace:**

- Be physical, psychological, and/or sexual;
- Occur as isolated incidents or as more systematic patterns of behavior;
- Occur amongst colleagues, between superiors and subordinates, or be perpetrated by third parties such as clients, patients, students, etc.;
- Range from minor cases of disrespect to more serious acts, including criminal offenses, which require the intervention of public authorities.

The agreement also provides detailed definitions:

- **Violence** occurs when one or more workers are assaulted in circumstances relating to work.
- **Harassment** occurs when one or more workers are repeatedly and deliberately abused, threatened and/or humiliated in circumstances relating to work.

The agreement aims to raise awareness and increase understanding among employers, workers, and their representatives, as well as to provide them with **an action-oriented framework for identifying, preventing, and managing** problems of harassment and violence at work. The document does not provide specific guidance regarding the risk assessment phase; rather, it highlights that **awareness-raising and training**, particularly for managers, are key to reducing risks. Every company needs to have a **clear internal policy** stating that such behavior will not be tolerated. This policy should also include a **specific procedure** to be followed where cases of violence or harassment arise. The procedure could initially include an **“informal stage”** during which a person trusted by management and workers is available to provide advice and assistance.

Overall, **the appropriate procedure to be followed within the company in cases of violence or harassment should include the following key elements:**

- Ensuring the necessary discretion to protect the dignity and privacy of all parties involved;
- Not disclosing any information to parties not involved in the matter;
- In the event of complaints, investigating and addressing the matter without undue delay;
- Handling the matter impartially and treating all parties involved fairly;
- Ensuring that complaints are supported by detailed information;
- Not tolerating false accusations, which may result in disciplinary action;
- Seeking external assistance if necessary;
- Taking appropriate disciplinary action in cases of proven violence or harassment, up to and including dismissal, where appropriate.

In **2016**, the **European Commission published a study** (*Study on the Implementation of the Autonomous Framework Agreement on Harassment and Violence at Work. Final report. 2016*) detailing the implementation of this Framework Agreement (which is not legally binding on Member States but commits the signatory social partners and their member organizations) across EU countries. Various measures were taken at different levels:

In **France**, a **National Interprofessional Agreement (*accord national interprofessionnel, ANI*) on harassment and violence at work**, signed on 26 March 2010, incorporated and expanded upon the 2007 European Framework Agreement. As with the 2008 National Interprofessional Agreement on work-related stress, this **ANI was extended by ministerial decree** to all employers and employees in the private sector, regardless of company size or industry.

The French ANI supplements the European Framework Agreement by providing further details on prevention and management, and **explicitly classifies violence and harassment as two specific aspects of psychosocial risks**. While it incorporates the original definitions, the ANI illustrates them with concrete examples: violence ranges from disrespect and incivility to physical aggression and the intent to cause harm.

Particular attention is paid to “incivility.” Such behavior undermines working conditions (especially in occupations involving contact with the public) and the working environment; therefore, companies must neither overlook nor trivialize it.

The ANI goes beyond the European Framework Agreement by adding **a specific section on violence against women**. In light of persistent stereotypes and the limited understanding of sexual harassment, the text calls for strong awareness-raising efforts at all levels of the hierarchy, as well as the implementation of concrete prevention and support policies.

Moreover, it clarifies employers' commitments: no employee shall be subjected to violence or harassment, whether originating internally or externally (from third parties). **The employer must take all necessary preventive measures, which may include adopting a “reference charter”** detailing the procedures to be followed if a case arises and ensuring that teams are properly informed.

Prevention relies on vigilance, awareness-raising, and, above all, training. Sectoral social partners have a role to play in providing companies with appropriate tools and measures, aimed in particular at improving work organization and fostering dialogue. The ANI also emphasizes the importance of occupational safety and health stakeholders: the occupational physician and the Social and Economic Committee (*comité social et économique*, CSE, formerly CHSCT) play essential roles in proposing concrete actions. Similarly, the Occupational Health and Prevention Services (*services de prévention et de santé au travail*, SPST) provide valuable multidisciplinary expertise, from risk identification to the implementation of preventive measures.

Finally, the ANI goes further than the European Framework Agreement with regard to sanctions and support for victims:

- No employee may be subject to disciplinary action or dismissal for having experienced, or having refused to submit to, acts of violence.
- Victims are entitled to support and, where necessary, assistance in remaining in or returning to work. If their health is affected, the company implements appropriate support measures, including medical and psychological assistance.
- In the event of an assault by a third party, the company may also provide legal assistance to the employee.

For **Italy**, the European Commission did not identify any national-level implementation. In the public sector, Italian employers' organizations and trade unions assessed their existing collective agreement (dating from 2003) and concluded that no additional measures were necessary to implement the objectives of the Framework Agreement (with the exception of certain companies in the sector, such as *Poste Italiane* – the national postal service – which took steps to strengthen the prevention of violence and harassment in their agreement). However, in the same year as the Commission's report, **the national social partners (in the private sector) signed an inter-confederal agreement** (*Accordo quadro sulle molestie e la violenza nei luoghi di lavoro. 25 January 2016*) implementing the 2007 European Framework Agreement. Drawing on the definitions and provisions of the European text, it aims to provide a reference framework on the matter. However, unlike in France, the agreement has not been formally extended and made mandatory at national level by law or decree. As a result, it remains **an instrument that is not binding on companies in general, and commits only the signatory organizations** (and indirectly the companies that apply national collective agreements concluded by these organizations).

In **Belgium**, it was considered that no specific implementation measures were necessary, given the legislation already in force. However, **in 2014, a major legislative reform on PSRs** (also including violence and harassment, see earlier in this chapter) **established new obligations**, including specific procedures to be followed in the event of incidents of violence and harassment in the workplace.

In **Spain**, as with the European Framework Agreement on work-related stress, the principles and content of the European Framework Agreement on harassment and violence at work were incorporated into the **2008 Inter-confederal Agreement on Collective Bargaining** (*Acuerdo Interconfederal para la Negociación Colectiva, AINC*). The AINC is not legally binding, but contains recommendations and priorities for the signatories' member organizations when they engage in collective bargaining. Nevertheless, these recommendations may, where appropriate, be incorporated and adapted into binding collective agreements at sectoral, regional, or company level.

In **Germany**, **Denmark** (for the private sector) and **Sweden**, the European Commission notes that there has been no specific implementation, as **the national social partners considered that existing national legislation and collective agreements were already sufficient** to meet the Framework Agreement's requirements:

- In **Germany**, various measures had already been taken at both sectoral and company levels through collective agreements.
- In **Denmark**, the content of the 2007 Framework Agreement was incorporated into an agreement signed by the social partners in the public sector (*Trivselsaftale*, "Well-being Agreement"), while no similar measures were taken in the private sector. Since then, the legal framework has evolved, with the adoption in 2020 of the "Executive Order on the Psychosocial Working Environment" (see earlier in this chapter), imposing new obligations on employers (in both the public and private sectors) regarding psychosocial risks, including violence and harassment. This framework was further strengthened in 2023 by a new law (*LOV nr 324 af 28/03/2023*) introducing specific provisions against sexual harassment in the workplace.
- In **Sweden**, the European Framework Agreement was **translated and disseminated** by the social partners, accompanied by a joint statement welcoming its usefulness and a booklet on the prevention of psychological harassment. Subsequently, as in Denmark, the legal framework evolved. In 2015, a binding regulation from the Swedish Work Environment Authority imposed new obligations regarding psychosocial risks, including the prevention of offensive conduct.

In non-European Countries

In the **United States**, **harassment is considered a form of employment discrimination**²²⁹ that violates the Civil Rights Act of 1964, the Age Discrimination in Employment Act of 1967 (ADEA), and the Americans with Disabilities Act of 1990 (ADA).

In particular, **harassment** refers to unwelcome conduct based on race, color, religion, sex (including sexual orientation, transgender status, or pregnancy), national origin, age (40 and older), disability, or genetic information (including family medical history). **Sexual harassment** is considered a form of sex discrimination.

Harassment is unlawful when enduring the offensive conduct becomes a condition of continued employment, or the conduct is severe or pervasive enough to create a work environment that a reasonable person would consider intimidating, hostile, or abusive.

There is **no specific legal definition of psychological harassment** (workplace bullying). However, certain behaviors associated with it may be unlawful if they constitute harassment based on protected characteristics (race, color, religion, etc.) or if they violate other existing laws.

The U.S. Equal Employment Opportunity Commission (EEOC)²³⁰ is responsible for enforcing federal laws prohibiting employment discrimination. It also has the authority to investigate charges of discrimination (or retaliation for participating in a discrimination complaint).

In April 2024, **the EEOC published a guide titled “Enforcement Guidance on Harassment in the Workplace”**²³¹, updating the previous version of the document for the first time in 25 years. The guidance contained numerous examples of discriminatory and harassing behavior to be prohibited, as well as practical advice for employers on how to prevent and respond to such situations. Among the measures, it recommended (as the guidance was not binding) that every employer implement a **written anti-harassment policy** defining prohibited conduct, reporting mechanisms, procedures to follow...

However, in January 2026, **the EEOC withdrew this guide**²³² from its website. This decision came amid challenges, including legal ones, regarding some of its interpretations of the laws (which some viewed as exceeding the EEOC’s mandate), as well as by changes in the federal political and regulatory landscape, particularly with regard to gender identity.

At the state level, rules against harassment at work may be stricter. For example, some states (including **California**²³³, **Connecticut** and **New York State**, among others²³⁴) have made it mandatory for employers to establish a written anti-harassment policy and/or to provide training on the subject.

²²⁹ [U.S. Equal Employment Opportunity Commission. Harassment.](#)

²³⁰ [U.S. Equal Employment Opportunity Commission. Overview.](#)

²³¹ [U.S. Equal Employment Opportunity Commission. Enforcement Guidance on Harassment in the Workplace. 2024.](#)

²³² [Maunz, A., White, L., Mrizek, R. EEOC Rescinds Enforcement Guidance on Harassment in the Workplace. 27 January 2026.](#)

²³³ For further information on the obligations in California, see: [State of California, Civil Rights Department. Harassment Prevention Guide. For California employers. 2025.](#)

²³⁴ [Healthy Work Campaign. Healthy Work Strategies. Laws to prevent workplace sexual harassment. 2019.](#)

These policies and/or training programs are often limited to sexual harassment and/or discrimination and harassment based on protected characteristics (race, age, religion, etc.). Behaviors related to psychological harassment are not always covered by these requirements, with the exception of a few states²³⁵ that have enacted specific laws against workplace bullying, such as **Tennessee**. Ultimately, the exact scope of these measures depends on the state in question.

Regarding **workplace violence perpetrated by third parties**, the **State of New York** passed a law²³⁶ (**Retail Worker Safety Act**) in 2024 that requires employers (with at least 10 employees) in the retail sector to **establish a written “retail workplace violence prevention policy” and to provide mandatory training** (to be conducted every two years for companies with fewer than 50 employees, annually for all others).

The policy must include, among other things, **a list of all factors that may expose workers to risks of violence** (night shifts, handling cash transactions with customers, uncontrolled or unsecured access to the workplace, working alone or in small teams, etc.) **as well as the measures and solutions** the employer will implement to prevent incidents of violence. A template for this policy has been developed by the **New York State** Department of Labor. It is available online²³⁷ in several languages.

In addition, **from 1 January 2027, all retail employers with 500 or more employees must:**

- Provide employees with a **silent response button**, allowing them to immediately request the intervention of a security officer, manager, or supervisor in case of emergency.
- Provide employees with **training** on how to use this device.

At the federal level, a bill²³⁸ is currently under consideration regarding **workplace violence prevention**, although it is limited to workers in the **health care and social service** sectors. If adopted, this bill would require the employers concerned to assess the risk of workplace violence and its risk factors, develop and implement detailed prevention plans and training aimed at reducing the risk, and establish procedures for reporting and investigating all incidents of violence.



In **Australia**, three existing pieces of legislation were amended in 2022 regarding **sexual harassment**:

- With regard to OSH, the aforementioned “**Model Work Health and Safety (WHS) Regulations**” (see above under “National Legislation and the Inclusion of PSRs in Risk Assessments”) were amended in 2022 to include an entire section on PSRs. As noted by Safe Work Australia²³⁹, **employers must ensure that workers are not exposed to risks to their psychological or physical health and safety, which include psychosocial risks and risk factors, such as sexual harassment and gender-based harassment**. In terms of prevention, employers are required to assess and eliminate (or, if this is not reasonably practicable, minimize) PSRs by implementing the necessary control measures. Harassment is included within the broader concept of psychosocial risks, with the aim of safeguarding workers’ physical and psychological health.

²³⁵ [Healthy Work Campaign. Healthy Work Strategies. Workplace Bullying Prevention Laws and Regulations. 2019.](#)

²³⁶ [NYS Labor Law, Section 27-e. Prevention of retail workplace violence.](#)

²³⁷ [New York State, Department of Labor. Retail Workplace Violence Prevention Policy.](#)

²³⁸ In the U.S. House of Representatives: [H.R.2531 - Workplace Violence Prevention for Health Care and Social Service Workers Act.](#)

In the U.S. Senate: [S.1232 - Workplace Violence Prevention for Health Care and Social Service Workers Act.](#)

²³⁹ [Safe Work Australia. WHS duties.](#)

- In addition to OSH obligations, other measures regarding sexual harassment are provided for by the [1984 Sex Discrimination Act](#)²⁴⁰ (SDA), whose scope is not limited to the employment context. It **prohibits discrimination on grounds of sex, gender identity, or sexual orientation, among other things**. According to this Act, a person sexually harasses another person (the person harassed) if they:

- a) Make an unwelcome sexual advance, or an unwelcome request for sexual favors, to the person harassed; or
- b) Engage in other unwelcome conduct of a sexual nature in relation to the person harassed;

in circumstances in which a reasonable person, having regard to all the circumstances, would have anticipated the possibility that the person harassed would be offended, humiliated or intimidated.

With regard to the workplace, this law was amended in 2022 to **introduce a positive duty**²⁴¹ **for all employers** to take reasonable and proportionate measures to eliminate, as far as possible, discrimination on grounds of sex, sexual harassment, sexist behavior, conduct creating a workplace environment that is hostile on grounds of sex, and related acts of victimization.

- At the same time, the [Fair Work Act](#)²⁴² of 2009 (legislation governing workplace relations and employment conditions) was also amended in 2022–2023²⁴³ to add an **explicit prohibition of sexual harassment in connection with work (including in the workplace)** and to grant the Fair Work Commission (FWC, Australia's independent national workplace relations tribunal) expanded powers to deal with related disputes.

In December 2023, [Safe Work Australia published a specific Code of Practice](#)²⁴⁴ summarizing the legislative changes to help employers comply with the legislation and assess and manage risks related to sexual and gender-based harassment.

Regarding **psychological harassment**, the Fair Work Act²⁴⁵ has contained provisions protecting workers against “**bullying at work**” since 2013. A worker is bullied at work if an individual (or group of individuals):

- a) **repeatedly behaves unreasonably** towards the worker, or a group of workers of which the worker is a member;
- b) and that behavior **creates a risk to health and safety**.

As with sexual harassment, the Fair Work Commission (FWC) has broad powers to deal with complaints in this area. The regulatory framework on workplace bullying is supplemented by work health and safety legislation (WHS Acts and Regulations), which covers the management of **psychosocial risks more broadly**.

Finally, more stringent or more detailed legislation may be enacted at the state and territory level in Australia.

²⁴⁰ [Sex Discrimination Act 1984. Latest version C2025C00597 C47. 01 November 2025.](#)

²⁴¹ [Australian Human Rights Commission. *The Positive Duty in the Sex Discrimination Act*.](#)

²⁴² [Fair Work Act 2009. C2025C00644 C69. 07 November 2025. Volume 2.](#)

²⁴³ [Fair Work Ombudsman. *New workplace sexual harassment laws*. 6 March 2023.](#)

²⁴⁴ [Safe Work Australia. *Codes of Practice on Sexual and Gender-based Harassment*. December 2023.](#)

²⁴⁵ [Fair Work Act 2009. C2025C00644 C69. 07 November 2025. Volume 3.](#)



In **Canada**, since 2018, the **Labour Code** (Part II on Occupational Health and Safety) has included the **protection of workers' mental well-being** by requiring the prevention of “accidents, occurrences of harassment and violence and physical or psychological injuries and illnesses,” related to employment (Article 122.1²⁴⁶).

Harassment and **violence** are defined (Article 122) as “any action, conduct or comment, including of a sexual nature, that can reasonably be expected to cause offence, humiliation or other physical or psychological injury or illness to an employee.” This definition is not limited to sexual harassment but encompasses any offensive act, including psychological harassment.

A **2020 Regulation**²⁴⁷ strengthened the Canada Labour Code with regard to the prevention of harassment and violence in the workplace by **clarifying prevention, resolution, and support mechanisms**. Employers are now required to **identify risk factors, both internal and external** to the workplace, that contribute to harassment and violence.

Regarding the workplace (**internal factors**), employers must take into account:

- The culture, conditions, activities, and organizational structure;
- All reports, records, and data related to harassment and violence in the workplace;
- The physical design;
- The measures in place to protect psychological health and safety.

In addition, employers must also take into account **circumstances external** to the workplace, such as **domestic violence (“family violence”)**²⁴⁸, that could give rise to harassment and violence at work.

Based on this assessment, in addition to taking the necessary preventive measures, employers must also:

- Develop a “**workplace harassment and violence prevention policy**,” which must include, among other things, a description of risk factors, emergency procedures to be implemented in the event of an incident or threat of harassment or violence, the manner in which the employer will protect the privacy of individuals involved in an incident, the recourse and support measures available to employees, and the name of the person to whom complaints should be addressed;
- Provide **appropriate training** on workplace harassment and violence to everyone (including themselves and their employees), to be reviewed and, if necessary, updated every three years.

²⁴⁶ [Canada Labour Code](#).

²⁴⁷ [Work Place Harassment and Violence Prevention Regulations. SOR/2020-130](#).

²⁴⁸ As explained in this manual of the Canadian Department of National Defence ([Workplace Harassment and Violence Prevention Policy Manual. 2023](#)): family violence may extend into the workplace when the aggressor uses various means (phone calls, text messages, emails, etc.) to influence the targeted employee. Family violence may also occur when the aggressor shows up at the victim's workplace and questions their colleagues or manager about them. “This can affect the health and safety of those directly or indirectly involved, as well as employment.”

As a reminder, the [Canada Labour Code](#) (along with the 2020 Regulation supplementing it) applies to the federal public service, most federal Crown corporations, and the “federally regulated private sector,” including private-sector companies operating across provincial borders (air transport, banks, road transportation companies, among others).

At the provincial and territorial level, [local legislation](#) may also provide for obligations and prevention measures regarding violence and harassment at work. This is the case in the [provinces of Ontario](#)²⁴⁹ and [Manitoba](#)²⁵⁰ (among others²⁵¹), which require a **specific assessment of the risks of harassment and violence** in the workplace, as well as a **written policy** on the matter.



In **Japan**, a 2019 law known as the [Power Harassment Prevention Act](#) targets abusive behavior in the workplace.

“**Power harassment**” (*pawahara*) is a form of psychological harassment (or workplace bullying) centered on **intimidation in the workplace**, involving **an abuse of power** by one employee or supervisor against another. It is reportedly quite widespread in Japan, with the number of consultations relating to *pawahara* at prefectural labor bureaus exceeding 80,000 in 2018²⁵².

Having come into force in stages (in 2020 for large companies and no later than three years thereafter for smaller ones), despite its name, this law introduced, beyond the issue of power harassment, several **new provisions regarding the prevention of various forms of harassment**:

1. It introduced, into the [Act on Comprehensively Advancing Labor Measures](#)²⁵³, the obligation to prevent any behavior constituting **power harassment**, defined as workplace bullying that “exceeds the scope necessary and reasonable in the course of business” and may damage the employees’ work environment.

The employer must provide victims with an effective **consultation system** and implement the necessary corrective measures, including appropriate complaint-handling procedures. Furthermore, the law requires the employer to provide employees with **training** to raise their awareness and understanding of such behavior and its prevention.

As provided for by this law, the Ministry of Health, Labor, and Welfare has published [guidelines](#)²⁵⁴ specifying the relevant **definitions and provisions**, accompanied by examples of conduct constituting **intimidation, whether of a physical nature** (physical violence, isolating a worker from a team, etc.), **or of a psychological nature** (threats, defamation, insults, serious verbal abuse, repeated reprimands that are longer and harsher than necessary, often in the presence of other workers, etc.).

These guidelines specify the **measures to be taken** by the employer: clarifying the internal policy prohibiting power harassment and establishing effective internal or external mechanisms to enable reporting, consultation, and rapid resolution of incidents. The employer must also take appropriate

²⁴⁹ [Occupational Health and Safety Act, R.S.O. 1990, c. O.1. Part III 0.1 “Violence and Harassment”.](#)

²⁵⁰ [Workplace Safety and Health Regulation. Part 10 “Harassment” and Part 11 “Violence in the workplace”.](#)

²⁵¹ Complete list of provinces and territories that have introduced specific obligations and measures regarding harassment and violence in the workplace: [CCOHS. Violence and Harassment in the Workplace - Legislation.](#)

²⁵² [Kojima Law Offices. Advice from Japan’s Law Against Power Harassment.](#)

²⁵³ [Act on Comprehensively Advancing Labor Measures, and Stabilizing the Employment of Workers, and Enriching Workers’ Vocational Lives.](#) English version.

²⁵⁴ [Ministry of Health, Labour and Welfare \(MHLW\). 事業主が職場における優越的な関係を背景とした言動に起因する問題に関して雇用管理上講ずべき措置等についての指針（令和2年厚生労働省告示第5号）.](#)

action in cases of confirmed harassment, such as separating the parties involved, imposing disciplinary sanctions, and providing corrective training.

2. It amended the [Act on Equal Opportunity and Treatment between Men and Women in Employment](#)²⁵⁵, in order to further clarify the measures employers must take to prohibit, **prevent, and address sexual harassment and harassment related to pregnancy, maternity leave, and childcare time.**

Matahara (a contraction of “maternity” and “harassment”) refers to discrimination and adverse treatment inflicted on pregnant workers or those who have given birth. This form of harassment, whether physical or psychological, manifests as unfair treatment that may lead to dismissal, termination of the employment contract, or forced resignation. According to the nonprofit organization *Matahara Net*²⁵⁶, this phenomenon affected one in five working women in 2015.

For these forms of harassment as well, the legislation now provides for the Ministry of Health, Labor, and Welfare to issue [guidelines](#) to assist employers in fulfilling their new obligations regarding sexual harassment²⁵⁷ and *matahara*²⁵⁸. As with power harassment, the law and these guidelines set out rules that are structured around four key areas:

- **Applicable definitions:** clarification of what constitutes sexual harassment and *matahara*, supported by concrete examples;
- **Prevention:** adoption of internal policies prohibiting such practices, provision of information to all staff, and organization of awareness-raising training;
- **Support:** establishment of effective consultation systems to enable workers to seek advice, report incidents, and have their complaints handled appropriately;
- **Response:** measures to be taken in cases of confirmed harassment, including disciplinary sanctions and further awareness-raising efforts.

Regardless of the type of harassment (psychological, sexual, or maternity-related), employers are prohibited from dismissing, disciplining, or treating an employee unfavorably on the grounds that they sought consultation or reported incidents of harassment.

Finally, **this regulatory framework was further strengthened in 2025**, with [new provisions](#) taking effect in 2026²⁵⁹:

- In an effort to combat violence (both physical and verbal) and threats from third parties, employers will be required to take action against “**customer harassment**” (more specifically, defined as “behavior, acts, and/or remarks by customers, business partners, facility users, or other individuals associated with the employer’s business that exceed socially acceptable limits and harm the employees’ work environment”).

²⁵⁵ [Act on Equal Opportunity and Treatment between Men and Women in Employment.](#)

²⁵⁶ [Matahara Net. What is Matahara?](#)

²⁵⁷ [Ministry of Health, Labour and Welfare \(MHLW\). 事業主が職場における性的な言動に起因する問題に関して雇用管理上講ずべき措置等についての指針（平成18年厚生労働省告示第615号）.](#)

²⁵⁸ [Ministry of Health, Labour and Welfare \(MHLW\). 事業主が職場における妊娠、出産等に関する言動に起因する問題に関して雇用管理上講ずべき措置等についての指針（平成28年厚生労働省告示第312号）.](#)

²⁵⁹ [Ministry of Health, Labour and Welfare \(MHLW\). 令和7年の労働施策の総合的な推進並びに労働者の雇用の安定及び職業生活の充実等に関する法律（労働施策総合推進法）等の一部改正について.](#)

As with other forms of harassment, employers are required to implement a range of **appropriate prevention and protection measures** for their employees (internal policies, training, consultation mechanisms and identification of solutions for affected workers, prohibition of any adverse treatment against the worker who reported such abuse, etc.).

- Employers will be required to prevent and take action against **sexual harassment** not only in relation to their employees but also during the recruitment process. The **protections** and measures already in place against this form of harassment are therefore **extended to situations involving job applicants** (interviews, contacts, meetings, etc.).



In 2019, **South Korea** amended its **Labor Standards Act**²⁶⁰ by introducing a new chapter dedicated to **workplace bullying** (understood primarily as a form of abuse of power and intimidation).

It prohibits employers and employees from taking advantage of “their superior position or relationship in the workplace to engage in conduct that goes beyond what is reasonable in the context of work and causes physical or mental suffering to another employee or deteriorates their work environment” (Article 76-2).

If an employer becomes aware of a case of intimidation of this type, they must **conduct an objective investigation without delay** with the parties involved to confirm the facts. **Appropriate measures must be implemented** (such as changing the employee’s place of work or ordering paid leave), but no action may be taken against the victim’s will. Where workplace bullying is confirmed, the employer must also take appropriate measures against the perpetrator, such as disciplinary action or a job reassignment.

The employer may not dismiss or otherwise treat unfavorably victims or workers who report a case of workplace bullying. If the employer violates this provision, the law (Article 109) provides for imprisonment for up to 3 years or a fine of up to KRW 30 million (approximately EUR 18,000). Additional administrative fines apply to violations of other provisions relating to workplace bullying (Article 116).

Furthermore, in accordance with Article 93 of the same law, employers with at least ten employees must establish **internal work regulations** covering several aspects: working hours, rest periods, wages, bonuses, retirement... and, since 2019, the **prevention of workplace bullying** and the measures to be taken should such incidents occur.

At the same time, the **Korean OSH Act**²⁶¹, revised in 2021, contains measures aimed at preventing health impairments caused by **customers’ abusive language and aggression**, particularly in professions involving the sale of goods or the provision of services.

Article 41 of this Act requires employers to take action when an employee suffers, or is at risk of suffering, from physical or mental health problems related to such abusive behavior. Corrective measures include temporary suspension from work or reassignment to other duties. Employees have

²⁶⁰ [Labor Standards Act](#).

²⁶¹ [Occupational Safety and Health Act](#). English version.

the right to request these preventive measures without fear of retaliation (dismissal or adverse treatment).

Further information on the specific measures to be implemented by the employer is provided in Article 41 of the Enforcement Rule²⁶² of this Act, as well as on an official ministerial website²⁶³. Among these, the employer must:

- Display written notices or provide audio announcements requesting customers to refrain from any abusive language or inappropriate behavior;
- Establish clear protocols for dealing with critical situations, including response guidelines and procedures for requesting assistance;
- Provide regular training for staff, both on the content of the adopted protocols and on the prevention and management of violence and conflict situations.

Regarding **sexual harassment at work**, the [Equal Employment Opportunity and Work-Family Balance Assistance Act](#)²⁶⁴ was amended in 2017 to strengthen obligations and preventive measures in this area.

In addition to the general obligation to take the necessary measures to prohibit and prevent sexual harassment in the workplace, the employer is now required to provide **annual training** for employees on the prevention of sexual harassment and on creating the conditions necessary for a safe working environment.

Furthermore, any employee (not only the victim) may report an incident of sexual harassment to the employer. The victim and any other employee who has reported such conduct must be adequately **protected against any form of retaliation** (discrimination, adverse treatment, job reassignment, dismissal, etc.).

The employer must launch **an investigation without delay and take the necessary measures** to protect the victim, such as changing the victim's workplace or granting paid leave (unless the victim refuses), and must take action against the perpetrator of the harassment (e.g., disciplinary action). Specific administrative and criminal penalties are provided for in the event of the employer's failure to comply with these obligations²⁶⁵.

²⁶² [산업안전보건법 시행규칙](#).

²⁶³ [고객의 폭언 등에 대한 건강장해 예방조치](#).

²⁶⁴ [Equal Employment Opportunity and Work-Family Balance Assistance Act](#). English version.

²⁶⁵ [Ius Laboris. South Korea – Employment Law Review 2017. 29 March 2018](#).

Non-legislative Instruments for the Prevention of Psychosocial Risks

Beyond legal requirements, this chapter explores a range of prevention tools designed to help employers better manage psychosocial risks (PSRs), including:

- **Screening and risk assessment tools** for PSRs in private companies and/or public-sector organizations;
- **Guidance documents, resources, and information materials;**
- **Awareness-raising campaigns, national initiatives and networks** promoting the exchange of information and recommendations on the subject;
- **Good practices** highlighted at national level;
- **Financial support and other incentives** to encourage private companies and/or public-sector organizations to take action.

It should be noted that these resources often favor **the term “mental health at work”** over “psychosocial risks.” This approach encompasses not only compliance with legal obligations relating to PSRs but also, more broadly, the promotion of workers’ overall well-being.

Campaigns or tools following this approach may therefore include initiatives or recommendations aimed, for example, at supporting and facilitating the (re)integration into the workforce of people suffering from mental health conditions (whether or not caused by PSRs), or at addressing certain health determinants (promoting healthy nutrition, regular sleep, physical activity, meditation, etc.). Collectively, these measures reflect a proactive effort to create a working environment that fosters open communication, support, and assistance for employees, **often through actions that go beyond the minimum legal requirements.**

In **France**, the term “mental health at work” helps to better encompass both the dynamics of PSR prevention and the company-level negotiations on issues related to “quality of life at work and working conditions” (QVCT, *qualité de vie et des conditions de travail*).

In practice, the boundary between private and professional life is often blurred, as difficulties in one area can potentially impact the other: work-related and personal problems can coexist, or various aspects of life can influence one another.

This is why some companies include in their **welfare policies measures to support employees facing difficulties that are not necessarily related to work**. In this regard, it is possible to consult the experiences of member companies of the French-speaking platform²⁶⁶ of the Global Business Network for Social Protection Floors²⁶⁷, launched in 2015 by the ILO. The French-speaking platform recently published a report²⁶⁸ detailing several “comprehensive” mental health promotion measures implemented by its member companies.

For example, in 2017, the Sanofi Group launched the “**Cancer & Work: Acting Together**” program to support employees affected by cancer (whether they are patients, survivors, or caregivers), who may face difficulties at work as a result of their circumstances, even though these are not caused by the work itself.

²⁶⁶ [École nationale supérieure de Sécurité sociale \(EN3S\). Plateforme des entreprises francophones pour les socles de protection sociale.](#)

²⁶⁷ [ILO. A Global Business Network for Social Protection Floors.](#)

²⁶⁸ [Plateforme des entreprises francophones pour les socles de protection sociale. Entreprises mondiales et santé mentale au travail. 2025.](#)

In such situations, companies may introduce measures to alleviate the difficulties experienced by the employees and improve their well-being, for example by providing emotional support and access to a listening service delivered by experts or a dedicated team, by offering various workplace adjustments tailored to their needs (in terms of workload, job content, or flexible working hours, remote work, etc.), and by raising awareness about cancer among colleagues and managers, among other measures.

However, **this report is limited to the professional dimension**, that is, to situations where work and its psychosocial risk factors (workload, working hours, inability to disconnect, violence, etc.) may be the cause of psychosocial disorders among employees. In this respect, the legislation in several countries (such as **Belgium**) has emphasized the role that employers play in safeguarding employees' psychological integrity, **as work must not be detrimental to either workers' physical or mental health**.

The prevention instruments presented in the following pages focus, as much as possible, on the prevention of PSRs, in accordance with the national legal obligations applicable in many countries. Nevertheless, the two terms “mental health at work” and “psychosocial risks” remain closely linked; national initiatives aimed at improving mental health at work in fact provide for and include numerous measures and actions specifically targeting the prevention of PSRs.

Tools for Screening and Assessing Psychosocial Risks

Key points

There is **no single model** for assessing PSRs in the workplace: several methodologies and types of data collected have been identified. However, in nearly all of the countries studied, official bodies (ministries, occupational accident and disease insurers, research institutes, national OSH authorities, etc.) provide employers with **tools to support the PSR assessment process**.

The use of these resources is not mandatory, as legislation does not usually prescribe a specific tool. However, the instruments identified and presented below have been developed by these entities **in accordance with relevant national legislation** on the matter. They therefore constitute recognized methodological references to assist employers in fulfilling their assessment obligations.

This is particularly true in **Belgium**, **Denmark**, and **Italy**, where legislation sets out a specific list of PSR factors to be analyzed. Consequently, the tools provided by the relevant institutions (such as INAIL in Italy or the Danish Working Environment Authority) include questions specifically addressing these factors identified in the legislation.

The tools reviewed below are **highly diverse, reflecting differences in both national legal frameworks and the scientific methodologies** on which they are based. The number and types of PSR factors assessed vary. Nevertheless, similarities can be identified, as PSR factors generally relate to situations concerning employment conditions, work organization, and interpersonal relationships at work.

Regarding their implementation, these tools may take the form of **group interviews** to engage with workers, or **individual questionnaires**. In the case of questionnaires, it is often recommended to complement the quantitative approach with a qualitative analysis. This involves, for example, organizing post-survey focus groups to collectively explore the results obtained from the questionnaire administered to workers. The digital transition has fostered the development of **computerized tools** (software or web portals), which facilitate the assessment process, for example by automatically sending employees secure links to complete the questionnaires.

Beyond data collection, these platforms also facilitate data processing by generating reports and summary sheets. They may also enable the generation of comparative analyses within the company (for example, among departments, by gender, etc.), as is the case with the INSST tool in **Spain**. These platforms may also compare the company's performance and results with national or sectoral averages (as in **Australia**, **Denmark**, **Italy**, and **South Korea**).

Finally, these tools are very often accompanied by various explanatory documents, tutorials, guidelines, or methodological guides. In addition to facilitating their use, these resources aim to strengthen employers' autonomy by enabling them to interpret the results without necessarily relying on an external consultant²⁶⁹. They also help employers identify and implement the most appropriate preventive measures, for example by proposing practical actions tailored to the issues identified by the assessment.

²⁶⁹ This is the case with the Australian tool "[People at Work](#)." In its official presentation video, it is clearly stated that the results of the psychosocial risk assessment are provided to the employer in the form of reports designed to "take the guesswork out of understanding" them.

In **France**, the French National Research and Safety Institute (*Institut national de recherche et de sécurité*, INRS) offers two tools to help employers conduct **group interviews** (by “work unit”) to assess PSRs:

- For companies with more than 50 employees, the **“RPS-DU” tool** consists of 26 questions, divided into 7 major categories of PSR factors, reflecting the factors identified in the Gollac report (see Chapter 1): work intensity and complexity, demanding working hours, emotional demands, low job autonomy, poor social relationships at work, conflicts of values, and job and employment insecurity.

> An online brochure²⁷⁰ provides the assessment grid, explains the methodology, offers employers advice on how to structure the group interviews, helps them interpret the results and incorporate them into the Single Occupational Risk Assessment Document (*document unique d'évaluation des risques professionnels*, DUERP), and advises them on how to implement appropriate preventive measures.

- For companies with fewer than 50 employees, the ***Faire le point RPS***²⁷¹ (**“Taking Stock of PSRs”**) tool is based on the same model (list of questions and categorization of PSR factors for collective assessment) but is specifically adapted to the needs of smaller organizations.

> The tool provides employers with useful information on how to conduct the group interviews, interpret the data, incorporate the findings into the DUERP, and implement appropriate preventive measures. In particular, once the questions have been answered, this tool generates:

- A table showing the assessment results.
- A detailed assessment report.
- An Excel dashboard to support the development of an action plan.

For SMEs in the health and social care sector, **a specific and adapted version**²⁷² of this tool has also been created.

For the assessment of psychosocial risks, INRS recommends **an approach tailored to the size of the company**. It advises the use of group interviews for SMEs, considering individual questionnaires more appropriate for organizations with 100 or more employees²⁷³.

In all cases, INRS emphasizes that information gathered through questionnaires should be combined with other sources (workplace observations, interviews, analysis of administrative and medical data) to ensure the relevance of the proposed preventive solutions²⁷⁴.

To assist employers in their selection, INRS analyzed **around 40 existing questionnaires**²⁷⁵ from various sources (France and other countries, international and European organizations, etc.). Each questionnaire is described in a dedicated factsheet detailing its main characteristics: purpose, level of investigation, psychometric properties, potential biases, etc. This analysis enables companies to select the instrument best suited to their specific situation.

²⁷⁰ [INRS. Évaluer les facteurs de risques psychosociaux : l'outil RPS-DU. 2022.](#)

²⁷¹ [INRS. Outil Faire le point RPS. Évaluation des risques psychosociaux dans les petites entreprises.](#)

²⁷² [INRS. Outil Faire le point RPS pour le secteur sanitaire et social. Une aide pour évaluer les risques psychosociaux. 2020.](#)

²⁷³ [INRS. « Les questionnaires dans la démarche de prévention du stress au travail ». Documents pour le médecin du travail, n°125, pp. 23-55. 2011.](#)

²⁷⁴ [INRS. Évaluation du stress au travail. L'INRS aide au choix des questionnaires. 2010.](#)

²⁷⁵ [INRS. Questionnaires risques psychosociaux. Quand et lequel choisir ?](#)

Finally, although it is not an assessment tool *per se*, the “**Agreement on the Prevention of Psychosocial Risks in the Public Sector**”²⁷⁶, signed in October 2013 by eight trade unions and all public-sector employers, should also be mentioned. It requires every public-sector employer to develop a plan for the assessment and prevention of PSRs.

Complementing the Agreement, a **methodological guide**²⁷⁷ provides practical information on this risk assessment, including a sample questionnaire based on the PSR factors outlined in the aforementioned Gollac report.

However, the guide advises against relying exclusively on this quantitative tool. To overcome the inherent shortcomings of a single assessment method, it recommends a complementary approach, particularly through several possible combinations (depending on the workplace context) of **the following three techniques**: the questionnaire, for a quantitative overview; interviews, to gain deeper insight into employees’ experiences; and direct observation of work, enabling analysis of the actual work activity, which employees “do not always verbalize.”



In **Italy**, following the introduction in 2010 of the **legal obligation to assess the risk of work-related stress**, the National Institute for Insurance against Accidents at Work (*Istituto Nazionale per l’Assicurazione contro gli Infortuni sul Lavoro*, INAIL) published a **methodology** for this purpose the following year, based on the 2010 instructions issued by the “Permanent Advisory Committee for Health and Safety at Work” (*Commissione consultiva permanente per la salute e sicurezza sul lavoro*, see Chapter 3).

This methodology, updated in 2017, is described in an **operational manual**²⁷⁸ that guides employers and prevention professionals through four key phases: preparation, preliminary assessment, in-depth assessment, and intervention planning.

- **Preparation phase**: The employer identifies homogeneous groups of workers and establishes the steering team (*gruppo di gestione della valutazione*, “assessment management team”). This team is responsible for carrying out the assessment and comprises, among others, the employer, the occupational physician, the Health and Safety Manager (*responsabile del servizio di prevenzione e protezione*, RSPP), and the Workers’ Health and Safety Representatives (*rappresentante dei lavoratori per la sicurezza*, RLS).
- **Preliminary assessment (mandatory)**: This step is required for all workplaces. The assessment team analyzes the situation of each homogeneous group using a 66-item checklist developed by INAIL. This analysis, conducted in consultation with workers’ representatives or a sample of workers, focuses on two areas:
 - **Sentinel events**: factual indicators such as accident frequency rates, absenteeism rates, staff turnover, resignations, complaints filed by workers, or disciplinary sanctions.
 - **Factors related to the content and context of work**: 11 factors identified by INAIL (work environment and equipment, task planning, workload and pattern of work, working hours, job

²⁷⁶ [DGAFP. Protocole d’accord relatif à la prévention des risques psychosociaux dans la fonction publique. 2013.](#)

²⁷⁷ [DGAFP. Guide méthodologique d’aide à l’identification, l’évaluation et la prévention des RPS dans la fonction publique. 2014.](#)

²⁷⁸ [INAIL. La metodologia per la valutazione e gestione del rischio stress lavoro-correlato. 2017.](#) This manual is also available in English: [INAIL. The methodology for the assessment and management of work-related stress risk. 2018.](#)

function and organizational culture, role within the organization, career path, decision-making autonomy, control over work, interpersonal relationships at work, and the home-work interface).

- **In-depth assessment:** This stage becomes mandatory when the preliminary assessment reveals a persistent risk of stress within one or more homogeneous groups, despite the corrective measures taken. However, INAIL recommends conducting it systematically, regardless of the results of the preliminary phase.

> This stage investigates **workers' perceptions** regarding factors related to the content and context of work. The employer, where appropriate with the assistance of an external consultant, must use **scientifically validated tools**: focus groups, semi-structured interviews, or questionnaires. If the latter option is chosen, the questionnaire must be administered to all employees in the homogeneous group(s) concerned.

> For organizations with more than 10 employees, INAIL proposes the use of the Italian adaptation of the "Management Standards Indicator Tool"²⁷⁹ developed by the Health & Safety Executive (HSE), Britain's national regulator for workplace health and safety. This 35-item questionnaire is supplemented by a sociodemographic section (age, gender, type of contract, etc.) to refine the risk assessment, although employees remain free to choose not to provide their personal data. The reference manual then guides **the interpretation of the results** in order to define appropriate preventive actions.

- **Intervention Planning:** Based on the results, the employer is required to implement appropriate corrective measures (organizational, technical, procedural, communication, and training interventions).

> These include various types of actions, notably improving aspects related to work organization, redefining and scheduling work, planning activities, human resources management, and training on the prevention of PSRs. **Explanatory tables** and concrete examples of prevention measures in the workplace are listed in the manual.

At the same time, INAIL provides companies with a free **online platform**²⁸⁰ to manage the entire process of assessing work-related stress. This virtual environment centralizes data processing and automatically generates technical reports to be attached to the occupational risk assessment document (*documento di valutazione dei rischi*, DVR, the equivalent of the French DUERP). Its added value lies in its benchmarking capability: the platform is **able to analyze responses to individual questionnaires** (the Italian version of the aforementioned "HSE Management Standards Indicator Tool"), making it possible to determine, for each homogeneous group assessed, **whether the identified risk levels exceed the national reference thresholds recorded** in the platform.

The methodology has undergone two major adaptations:

- **Healthcare sector (2022):** A contextualized version²⁸¹ has been developed to better address the psychosocial risks that are particularly prevalent in the healthcare sector, such as emotional demands and workplace violence.
- **Remote work and technological innovation (2025):** To better assess emerging risks related to remote work and digitalization in the workplace (hyper-connectivity, management

²⁷⁹ [Health & Safety Executive. HSE Management Standards Indicator Tool.](#)

²⁸⁰ Platform accessible [on this INAIL webpage.](#)

²⁸¹ [INAIL. La metodologia per la valutazione e gestione del rischio stress lavoro-correlato - modulo contestualizzato al settore sanitario. 2022.](#)

of virtual teams, blurring of boundaries between private and professional life, etc.), INAIL has developed a version²⁸² incorporating **specific additional modules** for investigating the risk of work-related stress (for example, through **additional questions** in both the preliminary assessment and the in-depth assessment phases).



In **Spain**, the National Institute for Safety and Health at Work (*Instituto Nacional de Seguridad y Salud en el Trabajo*, INSST) has developed **a tool for assessing PSRs**, called **FPSICO**²⁸³, which was updated in 2022. It puts into practice the conceptual framework developed by the Institute in its “Technical Prevention Note (NTP) 926 – Psychosocial Factors: Assessment Methodology”²⁸⁴.

FPSICO is available as **downloadable software**, containing the tools necessary for the PSR assessment. In addition to various tutorials²⁸⁵, an installation guide and a user manual²⁸⁶ explain how the software works and outline the different steps involved.

The methodology is based on **an individual questionnaire consisting of 44 main questions, divided into 9 broad categories of PSR factors**: working time, autonomy, workload, psychological demands, job variety/content, participation/supervision, workers' interest / remuneration and recognition, role performance, relationships and social support.

Although the questionnaire is designed to be completed individually by each worker, FPSICO suggests establishing *unidades de análisis*, **groups of workers** in relatively **homogeneous** work situations, to refine the assessment results.

It is indeed possible to add “**variable questions**” to the list of “fixed” questions, allowing for the distinction of different homogeneous groups (for example, by asking about gender, department, service, occupation, etc.).

The software allows the company not only to collect data but also to analyze it, particularly **by creating comparative tables of the results obtained**: this enables the employer to identify and understand the different risk levels resulting from the assessment, including through reports broken down by group of workers if *unidades de análisis* were defined before submitting the questionnaire to employees.

Whether or not homogeneous groups are defined in advance, FPSICO advises against “any use of individual data [...] both because the objective of this methodology is to work with collective data and to ensure the truthfulness of workers' responses, and for ethical reasons.” The questionnaire must be administered in accordance with the principles of security, anonymity, and confidentiality.



²⁸² [INAIL. La metodologia per la valutazione e gestione del rischio stress lavoro-correlato - modulo contestualizzato al lavoro da remoto e all'innovazione tecnologica. 2025.](#)

²⁸³ [INSST. AIP.29.1.22 - FPSICO. Factores psicosociales. Método de evaluación. Versión 4.1 - Año 2022.](#)

²⁸⁴ [INSST. NTP 0926: Factores psicosociales: metodología de evaluación - Año 2012.](#)

²⁸⁵ Several explanatory videos about FPSICO are available online on the INSST's official YouTube channel, such as: [FPSICO 4.1 Tutorial \(parte 1\).](#)

²⁸⁶ [INSST. FPSICO. Factores Psicosociales Método de Evaluación Versión 4.1. Manual técnico y de uso de la aplicación informática. 2022.](#)

In **Belgium**, the website of the Belgian Safe Work Information Center (**BeSWIC**) brings together a wide range of tools²⁸⁷ to support employers in conducting PSR assessments.

Among these, **a method**²⁸⁸, published in 2023 by the Federal Public Service “Employment, Labor, and Social Dialogue” (FPS Employment), proposes an approach based on a **questionnaire for workers**, covering various aspects related to psychosocial risks and difficulties encountered at work.

This tool helps employers carry out the **first two stages of the risk assessment**: “inventory” (risk identification) and “analysis” (assessment of these risks). It also serves as the starting point for the third stage, known as “action,” which involves defining and implementing preventive and control measures.

The questionnaire is based on the “**Job Demands – Resources**”²⁸⁹ model, according to which workers’ psychosocial well-being or ill-being is determined by job characteristics that can be divided into:

- **Job Demands**: Factors that demotivate workers and drain their energy (workload, emotional demands, conflicts, etc.), which, when excessive or persistent, can lead to psychosocial ill-being.
- **Job Resources**: Motivating factors (autonomy, social support, recognition, etc.) that act as protective mechanisms and promote well-being.

It is the dynamic balance between these demands and resources that determines psychological health, work performance, and job satisfaction.

In addition, the method proposed by FPS Employment **incorporates specific requirements of the Belgian legal framework**. It explicitly covers the “**5T**,” the five pillars of psychosocial risk assessment as defined by Belgian legislation: work organization, work content, working conditions, living conditions at work, and interpersonal relationships at work (see Chapter 3).

To implement this method, FPS Employment provides employers and prevention professionals with four tools:

- **The individual questionnaire**, which can be administered in paper or electronic format and is designed to ensure anonymity. Exceptionally, the questionnaire may be administered non-anonymously under the supervision of the prevention advisor for psychosocial aspects (CPAP) or the occupational physician.
- **A methodological guide** accompanying each step of the assessment process and outlining the legal obligations regarding PSRs.
- **A pre-programmed data processing tool** (Excel file) enabling data entry, aggregation of results, and automatic calculation of scores.
- **A demonstration file** in the form of a fictitious dataset illustrating how the data processing tool works.

²⁸⁷ [BeSWIC - Centre de connaissance belge sur le bien-être au travail. Risques psychosociaux - Dépistage et analyse des risques – Outils.](#)

²⁸⁸ [SPF Emploi, Travail et Concertation sociale. Analyse des risques psychosociaux liés au travail - Méthode par questionnaire. 2023.](#)

²⁸⁹ [Demerouti, E., Bakker, A. B., Nachreiner, F., Schaufeli, W. B. “The job demands-resources model of burnout”. *Journal of Applied Psychology*. 86\(3\), pp. 499–512. 2001.](#)

FPS Employment particularly recommends this quantitative approach **for large organizations** or those with a “closed” communication culture. To maximize its operational effectiveness, it is advisable to complement the statistical analysis with a **qualitative phase** (interviews, focus groups) in order to refine the assessment and better target prevention measures.

In 2020, FPS Employment also released a **pre-diagnostic tool** (*Indicateurs d'alerte des risques psychosociaux*, “**Psychosocial Risk Alert Indicators**”) intended for companies in the early stages of developing their well-being policy. It is important to note that this tool does not constitute a risk assessment *stricto sensu*, but rather an early warning system designed to detect the presence of PSRs and classify them into three levels of severity (green, orange, red).

The method is based on **the analysis of objective “sentinel” indicators**, such as serious work-related accidents, long-term absenteeism, staff turnover, or disciplinary procedures. It promotes a participatory approach: the analysis can be conducted by a group of individuals representative of the company, with the support of a **user guide** and the accompanying information sheets.

Operationally, the system relies on separate Excel-based tools:

- **The diagnostic modules:** Two sequential files enable data entry and the initial identification of alerts.
- **The integrated module:** A version designed for more mature organizations, enabling systematic monitoring of their prevention policy²⁹⁰.



In **Germany**, numerous resources on mental health at work are available on the website of the GDA, the “**Joint German Occupational Safety and Health Strategy**”²⁹¹, the country’s central reference for OSH. It is jointly developed by the federal government, the *Länder*, and the statutory accident insurance institutions.

Under the **2013–2018 GDA**, one of the main objectives was to address risks associated with excessive mental strain at work (following the introduction in 2013 of a new legal requirement to assess “psychological demands at work,” *Psychische Belastungen*, see Chapter 3).

To this end, a **program (Psyche)** was launched to help companies comply with the legislation. Its dedicated portal²⁹² (still active) centralizes all the resources, training materials, and technical documents necessary for this purpose.

Among these resources, the **guide titled “Taking psychological demands into account in risk assessment”**²⁹³ (revised in 2022) translates regulatory requirements into practical guidance, enabling employers to systematically incorporate psychological hazards into their risk assessments.

Designed as a compliance framework rather than a ready-to-use assessment tool, this guide helps employers structure their approach to meeting their legal obligations. It first clarifies the concept of

²⁹⁰ All the documents included in the “Psychosocial Risk Alert Indicators” tool can be downloaded from this webpage: [SPF Emploi, Travail et Concertation sociale. Indicateurs d'alerte des risques psychosociaux au travail : guide d'utilisation et outils.](#)

²⁹¹ [Gemeinsame Deutsche Arbeitsschutzstrategie \(GDA\).](#)

²⁹² [GDA - Arbeitsprogramm Psyche.](#)

²⁹³ In German: [Berücksichtigung psychischer Belastung in der Gefährdungsbeurteilung. Empfehlungen zur Umsetzung in der betrieblichen Praxis.](#)

“psychological demands” (*Psychische Belastungen*), defined (in accordance with DIN EN ISO 10075-1) as **the totality of factors that affect the worker psychologically**. It **lists six categories**: work content/tasks, work organization, working hours, social relationships, work equipment, and the physical work environment.

On an operational level, the guide does not prescribe a single method but validates three distinct approaches:

- **Standardized questionnaires;**
- **Analysis workshops (*Analyseworkshops*)** involving workers, management, and experts;
- **Observation interviews (*Beobachtungsinterviews*)** in which trained individuals assess psychosocial risks on the basis of observations of work activities, generally followed by brief interviews with workers.

Employers select the methodology best suited to their organization’s structure and internal culture, drawing on the comparative analysis of each approach (advantages/limitations) provided by the guide. Finally, the document proposes **targeted prevention measures for each risk factor** and refers readers to additional technical resources, such as those developed by the German Social Accident Insurance (DGUV) and the Federal Institute for Occupational Safety and Health (BAuA).

In addition to the federal framework, the nine sectoral accident insurance institutions (*Berufsgenossenschaften* - BG) provide sector-specific tools tailored to the needs of their respective industries.

The **BG Holz und Metall** (wood and metal) offers *PsyCheck*²⁹⁴, an online tool enabling companies to carry out an anonymous assessment of the six categories of PSR factors outlined in the GDA guide. The tool generates an analysis report that includes preventive guidance and offers the possibility of receiving support from experts at BG Holz und Metall throughout the process.

Similarly, the **BG RCI** (chemicals and raw materials) has developed the *psyBel program*²⁹⁵, a set of documents, tools, and guidance on PSR prevention.

Regarding the assessment phase, the program tailors the methodology to the size of the company:

- **Over 50 employees:** The use of the *psyBel Befragung questionnaire* is recommended. It requires the establishment of homogeneous work units of at least 10 employees to ensure statistical validity.
- **For SMEs:** The program does not recommend a quantitative approach, favoring qualitative methods instead, prioritizing *interviews and structured discussion sessions*. Appropriate methodological resources and materials are provided by BG RCI.



In **Denmark**, **checklists**²⁹⁶ are provided by the Danish Working Environment Authority (*Arbejdstilsynet*). Their purpose is to help employers conduct an **APV** (*Arbejdspladsvurdering*), the general workplace risk assessment.

Tailored to each industry sector, the checklists systematically incorporate the requirements of the **Executive Order on the Psychosocial Working Environment** (see Chapter 3). They enable

²⁹⁴ BGHM (Berufsgenossenschaft Holz und Metall). *PsyCheck*.

²⁹⁵ BG RCI (Berufsgenossenschaft Rohstoffe und chemische Industrie). *Die psyBel Instrumente*.

²⁹⁶ *Arbejdstilsynet. Arbejdstilsynets APV-Værktøj*.

employers to assess the legally prescribed psychosocial risk factors, such as heavy workload, time pressure, emotional demands, and violence and offensive behavior.

To conduct a more in-depth investigation, companies may use the “**Danish Psychosocial Working Environment Questionnaire**” (DPQ). Originally developed in 2017 by the National Research Center for the Working Environment (NFA, *Det Nationale Forskningscenter for Arbejdsmiljø*), this scientific tool was specifically **adapted for practical use by companies** in 2019²⁹⁷.

Built on rigorous and well-documented scientific methodology²⁹⁸, the DPQ consists of a **questionnaire with approximately 100 items that explore seven key dimensions**: work organization, job demands, cooperation and work relations, leadership and supervision, change management and work transformations, conflicts and negative behaviors, and well-being and satisfaction at work.

The strength of this tool lies in its analytical capabilities. **A company's results can be compared with weighted national averages**²⁹⁹. These averages are derived from a large-scale study conducted in 2019 by NFA involving 5,000 DPQ respondents across 19 sectors, thereby providing a statistically representative benchmark for the Danish labor market.



In **Sweden**, **Prevent** is a nonprofit organization owned by the social partners, whose mission is to disseminate knowledge to help improve the working environment.

Its **OSA tool**³⁰⁰ (*Organisatoriska och Sociala Arbetsmiljön*, “organizational and social work environment”) enables employers to conduct **an anonymous employee survey** in compliance with Swedish legal requirements. This 46-item questionnaire explores **9 categories of psychosocial risk factors**: work organization, workload and job demands, autonomy, social support, rest and recovery, management and leadership, skills and development, psychological safety, and offensive behavior.

Prevent also provides **guidance and other resources**³⁰¹ **supporting the entire assessment process**: survey deployment, interpretation of results, and definition of corrective actions. In practice, the company creates an account on the OSA platform and generates an individual access link for employees. Anonymity is guaranteed by processing data exclusively in aggregate form: results are reported only at the group level, provided there are at least six respondents.

In addition to the OSA survey, *Prevent* offers **checklists** designed to verify an organization's regulatory compliance. These tools do not constitute a risk assessment *stricto sensu*, but rather a self-assessment to identify potential shortcomings in meeting legal obligations.

One³⁰² of the available checklists covers the **three pillars** of the organizational and social work environment as described in Regulation AFS 2023:2 (see Chapter 3): excessive **workload and**

²⁹⁷ NFA. [Udvidet spørgeskema til måling af det psykiske arbejdsmiljø og trivsel på arbejdspladsen](#).

²⁹⁸ NFA. [Dansk psykosocialt spørgeskema - et spørgeskema om psykosocialt arbejdsmiljø. Dokumentationsrapport. 2017](#).

²⁹⁹ NFA. [Arbejdspladsens psykiske arbejdsmiljø kan nu sammenlignes med nationalt gennemsnit. 2020](#).

³⁰⁰ *Prevent*. [Välkommen till OSA-enkäten](#).

³⁰¹ *Prevent*. [OSA-enkäten](#).

³⁰² *Prevent*. [Checklista om OSA](#).

working hours and **offensive behavior**. Two complementary thematic checklists are also available to specifically address **sexual harassment**³⁰³ and **threats/violence** at work³⁰⁴.

These checklists can be used by employers together with safety representatives or trade union representatives.



In **Australia**, the assessment tool **People at Work**³⁰⁵ is the result of a research collaboration between Australian academic institutions and occupational safety and health authorities, both at the national level (Safe Work Australia) and at the state and territory level (including Workplace Health and Safety Queensland and WorkSafe Victoria).

Freely available since 2007 (with a digital version introduced in 2021), this tool helps identify and manage psychosocial risks through **individual questionnaires** distributed by email or in paper format. Although the survey is conducted on an individual basis, forming homogeneous groups is recommended to enhance the relevance of the analysis.

Like the Belgian tool developed by FPS Employment, the Australian survey is based on the “**Job Demands – Resources model**,” which posits that psychological health results from the balance between job demands and resources. The tool covers **seven categories of demands** (work overload, role ambiguity, role conflict, cognitive demands, emotional demands, group task conflict, group relationship conflict) and **six categories of resources** (job control, supervisor support, co-worker support, praise and recognition, procedural justice, change consultation)³⁰⁶.

In addition to the factors covered by the Job Demands – Resources model, the People at Work tool also assesses **workplace bullying**, based on the legal definition provided by the Fair Work Act (see Chapter 3). The survey captures experiences as a victim or a witness.

Finally, the tool also measures **health and organizational outcomes** associated with PSRs (musculoskeletal symptoms, burnout, sleep disturbances, absenteeism, turnover intentions, and job dissatisfaction).

In practice, confidentiality is ensured by processing responses exclusively in anonymous, aggregated form: no individual data is shared with the employer. To generate analysis reports (summary or comprehensive analytical reports) through the online portal, a minimum threshold of **20 participants** is required. Examples of these reports³⁰⁷ are available online to illustrate the type of results produced.

The comprehensive report is designed to allow organizations to interpret the results without necessarily requiring support from an external consultant. The tool also provides **free online training and learning modules**³⁰⁸ on the conduct of the survey, the interpretation of the data, and the implementation of appropriate preventive measures.

³⁰³ [Prevent. Checklista om sexuella trakasserier.](#)

³⁰⁴ [Prevent. Checklista om hot och våld.](#)

³⁰⁵ [About People at Work.](#)

³⁰⁶ [What is People at Work?.](#)

³⁰⁷ [Example of a Comprehensive Report](#) and [Example of a Summary Report.](#)

³⁰⁸ Available on this [webpage](#).

In the comprehensive report, the company's results are also compared with **national benchmarks**. Between 2008 and 2015, the tool collected data from approximately 11,000 Australian workers (from the public and private sectors, across various industries and professions). Statistical techniques were then applied to ensure that each benchmark was **representative of its industry** as much as practically possible.

In addition, the tool enables the company to compare its current results with those from previous years in order to track changes in its prevention performance over time.

To complement the quantitative analysis, People at Work recommends organizing **follow-up focus groups**. Supported by a dedicated methodological [guide](#)³⁰⁹, this qualitative stage aims to collectively explore the questionnaire results, analyze the underlying causes of PSRs, and identify appropriate solutions – an approach similar to that recommended by FPS Employment in Belgium.

Although it has long been the **only validated tool** in Australia for the analysis of psychosocial risks, **recent legislative developments** in this area (see Chapter 3) have sparked a **national debate regarding its current suitability**³¹⁰. As of 2026, the tool remains available; however, it has been announced that it will be replaced by new assessment instruments better aligned with current regulatory requirements.



In **Canada**, the Canadian Centre for Occupational Health and Safety (CCOHS), a federal government organization, offers³¹¹ **various free online tools for assessing PSRs** in the workplace.

Among these, the free online platform “**Guarding Minds at Work**”³¹² offers a wide range of resources for assessing PSR factors at work.

The platform provides a **structured eight-step process** for assessing exposure to PSR factors:

■ **Preparation and planning (steps 1-3)**

The employer begins by creating the necessary internal conditions: securing management commitment, ensuring clear communication, and allocating appropriate resources. The employer then familiarizes themselves with the **13 psychosocial factors identified in the “National Standard of Canada for Psychological Health and Safety in the Workplace”**³¹³ published by the CSA Group (formerly known as the Canadian Standards Association) in 2013 (see below under “Guides and Information Resources”):

1. Organizational culture;
2. Psychological and Social support;
3. Clear leadership & Expectations;
4. Civility & Respect;
5. Psychological demands;
6. Growth & Development;
7. Recognition & Reward;
8. Involvement & Influence;

³⁰⁹ [People at Work. People at Work: Focus group guide.](#)

³¹⁰ [People at Work. Important changes to PAW.](#)

³¹¹ [CCOHS. Healthy Minds at Work. Free Assessment Tools.](#)

³¹² All the documents and resources from the “Guarding Minds at Work” platform mentioned in this report can be downloaded from this [webpage](#).

³¹³ [CAN/CSA-Z1003-13/BNQ 9700-803/2013 \(R2022\). Psychological health and safety in the workplace. 2013.](#)

9. Workload management;
10. Engagement;
11. Balance;
12. Psychological protection;
13. Protection of physical safety.

The employer then chooses one of three proposed assessment strategies:

- **The organizational review**, which is recommended for companies with fewer than 10 employees. Management completes self-assessment forms for each of the 13 factors in order to analyze existing policies and practices.
- **The employee survey**, a 61-item questionnaire measuring employees' perceptions of the 13 factors.
- **A combination of both methods**, presented as the ideal approach.

In the latest version of the tool (2022-2023³¹⁴), the survey questions have been aligned with the **ISO 45003:2021** standard on psychosocial risk management (see Chapter 1), while retaining the original 13 factors.

■ **Implementation and Follow-up (steps 4-8)**

The employer develops an assessment plan that explains the survey's purpose, confidentiality safeguards, and timeline to employees. The employer then creates an account on the platform to distribute the questionnaire. Data remains confidential and is hosted on a secure server in Canada. To **ensure anonymity**, results appear only in aggregated form in the final report; a minimum of 10 respondents is required to generate a report.

Once the survey is complete, a **report is automatically generated** to identify priority areas for action. If an organizational review was also conducted, its results can be incorporated into the report, allowing for a comparison between management's and employees' perceptions.

The platform then provides **free tools to support the implementation of corrective measures**: training, awareness-raising activities, or organizational changes. Finally, it offers resources to help employers evaluate the effectiveness of these actions, adjust them where necessary, and plan a process of continuous improvement.

Furthermore, following the explicit introduction of the obligation (for federally regulated workplaces) to also assess and prevent the risks of harassment and violence (notably through the 2020 "Work Place Harassment and Violence Prevention Regulations," see Chapter 3), the government has developed **a tool for assessing the risks of harassment and violence in the workplace**³¹⁵ in the form of 39 questions covering the following areas: prevention policy, emergency procedures, training, resolution process, physical work environment, type of work, psychological protection, leadership and organizational structure.

This tool is intended for use by the employer (or their representative), who must work in collaboration with the relevant health and safety committees or representatives. In practice, the assessment must be conducted every three years, or sooner if changes within the organization may alter the risk factors.

³¹⁴ For more information about the tool update, see [this webpage](#).

³¹⁵ [Government of Canada. Sample workplace harassment and violence risk assessment tool. 2021.](#)



In **Japan**, as mentioned earlier, workplaces are required to conduct an **annual work-related stress assessment (Stress Check Test)** for employees who consent to it (see Chapter 3). The occupational physician (or any other qualified healthcare professional involved), responsible for conducting this annual assessment, has at their disposal a government-recommended methodology known as the **Brief Job Stress Questionnaire (BJSQ)**, comprising a **questionnaire**³¹⁶ and a **detailed manual**³¹⁷.

Derived from the U.S. NIOSH's Generic Job Stress Questionnaire (GJSQ), the BJSQ was developed in the early 2000s. This assessment tool consists of 57 questions (rated on a scale of 1 to 4) organized around four dimensions:

- **Job stressors:** These include, among others, work overload (quantitative and qualitative), degree of autonomy (job control, use of skills), interpersonal conflicts, poor physical environment, and meaningfulness of work;
- **Stress responses:** The tool measures psychological symptoms (anxiety, depression, irritability) as well as somatic manifestations (fatigue, physical pain);
- **Buffering factors and satisfaction:** the analysis includes social support (management, colleagues, family and friends) as well as overall job satisfaction³¹⁸.

The Japanese Ministry of Health, Labor and Welfare provides **methodological resources**³¹⁹ to interpret these results and assess workers' stress levels.

The Ministry also maintains a website dedicated³²⁰ to the Stress Check Test, which notably offers the option of downloading a **software program** for administering the questionnaire and more easily compiling workers' results.

The Stress Check Test differs from other international assessment tools due to its individual-centered approach. It assesses both workers' perceived stress and their individual stress responses. The fact that the assessment is conducted and interpreted by a physician further reinforces the individualized nature of this approach: an employee exhibiting high stress levels may indeed receive personalized support from the physician, who also assists the employer in implementing appropriate workplace adjustments to improve the employee's mental health.

However, the collective dimension is not entirely absent. The ministerial guidelines (see Chapter 3) recommend aggregating results by work unit in order to better understand exposure to stressors specific to each unit and to better identify corrective measures, which may also be collective where necessary.



³¹⁶ English version of the [57 BJSQ questions](#), made available by the Japanese Ministry of Health, Labour and Welfare.

³¹⁷ [Ministry of Health, Labour and Welfare \(MHLW\). 労働安全衛生法に基づくストレスチェック制度 実施マニュアル.](#)

³¹⁸ [Watanabe, K., et al. "Usage of the Brief Job Stress Questionnaire: A Systematic Review of a Comprehensive Job Stress Questionnaire in Japan from 2003 to 2021". *International Journal of Environmental Research and Public Health*. Vol. 20\(3\), 1814. 18 January 2023.](#)

³¹⁹ [Ministry of Health, Labour and Welfare \(MHLW\). ストレスチェック制度・メンタルヘルス対策.](#)

³²⁰ [Ministry of Health, Labour and Welfare \(MHLW\). 厚生労働省版ストレスチェック実施プログラム ダウンロードサイト.](#)

In **South Korea**, the Korea Occupational Safety & Health Agency (KOSHA) has published **guidelines**³²¹ for employers on how to assess “**work-related stress factors**.”

KOSHA recommends using the **Korean Occupational Stress Scale (KOSS)**³²² to meet the requirements of Article 669 of the “Regulations on Occupational Safety and Health Standards” (see Chapter 3), which mandates the assessment of stress factors for **workers whose jobs “involve high levels of physical fatigue and mental stress.”** This is therefore not a requirement for systematic assessment. It targets **certain specific occupations and conditions**, such as those involving long working hours, shift or night work, full-time vehicle driving, and the use of precision equipment and machinery.

In its full version, the KOSS takes the form of a questionnaire consisting of 43 questions, divided into 8 categories:

1. **Workplace Climate:** collective culture, inconsistent work instructions, authoritarian climate, gender discrimination;
2. **Physical Environment:** work environment, dangerous work, physical burden;
3. **Job demands:** time pressure, overlapping tasks, increasing workload, responsibility, excessive work, insufficient rest, work-home interface, performing multiple tasks simultaneously;
4. **Degree of control / autonomy at work:** non-creative work, unpredictability, underutilization of skills, little or no decision-making power, low control;
5. **Interpersonal conflicts:** inadequate support from supervisors and/or colleagues, lack of emotional support;
6. **Job instability:** uncertainty of getting a new job, difficulty in finding a new job, job uncertainty and insecurity, possibility of layoff, negative work-related changes;
7. **Organizational system:** unfair organizational policies, unsatisfactory organizational support, inter-department conflicts, disparities of goal attainment, limited communication, poor career development, inconsistencies in status/position;
8. **Lack of rewards:** unrealistic expectations, unsatisfactory pay, unfair treatment, lack of interest, uncertainty about the future, lack of opportunities.

Although completed individually, this questionnaire is intended for anonymous, **collective analysis**. It allows for the assessment of stress levels at the company level or by department. The KOSHA guidelines also provide **national reference values**, enabling the organization to compare its results with these benchmarks.



³²¹ Latest version updated in 2022. [KOSHA. 직무스트레스요인 측정 지침.](#)

³²² An English version is available in the supplementary materials of the following article: [Kang, S. et al. "Occupational stress and related factors among surgical residents in Korea". *Annals of Surgical Treatment and Research*. Vol. 89\(5\), pp. 268-274. November 2015.](#)

In the **United States**, there is no standardized tool³²³ for assessing PSRs, but recommendations have been issued by OSHA (Occupational Safety and Health Administration), the federal agency responsible for OSH.

OSHA provides a number of **sample questions**³²⁴ to include in a workplace mental health survey and generally recommends using a combination of open-ended and multiple-choice questions. The questions cover, among other things, workload, conflictual or difficult interpersonal relationships (with clients, colleagues, supervisors, etc.), work-life balance, organizational support and resources, feelings of job insecurity, and other psychosocial risk factors.

OSHA has also developed a specific **checklist** for **senior managers and executives**³²⁵ on how to understand and manage mental health in the workplace, and another tailored for **supervisors**³²⁶.

For its part, NIOSH (National Institute for Occupational Safety and Health) offers, among other things:

- **The “NIOSH Worker Well-Being Questionnaire”** (abbreviated as NIOSH WellBQ)³²⁷, preferably administered anonymously, which aims to provide an **“integrated assessment of worker well-being”** across five domains: i) work evaluation and experience; ii) workplace policies and culture; iii) workplace physical environment and safety climate; iv) health status; v) home, community, and society (life satisfaction, activities and support outside of work, etc.).

> It aims to analyze worker well-being in a broad, holistic manner, rather than focusing solely on the workplace (for example, the last two sections of the questionnaire, “health status” and “home, community, and society,” are not centered on work-related activities). An accompanying guide³²⁸ helps users understand and interpret the results.

> The NIOSH WellBQ is a relatively recent tool (2021) and is not intended solely for employers and workers, but also as a survey instrument for academic researchers, occupational health professionals, and policymakers.

- **Other questionnaires** focusing on working conditions and job satisfaction (“**NIOSH Quality of Worklife Questionnaire**”³²⁹) or on work-related stress (“**NIOSH Generic Job Stress Questionnaire**”³³⁰), which are primarily research tools rather than instruments intended for use by employers. Indeed, regarding the NIOSH Quality of Worklife Questionnaire, some researchers³³¹ have noted that its excessive length makes it unsuitable for practical use in companies and organizations.

³²³ Choi, B., Seo, Y. “Developing a short standard questionnaire for assessing work organization hazards: the Healthy Work Survey (HWS)”. *Annals of Occupational and Environmental Medicine*. Vol. 35, e7. 27 April 2023.

³²⁴ OSHA. *Find Out What Your Workers Need to Support Their Mental Health and Reduce Workplace Stress*.

³²⁵ OSHA. *Supporting Mental Health in the Workplace. Checklist for Senior Managers*.

³²⁶ OSHA. *Supporting Mental Health in the Workplace. Checklist for Supervisors*.

³²⁷ Available from this [webpage](#).

³²⁸ NIOSH. *NIOSH Worker Well-Being Questionnaire (WellBQ)*. 2021.

³²⁹ NIOSH. *Quality of Worklife Questionnaire*.

³³⁰ NIOSH. *Organization of Work: Generic Job Stress Questionnaire*.

³³¹ Choi, B., Seo, Y. “Developing a short standard questionnaire for assessing work organization hazards: the Healthy Work Survey (HWS)”. *Annals of Occupational and Environmental Medicine*. Vol. 35, e7. 27 April 2023.

Guides and Information Resources

This subsection lists, by country, the main sources of information (generally intended for employers) on mental health at work and, more specifically, the prevention of PSRs.

In **France**, the French National Research and Safety Institute (INRS) has a particularly comprehensive **section of its website dedicated to PSRs**³³²: it includes general information, main risk factors, the applicable legal framework, questionnaires, PSR assessment tools, as well as numerous guides, brochures, studies, posters...

Among these various resources, the following are particularly noteworthy:

- The brochure “Psychosocial Risks: How to Take Preventive Action?”³³³, which describes, among other things, the different steps involved in a workplace PSR prevention process.
- The brochure “Preventing Psychosocial Risks: Seeking Support from a Consultant”³³⁴, which explains when and how to engage an external consultant for support in the PSR prevention process.

INRS also provides comprehensive **web sections dedicated to other specific PSR-related topics**³³⁵: work-related stress; external violence and aggression; sexual harassment and sexist behavior; psychological harassment (workplace bullying) and internal violence; burnout; suicide; and well-being at work.

In addition, the Ministry of Labor’s website features a **section devoted to the prevention of PSRs**³³⁶ that contains numerous links to toolkits, practical guidance, recommendations, online training courses, and other supporting materials.

France’s National Agency for the Improvement of Working Conditions (Anact) also develops and publishes **a wide range of resources** collected on its “Psychosocial Risks”³³⁷ webpage, some of which are intended for employers:

- A **methodological guide** titled “Implementing a Psychosocial Risk Prevention Approach”³³⁸ (2017);
- A **methodological toolkit** for integrating PSRs in the single occupational risk assessment document (2017)³³⁹;
- A **guide to self-assessment** of psychosocial risks³⁴⁰ (2017);
- A **brochure** titled “Taking Action to Identify and Prevent Psychosocial Risks”³⁴¹ (2016);

³³² [INRS. Dossier Risques psychosociaux \(RPS\).](#)

³³³ [INRS. Risques psychosociaux. Comment agir en prévention ?. Brochure. ED 6349. 2022.](#)

³³⁴ [INRS. Prévention des risques psychosociaux. Se faire accompagner par un consultant. Brochure. ED 6479. 2022.](#)

³³⁵ Available at the bottom of [this webpage](#).

³³⁶ [Ministère du Travail et des Solidarités. La prévention des risques psychosociaux \(RPS\).](#)

³³⁷ [Anact. Ressources utiles pour vos projets.](#)

³³⁸ [Anact - Anact Normandie, Harmonie mutuelle. Mener une démarche de prévention des RPS. Guide méthodologique. 2017.](#)

³³⁹ [Réseau Anact - Anact. Prendre en compte les RPS dans le Document Unique. 2017.](#)

³⁴⁰ [Anact - Anact Normandie, Harmonie mutuelle. Auto-diagnostic des risques psychosociaux. 2017.](#)

³⁴¹ [Anact - Anact Auvergne. Agir pour identifier et prévenir les risques psychosociaux. Guide pratique à l'usage des directions et des salariés. 2016.](#)

- A guide titled “10 Questions on the Prevention of Psychosocial Risks”³⁴² (2019), designed as an operational reference. Among the various resources included in the guide, the agency highlights the “**situation-problem method**”³⁴³, presented as a means of moving from diagnosis to action. In practice, this approach brings together a group of people representing various roles within the company (employees, team leaders, safety officers, employee representatives, HR, etc.) to collectively analyze actual work processes in order to identify and address the root causes of recurring tensions or dysfunctions (quality issues, delays, overloads, deadlocks, etc.) and develop proposals for action.

INRS, Anact, and the Directorate General for Labor (*Direction générale du travail*, DGT) of the Ministry of Labor have also jointly developed a 2015 [guidance document on the prevention of burnout](#)³⁴⁴.



In **Germany**, numerous resources on PSRs are available on the GDA website (the national OSH strategy), particularly through its **Psyche** program. The webpage dedicated to this program³⁴⁵ serves as a **key resource hub** on the subject. It compiles publications and tools essential for the prevention of PSRs, produced by the main national bodies and institutions such as the DGUV (*Deutsche Gesetzliche Unfallversicherung*, the German Social Accident Insurance), the BAuA (*Bundesanstalt für Arbeitsschutz und Arbeitsmedizin*, the Federal Institute for Occupational Safety and Health), and the DIN (*Deutsches Institut für Normung*, the German Institute for Standardization).

On the *Psyche* webpage, **these publications are categorized by psychosocial risk factors**, specifically the six types of factors identified by the aforementioned GDA guide³⁴⁶ to help companies assess psychological demands at work: job content and tasks, work organization, working hours, social relationships, work equipment, and the physical work environment. Among the documents listed by *Psyche*, the following are of particular relevance:

- **The DIN EN ISO 10075-1:2017 standard** on “Ergonomic Principles Related to Mental Workload - Part 1: General Issues and Concepts, Terms and Definitions”³⁴⁷;
- **A DGUV guide (2019)** titled “Psychological Demands at Work – The Risk Assessment Stage. Technical Information for Prevention”³⁴⁸;
- **A DGUV guide (2020)** on “Managing Employees with Mental Health Issues – A Practical Guide for Managers”³⁴⁹;
- **The “Risk Assessment Manual”** (*Handbuch Gefährdungsbeurteilung*), a reference work developed by BAuA, intended for occupational safety and health professionals and providing essential guidance on conducting risk assessments. In particular, **Chapter 9**³⁵⁰, which is entirely devoted to the analysis of work-related “psychological factors” (*Psychische Faktoren*), outlines the applicable legal framework in this area and provides guidance and recommendations for conducting such an assessment.

³⁴² Réseau Anact – Anact. [Guide 10 questions sur la prévention des risques psychosociaux \(RPS\). 2019.](#)

³⁴³ For further reading: [Anact. Analyser le travail avec la méthode « situation-problème ». 2019.](#)

³⁴⁴ DGT, Anact, INRS. [Le syndrome d'épuisement professionnel ou burnout : mieux comprendre pour mieux agir. 2015.](#)

³⁴⁵ [GDA - Arbeitsprogramm Psyche.](#)

³⁴⁶ [Berücksichtigung psychischer Belastung in der Gefährdungsbeurteilung. Empfehlungen zur Umsetzung in der betrieblichen Praxis.](#)

³⁴⁷ [DIN EN ISO 10075-1:2017: Ergonomische Grundlagen bezüglich psychischer Arbeitsbelastung - Teil 1: Allgemeine Aspekte und Konzepte und Begriffe \(ISO 10075-1:2017\).](#)

³⁴⁸ [DGUV. Psychische Belastung der Schritt der Risikobeurteilung. Fachinformation für die Prävention. 2019.](#)

³⁴⁹ [DGUV. Umgang mit psychisch beeinträchtigten Beschäftigten – Handlungsleitfaden für Führungskräfte. 2020.](#)

³⁵⁰ [BAuA. Handbuch Gefährdungsbeurteilung - Teil 2. 9 Psychische Faktoren.](#)



In **Spain**, the INSST (National Institute for Safety and Health at Work) provides a **section of its website specifically dedicated to PSRs**³⁵¹, featuring numerous guides, training materials, references to relevant legislation, and risk assessment tools, among other resources. Among these, in addition to the **FPSICO** tool already mentioned (see above), the following are available:

- A publication titled “Guidelines for the Management of Psychosocial Risks”³⁵² (2022) intended for employers;
- INSST’s “Technical Prevention Notes”³⁵³ (*Notas técnicas de prevención*, NTP): a series of non-binding practical guides and technical documents developed by the Institute to promote good preventive practices. With regard to PSRs, it is worth mentioning “NTP 926 - Psychosocial Factors: Assessment Methodology” (2012) and “NTP 1123 - Information and Communication Technologies (ICT) (II): Psychosocial Risk Factors Associated with New Forms of Work Organization” (2018);
- A detailed 2010 analysis titled “The Health Effects of Psychosocial Risks at Work: An Overview”³⁵⁴.

A subsection³⁵⁵ is dedicated to **workplace violence**, featuring information on applicable legislation, guides, and documents, including specific INSST’s Technical Prevention Notes (such as “NTP 489 – Violence at Work” and “NTP 507 – Sexual Harassment at Work”).

Finally, a 2021 **publication**³⁵⁶ by the Spanish Labor Inspectorate **adapts, at the national level, the content of the 2018 guide**³⁵⁷ (see Chapter 2) published by the European network of SLIC (the Senior Labour Inspectors Committee). The guide is intended to assist national labor inspectorates across Europe in establishing effective inspection procedures for PSRs.

The Spanish Labor Inspectorate’s publication outlines the applicable national legislation on PSRs, the main risk factors, the methods and tools available for their assessment, the most common preventive measures, as well as a checklist (in the form of a list of questions, points to consider, etc.) on how to conduct an inspection in this area.

Subsequently, a more detailed **national guide**³⁵⁸ on **psychosocial risks**, intended for the **Spanish Labor Inspectorate**, was developed and published in 2025.



³⁵¹ [INSST. Riesgos Psicosociales.](#)

³⁵² [INSST. Directrices básicas para la gestión de los riesgos psicosociales. 2022.](#)

³⁵³ The complete list of NTPs is available here: [INSST. Notas técnicas de prevención.](#)

³⁵⁴ [INSST. El efecto sobre la salud de los riesgos psicosociales en el trabajo. Una visión general. 2010.](#)

³⁵⁵ [INSST. Violencia en el trabajo.](#)

³⁵⁶ [Organismo Estatal de la Inspección de Trabajo y Seguridad Social. Criterio Técnico 104/2021 sobre actuaciones de la inspección de trabajo y seguridad social en riesgos psicosociales. 2021.](#)

³⁵⁷ [SLIC. Guide for assessing the quality of risk assessments and risk management measures with regard to prevention of psychosocial risks. 2018.](#)

³⁵⁸ [Ministerio de Trabajo y Economía Social. Dirección del Organismo Estatal Inspección de Trabajo y Seguridad Social. Guía de actuación inspectora. Factores psicosociales. 2025.](#)

In **Italy**, the INAIL (National Institute for Insurance against Accidents at Work) [webpage](#)³⁵⁹ dedicated to “**work-related stress**” (*rischio stress lavoro-correlato*, see Chapter 3) brings together the main prevention resources on the subject.

In addition to providing an overview of the applicable legislation, this page centralizes all the methodological resources needed to carry out this specific assessment.

It gives access to INAIL’s **PSR assessment tool**, including its tailored versions (healthcare sector, remote work), as well as to the online assessment platform and its tutorials. INAIL’s resource section is complemented by external resources (notably from EU-OSHA) and national research projects on work-related stress.



In **Belgium**, the **BeSWIC website** (the Belgian Safe Work Information Center) contains a comprehensive section dedicated to PSRs³⁶⁰, with subsections focusing on specific risk factors or topics, such as violence, psychological or sexual harassment at work, work-related stress, and burnout.

It provides an overview of the applicable legislation, best practices, risk assessment tools (see above), external documentation, awareness-raising materials, and campaigns, among other resources.

At the same time, **the website of the Federal Public Service “Employment, Labor and Social Dialogue” (FPS Employment)** centralizes all documentation related to psychosocial risks in a dedicated section³⁶¹. This knowledge base details the legislative framework, the roles and status of various stakeholders involved in workplace risk prevention, as well as procedures for psychosocial intervention at work (see Chapter 3). It also offers employers direct access to reference manuals and publications, including notably:

- A highly detailed “**Guide to the Prevention of Psychosocial Risks at Work**”³⁶² (2020), which explains risk factors and assists employers in meeting their legal obligations. It structures the prevention process into five operational stages: the exploratory phase, the risk analysis, the development of an action plan, its implementation, and its evaluation. The guide provides step-by-step instructions for each of these stages.
- A **specific guide for SMEs** (2015)³⁶³ to help them implement the legislation on psychosocial risks, particularly following the 2014 reform (see Chapter 3). This document is designed as a practical tool to support SMEs in improving their management of these risks.

> It starts with concrete situations such as work-related stress, conflicts, or psychological distress at work and, for each of them, identifies the warning signs to look for and a range of concrete measures that can be implemented. Among the recommended preventive measures are maintaining regular dialogue with workers, recognizing and valuing the quality of their work, involving them in decisions that may affect them, and increasing their autonomy in relation to their tasks and work organization. A section is also dedicated to the role of the “**good manager**,” offering practical advice to support managers and executives in their day-to-day prevention efforts.

³⁵⁹ [INAIL. *Rischio stress lavoro-correlato*.](#)

³⁶⁰ [BeSWIC - Centre de connaissance belge sur le bien-être au travail. *Risques psychosociaux \(RPS\)*.](#)

³⁶¹ [SPF Emploi, Travail et Concertation sociale. *Risques psychosociaux au travail*.](#)

³⁶² [SPF Emploi, Travail et Concertation sociale. *Guide pour la prévention des risques psychosociaux au travail*. 2020.](#)

³⁶³ [SPF Emploi, Travail et Concertation sociale. *Premiers conseils pour plus de bien-être psychosocial dans les PME*. 2015.](#)



In **Denmark**, the website of the Danish Working Environment Authority (*Arbejdstilsynet*) features **a section on mental health at work**³⁶⁴, with a particular focus on the “**psychosocial working environment**” (see Chapter 3). It contains a wide range of **resources and information**, including an overview of employers’ legal obligations, explanations of the main risk factors, as well as guidance documents and recommendations on how to ensure and improve the prevention of PSRs...

The Danish Authority also provides a series of **thematic “guidance-questionnaires”**³⁶⁵ aligned with the risk factors defined by the “Executive Order on the Psychosocial Working Environment” (see Chapter 3). These tools cover, in particular, heavy workload and time pressure, unclear and conflicting demands at work, high emotional demands when working with people, as well as offensive behavior (including psychological or sexual harassment and violence).

Unlike employee surveys, these questionnaires are intended for management, human resources, and workplace OSH officers to detect the **early signs of psychosocial risks** before they escalate and become more serious. These questionnaires are based on the **questions used** by the Danish Working Environment Authority **during its inspections** of workplaces facing psychosocial working environment issues. Their goal is twofold: to enable the company to identify potential problems early on through self-assessment and to verify whether the preventive measures in place are adequate.

The Danish Authority also offers **specific prevention materials and resources** to address work-related stress³⁶⁶, high emotional demands when working with people³⁶⁷, and violence, psychological and sexual harassment³⁶⁸.

In addition, **the NFA** (the National Research Center for the Working Environment) dedicates a section of its website to the psychosocial working environment³⁶⁹. Among its key resources is the *Job & Sind* tool³⁷⁰ (“Work and Mind”), designed to support the **management of psychological distress**.

Based on the premise that any form of distress, whether work-related or personal, affects the functioning of the company, this tool offers 16 recommendations structured around four key areas:

- Establishing an inclusive and open culture around mental health;
- Supporting managers in their role of preventing and managing psychological distress;
- Identifying signs of psychological distress and responding appropriately;
- Providing practical support to employees experiencing psychological distress.



³⁶⁴ [Arbejdstilsynet. *Hvad betyder psykisk arbejdsmiljø for dig?*](#)

³⁶⁵ [Arbejdstilsynet. *Spørgeguides om psykisk arbejdsmiljø*](#).

³⁶⁶ [Arbejdstilsynet. *Forebyg stress*](#).

³⁶⁷ [Arbejdstilsynet. *Forebyg problemer med høje følelsesmæssige krav i arbejdet med mennesker*](#).

³⁶⁸ [Arbejdstilsynet. *Forebyg mobning, seksuel chikane og andre krænkelser på arbejdspladsen*](#).

³⁶⁹ [NFA. *Psykisk arbejdsmiljø*](#).

³⁷⁰ [NFA. *Job & Sind*](#).

In **Sweden**, the Swedish Work Environment Authority (*Arbetsmiljöverket*) offers a wide range of **resources on the “organizational and social work environment”**³⁷¹ on its website. These are structured to reflect the regulatory framework and include specific sections for each of the three major risk factors targeted by the legislation (**excessive workload and working hours**, and **offensive behavior**). In addition, a specific section is dedicated to **violence and threats** at work³⁷², which are covered by a separate piece of legislation (see Chapter 3).

At the same time, the Swedish Agency for Work Environment Expertise (*Myndigheten för arbetsmiljökunskap*), under the Ministry of Employment, published two noteworthy documents concerning mental health:

- **“Guidelines for Mental Health in the Workplace”**³⁷³, intended for occupational health services (*företagshälsan*) and employers, which present:
 - An overview of survey and assessment questionnaires for mapping the organizational and social work environment;
 - Methodologies for dialogue at the group and individual levels;
 - **Mental health risk factors in the workplace**;
 - Key indicators of a poor organizational and social work environment;
 - A **structured set of preventive and adaptive measures** that can be implemented.
- **A methodology for occupational health economic analysis**³⁷⁴, enabling employers to calculate the costs associated with work-related mental ill health and **the return on investment** of preventive measures. It illustrates how, depending on the company’s needs and characteristics, work-related mental ill health can affect its productivity. In particular, its Chapter 4 presents the **calculation model and the variables to consider** when estimating the economic consequences of mental health issues in the workplace.



In **Canada**, the **“National Standard for Psychological Health and Safety in the Workplace”**³⁷⁵ serves as a key reference for the prevention of PSRs. Published in 2013, this Standard was commissioned by the Mental Health Commission of Canada (MHCC)³⁷⁶ and was jointly developed by the CSA Group (formerly known as the Canadian Standards Association) and the *Bureau de normalisation du Québec*. According to the MHCC, it is **the first standard “of its kind in the world”** aimed at “promoting mental health and preventing psychological harm at work”³⁷⁷.

Although its **application is voluntary**, it is widely used in Canada as well as in other countries and is frequently cited in research on the prevention of PSRs, becoming an **internationally recognized reference** for promoting mental health in the workplace.

The Standard identifies **13 factors** that impact psychological health and safety at work, which can be grouped into four broad categories:

³⁷¹ [Arbetsmiljöverket. Organisatorisk och social arbetsmiljö.](#)

³⁷² [Arbetsmiljöverket. Våld och hot om våld.](#)

³⁷³ [Myndigheten för arbetsmiljökunskap. Riktlinjer för psykisk hälsa på arbetsplatsen. 2024.](#)

³⁷⁴ [Myndigheten för arbetsmiljökunskap. Arbetshälsoekonomiskt analysverktyg. Ett komplement till Riktlinjer för psykisk ohälsa på arbetsplatsen. 2019.](#)

³⁷⁵ [CAN/CSA-Z1003-13/BNQ 9700-803/2013 \(R2022\). Psychological health and safety in the workplace. 2013.](#)

³⁷⁶ The [Mental Health Commission of Canada \(MHCC\)](#) is a national nonprofit organization (with charitable status), created in 2007 and primarily publicly funded, that develops and disseminates innovative programs and tools to promote mental health and well-being in Canada.

³⁷⁷ [MHCC. National Standard of Canada for Psychological Health and Safety in the Workplace.](#)

- **Organizational framework:** organizational culture, clear leadership and expectations, engagement, involvement and influence in decision-making;
- **Relationships and support:** psychological and social support (management/colleagues), civility and respect, recognition and reward;
- **Working conditions:** workload management, psychological demands of the job, work-life balance, protection of physical and psychological safety;
- **Professional development:** opportunities for growth and career development.

The Standard then provides a voluntary framework to help organizations create a psychologically healthy and safe workplace, assess, manage, and reduce psychosocial risks, and establish and adopt structures, practices, and an organizational culture that promote psychological health and safety at work. Numerous resources accompany the Standard to ensure its proper implementation, including a **detailed guide**³⁷⁸ and a frequently asked questions (FAQ)³⁷⁹ document.

In addition, the Canadian Centre for Occupational Health and Safety (CCOHS) has developed a **toolkit**³⁸⁰ that provides practical guidance on implementing the key elements of the Standard, as well as various communication materials (videos, posters, etc.).



In **Japan**, the website of the Ministry of Health, Labor and Welfare brings together³⁸¹ the main resources on mental health at work: relevant legislation, manuals for employers and occupational physicians, brochures, posters, and other guidance materials.

It also features a detailed **webpage**³⁸² on the prevention of all **forms of workplace harassment prohibited** by law (“power harassment,” sexual and maternity-related harassment, “customer harassment,” see Chapter 3).

Regarding the **Stress Check Test** (as of 2026, mandatory for workplaces with 50 or more employees), a **dedicated official website**³⁸³ provides extensive information, particularly on how to conduct the Stress Check Test.



In **South Korea**, KOSHA (Korea Occupational Safety & Health Agency) recently published **two technical guides** designed to help companies and organizations prevent health problems related to

³⁷⁸ [CSA Group. SPE Z1003 IMPLEMENTATION HANDBOOK. Assembling the Pieces: An Implementation Guide to the National Standard for Psychological Health and Safety in the Workplace. 2014.](#)

³⁷⁹ [MHCC. Frequently Asked Questions. The National Standard of Canada titled Psychological Health and Safety in the Workplace – Prevention, promotion and guidance to staged implementation.](#)

³⁸⁰ [CCOHS. Assembling the Pieces Toolkit. Get practical advice for implementing the National Standard of Canada for Psychological Health and Safety in the Workplace.](#)

³⁸¹ [Ministry of Health, Labour and Welfare \(MHLW\). ストレスチェック制度・メンタルヘルス対策.](#)

³⁸² [Ministry of Health, Labour and Welfare \(MHLW\). 職場におけるハラスメントの防止のために.](#)

³⁸³ [Ministry of Health, Labour and Welfare \(MHLW\). 厚生労働省版ストレスチェック実施プログラム ダウンロードサイト.](#)

stress in the workplace, in accordance with the legal framework of the Occupational Safety and Health Act and the Regulations on Occupational Safety and Health Standards (see Chapter 3).

The **first**³⁸⁴ guide serves as a **general technical reference** that defines the main occupational stressors and their effects on health, and proposes a structured procedure for assessing, managing, and monitoring these factors, as well as for planning appropriate corrective measures. In accordance with KOSHA guidelines, the guide identifies the KOSS questionnaire as the recommended method for assessing work-related stress (see above).

The **second**³⁸⁵ document complements this general framework **by providing sector- and occupation-specific guidance on occupational stress factors and preventive measures**. For example, for nurses, the following preventive measures are proposed:

- Establish an optimized work schedule to reduce the physical fatigue associated with shift work;
- Implement a psychological support program;
- Train staff in effective conflict management techniques and communication skills for dealing with tense situations involving patients and their families;
- Provide suitable spaces to allow employees to rest sufficiently during their shifts;
- Establish a mentoring system, allowing experienced employees to advise and guide their younger colleagues.

Following the adoption of a 2019 law that explicitly prohibited **workplace bullying** (see Chapter 3), the Ministry of Employment and Labor and KOSHA published a “**Manual for the Prevention of Health Impairment Caused by Harassment at Work**”³⁸⁶ in 2020. Primarily intended for employers, the manual covers various forms of harassment (including sexual harassment). In addition to outlining legal definitions, legislative references, obligations, and relevant case law, it provides examples of preventive measures as well as internal procedures for reporting and investigating cases and protecting victims. It also includes, in an appendix, **a questionnaire to be administered to employees** to detect signs of harassment and to assess the workplace climate within the company.



In the **United States**, the Occupational Safety and Health Administration (OSHA) **webpage** dedicated to workplace stress³⁸⁷ contains a wide range of guides, reference documents, practical advice, and recommendations for employers, as well as links to training programs, including those delivered by the National Council for Mental Wellbeing³⁸⁸. Its “**Mental Health First Aid at Work**”³⁸⁹ program provides a series of training courses for employees and supervisors to help them recognize the early signs of mental health issues and respond to them appropriately.

³⁸⁴ KOSHA. *GUIDE E-G-2-2025. 직무스트레스로 인한 건강장해 예방 기술지원규정*. 2025.

³⁸⁵ KOSHA. *GUIDE E-G-5-2025. 직무스트레스로 인한 건강장해 예방을 위한 업종별·직종별 기술지원규정*. 2025.

³⁸⁶ Ministry of Employment and Labor (MOEL), KOSHA. *직장 내 괴롭힘으로 인한 건강장해 예방 매뉴얼*. 2020.

³⁸⁷ OSHA. *Workplace Stress*.

³⁸⁸ The [National Council for Mental Wellbeing](#) is a U.S. membership organization that represents mental health and substance use treatment providers and advocates for improvements in the quality and accessibility of those services.

³⁸⁹ [Mental Health First Aid. When Your People Thrive, Your Business Follows](#).

The National Institute for Occupational Safety and Health (NIOSH) also offers various **resources on workplace stress**³⁹⁰, including structured and in-depth guides. A 1999 **publication**³⁹¹ analyzes the causes of workplace stress, reviews the state of knowledge on the subject, and outlines possible preventive measures.

In 2024, the Institute published an **article**³⁹² examining in greater detail the link between psychosocial hazards and their adverse effects, including their impact on health. It identifies **six major societal actions** needed to address work-related psychosocial hazards:

- “Increase awareness of this critical issue through a **comprehensive public campaign**;
- Increase etiologic, intervention, and implementation **research**;
- Initiate or augment surveillance efforts [to better understand the incidence, prevalence, and adverse effects of psychosocial hazards];
- **Increase translation of research findings into guidance** for employers and workers;
- Increase the number and **diversity of professionals skilled** in preventing and addressing psychosocial hazards;
- **Develop a national regulatory or consensus standard** to control work-related psychosocial hazards.” It should be noted that, unlike in other countries, there is no specific federal regulatory standard or standardized methodology for the assessment and management of PSRs in the United States.

The website of the **U.S. Surgeon General** (the nation's chief public health officer and the federal government's leading spokesperson on public health matters) also provides resources on mental health and well-being at work³⁹³.

Notably, “**The Surgeon General's Framework for Workplace Mental Health and Well-Being**”³⁹⁴ was published in 2022. This document aims to raise awareness among employers about the importance of **creating work environments that support mental health** by setting out key principles and best practices. In particular, it emphasizes:

- The key role of leaders in creating a positive work environment and implementing policies in this regard;
- The importance of providing workers - particularly those experiencing stress or other mental health issues - with access to resources, educational materials, and training;
- The importance of regularly evaluating prevention and support activities, measures, and initiatives in order to identify gaps and adapt resources and actions to workers' needs and new knowledge in the field.

Among its recommendations, the Surgeon General's Framework states that employers should provide workers with a “**living wage**,” emphasizing that **financial stress and economic insecurity** can have a significant impact on workers' mental health.

³⁹⁰ [NIOSH. *Stress and Work*.](#)

³⁹¹ [NIOSH. *STRESS...At Work*. 1999.](#)

³⁹² [NIOSH Science Bulletin. *An Urgent Call to Address Work-related Psychosocial Hazards and Improve Worker Well-being*. Summary. 10 April 2024.](#)

³⁹³ [U.S. Department of Health and Human Services. Office of the Surgeon General. *Workplace Mental Health & Well-Being*.](#)

³⁹⁴ [Office of the U.S. Surgeon General. *The U.S. Surgeon General's Framework for Workplace Mental Health & Well-Being*. 2022.](#)



The **Safe Work Australia website** (the **Australian** government statutory agency responsible for improving work health and safety) features two sections: one dedicated to psychosocial hazards³⁹⁵ and the other to mental health (at work)³⁹⁶. It brings together a wealth of **prevention and guidance information, organized by key psychosocial hazards** (lack of role clarity, inadequate reward and recognition, conflict or poor workplace relationships and interactions, sexual harassment, etc.).

Regarding the specific issue of violence and harassment, the agency provides resources tailored to different audiences. Employers have access to a guide³⁹⁷ to help them structure the prevention of workplace violence and aggression. Workers, in turn, are provided with an information sheet³⁹⁸ offering practical advice on how to deal with these risks.

Changes in work patterns have fostered the emergence of new forms of **digital violence**, ranging from online verbal abuse to cyberbullying. To address this issue, Australia established the **eSafety Commissioner**, the independent regulator responsible for online safety. Described as “the first agency of its kind in the world”³⁹⁹, its mandate is to prevent online harms and make digital spaces safer for all citizens.

Although its scope is broad, the eSafety Commissioner has developed a set of **recommendations** specifically addressing **digital risks in the workplace**.

The authority’s website features a **specific section for employers**⁴⁰⁰, providing an operational framework for preventing and managing online abuse, whether originating internally or externally (customers, suppliers, etc.).

While reiterating **employers’ legal obligation to assess, prevent, and reduce psychosocial risks** (see Chapter 3), the authority provides extensive information on this form of violence. Its aim is to help organizations understand the mechanisms of digital abuse in the workplace, identify the workers most at risk, and take effective action to prevent and respond to incidents.

In particular, the eSafety Commissioner provides companies with a **checklist**⁴⁰¹ designed to create safer online work environments. This document is built around three pillars: improving tech safety, investigating and managing incidents of online abuse, and building culture and skills - each supported by a set of specific recommendations, such as:

- **Tech safety and data protection:** prioritizing software capable of filtering abusive content and ensuring employee confidentiality (consent required for the publication of photos or names). It is also crucial to maintain a strict separation between the private and professional spheres by prohibiting the use of personal devices and accounts (e.g., phones, social media) for interactions with clients.
- **Governance and reporting:** establishing a multidisciplinary “online safety team” (management, HR, ICT staff) and implementing clear, accessible internal reporting channels, including confidential or anonymous options.

³⁹⁵ [Safe Work Australia. Psychosocial hazards.](#)

³⁹⁶ [Safe Work Australia. Mental health.](#)

³⁹⁷ [Safe Work Australia. Preventing workplace violence and aggression. National guidance material. 2021.](#)

³⁹⁸ [Safe Work Australia. Workplace violence and aggression – advice for workers. 2021.](#)

³⁹⁹ [eSafety Commissioner. What we do.](#)

⁴⁰⁰ [eSafety Commissioner. Online abuse in the workplace – employer information.](#)

⁴⁰¹ [eSafety Commissioner. Checklist to create a safer online workplace.](#)

- **Training and response:** fostering a “zero-tolerance” culture through training on diversity and inclusion. In the event of an incident, employers should take immediate protective measures (such as limiting interactions on workplace platforms and devices while the issue is being investigated) and support the victim in reporting the abuse to the eSafety Commissioner or the police, as appropriate, if the matter cannot be resolved internally.

The eSafety website also provides **a platform for reporting**⁴⁰² **online abuse**, including work-related cases. Companies can also request **free training sessions**⁴⁰³ **for their employees**, delivered by the eSafety Commissioner’s expert education and training team. Finally, the website offers a range of information and prevention recommendations **specifically intended for workers**⁴⁰⁴.

⁴⁰² [eSafety Commissioner. Report online harm.](#)

⁴⁰³ [eSafety Commissioner. Presentations for businesses.](#)

⁴⁰⁴ [eSafety Commissioner. Online abuse in the workplace – worker information.](#)

National Campaigns, Initiatives, and Networks

In recent years, in several of the countries analyzed, **campaigns** have been launched to raise awareness of the importance of mental well-being at work and the prevention of work-related mental health disorders.

Often complementing these campaigns, **national networks** have been established to bring together a wide range of stakeholders (OSH research institutes, occupational accident and disease insurers, ministries, universities, trade unions, employers' organizations, etc.) with the aim of strengthening cooperation on the prevention of PSRs, promoting mental health at work, and **facilitating the sharing of recommendations, tools, and good practices** in this area.

In line with these efforts, **dedicated digital platforms** have also been developed to centralize and disseminate knowledge and resources on mental health at work to relevant stakeholders (organizations, employees, prevention professionals, etc.).



In **France**, INRS launched an awareness-raising campaign in 2016⁴⁰⁵ titled “**Stress, Harassment, Aggression, Burnout. Psychosocial Risks: Talk about Them to Overcome Them**” with three main objectives: to encourage employees to speak openly about PSRs, to raise awareness among managers and employees of these risks, and to equip employers and management (business owners and senior executives, middle management, human resources departments) with the means to take action.

To this end, INRS developed various communication materials (posters, brochures) to support these three areas of focus:

- **Encouraging open discussion and providing information:** two general posters⁴⁰⁶ titled “Talk about It to Overcome It” and an educational brochure⁴⁰⁷ aimed at employees to help them recognize warning signs and identify the appropriate people to contact (managers, workers' representatives, occupational health services).
- **Breaking down stereotypes:** a series of seven posters⁴⁰⁸ titled “Let's Move Beyond Common Misconceptions,” designed to challenge widespread beliefs (e.g., “A little stress is motivating,” “Stress is part of the job”), thereby helping to change perceptions of psychosocial risks and overcome cultural barriers to prevention.
- **Equipping management:** the operational component was based on the brochure “9 Tips for Everyday Action”⁴⁰⁹ and dedicated webinars for managers, providing practical guidance and tools for PSR management.

⁴⁰⁵ Further details can be found in the INRS 2016 Annual Activity Report. [Faits et chiffres 2016. Brochure ED 4479. 2017.](#)

⁴⁰⁶ [Poster AA 785](#) and [Poster AA 786](#).

⁴⁰⁷ [INRS. Stress, harcèlement, agression, burnout...Risques psychosociaux. En parler pour en sortir. Dépliant ED 6251. 2016.](#)

⁴⁰⁸ Posters AA 787, AA 788, AA 789, AA 790, AA 791, AA 792, AA 793. Downloadable from [this webpage](#).

⁴⁰⁹ [INRS. Risques psychosociaux. 9 conseils pour agir au quotidien. Brochure ED 6250. 2016.](#)

More recently, **mental health was designated as the “Major National Cause” (*Grande Cause Nationale, GCN*)** for the year 2025⁴¹⁰, and this designation was renewed for 2026⁴¹¹. A “Major National Cause” is an official label awarded annually by the French government to a nonprofit organization or a coalition of associations. It enables the selected recipient, throughout the year, **to organize public awareness campaigns** on the designated theme (in this case, mental health) and to broadcast messages free of charge on public radio and television channels, as well as in public spaces. For 2025, the **“Mental Health Collective” (*Collectif Santé Mentale*)**⁴¹², bringing together 22 major mental health stakeholders in France (representing more than 3,400 organizations), was selected following the call for projects⁴¹³ launched for this purpose.

Under the slogan ***Parlons santé mentale !*** (“Let’s Talk about Mental Health!”), the government has identified four key objectives:

1. Reducing stigma by changing perceptions of psychological and mental disorders;
2. Developing prevention and early detection;
3. Improving access to care throughout France;
4. Supporting those affected in all aspects of their daily lives.

A **dedicated website**⁴¹⁴ centralizes all available resources, support services, and local initiatives. Accessible to everyone, including employers and people involved in workplace prevention, this platform aims to simplify access to support mechanisms and is continuously updated by relevant stakeholders.

Although the 2025 GCN focuses on mental health in general, it also includes a specific component **dedicated to the workplace**. In this context, an **institutional consortium** (Ministry of Labor, INRS, the Occupational Injuries Branch of the French Social Security system, Anact) developed an **online toolkit**⁴¹⁵ intended primarily for employers, managers, and human resources professionals. It outlines employers’ legal obligations regarding mental health and the main operational resources for preventing and managing PSRs (risk assessment methods and tools, training, publications and practical guides, available financial support schemes, etc.). The aim is to equip management to take effective day-to-day action and raise awareness among their teams.

At the same time, a **labelling scheme has been opened to all organizations** (including companies and public administrations) implementing projects aligned with the objectives of the 2025 GCN. Obtaining this label offers two key benefits:

- Greater recognition and visibility for these projects among the general public and partner organizations;
- The right to use the official visual identity and access to dedicated communication toolkits.

Eligibility criteria are available online⁴¹⁶.

⁴¹⁰ [Gouvernement français. *La santé mentale. Grande cause nationale en 2025.*](#)

⁴¹¹ [Gouvernement français. *La santé mentale. Grande cause nationale 2026.*](#)

⁴¹² [Collectif Santé Mentale. *Grande Cause Nationale.*](#)

⁴¹³ [Gouvernement français. *Parlons santé mentale ! Le Gouvernement soutient la campagne du Collectif Santé Mentale. 23 July 2025.*](#)

⁴¹⁴ [Gouvernement français. *Parlons santé mentale !*](#)

⁴¹⁵ [Ministère du Travail et des Solidarités. *Santé mentale et travail. Boîte à outils.*](#)

⁴¹⁶ [Gouvernement français. *Parlons santé mentale ! Labellisation.*](#)

Finally, Anact organizes an annual “**Week for Quality of Life at Work and Working Conditions**” (*qualité de vie et des conditions de travail, QVCT*)⁴¹⁷. This national initiative brings together companies, institutions, and social partners around issues and topics relating to QVCT, which, while not replacing PSR prevention, complements it (see Chapter 3). The 2025 edition⁴¹⁸, centered on the theme “Talking About Work Is Productive!,” was closely aligned with the *Grande Cause Nationale*. On this occasion, Anact offered dedicated content (including webinars⁴¹⁹) exploring the link between mental health and PSR prevention in the workplace.



In **Belgium**, the Federal Public Service “Employment, Labor and Social Dialogue” (FPS Employment) has carried out various **information and awareness-raising campaigns**.

The 2012 campaign, aimed at the general public, sought to raise awareness of **the impact of psychosocial risks on personal life** through a television advertisement: “What You Experience at Work Affects You Elsewhere Too”⁴²⁰.

The following year, a campaign specifically targeted employers, **line managers**, human resources professionals, and workers' representatives. For this purpose, a dedicated website, **Se sentir bien au travail** (“**Feeling Good at Work**”), was launched⁴²¹, containing numerous resources that continue to be regularly updated.

In addition to a radio spot⁴²² on burnout and awareness-raising sessions for members of the Committee for Prevention and Protection at Work (CPPT, see Chapter 3), research projects on the assessment and prevention of PSRs in companies were conducted as part of this campaign.

More recently, a **2021 federal campaign** dedicated to “**mental well-being at work**”⁴²³ marked a new stage in the development of public action in this area. Among the initiatives implemented is the creation of the “**Federal Network for Mental Health @ Work**”⁴²⁴.

This network brings together all federal public institutions⁴²⁵ with responsibilities relating to mental health at work. Together, they are committed to taking a comprehensive approach, covering risk prevention, early detection of disorders, and return-to-work support. The missions of its members focus on four main areas:

⁴¹⁷ [Anact. Semaine pour la qualité de vie et des conditions de travail. 2026.](#)

⁴¹⁸ [Anact. Semaine QVCT 2025 : temps forts et accès aux replays. 2025.](#)

⁴¹⁹ [Anact. Replay Santé mentale et travail : des clés pour prévenir les risques psychosociaux.](#)

⁴²⁰ [SPF Emploi, Travail et Concertation sociale. « Ce que vous vivez au travail se ressent aussi ailleurs ». Youtube.](#)

⁴²¹ [Se sentir bien au travail.](#)

⁴²² [SPF Emploi, Travail et Concertation sociale. « Les signaux ne sont jamais aussi clairs ». Youtube.](#)

⁴²³ [BeSWIC. Campagne fédérale pour le bien-être mental au travail \(SPF Emploi/SPF Sécurité Sociale – Belgique – 2021\).](#)

⁴²⁴ [Je me sens bien au travail. Réseau fédéral pour la santé mentale @ travail.](#)

⁴²⁵ These include: the Federal Public Service Social Security (FPS Social Security), the Federal Public Service Employment, Labor and Social Dialogue (FPS Employment), the National Institute for Health and Disability Insurance (NIHDI / INAMI), the Federal Agency for Occupational Risks (FEDRIS), the Federal Public Service Public Health, Food Chain Safety and Environment (FPS Public Health), the Superior Health Council (CSS), the National Institute for the Social Security of the Self-Employed (NISSE / INASTI), and the Federal Public Service Policy and Support (FPS BOSA). For more information, visit [this webpage](#).

- **Monitoring and knowledge sharing:** pooling research findings and evidence on PSRs;
- **Operational coordination:** coordinating initiatives in advance (project launches, communication activities, among others) to ensure the consistency of public action;
- **Strategic advice:** issuing recommendations, including for policymakers;
- **Information:** contributing to and updating the reference platform *Je me sens bien au travail* (“I Feel Good at Work”)⁴²⁶, developed as part of the 2021 campaign.

Structured into two dedicated sections (one for employers and one for workers), this platform covers the entire psychosocial risk management cycle. The “**Employers**” section provides extensive practical guidance and resources on preventing PSRs, identifying early warning signs, and supporting job retention (through workplace adjustments and relapse prevention measures) for employees suffering from or recovering from mental health issues. Similarly, the “**Workers**” section offers a wide range of information and materials on these same topics, specifically tailored to this audience.

The campaign also relied on other communication channels:

- **A podcast** titled “*La pause où on cause*” (“The Break Where We Talk”)⁴²⁷;
- **An active presence on the radio, on social media, and on other institutional websites;**
- The creation of a “**National Day of Job Satisfaction**”⁴²⁸ (8 June), celebrated each year through a range of initiatives.

On the occasion of the first celebration of this day (2022), the government presented fairly promising results⁴²⁹ from the 2021 campaign. Surveys indicated greater awareness of workplace well-being, the symptoms to watch for, and the behaviors to avoid in order to prevent stress and burnout.



In **Denmark**, the broad partnership *Sammen om Mental Sundhed*⁴³⁰ (“**Together for Mental Health**”) was established under the leadership of the Ministries of Health and the Interior, bringing together **around sixty stakeholders**, including public and private actors (social partners, associations, research institutes and universities, social protection organizations, etc.⁴³¹).

This partnership specifically aims to strengthen **mental health at work**, reduce mental health problems, and facilitate return to work after sick leave due to mental health issues.

A dedicated online **platform** shares numerous **resources and insights from the partnership’s members on these topics**, in the form of a “**toolbox**”⁴³² containing over 200 free materials (guides, documents, checklists, training modules, articles, etc.) primarily intended for employers and workplace prevention professionals.



⁴²⁶ [Je me sens bien au travail.](#)

⁴²⁷ [BeSWIC. Série de podcasts “La pause où on cause” se penche sur l’importance du bien-être mental au travail. 2023.](#)

⁴²⁸ [SPF Emploi, Travail et Concertation sociale. Le 8 juin est désormais... la Journée de la satisfaction au travail. 2022.](#)

⁴²⁹ [BeSWIC. Campagne fédérale pour le bien-être mental au travail \(SPF Emploi/SPF Sécurité Sociale – Belgique – 2021\).](#)

⁴³⁰ [Sammen om Mental Sundhed. Velkommen til Sammen om Mental Sundhed.](#)

⁴³¹ The complete list of the partnership’s members is available online: [Sammen om Mental Sundhed. Partnerskabet.](#)

⁴³² [Sammen om Mental Sundhed. Værktøjer.](#)

In **Spain**, INSST carried out **an awareness-raising campaign on the right to disconnect**, titled “Switch OFF to Stay ON” (*Pulsa OFF para estar ON*), in 2023.

For the occasion, the Institute reiterated the legal obligations (in force since 2018) of companies and public-sector employers (see Chapter 3), and emphasized that hyper-connectivity is not without risks to people’s health and safety. This campaign targeted workers, employers, and those involved in workplace risk prevention. A [webpage dedicated to the campaign](#)⁴³³ explains the applicable legislation and provides numerous resources, including documents, brochures, videos, and posters for workplaces, intended for all interested parties.



In **Germany**, **several initiatives** on the prevention of mental health risks at work have been carried out under the auspices of the Federal Ministry of Labor and Social Affairs (BMAS):

1. **INQA, the “Initiative New Quality of Work”** (*Initiative Neue Qualität der Arbeit*), launched and funded by the BMAS since 2002, **brings together**⁴³⁴ **the efforts of numerous stakeholders**: the federal government, the *Länder* (federal states), and municipalities; social partners; national agencies and research institutes in the field of OSH; associations; social protection organizations; and many others.

>The goal is to provide resources that help companies address the various challenges of today's world of work, including digitalization and psychosocial risks. Two sections of the INQA website (updated regularly) are dedicated to **mental health in the workplace**⁴³⁵ and **healthy work organization**⁴³⁶. They contain a wealth of practical tips, guides, and recommendations for employees and companies, including **guides for workers** (for example, “No Stress With Stress”⁴³⁷), and a 2016 **self-assessment tool** for employers and managers (“INQA Health Check”⁴³⁸). This self-assessment focuses not only on mental health but more broadly on promoting employees’ health and well-being. The document contains numerous recommendations and helps employers and managers plan measures as part of a sustainable workplace health management approach.

2. A **specific program** of the INQA initiative “**Mental Health in the World of Work**” (**psyGA**)⁴³⁹ was launched (and funded) by the BMAS in 2011, with technical support from the Federal Institute for Occupational Safety and Health (BAuA). It brings together research specifically focused on the prevention of work-related mental health disorders, resulting in various brochures, self-assessment guides, and e-learning courses⁴⁴⁰, intended for employers, managers, and employees.

⁴³³ [INSST. Desconexión digital y PRL #PulsaOFFparaEstarON.](#)

⁴³⁴ [INQA. Wer trägt die Initiative Neue Qualität der Arbeit?](#)

⁴³⁵ [INQA. Psychische Gesundheit am Arbeitsplatz.](#)

⁴³⁶ [INQA. Gesunde Arbeitsorganisation.](#)

⁴³⁷ For workers: [INQA. Kein Stress mit dem Stress – Eine Handlungshilfe für Beschäftigte. 2015.](#)

For companies and managers: [INQA. Kein Stress mit dem Stress – Lösungen und Tipps für Führungskräfte und Unternehmen. 2015.](#)

⁴³⁸ [INQA. INQA-Check „Gesundheit“. 2016.](#)

⁴³⁹ [INQA. Die psyGA-Angebote auf einen Blick bei INQA.](#)

⁴⁴⁰ For example, [the e-learning course Förderung psychischer Gesundheit als Führungsaufgabe](#) (“Promoting Mental Health as a Managerial Responsibility”) for managers.

3. From 2020 to 2021, Germany launched the interministerial initiative **Offensive Psychische Gesundheit**⁴⁴¹ (“Mental Health Campaign”), involving three federal ministries: Labor and Social Affairs (BMAS), Health (BMG), and Family Affairs, Senior Citizens, Women, and Youth (BMBFSFJ).

> This campaign aimed to reduce the stigma surrounding mental health across society, including in the workplace. It **mobilized more than 50 national partners**: health insurance funds, pension and statutory accident insurance institutions, the Federal Employment Agency, associations of psychologists and psychotherapists, as well as various alliances and specialized organizations. The goal was twofold: to encourage open dialogue on mental health and to strengthen cooperation among stakeholders. The campaign offered various resources tailored to different audiences (schools, families, workers), most of which have now been integrated into the INQA initiative’s website. A final report⁴⁴² details the concept, activities, and events of the *Offensive Psychische Gesundheit*, highlighting **the importance of the network** established through the campaign.

4. Finally, in response to contemporary changes (remote work, digitalization, climate change...), the BMAS launched the new **ARBEIT: SICHER + GESUND program**⁴⁴³ (“WORK: SAFE + HEALTHY”) in September 2022.

> This initiative is based on **policy workshops** (*Politikwerkstätten*) bringing together experts, social partners, and companies to collaboratively develop concrete solutions. Among the program’s four areas of focus, one is dedicated to **mental health at work**⁴⁴⁴. It aims to improve the management of mental health disorders, from prevention to return to work, as well as to enhance coordination among stakeholders. At the time of writing, the final conclusions of this program have not yet been published.



In **Italy**, one of the most significant initiatives was the **“Monitoring and Intervention Plan to Optimize the Assessment and Management of Work-related Stress Risk”**⁴⁴⁵ (abbreviated as *Progetto CCM 2013*, “**CCM 2013 Project**”), funded by the National Center for Disease Prevention and Control (CCM) of the Ministry of Health.

Coordinated by INAIL, the project brought together 14 regions, the autonomous provinces, and two universities, with the following objectives:

- **To evaluate the implementation of the legal obligation to assess the risk of work-related stress** (introduced in 2010);
- **To develop practical solutions** for intervention, training, and targeted actions tailored to different types of businesses and sectors.

In this regard, the partnership made it possible to:

- Support the University of Verona in **improving INAIL’s methodology** for assessing work-related stress, **by specifically addressing the needs of small businesses**⁴⁴⁶, particularly during the “in-depth assessment” phase required when the preventive measures resulting from the “preliminary assessment” phase have proved ineffective (see Chapter 3). A specific semi-structured interview model was thus developed and tested for companies with fewer than 30 employees;

⁴⁴¹ [BMBFSFJ. "Offensive Psychische Gesundheit" gestartet. 2020.](#)

⁴⁴² [Die Bundesregierung. Aktivitäten und Ergebnisse der Offensive Psychische Gesundheit.](#)

⁴⁴³ [BMAS. ARBEIT: SICHER + GESUND.](#)

⁴⁴⁴ [BMAS. ARBEIT: SICHER + GESUND. PSYCHISCHE GESUNDHEIT.](#)

⁴⁴⁵ [INAIL. Progetto CCM 2013 - Piano di monitoraggio e d'intervento per l'ottimizzazione della valutazione e gestione del rischio stress lavoro-correlato.](#)

⁴⁴⁶ [INAIL. Piano di monitoraggio e d'intervento per l'ottimizzazione della valutazione e gestione del rischio stress lavoro-correlato. Uno sguardo ai principali risultati. 2016.](#)

- Pilot an **adaptation of INAIL's methodology** for assessing work-related stress **in the healthcare sector** (which subsequently led to the publication of an adapted version of the methodology in 2022, see above);
- Involve the regions. For example, the Lombardy Region coordinated the **development of 9 sector-specific factsheets**⁴⁴⁷ (banking, retail, HORECA - hotels, restaurants, and cafés -, education, manufacturing, municipal police, healthcare, telecommunications, and land transport) that list the **main psychosocial risk factors**, as well as appropriate **prevention** and **organizational measures**.

The main results of the CCM 2013 Project are available on the INAIL website⁴⁴⁸.

⁴⁴⁷ [CISL Lombardia. Schede – Rischio stress lavoro-correlato nei settori.](#)

⁴⁴⁸ In particular, in the report: [INAIL. Piano di monitoraggio e d'intervento per l'ottimizzazione della valutazione e gestione del rischio stress lavoro-correlato. Uno sguardo ai principali risultati. 2016.](#)

Hotlines to Assist Workers and Employers on PSR-related Issues (Denmark, Japan and France)

In some countries, **telephone helplines providing assistance and legal advice** on PSRs have been established specifically for workers and employers by OSH authorities or ministries:

In **Denmark**, the Working Environment Authority has launched a hotline for:

- **Workers**, in cases of offensive and abusive behavior, including bullying and sexual harassment in the workplace;
- **Employers and managers**, to provide them with assistance and advice on managing the psychosocial working environment, particularly with regard to preventing offensive and abusive behavior.

The telephone consultation can remain anonymous; the information provided is not recorded and does not automatically lead to an inspection of the company. However, if the worker who has experienced abusive behaviour so wishes, they can file an initial complaint with the Danish Working Environment Authority through the same hotline.

In **Japan**, the Ministry of Health, Labor and Welfare has established **free hotlines providing assistance and support** for:

- The implementation of the Stress Check Test in companies and organizations;
- Workers and their families experiencing mental distress at work (e.g., due to relationship issues, work-related concerns, the impact of overwork on mental health, etc.) and employers, human resources departments, and managers seeking to address and prevent mental health issues at work, support their stressed workers, and understand and interpret the results of the Stress Check Test;
- Obtaining consultations on working conditions, particularly on issues related to labor laws, regulations, and standards, including matters concerning overtime and overwork. Available in 13 languages for employers and workers (who may also use the service anonymously), this service forms part of the broad range of ministerial initiatives aimed at preventing the phenomenon of *Karoshi*.

Other countries offer helplines dedicated to workers experiencing psychological distress related to their work. This is the case in **France**, which has **ten distinct sector-specific services for**: farmers, communication professionals, teachers, elected officials, seafarers, military personnel, police officers, healthcare workers, social workers assisting asylum seekers, and veterinarians.

These helplines are not all managed directly by a national authority, as in Denmark, but may involve various external organizations, associations, and service providers, sometimes in cooperation with the relevant ministries. Only the hotlines for military personnel and police officers fall directly under the Ministries of the Armed Forces and the Interior.

These helplines have been brought together on the website of **Psycom**, a public mental health information organization. Founded in 1992 by five Parisian psychiatric institutes, Psycom has been a Health Cooperation Group (*groupement de coopération sanitaire*, GCS) since 2015, with part of its budget funded by the Ministry of Health.



In **Japan**, several **ministerial websites** have been launched over time. Aimed at workers, employers, and managers alike, these sites bring together resources on various topics related to the prevention and management of PSRs, and, more broadly, to mental health at work.

In 2023, a “**Mental Health Portal for Workers**”⁴⁴⁹ was created as part of a project commissioned by the Ministry of Health, Labor and Welfare and carried out by the Japan Association of Industrial Counselors.

This portal centralizes a wide range of resources, such as guidance on mental health at work (including on returning to work after a psychosocial disorder), multimedia materials (videos, webinars), and self-assessment modules. It also includes a search engine for local support services, as well as a toolkit dedicated to improving the work environment.

These materials are segmented by target audience: **workers** (with dedicated sections on remote workers, the self-employed, teachers, and young workers); **managers; employers and business leaders**; as well as **families**, who are provided with resources to detect early warning signs of distress (particularly those related to overwork) and encourage their relatives to seek assistance from occupational health services.

As part of the **campaigns on Karoshi**, the **month of November**⁴⁵⁰ is dedicated each year to preventing deaths due to overwork. Various ministerial initiatives, aimed at both the general public and businesses, raise awareness of this issue (seminars, conferences, increased telephone consultations for businesses, enhanced monitoring and targeted inspections of workplaces suspected of requiring long working hours, meetings with the families of workers who have survived or died as a result of this phenomenon...). The campaign is supported by a specific **ministerial website**⁴⁵¹, entirely dedicated to preventing this phenomenon and bringing together numerous resources for workers and employers (prevention measures, good practices, available support services, etc.).

Finally, a **ministerial portal**⁴⁵² titled “**No to Harassment**,” launched in 2012, focuses on preventing the forms of harassment prohibited by law: psychological harassment (particularly by superiors – “power harassment” – and by third parties – “customer harassment”), sexual harassment, and discrimination related to pregnancy and maternity.

Still active, this portal offers preventive resources and information tailored to specific audiences: employees experiencing harassment, management, and human resources departments. Beyond definitions and statistical data, the platform details the measures that companies can implement, ranging from prevention to complaint handling and resolution.

It also includes a **case law database**⁴⁵³ compiling court decisions related to workplace harassment. This database can be accessed via a search engine that allows users to identify specific legal precedents.

⁴⁴⁹ [Ministry of Health, Labour and Welfare \(MHLW\). こころの耳：働く人のメンタルヘルス・ポータルサイト.](#)

⁴⁵⁰ [Ministry of Health, Labour and Welfare \(MHLW\). 11月は「過労死等防止啓発月間」です.](#)

⁴⁵¹ [Ministry of Health, Labour and Welfare \(MHLW\). しごとより、いのち.](#)

⁴⁵² [Ministry of Health, Labour and Welfare \(MHLW\). 職場のハラスメント対策総合サイト.](#)

⁴⁵³ [Ministry of Health, Labour and Welfare \(MHLW\). 裁判例を見てみよう.](#)



In **South Korea**, the Ministry of Employment and Labor has been running a **prevention campaign focused on work-life balance** since 2016, specifically targeting the issue of excessive overtime. The initiative is supported by a **dedicated platform**⁴⁵⁴ that brings together recommendations and technical documentation to promote a better work-life balance. Still active in 2025, this platform is regularly updated.

As part of this campaign, a **comprehensive system of monetary and non-monetary incentives** (such as the absence of labor inspections for a certain period) has been in place since 2019 and was expanded in 2024. The goal is to encourage companies to implement concrete and sustainable measures aimed at improving employees' work-life balance (see below under "Calls for Proposals, Incentives, and Financial Support"). The **annual list of recognized companies** and **details of the actions they have implemented** are available on the campaign website (see below under "Good Practices").



In **Australia**, among the national initiatives, mention should be made of the establishment of the **Mentally Healthy Workplace Alliance**⁴⁵⁵, a broad national network comprising organizations representing businesses, trade unions, mental health and occupational health experts and associations, regulators, and the government.

The Alliance, established in 2012 by the **National Mental Health Commission**⁴⁵⁶, aims to ensure psychologically healthy and safe workplaces, reduce psychosocial risks, and promote a healthy workplace culture. To achieve these objectives, in addition to strengthening cooperation among the Alliance's members, an **online platform** ("Mentally Healthy Workplaces"⁴⁵⁷) was launched, featuring numerous tools, such as:

- **Free learning modules**⁴⁵⁸ (with progress tracking) that guide employers and employees on various topics, including legal obligations, understanding psychosocial risk factors and their impact on the workplace, risk assessment, and the development of workplace mental well-being policies;
- **A set of methodological recommendations** for the effective management and monitoring of psychosocial risks;
- **A shared resource center**. All materials produced by the Alliance's members are centralized in a database (assessment tools, checklists, technical guides, research studies, etc.) accessible through a **multi-criteria search tool**⁴⁵⁹ (company size, target audience, etc.). Many resources are also categorized **by industry sector** (health, finance, education, etc.)⁴⁶⁰.

⁴⁵⁴ [Ministry of Employment and Labor \(MOEL\) - Work & Life Balance. 일·생활 균형 캠페인.](#)

⁴⁵⁵ [Australian Government. National Mental Health Commission. Mentally Healthy Workplace Alliance.](#)

⁴⁵⁶ The National Mental Health Commission is an Australian government body. Its missions include developing evidence-based policy advice for the government in order to improve Australia's mental health and suicide-prevention systems, as well as acting as a catalyst for change to help achieve these improvements. For more information, visit: [Australian Government. National Mental Health Commission. About.](#)

⁴⁵⁷ [Mentally Healthy Workplaces. About Mentally Healthy Workplaces.](#)

⁴⁵⁸ [Mentally Healthy Workplaces. Take action to create a mentally healthy workplace. Start learning.](#)

⁴⁵⁹ [Mentally Healthy Workplaces. Find trusted resources from organisations around Australia.](#)

⁴⁶⁰ [Mentally Healthy Workplaces. Connect with industry supports.](#)

With regard to awareness campaigns, Safe Work Australia (the Australian government statutory agency responsible for improving work health and safety) celebrates “**National Safe Work Month**”⁴⁶¹ every October, a month dedicated to promoting healthy and safe workplaces across Australia. In 2024⁴⁶², one week was dedicated to **mental health in the workplace**, with various materials (posters, brochures, awareness videos, etc.) focusing on understanding, preventing, and managing psychosocial risks.



“**Canada’s Healthy Workplace Month**”⁴⁶³ is celebrated each year in October.

Launched over 20 years ago by an independent nonprofit organization (Excellence Canada), this campaign is supported and celebrated by a number of government agencies and departments, such as the Department of National Defence⁴⁶⁴. Its overall goal is to **promote healthy and safe workplaces, including from a mental health perspective**. In October 2024, it promoted social connectivity in the workplace, healthy sleep to ensure physical and mental well-being, positivity at work, and improved resilience.

Its website contains a wealth of tips, information, and recommendations for improving the work environment, with a specific section on “**Mental Health and Workplace Culture**”⁴⁶⁵. The website also provides a list of **resources**⁴⁶⁶ **from various national stakeholders** (public, private, non-profit, etc.) on the topic of mental health at work.



In the **United States**, among the most recent initiatives, NIOSH launched its first federal campaign to tackle **burnout among healthcare professionals**⁴⁶⁷ in late 2023.

Named “**Impact Wellbeing**,” the campaign aims to provide hospital leaders with evidence-based resources to improve workplace policies and practices that reduce burnout, normalize seeking help, and strengthen professional well-being.

It is focused on **promoting and disseminating effective measures, preventive solutions, good practices, and operational policies** to achieve a gradual and lasting impact. Among the tools made available to healthcare organizations and professionals, NIOSH has:

- Recalled the availability of its **questionnaire** on worker well-being (the aforementioned “NIOSH WellBQ,” see above);
- Published **tools and guidance**⁴⁶⁸ **for hospital leaders** and managers on how to improve communication with staff, as well as on how to encourage staff to speak openly about mental health and burnout at work;

⁴⁶¹ [Safe Work Australia. About National Safe Work Month.](#)

⁴⁶² [Safe Work Australia. National Safe Work Month. Resources hub.](#)

⁴⁶³ [Excellence Canada, Canada’s Healthy Workplace Month. About Us.](#)

⁴⁶⁴ [Government of Canada. Department of National Defence. Canada’s Healthy Workplace Month.](#)

⁴⁶⁵ [Excellence Canada, Canada’s Healthy Workplace Month. Healthy Activity Ideas. Mental Health and Workplace Culture.](#)

⁴⁶⁶ [Excellence Canada, Canada’s Healthy Workplace Month. Resource Well. Mental Health.](#)

⁴⁶⁷ [NIOSH. Healthcare Workers. Impact Wellbeing™.](#)

⁴⁶⁸ [NIOSH. Healthcare Workers. Impact Wellbeing™: Communication Best Practices for Hospital Leaders.](#)

- Developed the “Impact Wellbeing Guide”⁴⁶⁹, a **specific guide to help leaders** of hospitals and healthcare facilities improve their employees’ well-being, based on **six key action areas**:

- 1) **Review hospital operations**, with an in-depth analysis of how hospital procedures and policies influence staff well-being;
- 2) **Create a dedicated team within the hospital** to support and promote initiatives to enhance professional well-being;
- 3) **Remove barriers** that prevent healthcare professionals from seeking help when experiencing psychological distress, for example by offering them confidential support options;
- 4) **Develop effective communication tools** to regularly inform staff about the hospital's initiatives and progress in improving professional well-being;
- 5) **Integrate professional well-being measures** into projects aimed at improving the quality of hospital services;
- 6) **Plan for the long term**, particularly by creating a detailed plan (e.g., on an annual basis), to ensure the continuity and development of initiatives promoting professional well-being.

> The guide also provides numerous practical tools to help implement all these steps, such as templates for internal communications, and checklists to assess and improve hospital operations in order to better integrate workplace well-being considerations and measures into them (“Hospital Review Worksheet”), among many other resources.

⁴⁶⁹ [NIOSH. Impact Wellbeing™ Guide: Taking action to improve healthcare worker wellbeing. 2024.](#)

Table 3: Main national platforms providing information on mental health at work, established through ministerial or government initiatives and intended for workers and employers

Australia	<u><i>Mentally Healthy Workplaces</i></u> is a platform managed and maintained by the “Mentally Healthy Workplace Alliance,” a national network established in 2012 by the Australian government’s National Mental Health Commission. The Alliance is composed of organizations representing businesses, trade unions, mental health and occupational health experts and associations, regulators, and the government.
Belgium	<u><i>Je me sens bien au travail</i></u> (“I Feel Good at Work”) is a website maintained by the “Federal Network for Mental Health @ Work,” established as part of the 2021 federal campaign promoting mental well-being at work and bringing together all federal public institutions with responsibilities relating to mental health at work.
Denmark	<u><i>Sammen om Mental Sundhed</i></u> is a website managed by the partnership of the same name, “Together for Mental Health,” established at the initiative of the Ministries of Health and the Interior. It brings together around sixty stakeholders, including public and private actors (social partners, associations, research institutes and universities, social protection organizations, among others). This partnership specifically aims to strengthen mental health at work, reduce mental health problems, and facilitate return to work after sick leave due to mental health issues. Partnership members share their resources and expertise on a dedicated online platform, notably through a “toolbox” containing over 200 free materials (guides, documents, checklists, training modules, articles, etc.) primarily intended for employers and workplace prevention professionals.
France	<u><i>Parlons santé mentale !</i></u> (“Let’s Talk about Mental Health!”) is a website created as part of the 2025 Major National Cause (<i>Grande Cause Nationale</i>, GCN) dedicated to mental health. Although the GCN is not specifically focused on the workplace, it fully integrates this dimension through several dedicated initiatives and actions. One section of the website is devoted to the prevention of psychosocial risks and the promotion of mental health at work. This platform is updated throughout the year with contributions from stakeholders.
Germany	<u><i>INQA, Initiative Neue Qualität der Arbeit</i></u>, the “Initiative New Quality of Work,” brings together resources to help companies create a healthy, high-quality work environment (including with regard to mental health). Launched and funded by the Ministry of Labor, the INQA initiative is supported by a network of numerous stakeholders: the federal government, the <i>Länder</i> (federal states), and municipalities; social partners; national agencies and research institutes in the field of OSH; associations; social protection organizations; and many others.
Japan	<u><i>Mental Health Portal for Workers</i></u>, launched in 2023 at the initiative of the Ministry of Health, Labor, and Welfare. This portal centralizes a wide range of resources, such as guidance on mental health at work (including on returning to work after a psychosocial disorder), multimedia materials (videos, webinars), and self-assessment modules. It also includes a search engine for local support services, as well as a toolkit dedicated to improving the work environment. These materials are organized by target audience: workers (with dedicated sections on remote workers, the self-employed, teachers, and young workers); managers; employers and business leaders; as well as families, who are provided with resources to detect early warning signs of distress (particularly those related to overwork) and encourage their relatives to seek assistance from occupational health services.

Good Practices

In addition to specific awareness-raising campaigns, other national initiatives are worth highlighting. For example, some aim to **establish national networks of companies committed** to promoting mental health at work, whose actions go **beyond their legal OSH obligations**. These networks help identify and disseminate good practices while fostering exchanges among companies (as in **Spain**, **France**, and **South Korea**).

For example, in **Spain**, since 2013, INSST has managed the “**Spanish Network of Healthy Companies**” (*Red Española de Empresas Saludables*, REES⁴⁷⁰), a project that connects companies with exemplary occupational health practices and is inspired by the “European Network for Workplace Health Promotion (ENWHP⁴⁷¹)”.

To join the REES, a company must not only comply with occupational risk prevention legislation but also implement health and well-being promotion initiatives that go beyond these legal requirements. In particular, it must:

- **Adhere to the Luxembourg Declaration**⁴⁷², an ENWHP document that sets out the fundamental principles for effective workplace health promotion;
- **Conduct a self-assessment** explaining and detailing the health promotion initiatives already implemented, in accordance with the principles of the Declaration.

Joining the REES network gives companies official recognition and access to resources, seminars, and networking events that facilitate **the exchange of good practices** with other member companies.

Furthermore, since 2015, REES member companies have been able to apply for **recognition of their “good practices”**⁴⁷³ (*Reconocimiento de Buenas Prácticas empresariales en Promoción de la Salud*) for particularly innovative and effective health promotion projects. The evaluation is based on quality criteria defined by INSST, aligned with those established by ENWHP, which awards a similar distinction at the European level⁴⁷⁴.

The **list of companies awarded**⁴⁷⁵ the INSST's Good Practice Recognition, together with descriptions of their initiatives, is available online. These often focus on **mental health at work**, as in the case of Santander Bank⁴⁷⁶, which was recognized in 2023 for providing, among other initiatives, a psychological support service to its employees.

In addition to these initiatives, the latest **Spanish multiannual OSH strategy**⁴⁷⁷ mentioned the intention to create a more specific **recognition program** aimed at companies that excel in the management and prevention of **mental health risks at work**.

To this end, INSST launched a targeted award program in 2022, titled “**Best Initiatives in Workplace Health Promotion**”⁴⁷⁸ (*Mejor Acción en Promoción de la Salud en el Trabajo*). Reserved

⁴⁷⁰ [INSST. Red Española de Empresas Saludables.](#)

⁴⁷¹ [ENWHP. The European Network for Workplace Health Promotion \(ENWHP\). A frontrunner in Workplace Health Promotion since 1996.](#)

⁴⁷² [ENWHP. Luxembourg Declaration on Workplace Health Promotion in the European Union.](#)

⁴⁷³ [INSST. Reconocimiento de Buenas Prácticas empresariales en Promoción de la Salud.](#)

⁴⁷⁴ [ENWHP. Quality criteria.](#)

⁴⁷⁵ [INSST. Buenas prácticas.](#)

⁴⁷⁶ [INSST. Salud y Bienestar en Santander.](#)

⁴⁷⁷ [INSST. Estrategia Española de Seguridad y Salud en el Trabajo, 2023-2027.](#)

⁴⁷⁸ [INSST. Mejor Acción en Promoción de la Salud en el Trabajo.](#)

for members of the REES network, this program recognizes outstanding workplace initiatives (in terms of engagement, impact, and originality) aligned with the objectives of the aforementioned Spanish OSH strategy. It **comprises three categories**: cardiovascular health, **mental health**, and the inclusion of workers with disabilities.

INSST makes detailed profiles of the winning initiatives available on its official portal⁴⁷⁹. For example, in the “Mental Health” category, the company Codisoil⁴⁸⁰ was recognized in 2023 for implementing a **communication tool** (a WhatsApp group) connecting employees with a multidisciplinary network of experts (psychologists, nutritionists, and doctors). This channel serves a dual purpose: disseminating monthly prevention-related content and providing direct access to confidential individual consultations.

In 2025, Renfe⁴⁸¹, Spain's national railway company, was recognized in the same category for its **support system for employees who are victims of accidents or assaults** (physical or verbal). Renfe's program provides comprehensive support to victims through a helpline available 7 days a week (9 a.m.–9 p.m.), direct access to psychologists specializing in emergency situations, and individualized clinical follow-up based on cognitive-behavioral therapies.



In **France**, as part of the 2025 **Major National Cause** (see above under “National Campaigns, Initiatives, and Networks”), a similar initiative aims to connect companies committed to promoting mental health at work. In late August 2025, the very first “**Charter of Commitment to Mental Health at Work**” was launched by the “Alliance for Mental Health” (*Alliance pour la Santé mentale*, a French nonprofit association), with the support of the French government⁴⁸².

This initiative has a twofold purpose:

- **Encourage companies to voluntarily commit to concrete actions** to support mental health at work, particularly in the areas of prevention, training, support, and awareness-raising;
- **Identify and document good practices** while **creating a network of companies committed** to this issue.

By signing the Charter⁴⁸³, companies commit to implementing measures across **four areas of action within three years**:

1. “**Raising awareness to demystify mental health**,” for example through information initiatives and training programs such as Mental Health First Aid. The objective is to promote a better understanding and consideration of mental health, as well as to encourage all employees to speak openly about mental health at work;
2. “**Establishing a framework that fosters dialogue on prevention**, quality of life at work, work organization, and working conditions,” involving all stakeholders within the company (employer, managers, human resources, the entire workforce, etc.);

⁴⁷⁹ [INSST. Empresas Premiadas por su mejor acción en Promoción de la Salud.](#)

⁴⁸⁰ [INSST. Codisoil con la salud.](#)

⁴⁸¹ [INSST. Renfe. Cuidamos de ti.](#)

⁴⁸² [Gouvernement français. Le Gouvernement lance la première charte pour la santé mentale au travail. 28 August 2025.](#)

⁴⁸³ [Alliance pour la Santé mentale. Santé mentale et emploi : l'Alliance s'adresse aux dirigeants d'entreprise et lance la 1ère Charte dédiée aux côtés du Gouvernement.](#)

3. **“Promoting the continuous improvement of working conditions,”** particularly through QVCT negotiation processes (“quality of life at work and working conditions” negotiations, see Chapter 3), while paying particular attention to the most vulnerable groups of workers (young workers, family caregivers, older workers, etc.). Training for managers is also a key lever. It aims to equip managers with the skills needed to support their teams, foster a sense of meaning at work, and manage organizational transformations with expertise in mental health;
4. **“Supporting individual situations”** by directly engaging employees on issues related to risk prevention (violence, discrimination, etc.) and personal determinants of health (sleep, physical activity, etc.). Companies must allocate the necessary resources and regularly inform employees about the appropriate points of contact in cases of mental distress: the occupational physician, the Health, Safety, and Working Conditions Commission (*Commission santé, sécurité et conditions de travail*, CSSCT) of the Social and Economic Committee (*Comité social et économique*, CSE), the Occupational Health and Prevention Services (*services de prévention et de santé au travail*, SPST), etc.

Companies also commit to **regularly evaluating** the impact of their actions in order to adjust their prevention strategy. They must also **share monitoring and progress information** with the Alliance for Mental Health, thereby contributing to the exchange of good practices within the network of signatories.



In **South Korea**, as part of a broad **national campaign** aimed at reducing overwork and promoting a better work-life balance (see above under “National Campaigns, Initiatives, and Networks”), the Ministry of Employment and Labor has operated an **official recognition program** titled **“Companies Excelling in Work-Life Balance”**⁴⁸⁴ since 2019.

To obtain this designation, companies must implement a series of **improvements and actions** inspired by a specific list of measures provided at national level⁴⁸⁵ that covers three fundamental aspects:

1. **Changing working practices regarding long working hours** (reducing overtime, encouraging employees to disconnect from work, etc.);
2. **Changing the way work is done** (improving internal work organization, scheduling only strictly necessary meetings, encouraging flexible work arrangements, etc.);
3. **Changing the company culture** (encouraging managers to make positive changes at work, encouraging employees to take their leave freely, etc.).

This designation is more than just a title; it also grants companies access, for a certain period, to around thirty financial support and incentive programs administered and managed by a broad network of ministries and other national authorities (reductions in labor inspections, exemptions from certain taxes, etc.; see below under “Calls for Proposals, Incentives, and Financial Support”).

⁴⁸⁴ [Ministry of Employment and Labor \(MOEL\) - Work & Life Balance. 일·생활균형 우수기업이란?](#)

⁴⁸⁵ [Ministry of Employment and Labor \(MOEL\) - Work & Life Balance. 근무혁신 10대 제안.](#)

This system therefore encourages companies to take concrete action and, at the same time, helps identify and collect **good practices** in promoting work-life balance. Indeed, the official campaign website provides access to the **annual list of companies recognized under the program**⁴⁸⁶, as well as **detailed descriptions of the measures** they have implemented.

For example, in 2025, the company KPAC (chemical sector) was included in this network of “excellent companies” for having implemented (among other measures):

- Flexible work arrangements based on an agreement with social partners;
- Clear guidelines regarding overtime, including a system of prior request and authorization, in order to identify and eliminate avoidable overtime;
- An attendance management system to ensure the transparent and efficient recording of employees’ actual working hours (including overtime);
- Various measures aimed at reducing the average weekly working time, which ultimately amounts to approximately 37 hours;
- A system to encourage employees to take annual leave: written notification of unused annual leave, guidance encouraging its use, the option to take leave in half-day units, and simplified leave request procedures;
- The introduction of special leave in addition to statutory leave, including a wide range of family-related leave, long-service leave, and reward leave;
- The introduction of various support schemes and measures (in addition to statutory provisions) to expand parental support, including a financial contribution from the company toward daycare or nursery fees;
- Measures encouraging men to take parental leave (75% take-up rate);
- The introduction of regular anonymous surveys as well as periodic meetings between employees and management to promote internal communication and identify any issues encountered by employees.



In other countries, such as **Denmark**, **Canada**, **Japan**, and **Australia**, examples of **good practices in the field of mental health at work have been identified at the national level without necessarily establishing a specific network of “committed” or “healthy” companies**. Companies can thus find documented good practices on the websites of ministries or national OSH authorities, as well as through the aforementioned national platforms providing information on and promoting mental health at work (see above).

For example, in **Denmark**, the Working Environment Authority has compiled a collection of case studies showing **successful initiatives to improve the working environment and working conditions**, including in the areas of PSR prevention and mental health promotion. Available online⁴⁸⁷, this collection allows users to filter case studies by sector (construction, healthcare, agriculture, etc.) and according to **four thematic areas**, illustrated below by concrete examples, such as:

⁴⁸⁶ List of companies recognized under the program available at the bottom of this webpage: [Ministry of Employment and Labor \(MOEL\) - Work & Life Balance. 일·생활균형 우수기업이란?](#).

⁴⁸⁷ [Arbejdstilsynet. Se cases.](#)

- **Good management:** The Danish Prison and Probation Service⁴⁸⁸ has established a peer network for its managers. Bringing together around forty managers on a regular basis, this forum facilitates discussions on the challenges of the managerial role and the sharing of good practices to reduce isolation and, in turn, strengthen the cohesion of operational teams;
- **High well-being at work:** Faced with a critically high staff turnover rate, the Gentofte Emergency Clinic⁴⁸⁹ overhauled its work organization. The elimination of long shifts and the introduction of flexible schedules have promoted a better work-life balance, thereby stemming the tide of resignations;
- **Safe workplace:** The *Hammel Neurocenter*⁴⁹⁰, a healthcare facility specializing in the rehabilitation of patients with moderate to severe brain injuries, organized tailored training programs for its staff to better manage the care of the most challenging patients. The modules (conflict resolution, calming body language, psychological first aid, etc.) aim to ensure safe interventions while safeguarding the mental health of the healthcare professionals;
- **Strong workplace culture:** The municipality of Faaborg-Midtfyn⁴⁹¹ has formalized a protocol for responding to cyberbullying to ensure that it is never viewed as an individual problem. The manager takes over as soon as an incident is reported: recording the incident, mediating with the perpetrator, and supporting the victim with both technical procedures (such as removing online content) and administrative steps.



In **Canada**, the Mental Health Commission of Canada (MHCC) launched a large-scale three-year **research project** in 2014 **to identify national good practices**, particularly among organizations that had implemented the “National Standard of Canada for Psychological Health and Safety in the Workplace” (see above under “Guides and Information Resources”).

More than 40 organizations of various types, sectors, and sizes participated in the project, involving a total of more than 250,000 employees. The study, available online⁴⁹², highlights **promising practical approaches** to implementing the aforementioned Standard, such as:

- **An SME in the construction sector**, facing several risk factors (including a heavy workload), implemented a targeted action plan in line with the Standard: maximizing work-life balance, identifying gaps in workflow, and reassigning tasks based on employees' individual preferences and skills (supported by specific training). At the same time, the company enhanced its employees' benefits package, notably offering access to psychologists. Employees responded positively to these measures, indicating that they felt valued;
- **A regional healthcare provider** (managing more than 2,500 healthcare professionals) implemented a policy aimed at ensuring a psychologically healthy and safe workplace. An internal communication strategy was developed to ensure that staff were kept informed of the initiatives and their progress, and to gather their feedback on them. Among the various actions taken, the company conducted an organizational self-assessment to identify psychosocial factors and risks in the workplace. Based on the results, it implemented various measures, such as:

⁴⁸⁸ [Arbejdstilsynet. Kriminalforsorgen. Ledertrivsel er lig med medarbejdertrivsel.](#)

⁴⁸⁹ [Arbejdstilsynet. Gentofte akutklinik. Fleksible vagtplaner skaber højere trivsel blandt personalet.](#)

⁴⁹⁰ [Arbejdstilsynet. Hammel Neurocenter. Urolige patienter får ro.](#)

⁴⁹¹ [Arbejdstilsynet. Faaborg-Midtfyn Kommune. Digital chikane: Aldrig den enkeltes ansvar.](#)

⁴⁹² [MHCC. Case Study Research Project Findings. 2017.](#)

- Improving the intranet to provide information to all staff on OSH issues, policies, and programs, including those related to PSRs;
- Enhancing and harmonizing access to psychological support for all workers;
- Implementing a “Working Alone Policy,” including emergency call boxes throughout the site and 24/7 security to enhance employee safety when working alone and during afternoon or night shifts;
- Providing a low-cost onsite daycare for staff to help address work-life balance challenges;
- Revising the “Employee Incident Report” to include a three-month follow-up for incidents involving psychological threats, with the aim of improving the adequacy of response as well as organizational learning from each incident.

The MHCC also produced a series of **video testimonials**⁴⁹³ featuring companies that participated in the good practice analysis. In these, they describe the practical implementation of the Canadian Standard within their organizations.

The MHCC also published **a catalogue** titled “**Implementation of the Standard: Testimonials**”⁴⁹⁴, documenting the rollout of the Canadian Standard within various organizations. Structured by sector (education, healthcare, transportation, etc.), this publication enables readers to identify mental health practices specifically tailored to each field of activity.



In **Japan**, the aforementioned “**Mental Health Portal for Workers**” features **a section dedicated to practical examples of good practices**⁴⁹⁵, including reports, photos of measures implemented, and interviews with various organizations and companies that have taken action to prevent and address work-related psychosocial disorders.

Several filters enable users to select good practices suited to their needs, including by region; company size (from micro-enterprises to multinationals); sector (healthcare, construction, transportation, education, finance, etc.); type of prevention (primary, secondary, tertiary, or specifically related to the implementation of the Stress Check Test); people involved (employer, human resources, external or internal OSH staff, etc.); year of implementation (since 2012, as the website is regularly updated).

Examples include:

- **An IT company**⁴⁹⁶ with 82 employees has established, in addition to access to an occupational physician, both internal (company staff) and external counseling services, allowing employees to obtain support and advice for their difficulties, ranging from minor concerns to more serious situations involving stress, excessive workload, overwork, conflicts with colleagues, etc. Several training sessions have been provided to managers, particularly on preventing harassment and mental health issues among their subordinates. A suggestion box allows employees to anonymously propose improvements (for example, to work processes or the work environment), with feedback provided to staff every three months. Finally, employees who are unable to work on site for health-related reasons

⁴⁹³ [MHCC. “Implementing the National Standard: Testimonials”. Youtube.](#)

⁴⁹⁴ [MHCC. Implementation of the Standard: Testimonials. 2017.](#)

⁴⁹⁵ [Ministry of Health, Labour and Welfare \(MHLW\). 職場のメンタルヘルス対策の取組事例](#)

⁴⁹⁶ [Ministry of Health, Labour and Welfare \(MHLW\). スパークジャパン株式会社（宮崎県宮崎市）](#)

(chronic illness or mental health conditions, etc.) or family reasons are permitted to work remotely in order to promote a better work-life balance.

- **A company manufacturing and selling materials**⁴⁹⁷, with approximately 160 employees, has implemented a multidimensional action plan. For example, to promote work-life balance, it has introduced the automatic shutdown of employees' computers at a fixed time. Internal dialogue is supported through regular meetings with managers, covering both operational challenges and personal difficulties. These measures are complemented by training programs for managers and mental health awareness seminars.



In **Australia**, the **Mentally Healthy Workplaces** online platform lists **numerous examples of good practices**⁴⁹⁸ implemented by organizations to prevent mental health issues and promote mental well-being at work. These examples can be filtered by area of interest (company size, stakeholders involved such as the employer, human resources, workplace health and safety representatives, etc.).

For example, the country's national postal service⁴⁹⁹ (**Australia Post**) was particularly active during the COVID-19 pandemic, which heightened workers' uncertainties and fears, as well as their workload (parcel delivery demand increased by 40% during the pandemic). Therefore, between 2020 and 2021, Australia Post implemented a **tailored approach** to managing psychological risks and supporting workers, notably by introducing a **“psychosocial risk management strategy.”** In collaboration with the Health and Wellbeing team, employees working in the departments most exposed to stress participated in a psychosocial risk assessment program through surveys and interviews. Based on the results, Australia Post put in place a range of preventive measures, such as:

- **The creation of “peer forums,”** where workers could discuss their challenges in managing job demands, thereby fostering a supportive community environment, information sharing, and mutual understanding of colleagues' difficulties;
- **The identification and adoption of new work methods**, particularly to promote rest and recovery during and outside working hours. These new work methods were the subject of an internal company document, which was subsequently shared and endorsed by senior management;
- **Training on managing “high-conflict personalities,”** provided to human resources professionals, equipping them with guidance and practical information on how to approach and manage such employees.

Evaluations of the measures adopted showed a positive response and satisfaction from the workers involved. Following the introduction in 2022 of new legal obligations for employers regarding the prevention and management of psychosocial risks (see Chapter 3), Australia Post decided⁵⁰⁰ to **appoint a Chief Mental Health Officer (CMHO)** to assist management in implementing and coordinating a broad range of well-being initiatives to meet the diverse needs of the company's more than 60,000 employees.

⁴⁹⁷ [Ministry of Health, Labour and Welfare \(MHLW\). 株式会社アキツ（大阪府東大阪市）](#)

⁴⁹⁸ [Mentally Healthy Workplaces. Learn from organisations and industries.](#)

⁴⁹⁹ [Mentally Healthy Workplaces. Implementing a tailored risk-based approach across a broad workforce: Australia Post.](#)

⁵⁰⁰ [Armstrong, P. “The role of diversity, equity and inclusion in psychosocial safety”. HRM. 25 October 2023.](#)

Another example⁵⁰¹ of good practices involves a funeral services company ([Bowra & O'Dea](#)), where many employees struggled to manage funerals for people who had died by suicide, particularly when they were required to organize several such funerals. Recognizing the need to address this specific emotional impact, the company partnered with a nonprofit organization (Neami National), which provides mental health services, to develop **an employee support plan**, including tailored **training**.

A workplace wellbeing toolkit and **bereavement resources** were also made available to staff and clients. The tools developed were subsequently shared with the network of the Australian Funeral Directors Association, whose members may face similar challenges.

⁵⁰¹ [Mentally Healthy Workplaces. Supporting staff and workplace responses to suicide: Neami National and Bowra & O'Dea Funeral Directors.](#)

Calls for Proposals, Incentives, and Financial Support



Key Points

In several countries, financial incentives and calls for proposals support mental health prevention at work. Managed by ministries, occupational accident and disease insurers, specialized national bodies, or national OSH authorities, these funds are intended either for the **specific management of psychosocial risks** or for the **general improvement of working conditions**, with positive indirect effects on the psychosocial work environment.

Various forms of financial support exist, and multiple instruments may coexist within the same country. The categories identified below illustrate their diversity:

- Grants enabling companies and/or public sector organizations to benefit from **consultations with an expert in PSRs** or occupational mental health, in order to assist them in their prevention efforts and help them **comply with their legal obligations in this area** ([Denmark](#), [France](#));
- Funding schemes and grants intended for companies and/or public sector organizations to help them **improve their work environment** (including from a psychosocial perspective), enhance quality of life at work and working conditions, reduce sickness absenteeism, or prevent “mental wear and tear” at work ([Belgium](#), [Denmark](#), [France](#)), sometimes **even going beyond their legal obligations**;
- Funding available to sector-representative organizations or other consortia to carry out pilot projects in companies aimed at identifying appropriate **sector-specific measures** for the prevention of PSRs ([Australia](#), [Belgium](#));
- **Systems combining financial and non-financial incentives** (such as the suspension of labor inspections or their limitation for a certain period) to encourage companies to implement workplace mental well-being measures ([South Korea](#), with a focus on PSRs and particularly work-life balance);
- Support, in the form of **guidance and consultations with experts or psychologists**, provided directly to workers experiencing psychological distress related to or caused by their work (for example, following psychological trauma at work in [South Korea](#) or in cases of signs of **work-related burnout** in [Belgium](#)), as well as to individuals whose need for psychological support is not necessarily work-related ([France](#), [Italy](#) for individuals below a certain income threshold);
- National calls for proposals **to develop awareness-raising campaigns and training programs** for companies on PSR prevention ([Italy](#));
- Funding, including **at the local or regional level**, aimed at advancing research on mental health at work or encouraging stakeholders to develop practical tools and solutions for the prevention of PSRs in companies ([Australia](#), [Spain](#)).

In **France**, funding is provided by:

1. The “Fund for the Improvement of Working Conditions” (*Fonds pour l’amélioration des conditions de travail, FACT*)⁵⁰², a public funding scheme managed by Anact.

It funds **initiatives that go beyond simply helping companies comply** with their legal obligations regarding risk prevention. Based on annual calls for proposals, the fund **co-finances** projects led by **intermediary organizations** (business networks, competitiveness clusters, economic interest groups, sectoral and cross-sectoral professional organizations, trade unions, employers’ organizations, etc.) or by **companies and associations with fewer than 300 employees**. Funding may be provided for:

- a. **Individual projects**, such as a project led by a company or association on an experimental basis. In this case, the FACT contributes to the costs associated with support provided by an external consultant;
- b. **Inter-company and/or territorial collective initiatives**, taking the form of a project led by an intermediary organization to support a group of companies or associations. The FACT contributes to the costs associated with support provided by a consultant, as well as with coordination, knowledge-sharing, and dissemination activities carried out by the project lead;
- c. **Collective projects aimed at developing tools and methods**, involving, for example, an intermediary organization supporting the development of a set of services that can be made widely available to micro-enterprises and SMEs in one or more sectors. The FACT contributes to the costs associated with developing and delivering this set of services (dissemination of knowledge, tools, and methods) carried out by the project lead, with the support of a network of companies and/or associations, and external service provider(s) (maximum funding: EUR 80,000 in 2025).

The FACT supports projects aimed at improving the quality of life at work and working conditions “with a focus on social sustainability and durability,” while strengthening the **primary prevention** of occupational risks in order to promote **sustainable, high-quality employment**.

Each year, specific themes are identified. Although the fund does not specifically target PSRs, the improvements in working conditions it finances may have a positive impact on the psychosocial work environment. For example, in 2022, one of the FACT’s calls for proposals focused on improving working conditions in the **transport and logistics sector**. Fourteen projects received funding (for a total of approximately EUR 800,000).

The fund targeted this sector as it is considered relatively unattractive due to **difficult employment and working conditions** (tight workflows, issues with handling, palletizing, and delivery, as well as organizational and logistical constraints). These factors contribute, among other things, to the emergence of psychosocial risks, directly impacting employees’ physical and mental health.

The supported initiatives focused on **work organization** (working hours, workload, etc.) as well as **career development**, to reconcile performance with the prevention of PSRs. For example, a multi-company project in Normandy implemented a comprehensive strategy, improving career management, the onboarding and retention of new employees, the adaptation of workstations and work schedules, and employee participation in the development of the occupational risk prevention plan.

The list of themes and projects funded each year is available online⁵⁰³ on the FACT website.

⁵⁰² [Anact. Fonds pour l’amélioration des conditions de travail \(Fact\).](#)

⁵⁰³ [Anact. Fonds pour l’amélioration des conditions de travail \(Fact\).](#)

2. The “Interministerial Fund for the Improvement of Working Conditions” (*Fonds interministériel pour l'amélioration des conditions de travail, FIACT*)⁵⁰⁴ was established in 2018 for **the civil service** and is managed by the Directorate-General for Administration and the Civil Service (*Direction générale de l'administration de la fonction publique, DGAFP*).

It supports government departments in implementing **projects to improve** the working conditions of civil servants and it contributes to providing social support for organizational transformations. Projects must address a topic related to quality of life at work and working conditions (QVCT), occupational safety and health (OSH), or preventive medicine.

Projects aimed at preventing **psychosocial risks** may be eligible for funding, as **mental health** is explicitly included among the example topics. In 2022⁵⁰⁵, out of 37 funded projects, 5 specifically addressed PSRs, while 7 focused on QVCT.

3. A financial grant specifically dedicated to the prevention of PSRs provided by the Occupational Injuries Branch of the French Social Security system (*Assurance Maladie – Risques professionnels*). Available to companies with fewer than 50 employees, the “PSR Prevention Support” (*RPS Accompagnement*)⁵⁰⁶ grant finances the services of **an approved consultant** to help the company implement a collective PSR prevention approach.

The support includes **two types of services**: i) identification/assessment of PSR factors and assistance in developing an action plan; ii) support for the implementation, monitoring, and evaluation of the preventive actions.

The application for funding must be submitted by the company. In 2026, the grant, capped at EUR 25,000, covers **70% of the costs** (excluding VAT) incurred for the consultancy services and may not be less than EUR 500.

Finally, more broadly, since 2022, a French mental health initiative has allowed anyone to receive up to **12 sessions of psychological counseling** per year at a reduced cost, with partial reimbursement (60%) by the French Health Insurance.

Access to this program, called **Mon soutien psy**⁵⁰⁷ (“My Psychological Support”), has not required a medical prescription since 2025. After the initial consultation, the psychologist determines whether further sessions are needed. The psychologist must be selected from a list of practitioners contracted with the French Health Insurance, available online.

Although the scheme is not focused on psychosocial risks in the workplace, this initiative allows anyone to receive psychological support, including workers who may be facing difficulties related to their work.

However, the program is not intended for those experiencing severe anxiety, depressive disorders, or suicidal thoughts, who should instead consult a psychiatrist.



⁵⁰⁴ [DGAFP. Le fonds interministériel pour l'amélioration des conditions de travail \(FIACT\).](#)

⁵⁰⁵ [DGAFP. Les lauréats 2022 du fonds interministériel pour l'amélioration des conditions de travail \(FIACT\).](#)

⁵⁰⁶ [L'Assurance maladie. Subvention contre les risques psychosociaux : RPS Accompagnement.](#)

⁵⁰⁷ [L'Assurance maladie. Remboursement de séances chez le psychologue : dispositif Mon soutien psy.](#)

In **Italy**, a similar initiative, also launched in the aftermath of the acute phase of the pandemic, was introduced by a decree-law in December 2021 to “**address the increase in conditions of psychological distress**, such as depression, anxiety, and stress, exacerbated by the pandemic,” as stated by the Ministry of Health⁵⁰⁸.

Known as the “**Psychologist Bonus**” (*Bonus Psicologo*), this benefit takes the form of a financial contribution to help cover the costs of psychotherapy sessions. It is administered by the INPS (*Istituto nazionale della previdenza sociale*, Italy’s National Social Security Institute) and not directly by the national health insurance system, as is the case in France.

To be eligible, the applicant must have an “Equivalent Economic Situation Indicator” (*Indicatore della situazione economica equivalente*, ISEE)⁵⁰⁹ not exceeding EUR 50,000 per year. Once the application has been approved by the INPS, the beneficiary receives a unique code, valid for 270 days, which must be provided to the healthcare professional for each psychotherapy session. The contribution covers a maximum of EUR 50 per session. The total amount available to each beneficiary, over the 270-day period, varies depending on their ISEE bracket (ranging from a minimum of EUR 500 to a maximum of EUR 1,500).

Like the French *Mon soutien psy* program, the “Psychologist Bonus” is an individual support measure that operates independently of the workplace. Although it does not directly target psychosocial risks, it can serve as a gateway to recognizing work-related difficulties and, in the longer term, encourage more open discussion about mental health issues in the workplace.

With more direct relevance to mental health in the workplace, INAIL (the national occupational accident and disease insurance institution) launched a **public call**⁵¹⁰ for **funding** in 2024, **with a budget of EUR 24 million**, to support the development of a **national training and information campaign** on prevention in the field of OSH. The campaign must raise awareness of new and emerging risks; four thematic areas are identified (each allocated EUR 6 million), one of which specifically addresses the **prevention of psychosocial risks**.

This call for proposals is open to **employers’ organizations, trade unions, or bipartite bodies** offering training and information activities for workplace health and safety representatives, workers, and employers. Although it does not provide direct funding to companies, this financial support is intended to strengthen the efforts of the **intermediary bodies** to promote better prevention of PSRs.



⁵⁰⁸ [Ministero della Salute. Bonus Psicologo.](#)

⁵⁰⁹ In Italy, the ISEE is an indicator used to assess the economic situation of families or individuals by taking into account various elements, including income, assets, and household composition. This document is distinct from the income tax return.

⁵¹⁰ [INAIL. Avviso pubblico formazione e informazione 2024.](#)

In **Belgium**, **four funding mechanisms** for the prevention of PSRs can be highlighted:

1. Funding for sectoral programs for the primary prevention of PSRs

In January 2022, as part of the Federal Action Plan for Mental Well-being at Work⁵¹¹, the Federal Public Service “Employment, Labor, and Social Dialogue” (FPS Employment) launched **a call for projects⁵¹² to fund PSR prevention actions in selected sectors of activity**. The initiative aimed to support one-year pilot projects focused on the collective primary prevention of PSRs.

Funding was not allocated directly to companies, but to **sectoral organizations** (such as joint committees) tasked with developing **prevention tools tailored** to the specific characteristics of their industry, which could then be implemented by companies across the sector.

Eleven sector-specific pilot projects were selected, covering sectors such as metalworking, the food industry, textiles, construction, the nonprofit sector, the wood industry, the electrotechnical industry, and family support services. Each project proposed measures tailored to the specific characteristics and needs of the industry concerned. For example, the pilot project dedicated to the construction⁵¹³ sector structured an action plan around three deployment phases:

- **Phase 1:** participatory assessment of PSRs in 12 companies across 4 different construction sectors;
- **Phase 2:** development of sector-specific toolkits with additional support resources (webinars, informational videos, brochures, etc.);
- **Phase 3:** implementation within companies (follow-up sessions, consultation meetings, informational sessions with management, awareness-raising activities).

A final evaluation report⁵¹⁴ on the 11 pilot projects was published by FPS Employment, detailing for each one the actions taken, the implementation challenges encountered, and the expected short- and long-term results.

2. Funding for programs for the primary prevention of burnout

Burnout was identified as a major issue in the 2017-2018⁵¹⁵ Interprofessional Agreement concluded by the Belgian social partners. To address this risk, a **funding program** supporting pilot projects **for the primary prevention of burnout** was launched⁵¹⁶. Governed by a Royal Decree, these pilot projects – funded through employers’ contributions for “at-risk groups”⁵¹⁷ – were rolled out over two cycles between 2018 and 2022.

⁵¹¹ [SPF Emploi, Travail et Concertation sociale. Le bien-être au travail lors de la dernière législature \(2020-2024\) : quelques chiffres. 28 January 2025.](#)

⁵¹² [BeSWIC. Risques psychosociaux \(RPS\) - Bonnes pratiques. Projets sectoriels "La prévention des risques psychosociaux au travail" \(SPF Emploi – Belgique – 2022/2023\).](#)

⁵¹³ [BeSWIC. Kick-off des projets sectoriels sur la prévention des risques psychosociaux au travail. 10 October 2022.](#)

⁵¹⁴ [SPF Emploi, Travail et Concertation sociale. Rapport d'évaluation des projets sectoriels relatifs à la prévention des risques psychosociaux au travail. 2023.](#)

⁵¹⁵ [CNT. Interprofessioneel Akkoord 2017-2018. Accord Interprofessionnel 2017- 2018. 2017.](#)

⁵¹⁶ [CNT. Risques psychosociaux dont le burn-out.](#)

⁵¹⁷ Under the Act of 27 December 2006 containing various provisions, employers in Belgium are required to pay an employer contribution of 0.10% (calculated on the basis of the total wages of employees under contract) to finance initiatives aimed at categories of the population referred to as “at-risk groups” (such as low-skilled jobseekers, the long-term unemployed, older workers, etc.). Through a sectoral collective labor agreement (CLA), or through a company-level CLA, sectors and employers are free to determine towards which categories of at-risk groups this effort should be directed, in accordance with the applicable regulatory framework. More information is available here: [SPF Emploi, Travail et Concertation sociale. Groupes à risque – Présentation.](#)

This funding, managed by the National Labor Council (*Conseil National du Travail*, CNT)⁵¹⁸ in cooperation with FPS Employment, made it possible to **test the primary prevention approach to burnout** that the CNT had set out in its 2018 opinion⁵¹⁹.

The grant scheme was open to companies (individually or in groups) as well as to sectors, provided that the sectoral applications were approved by the relevant joint committee. Each application had to be submitted **jointly with an expert organization or consultant** with at least three years of experience in supporting companies in PSR prevention. For the 2018 cycle, the grants were capped at EUR 8,000 per company project and EUR 24,000 per sectoral initiative; the total budget allocation amounted to EUR 500,000⁵²⁰.

To be accepted, projects had to propose an **integrated and multidisciplinary approach** by developing one or more of the following actions:

- a) **Information and awareness-raising;**
- b) **Identification of prevention measures;**
- c) **Implementation** of measures, particularly in relation to training, awareness-raising, organizational culture, skills management, and leadership development;
- d) **Evaluation** of these measures.

The two project cycles (between 2018 and 2022) were subsequently evaluated⁵²¹, leading to the publication by the National Labor Council of the **“Recommendation addressed to companies and sectors on the prevention of burnout”**⁵²² in late 2023.

In this document, the CNT advises them to:

1. Seek to improve the psychosocial work environment in all its aspects by adopting an integrated and multidisciplinary approach;
2. Build strong internal support;
3. Conduct a comprehensive analysis of all risk factors present within the company, at the **collective, team, and organizational** levels;
4. Pursue both rapid improvements and long-term, sustainable efforts;
5. Adopt a bottom-up, participatory, and dialogue-based approach, involving workers and their representatives;
6. Benefit from the expertise that sectors can provide.

A new 2026 grant cycle⁵²³ has been announced.

⁵¹⁸ A federal public body for social dialogue, whose seats are equally divided between workers' and employers' organizations. For more details: [CNT. Qui sommes-nous.](#)

⁵¹⁹ [CNT. Avis n° 2.080 du 27 février 2018.](#)

⁵²⁰ [SPF Emploi, Travail et Concertation sociale. Subventions de projets pilotes destinés à la prévention primaire du burn-out. 3 July 2018.](#)

⁵²¹ First cycle: [CNT. AVIS N° 2.218. Séance du mercredi 2 juin 2021. Projets destinés à la prévention primaire du burn-out au travail. Évaluation du premier cycle de projets. 2021.](#)

Second cycle: [CNT. AVIS N° 2.330. Séance du mardi 29 novembre 2022. Projets destinés à la prévention primaire du burn-out au travail. Évaluation du deuxième cycle. 2022.](#)

⁵²² [CNT. Recommandation n° 30 adressée aux entreprises et secteurs concernant la prévention du burn-out. Pour des travailleurs sains dans des organisations saines. 2023.](#) English version available: [CNT. Recommendation No. 30 to enterprises and sectors on prevention of burn-out – For healthy employees in healthy organisations. 2023.](#)

⁵²³ [CNT. Projets-pilotes destinés à la prévention primaire du burn-out – Sélection en 2026.](#)

3. Funding for programs for the secondary prevention of burnout

At the same time, an initiative supporting the **secondary prevention of burnout** was launched to help workers affected by this syndrome treat and manage it, and return to work.

An initial “**burnout pilot project**,” managed by Fedris, the Federal Agency for Occupational Risks (*Agence fédérale des risques professionnels*), ran from 2019 to 2024. Open only to the banking, hospital, and healthcare sectors, it targeted workers suffering from burnout at an early stage as a result of psychosocial risks, who were either taking repeated short-term sick leave or had been on sick leave for less than two months⁵²⁴.

To participate, the request had to be made exclusively by the worker's attending physician, the occupational physician, or the prevention advisor for psychosocial aspects (CPAP, see Chapter 3). For these workers, Fedris offered a “**support pathway**” (lasting up to 9 months), comprising a set of **targeted measures focused on**:

- **The individual:** multidisciplinary consultations to understand the underlying causes of burnout, learn to articulate the realities of their work and their emotions, strengthen stress management, etc., together with a number of individual support and counseling sessions based on psychocorporal or cognitive-emotional approaches;
- **The workplace:** subject to the employee's explicit consent, a formal multidisciplinary consultation meeting could be organized within the company to adapt working conditions. This meeting brought together key stakeholders: the Fedris coordinator, the occupational physician, the CPAP, management (human resources, leadership), a trade union representative of the worker's choice, etc.

Regarding this last point, the Fedris evaluation report⁵²⁵ presents seemingly contradictory data: based on a sample of workers, it appears that the formal in-company meeting was rarely organized. However, more than 60% of the workers surveyed were satisfied with the multidisciplinary approach.

To explain these findings, Fedris notes that **informal dialogue mechanisms** most likely took place within the workplace (spontaneous conversations, consultations involving only one or two individuals chosen by the employee, etc.), which may have been perceived as less “intimidating” than the formal process. Survey respondents did indeed indicate that **several adjustments were made** to their jobs, sometimes at the employee's own initiative and, in other cases, at the employer's (the latter reportedly implemented workplace adjustments for 30% of respondents immediately following the Fedris support pathway, and for 28% of them three to six months after the end of the program).

The evaluation report identifies the **actions most frequently taken by employers** to support workers' return to work (in descending order): adjusting working hours; reducing working hours; transferring the employee to a different department for part or all of their work; hiring additional staff to better manage heavy workloads; reassigning the employee to a different position; and adjusting, limiting, or better distributing work tasks.

At the same time, **the measures most frequently adopted by the workers themselves** included (in order of frequency): working fewer hours; requesting greater clarity regarding tasks and responsibilities; keeping to working hours / finishing work on time / disconnecting after work; taking breaks / incorporating additional breaks or rest periods; adjusting work schedules; and establishing better communication in the workplace regarding the difficulties encountered.

⁵²⁴ Fedris. *Projet pilote burn-out (de 2019 à 2024)*.

⁵²⁵ Fedris. *Rapport scientifique du projet pilote implémenté par l'Agence fédérale des risques professionnels. Évaluation d'un programme de prise en charge de travailleurs en burn-out précoce. 2023*.

In cases where reintegration was not possible, the Fedris support pathway included one to two sessions dedicated to career reorientation.

Fedris evaluations⁵²⁶ confirm the **success of the program**, with more than 1,400 beneficiaries between 2019 and 2022. A study conducted on a sample of 223 participants⁵²⁷ showed the following results:

- **Clinical remission:** in more than 75% of cases, the diagnosis of burnout was no longer applicable following completion of the support pathway, with an overall improvement in symptoms;
- **Job retention:** 90% of workers remained with the same employer, 70% of whom stayed in the same job;
- **Workplace adjustments:** 30% benefited from adjustments initiated by the employer (working hours, mobility, etc.), while 45% negotiated their own adjustments directly (reduced working hours, redefinition of duties, etc.);
- **Workplace relationships:** nearly 75% reported an improvement in their interpersonal relationships with colleagues.

Although the overall cost of the pilot project was not specified, it was completely free of charge for participants. Fedris fully funded the support pathway (consultations, sessions, meetings) as well as the workers' travel expenses.

Given the positive feedback from this pilot project, Fedris decided to **launch a broader secondary prevention program for burnout in 2024**⁵²⁸, now covering all sectors. The program is open to all workers experiencing burnout at an early stage following exposure to a work-related psychosocial risk, both in the private sector and in provincial and local administrations.

Access to the program has also changed: workers must now initiate the request themselves, subject to prior approval of their attending physician, occupational physician, or CPAP. This free program, fully funded by Fedris, begins with a screening phase and continues with a structured support pathway (lasting **up to two years**).

Regarding the connection with the workplace, the Fedris coordinator, with the worker's consent, oversees communication between the company, the occupational physician, and the CPAP. This coordination aims to streamline the exchange of information essential to the continuity of the support pathway.

4. Funding for training programs to reduce the psychosocial workload of older workers

For many years, Belgium operated a "**Professional Experience Fund**"⁵²⁹ (*Fonds de l'expérience professionnelle*) aimed at improving the working conditions of **workers aged 45 and over**, with a specific focus on preventing arduous working conditions and early exit from the labor market.

⁵²⁶ Available at the bottom of this webpage: [Fedris. Projet pilote burn-out \(de 2019 à 2024\).](#)

⁵²⁷ [Fedris. Projet pilote Burn-out. Synthèse des résultats. 2023.](#)

⁵²⁸ [Fedris. Burn-out. Que comprend le programme de prévention ?](#)

⁵²⁹ [SPF Emploi, Travail et Concertation sociale. Le Fonds de l'expérience professionnelle. Brochure destinée aux entreprises. 2011.](#)

Created in 2001⁵³⁰ and funded through public resources (in 2012, approximately EUR 2.5 million was allocated to 189 projects⁵³¹), it has been under regional responsibility⁵³² since 2015. At present, however, this Fund appears to remain in operation only in the Walloon Region⁵³³, where it is managed by Forem (the region's public service for employment and vocational training).

In **Wallonia**⁵³⁴, the fund is open to private-sector companies, with grants capped at EUR 30,000 per project per year. It is possible to fund several types of measures for workers aged 45 and over, including, for example:

- Purchasing equipment to reduce the physical demands of their work;
- Providing training programs enabling them to acquire new skills to perform a new role, use new, more ergonomic machinery, improve working postures, or reduce their psychosocial workload.



In **Denmark**, funding for businesses and/or public sector organizations has been provided by the Danish Working Environment Authority (**Arbejdstilsynet**) and the Danish Agency for Labor Market and Recruitment (*Styrelsen for Arbejdsmarked og Rekruttering*, **STAR**).

Although these funding schemes are not specifically aimed at PSRs, they help organizations **improve working conditions and the working environment**, often including initiatives related to mental health and well-being at work, particularly to address the “**psychosocial working environment**,” as required by recent Danish regulatory developments (see Chapter 3).

Depending on the available annual budget, three funding mechanisms can be mobilized:

1. A “Fund for Reducing Absenteeism in the Public Sector”⁵³⁵ (*Pulje til nedbringelse af sygefravær på offentlige arbejdspladser*) managed by the STAR agency.

It funds prevention initiatives in public administrations, institutions, and state bodies (such as the police, hospitals, daycare centers, emergency services, etc.) with high levels of **sick leave** or where work involves tasks that make the working environment particularly **demanding / stressful**.

Between 2022 and 2024, an average of DKK 30 million (approximately EUR 4 million) was allocated annually. In practice, public administrations and institutions applying for this grant must **implement an intervention model based on five key elements**⁵³⁶.

⁵³⁰ Act of 5 September 2001 aimed at improving the employment rate of workers. Initially, the Fund was called the “Fund for the Promotion of the Quality of Working Conditions” (*Fonds pour la promotion de la qualité des conditions de travail*).

⁵³¹ [SPF Emploi, Travail et Concertation sociale. Fonds de l'expérience professionnelle. Rapport d'activités. 2012.](#)

⁵³² [SPF Emploi, Travail et Concertation sociale. Régionalisation de plusieurs services du SPF Emploi à partir du 1er avril 2015. 1 April 2015.](#)

⁵³³ [SPF Emploi, Travail et Concertation sociale. Le VOW / QFT: Instrument de mesure des facultés de travail proposé par le Fonds de l'expérience professionnelle.](#)

⁵³⁴ [Forem. Fonds de l'Expérience professionnelle.](#)

⁵³⁵ [STAR. Opslag: Pulje til nedbringelse af sygefravær på offentlige arbejdspladser. 2024.](#)

⁵³⁶ As described and outlined in the “5-step model” presented in this brochure by the STAR agency: [Indsatsmodel til nedbringelse af sygefravær i den offentlige sektor. Beskrivelse af indsatsmodellen. 2022.](#)

- a) **Introduce standardized procedures for managing sickness absence**, such as:
- Clarify the responsibilities of managers and employees with regard to sick leave (including the procedure for reporting absences);
 - Establish regular contact between the employer and the employee on sick leave (for example, through scheduled conversations on the 1st, 4th, and 15th day of sick leave, known as the “1-4-15 model”);
 - Schedule “well-being meetings,” outside periods of sick leave, between the employer and the employee with recurrent sickness absence. The purpose of this discussion is, in particular, to determine whether the absences are due to issues related to working conditions and/or the working environment, which the employer can address by taking the necessary corrective measures;
 - Ensure operational continuity by preparing teams to carry out the essential tasks of absent employees.
- b) **Identify and implement targeted interventions** addressing occupational risk factors that contribute to sickness absence. This action has a twofold objective: preventing absence proactively before it occurs and tackling persistent patterns of absenteeism already affecting certain departments before they worsen.
- c) **Centralize the management of sickness absence**, for example through a working group or a dedicated team. This unit assists management in monitoring absences and implementing action plans (training, conversations and meetings, communication efforts). It engages external experts if needed (occupational psychologists, occupational therapists, physiotherapists, HR consultants, etc.);
- d) **Ensure that the internal strategy to combat absenteeism is understood and embraced by staff**, for example through a clear allocation of responsibilities throughout the organizational hierarchy. Involve employees in defining measures to combat absenteeism;
- e) **Establish systematic collection and regular monitoring of data** related to sickness absence within the organization.

2. **The Arbejdsmiljøpuljen Fund**⁵³⁷ (“Working Environment Fund”), administered by the Danish Working Environment Authority. Open to private-sector SMEs (up to 100 employees) and public sector organizations with a maximum of 50 employees, it had an annual budget of DKK 100 million (EUR 13.4 million) for the years 2021 to 2023.

The fund enabled eligible organizations to obtain grants to improve the working environment, particularly with the aim of **reducing workplace accidents** and preventing both **mental and physical “wear and tear” associated with work**.

⁵³⁷ More information on the creation and operational details of this fund is available in the introductory chapter (*Indledning*) of this report by the Danish National Research Center for the Working Environment (*Det Nationale Forskningscenter for Arbejdsmiljø – NFA*): [NFA. Arbejdsmiljøpuljen 2021-2023 – en opsamling af erfaringer. 2024.](#)

In the form of project co-financing of up to 80% of eligible costs (capped at DKK 500,000, approximately EUR 67,000⁵³⁸), the grants covered:

- **Consultancy services on the working environment** and occupational medicine (provided by consulting firms accredited by the Danish Working Environment Authority);
- Employee health promotion activities **in the form of workplace physical exercise** to prevent physical wear and tear;
- **The rental and testing of technical aids, tools, and machinery** at work, designed to improve workplace ergonomics and chemical safety and reduce the risk of accidents (in practice, this allowed organizations to test the selected tool or machine in the workplace and assess its suitability and compatibility with staff, before committing to purchasing it).

A 2024 report⁵³⁹ provides **a positive evaluation of the program**. Numerous **consultations on the assessment, management, and improvement of the psychosocial working environment** were funded, and some beneficiaries confirmed the crucial role this support played in enabling the implementation of effective measures to promote well-being at work. Indeed, some companies and organizations stated that, without access to this fund, they would have encountered difficulties in carrying out these actions.

3. In 2024, **a similar fund**⁵⁴⁰ with a budget of DKK 216 million (approximately EUR 30 million) was established for a three-year period (or approximately EUR 10 million per year).

Managed by the Danish Working Environment Authority, the **PARK Fund** (*Pulje til arbejdsmiljøindsats i regioner og kommuner* – “Fund for Working Environment Initiatives in Regions and Municipalities”) targets exclusively the local public sector. It can fund seven categories of initiatives aimed at improving and strengthening:

1. The integration of new graduates and new hires;
2. The retention of older workers in the labor market;
3. The psychosocial working environment for executives and managers;
4. Efforts to reduce sickness absence at work;
5. The development of attractive career pathways with prospects for professional advancement, strengthening employee engagement in activities and tasks involving direct contact with users;
6. Work organization and flexibility;
7. The prevention of work-related physical and mental wear and tear, as well as workplace accidents.

Some of the selected projects are already available online⁵⁴¹.



⁵³⁸ [Joblife. Arbejdsmiljøpuljen – få 80% tilskud til din arbejdsmiljøindsats.](#)

⁵³⁹ [NFA. Arbejdsmiljøpuljen 2021-2023 – en opsamling af erfaringer. 2024.](#)

⁵⁴⁰ [Arbejdstilsynet. Pulje til arbejdsmiljøindsats i regioner og kommuner \(PARK\).](#)

⁵⁴¹ [Arbejdstilsynet. Projekter der har fået bevilling fra pulje til kommuner og regioner.](#)

In **South Korea**, KOSHA and the Ministry of Employment and Labor have been jointly funding “**occupational psychological trauma centers**”⁵⁴² since 2018 (as of 2024, there were 23 such centers operating across the country⁵⁴³).

These centers provide support and offer **free psychological counseling**⁵⁴⁴ **to workers who have experienced work-related psychological trauma**, particularly following a serious workplace accident, the suicide of a colleague, workplace psychological or sexual harassment, sexual violence or assault at work, or verbal or physical abuse by clients or other third parties.

Staffed with qualified professionals in psychology and mental health, these centers offer psychological education, assessments and counseling services, and post-traumatic follow-up care. Psychological counselors may also be dispatched to workplaces where incidents or accidents have occurred to deliver **group training** on trauma and stabilize the psychological state of all employees.

When a worker seeks assistance, they undergo a psychological assessment and then receive a number of psychological consultations based on the level of risk and, where necessary, long-term follow-up care.

A dedicated telephone hotline allows both employers and employees to contact these centers directly. In 2020, 1,932 people (from 232 workplaces) received support; between 2022 and 2024, approximately 17,000 counseling sessions were delivered, with a notable increase each year⁵⁴⁵.

At the same time, **an extensive system of incentives (both financial and non-financial)** has been implemented by a network of institutional stakeholders, including ministries (Employment, Equality, Justice, Culture, Sports, etc.), national bodies and other organizations (customs, banks, etc.). This scheme encourages companies to improve the working environment, with a primary focus on **promoting work-life balance**.

An initial scheme, targeting exclusively SMEs and running from 2019 to 2023, was led by the Ministry of Employment and Labor under the title “Companies Excelling in Workplace Innovation.” Its primary objective was to improve management culture and work-life balance through a framework of **10 actions organized around three pillars**⁵⁴⁶:

1. **Changing working practices regarding long working hours:** encouraging employees to leave work on time, reducing overtime, avoiding contacting employees outside of working hours, and more generally promoting disconnection from work, etc.
2. **Changing the way work is done:** holding only essential meetings to avoid overloading employees’ schedules, sharing meeting schedules and agendas with employees in advance to allow them to plan accordingly, providing clear and precise work instructions, introducing and encouraging flexible work arrangements, etc.

⁵⁴² [International Social Security Association. Korea Occupational Safety and Health Agency. Republic of Korea. Occupational trauma centres.](#)

⁵⁴³ [Kim, C.S., et al. “Trauma counseling centers for psychological support to manage trauma from workplace injuries in Korea: a narrative review”. *Ewha Medical Journal*. Vol. 48\(1\):e12. January 2025.](#)

⁵⁴⁴ More information about these centers is available on a dedicated page on the KOSHA website: [KOSHA. 근로자건강센터\[분소\] · 직업트라우마센터 운영.](#)

⁵⁴⁵ [« Corée : Une hausse record des consultations pour traumatisme lié au harcèlement au travail ». *Ouest France*. 5 August 2025.](#)

⁵⁴⁶ [Ministry of Employment and Labor \(MOEL\) - Work & Life Balance. 근무혁신 10대 제안.](#)

3. **Changing the company culture:** adopting a “healthy company dinner culture”⁵⁴⁷ by organizing only strictly necessary company dinners and informing employees of them in advance, encouraging employees to make full use of their annual leave, encouraging managers to make positive changes in terms of working hours, working methods, and workplace culture, etc.

Overhauled in 2024 under the name “**Companies Excelling in Work-Life Balance**,” the scheme has been **expanded** and is now **open to all companies**, regardless of their size. In its current form, it brings together a wide range of ministries and national stakeholders authorized to award various prizes, grants, incentives, and exemptions.

To obtain the status of “company excelling in work-life balance,” applicants must submit an application to their regional labor office. Selection is based on evidence of tangible commitment, demonstrated through the implementation of various solutions and measures inspired by the aforementioned 10-point framework (improving company culture, reducing overtime, fostering a healthy working environment).

If a company meets the required criteria, it can **access a range of incentives** provided by various ministries, public authorities, and national organizations. Twenty-eight support programs and incentives are available⁵⁴⁸, including:

- A suspension of regular labor inspections for a period of 3 to 5 years (Ministry of Employment and Labor);
- A reduction of up to 0.5% in the interest rate applicable to new loans granted by Shinhan Bank;
- A suspension of customs inspections for SMEs whose imports amounted to less than USD 100 million (approximately EUR 85.7 million) during the previous year (Korean Customs Service);
- Preferential treatment (for SMEs) in accessing the national “Employee Vacation Support Program,” administered by the Ministry of Culture, Sports, and Tourism⁵⁴⁹.

In addition to these benefits, the company also receives promotional support and **official recognition** on the website dedicated to the national campaign promoting a better work-life balance (see above under “National Campaigns, Initiatives, and Networks”). The website features the **list of selected companies**⁵⁵⁰ by year, as well as detailed descriptions of the measures they have implemented to promote work-life balance.

⁵⁴⁷ In South Korea, the phenomenon of *Hoesik* refers to company dinners and social gatherings (often limited to a single work team or department), which are frequently held after working hours and often arranged spontaneously on the same day, with the aim of fostering team cohesion. In theory, these dinners are not mandatory; however, not taking part is often frowned upon by managers, supervisors, and/or colleagues, which leads employees to attend them under pressure and out of fear of repercussions at work. These dinners and gatherings may involve excessive drinking, which can lead to inappropriate behavior among colleagues, or even situations of sexual or psychological harassment. More information on *Hoesik*: [Yoon, Min-sik. “‘Hoesik’ can help blow off steam, or spark unfortunate events”. *The Korea Herald*. 30 June 2022.](#) More recently, in 2025, a Seoul court recognized the death of a worker who had attended company dinners on three consecutive evenings as a work-related death. He was found dead in a parking lot, and the autopsy revealed high blood alcohol levels. More information: [Choi, Jeong-yoon. “Court rules death after hoesik work-related injury”. *The Korea Herald*. 21 September 2025.](#)

⁵⁴⁸ [Ministry of Employment and Labor \(MOEL\) - Work & Life Balance. 선정 혜택.](#)

⁵⁴⁹ This is a national Korean program active since 2018, inspired by the French “vacation voucher” (*chèques-vacances*) model. The aim of the Korean initiative is to encourage employees to take time off (through a financial contribution from the government and employers covering part of vacation-related expenses) and to promote domestic tourism. To access this scheme (in South Korea, it is available only to SMEs and is administered by the Ministry of Culture, Sports and Tourism), interested companies must apply via the initiative’s official website ([Korea Tourism Organization. 근로자 휴가지원 사업.](#))

⁵⁵⁰ [Ministry of Employment and Labor \(MOEL\) - Work & Life Balance. 일·생활 균형 우수기업이란?.](#)



Finally, **financial assistance** for the prevention of PSRs or the promotion of mental health at work may be provided at local and subnational levels, for example by regional authorities or federated states.

This is the case in the **Autonomous Community of Aragon**, in **Spain**, which launched a **funding program**⁵⁵¹ in 2021 to support the prevention of psychosocial risks at work, backed by a budget of EUR 100,000.

Funding could be requested by Aragonese companies, nonprofit organizations, and universities to carry out four types of projects (with each type eligible for up to EUR 25,000):

- **Conducting a study on psychosocial risk factors** affecting workers in the construction sector in the Autonomous Community of Aragon. The analysis had to incorporate the impact of technological transition and the COVID-19 pandemic, include field research involving at least 10 companies of varying sizes, and result in the **development of a psychosocial intervention guide**;
- **Implementing interventions and measures** to improve working conditions and promote workers' health (particularly mental health) in the following sectors: large-scale retail and supermarkets; small-scale retail; health and social care; travel agencies;
- **Establishing and developing multidisciplinary networks** (particularly applied research networks, bringing together research groups, social partners, and companies) to foster a lasting culture of PSR prevention. These networks were specifically intended to raise awareness among workers across various sectors about PSRs and strengthen their culture of prevention by providing them with effective tools for managing PSR factors;
- **Developing a program for the prevention of violence and harassment at work** (specifically a campaign, a training program, a guide with practical recommendations, and a risk assessment tool), aimed at workers and employers in the Autonomous Community of Aragon.



In **Australia** as well, financial support for the prevention of PSRs has been provided at the initiative of **certain states**, particularly following the new legal obligations regarding PSRs introduced at the federal and state levels (see Chapter 3).

For example, the **Government of Western Australia** established the **Mentally Healthy Workplaces Grant Program 2021–2025**⁵⁵², which was open to local businesses, organizations, and associations (including nonprofits) to fund projects aimed at:

- Preventing mental injury and mental health conditions at work by effectively managing PSR factors and associated risks;
- Promoting positive practices at work that support mental health and well-being.

⁵⁵¹ [“EXTRACTO de la ORDEN EPE/738/2021, de 18 de junio, por la que se aprueba la convocatoria para el año 2021 para la concesión de subvenciones destinadas a la financiación de actuaciones para la promoción de la prevención de riesgos laborales frente a los riesgos psicosociales en el trabajo”. Boletín Oficial de Aragón. n.º 137, pp. 30833-30837. 29 June 2021.](#)

⁵⁵² [Government of Western Australia. Mentally Healthy Workplaces Grant Program.](#)

Details of this grant program were set out in a dedicated guide⁵⁵³, which also described the expected outcomes for businesses and associations, including:

- “Reduced rates of bullying, harassment, occupational stress, and psychological injury;
- Understanding and control for workplace stressors or risk factors that are known to lead to psychological ill health;
- Reduced workplace stigma and discrimination relating to mental health issues.”

Funding of up to AUD 175,000 (approximately EUR 97,000) per project was available each year and could be renewed subject to certain conditions: the second year was contingent upon an evaluation after the first six months, while extension to the third and fourth years was contingent upon an 18-month review.

In the [state of Victoria](#), a program by WorkSafe Victoria (the OSH regulator) called **WorkWell Mental Health Industry Trials**⁵⁵⁴ provides funding for pilot projects (“Industrial Trials”) to be carried out in workplaces through partnerships (consortia).

These projects must drive practical sector-specific solutions targeting work systems, psychosocial risks, and organizational culture to ensure psychologically healthy work environments.

Funding is allocated to **multi-stakeholder consortia** comprising the project lead, experts, an external evaluation partner, as well as industry or sector bodies, and union representatives. The consortium may consist of various entities (companies, universities, associations, etc.) and must focus on one of the **five priority sectors**: construction, education, health and social services, manufacturing, or public administration and safety. Funding can reach AUD 1.76 million (approximately EUR 970,000) over three years. No specific co-funding is required; the final amount granted is determined at WorkSafe Victoria's discretion following assessment of the proposed budget.

The program requires a **trial phase** within companies and organizations (“trial workplaces”) in the targeted sectors (which partner with the consortium) to test the psychosocial strategies and tools developed through the project. Throughout the trials, the active involvement of the entire workplace ecosystem (including employers, managers, and workers) is required.

This program succeeds the [WorkWell Mental Health Improvement Fund](#) (2017–2023), which had previously funded consortia tasked with developing workplace mental health initiatives in thirteen targeted sectors, albeit on a smaller scale. The 2025 version is distinguished by its increased ambition: it targets larger-scale projects capable of generating solutions that can be replicated at the sectoral level, with the aim of transforming and sustainably improving the psychosocial work environment.

From 2017 to 2023, more than AUD 20 million⁵⁵⁵ (approximately EUR 12 million) was allocated to this program, funding **25 projects involving a total of 15,000 workplaces**. Details of each project are available online⁵⁵⁶. Both the 2017–2023 fund and the new 2025 fund are part of WorkSafe

⁵⁵³ [Government of Western Australia. Department of Mines, Industry Regulation and Safety. *Guidelines - Mentally Healthy Workplaces Grant Program*.](#)

⁵⁵⁴ [WorkSafe Victoria. *WorkWell Mental Health Industry Trials. Grant Guidelines. 2025*.](#)

⁵⁵⁵ [WorkSafe Victoria. *Workplaces benefit by boosting mental health*. 2 March 2022.](#)

[WorkSafe Victoria. *Emerging Outcomes Report. Prepared for WorkWell*. September 2021.](#)

⁵⁵⁶ [WorkSafe Victoria. *WorkWell Mental Health Improvement Fund*.](#)

Victoria's major strategic prevention program, called WorkWell⁵⁵⁷, aimed at improving work environments across the state of Victoria from a psychosocial risk perspective.

Finally, in [New South Wales](#), the “**Psychological Health and Safety Strategy 2024–2026**”⁵⁵⁸ by SafeWork NSW (the state's OSH regulator) sets out an ambitious roadmap. Among its objectives, it plans, by 2026, to increase inspections (+25% per year in inspections focused on PSRs and compliance with new legal obligations in this area) as well as to **deploy specific resources to help SMEs** ensure a psychosocially healthy and safe work environment.

In the wake of this, the New South Wales Government established an **AUD 5.6 million fund**⁵⁵⁹ (approximately EUR 3.1 million) over two years to support workplace mental health programs for SMEs.

Designed to help these organizations manage psychosocial risks and protect employees' mental health, these programs are developed and delivered by two organizations: Transitioning Well (an occupational psychology consultancy) and Black Dog Institute (an independent, nonprofit mental health research institute).

⁵⁵⁷ [WorkSafe Victoria. WorkWell.](#)

⁵⁵⁸ [SafeWork NSW. Psychological Health and Safety Strategy 2024–2026.](#)

⁵⁵⁹ [NSW Government. New strategy to address psychological risks in the workplace with \\$5.6m in business assistance. 22 May 2024.](#)

Conclusion

This report has sought to provide an overview of the issue of **the prevention of psychosocial risks (PSRs) at work at the national, European, and international levels.**

PSRs refer to risks to workers' mental and physical health arising from **exposure to specific risk factors** encountered at work or as a result of work.

Although the ways of classifying and defining these factors may vary depending on the scientific methodology used, they generally encompass all aspects related to **working conditions** (career growth and prospects, pay, job security, etc.), the **organization and design of work** (workload, working hours, types of tasks performed, the possibility of achieving an adequate work-life balance, etc.), and **workplace relationships** with colleagues, managers, and third parties such as clients and patients (including difficult interpersonal relationships, acts of violence and harassment at work).

The boundary between mental health problems arising exclusively from the work context and those stemming from an individual's private life can sometimes be blurred. For example, **work-related and personal issues may coexist, or various aspects of a person's life may influence one another** (for instance, a tragic event in one's personal life, such as a bereavement, can affect one's mental health, which, once impaired, may in turn have repercussions on other aspects of life, including work). This was also highlighted by the European Commission in a 2017⁵⁶⁰ report, which noted that psychosocial risks, just like musculoskeletal disorders, can involve a complex interaction between work-related and personal factors.

Nevertheless, despite the many factors that may influence mental health, **the impact that work, the workplace, and workplace interactions can have on a person's mental well-being** cannot be underestimated. It is therefore the employer's responsibility to ensure, to the extent possible, that work does not cause mental health problems among workers or worsen their mental health.

Workers' health cannot be understood solely in terms of physical health (even though, historically, the first occupational safety and health laws and preventive measures in the workplace focused on reducing accidents and physical injuries at work), but must also encompass mental health. **Work must not harm either physical or mental health.**

It is precisely this recognition that has driven many OSH legislative reforms around the world in recent years, with the aim of giving greater attention to the **protection of workers' mental health.**

While employers certainly cannot be held responsible for individuals' personal problems, the fact remains that they must ensure they do not contribute to or facilitate the development of mental health issues related to the work itself.

This concept is particularly evident in the wording adopted by the Belgian legislature. In 2014, it **defined PSRs** as "the probability that one or more workers will experience **psychological harm**, which may be accompanied by physical harm, **as a result of exposure to elements** of the work organization, work content, working conditions, living conditions at work, and interpersonal relationships at work, **on which the employer has an impact** and which objectively pose a danger."

⁵⁶⁰ [European Commission. Commission Staff Working Document - Ex-post evaluation of the European Union occupational safety and health Directives \(REFIT evaluation\). SWD\(2017\) 10 final. 10 January 2017.](#)

Employers play a role in determining or approving elements such as working hours or workload, as well as in managing and addressing cases of workplace bullying or conflicts. Regarding these factors and situations, they must take both preventive and corrective measures to ensure that the health of the worker concerned is not harmed.

Understanding the employer's responsibilities regarding psychosocial risks first requires an understanding of the applicable legal framework. That is why an **overview of the main national legal provisions on this subject has been presented**, focusing on three key themes: the assessment and prevention of psychosocial risks, the right to disconnect, and the specific prevention of violence and harassment at work.

Considerable differences exist from one country to another in both the level of detail and the scope of these measures and obligations, **including within Europe, in the absence of a clear European legislative framework on psychosocial risks.**

As regards softer, non-binding instruments designed to help companies prevent and manage psychosocial risks, **a wide range of resources is available.** These include PSR assessment tools, practical guidelines and reference materials, awareness campaigns, national networks promoting the exchange of information and recommendations on the subject, examples of good practices highlighted at the national level, as well as financial support and other incentives to encourage and prompt companies to take action.

The large number of legislative measures and the proliferation of initiatives, campaigns, actions, and prevention support tools across different countries demonstrate the **significant attention devoted to this subject.** Nevertheless, PSR prevention may still be less developed and less firmly embedded in workplaces and society than the more "traditional" and long-established prevention of physical injuries, workplace accidents, and occupational diseases resulting, for example, from exposure to toxic or carcinogenic materials or substances at work.

These recent developments ultimately reflect **a growing awareness** of the importance of this topic, which has become even more pronounced following the onset of the COVID-19 pandemic and the psychosocial challenges it has brought to people's personal and professional lives.

Executive Summary

Psychosocial Risks: Definitions and Consequences

Mental health, as defined by the **World Health Organization (WHO)**, is the result of a complex interaction of individual, biological, social, economic, and structural determinants and vulnerabilities. While certain risk factors that can harm mental health may be entirely unrelated to the world of work, others are directly linked to it.

Work plays a significant role in everyone's life and can have either a positive influence on mental well-being (providing a sense of contributing to society, economic stability, personal and professional fulfillment, etc.) or a negative one. Poor working conditions, excessive workloads, a lack of work-life balance, or difficult relationships with supervisors or colleagues are just a few examples of factors that can undermine a worker's mental health.

In **the field of occupational safety and health (OSH)**, the term **“work-related psychosocial risks” (PSRs)** is used more specifically. There is no single definition of the concept, particularly from a legal standpoint, as evidenced by the different national legislative frameworks.

The International Labour Organization (ILO) has defined PSRs as the interactions between and among work environment, job content, organizational conditions and workers' capacities, needs, culture, personal extra-job considerations that may, through perceptions and experience, influence health, work performance and job satisfaction.

The European Agency for Safety and Health at Work (EU-OSHA) describes them as risks arising from poor work design, organization and management, as well as from poor social context of work, which may result in negative psychological, physical, and social outcomes.

In France, a 2011 report titled “Measuring Psychosocial Risk Factors at Work to Manage Them” (also known as the Gollac report and produced by an Expert Panel established at the request of the Minister of Labor, Employment, and Health) serves as the primary scientific reference for the analysis, assessment, and prevention of PSRs. It defines them as risks to mental, physical, and social health arising from employment conditions and organizational and relational factors that may interact with mental functioning.

Despite the nuances in meaning that may exist, the concept of PSRs encompasses risks to workers' mental and physical health arising from a range of work-related situations and conditions, referred to as **“psychosocial risk factors.”**

Just as with PSRs, there is no single way of classifying and categorizing them. Several theories and methodologies exist in the scientific literature, although there is broad consensus regarding their general nature, typically related to work organization and design, job autonomy, interpersonal relationships at work, and other aspects of the work environment.

For example, EU-OSHA identifies **ten main categories of PSR factors**:

1. **Job content**: lack of variety or short work cycles, fragmented or meaningless work, underuse of skills, etc.;
2. **Workload and work pace**: work overload or too little work, machine pacing, high levels of time pressure, etc.;
3. **Working time**: shift work, night shifts, inflexible work schedules, long or unsociable hours, etc.;
4. **Control**: low participation in decision-making, lack of control over workload, etc.;
5. **Work environment and equipment**: inadequate equipment availability, suitability, or maintenance; poor environmental conditions, such as lack of space, poor lighting, and excessive noise, etc.;
6. **Organizational culture and function**: poor communication, low levels of support for problem solving and personal development, poor managerial support, etc.;
7. **Interpersonal relationships at work**: social or physical exclusion or isolation, poor relationships with superiors, interpersonal conflict, harassment, bullying, violence, etc.;
8. **Role in organization**: role ambiguity, role conflict, etc.;
9. **Career development**: career stagnation and uncertainty, poor pay, job insecurity, etc.;
10. **Home-work interface**: conflicting demands between work and personal life, etc.

In the various classifications of PSR factors, situations involving **harassment** (psychological or sexual) and **violence** at work (physical, sexual, psychological, or verbal, perpetrated by colleagues, managers, or third parties) **fall under the category of “interpersonal relationships at work.”** Therefore, in general, violence and harassment at work represent a specific form of psychosocial risk.

In practice, several PSR factors may combine with one another. For example, an excessive workload resulting in excessively long working hours may create an imbalance between work and personal life, which may also be accompanied by a perceived lack of recognition or support from supervisors, etc.

Prolonged (or unmanaged) exposure to psychosocial risk factors thus generates **risks to mental and/or physical health**, which can have significant consequences both for individuals and companies, and even for society at large.

At the individual level, PSRs can cause “**psychosocial disorders**,” encompassing a range of **primarily psychological conditions** (repeated or chronic stress, varying degrees of psychological distress, depression, anxiety, burnout syndrome, nervousness, sleep disorders such as insomnia, suicidal thoughts, etc.) **but also physical conditions**, as the two spheres are closely linked (headaches, weight loss, chronic fatigue, the onset of cardiovascular diseases, a weakened immune system, endocrine and/or musculoskeletal disorders such as muscle pain or tension, etc.).

At the company level and within society at large, PSRs can lead to higher absenteeism rates, prolonged sick leave, increased demand for early retirement, increased resignation rates, staff turnover and frequent team changes, as well as workplace conflicts leading to tensions among colleagues, loss of motivation and/or concentration at work, and even an increase in workplace accidents, among other consequences. All of these factors can **affect the company's performance and productivity**, as well as society at the macroeconomic level.

Regulation of Psychosocial Risks at the EU level

At the European level, there are numerous provisions concerning OSH, but **no EU legislative act** specifically addresses the prevention and management of PSRs at work.

The [1989 European Framework Directive on OSH](#) (Directive 89/391/EEC) makes **employers responsible for the OSH of their workers**, requiring them to conduct a comprehensive assessment of all occupational risks to which workers are exposed and to take all necessary measures to protect them.

While the terms *psychosocial risks*, *stress*, or *mental health* do not appear explicitly in the directive, the [European Commission](#) has repeatedly emphasized that the prevention principles and obligations contained in the Framework Directive also apply to the prevention of mental health risks in the workplace. It has therefore clarified that **employers are also required to conduct risk assessments in relation to workers' mental health**. That said, the Framework Directive contains neither detailed guidance on how to assess PSRs in practice nor more specific obligations regarding their management.

Despite recent calls from the [European Parliament](#) (through numerous resolutions) and the [European Economic and Social Committee](#) (notably in its opinions) urging the Commission to develop a legislative proposal on the topic, it appears that **no European directive on psychosocial risks is currently on the agenda**.



Regarding the right to disconnect and the establishment of fair telework in the EU, progress is being made. In 2025, the European Commission launched a second-phase consultation with the European social partners, and legislative action could follow in the coming years, in response to the call made by the European Parliament in a 2021 resolution.

Indeed, the **right to disconnect** is closely linked to PSRs. It refers to the right of workers not to respond to work-related calls or other communications outside of working hours, in order to safeguard their right to free time and to a healthy work-life balance. The inability to disconnect affects and influences psychosocial risk factors (workload, work pace, working hours, etc.), exposure to which poses genuine risks to workers' health.

On issues related to PSRs, it is worth noting the existence of two **European Framework Agreements** concluded by the European cross-industry social partners: one on **work-related stress** (2004), and the other on **harassment** and **violence** at work (2007). A third framework agreement, concluded in 2020 and concerning digitalization, indirectly addressed the issue of mental health, highlighting the need to develop a human-centered approach to the integration of digital technologies into the workplace, as well as the need to ensure disconnection from work and promote a work culture that fosters a healthy work-life balance.

Although rich in guidance and information on possible preventive measures to reduce workers' exposure to certain psychosocial risk factors, **these framework agreements are not legally binding**, unlike EU legislative acts such as directives or regulations. They commit the affiliated national organizations to implementing them in accordance with the procedures and practices specific to each Member State.

Some countries may choose to implement them through legislation, while others may opt for collective agreements or voluntary measures, such as guidelines or codes of good practice. **Consequently, the outcome and effectiveness of their implementation vary significantly across Member States.**

Report Content

Following an introduction on psychosocial risks, the report discusses **developments at the international level**: strategies, reports, ISO standards, and instruments such as ILO Convention No. 190 of 2019, the first international treaty to specifically address the prevention of violence and harassment in the world of work.

It then provides an overview of **the regulatory framework and prevention instruments** at the EU level, followed by a national-level analysis of seven European countries (**Belgium, Denmark, France, Germany, Italy, Spain, and Sweden**) and five non-European countries (**Australia, Canada, Japan, South Korea, and the United States**).

For each country, the report presents legislative developments and key prevention instruments, including tools for assessing PSRs in the workplace, guides and informational resources, national campaigns, initiatives and networks, good practices, calls for proposals, incentives, and financial support.



With regard to softer, non-binding instruments, such as awareness campaigns aimed at the general public, the emphasis is usually placed on **promoting “mental health at work” rather than focusing on psychosocial risks *stricto sensu***. This approach encompasses not only compliance with legal obligations relating to PSRs but also, more broadly, the promotion of workers' overall well-being.

Campaigns or tools following this approach may therefore include initiatives or recommendations aimed, for example, at supporting and facilitating the (re)integration into the workforce of people suffering from mental health conditions (whether or not caused by PSRs), or at addressing certain health determinants (promoting healthy nutrition, regular sleep, physical activity, meditation, etc.). Collectively, these measures reflect a proactive effort to create a working environment that fosters open communication, support, and assistance for employees, **often through actions that go beyond the minimum legal requirements**.

Indeed, it is sometimes difficult to draw a clear line between mental health problems arising exclusively from the work context and those stemming from personal life. **Work-related and personal issues may coexist and influence one another**. For example, a distressing event in one's personal life, such as a bereavement, can affect one's mental health, which, once impaired, may in turn have repercussions on other aspects of life, including work.

This is why some companies may implement **broader policies to support the well-being of employees**, often viewing physical and mental health as a *continuum*. These may include various forms of assistance and support, listening services, workplace adjustments during difficult life events (such as the death or illness of a loved one), coaching sessions, personal development programs, sports activities, etc.

Despite the clear value of such initiatives to promote mental health and/or well-being at work, **this report focuses primarily on the professional dimension**, its psychosocial risk factors (workload, working hours, inability to disconnect, violence, etc.), and the instruments available to prevent PSRs.

National Legislation and the Inclusion of PSRs in Risk Assessments

A significant number of legislative and regulatory developments have been observed, especially over the past fifteen years, including following the onset of the COVID-19 pandemic, which has highlighted the importance of mental health in all aspects of life, particularly in the workplace.

This trend reflects the legislators' intent to foster greater awareness of and attention to mental health in the workplace among all stakeholders involved in prevention, starting with employers.

These national developments vary significantly from one country to another in terms of scope, stakeholders involved, and level of detail: ranging from a simple reference to the prevention or protection of “mental health” at work to highly detailed regulations setting out specific procedures and measures for assessing, preventing, and managing PSRs.

They introduce a range of elements (sometimes in combination), such as:

- **The explicit mention of the employer's responsibility to protect** not only workers' physical health but also their mental health (**Canada, France, Germany**);
- **The explicit obligation to include PSRs** (or their equivalents, depending on national terminology) **in the risk assessment** (**Australia, Belgium, Denmark, Germany, Italy, Sweden**). It should be noted that **Australia, Belgium, Denmark**, and **Sweden** have introduced a detailed legal definition of “psychosocial risks” (and/or equivalent terms used);
- **The specific obligation to assess PSRs in certain “high-stress” occupations** (**South Korea**) **or in remote work** settings (**Spain**);
- **Provisions on how this PSR assessment must be carried out (Italy) or a detailed list of PSR factors to be analyzed** (**Australia, Belgium, Denmark, Sweden**);
- **Specific preventive measures** to be implemented (**Belgium, Denmark, Italy, Japan, South Korea, Sweden**). These generally include organizational, technical, communication, or training interventions. In most cases, they are not prescribed in detail but presented as “possible measures” to be selected according to the results of the risk assessment.

Sometimes, to determine the appropriate measures, **a list of matters to consider** is specified in the law, as in **Australia** (duration, frequency, and severity of exposure; interaction and combination of various PSR factors; workplace design, layout, and environmental conditions; interpersonal relationships at work, etc.).

The order of preventive measures may also be specified, as in the **Australian state of Victoria**, where training and information initiatives cannot constitute the predominant form of PSR control measures.

In other cases, the measures described are **differentiated by psychosocial risk factor** (this is particularly the case in **Sweden** and, to a lesser extent, in **Denmark**);

- **The explicit obligation for employers to train management** on PSRs (**Sweden**), highlighting the importance of the role played by this category of workers in ensuring a healthy psychosocial work environment;

- **A specific approach to assessing “psychological burden” at work**, as is the case in **Japan**, which requires companies to have this assessment conducted not directly by the employer, but by a healthcare professional (such as an occupational physician). The assessment must be carried out individually for **each employee**. The physician in question will assist the employer in implementing workplace adjustments if high levels of stress are detected. However, each employee has the right to refuse this periodic assessment;
- **Procedures for intervention and support within the company to be followed in the event of a psychosocial issue affecting a worker**, as is the case in **Belgium** (“formal or informal request for psychosocial intervention”). **Mandatory actors in PSR prevention** in the workplace (including the “confidential counsellor” and the “prevention advisor for psychosocial aspects”) play a central role in addressing and resolving requests for psychosocial intervention submitted by employees.



Spain and the **United States** do not officially include references to psychosocial risks (particularly in the risk assessment phase) in their core OSH legislation.

Regarding **Spain**, a 2021 law on remote work requires the assessment of PSR factors for this category of workers. For other forms of work, this assessment is implicitly included in the general obligation to prevent *all* risks (note that consultations are underway to amend the legislation to better address the prevention of emerging risks, including PSRs).

Finally, very often, in the field of prevention, **legislative texts are supplemented by prevention measures detailed in various instruments such as codes of practice**. Although these are not binding, following them ensures compliance with employers' legal obligations. If the employer chooses to implement alternative measures, these must provide an equivalent level of protection; otherwise, the employer may be held liable in the event of a breach, negligence, or accident.

With regard to PSRs, this approach is particularly evident in **Australia** and **Denmark**, where their codes of practice (developed respectively by Safe Work Australia and the Danish Working Environment Authority) provide numerous concrete examples of preventive measures and practical guidelines for workplaces, categorized by psychosocial risk factor (workload, working hours, high emotional demands, etc.).

Terminology Used in Legislation

It should be noted that the terminology used in national OSH legislation varies significantly from one country to another. This is also the case among EU countries, given the absence of a common legal definition of “psychosocial risks”:



“**Mental health**” appears in the **French Labor Code**, in the context of the employer’s obligation to protect workers’ physical and mental health.



The Canada Labor Code (applicable to federally regulated workplaces) refers to the concept of worker well-being, encompassing both physical and psychosocial aspects. The employer must “prevent accidents, occurrences of harassment and violence and physical or **psychological injuries and illnesses** arising out of, linked with or occurring in the course of employment.” The addition of the terms “harassment,” “violence,” and “physical or psychological” dates back to 2018. At the **provincial level in Canada**, other terms may be used, such as in Manitoba’s Workplace Safety and Health Act, which defines the “**psychologically safe workplace**” that must be guaranteed to employees.



The use of the terms “psychosocial risks” and/or “psychosocial hazards” appears systematically in **Australian** and **Belgian** legislation, accompanied by specific legal definitions. The Spanish law on remote work mentions “psychosocial factors.”



The term “stress” is sometimes used, as in **Italy**, where the key OSH law lists the risk “linked to work-related stress” among the risks that employers must identify and assess, explicitly citing the European Framework Agreement on Work-related Stress. **South Korea** and **Japan** also refer to “stress” or “mental stress” related to work.



“**Psychological demands at work**” appears in **German** legislation on occupational safety and health.



“**Psychosocial working environment**” is the term widely used in **Denmark** in an Executive Order of the same name that imposes specific obligations on workplaces regarding PSRs.



Finally, “**organizational and social work environment**” has been the term used in **Sweden** since 2015. By deliberate choice, Sweden makes no reference to the words “psychosocial risks” in its legislation, considering this expression too individualistic. By using the adjectives “organizational” and “social,” this country aims to adopt **a more collective approach to PSRs** and emphasize that it is precisely the work organization and interpersonal relationships at work that exert a significant psychosocial influence on workers.

National Legislation on the Right to Disconnect

The “right to disconnect” encompasses two aspects: the ability to effectively exercise this right and the assurance that one will not face adverse professional consequences for doing so.

Among the countries analyzed, four European countries (**Belgium**, **France**, **Italy**, **Spain**) and two non-European countries (**Australia** and **Canada**) have seen recent legislative developments regarding the right to disconnect, particularly since France paved the way in this area in 2016.

These new legislative provisions may:

- Apply only to the private sector, or also cover the public sector (**Spain**); sometimes through separate instruments (**Belgium**, **France**);
- Generally apply to all workers, or at least to employees, except in **Italy** where this right applies only to employees working remotely;
- Leave the implementation of this right to negotiation, whether collective (**Belgium**, **France**, **Spain**) or individual (**Italy**);
- Establish this right as such for the employee (**Australia**) unless the refusal to respond to requests is considered “unreasonable” (the law specifies when and under what conditions a refusal may be considered unreasonable);
- Introduce, instead of an explicit “right to disconnect,” an obligation for the employer to develop a “disconnection policy” (**Canada**) or to “ensure the worker’s disconnection” (**Italy**);
- Establish obligations regarding the right to disconnect based on company size, notably for companies with 20 or more employees (**Belgium**), 25 or more employees (the Canadian province of **Ontario**), or 50 or more employees (**France**).

National Legislation on Violence and Harassment at Work

A separate section of the report is devoted to an analysis of legislation on violence and harassment at work.

In this area, employers' obligations and preventive measures may be included in specific legislation addressing the prevention of psychosocial risks, or they may be set out in separate legislation specifically dedicated to violence and/or harassment at work. **Without seeking to be exhaustive**, an analysis of the relevant legislation in the 12 countries examined reveals the following findings:

- **The topics covered** generally include: i) violence and threats (including physical and verbal forms of violence, for example in jobs involving contact with the public), ii) sexual violence and harassment, and iii) psychological harassment, workplace intimidation by colleagues or supervisors, “mobbing,” or “bullying”;
- **The legislative approach to prevention varies.** Some countries adopt an integrated framework in which the various forms of violence and harassment at work are grouped under a single concept (as in **Canada**). Many countries have historically separated these dimensions into distinct instruments or provisions, sometimes consolidating them at a later stage as in **Sweden** (with the reorganization of the regulations of the Swedish Work Environment Authority).
- While, historically, sexual harassment was one of the first areas where legislation began to develop, there is an increasing tendency to legislate on **psychological harassment (bullying) at work** as well. While **Sweden** was one of the pioneering countries in this regard (as early as the 1990s), **France** and **Belgium** followed suit in the early 2000s, and more recently, other countries such as **Spain** (amendment to the Criminal Code in 2010), **Australia** (definition of bullying in the workplace in 2013), **Japan** (2019), and **South Korea** (2019).

Among the 12 countries analyzed, the **United States**, **Italy**, and **Germany** are the only ones without legal definitions or specific regulations on workplace bullying (beyond harassment based on protected grounds such as religion or ethnic origin, etc.), although case law has developed in this area;

With regard to workplace bullying in **Japan** and **South Korea**, recent legislative developments have focused primarily on a specific form of bullying, namely **workplace intimidation (“power harassment”)**, particularly when a supervisor abuses their authority to subject an employee to unfavorable, degrading, or humiliating treatment. In 2019, **Japan** also strengthened measures to prevent and combat **workplace harassment related to pregnancy and maternity**, that is, any behavior, primarily by supervisors, intended to treat the women concerned unfavorably or to pressure them into leaving their jobs;

- Regarding **risk assessment**, some countries already have specific requirements concerning psychosocial risks, which include violence and harassment (**Australia**, **Belgium**). However, some have introduced measures specifically addressing the assessment of the risk of violence and harassment. In 2022, **Spain** mandated that occupational risk assessments must include an analysis of the “**risk of sexual violence**” for positions held by female workers.

Since 2020, **Canada** has required (for federally regulated workplaces) an assessment of all “risk factors, internal and external to the workplace, that contribute to harassment and violence” at work. To this end, a tailored assessment tool for employers has recently been developed by the Government of Canada;

- In terms of prevention, **informing workers** appears in virtually all relevant legislative texts. Some countries, however, have gone a step further by requiring employers to:
 - Develop and adopt **specific written policies and protocols** for the prevention of violence and/or harassment (of any type or, in some cases, solely of a sexual nature), as in certain **U.S. states** (e.g., **California**) and certain **Canadian provinces** (such as **Ontario** and **Manitoba**), in **Sweden**, in **Spain**, in **Japan**, and, since 2020, in **Canada** (for federally regulated workplaces);
 - Include provisions on the prevention and prohibition of violence and harassment in **internal work regulations** (for companies of a certain size), as is the case in **France** and, since 2019, in **South Korea**;
- Regarding **training**, while it is often presented as a highly recommended preventive measure, it **has been made mandatory** in certain countries, either for certain staff members such as managers and executives (training on the prevention of “offensive conduct” in **Sweden**), or for all employees. This has been the case in **South Korea** since 2017 (with regard to sexual harassment), in **Japan** since 2019 (with regard to all forms of harassment prohibited by law), and in **Canada** since 2020 (training on preventing all forms of violence and harassment, in federally regulated workplaces);
- Beyond the duty to investigate reports of violence or harassment, countries such as Belgium and Japan have introduced legal frameworks and specific support mechanisms for employees who are victims of such behavior.

In **Belgium**, employees may request “formal or informal psychosocial intervention,” including for incidents of violence and harassment. In **Japan**, employers are required to establish effective support systems (for example by designating a responsible person or team, or by outsourcing the service to an external organization) that allow affected workers to seek advice, safely report incidents or attempted incidents, and identify appropriate solutions

Information on the procedures to follow is generally found in companies’ internal work regulations or written policies on the prevention of violence and/or harassment that employers are required to adopt in the countries mentioned above.

- **Recent legislative developments have focused on workers in public-facing roles.** In 2020, **Denmark** introduced obligations that explicitly include the prevention and management of high emotional demands in occupations involving contact with the public.

In 2020, an **Italian** law tightened administrative and criminal penalties for those who commit physical or verbal assaults against professionals in the health and social care sectors.

In 2021, **South Korea** imposed new obligations on employers to prevent harm to employees’ health resulting from abusive language and aggressive behavior by customers in occupations involving the sale of goods or the provision of services.

In 2024, the **State of New York** introduced additional obligations for employers in the retail sector to specifically prevent workplace violence perpetrated by third parties.

Starting in 2026, in **Japan**, employers will be required to implement a range of adequate preventive and protective measures against “**customer harassment**,” namely harassment perpetrated by customers and other third parties;

- Sometimes, national regulations require employers to implement additional prevention and intervention measures in the event of incidents of **violence occurring outside working hours but related to work**, as in **Denmark**;
- An explicit reference to **domestic violence (“family violence”)**, which may also give rise to harassment and violence in the workplace, is found in recent legislation in **Canada**.

Furthermore, it should be noted that the **ILO Convention No. 190 of 2019** requires ratifying States to adopt legislation prohibiting violence and harassment in the world of work and providing for appropriate prevention and intervention measures.

To date, eight of the countries analyzed have ratified this Convention (**Australia**, **Belgium**, **Canada**, **Denmark**, **France**, **Germany**, **Italy**, **Spain**). Further developments in this area may therefore be expected in the coming years.

Tools for Screening and Assessing Psychosocial Risks

There is no single model for assessing PSRs in the workplace: several methodologies and types of data collected have been identified.

In nearly all the countries analyzed, there are **tools designed to support the assessment of PSRs** (or their equivalents, depending on the national legal framework) made available to employers by various key stakeholders involved in occupational risk prevention, such as occupational accident and disease insurers, OSH research institutes, ministries of labor, national authorities responsible for OSH, etc.

The use of these resources is not mandatory, as legislation does not usually prescribe a specific tool. However, the instruments identified in this report have been developed by these stakeholders in accordance with relevant national legislation on the matter. They therefore constitute **recognized methodological references** to assist employers in fulfilling their assessment obligations.

This is particularly true in **Belgium**, **Denmark**, and **Italy**, where legislation sets out a specific list of psychosocial risk factors to be included in the assessment. Consequently, the tools provided by the relevant institutions include questions specifically addressing these factors.

Due to differences in legislation and scientific methodologies used across countries, these tools **vary in the number and types of PSR factors they include**. However, similarities can be identified, as they generally address situations related to employment conditions, work organization, and interpersonal relationships at work.

Regarding their implementation, these tools can take the form of **group interviews** to engage with workers, or **individual questionnaires**. In the case of questionnaires, it is often recommended to complement the quantitative approach with a qualitative analysis. This involves, for example, organizing post-survey focus groups to collectively explore the results obtained from the questionnaire administered to workers.

Given the digital transformation of society, these assessment tools are increasingly **available in digital formats**, such as downloadable software or web-based platforms on which companies can create and manage an account. Particularly in the case of individual questionnaires, the software or websites can generate links to be sent to employees, inviting them to complete the questionnaire.

This format makes it easier to produce **summaries and analytical reports of the results**, including comparative analyses within the company (for example, among departments or by gender), as offered by the INSST tool in **Spain**. It may also provide companies with **an overall score** that can be compared with national or sectoral averages, where available (as in **Australia**, **Denmark**, **Italy**, and **South Korea**).

Finally, these tools are very often accompanied by explanatory documents, tutorials, guidelines, or methodological guides. In addition to facilitating their use, these resources are intended to enable employers to use the tools independently, interpret the results without necessarily relying on an external consultant, and identify appropriate preventive measures, notably through lists of examples of practical actions tailored to the assessment results.

National Campaigns, Initiatives, and Networks

In recent years, several countries have launched campaigns to raise awareness of the importance of **mental well-being at work** and the **prevention of work-related mental health disorders**.

Examples include **France** (campaigns launched by INRS, as well as initiatives carried out as part of the 2025–2026 *Grande Cause Nationale*, the Major National Cause dedicated to mental health, which includes a component on mental health at work), **Belgium** (several campaigns on PSRs since 2012), **Spain** (a campaign on the right to disconnect), **Germany**, **South Korea** (a campaign promoting work-life balance), **Japan** (several campaigns to prevent *karoshi*, or deaths from overwork), the **United States** (a campaign to prevent burnout among healthcare professionals), **Canada** and **Australia** (campaigns promoting healthy and safe workplaces), among others.

Often complementing these campaigns, **national networks** have also been established to bring together a wide range of stakeholders (including OSH research institutes, occupational accident and disease insurers, ministries, universities, trade unions, employers' organizations, etc.). Their aim is to strengthen cooperation on PSR prevention, promote mental health at work, and facilitate the sharing of recommendations, tools, and good practices in this area.

Following these campaigns and/or the creation of these national networks, **websites and online platforms specifically dedicated to mental health at work** have been developed to centralize all available information and resources on the topic. They are intended for workers, employers, and occupational safety and health professionals. For example:

- In **Germany**, the **Initiative Neue Qualität der Arbeit**, or “Initiative New Quality of Work,” is a resource platform designed to help companies create a healthy, high-quality work environment, including with regard to mental health. It is supported by a network of numerous stakeholders: the federal government, the *Länder* (federal states), and municipalities; social partners; national agencies and research institutes in the field of OSH; associations; social protection organizations; and many others.
- In **Belgium**, as part of a major federal campaign on mental well-being at work launched in 2021, a “**Federal Network for Mental Health @ Work**” has been established, bringing together all federal public institutions with responsibilities or expertise in mental health at work, the prevention of PSRs, and return to work. In addition to promoting research and the national coordination of initiatives and projects on mental health at work, this network maintains an online platform titled “**I Feel Good at Work**” (*Je me sens bien au travail*) dedicated to this topic and designed to provide workers and employers with information and prevention materials;
- In **Denmark**, a broad partnership **Sammen om Mental Sundhed**, “Together for Mental Health,” focusing on mental health at work, was established at the initiative of the Ministries of Health and the Interior, bringing together around sixty stakeholders, including public and private actors (social partners, associations, research institutes and universities, social protection organizations, etc.). The members of this partnership share, on a dedicated website, a wide range of **resources and knowledge on mental health at work** (guides, tools, checklists, training materials, articles, etc.), primarily intended for employers and workplace prevention professionals;
- In **Australia**, a specific national alliance dedicated to mental well-being at work (“**Mentally Healthy Workplace Alliance**”) was created in 2012 by the Australian government’s National Mental Health Commission. It is composed of organizations representing businesses, trade unions, mental health and occupational health experts and associations, regulators, and the government. An online platform of the same name has been launched, where the alliance shares numerous free resources, generally **categorized by industry**.

Good Practices

In addition to the initiatives mentioned above, **national networks of companies committed** to promoting mental health are also being established. Through the measures they implement, these companies go beyond their legal obligations regarding the prevention of PSRs.

These networks aim to **identify good practices** and **facilitate exchanges among companies**. One example is the “**Spanish** Network of Healthy Companies” (*Red Española de Empresas Saludables*, REES) managed by the INSST (National Institute for Safety and Health at Work), which showcases and catalogs companies with exemplary workplace health promotion practices, including in the area of mental health.

In **France**, the Alliance for Mental Health (*Alliance pour la Santé mentale*, a French nonprofit association), with government support, has recently launched and been promoting a “Charter of Commitment to Mental Health at Work” for companies. This initiative aims to encourage companies to voluntarily commit to concrete actions supporting mental health at work (particularly in terms of prevention, training, support, and awareness-raising), to document good practices, and to create a network of companies committed to this issue.

The Ministry of Labor in **South Korea** recognizes companies “that excel in work-life balance.” The annual list of selected companies, along with details of the initiatives they have implemented, is published on a dedicated ministerial website. This official recognition provides not only national visibility but also access to financial incentives and a range of other benefits.

In other countries, such as **Australia**, **Canada**, **Denmark**, and **Japan**, good practices in the field of mental health at work are compiled at the national level (on the websites of ministries or national OSH authorities, or on national *ad hoc* platforms providing information on and promoting mental health at work), without necessarily creating a specific network of “committed” or “healthy” companies. This collection of good practices is intended to **enable companies to draw inspiration from them** in their efforts to prevent PSRs or, more broadly, to promote mental health at work.

Calls for Proposals, Incentives, and Financial Support

In several countries, grants, financial incentives, and national calls for proposals on the prevention and promotion of mental health at work are offered by various actors, such as ministries, occupational accident and disease insurers, specialized national bodies, or national authorities responsible for OSH.

Some instruments and funds are specifically aimed at preventing psychosocial risks, while others support broader measures to improve the work environment, which may include actions addressing the psychosocial work environment.

Various forms of financial support exist, and multiple instruments may coexist within the same country. The categories identified below illustrate their diversity:

- Financial support and grants enabling companies and/or public sector organizations:
 - **To benefit from consultations with an expert in PSRs** or occupational mental health, in order to assist them in their prevention efforts and help them **comply with their legal obligations regarding PSRs** (Denmark, France);
 - **To improve their work environment** (including from a psychosocial perspective), enhance quality of life at work and working conditions, reduce sickness absenteeism, or prevent “mental wear and tear” at work (Belgium, Denmark, France), sometimes **even going beyond their legal obligations**;
- Funding available to sector-representative organizations or other consortia to carry out **pilot projects in companies aimed at identifying appropriate sector-specific measures** for the prevention of PSRs (Australia, Belgium);
- Systems combining **financial and non-financial incentives** (such as the suspension of labor inspections or their limitation for a certain period) to encourage companies to implement workplace mental well-being measures (South Korea, with a focus on PSRs and particularly work-life balance);
- Financial assistance covering support services or **consultations with experts or psychologists**, provided to:
 - **Workers experiencing psychological distress** related to or caused by their work: for example, following work-related psychological trauma, workplace harassment or violence (South Korea), or showing signs of work-related burnout (Belgium),
 - **Anyone**, regardless of whether their psychological difficulties are work-related (France, Italy for individuals below a certain income threshold).
- National calls for proposals to **develop awareness-raising campaigns and training programs** for companies on the prevention of PSRs (Italy);
- Funding, including **at the local or regional level**, aimed at advancing research on mental health at work or encouraging various stakeholders to develop practical tools and solutions for the prevention of PSRs in companies (Australia, Spain).

Prevention of Psychosocial Risks at Work

Overview of Legal Frameworks, Tools, and Prevention Measures in Europe and Internationally

Australia, Belgium, Canada, Denmark, France, Germany, Italy, Japan, South Korea, Spain, Sweden, United States



Report

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